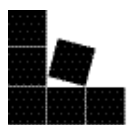


CODING EXERCISE WORKBOOK
for
ICD-10-AM/ACHI/ACS
ELEVENTH EDITION
2019



Australian Consortium for Classification Development

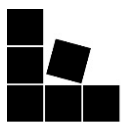


IHPA



ICD-10-AM/ACHI/ACS Eleventh Edition


***Coding Exercise Workbook
2019***



Australian Consortium for Classification Development

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ICD-10-AM/ACHI/ACS Eleventh Edition Coding Exercise Workbook

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Version Control

Version 2 of this workbook was released June 15, 2019 by the ACCD.

Exercises amended were 1.3, 4.2, 8.1, 8.2, 9.1, 9.2, 9.3, 10.2

Contents

| | |
|---|-----------|
| OVERVIEW | 1 |
| 1. ACS 0002 ADDITIONAL DIAGNOSES / ACS 0010 CLINICAL DOCUMENTATION, ABSTRACTION AND THE ENTIRE CLINICAL RECORD | 2 |
| 2. ALLERGENS | 5 |
| 3. EAR, NOSE, MOUTH & THROAT | 7 |
| 4. NEOPLASMS | 8 |
| 5. OBSTETRICS & GYNAECOLOGY | 10 |
| 6. OPHTHALMOLOGY | 12 |
| 7. WOUND MANAGEMENT | 14 |
| 8. OTHER ICD | 15 |
| 9. OTHER ACHI | 17 |
| 10. OTHER ACS | 21 |
| ANSWERS | 22 |
| 1. ACS 0002 ADDITIONAL DIAGNOSES AND ACS 0010 CLINICAL DOCUMENTATION, ABSTRACTION AND THE ENTIRE CLINICAL RECORD | 22 |
| 2. ALLERGENS | 23 |
| 3. EAR, NOSE, MOUTH & THROAT | 23 |
| 4. NEOPLASMS | 24 |
| 5. OBSTETRICS | 24 |
| 6. OPHTHALMOLOGY | 25 |
| 7. WOUND MANAGEMENT | 25 |
| 8. OTHER ICD | 26 |
| 9. OTHER ACHI | 27 |
| 10. OTHER ACS | 28 |

OVERVIEW

The material contained in the *ICD-10-AM/ACHI/ACS Eleventh Edition Coding Exercise Workbook* should be reviewed in conjunction with ICD-10-AM/ACHI/ACS Eleventh Edition and the *Reference to Changes for ICD-10-AM/ACHI/ACS Eleventh Edition*.

This workbook includes questions designed to provide clinical coders with an overview of areas of major change. Some questions require review of clinical records.

Answers are provided at the end of the workbook.

Clinical coders should also familiarise themselves with the full range of updates by reviewing the *Reference to Changes for ICD-10-AM/ACHI/ACS Eleventh Edition*.

1. ACS 0002 Additional Diagnoses

ACS 0010 Clinical documentation, abstraction and the entire clinical record

- 1.1 A 13 year old boy was admitted with a large abscess on his forearm for investigation. He reported feeling lightheaded so was encouraged to drink more water by the nurse. The surgical team reviewed the patient's forearm and recommended an incision and drainage of the abscess be performed.

Does the lightheadedness meet the criteria in ACS 0002 for an additional diagnosis?

Circle the correct response:

YES

NO

- 1.2 Patient was admitted for low back pain. During the hospital stay, they reported dizziness and faintness whilst standing. Patient was on regular fludrocortisone 20mg prior to admission for ongoing postural hypotension. After clinical review, the dosage of fludrocortisone was increased to 40mg daily. Patient's symptoms had improved by discharge.

Principal diagnosis: Low back pain

Additional diagnosis: Postural hypotension

Does the postural hypotension meet the criteria in ACS 0002 for an additional diagnosis?

Circle the correct response:

YES

NO

- 1.3 A 64-year-old man was admitted with a two day history of central chest pain on a background of advanced pulmonary fibrosis and hypertension. On arrival to the Emergency Department, he had a GCS of 15, oxygen saturation of 80% and blood pressure of 185/90. After medical review, stat doses of Metoprolol and amlodipine (not his normal medication) were administered for hypertension. He underwent a coronary angiogram and a diagnosis of angina secondary to coronary artery disease was made. During the admission, the patient's low oxygen saturation (documented as due to the pre-existing pulmonary fibrosis) required increased oxygen supplement and Ordine was commenced for shortness of breath. Home oxygen extension was arranged and a Hudson mask was provided on discharge.

