

Top Inpatient Diagnosis Codes with ICD-10 Documentation Tips

The following are important documentation tips and strategies for ICD-10 compliance:

ICD-9 Code and Name	ICD-10 Code from GEMS	ICD-10 Documentation Tips
648.81 - Abnormal glucose tolerance of mother, delivered, with or without mention of antepartum condition	O24.419 - Gestational diabetes mellitus in pregnancy, unspecified control O24.429 - Gestational diabetes mellitus in childbirth, unspecified control O99.810 - Abnormal glucose complicating pregnancy O99.814 - Abnormal glucose complicating childbirth	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
738.4 - Acquired spondylolisthesis	M43.00 - Spondylolysis, site unspecified	<ul style="list-style-type: none"> •Deforming dorsopathies descriptions include: <ul style="list-style-type: none"> Kyphosis and lordosis Scoliosis and spinal osteochondrosis Spondylolysis and spondylolisthesis Spinal fusion and recurrent dislocation •Identify the region(s) of the spine affected such as: <ul style="list-style-type: none"> Occipito-atlanto-axial Cervical Cervicothoracic Thoracolumbar Lumbar Lumbosacral Sacral and sacrococcygeal Multiple sites
518.84 - Acute and chronic respiratory failure	J96.20 - Acute and chronic respiratory failure, unspecified whether with hypoxia or hypercapnia	<ul style="list-style-type: none"> •Specify the acuity of respiratory failure (e.g., acute, chronic, or acute and chronic). •Differentiate respiratory failure from respiratory distress syndrome, respiratory arrest, and post-procedural respiratory failure. •Detail if hypoxia or hypercapnia accompany respiratory failure. •List any related tobacco use, abuse, dependence, past history, or smoke exposure (e.g., second hand, occupational, etc.).

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584.9 - Acute kidney failure, unspecified	N17.9 - Acute kidney failure, unspecified	<ul style="list-style-type: none"> •Clarify the acuity (e.g., acute or chronic). •Detail the type of necrosis with acute renal failure, (e.g., tubular, cortical, medullary). •Identify the underlying cause or disease (e.g., dehydration, post-traumatic, drug-induced, etc.).
428.33 - Acute on chronic diastolic heart failure	I50.33 - Acute on chronic diastolic (congestive) heart failure	<ul style="list-style-type: none"> •Specify the acuity (e.g., acute, chronic, or acute on chronic). •Identify the type of failure (e.g., systolic, diastolic, combined). •List any relationship of hypertension and/or chronic kidney disease to heart failure. •Identify the underlying cause (e.g., surgery, ectopic pregnancy, etc). •Specify if rheumatic heart failure.
428.23 - Acute on chronic systolic heart failure	I50.23 - Acute on chronic (congestive) heart failure	<ul style="list-style-type: none"> •Specify the acuity (e.g., acute, chronic, or acute on chronic). •Identify the type of failure (e.g., systolic, diastolic, combined). •List any relationship of hypertension and/or chronic kidney disease to heart failure. •Identify the underlying cause (e.g., surgery, ectopic pregnancy, etc). •Specify if rheumatic heart failure.
577.0 - Acute pancreatitis	K85.9 - Acute pancreatitis, unspecified	<ul style="list-style-type: none"> •Identify the acuity of the disease (i.e., acute or chronic). •State the significance of any abnormal lab findings or link them to a related diagnosis (e.g., guaiac-positive stools due to internal hemorrhoids). •Provide the underlying cause or state "unknown cause" (e.g., alcoholic cirrhosis). •Clarify the site of any bleeding that is visualized or suspected. •Detail any associated medication or drug use (e.g., NSAIDs). •List any related alcohol or tobacco use, abuse, dependence, past history, or smoke exposure (e.g., second hand, occupational, etc.).
518.81 - Acute respiratory failure	J96.00 - Acute respiratory failure, unspecified whether with hypoxia or hypercapnia J95.20 - Acute and chronic respiratory failure, unspecified whether with hypoxia or hypercapnia	<ul style="list-style-type: none"> •Specify the acuity of respiratory failure (e.g., acute, chronic, or acute and chronic). •Differentiate respiratory failure from respiratory distress syndrome, respiratory arrest, and post-procedural respiratory failure. •Detail if hypoxia or hypercapnia accompany respiratory failure. •List any related tobacco use, abuse, dependence, past history, or smoke exposure (e.g., second hand, occupational, etc.).

