|  |  |  |
| --- | --- | --- |
| ***Look up the ICD-10-AM index for the following terms for conditions treated during an admission*** | ***Lead term*** | ***ICD Code*** |
| Fracture of femur | FractureComment: femur is a body part so it cannot be a lead term | S72.9 |
| Chronic asthma | AsthmaComment: Chronic is a modifier so it cannot be a lead term | J45.9 |
| Severe migraine | MigraineComment: severe is a modifier so it cannot be a lead term | G43.9 |
| Pernicious anaemia | Anaemia | D51.0 |
| Pulmonary tuberculosis | TuberculosisComment: Pulmonary is a body part so it cannot be a lead term | A16.2 |
| Plantar wart | WartComment: plantar is a body part so it cannot be a lead term | B07 |
| Gastro-oesophageal reflux | RefluxComment: Gastro-oesophageal is a body part so it cannot be a lead term | K21.9 |
| Urinary tract infection | InfectionComment: Urinary tract is a body part so it cannot be a lead term | N39.0 |
| Otitis media | OtitisComment: media is a modifier so it cannot be a lead term | H66.9 |
| Senile cataract of eye | CataractComment: senile is a modifier so it cannot be a lead term.Eye is a body part so it cannot be a lead term | H25.9 |
| Obsessive compulsive disorder | Disorder Comment: Obsessive is a modifier so it cannot be a lead term Compulsive is also a modifier so it cannot be a lead term. | F42.9 |
| Look up the Lead Term in ICD-10-AM Interventions index for the following procedural phrases | Lead Term | ICD Code |
| Excision of Baker’s cyst | Excision | 3011400 |
| Incision of brain | Incision | 9000702 |
| Debridement of skin | Debridement | 9066501 |
| Drainage of lung | Drainage | 3841804 |
| Change of wound dressing | Change | 9625500 |
| Subcutaneous mastectomy | Mastectomy | 3152400 |
| Removal of implanted hearing device | Removal, - hearing device, implanted | 4155706 |
| Polypectomy of anus | Polypectomy | 3214201 |
| Diathermy of cervix | Diathermy | 3560800 |
| Sleep study | Study | 9201200 |

# Exercise 2

Write **P** next to the **Principal Diagnosis** for the following cases. Remember, you have to decide “why did the patient come to hospital?” or “Why was the patient admitted?”

Write **A** next to the **Additional Diagnoses**.

