



## **ICD-10 Diagnosis Documentation Tips – Orthopedic Foot and Ankle Surgery**

### **Code Expansion in ICD-10:**

Example: Septic Arthritis

- ❖ Primary axis: etiology (organism)
  - Staphylococcal, pneumococcal, streptococcal, other, unspecified
- ❖ Secondary axis: anatomy
  - Shoulder, elbow, wrist, hand, hip, knee, **ankle and foot**, vertebrae, polyarthritis, unspecified
- ❖ Tertiary axis: laterality NEW TO ICD-10
  - Right / left / unspecified

### **Arthropathies:**

- ❖ Describe type / manifestation / location / laterality / specifics
- ❖ Example: chronic gout, lead induced, right foot, with tophus

### **Fractures:**

- ❖ Anatomic specificity / displacement / open or closed
- ❖ Episode of care:
  - Initial [open/closed]
  - Subsequent [routine healing, delayed, malunion, nonunion]
  - Sequela

### **Acute Injuries:** If known, please document the following:

- ❖ Nature of injury [example: MVA car vs pedestrian]
- ❖ Place [example: interstate highway]
- ❖ Activity [example: talking on cellphone]
- ❖ Status [example: while engaged in work activity]



## **ICD-10 [INPATIENT] Procedural Coding Tips – Orthopedic Foot and Ankle Surgery**

### **Characters:**

- ❖ Section – almost always medical/surgical
- ❖ Body system – should be self evident from your description
- ❖ Root operation – describes the intent of your procedure
  - Replacement – total or partial joint
  - Detachment – amputation
  - Resection – removal of all of a body part
  - Excision – removal of a portion of a body part
  - Fusion – render joint immobile
  - Release – same context as carpal tunnel
- ❖ Body part – describe with anatomic specificity
- ❖ Approach – open, percutaneous, perc endo, external [closed reduction]
- ❖ Device - describe as specifically as possible any device left in the patient
- ❖ Qualifier - Used typically to add anatomic specificity
  - Example: (partial 3<sup>rd</sup> ray resection)

### **Watch out for eponyms:** describe multiple procedures anatomically

- ❖ Modified McBride Bunionectomy (not codeable)
  - Release of adductor hallucis tendon (codeable)
  - Release of the transverse metatarsal ligament (codeable)
  - Release of lateral capsule (codeable)
  - Excision of medial eminence, and (codeable)
  - Plication (reposition) of the capsule medially (codeable)
- ❖ Recommendation
  - In the heading of your operative note, list all component procedures and let the coder determine which ones should or should not be coded.