

THE AMERICAN BOARD OF UROLOGY, INC.
2022 LIFE LONG LEARNING PROGRAM
AND CUC PILOT
MANDATORY FORMAT FOR PREPARING PRACTICE CASE LOGS
For Applicants practicing outside of the U.S. ONLY

All logs are due April 1, 2022. Logs received after April 1st, 2022 must include a \$750 late fee. No logs will be accepted after April 15, 2022. **Retain a copy for your records: The Board office disposes of logs after successful completion of recertification. Your practice log must be six (6) consecutive months in length and must be within the period between August 1, 2020 and January 31, 2022.**

DO NOT SEND hospital computer printouts **or** include diagnosis/procedure codes in Lists 2 and 3. *** If you have been previously deferred due to submission of an inadequate log you must re-submit your prior log along with your current submission and include all case numbers in your summary.*

THREE SEPARATE lists are required. All lists must be typed using a font size **no smaller** than 10-point.

LIST 1: PROCEDURES SUMMARY. One master summary list of procedures performed, including every setting and facility, for which you were the primary urologist. **Complete the attached form.** Procedures summarized on this form must reflect all procedures from Lists 2 and 3. Note: Procedures performed by auxiliary personnel under your supervision must be included. Total the number of cases on the last page.

LIST 2: ADULT LOGS of hospital, ambulatory care facility and office procedures for which you were the primary urologist, listed separately for each setting and facility, in chronological order.

LIST 3: PEDIATRIC LOGS of hospital, ambulatory care facility and office procedures for which you were the primary urologist, listed separately for each setting and facility, in chronological order.

Please use the following **MANDATORY** format for Lists 2 and 3:

At the top of each page: Name of Institution, Your Name, List Number & Name (i.e., Mercy Hospital, John Smith, M.D., List No. 3—Adult Log)

| <u>^Case Number</u> | <u>Patient Age</u> | <u>Patient Sex</u> | <u>Date (Chron. Order)</u> | <u>Diagnosis (no codes)</u> | <u>Urologic Procedure (no codes)</u> | <u>Op/Post-op Morbidity Complication/Death</u> |
|-------------------------|------------------------|------------------------|--------------------------------|---------------------------------|--|--|
|-------------------------|------------------------|------------------------|--------------------------------|---------------------------------|--|--|

Printing the log horizontally will provide more space. If you practice adult or pediatric urology **exclusively**, only the pertinent list is required.

^Case # refers to the numerical record used by a facility to identify a particular patient (i.e. medical record #, patient #, admission #, hospital #, etc.) Names or numbers must insure patient anonymity: Social Security Numbers and full names will not be accepted.

SAMPLE FORMAT FOR LISTS 2 AND 3:

Following is a sample of what Lists 2 and 3 should look like. Please note that each setting (that is: hospital, ambulatory care/outpatient facility, and office) should be listed on **separate sheets of paper**. For example: if you performed procedures on adults at two different hospitals, one ambulatory care facility and two offices, you will have five different headings on your List 2. If you also performed pediatric procedures, follow the same format, but label the heading List 3.

Example of procedures performed in a hospital:

General Hospital, Dr. John Smith, List 2-Adult Log, Hospital Procedures

| Case # | Age | Sex | Date | Diagnosis | Procedure | Complication or Morbidity or Mortality |
|--------|-----|-----|----------|--------------|------------------------|--|
| 112233 | 65 | M | 6/1/2020 | BPH | TURP | |
| 224455 | 60 | M | 6/4/2020 | TCC bladder | CBF | |
| 335577 | 45 | F | 6/6/2020 | Kidney donor | Left donor nephrectomy | |

General Hospital Outpatient Clinic, Dr. John Smith, List 2-Adult Log, Ambulatory Care Procedures

| Case # | Age | Sex | Date | Diagnosis | Procedure | Complication or Morbidity or Mortality |
|---------|-----|-----|----------|---------------------|-------------------|--|
| 1010101 | 60 | F | 6/1/2020 | Hematuria | Cystoscopy | |
| 1020202 | 48 | M | 6/2/2020 | Elevated PSA | TRNBx | |
| 1030303 | 35 | M | 6/4/2020 | Kidney Stone | Lithotripsy | |
| 1040404 | 49 | F | 6/4/2020 | Stress Incontinence | Sling, cystoscopy | |