Principal diagnosis: Angina pectoris, unspecified

Additional diagnosis: Coronary artery disease

Pulmonary fibrosis

Hypertension

Do the pulmonary fibrosis and hypertension meet the criteria in ACS 0002 for additional diagnoses? Circle the correct response:

YES

NO

1.4 Assign the responsibilities held by each role:

Provides a complete and accurate record of all diagnoses and procedures in the clinical record and/or discharge

Clinical Coder

Generates queries due to a lack of adequate or discrepant information within the clinical record

Clinician

Abstracts and extrapolates clinical documentation, verifies information on the discharge summary (or equivalent) against the clinical record

Receives and answers the query and makes relevant updates and/or changes to the clinical record

1.5 Identify the incorrect statements.

When classifying clinical concepts into code assignment:

- Identify in the current episode of admitted care the clinical concept requiring classification
- Locate the lead term in the appropriate section of ICD-10-AM Alphabetic Index
- Review the DRG and adjust codes accordingly to match the clinical complexity / severity
- Follow any Instructional notes and cross references that appears under the lead term
- Code all signs and symptoms regardless of their clinical significance.

- 1.6 A query to a clinician is generated when documentation within an episode of care (select all that apply)?
- a) is ambiguous, conflicting, illegible or incomplete
 - b) indicates the potential financial impact
 - c) is unclear for condition onset flag (COF) assignment
 - d) describes or is associated with clinical findings without a definitive relationship to an underlying diagnosis

2. Allergens

2.1 Assign the correct codes from the following ED summary:

ED Summary

Date: 12/09/2017

Presenting problem: Allergic Reaction

Allergies:

Environmental : Dust Mites (Mild)

Food: Dairy products (Severe), Fish (Severe), Nuts (Severe)

Carries an EpiPen

History of present complaint:

History from patient indicates she had a milk based drink, asked for soy but thinks was given dairy. Did not have her EpiPen on her at the time, took clarytine instead.

Patient was alert during triage, red faced with mild swelling to the eye area. Nil swelling of lips, but reports throat is itchy, and it is difficult to swallow. Patient has no wheeze or stridor.

Provisional diagnosis: Anaphylaxis

2.2 Circle the correct answer:

The terms "anaphylaxis" and "anaphylactic shock" are synonymous and used interchangeably.

TRUE

FALSE

- 2.3 A patient with allergies to eggs, cow's milk and walnuts would be coded to which allergen code (select all that apply)?
- a) Y37.4 Allergy to eggs
 - b) Y37.30 Allergy to dairy products, unspecified
 - c) Y37.01 Allergy to tree nuts
 - d) Y37.8 Allergy to other specified allergen

3. Ear, Nose, Mouth & Throat

3.1 When FESS is documented, which of the following interventions are inherent in 96257-01 **[389]** *Functional Endoscopic Sinus Surgery* (select all that apply):

- a) procedures on nasal sinuses
- b) procedures on turbinates
- c) septoplasty

3.2 Assign codes for the following scenario:

A 50 year old female presented for surgical review of her left ear BAHA implant due to an ongoing skin infection overlying her ear since the BAHA implant insertion 6 months ago (performed at this facility). The operation was performed under general anaesthesia, and the operative findings detailed an infection around the abutment with loosening of both abutment and the implant itself. The abutment and implant were removed. A decision was made to delay placing a replacement implant into the existing site until a later admission.

3.3 Assign codes for the following scenario:

A 12 year old patient was admitted for removal of retained bilateral grommets under GA (ASA 1). The procedure was successful and the patient was discharged on the same day.

4. Neoplasms

4.1 Assign codes for the following scenario:

A 52 year old female patient previously diagnosed with squamous cell carcinoma of the right breast was admitted for follow up investigations. Chest X ray showed scattered infiltrates, pleural effusion and pleural changes to the right lung. Results confirmed lymphangitis carcinomatosa secondary to carcinoma of the breast.

4.2 Assign codes for the following scenario:

A 70 year old male presented to the emergency department with lower limb neurological symptoms, secondary to T4 spinal cord compression in a setting of diffuse large b-cell lymphoma.