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291.81 - Alcohol withdrawal	F10.239 - Alcohol dependence with withdrawal, unspecified	<ul style="list-style-type: none"> •Specify alcohol abuse as with or without current intoxication •Link any associated alcohol delirium •Identify any alcohol induced mood or psychotic disorders, (e.g. delusion, hallucinations, sexual dysfunction, anxiety, or sleep disorders) •Differentiate between alcohol use, abuse and dependence •Identify any alcohol-induced conditions (e.g. mood disorder, psychotic disorder, amnesic disorder, persisting dementia, anxiety disorder, sexual dysfunction, sleep disorder). •Link the current blood alcohol level if applicable
427.31 - Atrial fibrillation	I48.91 - Unspecified atrial fibrillation	<ul style="list-style-type: none"> •Specify the type of arrhythmia, such as: paroxysmal, persistent, chronic, typical, atypical. •Specify the arrhythmia is complicating abortion, molar pregnancy or obstetric surgery/procedure.
578.1 - Blood in stool	K92.1 - Melena	<ul style="list-style-type: none"> •Abnormal conditions that develop due to a medical device being left in place or because of other medical care are classified as complications (e.g., dumping syndrome). •Clarify complications of ostomies such as bleeding and infection. •Detail the significance of a postoperative ileus as being expected versus problematic. •Clearly document any surgical misadventures (e.g., accidental bladder laceration).
V57.89 - Care involving other specified rehabilitation procedure	Z51.89 - Encounter for other specified aftercare	<ul style="list-style-type: none"> •Treatment for sequelae, or residual conditions, must be identified and supported by documentation or clinical indicators, as appropriate.
682.6 - Cellulitis and abscess of leg, except foot	L03.119 - Cellulitis of unspecified part of limb L03.129 - Acute lymphangitis of unspecified part of limb	<ul style="list-style-type: none"> •Specify the anatomic location (e.g., abdominal wall, groin, toe, etc.). •State the laterality when applicable (i.e., right or left). •Identify any organism or infectious agent causing the problem (e.g., Staph aureus, MRSA, E. coli, etc.). •Ascertain any underlying conditions (e.g., foreign body, Crohn's disease, trauma, etc.). •Detail any related trauma (e.g., dog bite, motorcycle wreck, etc.).

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434.91 - Cerebral artery occlusion, unspecified with cerebral infarction	I63.50 - Cerebral Infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	<ul style="list-style-type: none"> •Identify the affected vessel (e.g., vertebral, anterior and posterior communicating, middle cerebral, carotid, bifurcation, etc.). •Detail the cause of the condition (e.g., hemorrhage, occlusion, stenosis, thrombosis, etc.). •Identify if patient is intraoperative or postop. •Delineate when the condition does and does not result in cerebral infarction. •State the laterality of right or left. •List any residual conditions (e.g., hemiplegia, left, non-dominant status post-CVA. •List any alcohol, drug, or tobacco use, abuse, or dependence. Also list tobacco exposure (e.g., second hand, occupational, etc.).
786.50 - Chest pain, unspecified	R07.9 - Chest pain, unspecified	<ul style="list-style-type: none"> •Detail the underlying cause of any questionable signs or symptoms. •Report the presence of hypoxemia and hypercapnia. •Clarify any abnormalities originating in the perinatal period.
808.2 - Closed fracture of pubis	S32.501A - Unspecified fracture of right pubis, initial encounter for closed fracture S32.502A - Unspecified fracture of left pubis, initial encounter for closed fracture	<ul style="list-style-type: none"> •Identify the specific anatomical location of the fracture (e.g., fourth lumbar vertebra, seventh cervical vertebra, T 5-6, etc.). •Indicate the type of fracture (e.g., traumatic, pathological, stress, wedge compression, Type II, burst, etc.). •List the level of any spinal cord injury. •Clarify a stable versus unstable fracture. •Provide information regarding the activity, location, and circumstances surrounding the injury. •Specify any associated or underlying disease (e.g., osteoporosis). •State if the fracture is displaced or nondisplaced. •Clarify open versus closed fractures. •Detail the healing progress (e.g., routine, delayed, nonunion). •Indicate if the encounter is for initial, subsequent, or sequela treatment.

