



ICD-10 Diagnosis Documentation Tips – Interventional Radiology

Reason for Code Expansion in ICD-10:

❖ Pathophysiologic specificity

- Example: malignant neoplasms of liver/intrahepatic bile ducts
 - Liver cell carcinoma, hepatoblastoma, angiosarcoma of liver (Kupffer cell sarcoma), other sarcomas of liver, ...

❖ Anatomic specificity: many conditions have multiple new codes due to increased anatomic specificity

- Non-traumatic subarachnoid hemorrhage – ICD-9 (1 code)
- Non-traumatic subarachnoid hemorrhage – ICD-10 (20 codes)
 - Carotid siphon, middle cerebral, ant communicating, post communicating, basilar, vertebral, etc. (many with 3 sub-options based on laterality – R, L, or unspecified)

❖ Laterality: applies to many diagnoses

A primary malignant neoplasm that overlaps two or more contiguous sites should be classified to the subcategory/code .8 (“overlapping lesion”), unless the combination is specifically indexed elsewhere

- Example: Breast
 - Nipple & areola, central portion, upper-inner, lower-inner, upper-outer, lower-outer, axillary tail, **overlapping sites**

Intracranial hemorrhage, infarction, and stenosis: typical ICD-10 specificity

❖ Type:

- Hemorrhage: Non-traumatic subarachnoid or intracerebral bleed
- Cerebral Infarction: Precerebral or cerebral
- Occlusion and stenosis, not resulting in infarction: pre-cerebral or cerebral

❖ Specific vessel: carotid siphon / bifurcation, (mid, ant, post) cerebral or cerebellar artery, ant/post communicating, basilar, vertebral, etc.

❖ Laterality: Right, left, bilateral (if appropriate)



ICD-10 [INPATIENT] Procedural Coding Tips – Interventional Radiology

Section – almost always medical/surgical, don't need to state

Body system –

Root operation – describes the intent of the procedure

- ❖ **Drainage** – paracentesis, aspiration, etc.
- ❖ **Excision** – removal of a portion of a body part (biopsies)
- ❖ **Insertion / removal** – central line placement

Body part – the specific body part (or subsection thereof) addressed in an procedure (chest tube place in R pleural space),(biopsy **left** lobe liver)

Approach – open, percutaneous, via natural opening (foley, etc.)

Device – describe the type or simply state the exact device(s) left in the patient at the conclusion of the procedure. It is usually easier to describe the exact device and let the coder assign to appropriate category

Qualifier – if aspiration is diagnostic, be sure to state so

Percutaneous coil embolization vascular supply intracranial malignancy

- ❖ Example of specificity of root operation and device
 - Root operation: occlusion (very important to dictate with clarity whether goal is complete occlusion or “restriction”)
 - Device: intraluminal device (easier to just describe coil embolization) – the coder can figure out type if documentation is more specific

Angioplasty with renal artery stent

- ❖ Example of specificity of root operation and device
 - Root operation: dilation
 - Device: drug-eluting stent