

ICD-10-CM/PCS Documentation Tips

CDI Tips by Chapter

Introduction

ICD-10-CM

Chapter 1

Systemic Infection/
Inflammation
Meningitis
Hepatitis
MRSA/MSSA
Herpes Simplex

Chapter 2

Neoplasms

Chapter 3

Anemia
Hemolytic Anemia
Nutritional Anemia
Aplastic Anemia
Pancytopenia
Coagulopathy
Purpura

Chapter 4

Diabetes
Obesity
Malnutrition

Chapter 5

Alcohol, Tobacco and
Substance Use
Major Depressive Disorder

Chapter 6

Altered Mental Status
Cerebral Palsy

Chapter 7

Glaucoma

Chapter 8

Otitis Media
Hearing Loss

Chapter 9

Heart Failure
CVA
Myocardial Infarction
Cardiac Arrest

Chapter 10

Respiratory Failure
Pneumonia
Asthma

Chapter 11

Crohn's Disease/
Regional Enteritis
Appendicitis
Hepatic Encephalopathy

Chapter 12

Pressure Ulcers
Non-Pressure Ulcers
Cellulitis

Chapter 13

Pathologic Fractures
Gout
Scoliosis

Chapter 14

Chronic Kidney Disease
Acute Renal Failure

Chapter 15

OB/Pregnancy

Chapter 16

Newborn

Chapter 17

Congenital Foot Deformities
Cleft Palate

Chapter 18

Coma

Chapter 19

Gustilo Classification
Fractures
Burns
Underdosing

Chapter 20

External Cause

Chapter 21

Encounter For
History (Personal and Family)
Genetic Carrier
Retained Foreign Body
Contact With and Exposure To
Reproduction Services
Socioeconomic and
Psychosocial Circumstances
Body Mass Index

Other ICD-10-CM

Mechanical Device
Complications
Surgical Complications

ICD-10-PCS

Lymph Node Chains
Omentectomy
Lysis of Adhesions
Cleft Palate Repair
CABG
Spinal Fusion
Amputations
Debridement

Introduction

The AHIMA CDI Workgroup has responded to the needs of ICD-10 implementation by creating a large library of CDI ICD-10 documentation tips that are now available for the healthcare industry. These tips focus on the language and/or wording that will garnish greater details and specificity of the coded data for a given diagnosis, condition, disease and/or surgical procedure.

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Systemic Infection/Inflammation

- Bacteremia (positive blood cultures only)
- Urosepsis—MUST specify sepsis with UTI, versus UTI only
- Sepsis—specify causative organism if known
- Sepsis due to:
 - Device
 - Implant
 - Graft
 - Infusion
 - Abortion
- Severe sepsis—sepsis with organ dysfunction
 - Specify organ dysfunction
 - Respiratory failure
 - Encephalopathy
 - Acute kidney failure
 - Other (specify)
- SIRS (Systemic Inflammatory Response Syndrome
 - With or without organ dysfunction
- Document septic shock if present
- Document any associated diagnoses/conditions

Meningitis

Viral Meningitis

- Documentation of “Viral Meningitis” should include the specific viral organism if known (i.e., adenovirus, enterovirus, chickenpox, measles, etc.).
- Document any associated diagnoses/conditions

Bacterial Meningitis

- Documentation of “Bacterial meningitis” should include the specific bacterial organism (i.e., Escherichia coli, bacillus, gram-negative, Klebsiella, staph, strep, etc.) if known.
- Document if the meningitis is due to “other causes,” which can include “nonpyogenic meningitis,” “chronic meningitis,” “Benign recurrent meningitis.”
- Document any associated diagnoses/conditions

Hepatitis

- Document acuity:
 - Acute
 - Chronic
- Document etiology:
 - Alcoholic
 - Drug (specify)
 - Viral (Type A, B, C, or E)
- Document also:
 - With hepatic coma
 - Without hepatic coma
 - With delta agent
 - Without delta agent
- Document any associated diagnoses/conditions

MRSA/MSSA

Methicillin-resistant Staphylococcus aureus

- Include documentation of “MRSA infection” when the patient has that condition.
- Document if sepsis and/or septic shock is present.
- Document any associated diagnoses/conditions.

Methicillin susceptible Staphylococcus aureus

- Include documentation of “MSSA infection” when the patient has that condition.
- Document if sepsis, and/or septic shock is present.
- Document any associated diagnoses/conditions.

