



## ICD-10 Documentation Tips Infectious Disease Services

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

General:

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

Condition/Concept	ICD-10 Documentation Tips
Cellulitis and/or Abscess	<b>Specify Site and Laterality:</b> Right, Left, Bilateral <b>Underlying Conditions:</b> Due to Foreign Body, Crohn’s, Trauma <b>Indicate:</b> Any organism or infectious agent if known or suspected
Ulcer(skin)	<b>Specific site, laterality, stage</b> <b>Specify:</b> Pressure vs. Non-pressure <b>Document:</b> underlying/associated conditions, gangrene when present
Urinary Tract Infection (UTI)	<b>Site:</b> Bladder, Urethra, Kidney <b>Device:</b> Due to Foley Catheter, Due to Cystostomy tube <b>Document:</b> causative organism, if known <b>Avoid</b> term ‘Urosepsis’ (Consider ‘UTI with sepsis’)

Condition/Concept	ICD-10 Documentation Tips
Diabetes Mellitus, Hypoglycemia and Hyperglycemia	<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 <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?
Fever	<b>Origin:</b> Postprocedural, transfusion reaction, unknown, medication-related, postvaccination, etc.
Hepatitis	<b>Acuity:</b> Acute, Chronic <b>Hepatic Coma:</b> With, Without <b>Type:</b> A, B, C, D, E and with/without Delta agent (HDV)
HIV	<b>Clarify HIV status:</b> Asymptomatic or degree to which patient is symptomatic with HIV (whether currently or in the past)
Postop Infection	<b>Identify:</b> Infectious organism if known or suspected <b>Encounter Type:</b> Initial, Subsequent, Sequelae <b>Document:</b> If due to an implanted device or foreign body
Respiratory Failure	<b>Acuity:</b> Acute, Chronic, Acute on Chronic <b>Type:</b> Hypoxic, Hypercapnic, Mixed <b>Etiology:</b> Pneumonia, CHF, COPD, etc.

Condition/Concept	ICD-10 Documentation Tips
Sepsis	<b>Etiology:</b> Link to source of infection: Vascular grafts, Devices, Implants, Infection (Pneumonia, UTI, Peritonitis, etc.) <b>Organism:</b> Organism, if known
Shock	<b>Type:</b> Hemorrhagic, Septic, Cardiogenic, Liver, Hypovolemic, Other
Tuberculosis	<b>Site:</b> Specify Respiratory, Skin, Nervous system involvement

Reference:

<http://www.capefearvalley.com/cme/doctips.html>

*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.*