

2024 Thyroidectomy/Lobectomy

Surgical Services

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Thyroidectomy/Lobectomy

Thyroidectomy/Lobectomy Guideline

Thyroidectomy

A thyroidectomy is considered medically appropriate when the documentation demonstrates **ANY** of the following: [1]

- 1. Bilateral goiters
- 2. Large goiter with symptoms (eg, dysphagia, dyspnea, esophageal or tracheal compression) **AND** nodule size 4 cm or more. [7] [9]
- 3. Primary or secondary malignancy of the thyroid [3] [5]

Thyroid Lobectomy

A thyroid lobectomy is considered medically appropriate when the documentation demonstrates **ANY** of the following:

- 1. Goiter and **ANY** of the following: [7] [4] [8] [6]
 - a. Atypia is found on fine needle aspiration biopsy.
 - b. Hyperthyroidism is due to toxic nodular goiter with contraindication, intolerance or inadequate response to anti-thyroid medications OR radioactive iodine therapy [9]
 - c. Hypothyroidism with diffusely enlarged gland that is causing compressive symptoms (eq, dysphagia, dyspnea, esophageal or tracheal compression).
 - d. Substernal extension of thyroid with compressive symptoms [1]
- 2. Graves' disease and **ANY** of the following: [8] [7] [2]
 - a. **Contraindication, intolerance or inadequate response** to anti-thyroid medications **OR** radioactive iodine therapy
 - b. Moderate to severe Graves' ophthalmopathy
 - c. Significant adverse reactions to thionamide drugs which **CANNOT** be appropriately blocked before radioactive iodine administration
 - d. Thyroid glands is in excess of 75 grams.
 - e. Women of childbearing age, who wish to attempt achieving pregnancy **OR** who are in the process of lactating



Thyroidectomy/Lobectomy Procedure Codes

Table 1. Thyroidectomy/Lobectomy Associated Procedure Codes

CODE	DESCRIPTION
60210	Partial thyroid lobectomy, unilateral; with or without isthmusectomy
60212	Partial thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy
60220	Total thyroid lobectomy, unilateral; with or without isthmusectomy
60225	Total thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy
60240	Thyroidectomy, total or complete
60252	Thyroidectomy, total or subtotal for malignancy; with limited neck dissection
60254	Thyroidectomy, total or subtotal for malignancy; with radical neck dissection
60260	Thyroidectomy, removal of all remaining thyroid tissue following previous removal of a portion of thyroid
60270	Thyroidectomy, including substernal thyroid; sternal split or transthoracic approach
60271	Thyroidectomy, including substernal thyroid; cervical approach

Thyroidectomy/Lobectomy Summary of Changes

Thyroidectomy/Lobectomy clinical guidelines from 2023 to 2024 had the following version changes:

- 1. Added "Large goiter with symptoms (eg, dysphagia, dyspnea, esophageal or tracheal compression) and nodule size greater than or equal to 4 cm." to thyroidectomy and removed from lobectomy per current research.
- 2. Added "bilateral goiters" to thyroidectomy indication per current research
- 3. Citations updated per the evidence.

Thyroidectomy/Lobectomy Definitions

Antithyroid medications are defined as drugs that inhibit thyroid hormone synthesis. Clinically, these drugs were developed for the treatment of hyperthyroidism. The mainstay of current antithyroid drugs is thionamides, sulfur-containing derivatives of thiourea. Second-line drugs known to negatively impact thyroid production at the level of the thyroid gland include iodine, perchlorate, and cholestyramine.

Compression is reducing in size, quantity or volume, as if by squeezing.

Dysphagia refers to any difficulty with swallowing, including occult or asymptomatic impairments. Dysphagia is classified according to the location of the problem as oropharyngeal (localized to the oral cavity or pharynx, not just the oropharynx) or esophageal. It may also be classified as mechanical (due to a structural lesion of the foodway) or functional (caused by a physiologic abnormality of foodway function).



Dysphonia refers to having an abnormal voice. It is also known as hoarseness. Changes to the voice can occur suddenly or gradually over time. The voice can be described as hoarse, rough, raspy, strained, weak, breathy, or gravely.

Dyspnea, commonly referred to as shortness of breath, is the subjective sensation of uncomfortable breathing comprised of various sensations of varying intensity. Dyspnea can be either acute or chronic with acute occurring over hours to days and chronic occurring for more than 4 to 8 weeks.

Endocrine ophthalmopathy is defined as an inflammatory process of the eyes which leads to soft tissue involvement (periorbital edema, congestion, and swelling of the conjunctiva), proptosis (anterior deplacement of the eye), extraocular muscle involvement leading to double-vision (diplopia), corneal lesions and compression of the optic nerve.

Globus sensation is a functional esophageal disorder characterized by a sensation of a lump, retained food bolus or tightness in the throat that is not due to an underlying structural lesion, gastroesophageal reflux disease, mucosal abnormality or an esophageal motility disorder.

Goiter is the enlargement of the thyroid gland and is a general term that conveys the information that the volume of the thyroid gland is larger than normal.

Graves' disease is an autoimmune disorder that can cause hyperthyroidism, or overactive thyroid.

Malignancy refers to cells that grow uncontrollably and spread locally and/or to distant sites. Malignant tumors are cancerous (ie, they invade other sites). They spread to distant sites via the bloodstream or the lymphatic system.

Organification is a biochemical process that takes place in the thyroid gland. It is the incorporation of iodine into thyroglobulin for the production of thyroid hormone, a step done after the oxidation of iodide by the enzyme thyroid peroxidase (TPO).

Orthopnea is shortness of breath (dyspnea), most often caused by severe heart failure. It may also occur in people with asthma, chronic bronchitis, sleep apnea, paralyzed diaphragm muscles, severe obesity and large goiters (thyroid gland enlargement). It occurs when lying flat, causing an individual to have to sleep propped up in bed or sitting in a chair.

Radioactive iodine (iodine-131) therapy is indicated for the management of hyperfunctioning thyroid disease and thyroid cancer. It is classified as radioactive nuclear medicine. Its action causes permanent destruction to the thyroid tissue by emitting radiation of two sorts, gamma and beta rays. FDA approved use includes Graves' disease, toxic adenoma, toxic multinodular goiter, non-toxic multinodular goiter, and well-differentiated thyroid carcinoma.

Substernal is "below the sternum" and therefore into the chest. Substernal and retrrosternal, "behind the sternum," are often used interchangably.

Thionamide is a drug that normalizes thyroid hormone levels pharmacologically. These medications inhibit the synthesis of thyroid hormone by blocking the organification of iodine within the thyroid. The two thionamides available for use in the United States are methimazole (MMI), and propylthiouracil (PTU).



Thyroglobulin is an iodine-containing protein of the thyroid gland that is the precursor of thyroxine and triiodothyronine.

Thyroid is a small gland in the neck that affects growth.

Thyroidectomy is the surgical removal of all or part of the thyroid gland.

Thyroid Lobectomy is a surgical procedure when a lobe of the thyroid gland is removed.

Thyroidectomy/Lobectomy References

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