Example of procedures performed in an office:

Urology Associates of Anytown, Inc., Dr. John Smith, List 2-Adult Log, Office Procedures

| Case # | Age | Sex | Date | Diagnosis | Procedure | Complication or Morbidity or Mortality |
|---------|-----|-----|----------|--------------------------|----------------------|--|
| JW11111 | 65 | M | 6/1/2020 | Urinary retention | Uroflow | |
| SM22121 | 70 | M | 6/1/2020 | Incontinence | Needle EMG | |
| PT21211 | 54 | F | 6/1/2020 | Bladder calculus | Uroflow | |
| RB31414 | 67 | M | 6/1/2020 | Malignant bladder lesion | Bladder instillation | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

Beginning Date: _____ Ending Date: _____

Procedures performed by: _____

| # | Procedure | CPT code | Number done | | | | | |
|---|-----------|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |

LYMPHATIC (as separate procedure)

| | | | | | | | | |
|---|----------------------------------|-------|--|--|--|--|--|--|
| 1 | Lymph node biopsy | 38500 | | | | | | |
| 2 | Lymphadenectomy, inguinal | 38760 | | | | | | |
| 3 | Lymphadenectomy, ilioinguinal | 38765 | | | | | | |
| 4 | Lymphadenectomy, pelvic | 38770 | | | | | | |
| 5 | Lymphadenectomy, retroperitoneal | 38780 | | | | | | |
| 6 | Other (LYM) (Detail) | 38999 | | | | | | |
| 7 | Other (LYM) (Detail) | | | | | | | |

ABDOMEN

| | | | | | | | | |
|----|--------------------------------------|-------|--|--|--|--|--|--|
| 8 | Exploratory laparotomy | 49000 | | | | | | |
| 9 | Drainage, retroperitoneal abscess | 49060 | | | | | | |
| 10 | Excision, retroperitoneal tumor/cyst | 49200 | | | | | | |
| 11 | Herniorrhaphy, over 5 years | 49505 | | | | | | |
| 12 | Herniorrhaphy, incisional | 49560 | | | | | | |
| 13 | Closure of evisceration | 49900 | | | | | | |
| 14 | Other (ABD) (Detail) | 49999 | | | | | | |
| 15 | Other (ABD) (Detail) | | | | | | | |
| 16 | Other (ABD) (Detail) | | | | | | | |