Past medical history
Diffuse b-cell lymphoma 3 years
COPD
Appendectomy (1979)

Inpatient clinical management:
spinal cord compression secondary to T4 pathological fracture (due to lymphoma)
T2 – T6 posterolateral fusion with segmental internal fixation (PLIF) under GA (ASA 3)

diffuse large b-cell lymphoma
IV R-CHOP chemotherapy
Intrathecal methotrexate

4.3 Oral pharmacotherapy (chemotherapy) is assigned in inpatient episodes of care.
True or false?

TRUE

FALSE

4.4 Assign codes for the following scenario:

Patient presents with a multifocal hepatocellular carcinoma (HCC), for targeted TACE. Via a right common femoral artery puncture, a shepherds hook catheter was placed into the coeliac axis. Angiography demonstrated avid contrast staining within the tumour in segment 2/3 of the liver, and from the left hepatic artery off the left gastric artery, but also the arteries arising from the pancreaticoduodenal arcades. 50% of the chemotherapy was infused into the left hepatic artery, with the remainder infused to the pancreaticoduodenal arcade arteries.

5. Obstetrics & Gynaecology

5.1 Assign codes for the following scenario:

A 46 year old female with severe (stage IV) uterine endometriosis was admitted for a total abdominal hysterectomy via laparoscopy performed under GA.

5.2 Assign codes for the following scenario:

A 43 year old female was diagnosed with serous adenocarcinoma of the cervix. A total abdominal hysterectomy and radical pelvic lymphadenectomy was performed under GA.

5.3 Assign codes for the following scenario:

A 17 year old female was admitted at 10 weeks gestation for a medically induced termination of pregnancy via administration of misoprostol. The patient was monitored, the termination was completed, and the patient discharged later in the day.

5.4 In ICD-10-AM Eleventh Edition, conditions associated with postpartum haemorrhage (e.g. atonic uterus, adherent placenta):

- a) are inherent in category 072 *Third stage and postpartum haemorrhage*
- b) are assigned a code for the causative condition only
- c) have been unbundled - code the postpartum haemorrhage and its cause separately

5.5 Radical excision of pelvic lymph nodes and removal of adnexa have been unbundled from codes in block **[1268]** *Abdominal hysterectomy* and block **[1269]** *Vaginal hysterectomy* to allow for these procedures to be classified separately. True or false?

TRUE

FALSE

6. Ophthalmology

6.1 Assign codes from the following operation report:

Operation Report
Date: 06/12/2017
Surgeon: Dr Smith

Indication for Operation: Cataract / Glaucoma

Operation performed: (R) CE + IOL + iStent
Anaesthesia: Subtenon Block

Procedural notes:

Betadine/drape
1 x paracentesis
Viscoat
Temporal CCI/CCC/hydro
Phaco / IOL in bag
iStents x 2
IA
Wounds hydrated
I C Ceph
Jelonet / pad/ shield

Discharge notes:

Leave pad and shield insitu
See Dr Smith in rooms tomorrow

6.2 Assign codes from the following scenario:

A 74 year old patient with actinic keratosis of the conjunctiva was admitted for surgery. Under local anaesthetic, cryotherapy to the conjunctiva was undertaken. The patient was discharged on topical steroid-antibiotic drops.

6.3 Insertion of iris hooks is classified separately to a cataract procedure. True or False?

TRUE

FALSE

7. Wound Management

7.1 Assign codes for the following scenario:

A 63 year old patient was admitted with a Stage 3 decubitus ulcer of the leg for surgical management. The patient had a vacuum dressing applied in the operating theatre under general anaesthetic.

7.2 Assign codes for the following scenario:

A 72 year old female was admitted for treatment of partial thickness burn to right forearm following an accident in the kitchen at home, whilst cooking with hot oil. The wound was surgically debrided under GA and dressing applied. BSA on burns chart was recorded as 5%.

8. Other ICD

8.1 A patient was admitted with a rectus sheath haematoma due to anticoagulation use. What code is assigned in addition to D68.3 *Haemorrhagic disorder due to circulating anticoagulants*?

