

ADA Guide to Extractions – Tooth and Remnants

Developed by the ADA, this guide is published to educate dentists and others in the dental community on procedures documented with CDT Codes D7140, D7210 and D7250 – selection of which depends on the clinical scenario, several of which are described herein.

Introduction

The following full CDT Code entries (code, nomenclature and descriptor), as published in the current CDT manual, are used to document the different extraction procedures addressed in detail within this guide.

D7140 extraction, erupted tooth or exposed root (elevation and/or forceps removal)

Includes removal of tooth structure, minor smoothing of socket bone, and closure, as necessary.

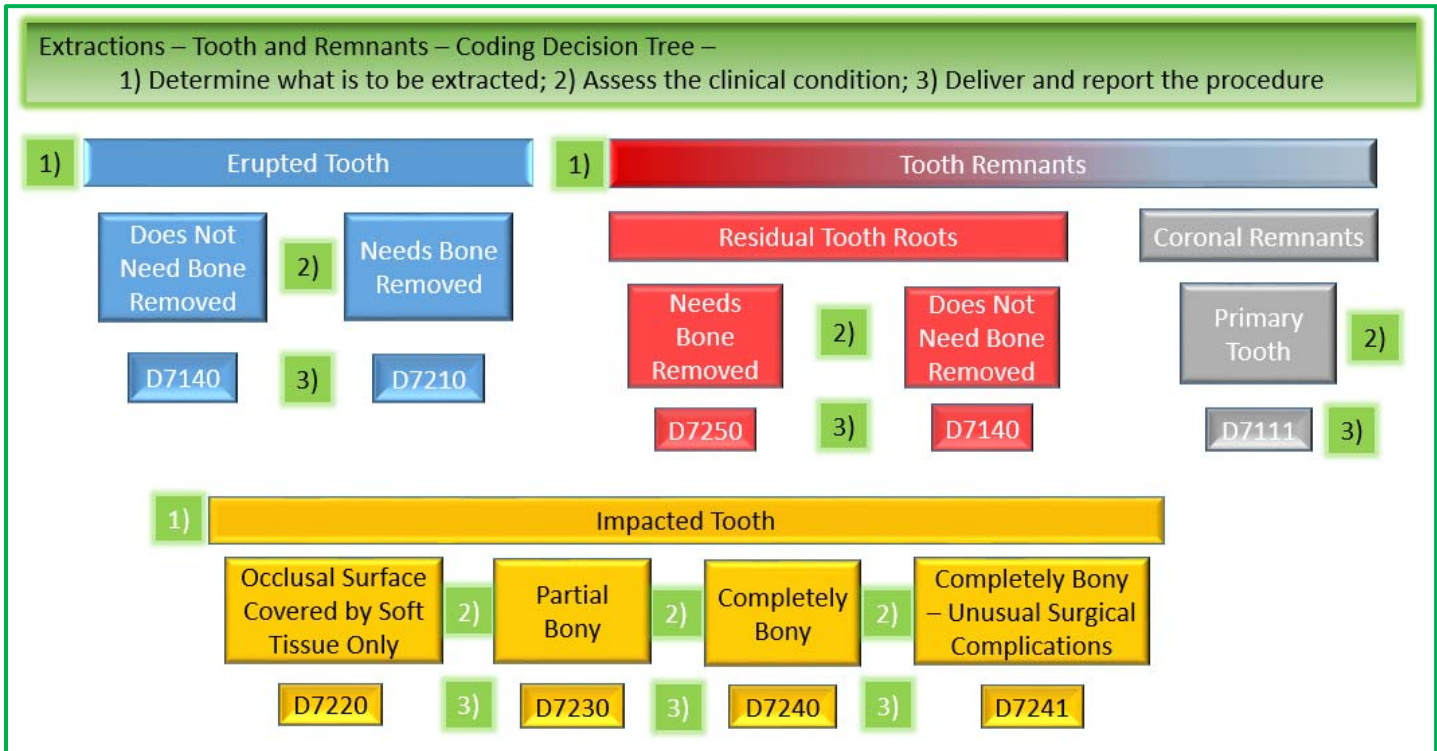
D7210 extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal flap if indicated

Includes related cutting of gingival and bone, removal of tooth structure, minor smoothing of socket and closure.

