

THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS  
CODE X Report : Global Service Data

8/22/2018

CPT Code : **26418**

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Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon

Services **included** in the global service package:

- local infiltration of medication(s), anesthetic, or contrast agent before, during, or at the conclusion of
- surgical approach, with necessary identification, isolation, and protection of anatomic structures, includ
- obtaining wound specimen(s) for culture
- wound irrigation
- intraoperative photo(s) and/or video recording, excluding ionizing radiation
- intraoperative supervision and positioning of imaging and/or monitoring equipment by operating surgeon or assistant(s)
- insertion, placement, and removal of surgical drain(s), re-infusion device(s), irrigation tube(s), or catheter(s)
- closure of wound and repair of tissues divided for initial surgical exposure, partial or complete
- application of initial dressing, orthosis, continuous passive motion, splint, or cast, including traction, except where specifically excluded from global package
- suture removal by operating surgeon or designee
- incision(s) required to expose tendon ends
- retrieval of tendon and/or preparation of tendon ends for repair
- repair of extensor retinaculum

Services **not included** in the global service package:

- conscious sedation, regional block(s), Bier block(s)
- supplies and medication (eg, code 99070, HCPCS Level II codes)
- insertion, removal, or exchange of nonbiodegradable drug delivery implants (eg, 11981-11983)
- subsequent splinting, strapping, or casting
- repair of additional tendons

- treatment of fracture(s) and/or dislocations, nerve and/or vascular injuries

Medicare global fee period: 90 days

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The information provided in this document is current for 2018