Write **S** next to codes meeting ACS 0003 requirements

Write **DNC** (**do not code**) next to conditions that should not be coded

|  |  |
| --- | --- |
| ***Patient Record Information*** | ***Potential conditions to code*** |
| Patient admitted for acute appendicitis. Fell out of bed while in hospital and broke their arm. Stayed an extra 5 days for management of the broken arm***Comment: the reason for admission was the appendicitis, while the broken arm happened after admission and is therefore not the principal diagnosis (reason for admission).*** | Acute appendicitis ***P***Broken arm ***A*** |
| Patient admitted for blurred vision, and discharged with a diagnosis of cataract***Comment: blurred vision is a symptom of cataract and therefore not coded.*** | Blurred vision ***– do not code (DNC)***Cataract ***P*** |
| Discharge Summary dictated by the doctor states Epilepsy, Diabetes, and Pneumonia, in that order***Comment: the principal diagnosis is determined by the clinician, unless there is additional information in the record which contradicts or informs the clinician’s statement/s.*** | Epilepsy ***P***Diabetes ***A***Pneumonia ***A*** |
| Patient with history of previous admissions for cancer of the bone admitted for management of bone pain***Comment: See*** ***ACS 1807 Acute and Chronic pain***  | Bone pain ***P***Cancer of the bone ***A*** |
| Patient admitted with fever, cough, and wheeze. X-Ray showed pneumonia. Patient treated for pneumonia.***Comment: The pneumonia is the cause of all three other symptoms. Only code the pneumonia.*** | Fever ***DNC***Cough ***DNC***Wheeze ***DNC***Pneumonia ***P*** |
| Patient admitted complaining of bone pain. Diagnosed with cancer of the bone***Comment: See*** ***ACS 1807 Pain diagnoses and pain management procedures*** | Bone pain ***DNC***Cancer of the bone ***P*** |
| Patient treated for asthma. Also has a history of diabetes and hypertension, and HIV positive***Comment: The reason for admission is the asthma.***  ***ACS 0401 tells us to always code diabetes.***  ***ACS 0003 tells us to code hypertension.*** ***ACS 0102 tells us that HIV positive is ALWAYS coded whether actively treated or not.***  | Asthma ***P***Diabetes AHypertension ***S***HIV positive ***A*** |
| Patient admitted for appendicitis. Blood pressure medication was changed during the admission***Comment: The appendicitis is the reason for admission and therefore the Principal Diagnosis, while the blood pressure was treated (medication changed) and therefore is part of the story of the event and must be coded.*** | Appendicitis ***P***Blood Pressure ***A*** |
| Patient had major surgery for cancer of the stomach. Patient confused after surgery and kept trying to climb out of bed. Frequent documentation by nursing staff re managing confusion.***Comment: the cancer was the reason for admission, and though confusion would not always be coded, it must be in this case as it meets the requirement of ASC 0002 – increased clinical care. This is indicated by the ‘frequent documentation by nursing staff re managing confusion’.*** | Cancer of the stomach - ***P***Confusion - ***A*** |
| Patient admitted with pneumonia. Noted to be hepatitis C positive.***Comment: pneumonia was the reason for admission so is the principal diagnosis, while hepatitis must ALWAYS be coded (see ASC 0104)*** | Pneumonia ***P***Hepatitis C - ***A*** |
| Patient admitted for tonsillectomy for chronic tonsillitis. Has a pacemaker***.*** | Chronic tonsillitis - ***P***Pacemaker status - ***DNC*** |
| Patient had a hip replacement for arthritis of the hip. Was unable to return home because there was no-one at home to care for her***Comment: the patient was admitted for treatment of the hip arthritis which must be the principal diagnosis. The fact that the patient lives alone has impacted the length of stay in hospital and therefore must be coded.*** | Arthritis of the hip - ***P***Lives alone - ***A*** |
| Patient admitted with acute cystitis. Patient gave up smoking last week***Comment: the reason for admission was acute cystitis and that is therefore the principal diagnosis. Smoking status must be coded as an associated condition. See ASC 0503 indicates that smoking status must always be coded regardless of whether it is treated or not.*** | Acute cystitis - ***P***Smoker - ***A*** |
| Patient admitted with fever and rash. No firm diagnosis, but treated as meningitis. Gave up smoking 5 years ago***Comment: fever and rash are symptoms of meningitis. As meningitis was treated, the episode effectively treated that disease as the reason for admission. This uses the suspected condition ‘rule’. This is therefore the relevant principal diagnosis and the symptoms do not need to be coded. Smoking status must be coded (see ASC 0503).*** | Fever - ***DNC***Rash - ***DNC***Meningitis - ***P***History of smoking - ***A*** |
| Patient admitted with fever and rash. Investigated for meningitis but not confirmed. No treatment initiated, and sent home.***Comment: The meningitis was investigated, but not treated and not confirmed – therefore it is not coded and the symptoms are all that is left to describe the episode. In this case the symptoms should be coded, and the clinician has listed the fever first, so it is the principal diagnosis******See ACS 0012, dot point 2 and example 4*** | Fever - ***P***Rash - ***A***Meningitis - ***DNC*** |

# Exercise 3

Enter the block number and the Text for the following ACHI codes by looking up Appendix B

|  |  |  |
| --- | --- | --- |
| ***Text for the ACHI code*** | ***ACHI code*** | ***Block number*** |
|

|  |
| --- |
| Incision abdominal wall  |

 | 90952-00 | [987] |
| Incision of eyelid | 90084-00 | [231] |
| Incision of bursa, not elsewhere classified | 90568-01 | [1559] |
| Other procedures on palate | 90143-01 | [408] |
| Uvulotomy | 41810-00 | [401] |

# Remember to look up the terms chalazion, bursa, palate and uvula. It is important that you never work with a term without knowing what is means!

Chalazion = a small cyst on the eyelid resulting from chronic inflammation of a meibomian gland – also called meibomian cyst.

