## CLAD Error Key

Error Levels: Definite, Possible

| Error | Procedure Scope | Location Scope | Validation Scope | Error Level | Violation/Information Text |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | Two or more category 1 procedures | Digit |  | Definite | A resident may only log one (1) procedure per toe (your "Procedure Notes" may reflect additional procedures that were performed) and no more than one (1) resident may claim a First Assist procedure on a single toe. |
| 2 | 1.6 plus one or more of the following: 2.1.3, 2.1.7, 2.2.2, 2.2.6, and 2.3.4 | Side |  | Definite | 1.6, phalangeal osteotomy, may not be used in conjunction with: 2.1.3, 2.1.7, 2.2.2, 2.2.6, or 2.3.4. |
| 3 | 1.6 plus one or more of the following: 2.1.1, 2.1.2 | Side |  | Definite | 1.6, phalangeal osteotomy, may not be used in conjunction with 2.1.1 or 2.1.2; enter as procedure 2.1.3 only. |
| 4 | 1.6 plus one or more of the following: 2.1.8, 2.2.7 | Side |  | Possible | 1.6, phalangeal osteotomy, may be used in conjunction with 2.1 .8 or 2.2.7 only with a metatarsal component implantation. |
| 5 | 1.8 plus one or more of the following: 1.10, 2.3.4, 2.3.6, 3.8, 4.4, 4.10 | Digit |  | Definite | 1.8, amputation, may not be used in conjunction with 1.10, 2.3.4, 2.3.6, 3.8, 4.4 or 4.10 |
| 6 | 2.1.1, 2.1.2, or 2.3 .1 plus one of any other category 2 | Side |  | Possible | The soft tissue component of all First Ray Surgery repair is inclusive and is not separately claimed as an additional procedure in all subcategories. |
| 7 | 2.1.1, 2.1.2, or 2.3 .1 plus two or more of any other category 2 | Side |  | Definite | The soft tissue component of all First Ray Surgery repair is inclusive and is not separately claimed as an additional procedure in all subcategories. |
| 8 | Two or more of 2.2.1 through 2.2.8 | Side |  | Definite | All hallux limitus procedures shall be inclusive and count as one (1) category 2 First Ray Surgery procedure (may count only one of 2.2.1-2.2.8 per foot and only one (1) resident may claim one procedure per foot). |
| 9 | Two or more of 2.1.1 through 2.1.10 | Side |  | Definite | All hallux valgus procedures shall be inclusive and count as one (1) category 2 First Ray Surgery procedure (may count only one of 2.1.1-2.1.10 per foot and only one (1) resident may claim one procedure per foot). |
| 10 | 3.1 plus one or more of any category 2 | Side |  | Definite | Excision of tibial and/or fibular sesamoids may not be used in conjunction with First Ray Surgery procedures. |


