

Cryosurgical Ablation for Prostate Cancer

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Definitions

Cryosurgery (aka cryotherapy or cryoablation) is a minimally invasive therapy performed with ultrasound guidance that destroys prostate tumor tissue through local freezing. The modality involves either complete or focal ablation (subtotal cryoablation) only targeting diseased tissue while leaving normal tissue intact.

Guideline

Cryosurgery for primary and recurrent prostate cancer is considered medically necessary as follows; **either**:

1. Primary treatment stages T1, T2 or T3 (node negative)
2. Salvage therapy for cancer recurrence when disease is localized and both are met:
 - a. Failed trial of radiation therapy
 - b. Test results indicate ≥ 1 :
 - i. Stage T2b or below
 - ii. Gleason score < 9
 - iii. Prostate-specific antigen (PSA) < 8 ng/mL

Limitations/Exclusions

Salvage therapy is not considered medically necessary when radiation was not utilized as a primary therapy.

Applicable Procedure Codes

55873

Cryosurgical ablation of the prostate (includes ultrasonic guidance and monitoring)

Applicable ICD-10 Diagnosis Codes

C61	Malignant neoplasm of prostate
D07.5	Carcinoma in situ of prostate

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