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805.6 - Closed fracture of sacrum and coccyx without mention of spinal cord injury	S32.2XXA - Fracture of coccyx, initial encounter for closed fracture	<ul style="list-style-type: none"> •Identify the specific anatomical location of the fracture (e.g., fourth lumbar vertebra, seventh cervical vertebra, T 5-6, etc.). •Indicate the type of fracture (e.g., traumatic, pathological, stress, wedge compression, Type II, burst, etc.). •List the level of any spinal cord injury. •Clarify a stable versus unstable fracture. •Provide information regarding the activity, location, and circumstances surrounding the injury. •Specify any associated or underlying disease (e.g., osteoporosis). •State if the fracture is displaced or nondisplaced. •Clarify open versus closed fractures. •Detail the healing progress (e.g., routine, delayed, nonunion). •Indicate if the encounter is for initial, subsequent, or sequela treatment.
428.0 - Congestive heart failure, unspecified	I50.9 - Heart failure, unspecified	<ul style="list-style-type: none"> •Specify the acuity (e.g., acute, chronic, or acute on chronic). •Identify the type of failure (e.g., systolic, diastolic, combined). •List any relationship of hypertension and/or chronic kidney disease to heart failure. •Identify the underlying cause (e.g., surgery, ectopic pregnancy, etc). •Specify if rheumatic heart failure.
414.01 - Coronary atherosclerosis of native coronary artery	I25.10 - Atherosclerotic heart disease of native coronary artery without angina pectoris	<ul style="list-style-type: none"> •Identify any current tobacco use, tobacco dependence, history of tobacco use or exposure to environmental or occupational tobacco smoke. •Identify the vessel(s) containing atherosclerosis (e.g., native arteries, coronary artery bypass graft(s), coronary arteries of transplanted heart, etc.). •Detail when any form of angina is or is not present (e.g., angina pectoris, unstable angina, spasm, etc.). •Specify when the cause is a lipid rich plaque. •Coronary artery bypass grafts must be specified by type, such as : autologous vein, autologous artery, nonautologous biological, native coronary artery of transplanted heart.

