

## Family Practice Documentation Tips

The following are important documentation tips and strategies for ICD-10 compliance:

Condition/Concept	ICD-10 Documentation Tips
<b>Abdominal Pain and Tenderness</b>	<p><b>Increased Specificity:</b>  <b>Location:</b> e.g. Generalized, Right upper quadrant, periumbilical, etc.  <b>Pain or Tenderness Type:</b> e.g. Colic, tenderness, rebound</p>
<b>Acute Myocardial Infarction (AMI)</b>	<p><b>Timeframe:</b> An AMI is now considered “acute” for 4 weeks from the time of the incident, a revised timeframe from the current ICD-9 period of 8 weeks.  <b>Episode of Care:</b> Initial, subsequent, sequelae  <b>Subsequent:</b> Document “Subsequent” for a new AMI within 4 weeks of initial AMI.</p>
<b>Asthma</b>	<p><b>Terminology Difference:</b>  <b>Cause:</b> Exercise-induced, cough variant, related to smoking, chemical or particulate cause, occupational  <b>Severity:</b> If persistent asthma, document mild persistent, moderate persistent, or severe persistent  <b>Temporal Factors:</b> Acute, chronic, intermittent, persistent, status asthmaticus, or acute exacerbation</p>
<b>Debridement</b>	<p><b>Wound specifics:</b> Body Part, Type (Decubitus, burn, etc.), Margin Size, Depth  <b>State:</b> Excisional debridement of devitalized/necrotic tissue (if a surgical instrument was used), Nonexcisional debridement (if no tissue was excised)</p>
<b>Diabetes: Hypoglycemia and Hyperglycemia</b>	<p><b>Increased Specificity:</b>  The diabetes codes are combination codes that include the type of diabetes, the body system affected, and the complications affecting that body system.  When documenting diabetes, include the following:  <b>Type:</b> e.g. Type 1 or Type 2 disease, drug-induced, due to underlying condition, or gestational  <b>Complications:</b> What (if any) other body systems are affected by the diabetes condition? e.g. Foot ulcer related to diabetes  <b>Treatment:</b> Is the patient on insulin?  A <b>second</b> important change is the concept of “<u>hypoglycemia</u>” and “<u>hyperglycemia</u>.” It is now possible to document and code for these conditions without using “diabetes mellitus.” You can also specify if the condition is due to a procedure or other cause.  A <b>third</b> important change is that diabetes is no longer classified as controlled or uncontrolled.  The <b>final</b> important change is that the concept of “secondary diabetes mellitus” is no longer used; instead, there are specific secondary options.</p>
<b>Feeding Problems of the Newborn</b>	<p><b>Document:</b> Feeding problems of the newborn and subsequent treatment recommendations; e.g., Difficulty feeding at breast, Slow feeding, Underfeeding, Overfeeding, Regurgitation and rumination.</p>
<b>Hypertension</b>	<p>In ICD-10, hypertension is defined as essential (primary). The concept of “benign or malignant” as it relates to hypertension no longer exists.  <b>Type:</b> Essential, Secondary, etc.  <b>Causal Relationship:</b> Renal, pulmonary, etc.</p>

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<b>Otitis Media</b>	<p><b>Type:</b> e.g., Serous, sanguineous, suppurative, allergic, mucoid</p> <p><b>Infectious Agent:</b> e.g., Strep, Staph, Scarlet Fever, Influenza, Measles, Mumps</p> <p><b>Temporal factors:</b> Acute, subacute, chronic, recurrent</p> <p><b>Laterality:</b> e.g. Left, right or both ears</p> <p><b>Tympanic membrane rupture: Note if present.</b></p> <p><b>Secondary causes:</b> e.g. Tobacco smoke, etc.</p>
<b>Sepsis</b>	<p><b>Etiology:</b> Link to source of infection: Vascular grafts, Devices, Implants, Infection (Pneumonia, UTI, Peritonitis, etc.)</p> <p><b>Organism:</b> Organism, if known</p>
<b>Shock</b>	<b>Type:</b> Hemorrhagic, Septic, Cardiogenic, Liver, Hypovolemic, Other
<b>Tobacco</b>	<b>Usage:</b> Use, Abuse, Dependence, Exposure, Frequency
<b>Ulcers</b>	<p><b>Type:</b> Decubitus, Ischemic, DM, Stasis</p> <p><b>Location:</b> Upper back, ankle, sacral, buttock, etc.</p> <p><b>Stage:</b> Decubitus only (stage 1-4 or unstageable)</p> <p><b>Present on Admission</b></p>
<b>Underdosing</b>	<p><b>Type:</b> Intentional, Unintentional, Non-compliance</p> <p><b>Reason:</b> Financial hardship, age-related disability, etc.</p>
<b>Well Child Exams and Screening</b>	<p><b>Child's Age:</b> In days, months or years as appropriate</p> <p><b>Exam Type:</b> e.g. Well child exam, hearing screen, sports physical, school physical, etc.</p> <p><b>Findings:</b> Note normal vs. abnormal findings, as there codes vary depending on results</p>

Reference:

<http://www.roadto10.org/action-plan/phase-2-train/primer-family-practice/>