



## ICD-10 Documentation Tips Hospitalist Services

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

General:

- a. Document diagnosis that were “present on admission” as POA.
- b. Include diagnoses monitored, treated, evaluated on discharge summary.
- c. Laterality should be specified for all body parts and sites.

Condition/Concept	ICD-10 Documentation Tips
<b>Asthma</b>	<p><b>Cause:</b> Exercise-induced, cough variant, related to smoking, chemical or particulate cause, occupational</p> <p><b>Severity:</b> If persistent asthma, document mild persistent, moderate persistent, or severe persistent</p> <p><b>Temporal Factors:</b> Acute, chronic, intermittent, persistent, status asthmaticus, acute exacerbation</p>
<b>COPD</b>	<p><b>Acuity:</b> Chronic, Acute Exacerbation</p> <p><b>Document:</b> With acute lower respiratory tract infection (specify type of infection)</p> <p><b>Specify:</b> With Asthma (and type of asthma)</p> <p><b>Document:</b> any tobacco use, abuse, dependence or exposure</p>

Condition/Concept	ICD-10 Documentation Tips
<b>Anemia</b>	<p><b>Type:</b> Nutritional deficiency (Iron, B12, folate, etc.), Hemolytic, Sickle Cell (with or without crisis) with acute chest syndrome or splenic sequestration, Aplastic (drug induced, idiopathic, etc.), Blood loss (acute, chronic, postoperative)</p> <p><b>Cause:</b> e.g., Neoplastic disease, Chronic kidney disease</p> <p><b>Include:</b> Any alcohol or drug use, abuse, dependence or past history</p> <p><b>If Drug Induced:</b> Specify name of medication or drug with purpose of its use</p>
<b>A-Fib/A-Flutter</b>	<p><b>Differentiate:</b> Atrial fibrillation, Atrial Flutter, Atypical A-flutter</p> <p><b>Specify:</b> Paroxymal, Persistent, Chronic</p>
<b>Cerebral Infarction &amp; Occlusion</b>	<p><b>Etiology:</b> Due to embolus, thrombosis, occlusion, stenosis</p> <p><b>Laterality and Artery Affected</b></p> <p><b>Specify:</b> if intraoperative or postoperative complication</p> <p><b>Related Deficits:</b> Right or left hemiparesis, aphasia, seizure, etc.</p> <p><b>Document:</b> TPA Administration</p>
<b>Congestive Heart Failure (CHF)</b>	<p><b>Acuity:</b> Acute, chronic, Acute and Chronic</p> <p><b>Specify</b> if rheumatic heart failure</p> <p><b>Type:</b> Systolic (include ejection fraction), Diastolic, Combined</p> <p><b>List Causal Relationships:</b> Hypertension, Chronic kidney disease, Surgery</p>
<b>Tobacco</b>	<p><b>Usage:</b> Use, Abuse, Dependence, Exposure, Frequency</p>

Condition/Concept	ICD-10 Documentation Tips
<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. When documenting diabetes, include the following:</p> <p><b>Type:</b> e.g. Type 1 or Type 2 disease, drug-induced, underlying condition</p> <p><b>Complications:</b> What (if any) other body systems are affected by the diabetes condition? e.g. Foot ulcer related to diabetes</p> <p><b>Treatment:</b> Is the patient on insulin?</p> <p>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.</p> <p>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>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.</p> <p><b>Type:</b> Essential, Secondary, etc.</p> <p><b>Causal Relationship:</b> Renal, pulmonary, etc.</p>

Condition/Concept	ICD-10 Documentation Tips
<b>Intracerebral Hemorrhage</b>	<b>Document:</b> Traumatic vs. Non-traumatic <b>Site:</b> Subarachnoid (and affected regions), Subdural (Acute, Subacute, Chronic), Intracerebral (and affected regions) <b>Laterality:</b> Right, Left
<b>Kidney Failure</b>	<b>Acute Kidney Failure:</b> Document Type (e.g. Tubular necrosis, etc.) <b>Chronic Kidney Failure:</b> Specify Stage 1-5, Specify if end stage <b>Associate:</b> Underlying condition <b>Specify:</b> Dialysis Status and/or Kidney Transplant Status
<b>Pneumonia</b>	<b>Type:</b> Bacterial (Specify Organism), Viral, Aspiration (specify substance), Fungal, Ventilator Associated, Other <b>Associated Conditions:</b> Sepsis, HIV Disease, influenza, etc. <b>Document</b> any tobacco use, abuse, dependence or exposure
<b>Respiratory Failure</b>	<b>Acuity:</b> Acute, Chronic, Acute on Chronic <b>Type:</b> Hypoxic, Hypercapnic, Mixed <b>Etiology:</b> Pneumonia, CHF, COPD, etc.
<b>Seizures and Epilepsy</b>	<b>Seizures not diagnosed as a disorder or recurrent</b> (i.e., non-epileptic) should specify the condition as being: Febrile – specify simple or complex, New onset, Single seizure or convulsion, Post traumatic <b>Identify</b> any related factors: alcohol, medications, etc. <b>Include</b> descriptions of pharmaco-resistant, treatment resistant or refractory <b>Describe seizures as:</b> Localized, Generalized, Simple partial, Complex partial

Condition/Concept	ICD-10 Documentation Tips
<b>Sepsis</b>	<b>Etiology:</b> Link to source of infection: Vascular grafts, Devices, Implants, Infection (Pneumonia, UTI, Peritonitis, etc.) <b>Organism:</b> Organism, if known
<b>Shock</b>	<b>Type:</b> Hemorrhagic, Septic, Cardiogenic, Liver, Hypovolemic, Other
<b>Underdosing</b>	<b>Type:</b> Intentional, Unintentional, Non-compliance <b>Reason:</b> Financial hardship, age-related disability, etc.
<b>PROCEDURES</b>	
<b>CPR</b>	<b>Chest Compressions:</b> Mechanical (balloon pump, pulsatile compression, etc.), Manual (closed chest cardiac massage or CPR unspecified)
<b>ET Tube insertion</b>	<b>Approach:</b> Via natural or artificial opening, Endoscopic
<b>Internal Gastric Tube</b>	<b>Approach:</b> Open, Percutaneous, Via natural or artificial opening, Percutaneous endoscopic, Via natural or artificial opening endoscopic <b>Type of Device:</b> Monitoring, Infusion, Intraluminal, Feeding device

*This ICD-10 Tipsheet is meant to assist providers for the transition from ICD-9-CM to ICD-10-CM. Content provided is informal guidance, and any definitive guidance is issued from CMS.*

Reference:

<http://www.nhrmc.org/body.cfm?id=6083&action=tree>