

HTG162 – Laparoscopic mobilisation of the greater omentum for breast reconstruction

SNOMED CT provides clinical terms for entry into the patient record to record clinical information relevant to that encounter; the mandated classifications (OPCS-4 or ICD-10) provide a method to collect and aggregate data to allow accurate and consistent data analysis.

Procedure and device:

SNOMED CT preferred term (concept ID)

Reconstruction of breast using pedicled omental flap (761111000000107)

OPCS-4 code(s):

B39.4 Reconstruction of breast using pedicled omental flap

T36.5 Creation of omental flap

Y75.2 Laparoscopic approach to abdominal cavity NEC

or

B39.5 Reconstruction of breast using free omental flap

T36.5 Creation of omental flap

Y75.2 Laparoscopic approach to abdominal cavity NEC

Note: In addition an appropriate code for the breast cancer surgery, and axillary node clearance, if performed,, is assigned if the reconstruction and the breast cancer surgery, and axillary clearance, are performed during the same procedure.

Diagnosis or health condition:

SNOMED CT preferred term (concept ID)

ICD-10 code(s):

Clinical coding recommendations for NICE guidance

For each published interventional procedure and medical technologies guidance, we work with NHS Digital to provide relevant clinical coding information.

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The UK Edition of SNOMED CT is managed by the Clinical Terminology Service of NHS Digital. For further information including licensing, see [UK Terminology Centre — NHS Digital](#).

The Clinical Classifications Service of NHS Digital is the central definitive source for clinical coding guidance and determines the coding standards associated with the classifications (OPCS-4 and ICD-10) to be used across the NHS. The Clinical Classifications Service and NICE work collaboratively to ensure the most appropriate classification codes are provided. [Clinical Classifications Service — NHS Digital](#).