



SPINAL COLUMN INJURIES

Enhancing Patient Outcomes Through Detailed Data Analysis



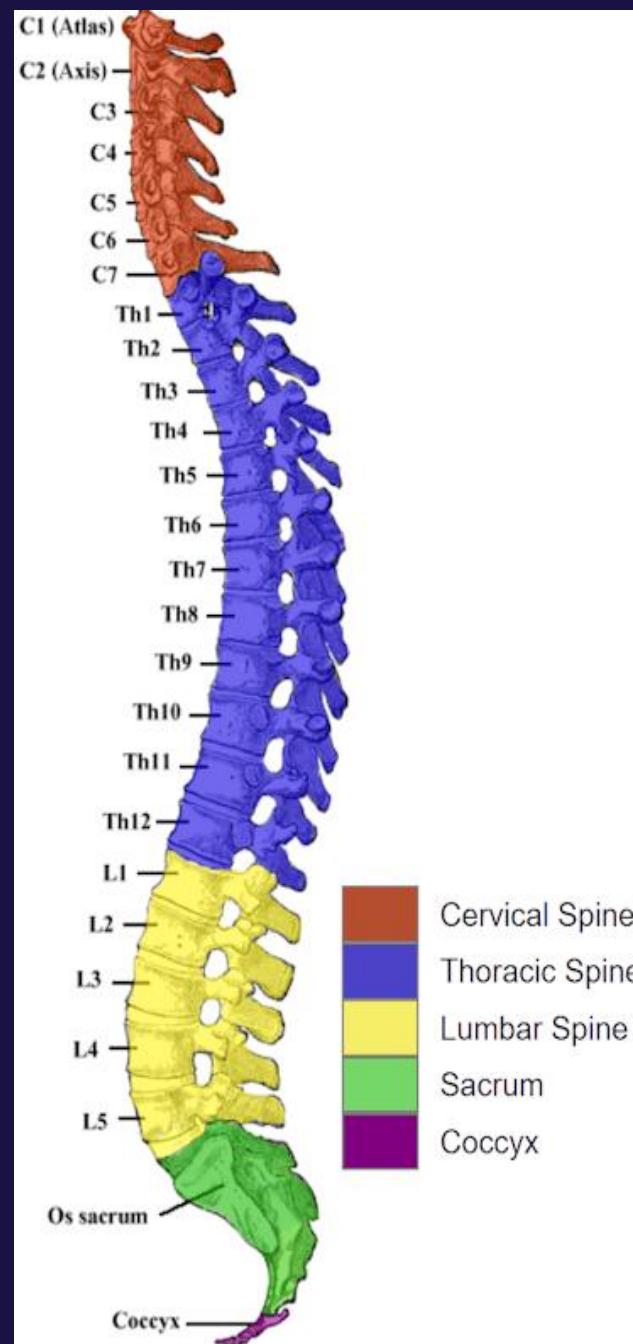
OBJECTIVES

- Review anatomy of spinal column
- Observe the different fractures
- Discuss the ICD-10-PCS codes



PURPOSE







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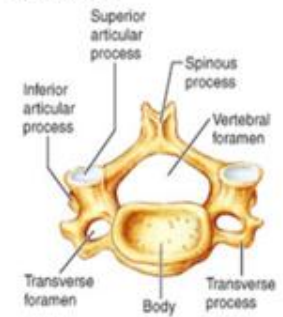
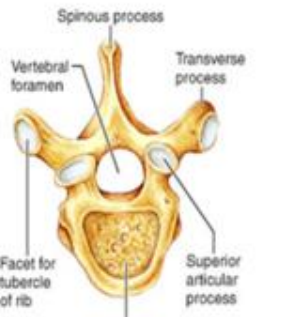
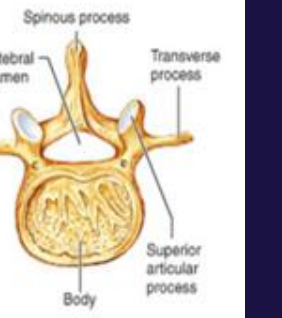
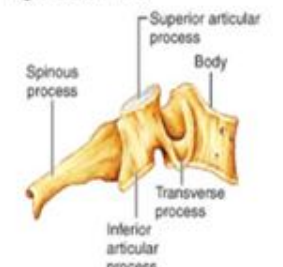
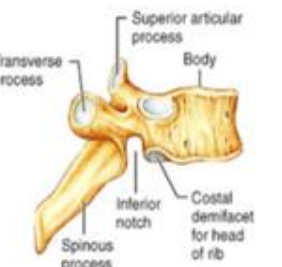
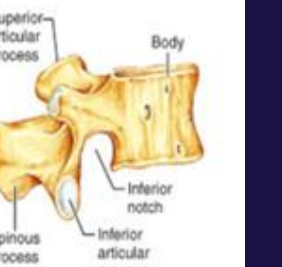
- Structural support
- Protection of the spinal cord
- Movement and flexibility
- Shock absorption
- Support for nerves and blood flow





