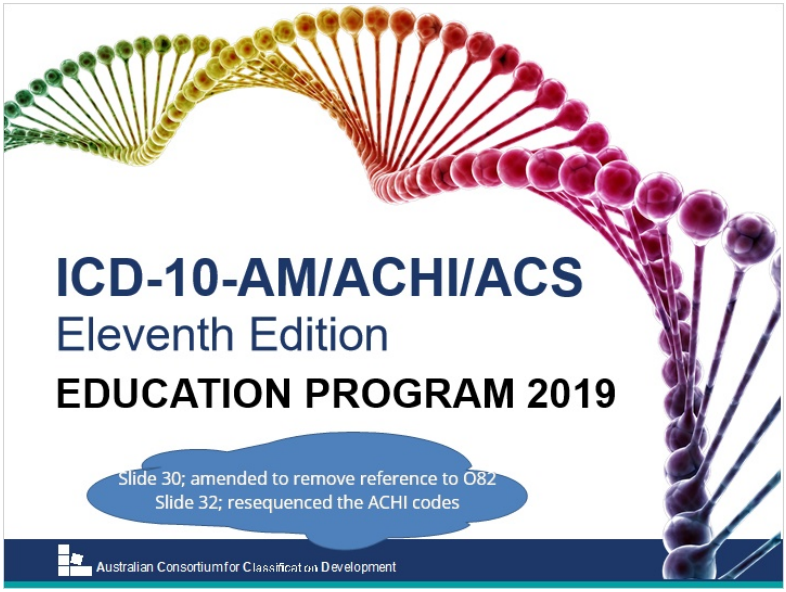
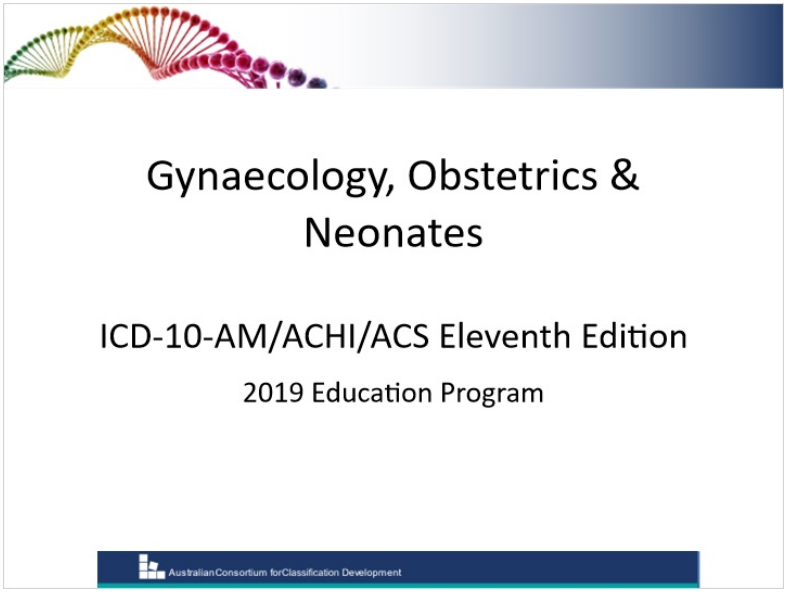
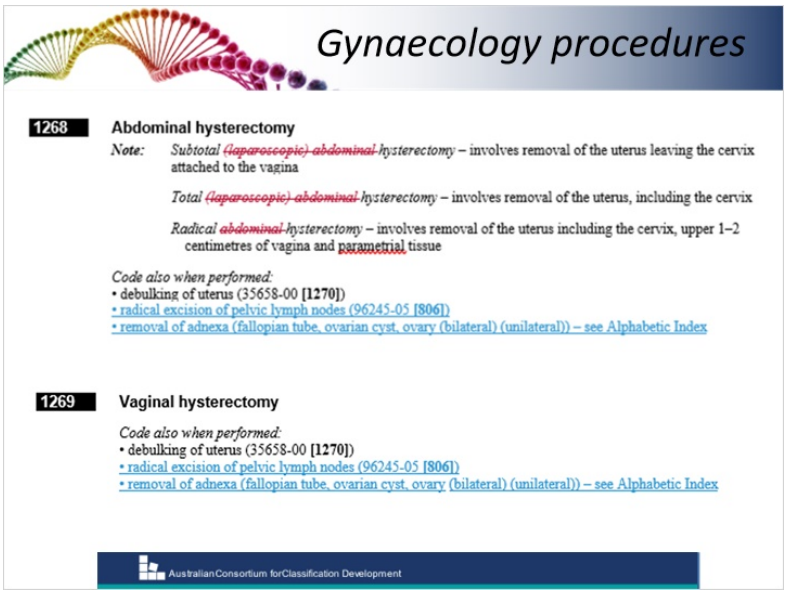

