ICD-10-CM CODING WORKSHOP (CHAPTERS 18-21)

PRESENTED BY: TRISH STONE, RHIA, CPMA, CPC, AHIMA APPROVED ICD-10-CM/PCS TRAINER

BASIC CODING TIPS

• Start looking up the codes from the top down
• Looking up codes from the middle of the page will lead you the WRONG way!
• Use colored tabs to mark the alphabet and the sections
• ALWAYS confirm your code in the Tabular

Chapter 18

ICD-10-CM SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS

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Chapter 18: Symptoms, Signs and Abnormal Clinical and Laboratory Findings (R00-R99)

Includes symptoms, signs, abnormal results of clinical or other investigative procedures and ill-defined conditions regarding which no diagnosis classifiable elsewhere is recorded.

- Unable to establish final diagnosis.
- Points equally to two or more diseases or two or more systems of the body.
- Could be designated: Not Otherwise Specified, Unknown Etiology, or Transient.

No more specific diagnosis can be made even after all facts have been investigated.

- Signs or symptoms existing at time of initial encounter - transient and causes not determined.
- Provisional diagnosis in patient failing to return.
- Referred elsewhere before diagnosis made.
- More precise diagnosis not available.

Certain symptoms, for which supplementary information is required, that represent important problems in medical care in their own right.

SCENARIO 18.1

Assign the code(s) for the following diagnosis: Right upper quadrant abdominal tenderness.

R10.821 Tenderness, abdominal, rebound, right upper quadrant.
SCENARIO 18.2

Assign the code(s) for the following diagnosis: Sinoatrial bradycardia.

**R00.1** Bradycardia (sinoatrial) (sinus) (vagal)

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SCENARIO 18.3

The patient is seen complaining of right upper quadrant abdominal pain. In addition, the patient is having nausea and vomited several times. Patient also has elevated blood pressure readings but a diagnosis of hypertension is not made at this visit. The patient was given an order for an outpatient sonogram. What diagnosis codes are assigned?

**R10.11** Pain(s) (see also painful), abdominal, upper, right quadrant

**R11.2** Nausea, with vomiting

**R03.0** Elevated, elevation, blood pressure, reading (incidental) (isolated) (nonspecific), no diagnosis of hypertension

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Chapter 19

**ICD-10-CM**

INJURY, POISONING, AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES

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CHAPTER 19

- Injury, poisoning and certain other consequences of external causes (S00-T88)
- Encompasses 2 alpha characters
  - S: Injuries related to body region
  - T: Injuries to unspecified region
- Poisonings, external causes

NOTE: Use secondary code(s) from Chapter 20 to indicate cause of injury. Codes within T section that include the external cause do not require an additional external cause code.

Chapter 19

Injuries grouped by body part rather than category of injury

- Head: (S00-S09)
- Neck: (S10-S19)
- Thorax: (S20-S29)

7TH CHARACTER INJURY EXTENSIONS

<table>
<thead>
<tr>
<th>Character</th>
<th>7th Character Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Initial Encounter/Closed Fracture</td>
</tr>
<tr>
<td>B</td>
<td>Initial Encounter/Open Fracture</td>
</tr>
<tr>
<td>D</td>
<td>Subsequent Encounter/Fracture Routine Healing</td>
</tr>
<tr>
<td>G</td>
<td>Subsequent Encounter/Fracture Delayed Healing</td>
</tr>
<tr>
<td>K</td>
<td>Subsequent Encounter/Fracture Nonunion</td>
</tr>
<tr>
<td>P</td>
<td>Subsequent Encounter/Fracture Malunion</td>
</tr>
<tr>
<td>S</td>
<td>Sequela</td>
</tr>
</tbody>
</table>

When 7th character is applicable, and no 5th/6th character is applicable, placeholder "X" must be assigned.
Fractures

- A fracture not indicated as displaced or nondisplaced should be coded to displaced
- A fracture not designated as open or closed should be coded to closed

Initial Encounter

The patient is receiving active treatment for the condition
- Surgical treatment
- Emergency department encounter
- Evaluation and treatment by a new physician

“WHILE THE PATIENT MAY BE SEEN BY A NEW OR DIFFERENT PROVIDER OVER THE COURSE OF TREATMENT FOR A PATHOLOGICAL FRACTURE, ASSIGNMENT OF THE 7th CHARACTER IS BASED ON WHETHER PATIENT IS UNDERGOING ACTIVE TREATMENT AND NOT WHETHER THE PROVIDER IS SEEING THE PATIENT FOR THE FIRST TIME.”
After patient received active treatment for the condition and receiving routine care during healing or recovery phase:
- Cast change or removal
- Removal of external or internal fixation device
- Medication adjustment
- Other aftercare and follow-up visits following injury treatment

Note: Aftercare Z codes should not be used for aftercare for injuries - assign the acute injury code with the appropriate seventh character for "subsequent encounter."

