50323-50325

50323  Backbench standard preparation of cadaver donor renal allograft prior to transplantation, including dissection and removal of perinephric fat, diaphragmatic and retroperitoneal attachments, excision of adrenal gland, and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary
(Do not report 50323 in conjunction with 50340, 50345)

50325  Backbench standard preparation of living donor renal allograft (open or laparoscopic) prior to transplantation, including dissection and removal of perinephric fat and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary

AMA Coding Guideline
Renal Transplantation Procedures
Renal autotransplantation includes reimplantation of the autograft as the primary procedure, along with secondary extra-corporeal procedure(s) (eg, partial nephrectomy, nephrolithotomy) reported with modifier 51 (see 50380 and applicable secondary procedure(s)).

Renal allotransplantation involves three distinct components of physician work:
1. Cadaver donor nephrectomy, unilateral or bilateral, which includes harvesting of the graft(s) and cold preservation of the graft(s) (perfusing with cold preservation solution and cold maintenance) (use 50330). Living donor nephrectomy, which includes harvesting the graft, cold preservation of the graft (perfusing with cold preservation solution and cold maintenance), and care of the donor (see 50320, 50347).
2. Backbench work:
Standard preparation of a cadaver donor renal allograft prior to transplantation including dissection and removal of perinephric fat, diaphragmatic and retroperitoneal attachments; excision of adrenal gland; and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary (use 50323).

Standard preparation of a living donor renal allograft (open or laparoscopic) prior to transplantation including dissection and removal of perinephric fat and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary (use 50325).

Additional reconstruction of a cadaver or living donor renal allograft prior to transplantation may include venous, arterial, and/or ureteral anastomosis(es) necessary for implantation (see 50327-50329).

3. Recipient renal allograft, which includes transplantation of the allograft (with or without recipient nephrectomy) and care of the recipient (see 50360, 50365).

AMA Coding Notes
Renal Transplantation Procedures
(For dialysis, see 90935-90999)
(For laparoscopic donor nephrectomy, use 50547)
(For laparoscopic drainage of lymphocele to peritoneal cavity, use 49323)

Surgical Procedures on the Urinary System
(For provision of chemotherapeutic agents, report both the specific service in addition to code(s) for the specific substance(s) or drug(s) provided)

Plain English Description
Standard backbench (backtable) preparation of a kidney harvested from a cadaver or living donor is performed prior to transplant. The kidney is unpackaged and transferred to a backtable basin and placed in iced Ringers lactate solution. Cultures are taken of the preservation fluid and sent to the laboratory. Fat and surrounding tissue is dissected off the external surface of the kidney. The adrenal gland is excised. The kidney is inspected and all open ends of small blood vessels are suture ligated to prevent post transplant bleeding. Lymphatic vessels are also suture ligated to prevent post transplant lymphocele formation. Large blood vessels are then addressed. The gonadal, adrenal, and any lumbar vein branches are divided and ligated. The renal vein is trimmed. If any reconstruction of the renal vein is required it is reported separately. The renal arteries are evaluated. Some donors have only a single renal artery and others have multiple renal arteries. The renal arteries are trimmed and branches ligated as needed. If any reconstruction is required on the renal arteries, it is reported separately. The ureter is then prepared leaving as much surrounding tissue as possible undisturbed to prevent damage to the vascular structures. The renal vessels are then flushed with Ringers lactate to identify any vascular defects or leaks that may require additional preparation or repair. Report 50323 for backbench preparation on a cadaver donor kidney and 50325 for backbench preparation on a living donor kidney.

Backbench standard preparation of cadaver donor renal allograft prior to transplantation

For 50323, a donor kidney is prepared for transplant from a cadaver or living donor. Report 50325, for removal of excess tissue and fat from the kidney(s) to be transplanted.