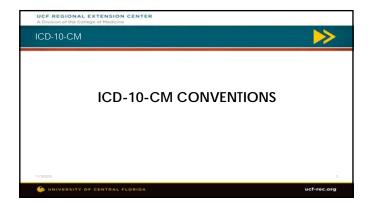
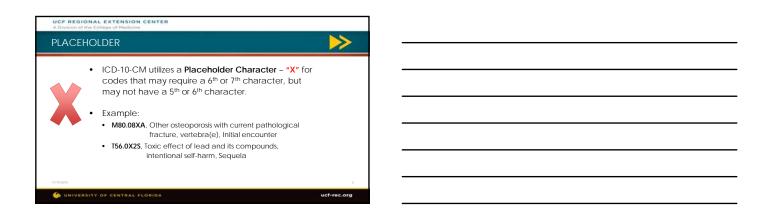


JECTIVES			
ICD-10-CM Conventions Importance of using ICD-10 Conventions 			
Major Convention changes in ICD-10-CM			
ICD-10-CM Guidelines			
 Importance of using ICD-10 Guidelines 			
 Major Guideline changes in ICD-10-CM 			
ICD-10-CM Chapter-Specific Guidelines			
 Major Guideline changes in specific chapters of ICD-10-CM 			
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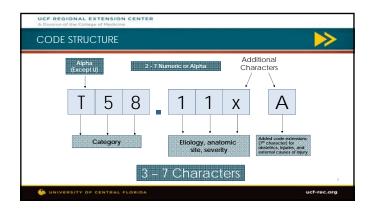
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MAJC	R MODIFICATIONS IN ICD-10 CM CONVENTIONS
	Placeholder Character Seventh Character Abbreviations NEC NOS Punctuation Parentheses, Brackets, Colon Instructional Notes Code First Use Additional Code Relational Terms And - With - Changes from ICD-9



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SEVENTH CHARACTERS	\rightarrow
 Some categories require a seventh character to provide further specificity about the condition being coded. May be a number or a letter Must <u>always</u> be the seventh character. 	de
 Examples: O64.3XX1, Obstructed labor due to brow presentation, fetus S02.110B, Type 1 occipital condyle fracture, initial encounter fracture T17.220D, Food in pharynx causing asphyxiation, subsequent encounter 	for open

Character	7 th Character Meaning
A	Initial Encounter/Closed Fracture
В	Initial Encounter/Open Fracture
D	Subsequent Encounter/Fracture Routine Healing
G	Subsequent Encounter/Fracture Delayed Healing
К	Subsequent Encounter/Fracture Nonunion
Р	Subsequent Encounter/Fracture Malunion
S	Sequela
When 7th o	character is applicable, and no 5 th /6 th character is plicable, placeholder "x" must be assigned





ABBREVIATIONS - NEC	>>>
 Not Elsewhere Classified – NEC Types of specified conditions that have not be anywhere else in the code set Alphabetic Index uses NEC for a code descrip direct the coder to the Tabular List showing an <u>Specified</u> code description 	otion that will
 Example: H26.8 Other specified cataract I25.89 Other forms of chronic ischemic heart disea 	se
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ABBREVIATIONS - NOS



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Not Otherwise Specified – NOS ٠

- Unspecified
- Available for use when the documentation of the condition ٠ identified by the provider is insufficient to assign a more specific code.
- Example:
 - H40.9 Unspecified glaucoma
 - J12.9 Viral pneumonia, unspecified

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PUNCTUATION

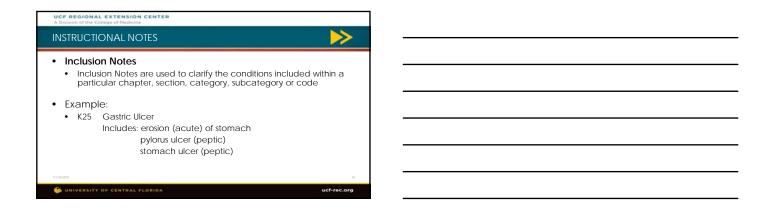
- () Parentheses Nonessential Modifiers Supplementary words that may be present or absent in the disease or procedure which do not affect the code $\ensuremath{\mathsf{assignment}}$
- Examples: Alphabetic Index
 - Diabetes, diabetic (mellitus) (sugar)
 - Hemophilia (classical) (familial) (hereditary)
- Examples: Tabular List
- **I10**, Essential (primary) hypertension
- K51.011, Ulcerative (chronic) pancolitis with rectal bleeding

