# East Jefferson General Hospital

## Documentation Tip: Excision of Skin Lesions

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**For the coding team to assign accurate procedure codes for excision of lesions, the following documentation is needed:**

- Size of each lesion (each lesion is coded separately)
- Width of the margins surrounding the lesion to be excised
- Anatomic location of each lesion.

Documentation of measurements done by the surgeon prior to excision is important.

- Coders are unable to use pathology reports as these may not be the most accurate measurements of the lesion(s), due to shrinkage of the lesion and possible fragmentation after removal.
- Please remember to document these pre-operative measurements in the operative report, operative note, or the history and physical.

### Post-operative Documentation: Benign or Malignant?

To complete final coding for excision of lesion(s), it is necessary to know if the lesion is benign or malignant.

- Please remember to document this information in the progress notes or discharge summary.
- In cases where the patient is discharged prior to the pathology results, please addend the discharge summary, or add an additional note to the medical record for the encounter during which the lesion was removed.

Please note: Coders are not able to take this information from the pathology report. If there is not documentation of the pathology results by the physician, coders and/or CDI are required to query.

Savista

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