ANATOMY

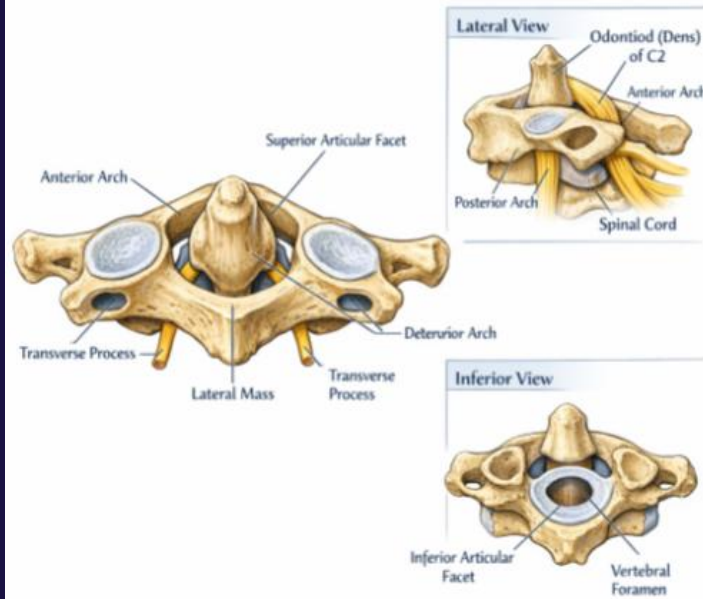
TABLE 7.2 Regional Characteristics of Cervical, Thoracic, and Lumbar Vertebrae

Cervical (3-7)	Thoracic	Lumbar
Superior View		
		
Right Lateral View		
		

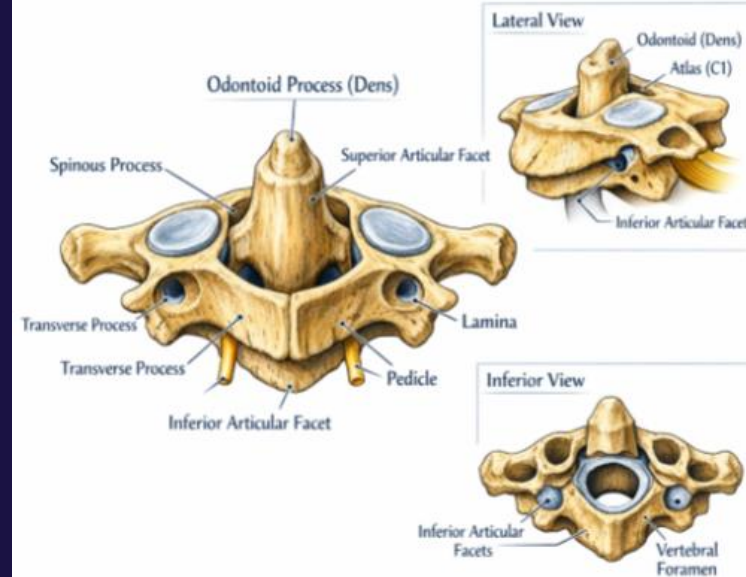


ANATOMY

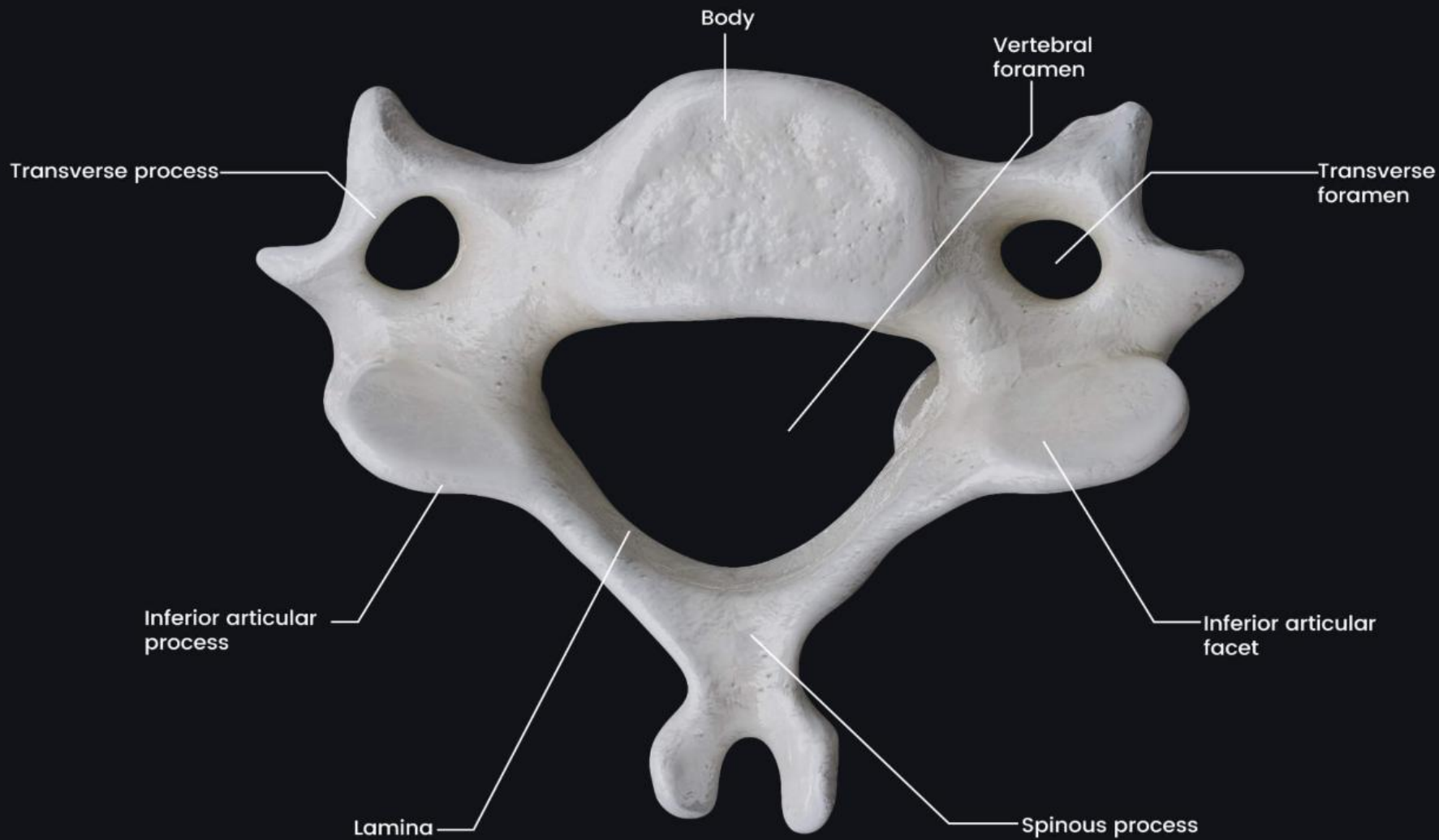
Anatomy of the C1 Vertebra (Atlas)



