Pediatrics Tip Sheet for ICD-10



Diagnosis	Documentation	Requirements
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Diagnosis	Documentation Requiren	nents	
Asthma	Document type: - Intermittent - Persistent	Document severity: - Mild - Moderate - Severe	Document status: - Uncomplicated - w/acute exacerbation Or -w/ status asthmaticus
Bronchitis	Document severity: - Acute - Chronic	If acute, document: - Causal organism, when known	If chronic, document: -Simple -Mucopurulent Or -Both
Congenital Pneumonia	Document organism , when known		
Diabetes	Document type: - Type I or - Type II	Document associated complications, such as: -Diabetic peripheral angiopathy - Diabetic autonomic neuropathy - Diabetic foot ulcer	Document insulin control status: -Inadequately controlled -Out of control Or -Poorly controlled
Drug Underdosing	Document type: - Intentional versus - Unintentional	Document reason for underdosing, such as: -Financial hardship or - Age related dementia	
Epilepsy	Document: - Intractable versus not intractable And - With or without status epilepticus	Specify type: - Localization-related idiopathic or symptomatic - Simple partial or complex partial seizures - Generalized idiopathic	Identify any special epileptic syndromes: - Seizures related to alcohol, drugs, sleep deprivation, etc. Include descriptions of poorly controlled pharmacoresistant, treatment resistant and refractory
Feeding Problems with Newborn	Document specific cause: - Regurgitation and rumination - Slow feeding - Underfeeding - Overfeeding - Difficulty with breast feeding		
Length of Gestation and Fetal Growth	Document issues related to fetal growth, specify if for gestational age the infant is: - Light - Small or - Heavy	Document conditions related to birth weight, document if infant birth weight is: - Extremely low - Exceptionally large Or - Other heavy birth weight infant	Document conditions related to short or long gestation: - Extremely immature - Premature - Post-term Or - Prolonged
Leukemia	Document type: - Acute - Chronic	Document specific type: - Acute lymphoblastic - Chronic lymphocytic of B-cell type - Prolymphocytic of B-cell type - Hairy cell - Prolymphocytic of T-cell type - Mature B-cell, Burkitt-type	Document remission-relapse status for each patient visit: Not having achieved remission In remission Or In relapse

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Diagnosis Documentation Requirements

Diagnosis	Documentation Requiren	icitics	
Malnutrition	Document type, such as: - Protein calorie - Protein energy	Document severity: - Mild or 1 st degree - Moderate or 2 nd degree - Severe or 3 rd degree	Document BMI
Neonatal jaundice	Document etiology: - Isoimmunization (Rh, ABO, other hemolytic diseases) - Excessive hemolysis (bruising, bleeding, infection, drugs or toxins given to newborn/transmitted from mother) - Preterm delivery, inspissated bile syndrome, breast milk inhibitor - Other syndromes or conditions (Crigler-Najjar, Gilbert, galactosemia, mucoviscidosis, congenital hypothyroidism) - If a poisoning or adverse effect, document the specific drug or toxin and if given to mother or newborn.		
Neoplasms	Document specific site Document laterality: - Right - Left - Bilateral	Detail when a patient has presented for a specific treatment related to the neoplasm (e.g., surgical removal, chemotherapy, immunotherapy, radiation therapy)	Document morphology: - Malignant - Benign - In situ - Uncertain behavior - Unspecified behavior
Obesity	Document etiology: - Due to excess calories or nutritional - Due to drugs - Other, for example, due to thyroid or pituitary disorder	If morbidly obese, also document if with alveolar hypoventilation	Document BMI
Omphalitis of Newborn	Document type, with or without: - Mild Hemorrhage		
Respiratory Distress Syndrome	Document type: - Type I - Type 2 - Transient tachypnea of newborn		
Sepsis	Document: - Systemic type or causal organism Do NOT use the term UROSEPSIS (consider UTI with Sepsis) Document: Present on	Document: - Circulatory failure related to Sepsis and/or Septic Shock - Severe Sepsis with specific related acute organ dysfunction	Pocument: - Related local infections (Pneumonia, Cellulitis, UTI, Catheter related UTI, Infected Dialysis Catheter, etc.)
Tobacco Use Disorder	admission vs. hospital acquired Document type: - Cigarettes - Chewing tobacco - Other Delineate between: - Tobacco use/abuse - Tobacco dependence	Document state of dependence: - In remission - With withdrawal - Without withdrawal	Document if used during pregnancy, childbirth, puerperium Describe history, including product and time
Umbilical Hemorrhage of Newborn	Document, "massive" when applicable: - Massive umbilical hemorrhage is based on your clinical judgment		