- a) S30.1 *Contusion of abdominal wall* (and appropriate external cause codes)
- b) M79.88 *Other specified soft tissue disorders, other*

8.2 What codes are assigned for epileptic psychosis in a patient with delirium? (circle one as appropriate)

- a) F05.8 *Other delirium*
- b) G40.90 *Epilepsy, unspecified, without mention of intractable epilepsy*
F05.0 *Delirium not superimposed on dementia, so described*

8.3 Code this case scenario:

A patient with facial numbness on a background of a CVA 1 year ago with no residual deficits is admitted for a CT scan of the brain performed under sedation

8.4 Decreased consciousness has been added to ICD-10-AM and is classifiable to:

- a) R40.0 *Somnolence*
- b) R40.1 *Stupor*
- c) R40.2 *Coma*
- d) a, b or c depending on lowest GCS score documented in the clinical notes

8.5 Assign codes for the following scenario:

Patient was admitted after an accidental overdose using cocaine. Unconscious (GCS = 6) and hypotensive on arrival. After initial evaluation the patient was stabilised using administration of oxygen via nasal prongs and administration of IV fluids (to treat the hypotension). The patient's level of consciousness improved to a GCS of 12 after 2 hours. The patient was monitored overnight and discharged on Day 2.

9. Other ACHI

9.1 Assign codes from the following operation report:

Operation Report

Date: 18/08/2017

Medical Service: DENTISTRY

Anaesthesia: GA

Indications/Background

Amelogenesis imperfecta

Primary Operation Performed

dental x-rays (022) x2

removal of calculus: (114) – 4 teeth

nonsurgical extractions: (52) – 1 tooth

application of metallic crown: (16,55,54,65,64,26,75,74,85,84) – 10 teeth

Restoration posterior surface (1 surface): (36,46) – 2 teeth

No specimens sent to pathology

Post Operative Orders

Cool soft diet: 6-8 hours

Panadol for pain relief

To be discharged when deemed fit by RN

Post Operative follow up

Appointment at rooms in 1 week

9.2 Assign codes from the following operation report:

Pre-Operative Diagnosis:

Right neck (skin) squamous cell carcinoma excised 6 months ago, ?lymph node metastases

Operations performed:

Right neck dissection – level 3, 4, 5

Operation details:

Findings – large 8 X 6 cm mass in right posterior inferior neck extending to supraclavicular fossa.

Accessory nodes involved, holiday stick incision with diagonal limb invasion, level 3, 4 and extended 5 node dissection. Accessory sacrificed. Skin over tumour very thin – small segment of skin removed. Closed with staples. GA.

Histopathology: confirmation of metastases in all lymph node excised.

9.3 Assign codes for the following scenario:

A 34 year old male with recovering from a recent total knee replacement (for OA) and was admitted for a 10 week exercise physiologist focussed rehabilitation program to restore movement and mobility to the knee.

9.4 Assign codes for the following scenario:

Patient seen 6 months postpartum by a lactation consultant with attachment difficulties due to cracked nipples.

9.5 Circle the correct answer:

Tattooing agents are used to mark a small lesion into the gastrointestinal tract to facilitate the lesion's location for subsequent surgery or follow up

TRUE

FALSE

9.6 ACHI code 30680-00 **[1005]** *Balloon enteroscopy* is assigned where there is documentation of:

(select all that apply)

- a) double balloon enteroscopy
- b) single balloon enteroscopy
- c) enteroscopy via antegrade approach
- d) enteroscopy via retrograde approach
- e) all of the above

9.7 Assign codes for the following scenario:

A 17 year old patient was admitted with major depression. The patient received two treatments of transcranial magnetic stimulation (under LA).

10. Other ACS

10.1 A patient was admitted for treatment of acute on chronic kidney disease. Assign codes for both conditions?

YES

NO

10.2 A patient who has previously been diagnosed with stage 5 chronic kidney disease was seen in the renal unit for multi-day stay haemodialysis. Circle the correct set of codes:

a) U87.1 *Chronic kidney disease, stage 3 – 5*
Z99.2 *Dependence on kidney dialysis*

b) N18.5 *Chronic kidney disease stage 5*

c) N18.5 *Chronic kidney disease stage 5*
U87.1 *Chronic kidney disease, stage 3 – 5*
Z99.2 *Dependence on kidney dialysis*

