

## Coding Corner – SASA PPBU

The team at the PPBU are often requested to comment on the use of certain codes. These are frequently a source of audits and associated difficulties. In this feature, we will look at the code 0039 – **Deliberate Blood Pressure control**.

In the MDCM the code is defined as follows:

***0039: Control of blood pressure: Deliberate control of the blood pressure: All cases up to one hour: Add 3,00 anaesthetic units, thereafter, add 1,00 (one) additional anaesthetic unit per quarter hour or part thereof.***

So when can this code be used? It is appropriate to use for any situation in which there is deliberate control of the blood pressure – either to deliberately lower or elevate the BP. Cases in which lowering of the blood pressure for surgical reasons include:

- \* Sinus surgery
- \* Shoulder surgery
- \* Inner ear surgery amongst others.

The code can be used when there is need to elevate the blood pressure – if the patient is on Inotropes or during cardiac surgery for example.

It is important to note that there has to be a reason for the lowering of the blood pressure. The list of typical procedures is located in the SASA Private Practice Coding Guidelines (available on request by emailing [comms@sasaewb.com](mailto:comms@sasaewb.com) or attending the PPBU Practice workshops) but the list is not exhaustive. Unfortunately, there are anaesthetists who use the code incorrectly and we at the PPBU have seen examples where the code is used for every case!

It is **inappropriate** to use code 0039 in the following circumstances:

1. When active intervention is required to elevate the blood pressure due to anaesthetic induced hypotension – post induction, during spinal anaesthesia etcetera.
2. For cases where there is no demonstrable indication for hypotension.

The code is a time-based code. It is very seldom appropriate to code for the entire duration of the anaesthetic. For example, if you're doing endoscopic sinus surgery, the duration of deliberate hypotension should not be the entire duration of the procedure – hypotension is induced when **surgery** starts and is stopped when **surgery** ends. Therefore, the total 0039 time should be less than the 0023 time.



From the point of view of defending against audits of the use of 0039, we recommend that if an anaesthetist codes 0039 for a procedure which is not in the list of procedures in the coding manual, a note is made as to the specific indication for deliberate control of blood pressure. Medical funders will often wait up to 3 years to audit and then present the practitioner with a list of cases for which they'll request a motivation – this record keeping will make the process a lot simpler.