

All Vermont Acute Care Community Hospitals

Table 2B - Count of Top 2009 Outpatient Procedures

Procedures displayed include each community hospital's top outpatient surgical procedures by volume. These pages provide the number of cases for these procedures for the period of 10/1/08 to 9/30/09, based on patients' primary procedures. For individual hospitals, procedures having fewer than 15 cases are excluded. Blanks in the table indicate that the hospital has fewer than 15 cases for the procedure or the hospital does not perform that particular procedure. The hospital, however, may perform a similar procedure under a different code which may not be shown. Please call the hospital for more information. Note: the surgical cases shown include some anesthetic procedures for the treatment of pain not connected with surgery.

[Click here for a list of hospitals and links to each hospital's discount and free care policies.](#)

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* "Clinical Classification System" (CCS) is a grouping of similar ICD-9 codes, such as all those affecting a given organ system of the body. "No data" indicates that based on the methodology described above, there are no procedures in that particular grouping.

Outpatient Procedures		Hospital System		Vermont Community Hospitals - Counts Displayed Include Each Hospital's Top Procedures By Volume													
CCS and Procedure Code ¹	Procedure Description	System Number of Cases ²	System Average Gross Charge ³	Brattleboro Memorial Hospital	Central Vermont Medical Center	Copley Hospital	Fletcher Allen Health Care	Gifford Medical Center	Grace Cottage Hospital ⁴	Mt Ascutney Hospital & Health Center	North Country Hospital	Northeastern Vermont Regional Hospital	Northwestern Medical Center ⁵	Porter Hospital	Rutland Regional Medical Center	Southwestern Vermont Medical Center	Springfield Hospital
CCS 1	Operations on the nervous system																
0331	Lumbar puncture to obtain a sample of spinal fluid	299	\$3,780		20		140	15			19			25		80	
0391	Spinal anesthesia	894	\$1,508				641				151		102				
0392	Injection of a nonanesthetic around the spinal cord, commonly a steroidal substance	3,898	\$1,570	138	552	183	339	105		180			534		1,663	204	
0396	Percutaneous procedure to relieve spinal pain	160	\$5,269												160		
042	Nerve destruction to relieve pain	849	\$4,073				768			29			52				
0443	Carpal tunnel surgery	1,513	\$3,622	83	94	79	594	29		39	81	74	88	93	90	96	73
0481	Nerve block to induce anesthesia	1,807	\$1,362		127	199	1,029			38	74		88	22	185		45
CCS 2	Operations on the endocrine system																
0611	Removal of a sample of thyroid gland using a thin needle	346	\$1,264				180	63								103	
CCS 3	Operations on the eye																
0881	Repair of cut on lid of eye	409	\$1,205		43	22	139				15		85	48		23	34
1212	Surgery on the iris of the eye	88	\$1,364				20					30			38		
1259	Operation to improve circulation of internal eye fluid	102	\$1,450				15					64			23		
1341	Cataract surgery (Northwestern code 133)5	5,059	\$4,713	329	295	123	1,103	691		133	308	511	243	488	569	68	198
1364	Incision in eye after cataract surgery	388	\$955	89	58		40				61	79			15	46	
1370	Insertion of an artificial lens in the eye	15	\$6,191					15									
1371	Insertion of an artificial lens in the eye, with removal of natural lens due to cataract	148	\$5,162	28			27			74							19
149	Eye surgery on the retina and other internal parts of the eye	1,340	\$4,584				1,340										
CCS 4	Operations on the ear																
2001	Tube placement in the ear drum	1,164	\$2,427	60	70		679				33		38	121	67	53	43

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CCS 5	Operations on the nose, mouth, and pharynx																
2188	Plastic surgery of the nasal septum	157	\$7,103				71				34				52		
2301	Childhood tooth extraction	60	\$7,599			60											
232	Repair of tooth	173	\$6,219				143										30
2341	Dental procedure placing an artificial crown on a damaged tooth	126	\$7,260			76	50										
282	Removal of tonsils without removing the adenoids	325	\$4,690	36	38		121				24	15	17	35	22	17	
283	Tonsillectomy and removal of the adenoids	291	\$4,499	36	21		101				19	21	18	33	21	21	
CCS 7	Operations on the cardiovascular system																
3722	Cardiac catheterization	761	\$8,901				727								34		
3893	Placement of a catheter in a vein	554	\$2,282				131								16	407	
CCS 9	Operations on the digestive system																
4292	Dilating a narrowed section of esophagus	351	\$3,580	33	54		185								79		
4513	Visualization of small intestine using a fiberoptic endoscope, via mouth	1,708	\$2,515	33	232		788	24		29	64	22	32	24	328	31	101
4516	Visualization and biopsy of esophagus, stomach, and first part of small intestine using a fiberoptic endoscope, via mouth	4,345	\$2,763	222	212	119	1,887	31		35	175	172	608	127	270	380	107
4523	Visualization of large intestine with an endoscope, via rectum	10,339	\$1,969	545	1,474	285	3,193	240		250	584	374	737	284	1,590	310	473
4525	Biopsy (taking a small tissue sample) of lower intestine using a fiberoptic endoscope, via rectum	3,168	\$2,602	265	156	30	748	217		31	68	127	217	77	166	1,003	63
4542	Visualization and polyp removal from large intestine with an endoscope, via rectum	6,850	\$2,722	235	550	527	2,467			70	134	270	601	711	440	670	175
4824	Visualization and biopsy of last part of large intestine using a fiberoptic endoscope, via rectum	356	\$2,007	51			64					21	31	17	30	142	
4836	Visualization and polyp removal from last part of large intestine using a fiberoptic endoscope, via rectum	1,000	\$2,596	48	201		346				35	29	94	93	89	50	15
5123	Removal of gallbladder using fiberoptic scopes and instruments, via small incisions in the abdominal wall	1,179	\$9,632	59	136	50	261			34	74	39	198	44	131	123	30
5303	Repair of a hernia in the groin using artificial fabrics	309	\$6,512	17	57		98					15	30	27	36		29
5491	Drainage of abdominal fluid through a small incision	273	\$2,573	63	19		134									57	