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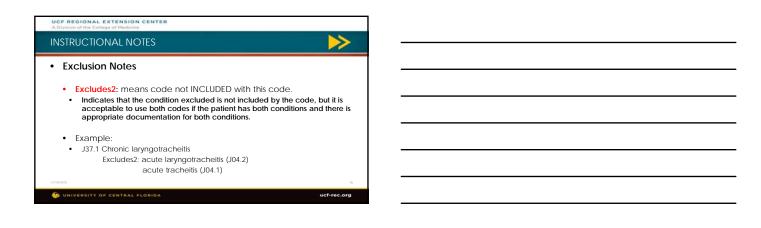
UCF REGIONAL EXTENSION CENTER >PUNCTUATION • [] Brackets Alphabetic Index: Identify Manifestation Codes Tabular List: Synonyms • Examples: Alphabetic Index • Disease, Alzheimer's G30.9 [F02.80] Nephrosis, in amyloidosis E85.4 [N08] Examples: Tabular List B06, Rubella [German measles] ٠ •

J00, Acute nasopharyngitis [common cold]

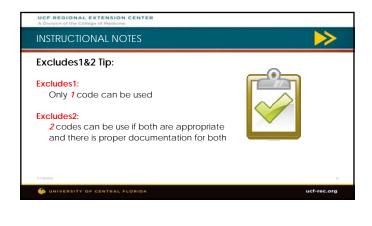
PUNCTUATION	
one of the modifiers fo	er an incomplete term which needs at least llowing the code to make it assignable les" and "Excludes" Notes
 Example: G73.7 Myopathy in dis 	eases classified elsewhere
s	heumatoid arthritis (M05.32) arcoidosis (D86.87) cleroderma (M34.82)
11/19/2015 S	ystemic lupus erythematosus (M32.19)



ISTRUCTIONAL NOTES	>
Exclusion Notes	
 Excludes1: Pure "excludes" note - means cannot be CODED here. The code excluded should never be used at the same time as the code above the Excludes1 note. Used when two codes cannot occur together. 	
 Example: E11 Type 2 Diabetes Mellitus Excludes1: Gestational Diabetes (O24.4-) Postprocedural Diabetes Mellitus (E13) Type 1 Diabetes Mellitus (E10) 	
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II	ISTRUCTIONAL NOTES
•	"Code First" & "Use Additional Code"
•	Used for Sequencing Priority – Found in Tabular

- When a particular disease or condition has many manifestations that go along with it, always code the underlying disease first, followed by the manifestation.
- Example:
 - E66 Overweight and Obesity
 - Code first obesity complicating pregnancy, childbirth and the puerperium, if applicable (O99.21-)
 - Use additional code to identify body mass index (BMI), if known (Z68.-)

RELATIONAL TERMS

- "AND" should be interpreted to mean either "and" or "or" • Example:

 - A18.0 Tuberculosis of bones and joints Tuberculosis of bones
 - Tuberculosis of joints
 - Tuberculosis of bones and joints
- "WITH" should be interpreted to mean "associated with" "in" or "due to"

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CHANGES FROM ICD-9

Injury Regrouping

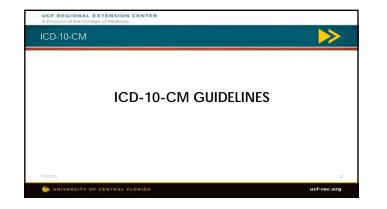
• Grouped by Anatomical Site rather than Types of Injury ICD-9-CM:

Fractures (800-829) Sprains/Strains (840-848)

ICD-10-CM: Injuries to Head (S00-S09) Injuries to Neck (S10-S19)

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UCF REGIONAL EXTENSION CENTER >CHANGES FROM ICD-9 • No V/E Codes Are now incorporated into main classifications V Codes: E Codes: Chapter 20: External causes of morbidity V, W, X, Y Codes Chapter 21: Factors influencing health status and contact with health services status and contact with health services • Z Codes Examples: Examples: 239.2 Encounter for routine postpartum follow-up 238.0 Single liveborn infant, born in hospital W21.03XA, Struck by baseball, initial encounter Y92.320, Baseball field as the place of occurrence of the external cause UNIVERSITY OF CENTRAL FLORID ucf-rec.org