10.3 A patient with chronic kidney disease stage 5 was admitted for a same-day admission for creation of an AV fistula for haemodialysis. Circle the correct set of codes:

a) Z49.0 *Preparatory care for dialysis*
N18.5 *Chronic kidney disease stage 5*

b) Z49.0 *Preparatory care for dialysis*
U87.1 *Chronic kidney disease, stage 3–5*

10.4 In which of the following scenarios is Z53.3 *Procedure abandoned after initiation* assigned? Circle the correct answer:

a) Patient with thalassaemia was admitted for total knee replacement due to severe gonarthrosis. Blood tests following admission revealed patient's haemoglobin was very low. The patient's operation was postponed and the patient received a blood transfusion instead.

b) Patient was admitted for elective cosmetic surgery for correction of nose. On the day of the surgery the procedure had to be rescheduled it was noted that an administrative error was made by the admission bookings officer which lead to a double booking. The procedure was rescheduled.

c) Patient admitted for a colonoscopy for follow-up investigation of Crohn's disease. An IV line is inserted, but before sedation is administered, the patient complains of crushing radiating chest pain. The procedure is abandoned but the admission continues for investigation of the chest pain.

ANSWERS

1. **ACS 0002 Additional Diagnoses and ACS 0010 Clinical documentation, abstraction and the entire clinical record**

- 1.1 NO. In this scenario, the lightheadedness was a transient condition in the episode of care, and was managed successfully without the need for further investigations or a care plan; therefore, it does not meet the criteria in ACS 0002.
- 1.2 YES. In this example, the postural hypotension meets the criteria in ACS 0002 as the dosage of the patient's regular medication was increased after clinical review.
- 1.3 YES. In this scenario, the pre-existing pulmonary fibrosis and hypertension both meet the criteria in ACS 0002, as therapeutic treatment was given for the hypertension and a care plan (commenced Ordine, home oxygen extension with Hudson mask) commenced for the pulmonary fibrosis.
- 1.4 Roles of clinicians and coders

Clinician

- Provides a complete and accurate record of all diagnoses and procedures in the clinical record and/or discharge
- Receives and answers the query and makes relevant updates and/or changes to the clinical record

Clinical Coder

- Abstracts and extrapolates clinical documentation, verifies information on the discharge summary (or equivalent) against the clinical record
- Generates queries due to a lack of adequate or discrepant information within the clinical record

- 1.5 Identify the incorrect statements.

When classifying clinical concepts into code assignment:

Review the DRG and adjust codes accordingly to match the clinical complexity / severity

Code all signs and symptoms regardless of their clinical significance.

- 1.6 A query to a clinician is generated when documentation within an episode of care (select all that apply)?
- a) is ambiguous, conflicting, illegible or incomplete
 - c) is unclear for condition onset flag (COF) assignment
 - d) describes or is associated with clinical findings without a definitive relationship to an underlying diagnosis

2. Allergens

- 2.1 T78.0 *Anaphylaxis and anaphylactic shock due to adverse food reaction*
 Y37.30 *Allergy to dairy products, unspecified*
 Y92.9 *Unspecified place of occurrence*
- 2.2 TRUE
- 2.3 a, b and c

3. Ear, Nose, Mouth & Throat

- 3.1 a) procedures on nasal sinuses
- 3.2 T85.77 *Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts*
 T85.62 *Mechanical complication of auditory prosthetic devices, implants and grafts.*
 Y83.1 *Surgical operation with implant of artificial internal device*
 Y92.24 *Place of occurrence Health service area, this facility.*
- 45794-10 **[334]** *Removal of bone anchored hearing aid [BAHA] device*
 92514-99 **[1910]** *General anaesthesia ASA 99*
- 3.3 Z45.83 *Adjustment and management of myringotomy tube*
 41632-05 **[308]** *Removal of myringotomy tube, bilateral*
 92514-19 **[1910]** *General anaesthesia, ASA 19*