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276.51 - Dehydration	E86.0 - Dehydration	<ul style="list-style-type: none"> •Disease or disorder site. •Acuity and/or encounter status of treatment. •Etiology, causative agent, or disease type and injury/poisoning cause, intent, activity at the time of the event and place event occurred. •Underlying and associated conditions. •Manifestations. •Complications or adverse events. •Supporting info such as lab values or socioeconomic key impacts to ICD-10 documentation.
250.82 - Diabetes with other specified manifestations, type II or unspecified type, uncontrolled	E11.65 - Type 2 diabetes mellitus with hyperglycemia E11.69 - Type 2 diabetes mellitus with other specified complication	<ul style="list-style-type: none"> •Identify the type of diabetes. •State if hypoglycemia is or is not causing a coma. •Clarify any cause and effect relationship between diabetes and other conditions (e.g., diabetic peripheral vascular disease). •Specify long-term use of insulin. •Differentiate when diabetes is accompanied by hyperglycemia or hypoglycemia.
562.11 - Diverticulitis of colon (without mention of hemorrhage)	K57.32 - Diverticulitis of large intestine without perforation or abscess without bleeding	<ul style="list-style-type: none"> •Differentiate between diverticulosis and diverticulitis. •Differentiate between acquired versus congenital or Meckel's diverticulum. •Identify the site (e.g., small intestine, large intestine, both). •State any accompanying complications (e.g., bleeding, abscess, perforation, etc.)
292.81 - Drug-induced delirium	F19.921 - Other psychoactive substance use, unspecified with intoxication with delirium	<ul style="list-style-type: none"> •Specify alcohol or drug use, abuse, dependence, or past history •State the specific drug or substance being used, abused, or causing dependence. •Detail when alcohol and drug dependence is in remission •Differentiate between a history of nicotine dependence and current use •List any intoxication. •Provide blood alcohol levels. •Indicate the presence of any conditions associated with withdrawal symptoms (e.g., delirium, tremors, mood or psychotic disorders, sexual dysfunction, sleep disorder, etc.). •Indicate any perceptual disturbances, delusions or hallucinations.

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659.61 - Elderly multigravida, delivered with or without mention of antepartum condition	O09.522 - Supervision of elderly multigravida, second trimester O09.523 - Supervision of elderly multigravida, third trimester	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
664.01 - First-degree perineal laceration, delivered, with or without mention of antepartum condition	O70.0 - First degree perineal laceration during delivery	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
276.1 - Hyposmolality and/or hyponatremia	E87.1 - Hypo-osmolality and hyponatremia	<ul style="list-style-type: none"> •Disease or disorder site. •Acuity and/or encounter status of treatment. •Etiology, causative agent, or disease type and injury/poisoning cause, intent, activity at the time of the event and place event occurred. •Underlying and associated conditions. •Manifestations. •Complications or adverse events. •Supporting info such as lab values or socioeconomic key impacts to ICD-10 documentation.
278.01 - Morbid obesity	E66.01 - Morbid (severe) obesity due to excess calories	<ul style="list-style-type: none"> •Include descriptions such as overweight, obesity or morbid obesity due to excess calories, drug-induced obesity, and morbid obesity with alveolar hypoventilation. •List the specific drug(s) associated with drug-induced obesity. •Detail body mass index (BMI), especially if greater than 40. •Avoid queries by only listing "morbid obesity" for BMI's greater than 40.

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491.21 - Obstructive chronic bronchitis with (acute) exacerbation	J44.1 - Chronic obstructive pulmonary disease with (acute) exacerbation	<ul style="list-style-type: none"> •COPD classification includes chronic obstruction bronchitis, chronic bronchitis with airway obstruction, chronic bronchitis with emphysema, and chronic obstructive tracheobronchitis. •Specify any acute exacerbations. •Detail any acute lower respiratory infections and include the infectious agent. •Delineate COPD from asthmatic conditions (e.g., mild intermittent asthma, severe persistent cough variant asthma, etc.). •List any related tobacco use, abuse, dependence, past history, or exposure (e.g., second hand, occupational, etc.).
433.10 - Occlusion and stenosis of carotid artery without mention of cerebral infarction	I65.29 - Occlusion and stenosis of unspecified carotid artery	<ul style="list-style-type: none"> •Identify the affected vessel (e.g., vertebral, anterior and posterior communicating, middle cerebral, carotid, bifurcation, etc.). •Detail the cause of the condition (e.g., hemorrhage, occlusion, stenosis, thrombosis, etc.). •Identify if patient is intraoperative or postop. •Delineate when the condition does and does not result in cerebral infarction. •State the laterality of right or left. •List any residual conditions (e.g., hemiplegia, left, non-dominant status post-CVA. •List any alcohol, drug, or tobacco use, abuse, or dependence. Also list tobacco exposure (e.g., second hand, occupational, etc.).
715.36 - Osteoarthritis, localized, not specified whether primary or secondary, lower leg	M17.9 - Osteoarthritis of knee, unspecified	<ul style="list-style-type: none"> •Identify the site(s) affected and the laterality •Describe any underlying disease(s) or condition(s).
715.35 - Osteoarthritis, localized, not specified whether primary or secondary, pelvic region and thigh	M16.9 - Osteoarthritis of hip, unspecified	<ul style="list-style-type: none"> •Identify the site(s) affected and the •Describe any underlying disease(s) or condition(s).
715.96 - Osteoarthritis, unspecified whether generalized or localized, lower leg	M17.9 - Osteoarthritis of knee, unspecified	<ul style="list-style-type: none"> •Identify the site(s) affected and the laterality •Describe any underlying disease(s) or condition(s).

