

Clinical Practice Guideline: Nail Hematoma Evacuation

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Product: Specialty

GUIDELINES

American Specialty Health – Specialty (ASH) considers services consisting of CPT Code 11740 to be medically necessary, for nail hematoma evacuation **upon meeting all of the following criteria:**

1. When supported by **1 or more of the following diagnoses:**

ICD-10 CODES AND DESCRIPTIONS

ICD-10 Code	Description
S97.101A - S97.129S	Crushing injury of toe(s)
S90.111A - S90.229S	Contusion of toe

AND

2. Pain present

CPT CODES AND DESCRIPTIONS

CPT Code	Description
11740	Evacuation of subungual hematoma

BACKGROUND

A subungual hematoma is a collection of blood under the toenail. It can be caused by a traumatic crush injury to the toe or repetitive trauma, such as what may occur in runners or dancers. Other uncommon causes include melanoma, chemotherapy treatment, Kaposi's sarcoma and other tumors. Given the anatomy of the nail, these hematomas can be very painful. Nail beds have good arterial blood flow. Trauma damages the blood vessels, and the result is bleeding under the nail that puts pressure on the nerve endings, causing local pain.

For acute (less than 48 hours) subungual hematomas, the most common treatment is to trephine, or make a hole, in the nail to release the blood to reduce the pressure to relieve the pain (Pingel et al., 2022). Other authors recommend that when the hematoma covers 50% of the nail, it should be removed, and the nail bed repaired. However, a study by Batrick et al. (2003) concluded that there are insufficient studies to support the removal and repair procedure. The trephining procedure for a simple subungual hematoma provides good functional and cosmetic results in adults and children with no additional injury.

1 PRACTITIONER SCOPE AND TRAINING

2 Practitioners should practice only in the areas in which they are competent based on their
3 education, training and experience. Levels of education, experience, and proficiency may
4 vary among individual practitioners. It is ethically and legally incumbent on a practitioner
5 to determine where they have the knowledge and skills necessary to perform such services
6 and whether the services are within their scope of practice.

8 It is best practice for the practitioner to appropriately render services to a member only if
9 they are trained, equally skilled, and adequately competent to deliver a service compared
10 to others trained to perform the same procedure. If the service would be most competently
11 delivered by another health care practitioner who has more skill and training, it would be
12 best practice to refer the member to the more expert practitioner.

14 Best practice can be defined as a clinical, scientific, or professional technique, method, or
15 process that is typically evidence-based and consensus driven and is recognized by a
16 majority of professionals in a particular field as more effective at delivering a particular
17 outcome than any other practice (Joint Commission International Accreditation Standards
18 for Hospitals, 2020).

20 Depending on the practitioner's scope of practice, training, and experience, a member's
21 condition and/or symptoms during examination or the course of treatment may indicate the
22 need for referral to another practitioner or even emergency care. In such cases it is prudent
23 for the practitioner to refer the member for appropriate co-management (e.g., to their
24 primary care physician) or if immediate emergency care is warranted, to contact 911 as
25 appropriate. See the *Managing Medical Emergencies* (CPG 159 – S) clinical practice
26 guideline for information.

28 **References**

- 29 American College of Ankle and Foot Surgeons (ACFAS) Position statement on cosmetic
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40 hematoma. *Emergency Medicine Journal*, 20(1), 65.

- 1 Baxter, D. E., Porter, D. A., & Schon, L. (2008). Baxter's the Foot and Ankle in Sport:
2 Mosby Elsevier.
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- 4 Pingel, C., & McDowell, C. (2022). Subungual Hematoma Drainage. In StatPearls.
5 StatPearls Publishing.
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- 7 Joint Commission International. (2020). Joint Commission International Accreditation
8 Standards for Hospitals (7th ed.): Joint Commission Resources.