Diagnosis	Documentation Requireme	ents	
ADD and ADHD	Document type: - Predominantly inattentive - Predominantly hyperactive - Combined type		
Anemia	Document Type: - Nutritional deficiency (iron, Vit B12, folate, protein, etc.) - Hemolytic (enzyme disorder, thalassemia, etc.) - Sickle cell (with or without crisis) with acute chest syndrome or splenic sequestration - Aplastic (drug induced, idiopathic, etc.) - Blood loss (acute, chronic, postoperative)	Document cause: - Neoplastic disease - Chronic kidney disease Document underlying cause if known	Document any alcohol or drug use, abuse, dependence or past history Specify name of medication or drug with purpose of its use
Asthma	Document type: - Intermittent - Persistent	Document severity: - Mild - Moderate - Severe	Document status: - Uncomplicated - w/acute exacerbation Or -w/ status asthmaticus
Bipolar	Document current episode: - Hypomanic - Manic - Depressed - Mixed	Specify severity for manic and depressed episodes: - Mild - Moderate - Severe w/o psychotic symptoms - Severe w psychotic symptoms	Indicate status: - Full remission - Partial remission
Bronchitis	Document severity: - Acute - Chronic	If acute, document: - Causal organism, when known	If chronic, document: -Simple -Mucopurulent Or -Both
Dehydration	Document: - Hypertonic - Hypotonic		
Dermatitis	Document type such as: - Atopic - Seborrheic - Diaper - Allergic - Irritant	Document drug or substance causing irritation: - Metal - Detergents - Plants - Cosmetics	If dermatitis is due to ingested substance, document if: - Substance - Medicine - Food Document name of substance Document intention and circumstances around swallowing substance
Diabetes	Document type: - Type I or - Type II	Document associated complications, such as: -Diabetic peripheral angiopathy - Diabetic autonomic neuropathy - Diabetic foot ulcer	Document insulin control status: -Inadequately controlled -Out of control Or -Poorly controlled
Drug Underdosing	Document type: - Intentional versus - Unintentional	Document reason for underdosing, such as: -Financial hardship or - Age related dementia	



Diagnosis Documentation Requirements	nol, etc. porly
intractable And - With or without status epilepticus Document specific cause: - Regurgitation and rumination - Slow feeding - Underfeeding - Overfeeding - Difficulty with breast feeding Document the origin: symptomatic - Simple partial or complex partial seizures - Generalized idiopathic Document if: - Overfeeding - Overfeeding - Difficulty feeding at breast - Failure to thrive - Seizures related to alcol drugs, sleep deprivation, Include descriptions of precontrolled pharmacoresis treatment resistant and refractory - Seizures related to alcol drugs, sleep deprivation, Include descriptions of precontrolled pharmacoresis - Overfeeding - Overfeeding - Difficulty feeding at breast - Failure to thrive - Seizures related to alcol drugs, sleep deprivation, Include descriptions of precontrolled pharmacoresis - Failure to thrive - Seizures related to alcol drugs, sleep deprivation, Include descriptions of precontrolled pharmacoresis - Failure to thrive	etc.
And - With or without status epilepticus Peeding Problems with Newborn (birth to 28 days old) - With or without status epilepticus Document specific cause: - Regurgitation and rumination - Slow feeding - Underfeeding - Difficulty with breast feeding - Difficulty with breast feeding - Document the origin: Document specific cause: - Regurgitation complex partial or complex partial drugs, sleep deprivation, include descriptions of procontrolled pharmacoresis treatment resistant and refractory Document if: - Overfeeding - Difficulty feeding at breast - Failure to thrive Document the origin: Document the origin:	etc.
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- Overfeeding - Difficulty with breast feeding Document the origin: Document the origin:	
Document the origin: Document the origin:	
Destructional Destruction 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fever - Postprocedural - Drug-induced (identify the drug)	
- Febrile nonhemolytic transfusion - Postprocedural	
reaction - Postvaccination	
- Unknown	
Document the underlying cause	
Hypoxemia of any questionable signs or - Hypoxemia abnormalities	
symptoms - Hypercapnia originating in the	
perinatal period	
Document cause: Document intention: Document location:	
Injuries - Motor vehicle accident - Accident - Kitchen of residential ho	me
- Fall down stairs, etc Assault - Public park	
- Self-inflicted - Apartment bathroom, et	С.
Document activity: - Undetermined - Getting out of bed Document work status at	time of
- Skateboarding, etc. injury:	time or
- Military	
- Civilian	
- Hobby, recreational, etc.	
Document: Document laterality: Document specific site (e	g.
Juvenile Rheumatoid - If juvenile RA with systemic - Right shoulder, hip, knee etc.)	
Arthritic onset - Left	
- II radial deal governer (A - Bilatera)	
Document episode: Document severity: Indicate status:	
Major Depressive - Single - Mild - Full remission - Partial remission - Partial remission	
Disorder - Recurrent - Moderate - Partial remission - Severe w/o psychotic symptoms	
- Severe w/ psychotic symptoms	
Specify bipolar disorder episodes Clarify the remission status: Indicate episode:	
Mood Disorders as: - Full - Single	
- Manic - Partial - Recurrent episode	
- Depressed	
- Mixed Detail the severity:	
- Mild	
Provide information regarding the - Moderate	
presence or absence of psychotic - Severe symptoms or features.	
Document: Detail when a patient has	
Constitue that traduction between the constituent and the constituent to the constituent	
Neoplasms - Specific site, including laterality presented for a specific treatment related to the	
malignant, benign, in situ, neoplasm (e.g., surgical	
etc.) removal,	
- Uncertain behavior chemotherapy, immunotherapy,	
- Unspecified behavior radiation therapy)	