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715.95 - Osteoarthritis, unspecified whether generalized or localized, pelvic region and thigh	M16.9 - Osteoarthritis of hip, unspecified	<ul style="list-style-type: none"> •Identify the site(s) affected and the laterality •Describe any underlying disease(s) or condition(s).
569.69 - Other colostomy and enterostomy complication	K94.09 - Other complications of colostomy K94.19 - Other complications of enterostomy	<ul style="list-style-type: none"> •Identify the type of artificial opening that has a complication (e.g., colostomy, enterostomy, esophagostomy). •Specify the type of complication, (e.g., hemorrhage, infection, malfunction). •Link the type of infection and causative organism if known.
648.91 - Other current conditions classifiable elsewhere of mother, delivered, with or without mention of antepartum condition	O25.10 - Malnutrition in pregnancy, unspecified trimester	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
996.47 - Other mechanical complication of prosthetic joint implant	T84.099A - Other mechanical complication of unspecified joint prosthesis, initial encounter	<ul style="list-style-type: none"> •Indicate laterality of prosthesis. •Indicate complication type (e.g., loosening, pain, infection, prosthetic failure, misalignment, etc.).
296.99 - Other specified episodic mood disorder	F34.8 Other persistent mood (affective) disorders	<ul style="list-style-type: none"> •Specify bipolar disorder episodes as being manic, depressed, or mixed. • Indicate if major depression is a single or recurrent episode. • Provide information regarding the presence or absence of psychotic symptoms or features. • Clarify the remission status of the disorder (e.g., full, partial). • Detail the severity of the disorder (e.g., mild, moderate, severe).

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656.81 - Other specified fetal and placental problems, affecting management of mother, delivered, with or without mention of antepartum condition	O36.8910 - Maternal care for other specified fetal problems, first trimester, not applicable or unspecified O36.8920 - Maternal care for other specified fetal problems, first trimester, not applicable or unspecified O68 - Labor and delivery complicated by abnormality of fetal acid-base balance O77.0 - Labor and delivery complicated by meconium in amniotic fluid	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
481 - Pneumococcal pneumonia [<i>Streptococcus pneumoniae</i> pneumonia]	J13 - Pneumonia due to <i>Streptococcus pneumoniae</i> J18.1 - Lobar pneumonia, unspecified organism	<ul style="list-style-type: none"> •Specify the type (bacterial, viral, fungal, aspiration, hypostatic, drug-induced, etc.). •Indicate any substances aspirated (e.g., food, amniotic fluid, meconium, blood, etc.). •Confirm the causal organism. •Link any underlying disease causing the pneumonia.
486 - Pneumonia, organism unspecified	J18.9 - Pneumonia, unspecified organism	<ul style="list-style-type: none"> •Specify the type (bacterial, viral, fungal, aspiration, hypostatic, drug-induced, etc.). •Indicate any substances aspirated (e.g., food, amniotic fluid, meconium, blood, etc.). •Confirm the causal organism. •Link any underlying disease causing the pneumonia.
645.11 - Post term pregnancy, delivered, with or without mention of antepartum condition	O48.0 - Post-term pregnancy	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).

