Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery

Coding Specifications

Codes required to document patient has had a CABG surgical procedure:

A CPT procedure code is required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

CABG CPT procedure codes

33510, 33511, 33512, 33513, 33514, 33516, 33517, 33518, 33519, 33521, 33522, 33523, 33533, 33534, 33535, 33536 (coronary artery bypass graft)

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 4110F:** Internal mammary artery graft performed for primary, isolated coronary artery bypass graft procedure
- CPT II 4110F-1P: Documentation of medical reason(s) for not performing an internal mammary artery graft for primary, isolated coronary artery bypass graft procedure
- *CPT II 4110F–8P:* Internal mammary artery graft not performed for primary, isolated coronary artery bypass graft procedure, reason not otherwise specified

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