Herpes Simplex

- Specify if “Eczema herpeticum” is present.
- Document if “Herpesviral vesicular dermatitis” is present
 - Herpes simplex facialis
 - Herpes simplex labialis
 - Vesicular dermatitis of ear or lip
- Document if “Herpesviral gingivostomatitis and pharyngotonsillitis” are present
- Document if “Herpesviral meningitis” is present
- Specify if “Herpesviral encephalitis” is present
- Simian B disease
- Document if “Herpesviral ocular disease” is present
 - Herpesviral iridocyclitis
 - Herpesviral keratitis
 - Herpesviral conjunctivitis
- Specify if “Disseminated herpesviral disease” is present
- Document if “Other forms of herpesviral infections” are present
 - Herpesviral hepatitis
 - Herpes simplex myelitis
 - Other herpesviral infection
 - Herpesviral whitlow
- Document any associated diagnoses/conditions

Neoplasms

- Behavior:
 - Malignant (primary, secondary, in-situ)
 - Document any secondary sites
 - Benign
 - Unspecified behavior
 - Of uncertain histological behavior
- Laterality (specify right/left)
- Anatomical site (topography)
- Other condition(s) associated with malignancy (dehydration, anemia, etc.)
- Complication(s) associated with neoplasm
- Include estrogen receptor status (if applicable)
- History of:
 - Has the malignancy been excised or eradicated?
 - Is there still treatment being provided for the primary and/or metastatic site?
 - Is there evidence of remaining malignancy at the primary site?
- Document any associated diagnoses/conditions

Anemia

- Documentation of Anemia should include the type of anemia:
 - Nutritional
 - Hemolytic
 - Aplastic
 - Due to blood loss
 - Other (please specify)
- Include in documentation if Anemia is due to nutrition or mineral deficits, resulting in a nutritional anemia
- Document if the Anemia is due to a neoplasm (primary and/or secondary)
- Document whether the ANEMIA is “related to or due to” chemo or radiotherapy treatments
- Document any “cause-and-effect” relationship between the intervention and the blood or immune disorder
- Document the specific drug if anemia is drug-induced
- Link any laboratory findings to a related diagnosis (if appropriate)
- Document any associated diagnoses/conditions

Hemolytic Anemia

- Due to “Enzyme Disorders”:
 - Glucose-6-phosphate dehydrogenase
 - Glutathion metabolism
 - Glycolytic enzymes
 - Due to nucleotide metabolism
- Thalassemias:
 - Alpha thalassemia
 - Beta thalassemia
 - Delta-beta thalassemia
 - Thalassemia minor
 - Hereditary persistence of fetal hemoglobin
 - Hemoglobin E-beta thalassemia
- Sickle Cell Disorders is present
 - Specify if “With or Without Crisis”
- Sickle Cell thalassemia
 - Specify if “With or Without Crisis”
- Include documentation of whether the hemolytic anemia is:
 - Hereditary
 - Acquired
 - Enzyme disorder
 - Autoimmune
 - Non-autoimmune
- Document the disorder/condition causing the anemia
- Document any associated diagnoses/conditions

Nutritional Anemia

- Iron deficiency anemia
- Iron deficiency anemia secondary to blood loss
 - Acute blood loss anemia
 - Chronic blood loss anemia
- Iron deficiency anemia due to poor iron absorption
- Vitamin B12 deficiency
 - Pernicious anemia
 - Malabsorption with proteinuria
 - Transcobalamin II deficiency
 - Vegan Anemia
- Document Folate deficiency anemia
 - Dietary induced
 - Drug-induced
- “Protein” deficiency anemia
- “Megaloblastic” anemia
- List all secondary comorbidities and complications
- Document any associated diagnoses/conditions

Aplastic Anemia

- For aplastic anemia and other bone marrow failure syndromes:
 - Specify if “Acquired pure red cell aplasia”
 - Chronic
 - Transient
 - Other
 - Specify if aplastic anemia is:
 - Constitutional
 - » Congenital, idiopathic or acquired
 - Drug-induced, radiation, or induced from other external agent
 - Idiopathic
 - Document pancytopenia or myelophthisis, if also present
- Document if any of the following are present:
 - “Acute posthemorrhagic anemia”
 - “Anemia in neoplastic disease”
 - “Anemia in chronic kidney disease”
 - “Anemia in other chronic disease”
 - List the chronic diseases
- Document if “Sideroblastic anemia” is:
 - Hereditary
 - Secondary due to disease
 - Secondary due to “drugs and toxins”
 - Congenital dyserythropoietic anemia
- Document if the Anemia is Due to Antineoplastic chemotherapy
- Document any associated diagnoses/conditions