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654.21 - Previous cesarean delivery, delivered, with or without mention of antepartum condition	O34.21 - Maternal care for scar from previous cesarean delivery	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
664.11 - Second-degree perineal laceration, delivered, with or without mention of antepartum condition	O70.1 - Second degree perineal laceration during delivery	<ul style="list-style-type: none"> •Specify any pre-pregnancy condition affecting current care (e.g., chronic kidney disease, alcohol use, Strep B positive, etc.). •Clarify a pre-existing condition from pregnancy-induced conditions (e.g., gestational diabetes, pregnancy-induced hypertension, etc.). •List diabetes as being diet or insulin-controlled. •Report pre-eclampsia as mild, moderate, severe, or HELLP syndrome and detail the timing of eclampsia (e.g., during pregnancy, labor, puerperium). •Identify know or suspected conditions of the fetus while in utero (e.g., decreased fetal movements, excessive fetal growth, central nervous system malfunction, chromosomal abnormality, hereditary disease, etc.).
V30.01 - Single liveborn, born in hospital, delivered by cesarean section	Z38.01 - Single liveborn infant, delivered by cesarean	<ul style="list-style-type: none"> • Specify any abnormalities in fetal size and health that can be attributed to variations in gestation age (e.g., small for gestational age, 36 wks, 2312 gm). • Differentiate community-acquired versus conditions related to the birth process (e.g., congenital pneumonia due to strep B). • Detail maternal conditions, whether pregnancy-related or otherwise (e.g., traumatic injury, surgical procedure), that have an impact on the health of the newborn (e.g., low birth weight attributed to heavy maternal smoking during pregnancy). • Clarify any neonatal condition that has implications for future healthcare needs. •Clarify any prematurity. •List the gestational age and weight of the infant (e.g., 38.4 weeks, 7lbs., 3 oz.). •Specify any abnormalities in fetal size and health tht can be attributed to variations in gestation age (e.g., small for gestational age, 36 wks, 2312 gms). •Detail the number of fetuses born.

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V30.00 - Single liveborn, born in hospital, delivered without mention of cesarean section	Z38.00 - Single liveborn infant, delivered vaginally	<ul style="list-style-type: none"> • Specify any abnormalities in fetal size and health that can be attributed to variations in gestation age (e.g., small for gestational age, 36 wks, 2312 gm). • Differentiate community-acquired versus conditions related to the birth process (e.g., congenital pneumonia due to strep B). • Detail maternal conditions, whether pregnancy-related or otherwise (e.g., traumatic injury, surgical procedure), that have an impact on the health of the newborn (e.g., low birth weight attributed to heavy maternal smoking during pregnancy). • Clarify any neonatal condition that has implications for future healthcare needs. • Clarify any prematurity. • List the gestational age and weight of the infant (e.g., 38.4 weeks, 7lbs., 3 oz.). • Specify any abnormalities in fetal size and health that can be attributed to variations in gestation age (e.g., small for gestational age, 36 wks, 2312 gms). • Detail the number of fetuses born.
724.02 - Spinal stenosis, lumbar region, without neurogenic claudication	M48.06 - Spinal stenosis, lumbar region	<ul style="list-style-type: none"> • Identify inflammatory, infective and other spondylopathies such as: ankylosing spondylitis, sacroiliitis and discitis, osteomyelitis of the vertebra, spondylosis, spinal stenosis, fatigue fracture and collapsed vertebra. • List any underlying disease. • Specify the vertebrae affected.
410.71 - Subendocardial infarction, initial episode of care	I21.4 - Acute subendocardial myocardial infarction	<ul style="list-style-type: none"> • Identify the site of the MI (e.g., anterolateral, inferoposterior, transmural, posteroseptal, etc). • Detail the timing of the MI(s), (e.g., lateral MI 12/1/11 and septal MI on 12/14/2011). Subsequent MI(s) are defined as occurring within 28 days of a previous MI. • Provide information regarding tPA administration in a different facility within 24 hours of admission to the current facility. • Identify specific conditions that develop within 28 days following an MI, (e.g., hemopericardium, post infarction angina, thrombosis of atrium or ventricle, etc.) • Delineate acute coronary syndrome and acute ischemic heart disease from a true MI. • Specify any exposure to environmental/occupational smoke, history, current use or dependence on tobacco.

