

CheckPoint: Determining Diagnosis Code Categories

A 56-year-old woman presents to the office complaining of pronounced weakness on the right side of her body and slurred speech for the past 18 hours. Based on the examination, the physician orders an MRI to investigate a possible transient ischemic attack (TIA).

The physician in the case study orders an MRI to investigate or study that the patient “possible or likely” experiencing transient ischemic attack (TIA). The word “possible” indicates that the physician could not make a definitive diagnosis. Therefore the Codes in Chapter 16 of the ICD-9-CM should be assigned, because they classify the patients’ signs, symptoms, and ill-defined conditions for which a definitive diagnosis cannot be made. In physician practice coding, these codes are always used instead of coding ruleout, “probable”, or suspected conditions. Therefore, Symptoms, Signs, and Ill-Defined Conditions Codes 780–799 should be assigned. (Valerius et al., 2008)

A 42-year-old man comes to the office complaining of intermittent chest pain. The physician orders an EKG to rule out a possible cardiac event.

The patient is experiencing irregular chest pains. The case study does not state how often the chest pains occur or what the patient is doing when he is experiencing the chest pains such as; lying down sleeping at night, or at the end of an exercise routine.

I would assign a diagnosis of angina pectoris which is an episode of chest pain from a temporary insufficiency of oxygen to the heart. This would be coded as 413.9 unless, the irregular chest pain occur only at night in which then code 413.0 would be used. In the case where the patient was experiencing the intermittent chest pains during or at the end of an exercise routine then this would be diagnosed as Prinzmetal (angiospastic) angina assigning code 413.1. (Valerius et al., 2008)

A 23-year-old diabetic female exhibits a non-healing wound on her left foot.

The scenario of the case study does not state whether the patient uses insulin. It is the possible the patient may take medicine in pill form to help control her diabetes, however since the patient shows evidence of a wound that will not heal, it is apparent that the patient has a case of diabetes that requires the use of insulin. The category code which is 250 indicates a diagnosis of diabetes mellitus. Also according to the text if the patient is insulin-dependent, that is, routinely uses insulin, a V code V58.67 may be assigned to complete the clinical picture. (Valerius et al., 2008)

Reference:

Valerius, J., Bayes, N.L., Newby, C., Seggern, J., (2008). Part II Claim coding. Medical Insurance An Integrated Claims Process Approach (3rd ed.). New York, NY: McGraw-Hill

