

2021 Outpatient Medical Decision Making (MDM) – 2 of 3 Needed

E/M LEVEL and MDM (Level 2 and 3)	NUMBER AND COMPLEXITY OF <u>PROBLEMS</u> ADDRESSED	AMOUNT AND/OR COMPLEXITY OF <u>DATA</u> TO BE REVIEWED AND ANALYZED (*Each unique test, order, or document reviewed counts in Category 1)	<u>RISK</u> OF COMPLICATIONS, and/or MORBIDITY/MORTALITY OF PATIENT MANAGEMENT
99202 (15-29 min) 99212 (10-19 min) Straightforward MDM	MINIMAL NUMBER AND COMPLEXITY <ul style="list-style-type: none"> • One self-limited or minor prob. (abrasion) 	Minimal but usually none	Minimal risk of morbidity from additional diagnostic testing. Consider: Rest, superficial dressings, labs, EKG, EEG, etc.
99203 (30-44 min) 99213 (20-29 min) Low MDM	LOW NUMBER AND COMPLEXITY <ul style="list-style-type: none"> • 2 or more self-limited or minor prob. OR <ul style="list-style-type: none"> • 1 chronic stable illness (HTN) OR <ul style="list-style-type: none"> • 1 Acute, uncomplicated illness/injury (UTI) 	<p style="text-align: center;">(Must Meet 1 of 2 Categories)</p> <u>Category 1:</u> Tests and documents (any 2) <ol style="list-style-type: none"> 1. *Review of prior external note(s) from EACH unique source 2. *Review results of EACH unique test 3. *Order of EACH unique test <p style="text-align: center;">OR</p> <u>Category 2:</u> Assessment requiring an independent historian	Low risk for undergoing additional management Consider: OTC drugs, non-contrast imaging, PT/OT, skin bx, minor surgery

MDM Derm Summary

- Assess **ONE lesion** and **you WATCH or do surgery** → **99202/12**
- Assess **TWO** different lesions and you decide to **WATCH** → **99202/12**
- Assess **TWO** different lesions, plan for minor surgery (+/- risk): **99203/13**
- Assess **ONE BAD** lesion ... **99204/14** and maybe **99205/15**

Office Surgical Note

- Procedure type: (shave/biopsy/excision/incision/cryo/injection, etc.)
- CONSENT OBTAINED
- PRE-OP DIAGNOSIS:
- PROCEDURE:
 - Anatomic site/location
 - “Measure Twice, Cut Once”: Measure surgical area before anesthesia and prepping of the area. Clinical surgical area (lesion size + clinical surgical margin) needs to be noted (lesion size is OK, but surgical size needed for billing). Measure the length of the incision (in case layered closure is needed)
 - Sterile prep vs aseptic and anesthetic (if none, so state). Was epinephrine used?
 - Tools (#15 blade, #11, type and size sutures, etc.)
 - Process of procedure: Elliptical, shaved, incision, etc. Describe the event - deep/superficial, scar tissue or adhesions with old epidermal inclusion cyst, loculations with abscess, etc. Did we pack it? Was there bleeding...how much? Was there dead space that needed deep suture closure? What suture did you use? Cosmetic effect. Patient tolerance. Pathology.