Pulmonary Medicine Tip Sheet for ICD-10



Diagnosis Documentation Requirements

| Diagnosis | Documentation Requireme | ents | |
|---------------------|------------------------------------|--------------------------------------|--|
| | Document severity: | Document level of | Document external forces |
| Asthma | - Mild | exacerbation: | to establish a cause and |
| | - Moderate | - Uncomplicated | effect relationship |
| | - Severe | - Acute | |
| | | - Status Asthmaticus | Document any tobacco use, |
| | Document frequency: | | abuse, dependence, or exposure |
| | - Intermittent | Document any coexisting COPD | |
| | - Persistent | | |
| | Document acuity: | Specify causative agent, if | If chronic, document: |
| Duran shinis | - Acute | known (e.g. Mycoplasma | - Simple |
| Bronchitis | - Subacute | pneumonia, Hemophilus | - Mucopurulent |
| | - Chronic | influenza, Streptococcus, | - Both |
| | Cinonic | Coxsackievirus, | 5611 |
| | Delineate if both acute and | Parainfluenza, Respiratory | Document any tobacco use, |
| | chronic bronchitis are present | syncytial virus, Rhinovirus, | abuse, dependence, or exposure |
| | · | Echovirus) | , , , , , |
| | Document: | Document: | Document: |
| Chronic Obstructive | - Chronic | - With acute lower respiratory | - With Asthma (and type of |
| Pulmonary Disease | - Acute exacerbation | tract infection | asthma) |
| <u>=</u> | | (specify type of infection) | |
| (COPD) | | | Document any tobacco use, |
| | | | abuse, dependence, or exposure |
| | Document acuity: | Document type: | List any casual relationships: |
| Congestive Heart | - Acute | - Systolic (include ejection | - Hypertension |
| Failure (CHF) | - Chronic | fraction) | - Chronic kidney disease |
| Tanare (em) | - Acute or chronic | - Diastolic | Obstetric surgery/procedures |
| | | - Combined | - Surgery |
| | Specify if rheumatic heart failure | | |
| | Document: | Document reason for | |
| | | underdosing: | |
| Drug Underdosing | - Intentional | - Financial hardship | |
| | versus | or | |
| | - Unintentional | | |
| | | - Age related dementia | |
| | Document type: | | |
| Emphysema | - Unilateral | | |
| ' ' | - Panlobular | | |
| | - Other type | | |
| | Acute Kidney Failure: | Chronic Kidney Failure: | Document associated underlying |
| Kidney Failure | - Tubular necrosis | - Specify stage as 1 through 5 | condition |
| | - Acute cortical necrosis | - Specify if end-stage | Barrier de d'altre de |
| | - Medullary necrosis | | Document dialysis |
| | | | status or s/p kidney |
| | Document type, such as: | Document severity: | transplant status Document BMI |
| | - Protein calorie | - Mild or 1 st degree | Document bivii |
| Malnutrition | - Protein energy | - Moderate or 2 nd degree | |
| | - 1 Totelli ellergy | - Severe or 3 rd degree | |
| | Document specific site | Detail when a patient has | Document morphology: |
| Noonlasms | Jesument speame site | presented for a specific | - Malignant |
| Neoplasms | Document laterality: | treatment related to the | - Benign |
| | - Right | neoplasm (e.g., surgical removal, | - In situ |
| | - Left | chemotherapy, immunotherapy, | - Uncertain behavior |
| | - Bilateral | radiation therapy) | - Unspecified behavior |
| | Document etiology: | If morbidly obese, also | Document BMI |
| | - Due to excess calories or | document if with alveolar | |
| | nutritional | hypoventilation | |
| Obesity | - Due to drugs | , poveridadon | |
| | - Other, for example, due | | |
| | to thyroid or pituitary | | |
| | disorder | | |
| | alsoraci | 1 | <u> </u> |

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|-------------------------|--|--|---|--|--|
| Pneumonia | Document type: - Bacterial (specify organism) - Viral - Aspiration (specify substance) | Document associated conditions: - Sepsis - HIV disease | Document any tobacco use, abuse, dependence or exposure | | |
| | - Fungal - Ventilator Associated - Other | - Influenza - Other | | | |
| Pneumothorax | Document type: - Spontaneous - Chronic - Postprocedural - Traumatic | If spontaneous, specify as: - Primary - Secondary - Tension | | | |
| Pulmonary Insufficiency | Document severity: - Acute - Chronic | Document cause: - Shock - Surgery (thoracic versus nonthoracic surgery) - Trauma | | | |
| Pulmonary Embolism | Document type, such as: - Saddle - Septic | Document cor pulmonale if present and whether it is: - Acute - Chronic | Specify if: -Chronic (still present) Versus -Healed/old -Note that "history of PE" is ambiguous | | |
| Respiratory Failure | Document acuity: - Acute - Chronic - Acute and chronic | Document: - With hypoxia and/or hypercapnea Document any tobacco use, abuse, dependence or exposure | Differentiate between: - Respiratory Distress Syndrome - Respiratory Arrest - Post procedural Respiratory Failure | | |
| Tobacco Use Disorder | Document type: - Cigarettes - Chewing tobacco - Other | Document state of dependence: - In remission - With withdrawal - Without withdrawal | Document if used during pregnancy, childbirth, puerperium | | |
| | Delineate between: - Tobacco use/abuse - Tobacco dependence | | Describe history, including product and time | | |
| Procedures | Documentation Requires | Documentation Requirements | | | |
| Lymph Node Removal | Differentiate between removal of: - One or more lymph nodes versus - Removal of an entire chain of lymph nodes | | | | |
| Biopsy | Document specific site and laterality: - Right main bronchus - Right upper lobe bronchus - Right upper lobe | | | | |

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