ICD10-CA/CCI MEDICAL CODING CHECKLIST

Thank you to our Volunteer Contributors and Reviewers:

Hanna Luctkar, CHIM, CCCS

Libby General, CHIM

Millie Holmgren, Student

Jodi McMullin, CHIM, CCCS, CCDIS, CCS-AHIMA

This checklist is intended for informational purposes only.

Please always refer to canadian coding standards and icd10-ca/cci for more information

General Coding Standards

- [ ] **Know the criteria for significance:** A condition is considered significant (comorbid) when it meets one of the following:

  1. Requires treatment beyond maintenance of the pre-existing condition
  2. Increases the length of stay (LOS) by at least 24 hours
  3. Significantly affects the treatment received

  Canadian Coding Standards 2022 (CCS) pg. 25

- [ ] **Follow national and local guidelines on mandatory coding**

  Data is only good if everyone is coding the same way. Optional codes should ONLY be assigned when following a jurisdictional or facility directive.

- [ ] **Avoid over or under coding**

  Review the chart carefully and capture any conditions that are relevant to the episode of care or otherwise mandatory.

  EXAMPLE: One does not assign a code for each condition listed in the patient's medical history. To assign a code for the condition it must meet the criteria of significance or be mandatory to assign (ie. Diabetes Mellitus)

Chapter Specific Guidelines

- [ ] **Know your standards**

  Be sure to familiarize yourself with the standards and refer to them when coding. The standards should be your first stop when you have a coding question

- [ ] **Chapter IX — diseases of the circulatory system**

  It is mandatory to assign a code for thrombolytic therapy (1.ZZ.35. HA-1C) when given. This is NOT the same as antithrombotics.

  Thrombolytics include: anistreplase, alteplase, retaplase, streptokinase, tenecteplase, TNKase (TNK), tissue plasminogen activator (tPA), urokinase. When a patient presents with an ischemic stroke or myocardial infarction review the record carefully for any mention of these medications.

  The code I64 Stroke, not specified as haemorrhage or infarction should be rarely assigned. If diagnostic imaging was performed refer to the report for specificity. If a hemorrhage was ruled out in the diagnostic imaging report assign a code for an ischemic stroke (see the January 2020 CIHI Job Aid Strokes)

- [ ] **Chapter XIX — injury, poisonings and certain other consequences of external causes**

  Post-intervention coding

  Review the standards carefully as this is often an area of concern for new coders. Follow the steps listed on page 521 of the CCS when searching the alphabetical index.

  Also review the CIHI course 1206E-Post- Intervention Conditions (PICs): Step by Step and the February 2022 Job Aid Post-Intervention Condition: Locating the Primary Code

Where Do We Look For Documentation in A Chart?

- [ ] **Example: Most common areas for diagnoses include face sheet, discharge summary, h&p, consults, progress notes**

- [ ] **Look for specificity in imaging, labs, pathology, nursing notes (ulcer staging).**

  Follow any applicable standards ie. Use diagnostic imaging, pathology, and other diagnostic results (except for labs) to assign specificity in your code selection.

  ("Using Diagnostic Test Results in Coding" CCS pg.64)

Reference Sources: The Canadian Institution of Health Information

Disclaimer: While all measures have been taken to create and review content for accuracy, it should be noted that CHIMA assumes no responsibility or liability for any errors or omissions in the content of this course. The information contained in this presentation is for educational use only.

© Canadian Health Information Management Association

Coding Examples

☐ **Diabetes mellitus with complications**

Multiple Complications with one being treated

- Capture the diabetic complication being treated (don't code E1-.78)

Multiple Complications with more than one being treated

- Assign codes for each diabetic complication being treated
- For example, patient has glaucoma, CHF, and CKD with type 2 DM. The CHF and CKD are being actively treated. Assign E11.52 and E11.23 with N08.39.

Don't code E11.36 as the glaucoma isn't being treated

Multiple Complications with none being treated

- Assign E1-.78, you can only assign this when none of the diabetic complications are significant.

Multiple Complications that fall under the same diabetic code

- Only assign the diabetic complication once. But code each condition being treated. If none are being treated just code the complication.
- Ie pt with DM1 has CHF and CAD, neither being treated. Code E10.52 once.

One complication not being treated

- Assign the code for the diabetic complication, NOT E1-.9.
- For example, patient has CHF and type 2 DM and came to ED for a broken arm.

You would code E11.52 because the patient does have diabetes with cardiovascular complications.

☐ **Coding CTs**

NOTE: coding CTs are not mandatory at a national level for DAD

Pay careful attention to the structures visualized, and code to what was seen. This may not be the same as the heading of the diagnostic imaging report.

EXAMPLE: A "CT BRAIN" was performed but the diagnostic imaging report states structures of both the head and brain were visualized. This would be coded to CT Head (3.ER.20) per the excludes notes at 3.AN.20.^^

EXAMPLE: A "CT ABDOMEN" was performed but the diagnostic imaging report comments on the lower thorax and lung bases. This would be coded to CT Total Body (3.ZZ.20.^^) per the excludes notes at 3.OT.20.^^

Quick Reference Guide Links

☐ CIHI's eQuery Service

☐ CIHI's Classification Resources page

☐ Assigning Diagnosis Types to DAD Abstracts (cihi.ca)

Reference Sources: The Canadian Institution of Health Information

Disclaimer: While all measures have been taken to create and review content for accuracy, it should be noted that CHIMA assumes no responsibility or liability for any errors or omissions in the content of this course. The information contained in this presentation is for educational use only.

© Canadian Health Information Management Association