Anatomy of the C2 Vertebra (Axis)



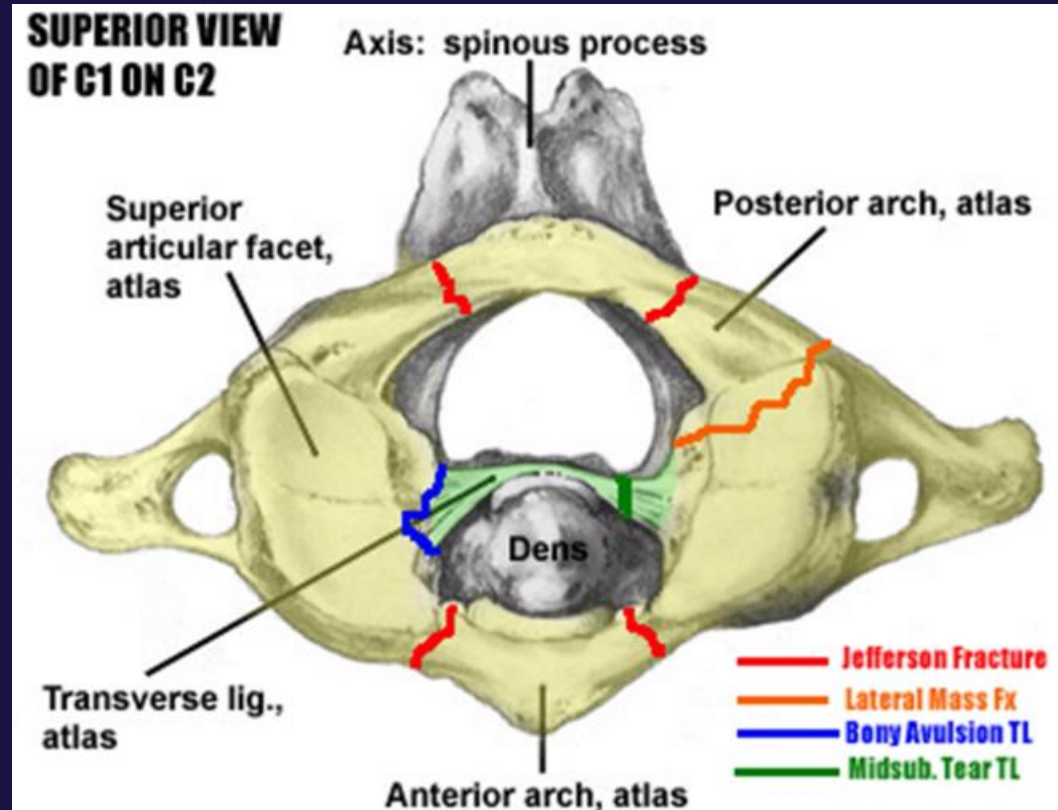
Atypical cervical vertebra (C6)



Inferior view



C1 FRACTURE

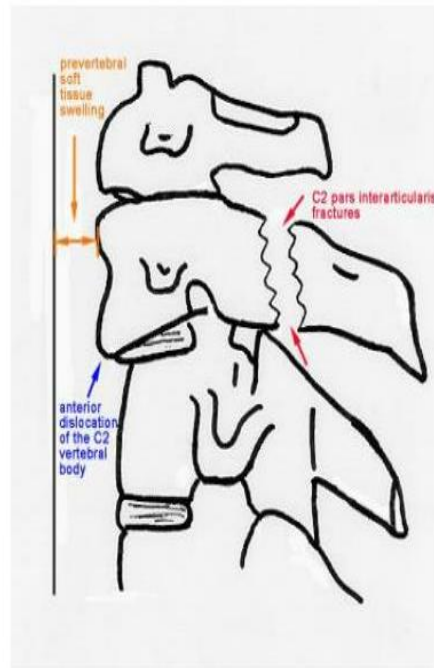




C2 FRACTURE

HANGMAN'S FRACTURE

- Fractures through pars interarticularis of the axis
- Unstable if occurs with facet dislocation
- Mechanism – hyperextension
- Features –
 - Prevertebral soft tissue swelling
 - Avulsion of anterior inferior corner of C2 assoc. with rupture of the ant. Longitudinal ligament
 - Anterior dislocation of C2 body
 - Bilateral C2 pedicle fractures.