ADRENAL

| | | | | | | | | |
|----|---------------------------|-------|--|--|--|--|--|--|
| 17 | Adrenalectomy, unilateral | 60540 | | | | | | |
| 18 | ... Bilateral | | | | | | | |
| 19 | Other (ADR) (Detail) | 60699 | | | | | | |
| 20 | Other (ADR) (Detail) | | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|---------------|-----------------------------------|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| KIDNEY | | | | | | | | |
| 21 | Drainage of perineal abscess | 50020 | | | | | | |
| 22 | Nephrostomy, open | 50040 | | | | | | |
| 23 | Nephrolithotomy, simple | 50060 | | | | | | |
| 24 | Nephrolithotomy, staghorn | 50075 | | | | | | |
| 25 | Pyelolithotomy | 50130 | | | | | | |
| 26 | Biopsy, needle | 50200 | | | | | | |
| 27 | Renal Biopsy, open | 50205 | | | | | | |
| 28 | Nephrectomy, simple, unilateral | 50220 | | | | | | |
| 29 | ... Simple, bilateral | | | | | | | |
| 30 | Nephrectomy, radical | 50230 | | | | | | |
| 31 | Nephroureterectomy | 50234 | | | | | | |
| 32 | Heminephroureterectomy | 50240 | | | | | | |
| 33 | Nephrectomy, partial | 50240 | | | | | | |
| 34 | Renal cyst, unroofing | 50280 | | | | | | |
| 35 | Harvest of cadaver kidneys | 50300 | | | | | | |
| 36 | Nephrectomy, donor | 50320 | | | | | | |
| 37 | Homotransplantation | 50360 | | | | | | |
| 38 | Autotransplantation | 50380 | | | | | | |
| 39 | Percutaneous Nephrostomy | 50395 | | | | | | |
| 40 | Pyeloplasty | 50400 | | | | | | |
| 41 | Pyeloplasty plus symphysiotomy | 50540 | | | | | | |
| 42 | ESWL | 50590 | | | | | | |
| 44 | Renal Ultrasound | 76775 | | | | | | |
| 43 | Other (KID) (Detail) | | | | | | | |
| URETER | | | | | | | | |
| 45 | Ureterolithotomy | 50610 | | | | | | |
| 46 | Ureterectomy (separate procedure) | 50660 | | | | | | |
| 47 | Ureterolysis | 50715 | | | | | | |
| 48 | Ureteroureterostomy | 50760 | | | | | | |
| 49 | Transureteroureterostomy | 50770 | | | | | | |
| 50 | Ureteroneocystostomy, unilateral | 50780 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|----|--|-------------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 51 | ... Bilateral | | | | | | | |
| 52 | Ureteroneocystostomy, with bladder flap or hitch | 50785 | | | | | | |
| 53 | Ureterosigmoidostomy | 50810 | | | | | | |
| 54 | Sigmoid conduit, separate procedure bilateral | 50815 | | | | | | |
| 55 | Replacement of ureter with bowel | 50840 | | | | | | |
| 56 | Cutaneous pyelostomy or ureterostomy, unilateral | 50860 | | | | | | |
| 57 | ... Bilateral | | | | | | | |
| 58 | Other (UTR) (Detail) | 53899 | | | | | | |
| 59 | Other (UTR) (Detail) | | | | | | | |
| 60 | Other (UTR) (Detail) | | | | | | | |
| 61 | Other (UTR) (Detail) | | | | | | | |

BLADDER

| | | | | | | | | |
|----|---|-------|--|--|--|--|--|--|
| 62 | Repair of enterovesical fistula | 44660 | | | | | | |
| 63 | Cystostomy, trocar | 51010 | | | | | | |