ICD-10-AM/ACHI/ACS
Eleventh Edition
EDUCATION PROGRAM 2019
Slide 30; amended to remove reference to O82
Slide 32; resequenced the ACHI codes
Australian Consortium for Classification Development


Gynaecology, Obstetrics & Neonates
ICD-10-AM/ACHI/ACS Eleventh Edition
2019 Education Program
Australian Consortium for Classification Development


Gynaecology procedures
1268
Abdominal hysterectomy
Note: Subtotal ~~(laparoscopic) abdominal~~ hysterectomy – involves removal of the uterus leaving the cervix attached to the vagina
Total ~~(laparoscopic) abdominal~~ hysterectomy – involves removal of the uterus, including the cervix
Radical ~~abdominal~~ hysterectomy – involves removal of the uterus including the cervix, upper 1–2 centimetres of vagina and parametrial tissue
Code also when performed:
• debulking of uterus (35658-00 [1270])
• radical excision of pelvic lymph nodes (96245-05 [806])
• removal of adnexa (fallopian tube, ovarian cyst, ovary (bilateral) (unilateral)) – see Alphabetic Index
1269
Vaginal hysterectomy
Code also when performed:
• debulking of uterus (35658-00 [1270])
• radical excision of pelvic lymph nodes (96245-05 [806])
• removal of adnexa (fallopian tube, ovarian cyst, ovary (bilateral) (unilateral)) – see Alphabetic Index
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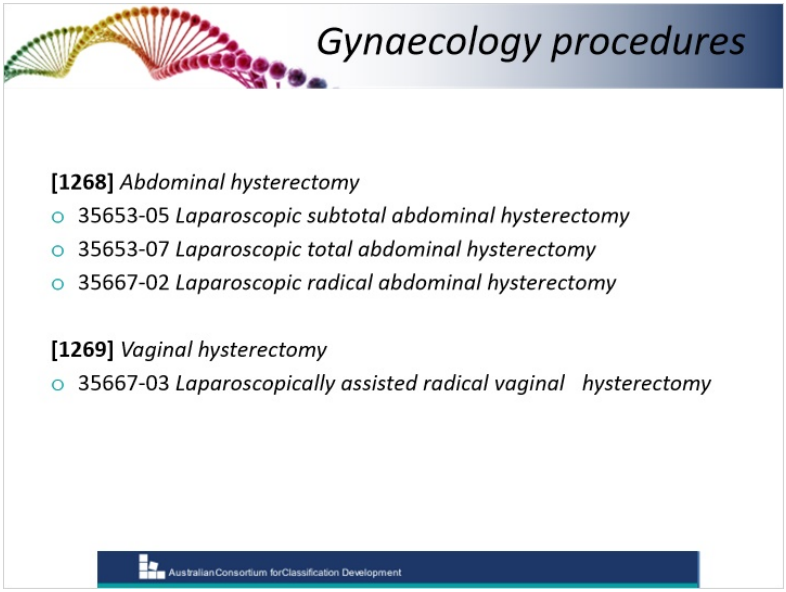
Gynaecology procedures
[1268] Abdominal hysterectomy
35653-05 Laparoscopic subtotal abdominal hysterectomy
35653-07 Laparoscopic total abdominal hysterectomy
35667-02 Laparoscopic radical abdominal hysterectomy
[1269] Vaginal hysterectomy
35667-03 Laparoscopically assisted radical vaginal hysterectomy
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Gynaecology procedures

Example 1:

Diagnosis:	Cancer of the uterus (serous cystadenocarcinoma)
Operation Report:	Pelvic adhesiolysis, en bloc hysterectomy, bilateral salpingo-oophorectomy, GA
Pathology:	Serous cystadenocarcinoma

Gynaecology procedures

Assign:

C55	*Malignant neoplasm of uterus, part unspecified*
M8441/3	*Serous cystadenocarcinoma NOS*
N73.6	*Female pelvic peritoneal adhesions*
35653-01 **[1268]**	*Total abdominal hysterectomy*
35717-04 **[1252]**	*Salpingo-oophorectomy, bilateral*
30378-00 **[986]**	*Division of abdominal adhesions*
92514-99 **[1910]**	*General anaesthesia, ASA 99*

Gynaecology procedures

New code at block **[1294]** Repair procedures on vulva or perineum:

