

Αναισθησιολογία

Agreed Description	CPT Code	CPT Description	CPT Weight
Πρώτη επίσκεψη (Consultation)	99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.	1.26
	99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 20 minutes face-to-face with the patient and/or family.	2.12
	99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.	3.05
	99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 45 minutes face-to-face with the patient and/or family.	4.65
	99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.	5.85

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Επιπρόσθετη επίσκεψη (Follow-up consultation)	99211	Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.	0.61
	99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.	1.24
	99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: An expanded problem focused history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.	2.06
	99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or family.	3.04
	99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.	4.10
Επισκληριδιογραφία (κάτω από ακτινολογικό έλεγχο)	72275	Epidurography, radiological supervision and interpretation	3.27

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Νευροπλαστική - συμφυσίωση με καθετήρα RACZ (κάτω από ακτινολογικό έλεγχο)	62264	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 1 day	11.95
Αποκλεισμοί συμπαθητικών γαγγλίων και περιφερικών νεύρων (one shot ή συνεχής έγχυση)	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	3.62
	64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral sympathetic)	5.33
Ενδοαρθρικές εγχύσεις (κάτω ή όχι από ακτινολογικό έλεγχο)	20600	Arthrocentesis, aspiration and/or injection; small joint or bursa (eg, fingers, toes)	1.37
	20610	Arthrocentesis, aspiration and/or injection; major joint or bursa (eg, shoulder, hip, knee joint, subacromial bursa)	1.72
Διηθήσεις με τοπικό αναισθητικό (trigger points)	20552	Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)	1.57
	20553	Injection(s); single or multiple trigger point(s), 3 or more muscle(s)	1.81
Απονέυρωση εκφυλισμένων επώδυνων αρθρώσεων και μεσοσπονδύλιων δίσκων της σπονδυλικής στήλης	64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	11.92
	64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)	5.36
	64635	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint	11.79
	64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure)	4.87
	64640	Destruction by neurolytic agent; other peripheral nerve or branch	3.77
Απονέυρωση επώδυνων σπλαγχνικών οργάνων της κοιλιάς και της πυέλου για την αντιμετώπιση του καρκινικού πόνου	64680	Destruction by neurolytic agent, with or without radiologic monitoring; celiac plexus	8.61
	64681	Destruction by neurolytic agent, with or without radiologic monitoring; superior hypogastric plexus	14.79
Καταστροφή του γαγγλίου του τριδύμου για την ανακούφιση από ανθεκτική στη συντηρητική θεραπεία νευραλγία του τριδύμου	64605	Destruction by neurolytic agent, trigeminal nerve; second and third division branches at foramen ovale	15.53
	64610	Destruction by neurolytic agent, trigeminal nerve; second and third division branches at foramen ovale under radiologic monitoring	21.19
Εφαρμογή διακοπτόμενης ραδιοσυχνότητας PRF με σκοπό την τροποποίηση της μεταφοράς των επώδυνων σημάτων προς το νωτιαίο μυελό	63650	Percutaneous implantation of neurostimulator electrode array, epidural	37.59