| 64 | Cystostomy, open | 51040 | | | | | | |
| 65 | Cystolithotomy | 51050 | | | | | | |
| 66 | Excision urachal cyst or tumor | 51500 | | | | | | |
| 67 | Diverticulectomy | 51525 | | | | | | |
| 68 | Partial cystectomy | 51550 | | | | | | |
| 69 | Partial cystectomy, with ureteroneocystostomy | 51565 | | | | | | |
| 70 | Simple cystectomy complete | 51570 | | | | | | |
| 71 | Simple cystectomy with cutaneous ureterostomy | 51580 | | | | | | |
| 72 | Radical cystectomy with ureterosigmoidostomy | 51585 | | | | | | |
| 73 | Simple cystectomy with ileal conduit | 51590 | | | | | | |
| 74 | Radical cystectomy with ileal conduit | 51595 | | | | | | |
| 75 | Radical cystectomy with continent diversion | 51596 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|---|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| | Pelvic exenteration with male urinary | | | | | | | |
| 76 | diversion | 51597 | | | | | | |
| 77 | Bladder instillation | 51720 | | | | | | |
| 78 | Cystometrics | 51725 | | | | | | |
| 79 | Complex cystometrogram | 51726 | | | | | | |
| 80 | Uroflowmetrics | 51741 | | | | | | |
| 81 | Needle EMG | 51785 | | | | | | |
| 82 | Voiding pressure studies | 51795 | | | | | | |
| 83 | Intra-abdominal voiding pressure | 51797 | | | | | | |
| 84 | Vesical neck plasty | 51800 | | | | | | |
| 85 | Urethropexy (Marshall-Marchetti) | 51840 | | | | | | |
| | Abdomino-vaginal vesical neck suspension, with or without endoscopic control (e.g., | | | | | | | |
| 86 | Stamey, Raz, modified Pereyra) | 51845 | | | | | | |
| 87 | Repair of rupture | 51860 | | | | | | |
| 88 | Cystostomy, closure | 51880 | | | | | | |
| | | | | | | | | |
| 89 | Repair of vesicovaginal fistula (abdominal) | 51900 | | | | | | |
| 90 | Repair of exstrophy, initial | 51940 | | | | | | |
| 91 | Enterocystoplasty | 51960 | | | | | | |
| 92 | Vesicostomy | 51980 | | | | | | |
| 93 | Bladder biopsy | 52204 | | | | | | |
| 94 | Bladder Tumor Fulgeration | 52224 | | | | | | |
| 95 | Cystourethroscopy with removal of calculus | 52352 | | | | | | |
| 96 | Cystourethroscopy with lithotripsy | 52353 | | | | | | |
| | Urethroplasty with tubularization of posterior urethra and/or lower bladder, for | | | | | | | |
| 97 | incontinence | 53443 | | | | | | |
| 98 | Dilation of urethral stricture | 53620 | | | | | | |
| 99 | Anterior colporrhaphy | 57240 | | | | | | |
| 100 | Combined anteroposterior colporrhaphy | 57260 | | | | | | |
| 101 | Sling operation for stress incontinence | 57288 | | | | | | |
| 102 | Repair of vesicovaginal fistula (vaginal) | 57320 | | | | | | |
| 103 | Other (BLA) (Detail) | 53899 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|-----------------------------|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 104 | Other (BLA) (Detail) | | | | | | | |
| 105 | Other (BLA) (Detail) | | | | | | | |
| 106 | Ultrasound of Bladder (PVR) | 76856 | | | | | | |