- 35533-01 **[1294]** *Repair of perineum*

New codes at block **[1299]** Other procedures on female genital organs:

- 96251-00 **[1299]** *Implantation of brachytherapy applicator, female genital organ*
- 96251-01 **[1299]** *Removal of brachytherapy applicator, female genital organ*
- 35759-01 **[1299]** *Control of post abortion haemorrhage, not elsewhere classified*

Mental health disorders in pregnancy

O99.3 *Mental disorders and diseases of the nervous system in pregnancy, childbirth and the puerperium* was unbundled to differentiate mental health disorders and disorders of the nervous system, by the introduction of two codes:

- O99.31 *Mental disorders in pregnancy, childbirth and the puerperium*
- O99.32 *Diseases of the nervous system in pregnancy, childbirth and the puerperium*

Abortion

Integration of the guidelines in ACS 1511 *Termination of pregnancy (abortion).*

Assign:

- A code from category O04 *Medical abortion* as principal diagnosis, or first code in the sequence
- A code for duration of pregnancy from category O09 *Duration of pregnancy*
- A code to indicate the reason for the medical abortion, if known. Where the reason is not documented in the medical record, clinical coders should seek clinical clarification, if possible.

Abortion

Assign:

- A code from O80 – O84 *Delivery* only if the medical abortion is performed after fetal viability
- O60.3 *Preterm delivery without spontaneous labour* only if the medical abortion is performed after fetal viability
- A code for outcome of delivery if the medical abortion is performed after fetal viability (regardless of outcome), or before fetal viability if the outcome is a liveborn infant

Abortion

Removal of excludes note *'complicating abortion or ectopic or molar pregnancy'* across multiple chapters in the Tabular List for example:-

I50 **Heart failure**

Use additional code (Z99.4) if mention of artificial heart dependence.

Excludes: ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
due to hypertension:
• NOS (I11.0)
• with renal disease (I13.-)
neonatal cardiac failure (P29.0)

Instructional notes such as Use additional code and Code also notes were added to codes O03-O06 (at the fourth character subdivision) to clarify that codes from other chapters may be assigned to add specificity

Abortion

New code Z32.2 *Initiation of medical abortion* assigned when medical abortion is performed as a two staged intervention.

Assign:

- Stage 1: Z32.2 *Initiation of medical abortion* (if performed as an inpatient)
- Stage 2: O04.- *Medical abortion* (with 4th character)

Z32.2 Initiation of medical abortion
▽ 1511
Admission for supervision of the initial episode of care for a staged medical abortion
Use additional code from category O09.- to identify duration of pregnancy.
Excludes: that with:
• completion of abortion (procedure) (O04.5-O04.9)
• expulsion of products of conception (O04.5-O04.9)

Abortion

90462-01 **[1330]** *Termination of pregnancy [abortion procedure], not elsewhere classified* was created to classify termination of pregnancy/abortion techniques not classified to:

- 90461-00 **[1330]** *Intra-amniotic injection*
- induction of labour in block [1334] or,
- using a surgical technique classified to **[1265]** *Curettage and evacuation of uterus.*

90462-01 Termination of pregnancy [abortion procedure], not elsewhere classified
∇ 1511
Administration of pharmacological agent to induce abortion

Includes: administration (oral) (suppository) of:
• misoprostol
• prostaglandin

Excludes: intra-amniotic injection (90461-00 [1330])
that with induction of labour (90465 [1334])

Abortion

Amendments at category O08 *Complications following abortion and ectopic and molar pregnancy* include amendment of the *Excludes* note and a *Note* was added.

O08 Complications following abortion and ectopic and molar pregnancy
∇ 1544

Note: Codes from category O08 are assigned for complication(s) of:
• abortion, where the abortion was treated, performed or occurred prior to the episode of care
• ectopic and molar pregnancy

Excludes: complication(s) during episode of care:
• for staged abortion (O04.5–O04.9)
• in which an abortion is treated, performed or occurred (current episode) (O03–O06)
retained products of conception (O03–O06)

Abortion

Example 2:

A 20 year old female was admitted at 13 weeks gestation for oral administration of misoprostol for termination of the pregnancy. The patient was discharged later in the day following completion of the abortion, without adverse effect.