Combination Center Abustion of the Colleage of Medicine ADJOR MODIFICATIONS IN ICD-10 CM GUIDELINES Level of Detail Laterality Integral Parts of Disease Acute and Chronic Conditions Combination Code Sequela (Late Effects) Chapter-Specific Coding Guidelines

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LEVEL OF DETAIL
 ICD-10-CM diagnosis codes are composed of 3 to 7 characters
 When reporting diagnosis codes, report the codes at their highest number of characters available The 4th, 5th, 6th and 7th characters provide greater detail A code is <u>invalid</u> if it has not been coded to the full number of characters required for that code, including the 7th character
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LATERALITY	\rightarrow
 Laterality specifies whether the condition occur side, <i>right</i> side, or is <i>bilateral</i> If no bilateral code is provided, assign separa the left side and the right side Example: C50.511 Malignant neoplasm, lower outer of right female breast 	ate codes for
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UCF REGIONAL EXTENSION CENTER ICD-10-CM GUIDELINES

Integral Parts of Disease

Signs and symptoms that are associated routinely with a disease process should not be assigned as additional codes

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- Signs and symptoms that may not be associated routinely with a disease process should be coded when present
- Examples:

- Patient with Gastroenteritis with Nausea and Vomiting
- Only code the Gastroenteritis
- Patient with Irritable Bowel Syndrome with Diarrhea, Nausea and Vomiting
 Code the Irritable Bowel Syndrome, Nausea, and Vomiting

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D-10-CM GUIDELINES
 Chronic and Acute Conditions If the same condition is described as both acute and chronic, code both and sequence the acute code first
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COMBINATION CODE

- New combination codes are a single code used to classify: • Two diagnoses
 - A diagnosis with an associated manifestation
 - A diagnosis with an associated complication
- Example:
 - K57.21 Diverticulitis of large intestine with perforation and abscess with bleeding
 - E11.341 Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema

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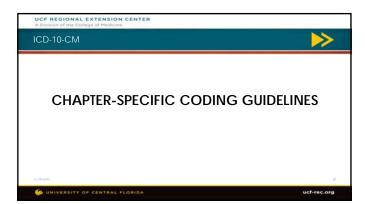
SEQUELA (LATE EFFECTS)

- A Sequela is the condition produced, or the *late effect*, after the acute phase of an illness or injury has terminated. • No time limit

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- Two codes required:

 • First code Originating Condition of the Sequela
- Second code The Sequela
- Example:
 - Scar after burn
 First Code: Scar (Originating Condition)
 Second Code: Burn (Sequela)



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- Beginning of Codebook
 - Section I. Conventions, general coding guidelines and chapter specific guidelines
 - C. Chapter-Specific Coding Guidelines
 - Chapter 1: Certain Infectious and Parasitic Diseases (A00-B99)
 - a. Human immunodeficiency virus (HIV) infections
 - 2) Selection and sequencing of HIV codes
 - (a) Patient admitted for HIV-related condition

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CHAPTER 1: CERTAIN INFECTIOUS AND PARASITIC DISEASES

• Human Immunodeficiency Virus (HIV) Infections

- I.C.1.a.2.a
- If a patient is admitted for HIV-related condition, the principal diagnosis should be B20, HIV, followed by additional diagnosis codes for all reported HIV-related conditions.
- I.C.1.a.2.b
 - If a patient with HIV is admitted for a condition unrelated to HIV, the code for the unrelated condition should be the principal diagnosis. Other diagnoses would be B20 followed by additional diagnosis codes for all reported HIVrelated conditions.

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CHAPTER 1: CERTAIN INFECTIOUS AND PARASITIC DISEASES

• Sepsis I.C.1.d.1.a

- For a sepsis diagnosis code, assign the code for the underlying systemic infection
 Severe Sepsis I.C.1.a.1.b
- Minimum of 2 codes
- First code: Underlying systemic infection
- Second code: From subcategory R65.2, Severe Sepsis
- Septic Shock I.C.1.a.2
- First code: Underlying systemic infection
- Second code: R65.21, Severe sepsis with septic shock OR
- T81.12, Postprocedural septic shock

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Chapter 2: Neoplasms

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- Treatment of Malignancy: I.C.2.a
 Malignancy is Primary Diagnosis
 Any Metastatic Sites Code Second
- Treatment of Secondary Site (Metastasis): 1.C.2.b
 Secondary Site is Primary Diagnosis
 Primary Malignancy is coded as an additional code
- Primary Malignancy Previously Excised: I.C.2.d
 Code from Category 285, Personal History of malignant neoplasm, should be used