PROSTATE

| | | | | | | | | |
|-----|--|-------|--|--|--|--|--|--|
| 107 | Needle Bx Prostate | 55700 | | | | | | |
| 108 | Prostatectomy, perineal, radical | 55810 | | | | | | |
| 109 | Prostatectomy, perineal, radical plus pelvic lymphadenectomy | 55815 | | | | | | |
| 110 | Prostatectomy, suprapubic | 55821 | | | | | | |
| 111 | Prostatectomy, retropubic, simple | 55831 | | | | | | |
| 112 | Prostatectomy, retropubic, radical | 55840 | | | | | | |
| 113 | Prostatectomy, retropubic, radical plus pelvic lymphadenectomy | 55845 | | | | | | |
| 114 | Open insertion of radioactive materials | 55860 | | | | | | |
| 115 | ... Percutaneous insertion of radioactive materials | | | | | | | |
| 116 | Other (PRO) (Detail) | 55899 | | | | | | |
| 117 | Other (PRO) (Detail) | | | | | | | |
| 118 | Other (PRO) (Detail) | | | | | | | |

URETHRA

| | | | | | | | | |
|-----|---|-------|--|--|--|--|--|--|
| 119 | Closure, urethro-rectal fistula | 45820 | | | | | | |
| 120 | Urethrostomy, external (separate procedure) | 53000 | | | | | | |
| 121 | Urethrostomy, perineal | 53010 | | | | | | |
| 122 | Meatotomy | 53020 | | | | | | |
| 123 | Incise and drain periurethral abscess | 53040 | | | | | | |
| 124 | Biopsy of urethra | 53200 | | | | | | |
| 125 | Urethrectomy, separate procedure | 53215 | | | | | | |
| 126 | Diverticulectomy (female) | 53230 | | | | | | |
| 127 | Diverticulectomy (male) | 53235 | | | | | | |
| 128 | Excision of urethral prolapse | 53275 | | | | | | |
| 129 | Urethroplasty for anterior stricture | 53400 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|--------------|--|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 130 | ... Staged Urethroplasty for anterior stricture, one | 53405 | | | | | | |
| 131 | stage | 53410 | | | | | | |
| 132 | Transpubic repair membranous stricture | 53415 | | | | | | |
| 133 | ... Perineal | | | | | | | |
| 134 | Reconstruction for incontinence | 53440 | | | | | | |
| 135 | Prosthesis for incontinence | 53445 | | | | | | |
| 136 | Meatoplasty | 53450 | | | | | | |
| 137 | Repair, urethral injury | 53505 | | | | | | |
| 138 | Fistula repair | 53520 | | | | | | |
| 139 | Urethral dilation male sound first | 53600 | | | | | | |
| 140 | Urethral dilation female | 53660 | | | | | | |
| 141 | Straightening of chordee with or without mobilization of urethra | 54300 | | | | | | |
| | Chordee correction for first stage | | | | | | | |
| 142 | hypospadias repair | 54304 | | | | | | |
| 143 | Magpi/Mathieu | 54322 | | | | | | |
| 144 | Major urethroplasty | 54328 | | | | | | |
| 145 | Penoscrotal hypospadias | 54332 | | | | | | |
| 146 | Repair of epispadias | 54380 | | | | | | |
| 147 | Repair of epispadias with incontinence | 54385 | | | | | | |
| 148 | Closure, urethro-vaginal fistula | 57310 | | | | | | |
| 149 | Other (UTA) (Detail) | 53899 | | | | | | |
| 150 | Other (UTA) (Detail) | | | | | | | |
| PENIS | | | | | | | | |
| 151 | Revascularization (microsurgery) | 37788 | | | | | | |
| 152 | Meatotomy: Infant | 53025 | | | | | | |
| 153 | Destruction of lesion, penis | 54050 | | | | | | |
| 154 | Laser destruction, lesion penis | 54057 | | | | | | |
| 155 | Surgical excision, lesion penis | 54060 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | | |
|-----|---|----------|-------------|----------|---------------|-----------|----------|---------------|--|
| | | | ADULT | | | PEDIATRIC | | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR | |
| | Destruction of lesion(s), penis (e.g., condyloma papilloma, molluscum, contagiosum, herpetic vesicle), extensive, | | | | | | | | |
| 156 | any method | 54065 | | | | | | | |
| 157 | Biopsy, penis | 54100 | | | | | | | |
| 158 | Amputation, partial | 54120 | | | | | | | |
| 159 | Amputation, complete | 54125 | | | | | | | |
| | Amputation plus ilioinguinal | | | | | | | | |
| 160 | (inguinofemoral) lymphadenectomy | 54130 | | | | | | | |
| 161 | Circumcision, Newborn using clamp | 54150 | | | | | | | |
| 162 | Circumcision | 54161 | | | | | | | |
| 163 | Rigidity test | 54250 | | | | | | | |
| 164 | Correction of chordee without hypospadias | 54304 | | | | | | | |
| 165 | Insertion of penile prosthesis, non-inflatable | 54400 | | | | | | | |
| 166 | Insertion of inflatable penile prosthesis | 54405 | | | | | | | |
| 167 | Shunt, cavernosum to saphenous vein | 54420 | | | | | | | |
| 168 | Shunt, cavernosum to spongiosum, open | 54430 | | | | | | | |
| | Shunt, cavernosum to spongiosum, | | | | | | | | |
| 169 | percutaneous | 54435 | | | | | | | |
| 170 | Repair of major injury | 54440 | | | | | | | |
| 171 | Drainage, scrotal wall abcess | 55100 | | | | | | | |
| 172 | Other (PEN) (Detail) | 55899 | | | | | | | |
| 173 | Other (PEN) (Detail) | | | | | | | | |
| 174 | Other (PEN) (Detail) | | | | | | | | |

TESTIS

| | | | | | | | | | |
|-----|---------------------------------|-------|--|--|--|--|--|--|--|
| 175 | Biopsy, testis | 54505 | | | | | | | |
| 176 | Excision lesion of testis | 54510 | | | | | | | |
| 177 | Orchiectomy, simple, unilateral | 54520 | | | | | | | |
| 178 | ... Bilateral | | | | | | | | |
| 179 | Orchiectomy, inguinal (radical) | 54530 | | | | | | | |

List 1: Procedures Summary

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES

| | | | | | | | | |
|-----|----------------------------------|-------|--|--|--|--|--|--|
| 180 | Reduction plus fixation, torsion | 54600 | | | | | | |
| 181 | Orchiopexy, unilateral | 54640 | | | | | | |
| 182 | ... Bilateral | | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|-----------------------------------|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 183 | Insertion testicular prosthesis | 54660 | | | | | | |
| 184 | Repair testis (trauma) | 54670 | | | | | | |
| 185 | Vasovasostomy | 55400 | | | | | | |
| 186 | Vasotomy for vasogram plus biopsy | 55300 | | | | | | |
| 187 | Other (TES) (Detail) | 55899 | | | | | | |
| 188 | Other (TES) (Detail) | | | | | | | |

