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ICD-10-CM: OBSTETRICS PART 2



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AGENDA





Goal: Participants will be able to understand the principles of ICD-10-CM coding related to obstetrics

- Chapter 13: Diseases of the Musculoskeletal System
- Chapter 14: Diseases of the Genitourinary System
- Chapter 15: Pregnancy, Childbirth, and the Puerperium
- Chapter 18: Signs and Symptoms
- Chapter 19: Injuries and Poisonings
- Chapter 20: External Causes
- Chapter 21: Factors Influencing Health Status and Contact With Health Services


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CHAPTER 13



DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE



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DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE (M00-M99)


- Bone, joint, or muscle conditions that are the result of a healed injury and recurrent bone, joint, or muscle conditions
- Current, acute injury should be coded to the appropriate injury code from Chapter 19
- Gout has been moved to this chapter
- Codes expanded for laterality & specificity

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JOINT AND MUSCLE CONDITIONS IN PREGNANCY

- Category O99.89 is to be used for muscle and joint conditions *complicating* the pregnancy
- Category O26.89- should be used for muscle and joint conditions that are *related to* the pregnancy
- Use additional code(s) from Chapter 13 to specify condition(s)



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SCENARIO 13

Patient has pregnancy-related pain in lower back. She is in week 33.

O26.893 Pregnancy, complicated by, specified NEC

M54.5 Pain, low back

Z3A.32 Pregnancy, weeks of gestation, 32 weeks

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SCENARIO 14

Patient has osteoarthritis in both knees. She was diagnosed prior to pregnancy, but the extra weight is aggravating the condition. She is at 36 weeks.

O99.89 Pregnancy, complicated by, musculoskeletal condition

M17.0 Osteoarthritis, knee, bilateral

Z3A.35 Pregnancy, weeks of gestation, 35 weeks

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CHAPTER 14

DISEASES OF THE GENITOURINARY SYSTEM

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Chapter 14

Diseases of the Genitourinary System

- Combination codes for nephritic and nephrotic syndromes, cystitis, and acute kidney failure
- Urosepsis is no longer used; not even indexed
- A relationship is assumed between CKD and hypertension

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DISEASES OF THE GENITOURINARY SYSTEM

- Category O23, Infections of the GU tract in pregnancy
 - ▶ Several Excludes2 notes
 - ▶ Use additional code to identify organism, if applicable
- O26.83-, Pregnancy related renal disease
 - ▶ Use additional code from Chapter 14 to identify disorder
- Category O34, Maternal care for abnormality of pelvic organs
- Category O91, Disorders of the breast

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SCENARIO 15

Patient comes in 2 weeks post-partum. Her left breast has a large area of redness that is warm to the touch. She reports that it is painful, but wasn't sure if that was because she is nursing. Exam determines lactation mastitis.

O91.13 Mastitis, obstetric, associated with, lactation

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SCENARIO 16

Patient in 35th week. She was diagnosed with genital herpes prior to pregnancy. She has lesions present in the vagina, and is concerned about passing the infection on during delivery.

O98.313 Pregnancy, complicated by, infection, sexually transmitted NEC

A60.04 Herpes, anogenital, urogenital tract, vagina

Z3A.34 Pregnancy, weeks of gestation, 34 weeks

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SCENARIO 17 >>

Jenny, 16 weeks pregnant, is here for follow-up due to irregularities present in her pap smear.

O28.2 Findings, abnormal, without diagnosis, antenatal screening of mother, cytological


Z3A.16 Pregnancy, weeks of gestation, 16 weeks

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CHAPTER 15 >>

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM



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Chapter 15

Pregnancy, Childbirth and the Puerperium

- Codes from this chapter are for use only on **maternal** records
- Code conditions existing prior to pregnancy that are still current at time of care which affect management of care
- Category Z3A - , Weeks of Gestation, added to identify specific week of pregnancy

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PREGNANCY, CHILDBIRTH, AND PUERPERIUM >>

- O00-O08: Pregnancy with abortive outcome
 - › Includes ectopic pregnancy, missed abortion, spontaneous abortion, and related complications
- O09: Supervision of high-risk pregnancy
 - › Prenatal visits for patients with conditions that affect maternal management
- O10-O16: Edema, proteinuria, and hypertensive disorders
 - › Distinction made between pre-existing and gestational
 - › Includes pre-eclampsia
- O20-O29: Other maternal disorders related to pregnancy
 - › O28: Abnormal findings on antenatal screening