Pancytopenia

- Specify if:
 - Antineoplastic chemotherapy induced pancytopenia
 - Other drug-induced pancytopenia
 - Specify drug
 - Other pancytopenia
- Specify the etiology of pancytopenia (if known), such as:
 - Myelodysplastic Syndrome
 - Leukemia
 - HIV
 - Other (specify)
- Document any associated diagnoses/conditions

Coagulopathy

- Specify type:
 - Disseminated intravascular coagulation
 - Hereditary factor VIII deficiency
 - Hereditary factor IX deficiency
 - Von Willebrand's disease
 - Hereditary factor XI deficiency
 - Hereditary deficiency of other clotting factors
 - Acquired coagulation factor deficiency
 - Primary thrombophilia
 - Activated protein C resistance
 - Prothrombin gene mutation
 - Other primary thrombophilia
 - Other thrombophilia
 - Antiphospholipid syndrome
 - Lupus anticoagulant syndrome
 - Other Specified coagulation defects
- Document any associated diagnoses/conditions
- Hemorrhagic disorder due to circulating anticoagulants
 - Due to intrinsic circulating anticoagulants, antibodies, or inhibitors
 - Acquired hemophilia
 - Antiphospholipid antibody with hemorrhagic disorder
 - Other hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors
 - Hemorrhagic disorder due to extrinsic circulating anticoagulants
 - Document specific drug, if drug-induced

Purpura

- Specify if “Allergic purpura” is present and note the following:
 - Allergic vasculitis
 - Nonthrombocytopenic hemorrhagic purpura
 - Nonthrombocytopenic idiopathic purpura
 - Purpura anaphylactoid
 - Purpura Henochi
 - Purpura rheumatica
 - Vascular purpura
- Document if “Qualitative platelet defects” is present
- Specify if “Other nonthrombocytopenic purpura” is present
 - Purpura not otherwise specified
- Document if any of the following are present:
 - “Immune thrombocytopenic purpura”
 - “Other primary thrombocytopenia”
 - Evans Syndrome
 - Congenital and/or Hereditary thrombocytopenia
 - “Secondary thrombocytopenia”
 - Posttransfusion pupura
 - Other secondary thrombocytopenia
- Document “Other specified hemorrhagic conditions”
 - Capillary fragility (hereditary)
 - Vascular pseudohemophilia
- Document any associated diagnoses/conditions

Diabetes

- Type:
 - Type 1
 - Type 2
 - Drug/chemical induced
 - Due to underlying condition
 - Other specified type
- Control:
 - Inadequate control
 - Out of control
 - Poorly Controlled
 - Hypoglycemia
 - Hyperglycemia
- Insulin use
- Document any associated diagnoses/conditions
- Manifestation/Complication (document link to diabetes)
 - Circulatory complications
 - Hyperosmolarity
 - With or without coma
 - Hypoglycemia
 - Ketoacidosis
 - With or without coma
 - Kidney complications
 - Neurological complications
 - Ophthalmic complications
 - Oral complications
 - Skin complications
 - Arthropathy
 - Other (specify)

Obesity

- Obesity
 - Morbid (severe)
 - Due to excess calories
 - With alveolar hypoventilation (Pickwickian syndrome)
 - Drug Induced
 - Document drug
 - Other
 - Due to excess calories, familial, endocrine
- Overweight
- Body Mass Index (BMI)
- Document any associated diagnoses/conditions

Malnutrition

- Severity:
 - Mild (first degree)
 - Moderate (second degree)
 - Severe (third degree)
- Avoid documenting a range of severity, such as “moderate to severe”
- Form:
 - Kwashiorkor (*rarely seen in the U.S.*)
 - Marasmus
 - Marasmic kwashiorkor
 - Other
- Document any associated diagnoses/conditions

Alcohol, Tobacco, and Substance Use

- Identify the specific type of drug or substance
- Describe the frequency of usage as:
 - Use
 - Abuse
 - Dependence
 - In remission
- Describe mode of nicotine use as cigarettes, chewing tobacco, pipe, and/or gum
- Specify intoxication/withdrawal as “Uncomplicated” or “With delirium”
- Document any withdrawal symptoms
- Document any associated diagnoses/conditions
- List the blood alcohol level, if available
- State “no related complications,” when applicable
- Document any related mood disorder
- Document any delusions, hallucinations, anxiety, sleep disorders, sexual dysfunctions, or other related conditions
- List any treatment provided:
 - Detoxification services
 - Counseling
 - Psychotherapy
 - Medication management
 - Pharmacotherapy