Odontoid fracture classification



Type I :
Fracture of the upper part of the odontoid peg ; it's rare and potentially unstable



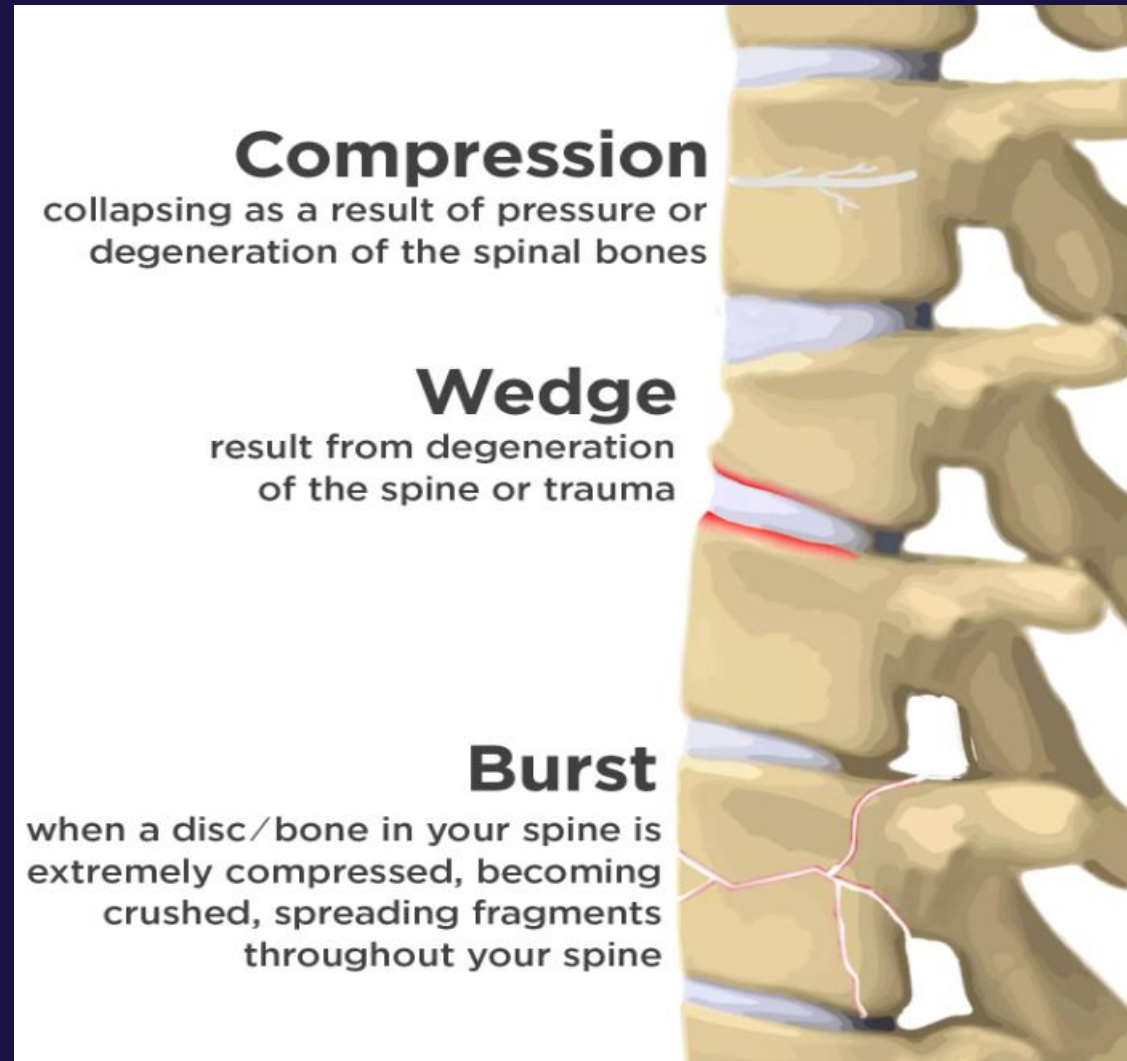
Type II :
Fracture at the base of the odontoid ; unstable, and has a high risk of non-union



Type III :
Through the odontoid and into the lateral masses of C2 ; best prognosis for healing



SUBAXIAL CERVICAL SPINE FRACTURES (C3-C7)





PROCEDURE CODES

- Root Operations
 - Reposition
 - Reducing or realigning fractured cervical vertebrae
 - Fusion
 - Commonly performed for unstable cervical fractures, especially those involving the vertebral joints



REPOSITION

0PS334Z – Reposition Cervical Vertebra with Internal Fixation Device, Percutaneous Approach

0PS30ZZ – Reposition Cervical Vertebra, Open Approach (no device)

0PS344Z – Reposition Cervical Vertebra with Internal Fixation Device, Percutaneous Endoscopic Approach

0PS304Z – Reposition Cervical Vertebra with Internal Fixation Device, Open Approach



FUSION

ORG107J – Fusion of Cervical Vertebral Joint with Autologous Tissue Substitute, Posterior Approach, Posterior Column, Open Approach

ORG10A0 – Fusion of Cervical Vertebral Joint with Interbody Fusion Device, Anterior Approach, Anterior Column, Open Approach