D7250 removal of residual tooth roots (cutting procedure)

Includes cutting of soft tissue and bone, removal of tooth structure, and closure.

Decision Tree



Notes: “D7111 extraction, coronal remnants – primary tooth” is included in the Decision Tree illustration to acknowledge there is another procedure specifically for removal of primary tooth soft tissue retained coronal remnants in the CDT Code’s series of extraction procedures,

“**Impacted Tooth**” scenarios and codes are also included to acknowledge that these four codes exist for extraction procedures that differ from those that are commonly referred to as “simple”.

Questions and Answers

- 1) When extracting an erupted tooth, what procedure is reported when: a) the crown and root are extracted in one piece; or b) during the course of the procedure the crown and root separate and are extracted individually?

There are separate codes for each scenario –

- a) D7140 is reported when a dentist completes the erupted tooth extraction procedure and the crown and root are extracted in one piece.
 - b) D7210 is reported when the the crown and root separated during the extraction procedure (for any reason) and and both were removed, with the removal of the root tip requiring bone removal.
- 2) I completed a difficult extraction of an erupted (not impacted) tooth, where the anatomical crown and roots were extracted one after the other, that required more than the usual amount of time. Would it be appropriate to report both the D7140 (extraction of erupted tooth or exposed root) and the D7250 (removal of residual tooth roots) separately?

No, the D7250 procedure is not intended to document a “difficult” extraction. Extraction of all parts of the tooth structure are reported as either the D7140 or the D7210 procedure as noted in Q&A 1.

- 3) I was not able to complete the extraction of an an erupted tooth as the crown separated from its roots, and my attempts to remove them were unsuccessful. How should I document this incomplete extraction?

There is a no code for an incomplete extraction of an erupted tooth, therefore CDT Code D7999 unspecified oral surgery procedure, by report” would be used to document what was completed. Details of what occurred would be in the report’s narrative.

- 4) When an erupted tooth extraction is incomplete, as described in Q&A 3, what procedure is reported when another dentist is extracting only the residual roots?

D7140 if the separated root is exposed and can be extracted with forceps or elevation. If removal requires cutting soft or bony tissue it is the D7250 procedure.

- 5) My claim for the D7250 procedure was denied because the residual roots were not “encased” (meaning fully covered) in bone. Is this rationale consistent with this CDT code’s nomenclature and descriptor?

No, the rationale is not consistent with the CDT Code entry. Residual roots may be present for a variety of reasons, including carious destruction of the tooth’s anatomical crown or as a result of a previous extraction attempt. A fully covered (encased) residual root is a clinical finding.

D7250 is the appropriate code for removal of residual roots requiring bone removal. The claim denial rationale reflects benefit plan limitations and exclusions or other third-party payer claim adjudication criteria.

- 6) When removing a residual root does not require cutting of soft tissue and bone is D7250 appropriate to report the procedure?

No, as noted in the D7250 nomenclature this is a cutting procedure, which could involve cutting soft tissue and hard tissue (bone). The descriptor’s reference to cutting soft tissue and bone is a notation that when such steps in the root removal procedure are necessary they are not reported separately.

If no cutting is involved (i.e., elevator and/or forceps removal) the procedure would be reported with D7140.

- 7) My patient is a child who, due to rampant caries, has lost all tooth structure on the primary second molar (“K”) except for residual roots that cannot be extracted by elevation or forceps. What is the applicable procedure to deliver and report?

The scenario described requires removal of the residual roots by cutting soft tissue and bone, a procedure reported with D7250, which includes closure as the nomenclature states this is a “cutting” procedure.

- 8) The patient has been to another dentist who attempted to extract a tooth, but did not successfully remove all structure and roots remain. What is the applicable procedure and its code to for me to document only removal of the residual roots?

Again, it depends. If the residual root can be extracted using an elevator and forceps the applicable procedure is D7140 as this code’s nomenclature states the procedure is applicable to extraction of the entire tooth or only the root, or both. However, if removal of the residual root requires cutting tissue (soft and bone), the applicable procedure and its code is D7250.

Questions or Assistance?

Call 800-621-8099 or send an email to dentalcode@ada.org

Notes:

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- Version History

Date	Version	Remarks – Change Summary
06/01/2019	1	Initial publication