ICD-10 Reference Guide: Orthopedics

ICD-10 General Overview

ICD-10-CM

- Acute, Subacute, and Chronic
  - ICD-10-CM can accommodate more specificity when describing acute, subacute, and chronic conditions.
  - Some conditions may meet both acute and chronic criteria and should be documented as such.

Anatomic Site/Location

- More detail in terms of location of injury/condition.
- Document precisely where injury/condition occurs.
- Read through ICD-10-CM descriptions to understand the type of clinical detail that is required.

Laterality

- Left
- Right
- Bilateral
- Multiple Locations (if applicable)

Signs/Symptoms

- Documentation of signs/symptoms continue to be acceptable when there is no definitive diagnosis identified by physician.
- Document to highest degree of specificity (e.g. severity, acute vs chronic).

Type of Encounter (Episode of Care)

- Initial encounter
  - Actively receiving treatment
- Subsequent encounter
  - Active phase of treatment/receiving routine care during period of healing/recovery
    - Healing – routine vs delayed
    - Complications – nonunion or malunion
- Sequela
  - Complications or conditions that arise as direct result of an injury

ICD-10-PCS

Access

- How did you gain access to the procedure site?
  - Incision
  - Open
    - Natural Orifice/Artificial Opening (Mouth, Vagina, Ostomy, Urethra, etc.)
  - Scope
  - Needle
    - Directly on the Skin

Anatomic Site/Location

- Specify exact site of procedure to ensure accurate coding
- Some procedure codes cannot be identified (by coding staff) without the exact site/location being documented

Intent

- Be clear in documentation as to what procedure(s) are performed

Other Helpful Hints

- Insufficiencies vs Failure
  - Insufficiency adds no severity of illness
  - State Failure when appropriate
- Post-Operative Complications
  - Reserve “Post-Op” verbiage to reflect a true complication of the procedure
- Links:
  - Symptoms to etiology
  - Home Meds to Applicable Diagnosis
  - Manifestations to etiology
- History & Physical (Current, updated, signed copy)
  - Present on Admission
  - Documentation should reflect the onset
- Abnormal Lab Values
  - Document disease process

Clinical Scenario

27 year old male presents to the ortho clinic with right knee pain after falling 5 feet off a ladder in his yard. Patient as at home cleaning the gutters and the ladder gave way 2 hours ago. Felt and heard a “pop” at time of injury with immediate onset swelling and pain. Past medical, surgical and social history is negative including no prior surgeries or injuries to the right knee and no personal history of tobacco use although there is secondary exposure as his spouse is a smoker. MRI obtained with results of right ACL tear. Initiate ice for swelling. Holding on NSAID therapies as Ortho consult has been ordered. Physical therapy consult is pending the outcome of ortho consult. If nonsurgical case, physical therapy to consult for pain and swelling control with progression to weight bearing and range of motion exercises.

CODING – DX

S83.511A Sprain of anterior cruciate ligament of right knee, initial encounter
Z77.22 Contact with and (suspected) exposure to environmental tobacco smoke (acute) (chronic)
W11.XXXA Fall on and from ladder, initial encounter
Y93.9 H9 Activity, other involving exterior property and land maintenance, building and construction
Y92.017 Garden or yard in single-family (private) house as the place of occurrence of the external cause
# ICD-10 Reference Guide: Orthopedics

## ICD-10-CM: ORTHOPEDICS

The following items should be documented (as appropriate) to allow complete coding under ICD-10-CM

### Arthritis
- Type
  - Primary, Secondary, Generalized (erosive), Post Traumatic
- Etiology
  - Osteoarthritis, Infective, Rheumatoid, etc.
- Site Impacted
  - Joint(s), Region(s)
- Laterality (when applicable)

### Fractures and Dislocations
- Traumatic vs Stress
  - Open vs Closed
  - Displaced vs Nondisplaced
- Degree of Healing (routine, delayed, nonunion, malunion)
- Pathological fracture with Osteoporosis
  - Age related vs other type

### Gustilo Classification – Open Fractures
- Special Long Bones
  - Femur
  - Ulna
  - Tibia
  - Radius
- Type I – low energy, wound <1cm
- Type II – wound >1cm with moderate soft tissue damage
- Type IIIA – high energy wound >1cm with extensive soft tissue damage; adequate soft tissue coverage
- Type IIIB – high energy wound >1cm with extensive soft tissue damage; inadequate soft tissue coverage
- Type IIIC – high energy wound >1cm with extensive soft tissue damage; associated with arterial injury

### Infections
- Link infective organism & disease process

### Injuries (Cause)
- Mechanism
  - How it happened (e.g. struck by a basketball)
- Place of Occurrence
  - Where it happened (e.g. high school)
- Activity
  - What patient was doing (e.g. playing basketball)
- External Cause Status
  - Military, civilian, work-related, leisure (e.g. leisure)

