



Coding for Bone Marrow Examination (Approved by the Board on 3/25/2003)

The following CPT codes may be used for various parts of Bone Marrow preparation and interpretation:

- 88305 Bone Marrow, Biopsy
- 88305 Cell Block, Any Source
- 85060 Blood smear, peripheral, interpretation by physician with written report
- 85097 Bone marrow, smear interpretation (Professional component only)
- 88311 Decalcification procedure
- 88313 Special stains, Group II, all other (e.g., iron . . .)
- 88342 Immunocytochemistry (including tissue immunoperoxidase), each antibody

Special Stains:

- 88312 Group I, for microorganisms (Gridley, acid fast, methenamine silver)
- 88313 Group II, all other except immunocytochemistry and immunoperoxidase (iron, trichrome)
- 88319 Determinative histochemistry or cytochemistry to identify enzyme constituents, each (e.g, Sudan Black, Non-specific esterase, etc.)
- 88342 Immunocytochemistry (including tissue peroxidase), each antibody

The following guidelines apply to the use of these CPT codes.

1. Bone Marrow Biopsy, gross and microscopic examination

- a. Both a technical and professional component for 88305 may be coded.
- b. The CPT description requires both “gross and microscopic examination,” so both gross and microscopic description/interpretation must be documented in the report.
- c. If the specimen is decalcified and that is documented, code 88311. There is no code for “light decalcification.” If the specimen is decalcified to any extent, code 88311.
- d. If special stains are performed, code 88313 for each unique stain. (May be coded only one time per stain type regardless of the number of slides.)
- e. If immunocytochemical stains are performed, code 88342 for each antibody, for each part. Only one 88342 may be coded per antibody type, per part, regardless of the number of slides.

2. Bone Marrow Aspiration

- a. If smears are prepared and interpreted, code 85097. Only 85097x1 is coded, regardless how many slides are prepared and reviewed.
- b. If a cell block is prepared from the clot, code 88305, Cell Block, Any Source. This CPT code requires both gross and microscopic examination, so both must be documented in the report.
- c. If a clot is so large that it requires two cassettes producing two cell blocks, it is still coded as 88305x1, because it is a single specimen.
- d. If special stains are performed, code for each unique stain (see list above), but each stain may be coded only one time per stain type or per antibody, regardless of the number of slides. However, if the same stain is done on different parts (e.g., an iron stain on a core biopsy and on a clot), each can be coded for the same stain, with proper documentation.
- e. If slides are prepared elsewhere and submitted to pathology, then only P-85097 is coded. There is no technical component to 85097; never code T-85097

3. Peripheral Smear interpretation

- a. If a peripheral smear is reviewed and documented in the report, code 85060. This requires that the slide be examined by the pathologist.
- b. Only P-85060 is coded. There is no "T-85060."

4. General Requirements

- a. Documentation for special stains must mention the stain for each part for which 88313 is coded. (That is, if an iron stain is done on both the clot and the biopsy, each interpretations must include mention of the stain.)
- b. Decalcification must be documented.
- c. If there are multiple parts that are interpreted in a single section, the report must make it clear that all parts were examined, and that the report applies to all of the parts that were coded.