



**Abdominal Hysterectomy
with or without Bilateral Salpingo-oophrectomy (BSO) Review Tool**

CPT codes 58150, 58180, 58200

Laparoscopic Total Hysterectomy +/- BSO

CPT codes 58570, 58571, 58572, 58573

**The completed faxed form must contain all the information for an inpatient authorization.
The office will be called with the authorization number.**

Directions:

- (1) Complete Patient/Member and Surgeon information sections (2) Select appropriate medical indication
(3) Complete the guideline section for indication selected (4) Complete Narrative with associated findings.

Patient/Member Information			
Last Name:		First Name:	
Member ID number:		DOB:	
		Secondary insurance:	
Surgeon Information			
Surgeon:		Office phone number:	
Assistant surgeon (if known):		Fax:	
		Hospital:	
Date of Request:		Date of Surgery:	
		CPT Code: ICD-9	

Indications	
<input type="checkbox"/> - Endocervical adenocarcinoma in situ by Bx <input type="checkbox"/> - CIN III <input type="checkbox"/> - Adenomatous endometrial hyperplasia with atypia by Bx and D&C <input type="checkbox"/> - Fibroids in premenopausal woman <input type="checkbox"/> - Fibroids in postmenopausal woman <input type="checkbox"/> - Dysfunction uterine bleeding in premenopausal woman <input type="checkbox"/> - Postmenopausal bleeding <input type="checkbox"/> - Suspected adenomyosis	<input type="checkbox"/> - Endometrial cancer by pathology <input type="checkbox"/> - Suspected ovarian cancer <input type="checkbox"/> - Suspected tubal cancer <input type="checkbox"/> - Tubo-ovarian abscess <input type="checkbox"/> - Postpartum uterine bleeding \leq 24 hrs post delivery <input type="checkbox"/> - Chronic PID <input type="checkbox"/> - Endometriosis <input type="checkbox"/> - Indication not listed* (*document under narrative) <input type="checkbox"/> - Chronic abdominal/pelvic pain, unknown etiology

Guidelines	
Endocervical adenocarcinoma in situ by Bx - if checked <u>no further clinical information required</u>	Endometrial cancer by pathology and BSO planned - if checked <u>no further clinical information required</u>
CIN III – All <input type="checkbox"/> Diagnosed by Bx (one) <input type="checkbox"/> Colposcopic Bx <input type="checkbox"/> Cone Bx <input type="checkbox"/> Prior conservative surgery (one) <input type="checkbox"/> Laser conization <input type="checkbox"/> LEEP/ LLETZ/ LOOP <input type="checkbox"/> Cold knife conization <input type="checkbox"/> Continues CIN III by ECC/Bx > 8 weeks post conservative surgery	Suspected ovarian cancer <input type="checkbox"/> - BSO planned <input type="checkbox"/> - Diagnosed by imaging (one) <input type="checkbox"/> - By US <input type="checkbox"/> - By CT/MRI <input type="checkbox"/> - Laparoscopy