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Diagnosis	Documentation Requireme	nts	
	Document acuity:	Document:	Differentiate:
Otitis Media	- Acute	- Spontaneous rupture of eardrum	- Non-suppurative
Othis Media	- Subacute	- Myringitis	- Suppurative
	- Chronic		
	- Recurrent	Document Type:	Document tobacco use, abuse,
		- Serous	dependence, or exposure
	Document laterality:	- Mucoid	
	- Right	- Allergic	Document underlying diseases
	- Left	- Atticantral	(viral infection, influenza, etc.)
	- Bilateral	- Tubotympanic	
	Document type:	Document associated conditions:	Document any tobacco use,
Pneumonia	- Bacterial (specify organism)	- Sepsis	abuse, dependence or exposure
Theumoma	- Viral	- HIV disease	
	- Aspiration (specify substance)	- Influenza	
	- Fungal	- Other	
	- Ventilator Associated		
	- Other		
	Document type:		
Respiratory Distress	- Type I		
	- Type 2		
Syndrome	- Transient tachypnea of newborn		
	Document acuity:	Document:	Differentiate between:
Respiratory Failure	- Acute	- With hypoxia and/or	- Respiratory Distress Syndrome
Respiratory Failure	- Chronic	hypercapnia	- Respiratory Arrest
	- Acute and Chronic		- Postprocedural Respiratory
		Document any tobacco use,	Failure
		abuse, dependence, or exposure	
	Document acuity:	Document type:	Document any tobacco use,
Rhinitis	- Acute	- Allergic (due to food or	abuse, dependence, or exposure
Killings	- Chronic	pollen, seasonal, nonseasonal,	
		perennial)	
	Document:	- Infective	
	- With sore throat	- Pneumococcal	
	- Allergic with asthma (specify if	- Syphilitic	
	exacerbation or status	- Tuberculous	
	asthmaticus)	- Vasomotor	
	Seizures not diagnosed as a	Specify epileptic seizures as:	Describe seizures as:
Seizures & Epilepsy	disorder or recurrent (i.e.,	- Localization-related	- Localized onset
,	non-epileptic) should specify	- Generalized	- Simple partial
	the condition as being:		- Complex partial
	- Febrile – specify simple or	Identify any special epileptic	
	complex	syndromes:	Further describe seizures as:
	- New onset	- Seizures related to	- Intractable
	- Single seizure or convulsion	alcohol, drugs, sleep	- Not intractable
	- Post traumatic or hysterical	deprivation, etc.	- With status epilepticus
	- Autonomic		- Without status epilepticus
		Include descriptions of poorly	·
		controlled pharmacoresistant,	
		treatment resistant and	
		refractory	
	Document:	Document:	Document:
Sepsis	- Systemic type or causal	- Circulatory failure related to	- Related local infections
00,000	organism	Sepsis and/or	(Pneumonia, Cellulitis, UTI,
		Septic Shock	Catheter related
	Do NOT use the term UROSEPSIS	- Severe Sepsis with specific	UTI, Infected Dialysis Catheter,
	(consider UTI with Sepsis)	related acute organ	etc.)
	, ,	dysfunction	
	Document: Present on	,	
	admission vs. hospital acquired		

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admission vs. hospital acquired



Diagnosis	Documentation Requirements

	Document acuity:	Document location:	Document any tobacco use,
Sinusitis	- Acute	- Maxillary	abuse, dependence, or exposure
5	- Chronic	- Frontal	
	- Acute Recurrent	- Ethmoidal	
	- Nocturnal enuresis	- Sphenoidal	
		- Pansinusitis	
	Document type:	Document state of dependence:	Document if used during
Tobacco Use Disorder	- Cigarettes	- In remission	pregnancy, childbirth,
	- Chewing tobacco	- With withdrawal	puerperium
	- Other	- Without withdrawal	
			Describe history, including
	Delineate between:		product and time
	- Tobacco use/abuse		
	- Tobacco dependence		