Assign:

O04.9	*Medical abortion, complete or unspecified, without complication*
O09.1	*Duration of pregnancy 5-13 completed weeks*
90462-01 **[1330]**	*Termination of pregnancy [abortion procedure] NEC*

Abortion

ACS 1544 *Complications following pregnancy with abortive outcome* has been revised to clarify:

- ✓ Complication/s with abortion
- ✓ Complication/s following abortion
- ✓ Complications from ectopic or molar pregnancy
- ✓ Admission for retained products of conception following abortion

Abortion

Glossary descriptions have been added to O31.1 *Continuing pregnancy after abortion of one fetus or more* and O31.2 *Continuing pregnancy after intrauterine death of one fetus or more* to clarify when these codes are assigned.

O31.1 Continuing pregnancy after abortion of one fetus or more
Continuing pregnancy after:
- fetal death in utero before fetal viability (less than 20 completed weeks (140 days) gestation and/or fetal weight less than 400g), of one fetus or more
- medical abortion of one fetus or more
- missed abortion of one fetus or more
- spontaneous abortion of one fetus or more

O31.2 Continuing pregnancy after intrauterine death of one fetus or more
Continuing pregnancy after fetal death in utero after fetal viability (greater than or equal to 20 completed weeks (140 days) gestation and/or fetal weight greater than or equal to 400g), of one fetus or more

Pregnancy

The title of ACS 1437 *Infertility and in vitro fertilization (IVF)* was revised to include the concept of IVF.

When admission for investigation of fertility occurs assign:

- A code from category N97 *Female infertility* (for female)
- N46 *Male infertility* (for male)

Labour

Changes to ACS 1505 *Delivery and assisted delivery codes*:

- The table containing the ICD-10-AM codes from block O80 to O84 and ACHI delivery codes from blocks 1336 to 1343 has been revised.
- The Note following the table has been revised to clarify:
  - ✓ Delivery is not complete until after expulsion of the placenta
  - ✓ Assign additional ACHI codes for interventions performed during or following labour and delivery
  - ✓ Once an assistance procedure is performed the delivery is not classified as spontaneous but spontaneous delivery may include minor interventions
  - ✓ When ACHI codes for failed delivery procedures are assigned (eg failed forceps/vacuum extraction/version), assign ICD-10-AM codes for an assisted delivery

Delivery

The guidelines regarding multiple delivery in ACS 1505 *Delivery and assisted delivery codes* were amended to clarify that if babies are delivered by:

- the same method, assign the relevant ACHI code once only
- different methods, assign ACHI codes for each of the delivery methods.

Labour

Changes to ACS 1550 *Discharge/transfer in labour*:

- Classification guidelines for Transfer in (first stage) labour for administrative reasons were updated.

  Where a patient in (first stage) labour is discharged home, or transferred to another facility for administrative reasons, assign as principal diagnosis either:
  - O60.0 *Preterm labour without delivery* or,
  - O47.2 *Labour without delivery*

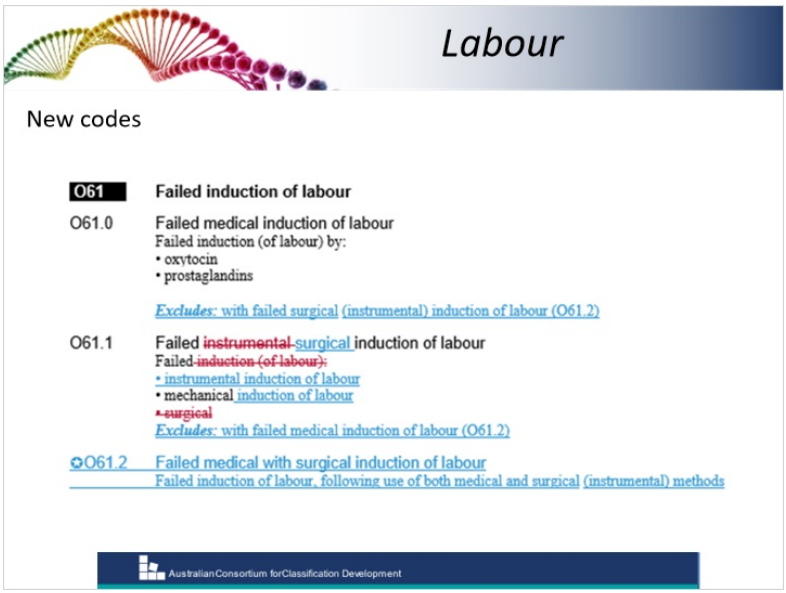
- Synonyms for 'false labour' were added. Where a patient is discharged home with a documented diagnosis of false labour, assign a code from category O47 *False labour or labour without delivery* with fourth character .0, .1 or .9

Labour

- Guidelines regarding Transfer in third stage of labour were added. Note that this is a rare/unusual scenario that is not classified as per the usual definition of complete delivery as per ACS 1505 *Delivery and assisted delivery codes*.