Depressive

- Document episode:
 - Single
 - Recurrent
- Document severity:
 - Mild
 - Moderate
 - Severe
 - With psychotic features
 - Without psychotic features
- In partial or full remission (if applicable)
- Document any associated diagnoses/conditions

Altered Mental Status

- Document the etiology of the altered mental status as:
 - Coma
 - Confusion/delirium (including drug-induced)
 - Drowsiness/somnolence
 - Stupor/semi-coma
 - Transient alteration of awareness
 - Encephalopathy
 - Alcoholic
 - Anoxic/hypoxic
 - Drug-induced/toxic (specify drug)
 - Hepatic
 - Hypertensive
 - Hypoglycemic
 - Metabolic/septic
 - Traumatic/post-concussion
 - Wernicke
 - Other (specify)
- Document any associated diagnoses/conditions

Cerebral Palsy

- Document presence of spasticity
- Document type:
 - Quadriplegic, Diplegic, Hemiplegic, etc.
 - Ataxic
 - Athetoid
 - Choreathetoid
 - Dyskinetic
 - Dystonic
 - Mixed
 - Syphilitic
- Document any associated diagnoses/conditions

Glaucoma

- Type (specify eye(s) affected)
 - Open angle
 - specific type (primary, low-tension, pigmentary, capsular, residual stage)
 - Narrow angle (angle-closure)
 - specific type (e.g. acute, chronic, intermittent, residual stage),
 - Glaucoma in diseases, such as:
 - Amyloidosis
 - Diabetes
 - Other (specify)
 - Glaucoma suspected
- Secondary glaucoma due to:
 - Drugs
 - Eye inflammation
 - Trauma
 - Other disorders
- Stage (specify eye(s) affected)
 - Mild
 - Moderate
 - Severe, Advanced, End-stage
 - Indeterminate
- Document any associated diagnoses/conditions

Otitis Media

- Incidence:
 - Acute/subacute
 - Acute recurrent
 - Chronic
- Laterality:
 - Right ear
 - Left ear
 - Bilateral
- Types:
 - Serous
 - Suppurative or Nonsuppurative
 - Tubotympanic
 - Atticoantral
 - Allergic
 - Mucoid
- Document if associated with:
 - Spontaneous rupture of tympanic membrane
 - Without spontaneous rupture of tympanic membrane
 - Infectious or other external agent
 - Exposure to environmental tobacco smoke
- Document any other associated diagnoses/conditions

Hearing Loss

- Laterality:
 - Bilateral
 - Unilateral
- Extent of hearing loss:
 - Left/right ear with unrestricted hearing on the contralateral side
- Types:
 - Conductive
 - Sensorineural
 - Mixed
 - Other (specify)
- Document any associated diagnoses/conditions

Heart Failure

- Document acuity
 - Acute
 - Chronic
 - Acute on Chronic
- Document type
 - Diastolic
 - Systolic
 - Combined systolic and diastolic
- Due to or associated with
 - Cardiac or other surgery
 - Hypertension
 - Valvular disease
 - Rheumatic heart disease
 - Endocarditis (*valvitis*)
 - Pericarditis
 - Myocarditis
 - Other (specify)

CVA

- **Due to Hemorrhage**

- Location or source of hemorrhage
 - Subarachnoid (specify artery, if known)
 - Intracerebral (specify location, if known)
 - Intracranial
 - » Subdural
 - * Acute, Subacute, Chronic
 - » Extradural
- Laterality
- Document any associated diagnoses/conditions

- **Due to causes other than hemorrhage**

- Cause
 - Thrombosis
 - Embolism
 - Other (specify)
 - Unspecified Occlusion or stenosis
- Site
 - Precerebral Arteries (specify artery, if known)
 - Cerebral Arteries (specify artery, if known)
- Laterality
- Document any associated diagnoses/conditions

Myocardial Infarction

- Document the type of MI:
 - ST elevation (STEMI)
 - Requires site and specific artery:
 - » Anterior Wall
 - * Left main coronary artery
 - * Left anterior descending artery
 - * Other coronary artery of anterior wall
 - » Inferior Wall
 - * Right coronary artery
 - * Other coronary artery of inferior wall
 - Other
 - Left circumflex coronary artery
 - Other Specified
 - Non-ST elevation MI (NSTEMI)
 - Requires episode of care reporting only
 - Document date of any recent acute MIs within 28 days of admission
 - Document whether or not the current MI has occurred within 28 days of a previous MI
 - Document if the patient has a history of an MI (older than 28 days)
 - Document any associated diagnoses/conditions