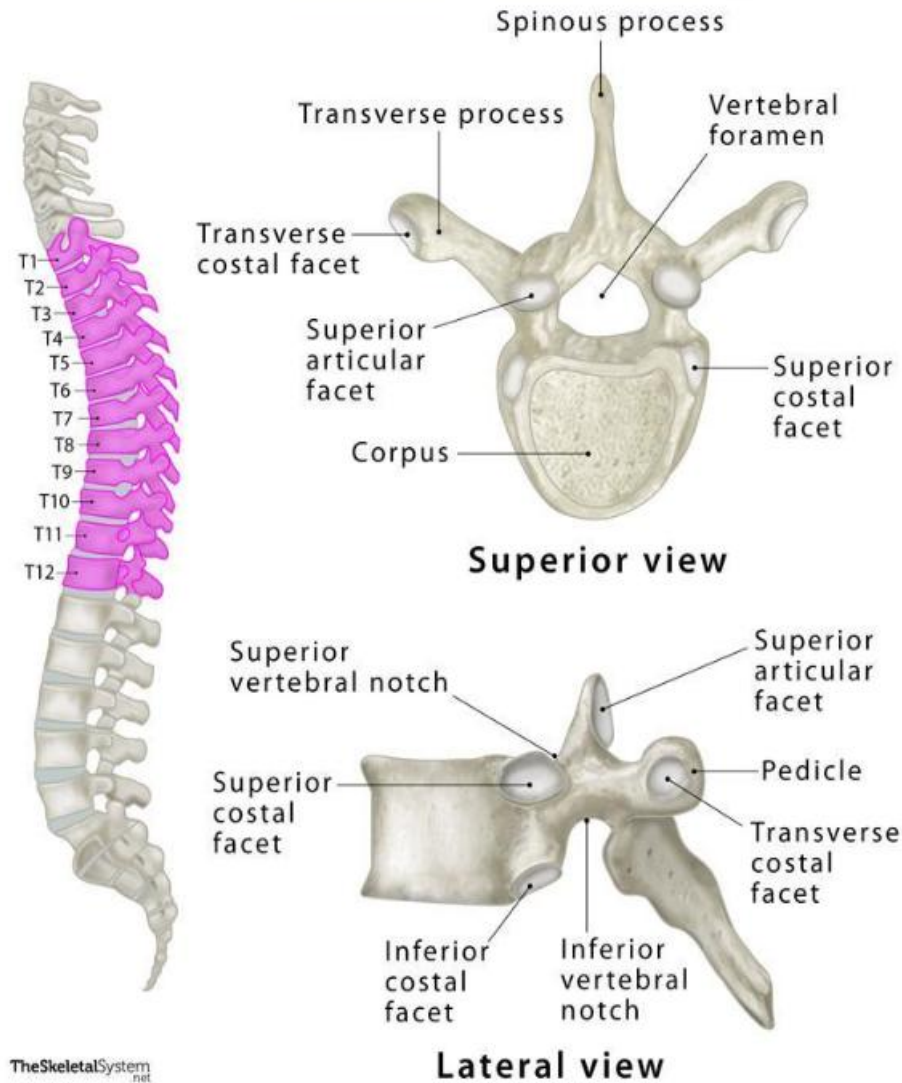
ORG10K0 – Fusion of Cervical Vertebral Joint with Nonautologous Tissue Substitute, Anterior Approach, Anterior Column, Open Approach

ORG1070 – Fusion of Cervical Vertebral Joint with Autologous Tissue Substitute, Anterior Approach, Anterior Column, Open Approach



Thoracic

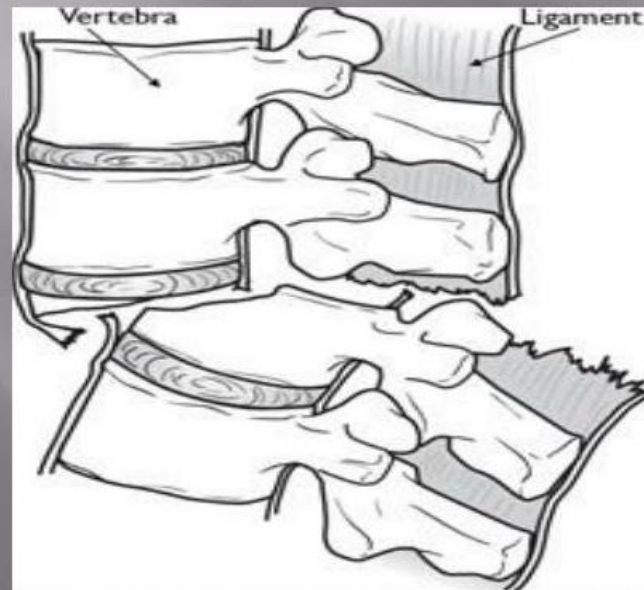
Thoracic Vertebrae



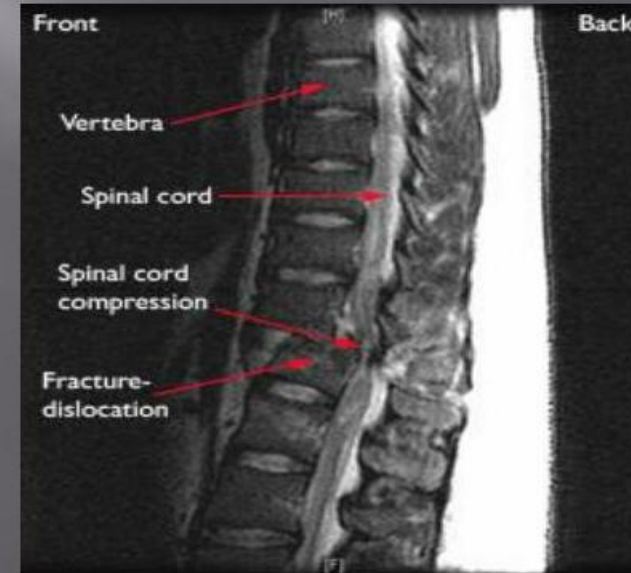


Fracture-dislocation. This is an unstable injury involving bone and/or soft tissue in which a vertebra may move off an adjacent vertebra (displaced). These injuries frequently cause serious spinal cord compression

A SIDE-VIEW OF A FRACTURE-DISLOCATION OF A THORACIC VERTEBRA.