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593.9 - Unspecified disorder of kidney and ureter	N28.9 - Disorder of kidney and ureter, unspecified	<ul style="list-style-type: none"> •List the acuity (i.e., acute, chronic, or recurrent). •Specify the location of calculi (e.g., kidney, ureter, bladder, etc.). •State the laterality when applicable (i.e., right, left, or bilateral). •Identify the underlying cause or state "unknown etiology" (e.g., gout, sepsis, sickle-cell disease, etc.). •Detail any organism or infectious agent causing the problem (e.g., Staph aureus, MRSA, E. coli, etc.). •Provide information regarding any associated drug or toxic agent (e.g., acute renal failure due to post-op IV Toradol). •Clarify the significance of associated conditions and signs and symptoms (e.g., dysuria, urinary incontinence, overactive bladder, etc.). •Include the stage for chronic kidney disease. •Indicate the presence or absence of hematuria. •See also: Female pelvic organ, diseases of, Male urinary system, disorders
560.9 - Unspecified intestinal obstruction	K56.60 - Unspecified intestinal obstruction	<ul style="list-style-type: none"> •Identify the acuity of the disease (i.e., acute or chronic). •State the significance of any abnormal lab findings or link them to a related diagnosis (e.g., guaiac-positive stools due to internal hemorrhoids). •Provide the underlying cause or state "unknown cause" (e.g., alcoholic cirrhosis). •Clarify the site of any bleeding that is visualized or suspected. •Detail any associated medication or drug use (e.g., NSAIDs). •List any related alcohol or tobacco use, abuse, dependence, past history, or smoke exposure (e.g., second hand, occupational, etc.).
730.27 - Unspecified osteomyelitis, ankle and foot	M86.9 - Osteomyelitis, unspecified	<ul style="list-style-type: none"> •Identify the acuity (i.e., acute, subacute, or chronic). •Clarify the type (e.g., hematogenous, multifocal). •Specify the site (e.g., humerus, ankle and foot, etc.). •List any underlying or associated diseases. •Detail the infectious agent. •Indicate if any associated injury is current or old. •Provide information regarding any draining sinus. •Report any major osseous defect.
511.9 - Unspecified pleural effusion	J91.8 - Pleural effusion in other conditions classified elsewhere.	<ul style="list-style-type: none"> •Relevant documentation should be made for the "other condition classified elsewhere".

Top Inpatient Diagnosis Codes with ICD-10 Documentation Tips

ICD-9 Code and Name	ICD-10 Code from GEMS	ICD-10 Documentation Tips
038.9 - Unspecified septicemia	A41.9 - Sepsis, unspecified organism	<ul style="list-style-type: none"> •Detail the underlying systemic type or causal organism. •Do not use the term urosepsis for sepsis. In ICD-10 the term urosepsis is a nonspecific term. •Report circulatory failure and sepsis that are related as being septic shock. •List the sepsis onset (e.g., at admission or during admission) •Severe sepsis must be listed as such, and show evidence of acute organ dysfunction. •State the relationship between the acute organ dysfunction and sepsis.
599.0 - Urinary tract infection, site not specified	N39.0 - Urinary tract infection, site not specified	<ul style="list-style-type: none"> •Detail the site and infectious agent. •Identify pyelonephritis as being acute, chronic, obstructive and reflux uropathy, or drug and heavy metal induced. •Indicate when hydonephrosis is accompanied by a ureteral stricture, calculus obstructio, reflux nephropathy, or hydroureter. •List any urethritis. •Provide evidence of any hematuria.

References:

Precyse University Virtual Code Book