Cardiac Arrest

- When there is a “Cardiac Arrest” the documentation should include:
 - due to underlying cardiac condition
 - due to other underlying condition
 - cardiac arrest, cause unspecified
- In addition, specify if:
 - postprocedural cardiac arrest following cardiac surgery
 - postprocedural cardiac arrest following other surgery
 - intraoperative cardiac arrest during cardiac surgery
 - intraoperative cardiac arrest during other surgery
- Always document the “underlying cardiac condition” if known
- Document any associated diagnoses/conditions

Respiratory Failure

- Document acuity:
 - Acute
 - Chronic
 - Acute on chronic
- Document inclusion of:
 - Hypoxia
 - Hypercapnia
- Document tobacco:
 - Use
 - Abuse
 - History of
- Document any associated diagnoses/conditions

Pneumonia

- Document causative organism (if known)
- Document mechanism:
 - Aspiration
 - Ventilator-associated
 - Radiation-induced
 - Other (specify)
- Document any associated illness:
 - Respiratory failure
 - Sepsis
 - Underlying lung disease
 - Other (specify)
- Document history of tobacco use—present or past

Asthma

- With
 - Acute lower respiratory infection
 - COPD
 - Chronic obstructive bronchitis
 - Exacerbation
 - Status asthmaticus
- Severity
 - Mild intermittent
 - Mild persistent
 - Moderate persistent
 - Severe persistent
- Form or Type
 - Cough variant
 - Childhood
 - Exercise induced bronchospasm
 - Extrinsic allergic
 - Idiosyncratic
 - Intrinsic nonallergic
 - Late-onset
 - Mixed
 - Other (specify)
- Document any associated diagnoses/conditions

Crohn's Disease/Regional Enteritis

- With Complication
 - Abscess
 - Fistula
 - Intestinal obstruction
 - Rectal bleeding
 - Other (specify)
- Site
 - Small intestine
 - Large intestine
 - Both small and large intestines
- Document any associated diagnoses/conditions

Appendicitis

- Severity
 - Acute
 - Chronic
 - Recurrent
 - Subacute
- With
 - Perforated or ruptured appendix
 - Peritoneal abscess
 - Peritonitis
 - Generalized
 - Localized
 - Other (specify)

Hepatic Encephalopathy

- Etiology
 - Due to alcohol
 - Due to drugs
 - Post-procedural
- Acuity
 - Acute
 - Subacute
 - Chronic
- Severity
 - With coma
 - Without coma
- Document any associated diagnoses/conditions

Pressure Ulcers

- Site (include laterality):
 - Elbow
 - Back (upper/lower)
 - Sacral
 - Hip
 - Buttock
 - Ankle
 - Heel
 - Head
 - Other (specify)
- Pressure Ulcer Stage:
 - Stage 1
 - Stage 2
 - Stage 3
 - Stage 4
 - Unspecified
- With gangrene
- Document any associated diagnoses/conditions
- Document if ulcer (including stage) is present on admission

Non-Pressure Ulcers

- Site:
 - Back
 - Buttock
 - Lower limb
 - Laterality
 - » Right
 - » Left
 - Specific site/area
 - » Ankle
 - » Calf
 - » Heel/midfoot
 - * Plantar surface
 - » Thigh
 - » Other part of lower leg
 - Other (specify)
- Ulcer depth:
 - Limited to skin breakdown
 - With fat layer exposed
 - With muscle necrosis
 - With bone necrosis
- Cause of lower limb ulcers:
 - Atherosclerosis of lower extremity
 - Chronic venous hypertension
 - Diabetic ulcer
 - Postphlebotic syndrome
 - Postthrombotic syndrome
 - Varicose ulcer
 - Other (specify)
- With gangrene
- Document any associated diagnoses/conditions

Cellulitis

- Specify anatomic site
- Laterality:
 - Right
 - Left
 - Bilateral
- Cellulitis of “other parts of limb,” specify:
 - Right
 - Left
 - Upper
 - Lower
- Cellulitis of the “cheek,” specify:
 - Internal
 - External
- Document any associated diagnoses/conditions

