Cardiac and Pulmonary Conditions Documentation

WVUPC
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Respiratory Failure

- Acute respiratory distress syndrome (ARDS)
- Cardiorespiratory failure
- Newborn
- Respiratory Arrest
- Acute
- Acute on Chronic
- Center
- Chronic
- Post procedural (acute)
ARDS

- Acute respiratory distress syndrome (ARDS)
  Need to also code environmental conditions
  1. Exposure to environmental tobacco smoke
  2. Exposure to tobacco smoke in the perinatal period
  3. History of tobacco use
  4. Occupational exposure to environmental tobacco smoke
  5. Smoke inhalation
  6. Tobacco dependence
  7. Tobacco use
- Acute respiratory failure
  - With hypercapnia
  - With hypoxia

- Chronic respiratory failure
  - With hypercapnia
  - With hypoxia

- Acute on Chronic respiratory failure
  - With hypercapnia
  - With hypoxia
Cardiorespiratory Failure

- Cardiac Arrest
- Respiratory arrest of newborn
- Respiratory distress syndrome
- Respiratory failure
- Respiratory insufficiency
- Post-Procedural and/or post operative
Cardiac Arrest

- Cardiogenic shock
- Complicating abortion, ectopic or molar pregnancy
- Complicating delivery (cesarean)(instrumental)
- Complicating anesthesia in pregnancy or childbirth
- Newborn
- Complicating anesthesia, general, local or other sedation
- Due to: cardiac condition (must also code condition)
- Intraoperative (intra-procedural)
- Post-procedural or post-operative
Heart Failure

- With acute pulmonary edema, decompensation, dilatation
- Cardiac arrest
- Complicating abortion, ectopic or molar pregnancy
- Complicating delivery (C-Section)(instrumental)
- Complicating puerperium
- Fluid overload
- Newborn
- Complicating anesthesia
- Due to presence of cardiac prosthesis
- Following surgery
- Hypertensive (due to)
Heart failure 2

- Acute pulmonary edema
  - With rheumatic fever
  - Cardiac arrest
  - Neonatal cardiac failure
  - Hypertensive
  - Rheumatic (chronic)(inactive)(with chorea)

- Decompensation
  - Combined systolic and diastolic
  - Diastolic (congestive)
  - Left ventricular
  - Systolic (congestive)

- Dilatation
  - Coded as heart disease (organic)
Heart Disease

- Acute pulmonary edema
- Rheumatic fever
- Congenital
- With hypertension
- Arteriosclerotic or sclerotic (senile)
- Artery, arterial
- Congestive
- In rheumatoid arthritis, or syphilis
- Ischemic (chronic or with stated duration of over 4 weeks
- Rheumatic (chronic)(inactive)(old)(with chorea)
Heart Disease cont.

- In rheumatoid arthritis, or syphilis
  - Gonococcal infection
  - Meningococcal infection
  - Mucopolysaccharidosis
  - Rheumatoid Arthritis
  - Schistosomiasis
  - Syphilis

- Ischemic (chronic or with stated duration of over 4 weeks
  - Acute or with duration of less than 4 weeks
  - Aneurysm
  - Angina
  - Atherosclerotic of
  - Cardiomyopathy
  - Coronary arteriovenous fistula acquired
  - Diagnosed on ECG but no symptoms
  - Due to vasospasm
  - Old or healed MI
  - Silent
  - Sub-acute (codes to acute)

- Rheumatic
  - Active, acute or subacute
  - Cardiac hypertrophy
  - Carditis
  - Endocarditis
  - Heart failure (congestive)
  - Left ventricular failure
  - Myocarditis
  - Pancarditis
  - Pericarditis
Congenital Heart Disease

- Endocardial fibroelastosis
- Auricle
- Bands or folds
- Chambers and/or connections
- Coronary vessels
- Cor triatriatum
- Cyanotic
- Dextrocardia
- Heart Block
- Levocardia
- Malformation
- Valve

- Malposition
- Maternal affecting newborn
- Obstructive
- Patent ductus arteriosus
- Pulmonary infundibular stenosis
- Septum
- Subaortic stenosis
- Syphilitic
- Tetralogy of Fallot
- Uhl’s
- Ventricular
Asthma

• ICD-10 distinguishes between uncomplicated cases and those in exacerbation. Acute exacerbation is a worsening or decompensating of a chronic condition.

• An acute exacerbation is not equivalent to an infection superimposed on a chronic condition.

• Additional code can be used regarding exposure to or use of tobacco.
Asthma Classification

Incorporate the following scales into documentation templates or queries

The National Heart, Lung, and Blood Institute (NHLBI) asthma severity classification scale accounts for the progressive nature of asthma by measuring it across the dimensions of types of symptoms and lung function. Mild intermittent:

- Mild persistent
- Moderate persistent
- Severe persistent
## Presentation of Asthma before (without) Treatment

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Nighttime Symptoms</th>
<th>Lung Function</th>
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</table>
| • Continual symptoms  
• Limited physical activity  
• Frequent exacerbations | Frequent | • FEV\(_1\) or PEF \(\leq 60\%\) predicted  
• PEF variability \(> 30\%\) |
| • Daily symptoms  
• Daily use of inhaled short-acting beta\(_2\)-agonist  
• Exacerbation of affect activity  
• Exacerbation \(\geq 2\) times/week \(\geq 1\) day(s) | \(> 1\) time/week | • FEV\(_1\) or PEF 60-80\% predicted  
• PEF variability \(> 30\%\) |
| • Symptoms \(> 2\) times/week but \(< 1\) time/day  
• Exacerbation may affect activity | \(> 2\) times/month | • FEV\(_1\) or PEF \(\geq 80\%\) predicted  
• PEF variability 20-30\% |
| • Symptoms \(\leq 2\) times/week  
• Asymptomatic and normal PEF between exacerbations  
• Exacerbations of varying intensity are brief (a few hours to a few days) | \(\leq 2\) times/month | • FEV\(_1\) or PEF \(\geq 80\%\) predicted  
• PEF variability \(< 20\%\) |

FEV\(_1\): Forced Expiratory Volume in one second, a measure of the maximal amount of air a person can forcefully exhale over one second accounting for the variables of height, weight, and age. 

PEF: Peak Expiratory Flow, the maximum flow of expelled air during expiration following full inspiration (big breath in and out)
Asthma Summary

- Type of asthma
- Severity
- Exacerbation
- Trigger
- Medications and treatment
- Symptoms
- Controlled or uncontrolled
Summary for coder

- Review medications careful as many are high risk

- Notes signed and dated by all providers

- Select diagnosis code based on what is being treated

- If history is unable to be obtained the note the exact reason must be documented.
  - “on vent” is not sufficient
  - “sedated on vent” is acceptable
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