



## **ICD-10 Diagnosis Documentation Tips – Obstetrics**

### **Classification System:**

- ❖ Delivered, antepartum and post-partum are no longer considered axes of classification
- ❖ New axis: trimester
  - 1st trimester: <14 weeks, 0 days from first day of LMP
  - 2nd trimester: 14 weeks, 0 days to less than 28 weeks, 0 days
  - 3rd trimester: 28 weeks, 0 days until delivery
- ❖ Enhanced pathophysiologic specificity: example – coding twin birth
  - Monochorionic, monoamniotic
  - Conjoined twin pregnancy
  - Monochorionic, diamniotic
  - Dichorionic, diamniotic
  - Unspecified number of placenta and unspecified number of amniotic sacs

### **Hypertension Complicating Pregnancy:**

- ❖ Some new category types:
  - Pre-existing hypertension
    - Alone, or with hypertensive heart disease, hypertensive CKD, or hypertensive heart disease and CKD
  - Gestational edema and proteinuria w/o hypertension
  - Gestational hypertension w/o significant proteinuria

### **Diabetes:** significant code expansion with enhanced detail for:

- ❖ Type of diabetes: Type 1, Type 2, Gestational, Other
- ❖ Timing
  - During pregnancy, childbirth, puerperium
  - For pregnancy 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> trimester
- ❖ Control
  - Diet controlled, insulin controlled, unspecified
- ❖ Note: no longer any coding for “controlled” v. “uncontrolled”



### **Other Types of Enhanced Specificity:**

- ❖ New secondary axis: specificity regarding identification of fetus
  - Single gestation, fetus 1, fetus 2, fetus 3... fetus 5, other fetus
- ❖ More pathophysiologic specificity
  - Examples: suspected damage to fetus from alcohol, suspected damage to fetus from other medical problems

### **ICD-10 [INPATIENT] Procedural Coding Tips – Obstetrics**

#### **Characters:**

- ❖ Section – almost always medical/surgical, don't need to state
- ❖ Body system – should be self-evident from the description
- ❖ Root operation – describes the intent of the procedure
  - Delivery
  - Abortion
  - Drainage – example, fetal spinal tap
  - Restriction – example, cervical cerclage
- ❖ Body part – describe with anatomic specificity, laterality if applies
- ❖ Approach – open, percutaneous, percutaneous endoscopic, via natural orifice, via natural orifice endoscopic, via natural orifice endoscopic with percutaneous endoscopic assistance
- ❖ Device
  - Describe as specifically as possible any device left in the patient
- ❖ Qualifier – If diagnostic procedure be sure to state so

#### **Suggestion:** be sure to document each component procedure

- ❖ Example: a typical vaginal delivery could involve multiple procedures, if documented
  - Normal vaginal delivery
  - Midline episiotomy
  - Perineal repair