Where a patient in third stage of labour is transferred to another facility:

- At facility 1 code the delivery as per ACS 1505 *Delivery and assisted delivery*
- At facility 2 assign a code for the condition that was responsible for the transfer or assign O63.3 *Prolonged third stage of labour* if there is no documented indication for the transfer.


Labour
New codes
O61 Failed induction of labour
O61.0 Failed medical induction of labour
Failed induction (of labour) by:
• oxytocin
• prostaglandins
Excludes: with failed surgical (instrumental) induction of labour (O61.2)
O61.1 Failed instrumental surgical induction of labour
Failed induction (of labour):
• instrumental induction of labour
• mechanical induction of labour
• surgical
Excludes: with failed medical induction of labour (O61.2)
O61.2 Failed medical with surgical induction of labour
Failed induction of labour, following use of both medical and surgical (instrumental) methods
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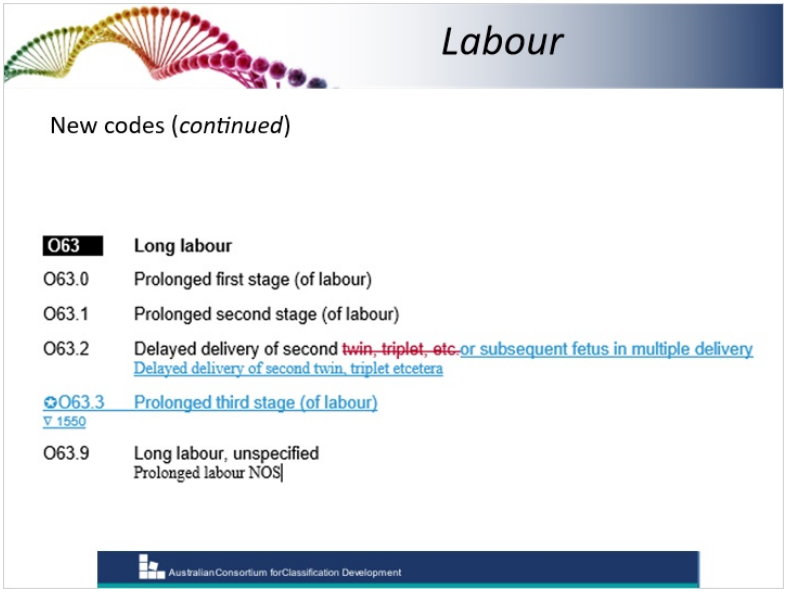
Labour
New codes (continued)
O63 Long labour
O63.0 Prolonged first stage (of labour)
O63.1 Prolonged second stage (of labour)
O63.2 Delayed delivery of second twin, triplet, etc or subsequent fetus in multiple delivery
Delayed delivery of second twin, triplet etcetera
O63.3 Prolonged third stage (of labour)
▽ 1550
O63.9 Long labour, unspecified
Prolonged labour NOS
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Delivery

- Codes in category O70 *Perineal laceration during delivery* have been revised with a note added:

Note: Codes in category O70 represent a continuum. Where multiple perineal lacerations (ruptures or tears) of different degrees are documented, assign a code for the highest (most severe) degree only.

- Codes at category O72 *Third stage and postpartum haemorrhage* have been revised:
  - ✓ The category title has been revised
  - ✓ Codes in this block are differentiated by the onset of haemorrhage
  - ✓ Conditions related to postpartum haemorrhage have been unbundled to allow assignment of postpartum haemorrhage as well as the underlying cause.

Delivery

- Codes in category O73 *Retained placenta and membranes* have been revised:

O73 **Retained placenta and membranes~~, without haemorrhage~~**

O73.0 Retained placenta ~~without haemorrhage~~
Adherent placenta NOS
Code also ~~morbidly adherent placenta (O43.2)~~ third-stage haemorrhage (O72.0), if applicable.
Excludes: morbidly adherent placenta *(O43.2)*

O73.1 Retained portions of placenta and membranes~~, without haemorrhage~~
Retained products of conception following delivery~~, without haemorrhage~~
Code also postpartum haemorrhage (O72.1, O72.2), if applicable

Delivery

Example 3:

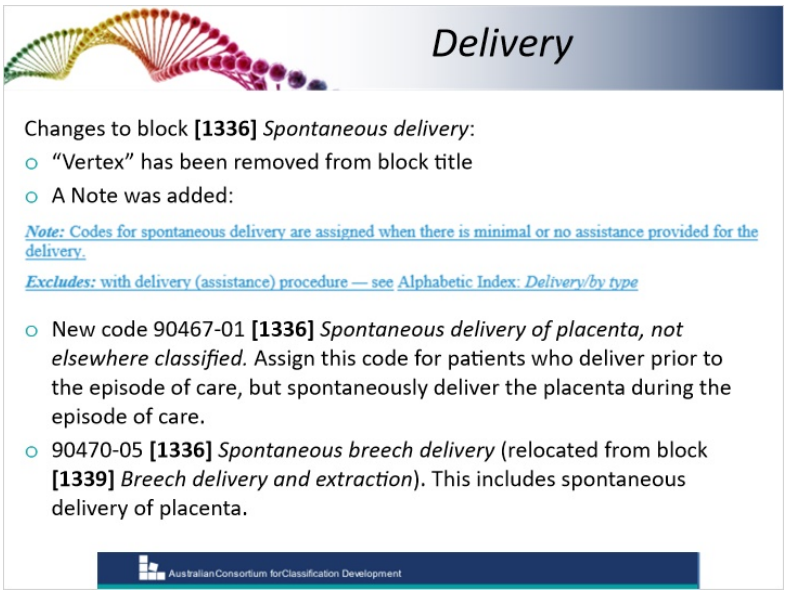
A 33 year old female had a spontaneous vertex delivery complicated by haemorrhage immediately following delivery of the placenta. The patient was taken to theatre and 5 units of oxytocin was administered by slow release intravenous injection.

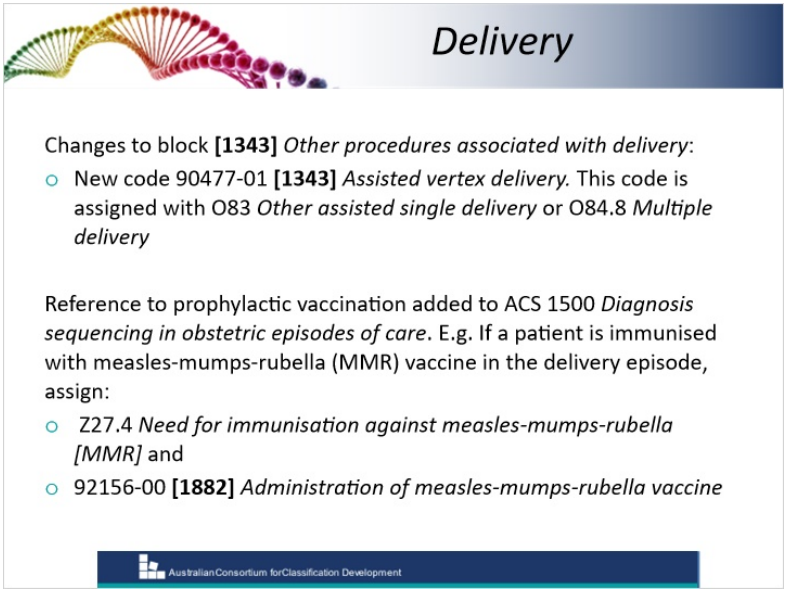
Operation report states "atonic uterus – small amounts of placental tissue removed by D&C under GA". The patient also received a transfusion of blood (coagulation factors).

Delivery

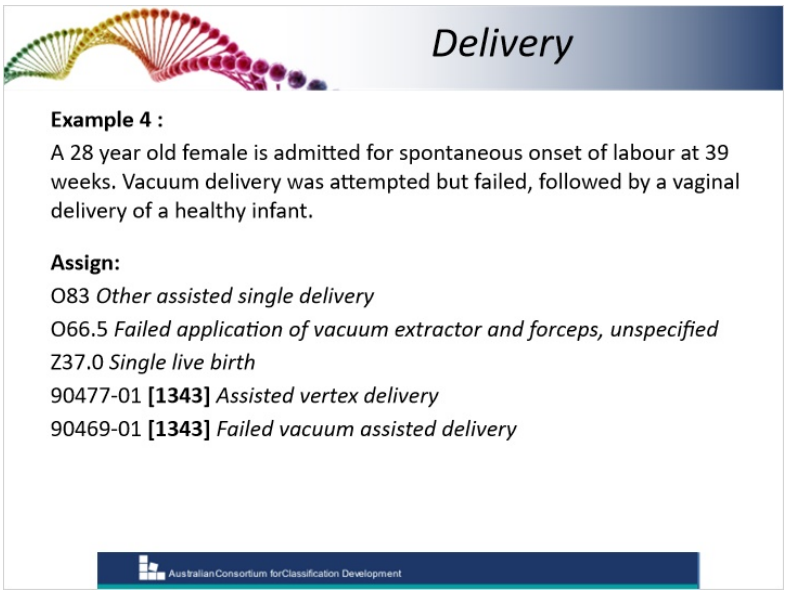
Assign:

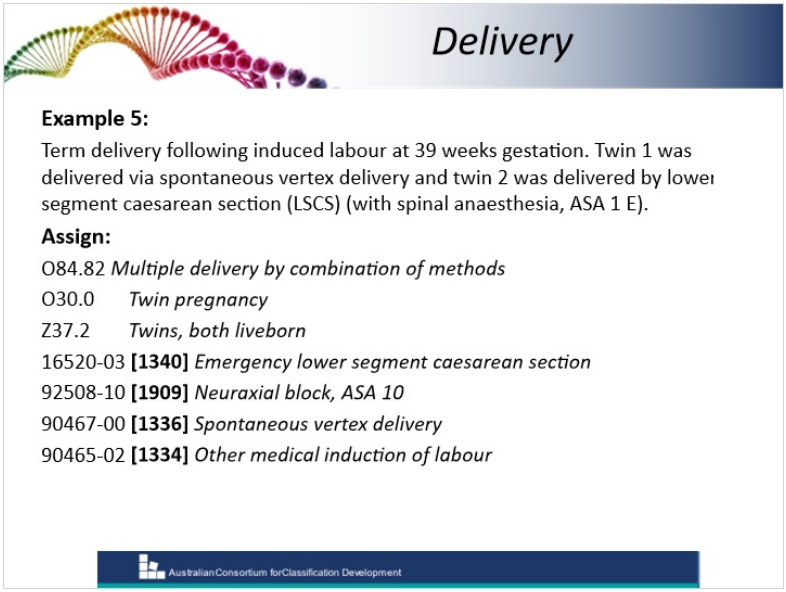
O80	*Single spontaneous delivery*
O72.1	*Other immediate postpartum haemorrhage*
O62.2	*Atonic uterus*
O73.1	*Retained portions of placenta or membranes*
Z37.0	*Single live birth*
90467-00 **[1336]**	*Spontaneous vertex delivery*
16564-00 **[1345]**	*Postpartum evacuation of uterus by dilation and curettage*
92061-00 **[1893]**	*Administration of coagulation factors*
92514-99 **[1910]**	*General anaesthesia ASA 99*



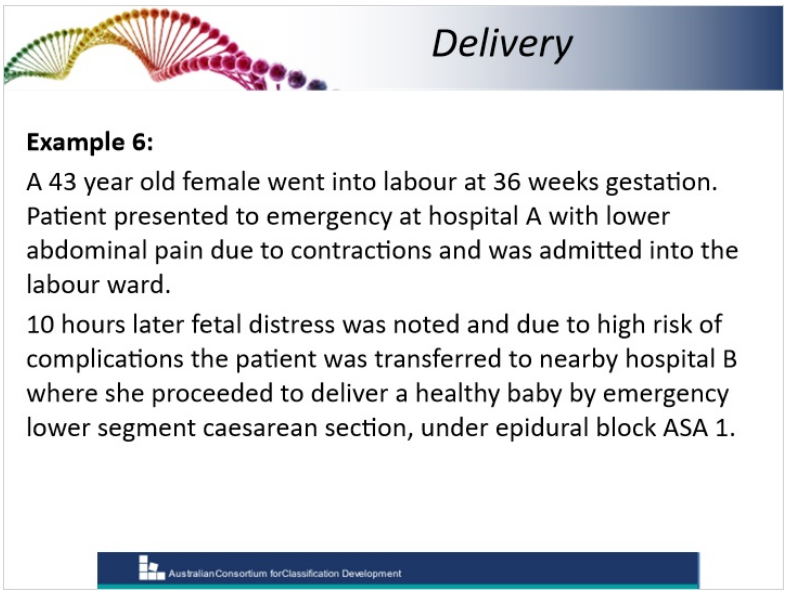


amended to remove reference to O82 (for code 90477-01)