EPIDIDYMIS AND SPERMATIC CORD

| | | | | | | | | |
|-----|----------------------------------|-------|--|--|--|--|--|--|
| 189 | Biopsy epididymis | 54800 | | | | | | |
| 190 | Excision lesion epididymis | 54830 | | | | | | |
| 191 | Excision spermatocele | 54840 | | | | | | |
| 192 | Epididymectomy, unilateral | 54860 | | | | | | |
| 193 | Epididymovasostomy, unilateral | 54900 | | | | | | |
| 194 | Ligation internal spermatic vein | 55530 | | | | | | |
| 195 | Other (EPI) (Detail) | 55899 | | | | | | |
| 196 | Other (EPI) (Detail) | | | | | | | |

SCROTUM

| | | | | | | | | |
|-----|--------------------------|-------|--|--|--|--|--|--|
| 197 | Hydrocelectomy | 55040 | | | | | | |
| 198 | Incise and drain abscess | 55100 | | | | | | |
| 199 | Resection of scrotum | 55150 | | | | | | |
| 200 | Repair scrotum (trauma) | 55175 | | | | | | |
| 201 | Vasectomy | 55250 | | | | | | |
| 202 | Other (SCR) (Detail) | 55899 | | | | | | |
| 203 | Other (SCR) (Detail) | | | | | | | |

ENDOSCOPY

| | | | | | | | | |
|-----|--|-------|--|--|--|--|--|--|
| 204 | Percutaneous nephroscopy with calculus removal or lithotripsy up to 2 cm | 50080 | | | | | | |
| 205 | ... Over 2 cm | 50081 | | | | | | |
| 206 | Percutaneous nephroscopy | 50551 | | | | | | |
| 207 | Percutaneous endopyeloplasty | 50575 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|--|-------------|-------------|-------------------|---------------|--------|-----------------------|---------------|
| | | | OFFICE | ADULT HOSPITAL | AMB. CARE CTR | OFFICE | PEDIATRIC HOSPITAL | AMB. CARE CTR |
| 208 | Endoscopic injection of implant material into the submucosal tissue of the urethra and/or bladder neck | 51715 | | | | | | |
| 209 | Cystoscopy | 52000 | | | | | | |
| 210 | Cystoscopy plus ureteral catheterization | 52005 | | | | | | |
| 211 | ureter and/or renal pelvis | 52007 | | | | | | |
| 212 | Cystoscopy plus cup biopsy, bladder | 52204 | | | | | | |
| 213 | Cystoscopy and fulguration | 52224 | | | | | | |
| 214 | Cystoscopy, TUR bladder tumor(s) (<2 cm) | 52234 | | | | | | |
| 215 | ... Medium bladder tumor(s) (2 - 5 cm) | 52235 | | | | | | |
| 216 | ... Large bladder tumor(s) | 52240 | | | | | | |
| 217 | Cystoscopy, hydrodilation of bladder | 52260 | | | | | | |
| 218 | Cystourethroscopy with direct vision internal urethrotomy | 52276 | | | | | | |
| 219 | Cystoscopy, calibration and dilation, stricture | 52281 | | | | | | |
| 220 | Cystourethroscopy with removal of foreign body, calculus or ureteral stent from urethra or bladder (separate procedure) simple | 52310 | | | | | | |
| 221 | ... Complicated | 52315 | | | | | | |
| 222 | Litholapaxy; crushing or fragmentation of calculus by any means in bladder and removal of fragments simple, small <2.5 cm | 52317 | | | | | | |
| 223 | ... Large or complicated >2.5 cm | 52318 | | | | | | |
| 224 | Cystoscopy, extraction ureteral calculus | 52320 | | | | | | |
| 225 | Cystoscopy with placement of ureteral stent | 52332 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|--|----------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 227 | Ureteroscopy with biopsy or fulguration | 52354 | | | | | | |
| 228 | Ureteroscopy with resection of tumor | 52355 | | | | | | |
| 229 | Cystourethroscopy, with incision, fulguration, or resection of bladder neck and/or posterior urethra (congenital valves, obstructive hypertrophic mucosal folds) | 52400 | | | | | | |
| 230 | Transurethral incision of prostate | 52450 | | | | | | |
| 231 | TUR bladder neck | 52500 | | | | | | |
| 232 | Transurethral resection of prostate | 52601 | | | | | | |
| 233 | TUR for regrowth of obstructive tissue longer than one year post-operative | 52630 | | | | | | |
| 234 | Laser prostatectomy - coagulation | 52647 | | | | | | |
| 235 | Laser prostatectomy - vaporization | 52648 | | | | | | |
| 236 | Other (ENDO) (Detail) | 53899 | | | | | | |
| 237 | Other (ENDO) (Detail) | | | | | | | |
| 238 | Other (ENDO) (Detail) | | | | | | | |
| 239 | Other (ENDO) (Detail) | | | | | | | |
| 240 | Other (ENDO) (Detail) | | | | | | | |
| 241 | Other (ENDO) (Detail) | | | | | | | |
| 242 | Other (ENDO) (Detail) | | | | | | | |

