



Corporate Medical Policy

Pulsed Irrigation of Fecal Impaction

File Name: pulsed_irrigation_of_fecal_impaction
Policy Number: DME0233
Origination: 3/2009
Last Review: 3/2009
Next Review: 4/2010

Description of Procedure or Service

Pulsed irrigation of fecal irrigation involves the use of a device consisting of a speculum inserted into the rectum and held in place with an inflatable cuff. Rapid pulses of water are then administered, which are intended to rehydrate dry, hard, impacted fecal material. It is also thought that the presence of the speculum and cuff and the vibration related to the pulsing water stimulate the autonomic system, similar to digital stimulation, thus promoting peristalsis, and further contributing to disimpaction. Pulsed irrigation may be performed in an inpatient setting, emergency room, physician's office, or in the home.

Pulsed irrigation in the home setting has been primarily used in patients with a neuropathic bowel who have failed conservative therapy with bowel training. Bowel training focuses on establishing optimal fecal consistency and stimulation of peristalsis at regular intervals to develop a conditioned reflex to defecate. Stimulation of peristalsis may consist of use of suppositories, digital stimulation of the anal canal, or abdominal massage to increase the intra-abdominal pressure. Enemas may also be used, but these are frequently ineffective in those with spinal cord injury due to the lack of sphincter control. Fecal impaction, defined as constipation requiring physician intervention or hospitalization, represents a failure of conservative therapy.

Policy

BCBSNC may provide coverage for Pulsed Irrigation of Fecal Impaction when it is determined to be medically necessary because the medical criteria and guidelines shown below are met.

Benefits Application

Please refer to Certificate for availability of benefits. This policy relates only to the services or supplies described herein. Benefits may vary according to benefit design, therefore certificate language should be reviewed before applying the terms of the policy.

When Pulsed Irrigation of Fecal Impaction is covered

1. Chronic home use of a device for pulsed irrigation may be medically necessary in patients with neuropathic bowel who have failed conservative techniques of bowel retraining, as evidenced by repeated episodes of impaction requiring physician intervention or hospitalization.
2. Pulsed irrigation may be medically necessary as a treatment of fecal impaction in the hospital, outpatient, and clinic setting.

Policy: Pulsed Irrigation of Fecal Impaction

When Pulsed Irrigation of Fecal Impaction is not covered

Pulsed irrigation is not covered for indications that do not meet the criteria listed above.

Policy Guidelines

1. Failed conservative therapy is defined by the following:
 - a. The patient has symptomatic impaction with pain, abdominal distention, nausea and vomiting, significant weight loss, recurrent liquid stools, autonomic dysreflexia, and is unresponsive to oral bowel medications, suppositories, or enemas, **OR**
 - b. The patient has asymptomatic fecal impaction with abdominal distention and no response to a bowel program, **AND**
 - c. Conservative techniques of bowel retraining are documented that have been tried and failed such as the following: use of suppositories, digital stimulation, abdominal massage, enemas, adequate fiber and fluid intake, and a consistent daily routine for bowel movement, **AND**
 - d. A complete history and physical must be documented.
2. When criteria are met for home use, a 2 month trial of rental with pulsed irrigation evacuation system can be approved to determine if long-term use will be medically necessary. If the trial is successful then purchase can be initiated. Supplies are generally approved for six month increments.
3. Contraindication for use of the pulsed irrigation evacuation system are as follows:
 - a. Colon surgery in the past year,
 - b. Significant GI bleeding,
 - c. Acute diverticular disease,
 - d. Evidence of acute abdomen.

Studies of pulsed irrigation as a treatment of fecal impaction have primarily focused on patients with neuro-pathic bowel who had failed bowel retraining methods. For example, Puet et al reported on 398 procedures performed at a rehabilitation hospital for patients with spinal cord injury and stroke. The indications for the pulsed irrigation included symptomatic impaction, asymptomatic impaction with bowel distension, and failure of a bowel routine to produce stool on 3 consecutive occasions. Of the 246 procedures, 162 (66%) were performed on 4 patients, while 63 (41%) of the 152 inpatient procedures were performed on 31 spinal cord injury patients. The procedure was effective in removing stool in all but 3 of the cases. 2 of these patients were stroke patients who could not tolerate the procedure, while 1 patient was a spinal cord injury patient who could not retain the pulsed fluid. Kokoszka and colleagues reported on the successful use of pulsed irrigation in 14 patients with fecal impaction who were considered candidates for hospitalization for disimpaction.

Billing/Coding/Physician Documentation Information

This policy may apply to the following codes. Inclusion of a code in this section does not guarantee that it will be reimbursed. For further information on reimbursement guidelines, please see Administrative Policies on the Blue Cross Blue Shield of North Carolina web site at www.bcbsnc.com. They are listed in the Category Search on the Medical Policy search page.

Applicable codes: 91123, E0350, E0352.

Policy: Pulsed Irrigation of Fecal Impaction

BCBSNC may request medical records for determination of medical necessity. When medical records are requested, letters of support and/or explanation are often useful, but are not sufficient documentation unless all specific information needed to make a medical necessity determination is included.

Scientific Background and Reference Sources

Puet TA, Jackson H, Amy S. Use of pulsed irrigation evacuation in the management of the neuropathic bowel. *Spinal Cord* 1997;35:694-99

Kokoszka J, Nelson R, Falconio M, Abcarian H. Treatment of fecal impaction with pulsed irrigation enhances evacuation. *Dis Colon Rectum* 1994;37:161-64.

Department of Health Care Services Medi-Cal California. Pulsed irrigation enhanced evacuation (PIEE). 2006. Retrieved 3/34/09 from http://files.medi-cal.ca.gov/pubsdoco/publications/Masters-MTP/Part2/medne_m01i00o03.doc.

BCBSA Medical Policy Reference Manual [Electronic Version]. 2.01.52, 4/29/03.

Senior Medical Director - 3/2009

Policy Implementation/Update Information

03/30/09 Policy adopted from the BCBS Association. Senior Medical Director review 3/25/09. " 1) Chronic home use of a device for pulsed irrigation may be medically necessary in patients with neuropathic bowel who have failed conservative techniques of bowel retraining , as evidenced by repeated episodes of impaction requiring physician intervention or hospitalization. 2) Pulsed irrigation may be medically necessary as a treatment of fecal impaction in the hospital, outpatient, and clinic setting." "Pulsed irrigation is not covered for indications that do not meet the criteria listed above." Notification given 3/30/09. Policy effective 7/1/09. (btw)

Medical policy is not an authorization, certification, explanation of benefits or a contract. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the group contract and subscriber certificate that is in effect at the time services are rendered. This document is solely provided for informational purposes only and is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Medical practices and knowledge are constantly changing and BCBSNC reserves the right to review and revise its medical policies periodically.