Sequencing amended in example 5


Delivery
Example 6:
A 43 year old female went into labour at 36 weeks gestation. Patient presented to emergency at hospital A with lower abdominal pain due to contractions and was admitted into the labour ward.
10 hours later fetal distress was noted and due to high risk of complications the patient was transferred to nearby hospital B where she proceeded to deliver a healthy baby by emergency lower segment caesarean section, under epidural block ASA 1.
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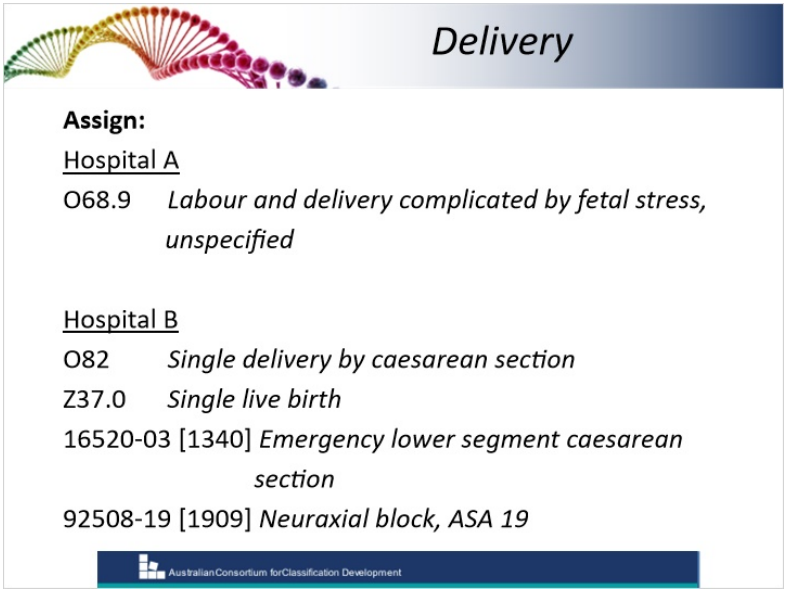
Delivery
Assign:
Hospital A
O68.9 Labour and delivery complicated by fetal stress, unspecified
Hospital B
O82 Single delivery by caesarean section
Z37.0 Single live birth
16520-03 [1340] Emergency lower segment caesarean section
92508-19 [1909] Neuraxial block, ASA 19
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Delivery

The following changes have been made to ACS 1550 *Discharge/ transfer in labour* which include:

- Renaming the section 'Definition' to 'Definition of labour', and the addition of a section Definition of false labour
- Addition of sections for 'transfer in first stage of labour', 'transfer in third stage of labour', 'discharge in labour'
- Addition of classification guidelines for transfer to another facility in the third stage of labour
- Addition of examples

Puerperal / Postpartum

Changes to ACS 1548 *Puerperal/postpartum condition or complication* including a cross reference to ACS 1550 *Discharge/ transfer in labour*. ACHI codes have been added to the examples.

For guidelines regarding transfer in third stage of labour (ie after delivery of baby at one facility but before delivery of placenta at another facility), see ACS 1550 *Discharge/transfer in labour*.

~~*Note:* **ACHI codes are not included in examples**~~

At Z39.1 *Care and examination of lactating mother*, the Excludes note has been updated:

Z39.1 Care and examination of lactating mother
Breastfeeding (attachment) difficulty without disorder of lactation
Supervision of lactation
Excludes: breast infections associated with lactation (O91.-)
disorders of lactation (O92.-)
noninfective disorders of breast associated with lactation (O92.-)

Neonates

- ACS 1618 *Low birth weight and gestational age* has been retired and the content transferred to the Tabular List and

P07 **Disorders related to short gestation and low birth weight, not elsewhere classified**

Includes: the listed conditions, without further specification, as the cause of mortality, morbidity or additional care, in newborn

Excludes: low birth weight:
- due to slow fetal growth and fetal malnutrition (P05.-)
- in term infant (P05.-)

P07.0 **Extremely low birth weight**

Note: Category P07.0 identifies an infant's weight at the **time of birth**, not the weight at subsequent episodes of care

Code first the gestational age (P07.2-, P07.3-)

✪P07.01 Extremely low birth weight 499g or less

✪P07.02 Extremely low birth weight 500–749

✪P07.03 Extremely low birth weight 750–999g

Neonates

In a preterm infant's birth episode, the principal diagnosis will generally be either:

- P07.2- *Extreme immaturity*

P07.2 **Extreme immaturity**

Note: Category P07.2 identifies the infant's gestational age (ie period of time spent in utero), not the infant's age in adjusted weeks

Code also low birth weight (P07.0-, P07.1-), if known

- P07.3- *Other and unspecified preterm infants*

P07.3 **Other and unspecified preterm infants**

Note: Category P07.3 identifies the infant's gestational age (ie period of time spent in utero), not the infant's age in adjusted weeks

Code also low birth weight (P07.0-, P07.1-), if known

Further Information

For further detailed information regarding this revision please refer to the Reference to Changes Document provided in this Education Package.

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