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UCF REGIONAL EXTENSION CENTER A Division of the College of Medicine CHAPTER 2: NEOPLASMS
 EXCEPTION: ANEMIA I.C.2.I.4 When the patient is being treated <i>only</i> for Anemia associated with a Malignancy, the Malignancy is sequenced as the <u>Principal Diagnosis</u> followed by code <i>D63.0, Anemia in neoplastic disease</i>
11/1/2015 28 28 UNIVERSITY OF CENTRAL FLORIDA 10-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-

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CHAPTER 9: DISEASES OF THE CIRCULATORY SYSTEM

Acute Myocardial Infarction (AMI)

• Subsequent AMI: I.C.9.e.4

A code from category 122 is to be used when a patient who has suffered an AMI has a new AMI within the 4 week time frame of the initial AMI. A code from category I22 must be used in conjunction with a code from category I21. The sequencing of the I22 and I21 code depends on the circumstances of the encounter.

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CHAPTER 12: DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE Pressure Ulcer Codes: • I.C.12.a.1 Single combination codes that identify: Site Laterality Stage (1-4, Unspecified, Un-stagable)

- Assign as many codes as needed to identify all the pressure ulcers if more than one
- I.C.12.a.6
 - · Assign the code for the highest state reported for each site

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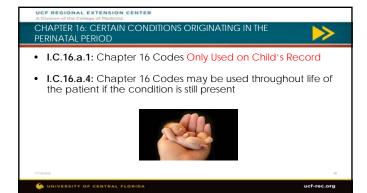
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CHAPTER 15: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM

- I.C.15.a.2: Chapter 15 codes Only Used on the Mothers Record
- I.C.15.a.3: Final Character in Code added for Trimester
- I.C.15.a.4: Selection of trimester for inpatient admissions that encompass more than one trimesters
 - Code Trimester for when Condition Began if it overlaps into a subsequent Trimester

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ADditional difference
CHAPTER 18: SYMPTOMS, SIGNS, AND ABNORMAL CLINICAL AND
LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED

I.C.18.a: Codes that describe signs and symptoms are acceptable
when a definitive diagnosis has not been established by the provider

I.C.18.b: When symptoms are not routinely found with the final
diagnosis, code:
First Code, Definitive Diagnosis
Second Code, Symptom

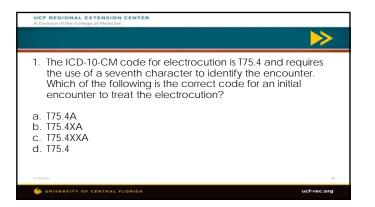
 Signs or symptoms that are routinely found with a disease process should not be assigned as additional codes

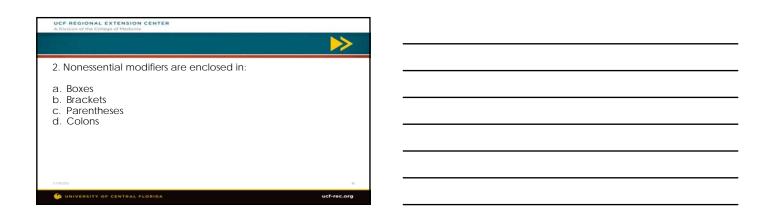
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CHAPTER 19: INJURY, POISONING, AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES
I.C.19.d.1: Burns (From Heat Source) vs. Corrosions (Due to Chemicals)
Burns are classified by Depth:
 1st Degree – Erythema
 2nd Degree – Blistering
 3rd Degree – Full-Thickness Involvement
 Sequence the code that reflects the highest degree of burn when
more than one burn is present first
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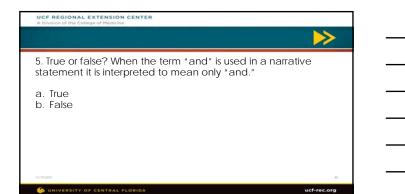
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4. The first character of an ICD-10-CM code is:

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- a. Always a number
- b. Always a letterc. Can be either a number or letter
- d. None of the above



SUMMARY	\rightarrow
 There are many new changes in ICD-10 new guidelines will be imperative to the October 1, 2015. 	
 Focus on Specific Guidelines that are u line of work. 	sed in your practice or
Training is Critical to Prepare Staff for Cl	nange!

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