ICD-10-CM and PCS Coding Readiness Assessment

Measure coding skills and focus your preparation efforts for ICD-10

2015
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ICD-10-CM Coding Assessment—Intermediate Level Test Answers

1. The patient presents with an overdose due to “Vanilla Sky” bath salts abuse, smoked during a party at a friend’s home with patient experiencing agitation and tachycardia and comatose on arrival to emergency room with Glasgow Coma Scale 8 E2 V2 M4, opens eyes to sternal rub, moans, withdraws from painful stimuli. How many codes are required to appropriately report this encounter?

   A Eight  
   B One  
   C Four  
   D Two

Rationale
The ICD-10-CM guideline 1.C.19.e.5.b states that T36–T65 are combination codes that include the drug that was taken as well as the intent; therefore, no additional external cause code is necessary. Bath salts are a psychostimulant and are indexed as “specified” in the Table of Drugs and Chemicals, code T43.691. This guideline also directs the user to first assign a code from category T36–T50, followed by additional codes for all manifestations. In this example, the manifestations are agitation (R45.1), tachycardia (R00.0), and three separate codes for the coma (R40.2*). ICD-10-CM guideline 1.C.18.e states that the coma scale codes are sequenced after the diagnosis code, one from each subcategory (R40.21-, R40.22-, and R40.23-). Code R40.24 is used only when the total score is documented and not the individual information for each subcategory. ICD-10-CM guideline 1.C.19.e.5.b also instructs the user to code drug abuse or dependence as an additional diagnosis when documented. The code for place of occurrence would be assigned since the place is documented and this is the initial encounter. According to ICD-10-CM guidelines I.C.20.a.8., I.C.20.b and I.C.20.c, an activity code and status code would not be assigned.
2. How is a full-term delivery of a single stillborn complicated by prolonged second stage of labor and a second-degree perineal laceration coded?

A  O63.1 Prolonged second state of labor, O70.9 Perineal laceration during delivery, unspecified
B  O70.1 Second degree perineal laceration during delivery, O63.1 Prolonged second state of labor, Z38.00
   Single liveborn infant, delivered vaginally
C  O63.1 Prolonged second state of labor, Z37.9 Outcome of delivery, unspecified
D  O63.1 Prolonged second state of labor, O70.1 Second degree perineal laceration during delivery, Z37.1 Single stillbirth

**Rationale**
In the ICD-10-CM Alphabetic Index, the main term “Labor” directs the user to the term “Delivery” and the subterms “complicated by prolonged labor,” then “second stage,” which references category O63.1. Under the same main terms, “Delivery” and then “complicated by,” “laceration,” “perineal,” “second degree,” the user is directed to category O70.1. Confirmation of these codes in the Tabular List verifies that both codes have been coded to the highest degree of specificity available.

It should be noted that an Excludes1 note at category O70.1 directs the code to category O70.2 for perineal lacerations involving the anal sphincter.

ICD-10-CM guideline I.C.15.b.5 instructs the user to code the outcome of delivery (Z37.-) on every maternal record when a delivery has occurred. In this case, the delivery resulted in a single stillborn represented by code Z37.1.

3. What is the appropriate external cause code assignment for the initial encounter of a man with a self-inflicted accidental GSW to the left thigh secondary to cleaning a collector pistol in the kitchen of the man's house?

A  W34.00XA Accidental discharge from unspecified firearms or gun, initial encounter, Y92.019
   Unspecified place in single-family (private) house as the place of occurrence of the external cause,
   Y93.89 Activity, other specified, Y99.8 Other external cause status
B  W34.00XA Accidental discharge from unspecified firearms or gun, initial encounter, Y92.010 Kitchen of
   single-family (private) house as the place of occurrence of the external cause, Y93.E9 Activity, other
   interior property and clothing maintenance
C  W32.0XXA Accidental handgun discharge, initial encounter, Y92.010 Kitchen of single-family
   (private) house as the place of occurrence of the external cause, Y93.89 Activity, other specified,
   Y99.8 Other external cause status
D  W32.0XXA Accidental handgun discharge, initial encounter, Y92.010 Kitchen of single-family (private)
   house as the place of occurrence of the external cause, Y93.89 Activity, other specified, Y22.XXXA
   Handgun discharge, undetermined intent, initial encounter

**Rationale**
The gunshot wound was self-inflicted, but it was accidental and it was caused by a pistol, making subcategory W32.0 the most appropriate selection for the injury as cited in the ICD-10-CM Index to External Causes under “Discharge,” “firearm,” “pistol.” It is specified that the patient is in a private residence (house) in the kitchen, making the code assigned for the place of occurrence very specific, Y92.010. Lastly, the patient is specified as collecting pistols, making this a hobby for the patient. This identifies the status as Y99.8 according to the includes note of “hobby not done for income” or “leisure activity.”
4. **What code or codes should be reported for an old plastic foreign body in the vitreous of the left eye?**

   A. H44.752 Retained (nonmagnetic) (old) foreign body in vitreous body, left eye
   B. H05.52 Retained (old) foreign body following penetrating wound of left orbit, and Z18.2 Retained plastic fragments
   C. H44.752 Retained (nonmagnetic) (old) foreign body in vitreous body, left eye, and Z18.2 Retained plastic fragments
   D. S05.51 Penetrating wound with foreign body of left eyeball, and Z18.89 Other specified retained foreign body fragments

   **Rationale**
   The correct code choice for foreign bodies of the eye is driven by the following questions:
   - Is the foreign body magnetic or not?
   - Is the foreign body old or an acute injury?
   - Which eye is affected—left, right, both, or unspecified?
   - Where in the eye is the foreign body (e.g., lens, posterior wall of globe) or is the foreign body in multiple or unspecified sites?
   - What is the composition of the foreign body material (e.g., metal, glass, plastic)?

   Two codes are required to report this diagnosis in entirety. The “code also” note under subcategory H44.7 Retained (old) intraocular foreign body, directs the user to report an additional code from category Z18 to identify the nonmagnetic foreign body material. The Excludes1 note at the subcategory level instructs the user not to use codes from category S05 for current acute injuries of the eye and orbit when reporting retained (old) foreign bodies. The Excludes2 note indicates that retained foreign bodies in other ocular sites may also be reported, with separate codes, if there are more than foreign bodies in separate sites. ICD-10-CM guideline I.A.12b interprets Excludes2 notes as “not included here,” indicating that the condition excluded is not part of the condition represented by the code, but a patient may have both conditions at the same time. When an Excludes2 note appears under a code, it is acceptable to use both the code and the excluded code together, when appropriate.

5. **What code would be reported when a newborn is seen in the pediatrician’s office because of a white coating on the inside of the mouth? Physician documentation indicates a diagnosis of candidiasis.**

   A. P37.5 Neonatal candidiasis
   B. B37.0 Candidal stomatitis
   C. B37.9 Candidiasis, unspecified
   D. None of the above

   **Rationale**
   In the Alphabetic Index, main term “Candidiasis, candidal,” subterm “mouth” directs the user to B37.0. However, an Excludes1 note under category B37 Candidiasis indicates that neonatal candidiasis is reported with code P37.5.

   In addition, official ICD-10-CM guideline I.C.16.a.5 states that when a newborn has a condition that is due to the birth process or is community acquired yet the documentation does not state the cause, a code from chapter 16 should be used. Since the diagnostic statement above does not indicate whether the condition is related to the birth process or is community acquired, code P37.5 is assigned. However, it would be advisable to query the provider before assigning a code.