<p>Adenomatous endometrial hyperplasia with atypia by Bx and D&C (ONE)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – Premenopausal woman <input type="checkbox"/> – Postmenopausal woman and BSO planned 	<p>Suspected tubal cancer (BOTH)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – BSO planned <input type="checkbox"/> – Diagnosed by imaging (one) <ul style="list-style-type: none"> <input type="checkbox"/> – By US <input type="checkbox"/> – By CT/MRI <input type="checkbox"/> – Laparoscopy
<p>Fibroids in premenopausal woman (ALL)</p> <ul style="list-style-type: none"> <input type="checkbox"/> - Diagnosis by US <input type="checkbox"/> - Uterus \geq 14 weeks size by PE <input type="checkbox"/> - Findings (one) <ul style="list-style-type: none"> <input type="checkbox"/> – abnormal bleeding (both) <ul style="list-style-type: none"> <input type="checkbox"/> – vagina and cervix normal by PE <input type="checkbox"/> – continued abnormal bleeding (one) <ul style="list-style-type: none"> <input type="checkbox"/> – interferes with ADLs <input type="checkbox"/> – Hct < 27 & Hb <9 unresponsive to iron Rx >12wks <input type="checkbox"/> – Uterine size doubled by US w/in 1year <input type="checkbox"/> – Ureteral compression by US/IVP <input type="checkbox"/> – Other associated symptoms (one) <ul style="list-style-type: none"> <input type="checkbox"/> – pelvic/abdominal pain/discomfort w/o other explanation <input type="checkbox"/> – urinary frequency/urgency w/o evidence of Infection <input type="checkbox"/> - Dyspareunia <input type="checkbox"/> – PAP smear normal w/in last year <input type="checkbox"/> – Pregnancy excluded (one) <ul style="list-style-type: none"> <input type="checkbox"/> – HCG negative <input type="checkbox"/> – Sterilization by Hx <input type="checkbox"/> – Patient not sexually active by Hx 	<p>Tubo-ovarian abscess (ALL)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – BSO planned <input type="checkbox"/> – Diagnosed by imaging (one) <ul style="list-style-type: none"> <input type="checkbox"/> – By US <input type="checkbox"/> – By CT/MRI <input type="checkbox"/> – HCG negative <input type="checkbox"/> – Worsening Sx/findings during IV antibiotics treatment (one) <ul style="list-style-type: none"> <input type="checkbox"/> – Pelvic pain <input type="checkbox"/> – Abdominal tenderness <input type="checkbox"/> – Persistent adnexal mass <input type="checkbox"/> – temperature > 100.4 <input type="checkbox"/> – WBC \geq 12,000/cu.mm <p>Postpartum uterine bleeding \leq 24 hrs post delivery(ALL)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – Vaginal/valvular/cervical laceration excluded by PE <input type="checkbox"/> – Uterine rupture excluded by PE/US <input type="checkbox"/> – Failure of vigorous uterine massage to control bleeding <input type="checkbox"/> – Other treatment (both) <ul style="list-style-type: none"> <input type="checkbox"/> – Continued bleeding after Rx (two) <ul style="list-style-type: none"> <input type="checkbox"/> – Pitocin <input type="checkbox"/> – Methergine <input type="checkbox"/> – Prostaglandin <input type="checkbox"/> – D&C
<p>Dysfunction uterine bleeding in premenopausal woman (ALL)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – Abnormal bleeding > 3 cycles <input type="checkbox"/> – Vagina and cervix normal by PE <input type="checkbox"/> – Thyroid disease excluded by Hx/PE/testing <input type="checkbox"/> – Pregnancy excluded (one) <ul style="list-style-type: none"> <input type="checkbox"/> – HCG negative <input type="checkbox"/> – Sterilization by Hx <input type="checkbox"/> – Patient not sexually active by Hx <input type="checkbox"/> – PAP smear normal w/in last year <input type="checkbox"/> – Sonohysterogram/US negative for endometrial lesion <input type="checkbox"/> – Continued bleeding after treatment (one) <p>Age <35</p> <ul style="list-style-type: none"> <input type="checkbox"/> – Progestin/OCP x3 consecutive cycles <input type="checkbox"/> - Endometrial ablation / resection (one) <ul style="list-style-type: none"> <input type="checkbox"/> Continued bleeding after RX <input type="checkbox"/> Contraindicated / refused <input type="checkbox"/> – Findings (one) <ul style="list-style-type: none"> <input type="checkbox"/> – interferes with ADLs <input type="checkbox"/> – Hct < 27% and Hb < 9.0 g/dL unresponsive to iron Rx >12wks <p>Continued on next page for age > 35</p> 	<p>Endometriosis (ALL)</p> <ul style="list-style-type: none"> <input type="checkbox"/> – BSO planned <input type="checkbox"/> – diagnosis by previous laparoscopy <input type="checkbox"/> – continued symptoms after Rx (one) <ul style="list-style-type: none"> <input type="checkbox"/> – GnRH agonist \geq 8weeks <input type="checkbox"/> – Depot medroxyprogesterone/OCP \geq 8wks <input type="checkbox"/> – Danazol \geq 8wks <input type="checkbox"/> – PAP smear normal w/in last year <input type="checkbox"/> – Pregnancy excluded (one) <ul style="list-style-type: none"> <input type="checkbox"/> – HCG negative <input type="checkbox"/> – Sterilization by Hx <input type="checkbox"/> – Patient not sexually active by Hx