Pathologic Fractures

- Document location:
 - Bone (distal, proximal, shaft, etc.)
 - Laterality
- Document etiology:
 - Osteoporosis
 - Disuse
 - Drug-induced
 - Postmenopausal
 - Idiopathic
 - Postsurgical malabsorption
 - Other (specify)
 - Neoplastic disease
 - Other (specify)
- Document encounter type:
 - Initial encounter
 - Subsequent encounter
 - Routine healing
 - Delayed healing
 - Nonunion
 - Malunion
 - Sequela
- Document any associated diagnoses/conditions

Gout

- Specify the type/cause of gout:
 - Drug-induced
 - Idiopathic
 - Lead-induced
 - Primary
 - Secondary
 - Syphilitic
 - With renal impairment (specify the specific renal disease/disorder, including acuity and/or state)
- Specify the specific joint involved along with laterality
- Specificity acuity of gout:
 - Acute
 - Chronic—With or Without Tophus
 - Gout attack
 - Gout flare
- Document any associated diagnoses/conditions

Scoliosis

- Specify type:
 - Infantile idiopathic
 - Progressive
 - Resolving
- Juvenile idiopathic
- Adolescent
- Other idiopathic
- Thoracogenic
- Neuromuscular
- Other secondary
- Other (specify)
- Specify site:
 - Cervical
 - Cervicothoracic
 - Thoracic
 - Thoracolumbar
 - Lumbar
 - Lumbosacral
 - Sacral
 - Sacrococcygeal
- Document any associated diagnoses/conditions

Chronic Kidney Disease

- Document the stage of CKD
 - Chronic kidney disease, stage 1
 - Chronic kidney disease, stage 2 (mild)
 - Chronic kidney disease, stage 3 (moderate)
 - Chronic kidney disease, stage 4 (severe)
 - Chronic kidney disease, stage 5
 - End-stage renal disease (ESRD)
- Document any underlying cause of CKD such as Diabetes or Hypertension
- Document if the patient is dependent on Dialysis
- Chronic renal failure without a documented stage will be assigned to Chronic kidney disease, unspecified
- Document any associated diagnoses/conditions

Acute Renal Failure

- Document underlying condition(s) contributing/causing acute renal failure if known or suspected
- Document if acute kidney injury (AKI) is due to traumatic injury or if due to a non-traumatic event
- Document if acute renal failure is due to:
 - Acute tubular necrosis (ATN)
 - Acute cortical necrosis
 - Acute medullary necrosis
 - Other (specify)
- Be specific with documentation
 - Acute renal insufficiency and acute kidney disease are not reported as acute renal failure
- Document any associated diagnoses/conditions

OB/Pregnancy

- Specify trimester
 - First (less than 14 weeks, 0 days)
 - Second (14 weeks, 0 days to less than 28 weeks, 0 days)
 - Third (28 weeks until delivery)
- Specify preterm labor/delivery
- Gestational Diabetes needs documentation specification of diet controlled or insulin controlled
- Document any associated diagnoses/conditions

Newborn

- Birth:
 - In hospital
 - Specify delivery type
 - Outside hospital
- Document any maternal conditions affecting the newborn
- Specify gestational age and weight of newborn
- Specify congenital vs. acquired conditions
- Document any associated diagnoses/ conditions

Congenital Foot Deformities

- Specify “Congenital” or “Acquired”
- Specify type:
 - Talipes equinovarus
 - Talipes calcaneovarus
 - Metatarsus varus
 - Talipes calcaneovalgus
 - Pes planus (left vs. right)
 - Pes cavus
 - Vertical talus deformity (left vs. right)
 - Other (specify)
- Document any associated diagnoses/conditions

Cleft Palate

- Specify palate involvement:
 - Hard
 - Soft
 - Hard with Soft
 - Medial
 - Uvula
- Document cleft lip involvement:
 - Unilateral cleft lip
 - Bilateral cleft lip
 - Median cleft lip
- Document any associated diagnoses/conditions

Coma

- Document:
 - Somnolence, drowsiness
 - Stupor, catatonic stupor, or semicoma
 - Coma, unconsciousness
 - Include any associated skull fracture or intracranial injury if present
- Document the Glasgow (coma scale) score
 - (Typically reported as a total score 0-15)
 - Higher the score = higher functioning
- Also document each assessment area:
 - Eye opening
 - Verbal response
 - Motor response