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PREGNANCY, CHILDBIRTH, AND PUERPERIUM >>

- O30-O48: Maternal care related to fetus and amniotic cavity and possible delivery problems
 - › Category O30: multiple gestations
 - › O47.0.: False labor
 - › Many categories in this block require 7th digit to identify fetus
- O60-O77: Complications of labor and delivery
- O80 & O82: Uncomplicated vaginal delivery, elective C-section
- O85-O92: Complications predominantly related to the puerperium
- O94-O9A: Other obstetric conditions, not elsewhere classified

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Z CODES RELATED TO PREGNANCY AND MATERNAL CARE >>


- **Z32.2** Encounter for childbirth instruction
- **Z32.3** Encounter for childcare instruction
- **Z33.1** Pregnant state incidental to encounter
- **Z34.-** Encounter for supervision of normal pregnancy
- **Z36** Encounter for antenatal screening of mother
- **Z3A.-** Weeks of gestation
- **Z39.-** Encounter for maternal postpartum care and examination

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NORMAL DELIVERY 

- Code O80 (Encounter for full-term uncomplicated delivery) is used if no known antepartum or postpartum complications are affecting mother at time of delivery and encounter.
- Normal delivery includes spontaneous, cephalic, vaginal, with episiotomy (if performed). *Vacuum extractions are not included.*
- No other chapter 15 codes may be used with O80.
- Can only reflect outcome of delivery Z37.0: Single live birth
- Use code for weeks of gestation

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SCENARIO 18 


Patient, 10 weeks pregnant, has mild dehydration due to excessive vomiting. Vomiting is caused by pregnancy.

O21.1 Hyperemesis, gravidarium, with, dehydration

Z3A.10 Pregnancy, weeks of gestation, 10 weeks

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SCENARIO 19 

20-week pregnancy with low weight gain and pre-existing type 2 diabetes complicating the pregnancy.


O26.12 Pregnancy, complicated by, insufficient, weight gain

O24.112 Pregnancy, complicated by, diabetes, pre-existing, type 2

Z3A.20 Pregnancy, weeks of gestation, 20 weeks

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SCENARIO 20 

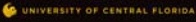

23-year-old patient, first pregnancy. First trimester visit. Has not been able to stop smoking cigarettes, but says she has cut back. Dx: Nicotine dependence in pregnancy.

O09.891 Pregnancy, supervision of, high risk, due to specified NEC


O99.331 Pregnancy, complicated by, smoking (tobacco)

F17.210 Dependence, drug, nicotine, cigarettes

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SCENARIO 21 

Patient with sickle cell anemia here for 16-wk checkup.

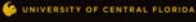

O09.892 Pregnancy, supervision of, high risk, due to specified NEC

O99.012 Pregnancy, complicated by, anemia


D57.1 Anemia, sickle-cell—see Disease, sickle-cell

Z3A.14 Pregnancy, weeks of gestation, 14 weeks

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SCENARIO 22 

Patient will be 15 at delivery. Completed 34 weeks. Spotting and Braxton Hicks contractions.

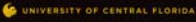

O09.613 Pregnancy, supervision of, young mother, primigravida

O47.03 False, labor, before 37 completed weeks of gestation


O26.853 Spots, spotting (in), pregnancy

Z3A.34 Pregnancy, weeks of gestation, 34 weeks

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SCENARIO 23 

Patient is in her 12th week of pregnancy and developed severe cramping and vaginal bleeding. After examination, the physician documented that the patient had an incomplete spontaneous abortion.


O03.4 Abortion, incomplete (spontaneous)

Z3A.11 Pregnancy, weeks of gestation, 11 weeks

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SCENARIO 24 

G2 P1 patient, 25, with no known complications presents for routine visit at 12 completed weeks. Glucose is high for patient. Scheduled for tolerance test.


O28.8 Findings, abnormal, without diagnosis, antenatal screening of mother, specified NEC

Z3A.12 Pregnancy, weeks of gestation, 12 weeks

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SCENARIO 25 

Prima gravida pt in 38th week, twin gestation. Delivery is complicated by nuchal cord without compression of fetus 2. Both infants were liveborn and healthy.