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| 38 | 5.2.1 plus one or more of 5.1.7, 5.2.7, and 5.2.8 | Side |  | Definite | May not be claimed as diagnostic arthroscopy or if the arthroscopy results in an "open" procedure. May not be used in conjunction with 5.1.7, 5.2.7, and/or 5.2.8. |
| 39 | 5.2.2 plus one or more of 5.1.6 or 5.3.1 | Side |  | Possible | May not be used in conjunction with local 5.1.6 and/or 5.3.1. |
| 40 | 5.2.2 | Side |  | Possible | Include appropriate descriptors in "Procedure Note" to identify complexity with detachment/reattachment component or otherwise claim as 4.1. |
| 43 | 5.3.2 or 5.3.6 with one or more of 5.4.1 through 5.4.4 | Side |  | Definite | May not be used in conjunction with fracture repair. |
| 44 | Two or more of 5.3.2, 5.3.6, 5.4.1 through 5.4.4 | Side |  | Definite | Claim only one (1) procedure per foot/ankle. |
| 45 | 5.1.4 plus one or more of $\begin{aligned} & \text { 5.1.1, 5.1.2, 5.1.3, 5.1.4, } \\ & \text { 5.1.5, 5.1.6, 5.1.8 or } \\ & \text { 5.1.9 } \end{aligned}$ | Side |  | Possible | 5.1.4 may not be used in conjunction with any other Reconstructive Rearfoot and Ankle procedure in the Elective-Soft Tissue subcategory. |
| 46 | 5.2.4 | Side |  | Possible | All midfoot fusions are considered as one procedure. Rearfoot fusions (double and triple arthrodesis) are considered as one procedure. Pan-talar arthrodesis, including talectomy if required, is considered as one procedure. |
| 47 | 5.2.6 plus one or more of 5.1.1 through 5.1.9 or 5.2.1 through 5.2.11 | Side |  | Possible | Coalition resection incident to triple arthrodesis (5.2.4) is considered part of that procedure. |
| 50 | $\begin{aligned} & \text { 1.13, 2.3.10, 3.14, 4.18, } \\ & \text { 5.1.9, 5.2.11, 5.3.7, and } \\ & \text { 5.4.8 } \end{aligned}$ | Side |  | Possible | "Other" procedures may only be used if a more appropriate procedure does not exist. |
| 51 | 2.3.6, 2.3.9, 3.8, 4.11, <br> 4.17, or 5.4 .6 plus one or more of any procedure in categories 1 through 5 | Side |  | Possible | Full documentation in the "Procedure Note" to justify use of procedure 2.3.6, 2.3.9, 3.8, 4.11, 4.17 , or 5.4 .6 , with another procedure is required. |
| 53 | All procedures in category 1 | N/A | Digit | Definite | The digit number must be selected for digital surgical procedures. |
| 55 | All procedures in categories 1 through 5 | N/A | Side | Definite | The side (left or right) must be selected for surgical procedures of the foot or ankle. |
| 60 | 4.1 plus one or more of 4.2, 4.5, 4.6 and 4.7 | Side | NULL | Possible | 4.1 may not be used in conjunction with: 4.2, lesser MPJ arthroplasty, 4.5, lesser MPJ implant, 4.6, central metatarsal osteotomy, or 4.7, bunionectomy of the fifth metatarsal with osteotomy (if distal metatarsal related) |


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| 61 | 5.4.6 plus one or more procedures in categories 1-4. | Side | NULL | Possible | Full documentation in the "Procedure Note" to justify use of procedure 5.4 .6 with another procedure in categories 1-4 is required. |
| 62 | 2.3.1 plus one or more of procedures in categories 2.1*-2.2*, 2.3.4, 2.3.7 and 2.3.9 | Side | NULL | Definite | The soft tissue component of all First Ray Surgery repair is inclusive and is not separately claimed as an additional procedure in all subcategories. |
| 63 | One or more 2.3.10 | Digit | NULL | Possible | When two separate procedures are performed on the same first ray to correct the bunion deformity, please use 2.1.10 |
| 64 | 3.1 plus one or more of procedures in categories 3.6, 5.1.2, 5.1.3, 5.1.6 and 5.2.1 | Side | NULL | Definite | May not be used in conjunction with First Ray Surgery, tendon transfer/augmentation or Other Osseous Foot Surgery |
| 65 | 3.4 plus 3.9 | Side | NULL | Definite | Plantar Fasciotomy may not be used in conjunction with 3.9 plantar fasciectomy/Plantar fibroma resection |
| 66 | 3.4 plus 3.16 | Side | NULL | Possible | 3.4 may not be used 3.16 |
| 67 | 3.5 plus one or more procedures in categories 3.6, 3.7, 4.2, 4.3, 4.5, 4.6 and 4.7 | Side | NULL | Definite | 3.5 Lesser MPJ Capsulotendon Balancing may not be used in conjunction with $3.6,3.7,4.2,4.3,4.5$, 4.6 or 4.7 |
| 68 | 3.6 plus one or more procedures in categories 3.5, 3.7 and 4.2 | Digit | NULL | Definite | 3.6 Tendon Repair, Lengthening, or Transfer Involving the Forefoot (including digital flexor digitorum longus transfer) may not be used in conjunction with 3.5, 3.7, 4.2 |
| 69 | 3.7 plus one or more procedures in categories 3.5, 3.6 and 4.2 | Digit | NULL | Definite | 3.7 Open Management of Dislocation (MPJ/tarsometatarsal) may not be used in conjunction with 3.5, 3.6 or 4.2 |
| 70 | 3.8 plus one or more procedures in categories $\begin{aligned} & \text { 1.8, 1.10, 2.3.4, 2.3.6, } \\ & \text { 3.17, 4.4, 4.10, 4.11, } \\ & \text { 5.4.6, 5.4.7 } \end{aligned}$ | Side | NULL | Definite | 3.8 Incision and Drainage/wide debridement of Soft Tissue Infection may not be used in conjunction with 1.8, 1.10, 2.3.4, 2.3.6, 3.17, 4.4, 4.10, 4.11, 5.4.6, 5.4.7 |