Gustilo Classification

- Specificity for open fractures of the forearm, femur, and lower leg will require provider documentation to specify Gustilo Type I through Type IIIC:
 - **TYPE I:** The wound is smaller than 1 cm, clean, and generally caused by a fracture fragment that pierces the skin.
 - **TYPE II:** The wound is longer than 1 cm, not contaminated, and without major soft tissue damage or defect. This is also a low energy injury.
 - **TYPE III:** The wound is longer than 1 cm., with significant soft tissue disruption. The mechanism often involves high-energy trauma, resulting in a severely unstable fracture with varying degrees of fragmentation.
 - **IIIA:** The wound has sufficient soft tissue to cover the bone without the need for local or distant flap coverage.
 - **IIIB:** Disruption of the soft tissue is extensive, such that local or distant flap coverage is necessary to cover the bone. The wound may be contaminated, and serial irrigation and debridement procedures are necessary to ensure a clean surgical wound.
 - **IIIC:** Any open fracture associated with an arterial injury that requires repair is considered IIIC. Involvement of a vascular surgeon is generally required.
- NOTE: Even though the fracture may be described using the terminology found in the Gustilo classification the provider must document the type of Gustilo fracture present; coder CANNOT code based on the fracture description.

Fractures

- Cause:
 - Traumatic
 - Stress
 - Pathologic
- Location:
 - Which bone?
 - Which part of the bone?
 - Laterality (right, left, or bilateral)
- Type:
 - Non-displaced
 - Displaced
 - Open (Gustilo classification where applicable)
 - Closed (Greenstick, spiral, etc.)
 - Salter-Harris (specify type)
- Encounter:
 - Initial
 - Subsequent
 - For routine healing
 - For delayed healing
 - For non-union
 - For malunion
 - Sequela (such as bone shortening)
- Include the external cause of the fracture, such as fall while skiing, motor vehicle accident, tackle in sports, etc.
- Document any associated diagnoses/conditions

Burns

- Type:
 - Corrosion
 - Thermal
- Site:
 - Specify body part
 - Include laterality
- Degree:
 - First
 - Second
 - Third
- Document total body surface area (TBSA) burned (percentage)
- Specify the percentage of third degree burns
- Include the external cause of the burn, such as house fire, stove, acid, etc.
- Document any associated diagnoses/conditions

Underdosing

- Using a prescribed medication less frequently than prescribed, in small doses, or not using the medication as instructed should be documented as “underdosing” by the provider
- If the reduction in the prescribed dose of the medication results in a relapse or an exacerbation of the medical condition for which the drug is prescribed, the medical condition must also be documented

External Cause

- Document “how” an injury occurred, such as fall, motor vehicle accident, etc.
- Document “where” an injury occurred, such as home, work, school, etc.
- Document “activity”, such as skiing, ironing, gardening, etc.
- Document “status”:
 - Civilian
 - Military
 - Volunteer
 - Other (specify)
- Important Notes:
 - No national requirement for external cause reporting
 - Some states and payers require external cause codes

Encounter For

- Document the reason for encounter, such as:
 - Examination
 - Pregnancy
 - Adjustment/removal of device
 - Suspected condition, ruled out
 - Other (specify)

History (Personal and Family)

- Document any relevant personal/family history, such as:
 - Malignant neoplasm (specify type)
 - Congenital malformations/deformations (specify type)
 - Allergies (specify type)
 - Chemotherapy
 - Radiation therapy
 - Surgical history
 - Other (specify)

Genetic Carrier/Susceptibility

- Specify genetic carrier of:
 - Cystic fibrosis
 - Hemophilia A
 - Other (specify)
- Susceptibility to disease:
 - Malignant neoplasm (specify type)
 - Multiple endocrine neoplasia
 - Other (specify)

Retained Foreign Body

- Specify type of foreign body retained, examples:
 - Glass
 - Metal
 - Radioactive
 - Tooth
 - Other (specify)

Contact with and Exposure To

- Specify what the patient came into contact with, such as:
 - AIDS virus
 - Anthrax
 - Varicella
 - Mold
 - Second-hand tobacco smoke
 - Other (specify)

Reproductive Services

- Document reason for visit:
 - Contraceptive management (specify type)
 - Procreative management (specify type)
 - Pregnancy test or childbirth instruction
 - Pregnancy state, incidental
 - Elective termination of pregnancy
 - Supervision of normal pregnancy (specify trimester)
 - Antenatal screening of mother

Socioeconomic and Psychosocial Circumstances

- Document problems related to:
 - Education/literacy
 - Employment/unemployment
 - Occupational exposure (specify)
 - Housing & Economic
 - Social environment
 - Upbringing
 - Primary support group/Family circumstances
 - Other psychosocial circumstances