A MAGNETIC RESONANCE IMAGING (MRI) SCAN OF A FRACTURE-DISLOCATION IN THE THORACIC SPINE. NOTE THE DISRUPTION OF THE SPINAL CORD.





Types of Spinal Fractures

Compression

collapsing as a result of pressure or degeneration of the spinal bones

Wedge

result from degeneration of the spine or trauma

Burst

when a disc/bone in your spine is extremely compressed, becoming crushed, spreading fragments throughout your spine





REPOSITION

- Open Approach
 - 0PS404Z – Reposition Thoracic Vertebra with Internal Fixation, Open Approach
 - 0PS40ZZ – Reposition Thoracic Vertebra, Open Approach (no device)
- Percutaneous Approach
 - 0PS434Z – Reposition Thoracic Vertebra with Internal Fixation, Percutaneous Approach
 - 0PS43ZZ – Reposition Thoracic Vertebra, Percutaneous Approach (no device)
- Percutaneous Endoscopic Approach
 - 0PS444Z – Reposition Thoracic Vertebra with Internal Fixation Device, Percutaneous Endoscopic Approach
 - 0PS44ZZ – Reposition Thoracic Vertebra, Percutaneous Endoscopic Approach (no device)



FUSION

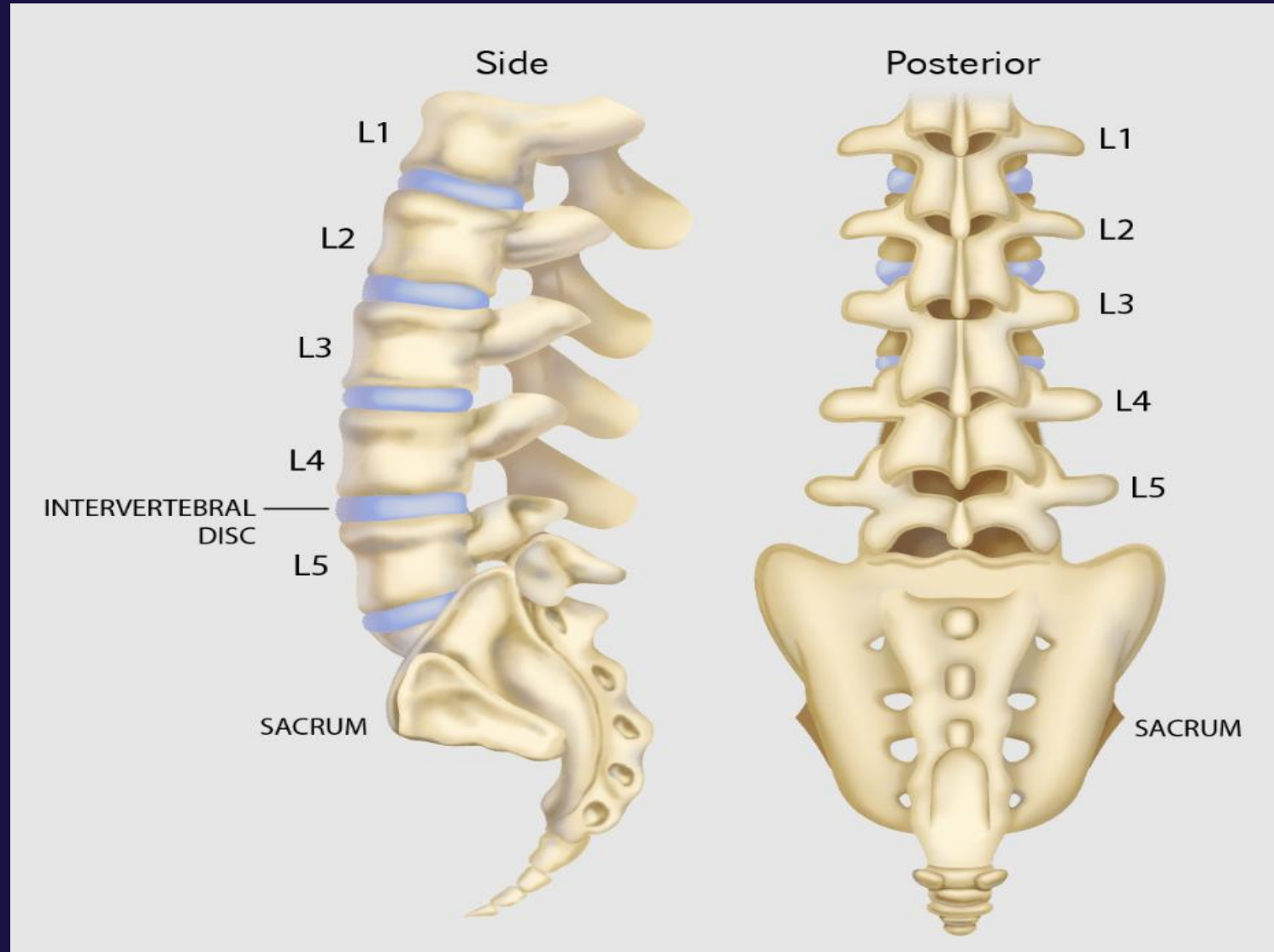
ORG6070 – Fusion of Thoracic Vertebral Joint with Autologous Tissue Substitute, Anterior Approach, Anterior Column, Open Approach

