



## **ICD-10 Diagnosis Documentation Tips – Neurosurgery of the Head**

### **ICD-10 requires enhance clinical specificity:**

- ❖ ICD-9 code – “Other specified paralytic syndromes”
- ❖ ICD-10
  - Brown-Sequard syndrome
  - Anterior cord syndrome
  - Posterior cord syndrome
  - Todd’s paralysis (post-epileptic)
  - Other specified paralytic syndromes

**Enhanced 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)

**Enhanced Specificity for Laterality:** for all conditions where laterality can be specified, it must be for complete coding

- ❖ Examples: peripheral nerves, cerebral ventricles, etc.

**Traumatic Cerebral Edema:** an example of combination codes which include additional specificity related to manifestations

- ❖ Additional information: duration of loss of consciousness and/or whether patient died prior to regaining consciousness
- ❖ Additional information: initial encounter, subsequent encounter, or late sequela

**Glasgow Coma Scale:** now included in ICD-10 coding



## **ICD-10 [INPATIENT] Procedural Coding Tips – Neurosurgery of the Head**

### **Characters:**

- ❖ Section – almost always medical/surgical, don't need to state
- ❖ Body system – should be self evident from your description
- ❖ Root operation – describes the intent of the procedure
  - Resection – removal of all of a body part
  - Excision – removal of a portion of a body part
- ❖ Body part – describe with anatomic specificity, laterality if applies
  - Example: even if an entire meningioma is removed, only part of the relevant body part (the cerebral meninges) is removed
  - Take-away point: document exactly what was removed and the coder can figure it out.
- ❖ Approach – open, percutaneous, percutaneous endoscopic
- ❖ Device
  - Describe as specifically as possible any device left in the patient
- ❖ Qualifier – If diagnostic procedure be sure to state so

### **Endovascular Procedures:**

- ❖ Be sure to describe the “intent” of the procedure, so the root operation can be accurately captured.
  - Restriction is decreasing the flow through a tubular body part
  - Occlusion is totally eliminating flow through a tubular body part

### **Component Procedures:**

- ❖ Message: document each component of the procedure as a separate component procedure and the coder can figure out which ones should / should not be coded