

SUPPORTIVE PESSARY SIZE CHART

DIAMETER MEASURED PESSARIES – ORDER BY SIZE
AS SHOWN IN THE YELLOW AREA

CooperSurgical

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RING WITH SUPPORT



INCONTINENCE RING



INFLATOBALL (LATEX)



DONUT



INCONTINENCE DISH



FLEXIBLE GELLHORN



SHAATZ



Ring with Support • KPRS

SIZE	Inch.	mm.
0	1 3/4"	44
1	2"	51
2	2 1/4"	57
3	2 1/2"	64
4	2 3/4"	70
5	3"	76
6	3 1/4"	83
7	3 1/2"	89
8	3 3/4"	95
9	4"	102
10	4 1/4"	108
11	4 1/2"	114
12	4 3/4"	121
13	5"	127

DIAMETER

Incontinence Ring • KPCON

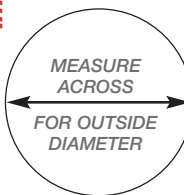
SIZE	Inch.	mm.
0	1 3/4"	44
1	2"	51
2	2 1/4"	57
3	2 1/2"	64
4	2 3/4"	70
5	3"	76
6	3 1/4"	83
7	3 1/2"	89
8	3 3/4"	95
9	4"	102
10	4 1/4"	108
11	4 1/2"	114
12	4 3/4"	121
13	5"	127

DIAMETER

Inflataball • KPINF

SIZE	Inch.	mm.
S	2"	51
M	2 1/4"	57
L	2 1/2"	64
XL	2 3/4"	70

DIAMETER



Donut • KPDO

SIZE in Inches	mm.
2"	51
2 1/4"	57
2 1/2"	64
2 3/4"	70
3"	76
3 1/4"	83
3 1/2"	89
3 3/4"	95

DIAMETER

Incontinence Dish • KPCOND

SIZE in mm.
55
60
65
70
75
80
85

DIAMETER

Flexible Gellhorn • KPGE

SIZE in Inches	mm.
1 1/2"	38
1 3/4"	44
2"	51
2 1/4"	57
2 1/2"	64
2 3/4"	70
3"	76
3 1/4"	83
3 1/2"	89
3 3/4"	95

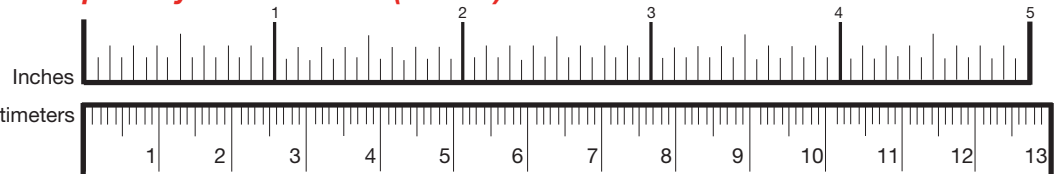
DIAMETER

Shaatz • KPSPH

SIZE in Inches	mm.
1 1/2"	38
1 3/4"	44
2"	51
2 1/4"	57
2 1/2"	64
2 3/4"	70
3"	76
3 1/4"	83
3 1/2"	89
3 3/4"	95

DIAMETER

* Remember for sizing: The incontinence knob available for this pessary adds 1/2 inch (13 mm) to the diameter.



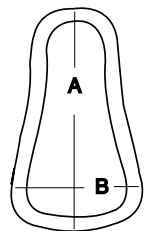
All pessaries may be $\pm 1\%$

CUBE KPEC



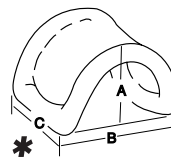
SIZE	Inch.	mm.
0	1"	25
1	1 3/16"	30
2	1 3/8"	35
3	1 1/2"	38
4	1 5/8"	41
5	1 3/4"	44
6	2"	51
7	2 1/4"	57

SMITH KPES



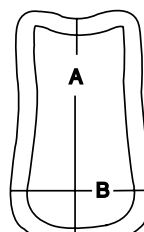
SIZE	In.(A)	In.(B)	mm.(A)	mm.(B)
0	3 1/8"	2"	79	51
1	3 1/4"	2 1/8"	83	54
2	3 1/2"	2 1/4"	89	57
3	3 3/4"	2 3/8"	95	60
4	4 1/4"	2 1/2"	108	64
5	4 1/2"	2 5/8"	114	67
6	4 3/4"	2 3/4"	121	70
7	5"	2 7/8"	127	73
8	5 1/2"	3"	140	76
9	5 3/4"	3 1/8"	146	79