<ul style="list-style-type: none"> □ – Age \geq 35 (all) <ul style="list-style-type: none"> □ – Endometrium normal w/in last year (one) <ul style="list-style-type: none"> □ – by endometrial biopsy □ – by hysteroscopy with D&C □ – Progestin/OCP x3 consecutive cycles □ – Findings (one) <ul style="list-style-type: none"> □ – interferes with ADLs □ – Hct < 27 & Hb < 9 unresponsive to iron Rx >12wks 	<p>Chronic Abdominal;/pelvic pain, unknown etiology (ALL)</p> <ul style="list-style-type: none"> □ HX and PE non diagnostic for etiology of pain □ – Laboratory testing (both) <ul style="list-style-type: none"> □ CBC normal; □ U/A or urine culture normal □ US nondiagnostic for etiology of pain □ Testing nondiagnostic for etiology of pain (one) <ul style="list-style-type: none"> □ CT/ MRI □ Diagnostic laparoscopy □ Continued pain after RX (one) <ul style="list-style-type: none"> □ NSAID's < 4 wks. □ – GnRH agonist \geq 8 weeks □ – Depot medroxy- progesterone / OCP \geq 8wks <ul style="list-style-type: none"> □ – ABX Rx x 1 course □ – PAP smear normal w/in last year □ – Pregnancy excluded (one) <ul style="list-style-type: none"> □ – HCG negative □ – Sterilization by Hx □ – Patient not sexually active by Hx □ Send for secondary medical review
<p>Suspected Adenomyosis</p> <ul style="list-style-type: none"> □ Sx/Findings (one) <ul style="list-style-type: none"> □- pelvic pain □- Abnormal bleeding (both) <ul style="list-style-type: none"> □ Vagina and cervix normal by PE □ Continued abnormal bleeding <ul style="list-style-type: none"> □ Interferes with ADL's □ Hct < 27% / Hb < 9, unresponsive to Iron Rx □ Ureteral compression by U/S / IVP □ – Other associated symptoms (one) <ul style="list-style-type: none"> □ pelvic/abdominal pain/discomfort w/o other explanation □ urinary frequency/urgency w/o evidence of infection □ - Dyspareunia □ MRI / U/S suggestive of adenomyosis □ Continued Sx/Findings after Rx (one) <ul style="list-style-type: none"> □ NSAIDS > 8 wks □ GnRH agonist \geq 8 weeks □ Depot medroxy- progesterone / OCP \geq 8wks □ – PAP smear normal w/in last year □ – Pregnancy excluded (one) <ul style="list-style-type: none"> □ – HCG negative □ – Sterilization by Hx □ – Patient not sexually active by Hx 	<p>Postmenopausal bleeding</p> <ul style="list-style-type: none"> □ – BSO planned □ – vagina and cervix normal by PE □ – HRT (one) <ul style="list-style-type: none"> □ – continued abnormal bleeding after change in /discontinuation □ – HRT contraindicated/refused □ – Endometrium normal w/in last 3 to 4 mos. (one) <ul style="list-style-type: none"> □ – by hysteroscopy with D&C □ – endometrial Bx and transvaginal US □ – PAP smear normal w/in last year

Fibroids in postmenopausal woman (ALL)

- BSO planned
- diagnosis by US
- Findings **(one)**
 - Uterine size double by US w/in one year
 - Uretal compression by US/IVP
 - Other associated by symptoms **(one)**
 - pelvic/abdominal pain/discomfort w/o other explanation
 - urinary frequency/urgency w/o evidence of infection
 - Dyspareunia
- PAP smear normal w/in last year

Chronic PID (ALL)

- pelvic pain.
- acute PID ≥ 2 episodes by history & PE
- Infection documented ≥ 1 episode by positive culture
- Adhesions/scarring/hydrosalpinx by laparoscopy
- PAP smear normal w/in last year
- HCG negative

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Narrative: (include presence of infection/history of infection, non compliance issues related to PAP surveillance, US findings, iron treatment (ferrous sulfate, ferrous gluconate, or oral polysaccharide iron), specific ADLs affected, explanation of an indication not listed*, such as chronic pelvic pain with unknown etiology.

Physician signature:

Date:

PLEASE NOTE: By signing above, you are attesting to the accuracy of the information provided, and that medical record documentation is available if request.