Meibomian gland = a long sebaceous gland that lubricates the eyelids; bacterial infection of a meibomian gland produces a stye.

Bursa = a sac or sac like body cavity, especially one containing a viscous lubricating fluid and located between a tendon and a bone or at points of friction between moving structures.

Palate = the roof of the mouth in vertebrates having a complete or partial separation of oral and nasal cavities and consisting of the hard palate and the soft palate.

Ulvula = a small, conical, fleshy mass of tissue suspended from the centre of the soft palate.

# Sample Quiz Answers

1: The term “other excess hair” can be coded to L68.8 True

2: L02.0 can be used for boil of the anal region False

What is the missing word/s?

3: Principal Diagnosis is defined as the diagnosis established after study to be chiefly responsible for **occasioning** an episode of admitted patient care.

4: ACS **0002** is the Australian Coding Standard defining the Associated Diagnosis.

5: A procedure can be defined as carrying a **procedural** risk and/or an anaesthetic risk.

6: Using the text in the Tabular List for ICD-10-AM and ACHI:
Cholangiolitis (acute) (chronic) (extrahepatic) (gangrenous) (intrahepatic) K83.0

Is the statement below true or false?

K83.0 is the correct code for both:

* acute cholangiolitis, and
* chronic cholangiolitis True

7. Using the ICD-0-AM and ACHI Indices to find the correct answer to:

 Where is the phrase:

 Tuberculosis

* with pneumoconiosis
1. before ‘-wrist’ under the lead term tuberculosis
2. immediately after the lead term ‘tuberculosis

Answer: B

8: Using the ICD-0-AM and ACHI Indices to find the correct answer to:

 Where is the phrase:

 Tuberculosis

* with pneumoconiosis
1. before ‘-wrist’ under the lead term tuberculosis
2. immediately after the lead term ‘tuberculosis

Answer: B

9: Using the ICD-0-AM and ACHI Indices to find the correct answer to:

 In the Disease Index, where is the phrase:

*Plastic surgery for unacceptable cosmetic appearance* found in the index in relation to the lead term **Surgery**.

1. In alphabetical order under ‘surgery’
2. After the entries for – cosmetic
3. Immediately after – plastic
4. after the entries for –elective

Answer: C

10: For conditions stated to be ‘acute on chronic’ code both acute and chronic.

True

11: When a patient presents with a problem, and after study the underlying condition is identified, then the underlying condition is assigned as the Principal Diagnosis.

True

12: If investigations were undertaken and the results were inconclusive, yet treatment was initiated, assign a code for the suspected condition.

True

13: Procedures normally not coded must be coded if they are the principal reason for same day episodes of care.

True

14: Find the code in the Tabular List of ICD-10-AM and choose the correct answer.

H65.1 is the correct code for:

1. acute and subacute otitis media
2. mucoid otitis media
3. acute and subacute allergic otitis media
4. non suppuratives otitis media
5. all of the above.

Answer: C

15: Find the code in the Tabular List of ICD-10-AM and choose the correct answer.

K31.7 is the correct code for:

1. polyp of the stomach
2. polyp of the duodenum
3. adenomatous polyp of duodenum
4. adenomatous polyp of stomach
5. polyp of the stomach and polyp of the duodenum

Answer: E

16: In the index to ICD-10-AM find the code for…. (remember that with comes before A in the index.

 Actinomycosis with pneumonia A42.0 and J17.0

 Agammaglobulinaemia with lymphopenia D81.9

 11 hydroxylase defect E25.0

17: M15 is a complete code for primary generalized arthrosis False

18: M21.2 is a complete code for flexion deformity False

19: Australian coding standard 1122 applies to K25.0 True

20: The principle diagnosis is defined as ‘the diagnosis established after study to be chiefly responsible for occasioning an episode of admitted care…’

List 5 points that explain the phrase “after study”.

 Any of:

 any text that includes the word history of illness

 any text that includes mental status evaluation

 specialist consultation/s

 physical examination

 diagnostic test/s

 diagnostic procedure/s

 surgical procedures

 pathological examination

 radiological examination/Xray/X-ray/ Xrays/X-rays