Complications or conditions that arise as a direct result of an injury:
- Example: Scarring formation after burn
- Use both the injury code that precipitated sequela and code for the sequela itself
- "S" added only to injury code, not sequela code
- "S" identifies injury responsible for sequela.
- Specific type of sequela (like scar) should be sequenced first, followed by injury code

Poisoning, adverse effects, and underdosing:
- Overdose of substances using substance given or taken in error
- Adverse effect "Hypersensitivity," "reaction," or correct substance properly administered
- Underdosing Taking less of medication than is prescribed or instructed by manufacturer either inadvertently or deliberately
POISONING, ADVERSE EFFECTS, AND UNDERDOSING

• Use additional code(s) for all manifestations of poisoning and adverse effects
• Assign the code for the nature of the adverse effect first, followed by the code for the drug (Table of Drugs and Chemicals)
• Use additional code for intent of underdosing:
  - Failure in dosage during medical and surgical care (Y63.6, Y63.8-Y63.9)
  - Patient's underdosing of medication regime (Z91.12X, Z91.13X)

Combination Codes!

- Poisonings and the associated external cause (accidental, intentional self-harm, assault, undetermined)
- Table of Drugs and Chemicals groups all poisoning columns together
- Followed by adverse effect and underdosing
- When no intent of poisoning is indicated, code to accidental
- Undetermined intent is only for use when there is specific documentation in record that intent cannot be determined

SCENARIO 19.1

A 17 year old young man is brought by his parent after he has a fall from his skateboard. He was found to have right-sided fracture of 3 ribs, a right chest contusion and a fractured right wrist. None of his injuries required surgical intervention. What is the correct diagnosis code(s)?

S22.41xA Fracture, traumatic (abduction) (adduction) (separation), rib, multiple
S62.101A Fracture, traumatic (abduction) (adduction) (separation), wrist
V00.131A Accident, transport, pedestrian, conveyance, skate board, fall
**SCENARIO 19.2**

Code the following diagnosis: 2 cm laceration of the left heel with foreign body. This is a current injury.

S91.322A Laceration, heel – see Laceration, foot (except toe(s) alone), left, with foreign body

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**SCENARIO 19.3**

This toddler is seen emergently for nausea and vomiting after an accidental overdose of acetaminophen. He inadvertently ate several of these when he found an open bottle at home. What is the correct diagnosis code(s)?

T39.1x1A Poisoning (acute) – see also Table of Drugs and Chemicals, Acetaminophen, Poisoning, Accidental (unintentional)

R11.2 Nausea (without vomiting), with vomiting

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**SCENARIO 19.4**

A patient has been taking Digoxin and is experiencing nausea and vomiting and profound fatigue. The patient indicates that he has been taking the drug appropriately. The evaluation and treatment was focused on adjustment of medication only. What is the correct diagnosis code(s)?

R11.2 Nausea, with vomiting

R53.83 Fatigue

T46.0x5A Table of Drugs and Chemicals, Digoxin, adverse effect
**SCENARIO 19.5**

A cook in a fast food restaurant was accidentally receive second degree burns on his left forearm and third degree burns on the back of his left hand when hot oil splashed onto him while he was cooking French fries. What are the appropriate diagnosis code(s)? (Code only diagnoses)

- **T23.362A** Burn, hand, back – see Burn, dorsum of hand, Burn dorsum of hand, left, third degree.
- **T22.212A** Burn, arm – see Burn upper limb; forearm – see Burn, forearm; Burn, forearm, left, second degree.

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**EXTERNAL CAUSES OF MORBIDITY**

**ICD-10-CM**

Chapter 20: External causes of morbidity (V00-Y99)

- Classification of environmental events and circumstances as the cause of injury and other adverse effects
- To be used secondary to a code from nature of the condition
- External cause code may be used with any code in range A00.0-T88.9, Z00-Z99, that is health condition due to external cause
- Most applicable to injuries, also valid for other uses - i.e. infections or heart attack occurring during strenuous physical activity
- Assign external cause code, with appropriate seventh character for each encounter for which injury or condition is being treated
  - Initial encounter
  - Subsequent encounter
  - Sequela
TRANSPORT ACCIDENTS

A transport accident is one in which the vehicle must be moving, running or in use for transport purposes at the time of the accident.