O30.003 Pregnancy, twin

O69.81x2 Delivery, complicated, by, cord, around neck, without compression


Z3A.37 Pregnancy, weeks of gestation, 37 weeks

Z37.2 Outcome of delivery, twins NEC, both liveborn

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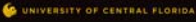

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SCENARIO 26 

Patient is admitted in active labor at 38 completed weeks. She has been monitored due to her (pre-existing) type 2 diabetes. A 2nd degree perineal laceration occurred during delivery and was repaired. Female infant delivered: Apgar 9 and 9.

O70.1 Delivery, complicated, by, laceration, perineal, second degree
O24.12 Delivery, complicated, by, diabetes, pre-existing, type 2
E11.9 Diabetes, type 2
Z3A.38 Pregnancy, weeks of gestation, 38 weeks
Z37.0 Outcome of delivery, single, liveborn

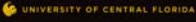

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SCENARIO 27 


Patient, 39 weeks, in active labor admitted. No complications during pregnancy. Labored for 8 hours and delivered a liveborn male over an intact perineum

O80 Delivery, normal
Z3A.39 Pregnancy, weeks of gestation, 39
Z37.0 Outcome of delivery, single, liveborn

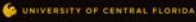

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CHAPTER 18 



SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS

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SYMPTOMS, SIGNS, AND ABNORMAL CLINICAL AND LABORATORY FINDINGS

- Includes symptoms, signs, or abnormal results of clinical or other investigative procedures, and ill-defined conditions that do not have their own codes in other chapters
 - 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

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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

- If the patient has a symptom not routinely found with the final diagnosis, code first the definitive diagnosis, followed by the code for the symptom
- Signs or symptoms that are routinely found with a disease process should not be assigned as additional codes

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SYMPTOMS, SIGNS, AND ABNORMAL LABORATORY FINDINGS, NEC (R00-R99)

- 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 provided, that represent important problems in medical care in their own right

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SCENARIO 28 >>

Mother at 19 completed weeks, with pre-existing benign heart murmur

O99.89 Pregnancy, complicated by, disorders of, specified NEC

R01.0 Murmur, benign

Z3A.19 Pregnancy, weeks of gestation, 19 weeks

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SCENARIO 29 >>

Routine exam for 26-year-old woman, first pregnancy, 12 wks. completed. No complications. Complains of heartburn. Wants to know if OTC antacids are safe for her to take.

Z34.01 Pregnancy, supervision of, normal, first


R12 Heartburn

Z3A.12 Pregnancy, weeks of gestation, 12 weeks

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CHAPTER 19 >>



INJURY, POISONING, AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES

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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, burns, poisonings
- 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


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INITIAL ENCOUNTER

The patient is receiving *active treatment* for the condition

- Surgical treatment
- Emergency department encounter
- Evaluation and treatment by a new physician**



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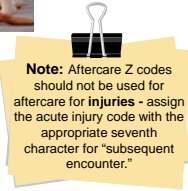
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SUBSEQUENT ENCOUNTER

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
- X-ray to check healing status
- 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."

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SEQUELA >>





- Complications or conditions that arise as a direct result of an injury
- "S" added only to **injury code**, *not* the code that describes the sequela
- "S" identifies injury responsible for sequela.
- Specific type of sequela (like scar) should be sequenced first, followed by injury code

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POISONING, ADVERSE EFFECT, UNDERDOSE >>


- Combination codes for substance and intent
- All poisoning columns (accidental, self-harm, assault, undetermined), followed by adverse effects, underdosing
- Undetermined intent is only for use when there is specific documentation in record that intent cannot be determined
- When intent is not documented, code to accidental poisoning



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POISONING, ADVERSE EFFECTS, AND UNDERDOSING >>



Poisoning	Overdose, wrong substance given/taken in error, ingesting non-food/non-medicine, interactions
Adverse effect	Sensitivity or reaction to correct substance properly administered
Underdosing	Taking less of medication than is prescribed or instructed by manufacturer

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SCENARIO 31 


Patient is here today for her 18-week check-up. Complains of ankle pain. Upon exam, it is found to be sprained. The injury will not affect her pregnancy or complicate her care.

Z34.92 Pregnancy, supervision of, normal
S93.402A Sprain, ankle, left

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SCENARIO 32 


Patient in 1st trimester. Strained muscles of lower back. Was doing yoga and over-stretched.