### Injuries (General)
- Type (Contusion, Laceration, Sprain/Strain, etc.)
- Episode of Care (Initial, Subsequent, Sequela)
- Detailed Location/Site
  - Brain, Ankle, Forearm, etc.
  - Head, Shaft, Proximal, Distal, individual body part, etc.
  - Tendon (flexor or extensor)
- Laterality (where applicable)
- Foreign Body (when present)

### Musculoskeletal System
- Past infection, part trauma, other disease processes
- Link infectious agent or cause to disease
- Arthritis – Rheumatoid vs Osteoarthritis
- Primary, post-traumatic, or secondary disease
- Pathological Fracture due to:
  - Osteoporosis
  - Neoplastic Disease
  - Other Cause

### Status of Disease
- Acute, Chronic, Intermittent, Recurrent, Transient
- Primary versus Secondary

## Specialty Links

- General ICD-10
- World Health Organization - ICD-10 Interactive Self Learning Tool
### Common Co-Morbid Conditions

#### Anemia
- **Etiology/Type**
  - Vitamin/Iron Deficiency, Due to Chronic Disease, Pernicious, Sickle Cell
- **Symptoms Related To**
- **Due to Chronic Disease (name disease)**
  - Autoimmune, Cancer, CKD, Liver Cirrhosis, HIV/AIDS, Hepatitis
- **Acquired vs hereditary hemolytic anemia**
- **Cause of aplastic anemia**

#### Angina
- **Avoid using term “Acute Coronary Syndrome/ACS”**
- **Stable vs Unstable or New Onset**
- **Supply Causes, state “due to …”**
  - CAD, aortic stenosis, hypertrophic, cardiomyopathy, pulmonary artery hypertension
- **Demand Causes, state “due to …”**
  - Anemia, tachyarrhythmia (name it), thyrotoxicosis, shock (name it)
- **Document spasm, when present**

#### Benign Prostatic Hypertrophy (BPH)
- **Link Symptoms to Syndrome (Weak Urine Stream, Difficulty Starting Urination, Unable to Empty Bladder)**

#### Chronic Kidney Disease (CKD)
- **Stage 1-5**
- **ESRD**
- **Etiology (Hypertension, Diabetes)**

#### Cerebral Vascular Accident (CVA)
- **Current vs Old**
- **Artery Impacted**
  - Laterality (where applicable)
- **Occlusion vs Stenosis**
- **Post-procedural**
- **Specify Additional Symptoms “Due To” Drugs**
  - Tremors, Tics, etc.
- **Traumatic Injury**
  - Episode of Care (Initial, Subsequent, Sequela)

#### Chronic Obstructive Pulmonary Disease (COPD)
- **Identify Underlying Condition**
  - Asthma, Chronic Bronchitis, Emphysema
- **Exacerbation/ Decompensation**
- **Identify Acute Infections**

#### Congestive Heart Failure (CHF)
- **Specify:**
  - Acute vs Chronic vs Both
  - Systolic and/or Diastolic Dysfunction
- **For Acute, state “due to …”**
  - Non-compliance, Afib with RVR, Ischemia (USA, AMI), Hypertensive Crisis, Other (name it)
- **For Chronic, state “due to …”**
  - CAD (ischemic cardiomyopathy), HTN (hypertensive heart disease), Specify other cause of cardiomyopathy
  - A document EF is not a diagnosis of heart failure, need verbiage in medical record to support

#### Diabetes Mellitus (DM)
- **Type**
  - Type 1, Type 2, Secondary (specify drug or chemical induced), Due to other condition (specify underlying disease)
- **Link Manifestations/Complications with “due to …”**
  - Neuropathy, Ophthalmic, Pregnancy, CKD
- **Long Term Use of Insulin**
- **Presence of Insulin Pump**

#### Decubitus Ulcers
- **Location – Stage (1-4, Unstageable, Unspecified)**
- **Laterality**

#### Nutritional
- **Deficiencies (Specify substance)**
- **Overweight vs Obesity vs Morbid Obesity (BMI value)**
- **Malnutrition**
  - With or without complications
  - Mild, moderate or severe

#### Pneumonia
- **Type (Aspiration, Bacterial, Virus)**
- **Identify causative organism**

#### Seizure
- **Seizure disorder = Epilepsy**
- **Seizure = single even to yet-to-be diagnosed**

#### Urinary Tract Infections (UTI)
- **Location**
  - Bladder, Kidney, Urethra
- **Identify Infectious Agent**
- **Complicating Pregnancy**
  - Specify Trimester Where Condition Began