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CCS 10	Operations on the urinary system																
5732	Endoscopy of the bladder	971	\$1,011		202	78	691										
5749	Surgical removal of a lesion of the urinary bladder using fiberoptic instruments	312	\$5,569	29	53		93						29	27	22	33	26
5794	Bladder Catheter Insertion	690	\$1,699	31			316			55	18		143			127	
CCS 11	Operations on the male genital organs																
6011	Removal of a sample of prostate gland using a thin needle	53	\$2,034					25				28					
6021	Removal of the prostate using a laser guided by ultrasound (TULIP)	43	\$11,642					22							21		
640	Removal of the penile foreskin	339	\$1,806		108		76	31				18	19			42	45
CCS 12	Operations on the female genital organs																
6823	Surgical treatment for uterine bleeding	295	\$6,349		21	30	61						99	15	38	31	
6909	D & C (dilation and curettage of the uterus)	645	\$4,266		103	18	225					21	63	17	65	95	38
CCS 13	Obstetrical procedures																
7534	Monitoring of the fetus in pregnancy	3,409	\$648		441	405	1,045				309	486	369			336	18
7535	Monitoring of fetus in labor	639	\$544		135			391			113						
CCS 14	Operations on the musculoskeletal system																
7751	Removal of a bunion with soft tissue correction and osteotomy	174	\$7,492				46					21	30	29	15	33	
7756	Orthopedic surgical procedure to straighten a deformed toe	77	\$5,035				30	15								32	
7759	Removal of a bunion	24	\$11,434					24									
7902	Repair of a fracture in the lower arm without surgery	394	\$2,674	37	17	25	216						28			54	17
7932	Surgical repair of a fracture in the lower arm using orthopedic hardware	272	\$12,387		28	27	77				20		17	31	28	29	15
7936	Surgical repair of a fracture in the lower leg using orthopedic hardware	257	\$11,176	18	35	24	61				19		21	29	23	27	
806	Knee surgery on the cartilage of the knee	1,787	\$5,800	187	125	63	600	35		32	39	63	92	73	272	137	69

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8145	Knee surgery on internal ligaments	372	\$14,390	23	24	36	156								101	15	17
8147	Surgical repair of a knee problem without a specific procedure code	226	\$8,893			45	64				20		55		19	23	
8183	Surgical procedure of the shoulder	425	\$10,531	51	44	64	114					15	42		61	34	
8192	Injection into joint or ligament	1,751	\$928		33	282	896	91		33	16		76	26	194	104	
8201	Surgery on the covering of the tendon of the hand	571	\$1,834	44	35	20	274			15		41	18	19	57	32	16
8363	Surgical repair of a shoulder injury	518	\$14,851	36	39	59	175				18	20	18	24	47	59	23
CCS 15	Operations on the integumentary system																
8511	Breast Biopsy	690	\$3,456	52	222	21	137								52	190	16
8521	Removal of breast mass	630	\$5,638	23	92	24	166				44	15	63	19	98	69	17
8604	Opening and drainage of a skin lesion	1,444	\$1,064	36	185	62	538			28	71		243	135	18	128	
8605	Removal of a foreign body or device from the skin	578	\$1,793		49	24	278				22		45	49	25	61	25
8607	A tube fitted inside a vein to allow drug injections	425	\$6,861	34	40		204				24	26			50	47	
8609	Surgical incision of the skin and underlying tissues	62	\$785														62
8611	Surgical removal of a small sample of skin and underlying tissue for testing	1,104	\$902		15		1,089										
863	Non-surgical skin treatments	3,071	\$1,728	23	129	94	1,978	43		28	51	32	296	68	206	106	17
8659	Repair of cuts of the skin	7,180	\$914	510	825	513	1,923			232	450		898	633		733	463

Sorted by CCS and procedure codes and alphabetically by Hospital.

Data source is the 2009 Vermont Uniform Hospital Discharge Data Set as of February 2009. Please see the Act 53 Pricing FAQ's for more information.

¹ Based on International Classification of Diseases - 9th Edition (ICD-9) codes, procedure codes that define outpatient procedures.

"Clinical Classification System" (CCS) is a grouping of similar ICD-9 codes, such as all those affecting a given organ system of the body.

² System Number of Cases includes only the number of cases for those hospitals with data shown in the table. Records with zero charges are not included

³ System Average Gross Charge is a weighted average based on each hospital's average charge and number of procedures. Includes all hospitals having 15 or more cases.

⁴ Grace Cottage Hospital has no procedures with 15 or more cases.

⁵ For cataract surgery, Northwestern's codes 133 and 1341 are combined under code 1341.