O9A.211 Pregnancy, complicated by, injury
S39.012A Strain, back


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CHAPTER 20 



EXTERNAL CAUSES OF MORBIDITY 

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EXTERNAL CAUSES OF MORBIDITY (V00-Y99)

- Environmental events and circumstances as the cause of injury
- Can **NEVER** be used as the primary code
- May be used with any code in range A00.0-T88.9, Z00-Z99 that is a health condition due to external cause
- Assign external cause code with appropriate seventh character for each encounter for which injury or condition is being treated
 - ▶ initial encounter
 - ▶ subsequent encounter
 - ▶ sequela

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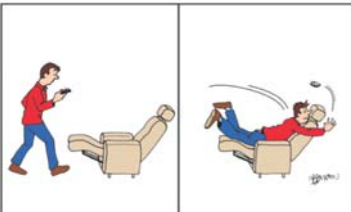
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INDEX TO EXTERNAL CAUSES

- Broken**
 - glass, contact with —see Contact, with, glass
 - power line (causing electric shock) W85
- Bumping against—into (accidentally)**
 - object NEC W22.9
 - with fall —see Fall, due to, bumping against, object
 - caused by crowd or human stampede (with fall) W52
 - sports equipment W21.9
 - person (s) W51
 - with fall W03
 - ... due to ice or snow W00.0
 - assault Y04.2
 - caused by, a crowd or human stampede (with fall) W52
 - homicide (altusopis) Y04.0
 - sports equipment W21.9
- Burn, burned, burning (accidental) (by) (from) (on)**
 - acid NEC —see Table of Drugs and Chemicals
 - bed linen —see Exposure, fire, uncontrolled, in building, bed
 - blowtorch X08.8

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W01.190A, Fall on same level from tripping, with subsequent striking against furniture

James Lloyd - Digital
 James is the co-founder of i20wealth and is a wizard with EMR integration. He worked at Epic for six years in various roles including technical services, EDI, and software development. He likes to say, "He's a productivity maverick." In fact, he outbounced his art for this book.

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V95.42xA
Forced landing of spacecraft injuring occupant, initial encounter.




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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

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Y93- ACTIVITY

- Must use with a code from Y92
- Only on initial encounter
- Only one Y93 code on record
- Do not use Y93.9 if activity not stated
- Not applicable to poisonings, adverse effects, misadventures, or late effects



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Y99 - EXTERNAL CAUSE STATUS

Indicates work status

Only on initial encounter

Must be used with a Y92 and a Y93 code

Do not assign code Y99.9 if status is not stated



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SCENARIO 33

Patient in first trimester says she fell down the stairs outside her 2nd floor apartment. Spiral fracture of right arm, broken foot, cracked collar bone. Various bumps and bruises she can't explain or isn't sure how she got. Suspected physical abuse.

O9A.311 Pregnancy, complicated by, abuse, physical

[Codes for the injuries would be sequenced here]

W10.9xxA Index to External Causes, fall, down, stairs


Y92.038 Place of occurrence, residence, apartment, specified NEC

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CHAPTER 21




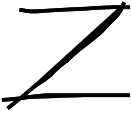
FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES

AHIMA
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CHAPTER 21 




- Factors Influencing Health Status and Contact with Health Services (Z00-Z99)
- Z Codes represent reasons for encounters

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CHAPTER 21 


- 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 vaccination, discuss problem
- When some circumstance or problem is present which influences person's health status but is not a current illness or injury
- If the Z code is an encounter for a procedure, also use corresponding procedure code—CPT, HCPCS, ICD-10-PCS, E/M

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Z CODES RELATED TO PREGNANCY 


- **Z33.1** Pregnant state, incidental
- **Z34-** Encounter for supervision of normal pregnancy
- **Z36** Encounter for antenatal screening of mother
- **Z3A-** Weeks of gestation
- **Z37-** Outcome of delivery
- **Z38-** Liveborn infants according to place of birth and delivery type
- **Z39-** Encounter for maternal postpartum care and examination

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Z03.7- 

- Encounter for suspected maternal and fetal conditions ruled out
- For use when pregnant patient is suspected of having an abnormal condition, although asymptomatic, and after examination and observation, are ruled out

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SCENARIO 34 

Pregnant patient, 2nd trimester, has been going to counseling. She was exposed to extreme psychological abuse as a child. Depression complicating her pregnancy.


O99.341 Pregnancy, complicated by, mental disorder

F32.9 Depression

Z62.811 History, personal, abuse, childhood, psychological


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SCENARIO 35 


Postpartum check-up for patient with uncomplicated pregnancy and delivery.

Z39.2 Examination, postpartum, routine follow-up

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THANK YOU FOR ATTENDING! >>



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