GEHRUNG KPGRS



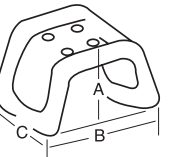
SIZE	In.(A)	In.(B)	In.(C)	mm.(A)	mm.(B)	mm.(C)
0	1 1/16"	1 1/2"	1 3/8"	27	38	35
1	1 1/8"	1 3/4"	1 1/2"	29	44	38
2	1 3/8"	2"	1 5/8"	35	51	41
3	1 1/2"	2 1/8"	1 3/4"	38	54	44
4	1 5/8"	2 1/4"	1 7/8"	41	57	48
5	1 3/4"	2 3/8"	2"	44	60	51
6	1 7/8"	2 1/2"	2 1/8"	48	64	54
7	2"	2 7/8"	2 1/4"	51	73	57
8	2 1/8"	3"	2 3/8"	54	76	60
9	2 1/4"	3 1/8"	2 1/2"	57	79	64
10	2 3/8"	3 1/4"	2 5/8"	60	83	67

HODGE KPEH



SIZE	In.(A)	In.(B)	mm.(A)	mm.(B)
0	2 3/4"	1 3/4"	70	44
1	3"	1 7/8"	76	48
2	3 1/4"	1 15/16"	83	49
3	3 1/2"	2"	89	51
4	3 5/8"	2 1/8"	92	54
5	3 3/4"	2 1/4"	95	57
6	3 7/8"	2 3/8"	98	60
7	4 1/4"	2 1/2"	108	64
8	4 5/8"	2 5/8"	117	67
9	5"	2 3/4"	127	70

REGULA KPREG



SIZE	In.(A)	In.(B)	In.(C)	mm.(A)	mm.(B)	mm.(C)
0	1"	1 15/16"	1 3/8"	25	49	35
1	1 1/16"	2"	1 1/2"	27	51	38
2	1 1/8"	2 1/8"	1 5/8"	29	54	41
3	1 1/4"	2 3/16"	1 3/4"	32	56	44
4	1 3/8"	2 1/4"	1 7/8"	35	57	48
5	1 7/16"	2 3/8"	2"	37	60	51
6	1 1/2"	2 5/8"	2 1/8"	38	67	54
7	1 5/8"	2 7/8"	2 1/4"	41	73	57
8	1 3/4"	3 1/8"	2 3/8"	44	79	60

MILEX
a CooperSurgical Company

SHADED AREA SHOWS MINIMUM ASSORTMENT NECESSARY TO FIT 85+% OF PATIENTS

SEE OTHER SIDE



Code and Reimbursement Chart

Pessary billing for a Medicare patient should be directed to your local Medicare carrier.



REIMBURSEMENT (MEDICARE) PESSARIES HCPCS (SUPPLY CODES)

	CODE
PESSARY, NON-RUBBER, any type (e.g. Milex Silicone Pessary)	A4562
PESSARY, RUBBER, any type (e.g. Milex Inflatoball Pessary)	A4561
VAGINAL IRRIGATION (any purpose)	A4320

CPT (PROCEDURE) CODES

FITTING & INSERTION OF PESSARY	57160
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ICD-9-CM (2003)

DIAGNOSIS	CODE
PROLAPSE	
CYSTOCELE (FEMALE)	618.0
UTEROVAGINAL	618.4
• complete	618.3
• incomplete	618.2
UTERUS 1st, 2nd, 3rd Degree (without vaginal wall prolapse)	618.1
VAGINAL WALL PROLAPSE	
without uterine prolapse	618.0
with uterine prolapse	618.4
• complete	618.3
• incomplete	618.2
• post hysterectomy	618.5
INCONTINENCE	
STRESS URINARY INCONTINENCE	625.6
URGE & STRESS INCONTINENCE	788.33
INCOMPETENT CERVIX	654.5

EVALUATION & MANAGEMENT CODES FOR FOLLOW-UP PESSARY VISITS

99201 thru 99205 NEW PATIENT
REIMBURSEMENT DETERMINED BY AMOUNT OF TIME PHYSICIAN SPENDS WITH PATIENT AND/OR FAMILY MEMBER

99211 thru 99215 ESTABLISHED PATIENT
REIMBURSEMENT DETERMINED BY AMOUNT OF TIME PHYSICIAN SPENDS WITH PATIENT AND/OR FAMILY MEMBER

57150 VAGINAL IRRIGATION
(If bacterial, parasitic or fungal growth present)



A Tandem-Cube (Silicone)	M Gellhorn 95% Rigid (Silicone)
B Hodge w/ Knob (Silicone)	N Inflatoball (Latex)
C Risser (Silicone)	O Shaatz (Silicone)
D Smith (Silicone)	P Ring w/ Support (Silicone)
E Hodge w/ Support (Silicone)	Q Ring w/ Knob (Silicone)
F Hodge (Silicone)	R Incontinence Dish (Silicone)
G Cube (Silicone)	S Incontinence Dish w/ Support (Silicone)
H Hodge w/ Support & Knob (Silicone)	T Ring w/ Support & Knob (Silicone)
I Regula (Silicone)	U Ring (Silicone)
J Gehrung (Silicone)	V Donut (Silicone)
K Gehrung w/ Knob (Silicone)	W Incontinence Ring (Silicone)
L Gellhorn Flexible (Silicone)	



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