

OB GYN Coding Cheat Sheets

This OB/GYN CPT Code Billing Cheat Sheet is designed to facilitate accurate and efficient coding in obstetric and gynecologic practices, ensuring proper reimbursement and compliance with coding guidelines.

Routine gynecologic care

- **99213** - Office or other outpatient visit for an established patient
- **99385** - Initial comprehensive preventive medicine evaluation (age 18-39)
- **99386** - Initial comprehensive preventive medicine evaluation (age 40-64)
- **99395** - Periodic comprehensive preventive medicine reevaluation (age 18-39)
- **99396** - Periodic comprehensive preventive medicine reevaluation (age 40-64)

Obstetric care

- **59400** - Routine obstetric care including antepartum care, vaginal delivery, and postpartum care
- **59510** - Routine obstetric care including antepartum care, cesarean delivery, and postpartum care
- **59610** - Routine obstetric care including antepartum care, vaginal delivery after previous cesarean delivery, and postpartum care
- **59618** - Routine obstetric care including antepartum care, cesarean delivery after previous cesarean delivery, and postpartum care

Ultrasound and imaging

- **76801** - Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester
- **76805** - Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester
- **76815** - Ultrasound, limited, fetal size, heartbeat, placenta location, and fetal position
- **76816** - Ultrasound, pregnant uterus, follow-up or repeat

Surgical procedures

- **58150** - Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s)
- **58558** - Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without d&c
- **58661** - Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy)
- **59514** - Cesarean delivery only

Gynecologic procedures

- **57061** - Destruction of vaginal lesion(s); simple (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery)
- **57454** - Colposcopy of the cervix with biopsy(s) and endocervical curettage
- **57500** - Biopsy of cervix, single or multiple, or local excision of lesion, with or without fulgeration (separate procedure)
- **58100** - Endometrial biopsy, without dilation, any method (e.g., pipelle, surgical scraping)

Contraceptive management

- **58300** - Insertion of intrauterine device (iud)
- **58301** - Removal of intrauterine device (iud)
- **11981** - Insertion, non-biodegradable drug delivery implant
- **11976** - Removal, implantable contraceptive capsules

Additional services

- **81025** - Urine pregnancy test, by visual color comparison
- **96372** - Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular

Notes for use

- **Modifiers:** Use appropriate modifiers such as -25 (significant, separately identifiable e/m service by the same physician on the same day), -51 (multiple procedures), -59 (distinct procedural service), -78 (unplanned return to the operating room), and -79 (unrelated procedure during postoperative period) as needed.
- **Global codes:** Remember that global codes cover a bundle of services. Ensure accurate documentation for any services outside the global package.
- **Separate evaluations:** Bill separate evaluations accurately to ensure reimbursement for all services provided.