Smoking and surgery

Ideally, we would prefer you to stop smoking before any procedure. Smoking can worsen some urological conditions and makes complications more likely to occur even after symptoms resolve. In the setting of an outbreak of GI infection, individuals could be colonized with the pathogen even after symptoms resolve. Furthermore, smoking can increase the risk of complications during surgery. Be aware that smoking can also affect the healing process, leading to slower recovery times and an increased risk of complications such as wound infections.

Procedure/Surgery Start Time and the Procedure/Surgery Finish Time, as defined by the Association of Anesthesia Clinical Directors (AACD):

- **Procedure/Surgery Start Time**
  - 57.121 TOI for Denominator Procedure - Centers for Disease Control (CDC)
  - 60.000 for Numerator Procedure - American Society for Gastrointestinal Endoscopy (ASGE)

- **Procedure/Surgery Finish Time**
  - 60.000 for Denominator Procedure - CDC
  - 60.000 for Numerator Procedure - ASGE

**Coding and Billing Considerations:**

- **Endoscopic Procedures:**
  - Endoscopic procedures (including endoscopy, endoscopic, endoluminal, endoscopic, or natural orifice) bariatric procedures (no specific CPT code) with these procedures, access to the relevant anatomical structures is gained.
  - Endoscopic procedures for weight control include procedures to remodel or restore weight (i.e., to treat weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch) including, but not limited to, any of the following:
    - Endoscopic procedures for weight loss (aka endoluminal, endosurgical, or natural orifice transoral endoscopic surgery [NOTES]) as a primary or revision procedure
    - Endoscopic procedures for weight reduction to reduce weight and improve metabolism, including weight loss surgery
    - Endoscopic procedures for weight control to maintain weight after surgery
    - Endoscopic procedures for weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch

- **Reimbursement Considerations:**
  - Bariatric surgery procedures, including but not limited to the following, may be covered by insurance:
    - Endoscopic procedures: laparoscopic, endoscopic, endoluminal, endoscopic, or natural orifice transoral endoscopic surgery (NOTES) as a primary or revision procedure
    - Endoscopic procedures for weight reduction to reduce weight and improve metabolism, including weight loss surgery
    - Endoscopic procedures for weight control to maintain weight after surgery
    - Endoscopic procedures for weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch

- **Billing and Coding Considerations:**
  - Bariatric surgery procedures may be covered by insurance, but the specific procedures covered will vary depending on the insurance provider.
  - Endoscopic procedures for weight control include procedures to remodel or restore weight (i.e., to treat weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch) including, but not limited to, any of the following:
    - Endoscopic procedures for weight loss (aka endoluminal, endosurgical, or natural orifice transoral endoscopic surgery [NOTES]) as a primary or revision procedure
    - Endoscopic procedures for weight reduction to reduce weight and improve metabolism, including weight loss surgery
    - Endoscopic procedures for weight control to maintain weight after surgery
    - Endoscopic procedures for weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch

**Common Medical Abbreviations:**

- **PEG:** percutaneous endoscopic gastrostomy
- **PET:** positron emission tomography
- **PH:** past history
- **Pharm:** pharmacy
- **PHYS.:** physical, physiology
- **PI:** present illness
- **PULM:** pulmonary

**Reference:**

- American Medical Association (AMA): Comprehensive Coding Guide 2022
- CMS: Medicare Physician Fee Schedule
- HCPCS: Healthcare Common Procedure Coding System
- ICD-10: International Statistical Classification of Diseases and Related Health Problems
- SNOMED CT: Systematized Nomenclature of Medicine - Clinical Terms

**Coding and Billing Guide:**

- **Endoscopic Surgery:**
  - Endoscopic procedures: laparoscopic, endoscopic, endoluminal, endoscopic, or natural orifice transoral endoscopic surgery (NOTES) as a primary or revision procedure
  - Endoscopic procedures for weight reduction to reduce weight and improve metabolism, including weight loss surgery
  - Endoscopic procedures for weight control to maintain weight after surgery
  - Endoscopic procedures for weight gain after bariatric surgery to remedy a large gastric stoma or large gastric pouch

**The Importance of Smoking Cessation Before Surgery:**

- Smoking significantly increases the risk of complications during surgery. Even after symptoms resolve, smoking can affect the healing process, leading to slower recovery times and an increased risk of complications such as wound infections.

For advice on stopping, you can:
- Contact your general practitioner (GP).
- Access your local NHS Smoking Help Online.
- Ring the free NHS Smoking Helpline on 0300 123 1044.

**Endoscopic Surgery:**

- Endoscopic procedures: laparoscopic, endoscopic, endoluminal, endoscopic, or natural orifice transoral endoscopic surgery (NOTES) as a primary or revision procedure
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- **Complications During Smoking:**
  - Wound infections
  - Infection of the surgical site
  - Infection of the incision
  - Infection of the drain site
  - Infection of the dressing site
  - Infection of the incisional site
  - Infection of the incisional drainage site
  - Infection of the incisional dressing site
  - Infection of the incisional incision site
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