

# FRACTURE CODING ADVICE

## Coding for a Proximal Femoral Fracture

By: John Torres, Senior Vice President at FTGU  
 Speaker at the 2013 North American Spine Society Meeting

Recently a client of FTGU asked me how to properly code for a proximal femoral shaft fracture. As the Senior VP, I make it my priority to provide the most up-to-date and comprehensive advise to our clients. Below is a sample of the correspondence:

**Client:** “A patient of ours came in with a proximal femoral shaft fracture and we coded it 27245 - IM fixation subtrochanter fracture. Should we code this differently?”

**My Response:**

“It depends on the location of the fracture and the method that the physician used to reduce it.



As you can see from the diagram above, a proximal femoral fracture could be intertrochanteric or subtrochanteric. In the case of an intertrochanteric or subtrochanteric fracture the options are:

27244	Treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with plate/screw type implant, with or without cerclage
	<a href="#">CPT Assistant Summer 1993: 12</a> <a href="#">CPT Changes: An Insider's View 2003</a>
	<b>MCR</b>
27245	with intramedullary implant, with or without interlocking screws and/or cerclage
	<a href="#">CPT Assistant Summer 1993: 12, Sep 2013: 17</a>
	<b>MCR</b>

27244 is correct if he used a plate/screws

27245 is correct if he also used an intramedullary implant (often called an IM Nail).

There are other options if the fracture were higher on the femur (in the femoral neck region) or if the fracture were more distal on the shaft.

If the fracture was in the shaft, there are two options, depending on whether the surgeon uses an intramedullary implant or not.

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27506 Open treatment of femoral shaft fracture, with or without external fixation, with insertion of intramedullary implant, with or without cerclage and/or locking screws

 [CPT Assistant Winter 1992: 10, Jun 2009: 7](#)

 [Netter's Illustration 179:Femur--Anterior and Posterior Views](#)

 MGR

27507 Open treatment of femoral shaft fracture with plate/screws, with or without cerclage

 [Netter's Illustration 179:Femur--Anterior and Posterior Views](#)

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Based on your description, 27245 is probably correct but I would need additional information on the exact location of the fracture and whether the physician actually used an IM Nail to complete the ORIF.”

If you have any questions about the information included in this white paper, please feel free to contact me at [john.torres@ftgumedical.com](mailto:john.torres@ftgumedical.com) or call me at (817) 680-5790.

Regards,

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Senior VP - FTGU Medical Consulting

***At FTGU, we focus on orthopaedic doctors getting paid thru our revenue cycle management and OON services. Please contact us at (877) 331-9161 for more information and to schedule your free analysis.***