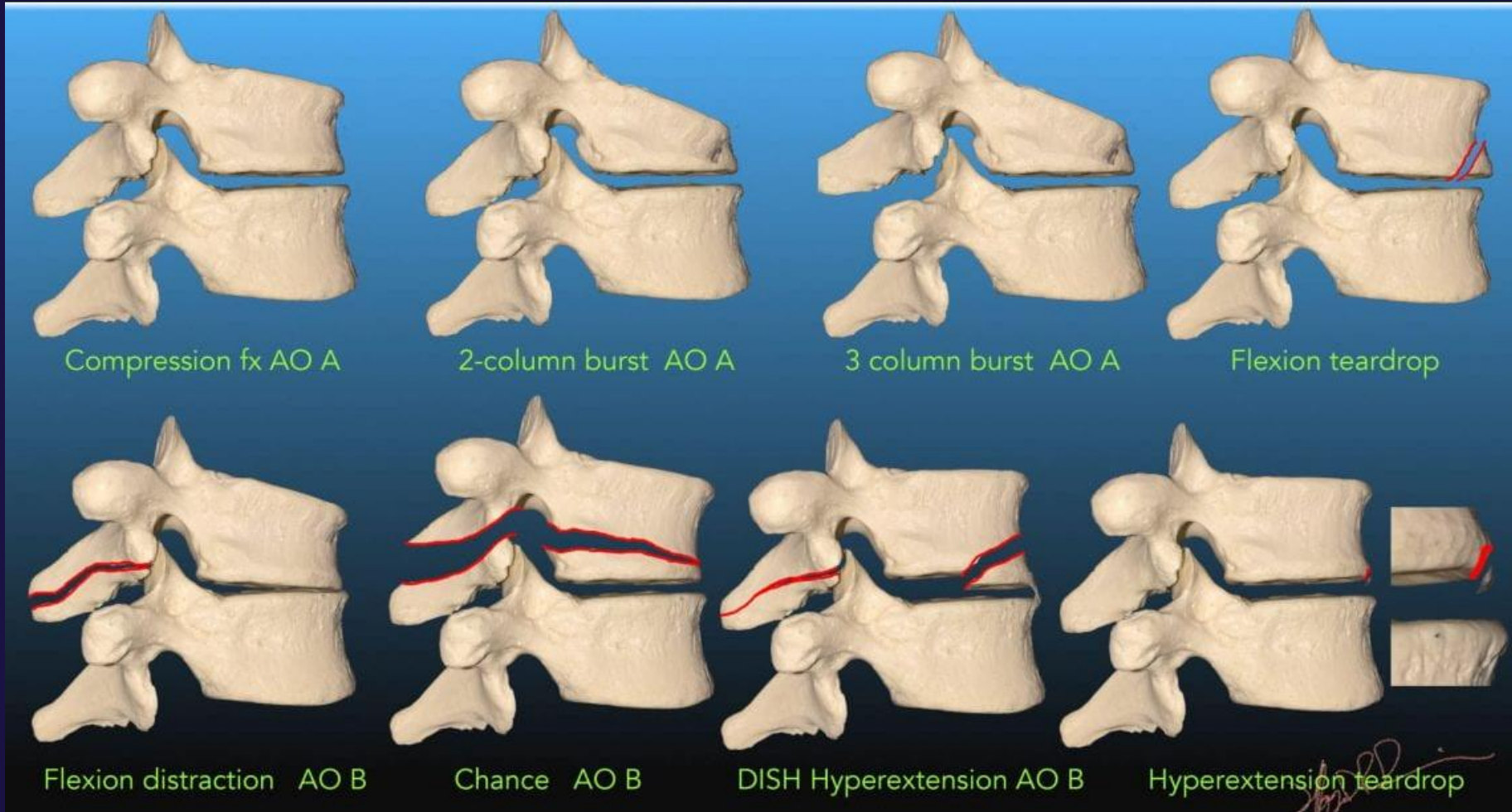
ORG60A0 – Fusion of Thoracic Vertebral Joint with Interbody Fusion Device, Anterior Approach, Anterior Column, Open Approach

ORG60AJ – Fusion of Thoracic Vertebral Joint with Interbody Fusion Device, Posterior Approach, Anterior Column, Open Approach



Lumbar







REPOSITION

- 0QS004Z – Reposition Lumbar Vertebra with Internal Fixation Device, Open Approach (e.g., pedicle screws, plates for ORIF)
- 0QS00ZZ – Reposition Lumbar Vertebra, Open Approach (no device)
- 0QS034Z – Reposition Lumbar Vertebra with Internal Fixation Device, Percutaneous Approach



