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Deviated Nasal Septum

Guidelines (V0007DNS2023)

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Definition:

In most people the nasal septum is not usually perfectly straight. There are often small bends and spurs and deviations that are symptomless. However major deviation can cause symptoms of obstruction.

Turbينات: The inferior turbinate that is in the path of the airway.

Etiologies

Septum: Traumatic or Idiopathic

The former can occur at any age and the latter develops and is established between the age of 10 and 18yrs with no particular reason.

Turbينات: allergic rhinitis / vasomotor rhinitis / idiopathic / compensatory (this last variety occurs with time on the concave side of a septal deviation).

Diagnosis

Based on clinical examination and radiological study (including, X-ray, CT, MRI).

Careful grading of nasal septum deviation and its angle is crucial for evaluation.

Presence of severe nasal septum deviation (i.e. S shaped nasal septum) which cause obstruction of osteo-meatal complex, aggravating symptoms.

Asymptomatic septal deformity that prevents access to other intranasal areas when such access is required to perform medical necessary surgical procedure.

Pitfalls & Interaction with Rhinoplasty

Procedure should be evaluated to be done by ENT not plastic surgery, as plastic surgery raises suspension of cosmetic procedure.

Correlation between signs, symptoms and radiology and exam finding is part of coverage of claim.

Evaluation of necessity of septoplasty in relation to co-procedures.

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Deviated Nasal Septum

Indications For Surgery

- Documented recurrent sinusitis attributed to deviated nasal septum, that is not responding to conservative management.
- Recurrent epistaxis related to septal deformity (subjected to coverage of cause of deformity).
- Septal deviation causing continuous nasal airway obstruction resulting in nasal breathing difficulty not responding to 3 or more months of appropriate medical therapy;
- To gain access to parts of the nose: for control of epistaxis / to perform endo nasal dacryocystorhinostomy / for excision of polyps

The below is to be evaluated for each case:

- After confirmation of conservative management for all other related causes of the primary disease.
- For allergic rhinitis with nasal polyposis: biological treatment is new evolving treatment for management.
- Septoplasty /rhinoplasty for treatment of allergic rhinitis is considered experimental

Complications

- Septal hematoma
- Septal abscess
- Septal perforation
- Epistaxis

Coding

Initial request to be submitted as Day case DRG, revision to IP DRG subject to medical evaluation.

CPT code:

30520 Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft

30620 Septal or other intranasal dermatoplasty (does not include obtaining graft)

ICD-10:

J320 -J32.9 Chronic sinusitis [due to deviated septum not relieved by appropriate medical and antibiotic therapy]

J34.2 Deviated nasal septum [causing continuous nasal airway obstruction resulting in nasal breathing difficulty not responding to appropriate medical therapy]

M95.0 Acquired deformity of nose [that prevents access to other intranasal areas when such access is required to perform medically necessary surgical procedures] [not covered for nasal valve collapse]

Surgical Supplies

Coblation & laser usually not covered being “unusual & non-customary” these items vapor the tissue whereas it is needed for pathology study as a proof of the operation.

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