Definitions of transport vehicles provided in classification.

Use additional code to identify:
- Airbag injury (W22.1-)
- Type of street or road (Y92.4-)
- Use of cellular telephone at time of transport accident (Y93.C-)

Y92-PLACE OF OCCURRENCE

Use with activity code. Only on initial encounter. Only one Y92 code on record. Do not use Y92.9 if place not stated.
SCENARIO 20.1

The patient was bitten by a dog while attempting to rescue it from an abandoned barn while performing his job at animal control.

**Y54.00XA**  Index to External Causes, BIt, bitten by, dog

**Y92.71**  Index to External Causes, Place of occurrence, barn

**Y93.K9**  Index to External Causes, Activity (involving) (of victim at time of event), animal care NEC

**Y99.0**  Index to External Causes, External cause status, civilian activity done for income or pay

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SCENARIO 20.2

A female patient was accidentally burned with hot oil while cooking in the kitchen of her apartment.

X10.2XXA Index to External Causes, Burn, burned, burning (accidental) (by) (from) (on), hot, oil (cooking)

Y92.030 Index to External Causes, Place of Occurrence, residence, apartment, kitchen

Y93.G3 Index to External Causes, Activity (involving) (of victim at time of event), cooking and baking

Chapter 21

ICD-10-CM

FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES

Z Codes: Represent Reason for Encounters

- Corresponding procedure code must accompany Z code if procedure is performed
- When circumstances other than a disease, injury or external cause classifiable to categories A00-Y89 are recorded as "diagnoses" or "problems"
  - When person who may or may not be sick encounters health services for some specific purpose
    - i.e., to receive limited care or service for current condition
    - donate an organ or tissue
    - receive prophylactic or vaccination for disease problem
  - When some circumstance or problem is present which influences person's health status but is not a current illness or injury
EXAMPLES OF Z-CODES

**SCENARIO 21.1**

Assigned the appropriate diagnosis code(s) for: A general adult medical examination with abnormal findings.

Z00.0 Encounter for general adult medical examination without abnormal findings
Z00.01 Encounter for general adult medical examination with abnormal findings

Use additional code to identify abnormal findings.

Z00.1 Encounter for adult health check-up NOS

Z02.0 Encounter for examination for admission to educational institution
Z02.1 Encounter for pre-employment examination
Z02.5 Encounter for examination for participation in sport

Excludes blood-alcohol and blood-drug test (Z02.83)

Z23 Encounter for immunization

Code first any routine childhood examination

Note: procedure codes are required to identify the types of immunizations given.

**SCENARIO 21.2**

A heterosexual patient visits his physician’s office for elective HIV testing. The patient admits to high-risk behavior in the past that could have exposed him to HIV. He has never been tested before. The results of this test will be available in a couple weeks.

Assign the appropriate diagnosis code(s):  
Z20.6 Contact or exposure to HIV  
Z22.51 High risk heterosexual behavior.
SCENARIO 21.3

Mother brings her five-year-old to the shot clinic for his MMR booster. He is running a slight fever, and a physical exam reveals a bumpy rash on his abdomen. The booster is not given. Assign the appropriate diagnosis code(s):

Z28.01 Immunization (see also Vaccination), not done (not carried out), because of, acute illness of patient

Add manifestation codes: rash and fever

SCENARIO 21.4

This 25-year-old male presents to the clinic requesting assistance for cessation of cigarette use. He has been a chronic user for since age 13 and is now motivated to quit. Counseling for cessation of smoking cigarettes was provided to the patient.

Diagnostic: Counseling for cessation of tobacco dependence.

What diagnosis codes are assigned?

Z71.6 Counseling (for), tobacco use

F17.210 Dependence, (on) (syndrome), nicotine, see Dependence, drug, nicotine. Dependence, drug, nicotine, cigarettes

SUMMARY

- There are many new changes in ICD-10-CM and learning the new guidelines will be imperative!
- Focus on Specific Guidelines that you will use frequently.
- Training is Critical to Practice!
ICD-10-CM SUMMARY & TIPS

1. Productivity Impact to Coding Process
2. Translation Needs to Support ICD-10 Coding
3. Specificity and Physician Documentation
4. Education needs for Staff and Physicians
5. Process Changes in Functional Areas
6. System Readiness

NEXT STEPS

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PCPW6