CPT Descriptor --- with Definition/Additional Description

### Pericardium

- **33015 Tube pericardiotomy**
  A tube is placed into the pericardium and sutured to the chest wall.

- **33020 Pericardiotomy for removal of clot or foreign body (primary procedure)**
  Removal of clot or foreign body from the pericardium.

- **33025 Creation of pericardial window or partial resection for drainage**
  The pericardium is opened to allow drainage into the pleural space.

- **33030 Pericardiectomy, subtotal or complete; without cardiopulmonary bypass**
  Most or all of the pericardial tissue is removed.

- **33031 Pericardiectomy, subtotal or complete; with cardiopulmonary bypass**
  Sternotomy or thoracotomy approach, most or all of the pericardial tissue is removed utilizing cardiopulmonary bypass.

- **33050 Excision of pericardial cyst or tumor**
  Removal of a cyst or tumor of the pericardium, not involving the heart.

### Cardiac Tumor

- **33120 Excision of intracardiac tumor, resection with cardiopulmonary bypass**
  Removal of a tumor from the inside of the heart, any defects caused by the removal are repaired.

- **33130 Resection of external cardiac tumor**
  Removal of a tumor from the surface of the heart, any defects caused by the removal are repaired.

### Pacemaker

- **33236 Removal of permanent epicardial pacemaker and electrodes by thoracotomy; single lead system**
  Removal of a single chambered device system. The epicardial wire is disconnected from the pacemaker generator. The generator is removed and the pocket closed. The wire is detached from the heart and withdrawn from the body.

- **33237 Removal of permanent epicardial pacemaker and electrodes by thoracotomy; dual lead system**
  Removal of a dual chambered device system. The epicardial wires are disconnected from the pacemaker generator. The generator is removed and the pocket closed. The wires are detached from the heart and withdrawn from the body.

- **33238 Removal of permanent transvenous electrode(s) by thoracotomy**
  The transvenous wires are disconnected from the generator. The pacemaker pocket is closed. The transvenous wires are removed from inside the heart and pulled out.

- **33243 Removal of single or dual chamber pacing cardioverter-defibrillator electrode(s); by thoracotomy**
  The automatic cardioverter-defibrillator (AICD) wires are disconnected from the device. The pocket is closed. The electrode wires are detached from the surface of the heart and removed.

### Supraventricular Ablation

- **33250 Operative ablation of supraventricular arrhythmogenic focus or pathway (e.g., Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); without cardiopulmonary bypass**
  Electrodes are placed on the surface of the beating heart to identify the source of the supraventricular arrhythmia. Incision or other ablation methods are used to interrupt the tract or focus of the arrhythmia.

- **33251 Operative ablation of supraventricular arrhythmogenic focus or pathway (e.g., Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); with cardiopulmonary bypass**
  Electrodes are placed on the surface of the beating heart to identify the source of the supraventricular arrhythmia. The atria are opened and the tract of focus interrupted by incision or other means of ablation.

- **33261 Operative ablation of ventricular arrhythmogenic focus with cardiopulmonary bypass**
  Electrodes are placed on the surface of the heart to identify the source of the ventricular arrhythmia. The identified area is excised or ablated.

### Repairs of the Heart and Great Vessels

- **Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); with cardiopulmonary bypass**
  Incision into the atrium is made, opening the heart to remove foreign body or thrombus, using cardiopulmonary bypass.

- **Great vessels are aorta, innominate artery, left common carotid artery, innominate vein, superior or**

