

15 September 2021

Dear SASCI Member,

Guidance on Arterial Closure Devices

SASCI has recently been approached by a private sector funder to provide additional guidance on “Arterial Closure Devices”. This is the guidance provided:

SASCI, as a professional organization comprising persons duly authorized under the Health Professions Act to make pronouncements on matters within their scope of practice, may provide opinions to medical schemes in forensic matters, as to the correct application of codes. The SASCI Coding Manual is available on-line and provides billing and/or coding guidelines to our members and the funders. This Manual is maintained as a “living document” and is reviewed and refined on a continuous basis. The application of the SASCI Coding Manual should be seen as a guideline and should never replace good clinical practise.

The use of **arterial closure devices** has been a contentious issue for many years although adoption of radial artery access more recently, has made it less common. It is however an industry accepted standard, that the closure of a wound, incision or puncture site forms part of the procedure being done. Hence the absence of a code for arterial closure devices.

Arterial closure devices are addressed under point 6.3.8 in the SASCI Coding Manual and read as *“Currently no code exists for a vascular closure and medical funders insist that this procedure is ‘included’ in code 1252 even though this is a unilateral decision. We would encourage the use if code 3559 (right common femoral artery) when performing closure with an ACTIVE device. We would recommend against coding for a femoral artery angiogram if it is not performed.”*

The following Guidelines pertain to Arterial Closure Devices:

- Code 3559 may be coded for a femoral angiogram when it is performed for specific indications that include, but are not limited to bleeding, suspected arterial injury, and assessment of peripheral vasculature for TAVI or peripheral vascular disease
- Code 3559 may not be used to indicate arterial access closure
- Code 3559 for ‘drive by’ renal angiography is strongly discouraged and should only be performed for compelling indications

SASCI continue to refine the SASCI Coding Manual and ask members to engaged with the society if clarification or additions are needed. Please contact George Nel (SASCI Executive) at sasci@sasci.co.za if needed.

Best regards



Dr Hellmuth Weich - President SASCI



Dr Tom Mabin - SASCI Consultant Cardiologist