LAPAROSCOPY

| | | | | | | | | |
|-----|--|-------|--|--|--|--|--|--|
| 243 | Laparoscopy, diagnostic | 49320 | | | | | | |
| 244 | Laparoscopic lymphadenectomy/pelvic | 38571 | | | | | | |
| 245 | Laparoscopic lymphadenectomy/retroperitoneal, single or multiple | 38570 | | | | | | |
| 246 | Laparoscopic lymphadenectomy/retroperitoneal, bilateral | 38571 | | | | | | |
| 247 | Laparoscopic repair of inguinal hernia | 49650 | | | | | | |
| 248 | Laparoscopic ligation of spermatic vessels | 55550 | | | | | | |

LIST 1: OFFICE, HOSPITAL AND AMBULATORY CARE FACILITY PROCEDURES FOR SIX MONTHS

| # | Procedure | CPT code | Number done | | | | | |
|-----|--|-------------|-------------|----------|---------------|-----------|----------|---------------|
| | | | ADULT | | | PEDIATRIC | | |
| | | | OFFICE | HOSPITAL | AMB. CARE CTR | OFFICE | HOSPITAL | AMB. CARE CTR |
| 249 | Laparoscopic nephrectomy | 50545 | | | | | | |
| 250 | Laparoscopic orchiopexy, first or one stage | 54699 | | | | | | |
| 251 | ... Second stage | 54699 | | | | | | |
| 252 | Laparoscopy, adrenalectomy | 60650 | | | | | | |
| 253 | Laparoscopy, partial nephrectomy | 50546 | | | | | | |
| 254 | Laparoscopy, nephroureterectomy | 50548 | | | | | | |
| 255 | Laparoscopy, prostatectomy | | | | | | | |
| 256 | Laparoscopy, destruction of renal lesion (e.g. cryotherapy) | 50541 | | | | | | |
| 257 | Laparoscopy, other (Detail) | 53899 | | | | | | |
| 258 | Laparoscopy, other (Detail) | | | | | | | |
| 259 | Laparoscopy, other (Detail) | | | | | | | |

OFFICE VISITS

| | | | | | | | | |
|--------------------------------|------------------------------|-------|--|--|--|--|--|--|
| 260 | New patient | 99201 | | | | | | |
| 261 | Established patient | 99211 | | | | | | |
| 262 | Normal newborn | 99432 | | | | | | |
| 263 | Consultation | 99271 | | | | | | |
| 264 | Outpatient visit-established | 99211 | | | | | | |
| 265 | Outpatient visit-new patient | 99201 | | | | | | |
| 266 | Prolonged services | 99354 | | | | | | |
| TOTAL OF ALL PROCEDURES | | | | | | | | |

You may submit your completed log forms by scanning them into a pdf file, logging into your Diplomate Portal and using the "Document uploader"