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<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>33332</td>
<td>Insertion of graft, aorta or great vessels; with shunt bypass</td>
<td>The aorta or great vessel graft is sewn in utilizing shunt bypass.</td>
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<tr>
<td>33335</td>
<td>Insertion of graft, aorta or great vessels; with cardiopulmonary bypass</td>
<td>The aorta or great vessel graft is sewn in utilizing cardiopulmonary bypass.</td>
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<tr>
<td></td>
<td><strong>Aortic Valve</strong></td>
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<tr>
<td>33401</td>
<td>Valvuloplasty, aortic valve; open, with inflow occlusion</td>
<td>The aortic valve is repaired, usually by commissurotomy, without using cardiopulmonary bypass.</td>
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<tr>
<td>33403</td>
<td>Valvuloplasty, aortic valve; using transventricular dilation, with cardiopulmonary bypass</td>
<td>An incision is made into the apex of the left ventricle and dilators are inserted through the aortic valve until the valve is wide open. The scar tissue that has formed between the leaflets of the aortic valve is broken apart.</td>
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<tr>
<td>33404</td>
<td>Construction of apical-aortic conduit</td>
<td>A valve conduit is placed between the apex of the left ventricle and either the ascending, descending, thoracic or abdominal aorta</td>
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<tr>
<td>33412</td>
<td>Replacement, aortic valve; with transventricular aortic annulus enlargement (Kono procedure)</td>
<td>The aortic annulus is enlarged by anterior incision and patch repair, followed by replacement of the aortic valve.</td>
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<td><strong>Mitral Valve</strong></td>
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<tr>
<td>33420</td>
<td>Valvotomy (Commissurotomy), mitral valve; closed heart</td>
<td>A dilator is inserted across the mitral valve in the beating, closed heart to open the stenosed valve.</td>
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<tr>
<td>33422</td>
<td>Valvotomy (Commissurotomy), mitral valve; open heart, with cardiopulmonary bypass</td>
<td>The left atrium is opened to expose the mitral valve. The scar tissue between the mitral valve leaflets is cut and opened.</td>
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<td><strong>Tricuspid Valve and Prosthetic Valves</strong></td>
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<td>33468</td>
<td>Tricuspid valve repositioning and plication for Ebstein anomaly</td>
<td>The right atrium is opened and the abnormal valve is detached from within the right ventricle. The valve is then sewn into the correct location between the right atrium and right ventricle.</td>
</tr>
<tr>
<td>33496</td>
<td>Repair of non-structural prosthetic valve with cardiopulmonary bypass (separate procedure)</td>
<td>Repair of a perivalvular leak directly, without removing and replacing the old prosthetic valve.</td>
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<td><strong>Aorta</strong></td>
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<td>33861</td>
<td>Ascending aorta graft, with cardiopulmonary bypass, with coronary reconstruction</td>
<td>The aneurysm is opened and the tissue is repaired with a graft. Sutures may be required in the aortic valve to improve functioning. The coronary arteries are cut out of the aneurysm and reconstructed in the aortic root.</td>
</tr>
<tr>
<td>33870</td>
<td>Transverse arch graft, with cardiopulmonary bypass</td>
<td>The aneurysm is opened and repaired with a graft. The great arteries are sewn into a hole made in the top of the graft.</td>
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<tr>
<td>33875</td>
<td>Descending thoracic aorta graft, with or without bypass</td>
<td>The aneurysm located is opened and repaired with a graft.</td>
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<td><strong>Pulmonary Artery</strong></td>
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<td>33910</td>
<td>Pulmonary artery embolectomy; with cardiopulmonary bypass</td>
<td>Both pulmonary arteries are opened, and thromboembolic material removed.</td>
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<tr>
<td>33916</td>
<td>Pulmonary endarterectomy, with or without embolectomy, with cardiopulmonary bypass</td>
<td>Both pulmonary arteries are opened, and an endarterectomy is performed. Usually performed with circulatory arrest.</td>
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<td><strong>IABP</strong></td>
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<tr>
<td>33970</td>
<td>Insertion of intra-aortic balloon assist device through the femoral artery, open approach</td>
<td>An incision is made in the femoral artery and the IABP device is advanced until it reaches the aortic arch.</td>
</tr>
<tr>
<td>33971</td>
<td>Removal of intra-aortic balloon assist device including repair of femoral artery, with or without graft</td>
<td>The IABP is withdrawn from the incision made in the femoral artery. Repair of the femoral artery is included.</td>
</tr>
<tr>
<td>33973</td>
<td>Insertion of intra-aortic balloon assist device through the ascending aorta</td>
<td>The IABP is inserted directly into the aortic arch (or through a graft) and advanced into the thoracic aorta.</td>
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</tbody>
</table>
33974  **Removal of IABP from ascending aorta, including repair of the ascending aorta, with or without graft**. The IABP is removed and the defect is repaired with sutures or a graft.

**Innominate and Subclavian Artery**

34051  **Embolectomy or thrombectomy, with or without catheter, innominate, subclavian artery, by thoracic incision**

The subclavian, or innominate artery is opened and the blood clot or foreign body is removed. With a catheter, it is inserted below the clot, when withdrawn it captures the blood clot or foreign body for removal.

35021  **Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, innominate, subclavian artery, by thoracic incision**

The portion of the vessel that contains the aneurysm or disease is cut out and the ends sutured together or a graft is placed to bypass the area altogether. A patch may be used to increase the size of the artery at the diseased portion.