Body Mass Index

- Adult BMI (21 years +):
 - 19 or less
 - 20.0–20.9
 - 21.0–21.9
 - ...
 - 60.0–69.9
 - 70+
- Document any associated diagnoses/conditions, such as morbid obesity, malnutrition, etc.
- Pediatric BMI (ages 2–20):
 - Less than fifth percentile for age
 - Fifth percentile to less than 85th percentile for age
 - 85th percentile to less than 95th percentile for age
 - Greater than or equal to 95th percentile for age

Mechanical Device Complications

- Body system
- Type of device
- Specific complication
 - Breakdown
 - Displacement
 - Leakage
 - Infection
 - Hemorrhage
 - Pain
 - Embolism
 - Fibrosis
 - Other _____
- Episode of care
 - Initial encounter
 - Subsequent encounter
 - Sequela
- Document any associated diagnoses/conditions

Surgical Complications

- Document affected body system _____
- Document the specific condition _____
- Document whether the condition is a/an:
 - Complication of care
 - Expected procedural outcome
- Document when the complication occurred:
 - Intraoperative Complication
 - Postoperative Complication
- Document any associated diagnoses/conditions

ICD-10-PCS: Lymph Node Chains

- Document extent of excision/resection:
 - Entire lymph node chain
 - Portion of lymph node chain
- Document site:
 - Head
 - Right/Left neck
 - Right/Left upper extremity
 - Right/Left axillary
 - Thorax
 - Right/Left internal mammary
 - Mesenteric
 - Pelvis
 - Aortic
 - Right/Left lower extremity
 - Right/Left inguinal

ICD-10-PCS: Omentectomy

- Document the body part being resected/excised:
 - Greater omentum
 - Lesser omentum

ICD-10-PCS: Lysis of Adhesions

- Document the body part being released/freed, examples:
 - Jejunum
 - Ascending Colon
 - Gallbladder
 - Peritoneum
- Document the severity of adhesions, such as, complicated, extensive, etc.

ICD-10-PCS: Cleft Palate Repair

- Specify the following:
 - Palate description Hard/Soft/Both
 - Bilateral/Unilateral
 - Complete/Incomplete
 - With/without Cleft Lip Involvement
 - If Cleft Lip involvement—Bilateral/Unilateral

ICD-10-PCS: CABG

- Origination/Destination of graft(s)
 - Examples: aorta to RCA, LIMA to LAD (indicate if the LIMA was used as a pedicle graft)
- Type of graft(s) used
 - Examples: autologous artery, autologous vein, etc.
- Number of sites bypassed
 - Examples: one, two, three, or four, or more
- Excision of autologous graft
 - Identify the vessel
 - Examples: greater/lesser saphenous vein (left/right), radial artery (left/right)

ICD-10-PCS: Spinal Fusion

- Column fused
 - Anterior (rounded, smooth portion of spine)
 - Posterior (pedicle, lamina, facet, transverse process of spine)
- Approach
 - Anterior
 - Lateral
 - Posterolateral
 - Posterior
 - Lateral transverse
- Type of device(s) used
 - Interbody fusion device
 - Autologous bone graft
 - Nonautologous bone graft
 - Etc.
- Number of joints fused
 - L1-L3
 - L5-S1
 - Etc.

ICD-10-PCS: Amputations

- Lower Body (include laterality)
 - Hindquarter
 - Femoral Region
 - Knee Region
 - Upper/Lower Leg
 - High (proximal)
 - Mid (mid portion)
 - Low (distal)
 - Foot
 - Complete or partial ray(s)/metatarsal(s)
 - Toe
 - High (proximal phalanx)
 - Mid (PIP joint or middle phalanx)
 - Low (DIP joint or distal phalanx)
- Upper Body (include laterality)
 - Forequarter
 - Shoulder Region
 - Elbow Region
 - Upper/Lower Arm
 - High (proximal)
 - Mid (mid portion)
 - Low (distal)
- Hand
 - Complete or partial ray(s)/metacarpal(s)
- Thumb/Finger
 - High (proximal phalanx)
 - Mid (PIP joint or middle phalanx)
 - Low (DIP joint or distal phalanx)

ICD-10-PCS: Debridement

- Depth:
 - Skin
 - Subcutaneous tissue/fascia
 - Muscle
 - Joint
 - Bone
- Type:
 - Excisional/Sharp
 - Non-excisional
- Specify the type of instrument used