

Guide to D4921 “Gingival Irrigation” Procedure

This guide is to educate dentists and others in the dental community on revisions to this code’s nomenclature and descriptor first published in CDT 2023. CDT code D4291 is used to document this procedure in a patient’s dental record and on a claim submission (ADA Paper Form **and** 837D HIPAA Standard Electronic Dental Claim Transaction).

Introduction

CDT code D4921’s nomenclature was revised, and descriptor deleted effective January 1, 2023. This code is found in CDT’s “Other Periodontal Services” subcategory within the Periodontics category of service.

The current full entry is:

D4921 gingival irrigation with a medicinal agent – per quadrant

Illustration of the 2023 changes and rationale:

D4921 gingival irrigation with a medicinal agent – per quadrant

~~Irrigation of gingival pockets with a prescription medicinal agent. Not to be used to report use of over the counter (OTC) mouth rinses or non-invasive chemical debridement.~~

Rationale: Gingival irrigation is used by many practitioners to assist in various treatment protocols. The current descriptor includes wording that limits the procedure’s scope (“Irrigation of gingival pockets...”), and implies a standard of care (Not to be used...”), neither of which are appropriate for any full CDT Code entry. These changes also acknowledge that the dentist providing treatment is the person best qualified to determine the type of irrigation medicament used for this in-office procedure.

A number of Questions and Answers follow. These are intended to provide readers with insight and understanding of the procedure, medicaments used, and appropriate documentation in patient records and on claims.

Questions and Answers

- 1) D4921 is listed in the “Other Periodontal Services” subcategory within the Periodontics category of service. Does this mean that the procedure may only be delivered by a dentist whose specialty is periodontics?

No. Delivery of and reporting the D4291 procedure is, as with all other CDT codes, permitted as long as the procedure is within the scope of the dentist’s license to practice.

- 2) Does the medicinal agent used for irrigation affect reporting the procedure with code D4921? For example, after debriding a periodontal abscess and draining the sulcus I irrigated the pocket with chlorhexidine.

The gingival irrigation is reported with D4921 as the code’s nomenclature does not specify the medicinal agent used in this procedure. The dentist determines what agent should be used (e.g., chlorhexidine; povidone-iodine; hydrogen-peroxide) for irrigation.

- 3) How would I report gingival irrigation when the patient does not have a periodontal condition (e.g., pericoronitis) but, for example, simply has trapped food flushed away with water or a saline solution?

When irrigation does not involve use of a medicinal agent the procedure would be reported with an “unspecified by report” code (i.e., D9999 unspecified adjunctive procedure, by report) or with D9110 palliative treatment of dental pain – per visit” when the patient complains of pain that is relieved after irrigation that does not involve use of a medicinal agent.

- 4) D4291 is, according to its nomenclature, a “per quadrant” code. Does this mean that all teeth in the quadrant must be irrigated?

No. The number of teeth irrigated is not relevant as “per quadrant” indicates how the procedure is reported.

- 5) How would D4921 be reported when the irrigated teeth cross the midline, or are in different quadrants?

When the irrigated teeth cross the midline, or are in different quadrants, D4921 is reported twice along with the applicable area of the oral cavity quadrant codes.

- 6) Is there any limitation on the number of times that D4921 may be delivered to the patient and reported on the same date of service?

There is no such limitation seen in the code’s nomenclature. Procedurally teeth in all four quadrants may be irrigated on the same date of service. The patient’s dental benefit plan may have limitations that are in place for reimbursement procedures, not clinical reasons.

- 7) Would D4921 be reported when the procedure is a “mouth rinse” (aka “mouthwash”)?

No. Gingival irrigation (D4921) is an in-office procedure where the medicinal agent is applied directly to a specific area within the oral cavity (e.g., gingival pocket; sulcus). A mouth rinse (aka mouthwash) is delivery of an agent, or water, to part of or the entire oral cavity – often by the patient at home as part of a therapeutic treatment plan (e.g., xerostomia; dry socket) or for cosmetic purposes (e.g., halitosis). An in-office mouth rinse or mouthwash procedure would be documented with an “unspecified by report” code (i.e., D9999 unspecified adjunctive procedure, by report).

The ADA has mouth rinse (mouthwash) information online at –

[Mouthrinse \(Mouthwash\) | American Dental Association \(ada.org\)](#)

[Mouthwash - Mouthrinse | MouthHealthy - Oral Health Information from the ADA](#)

Questions or Assistance?

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

Notes:

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