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| 71 | 4.1 plus one or more procedures in categories 3.4, 3.9, 4.2, 4.3, 4.5, 4.6 and 4.7 | Side | NULL | Possible | 4.1 Partial Ostectomy may not be used in conjunction with 3.4, 3.9, 4.2, 4.3, 4.5, 4.6 or 4.7 |
| 72 | 4.19 plus one or more procedures in categories 4.1 and 5.3.1 | Side | NULL | Possible | 4.19 Detachment/reattachment of Achilles Tendon with Partial Ostectomy may not be used in conjunction with 4.1 or 5.3.1 |
| 73 | 5.1.7 plus one or more procedures in categories 5.2.1, 5.2.7 and 5.2.8 | Side | NULL | Definite | 5.1.7 Open Synovectomy of the Rearfoot/ankle may not be used in conjunction with 5.2.1, 5.2.7 or 5.2.8 |
| 74 | 5.2.1 plus one or more procedures in categories 5.1.7, 5.2.7, 5.2.8 and 5.2.11 | Side | NULL | Definite | 5.2.1 Operative Arthroscopy may not be used in conjunction with 5.1.7, 5.2.7, 5.2.8 or 5.2.11 |
| 75 | 5.2.5 plus one or more procedures in categories 5.2.4, 5.2.7 and 5.2.9 | Side | NULL | Possible | 5.2.5 Midfoot, Rearfoot or Ankle Fusion may not be claimed in conjunction with the following procedures if the osteotomy was performed to access pathology: 5.2.4, 5.2.7 or 5.2.9 |
| 76 | 5.2.6 plus one or more procedures in categories 5.2.3, 5.2.4 and 5.2.5 | Side | NULL | Possible | 5.2.6 Coalition Resection may not be claimed in conjunction with 5.2.3, 5.2.4 or 5.2.5 |
| 77 | 5.2.7 plus one or more procedures in categories 5.2.1, 5.2.4 and 5.2.11 | Side | NULL | Possible | 5.2.7 Open Management of Talar Dome Lesions (with or without osteotomy) includes associated 5.2.1, 5.2.4 or 5.2.11 |
| 78 | 5.2.7 plus one or more procedures in categories 5.2.5 and 5.2.8 | Side | NULL | Definite | 5.2.7 Open Management of Talar Dome Lesions (with or without osteotomy) includes associated 5.2.5 or 5.2.8 |
| 79 | 5.2.8 plus one or more procedure in categories 5.2.1, 5.2.4 and 5.2.11 | Side | NULL | Possible | 5.2.8 Ankle Arthrotomy with Removal of Loose Body or Other Osteochondral Debridement includes 5.2.1, 5.2.4 or 5.2.11 |
| 80 | 5.2.8 plus 5.2.5 | Side | NULL | Definite | 5.2.8 Ankle Arthrotomy with Removal of Loose Body or Other Osteochondral Debridement includes 5.2.5 |


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