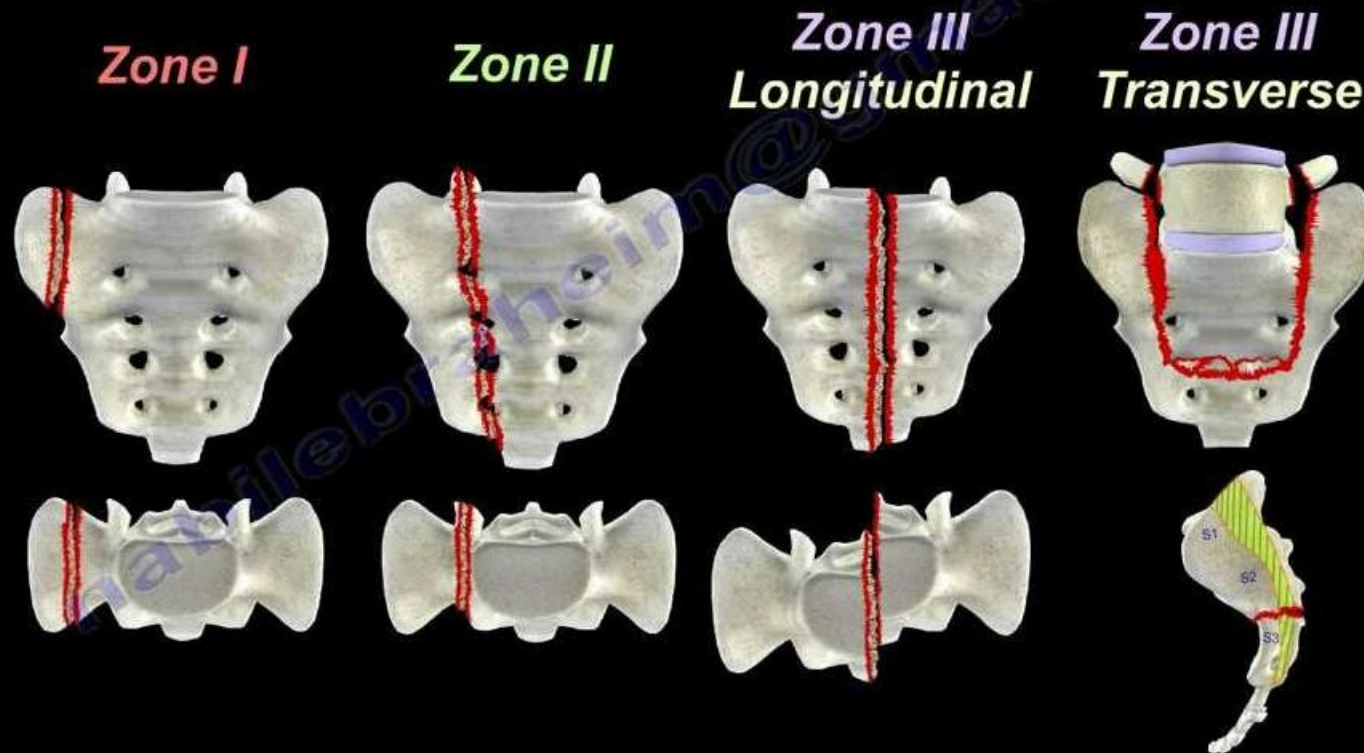
FUSION

- 0SG0071 – Fusion of Lumbar Vertebral Joint with Autologous Tissue Substitute, Posterior Approach, Posterior Column, Open Approach (posteriolateral fusion)
- 0SG00A1 – Fusion of Lumbar Vertebral Joint with Interbody Fusion Device, Posterior Approach, Posterior Column, Open Approach
- 0SG00AJ – Fusion of Lumbar Vertebral Joint with Interbody Fusion Device, Posterior Approach, Anterior Column, Open Approach (e.g., TLIF/PLIF)
- 0SG00A0- Fusion of Lumbar Vertebral Joint with Interbody Fusion Device, Anterior Approach, Anterior Column, Open Approach (e.g., ALIF)



SACRUM

Sacral Fractures Types of Fractures of the Sacrum Modified from the Denis Classification





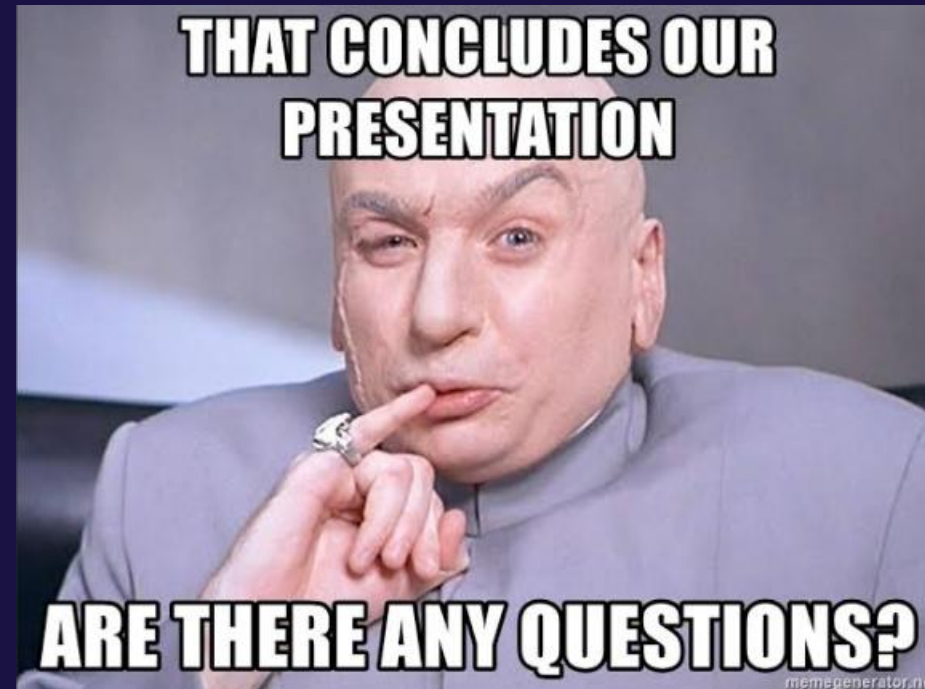
REPOSITION

- Open Approach (common for complex or ORIF)
 - 0QS104Z - Reposition Sacrum with Internal Fixation Device, Open Approach
 - 0QS10ZZ – Reposition Sacrum, Open Approach (no device)
- Percutaneous Approach (minimally invasive, e.g., percutaneous iliosacral screws or sacroplasty)
 - 0QS134Z – Reposition Sacrum with Internal Fixation Device, Percutaneous Approach
 - 0QS13ZZ – Reposition Sacrum Percutaneous Approach (no device)



SUMMARY







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