4. Neoplasms

- 4.1 C78.0 *Secondary malignant neoplasm of lung*
M8070/6 *Squamous cell carcinoma, metastatic NOS*
C50.9 *Malignant neoplasm of breast, unspecified*
M8070/3 *Squamous cell carcinoma NOS*
- 4.2 G99.2 *Myelopathy in diseases classified elsewhere*
G95.2 *Cord compression, unspecified*
M90.78 *Fracture of bone in neoplastic disease, other*
C83.3 *Diffuse large B-cell lymphoma*
M9680 / 3 *Lymphoma, large B-cell, diffuse NOS*
U83.2 *Chronic obstructive pulmonary disease*
48651-00 [1389] *Posterolateral spinal fusion, 3 levels*
48687-00 [1390] *Segmental internal fixation of spine, 3 or 4 levels*
92514-39 [1910] *General anaesthesia, ASA 39*
96199-00 [1920] *Intravenous administration of pharmacological agent, antineoplastic agent*
96198-00 [1920] *Intrathecal administration of pharmacological agent, antineoplastic agent*
- 4.3 TRUE
- 4.4 C22.0 *Liver cell carcinoma*
M8170/3 *Hepatocellular carcinoma*
35321-05 [768] *Transcatheter embolisation of blood vessels, abdomen*
35317-02 [741] *Peripheral arterial or venous catheterisation with administration of other therapeutic agent*

5. Obstetrics

- 5.1 N80.0 *Endometriosis of uterus*
35653-07 [1268] *Laparoscopic total abdominal hysterectomy*
92514-99 [1910] *General anaesthesia, ASA 99*
- 5.2 C53.9 *Malignant neoplasm of cervix uteri, unspecified*
M8441/3 *Serous cystadenocarcinoma NOS*
35653-01 [1268] *Total abdominal hysterectomy*
96245-05 [806] *Radical excision of lymphatic structure, pelvic*
92514-99 [1910] *General anaesthesia, ASA 99*

- 5.3 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*

5.4 c) have been unbundled - code the postpartum haemorrhage and its cause separately

5.5 True

6. Ophthalmology

- 6.1 H40.9 *Glaucoma, unspecified*
H26.9 *Cataract, unspecified*

- 42698-07 **[200]** *Phacoemulsification of crystalline lens*
42705-00 **[200]** *Extraction of crystalline lens with implantation of
trans-trabecular drainage device*
42701-00 **[193]** *Insertion of intraocular lens*

92509-99 **[1909]** *Regional block, nerve of head or neck, ASA 99*

Hint: ACS 0701 *Cataract* states

If treatment for glaucoma and cataract is received during the same operation, sequence the glaucoma before the cataract for the diagnosis and the procedure codes.

Errata 1 will include a code first instruction at 42705-00 [200], therefore the type of cataract extraction will be sequenced ahead of the glaucoma procedure, as a convention overrides an ACS.

- 6.2 L57.0 *Actinic keratosis*
96250-04 **[253]** *Destruction procedures on conjunctiva*

6.3 FALSE

7. Wound Management

- 7.1 L89.29 *Pressure injury, stage III, other site of lower extremity (excluding heel and toe)*
90686-03 **[1601]** *Vacuum dressing*
92514-99 **[1910]** *General anaesthesia, ASA 99*

| | | |
|-----|------------------|--|
| 7.2 | T22.21 T31.00 | <i>Partial thickness [blisters, epidermal loss] burn of forearm and elbow Burns involving less than 10% of body surface, with less than 10 % or unspecified full thickness burns</i> |
| | X10.2 | <i>Contact with hot fat and cooking oil</i> |
| | Y92.04 | <i>Kitchen</i> |
| | U73.1 | <i>While engaged in other types of work</i> |
| | 30017-02 [1627] | <i>Debridement of burn</i> |
| | 92514-99 [1910] | <i>General anaesthesia, ASA 99</i> |

8. Other ICD

| | | |
|-----|---|---|
| 8.1 | b) M79.88 | <i>Other specified soft tissue disorders, other</i> |
| 8.2 | b) G40.90 F05.0 | <i>Epilepsy, unspecified, without mention of intractable epilepsy Delirium not superimposed on dementia, so described</i> |
| 8.3 | R20.8 Z86.71 56001-00 [1952] 92515-99 [1910] | <i>Other and unspecified disturbances of skin sensation Personal history of cerebrovascular disease Computerised tomography of brain Sedation, ASA 99</i> |
| 8.4 | d) a, b or c depending on lowest GCS score documented in the clinical notes | |
| 8.5 | T40.5 R40.2 I95.2 X42 Y92.9 U73.9 | <i>Poisoning by narcotics and psychodysleptics [hallucinogens], cocaine Coma Hypotension due to drugs Accidental poisoning by and exposure to narcotics and psychodysleptics [hallucinogens], not elsewhere classified Unspecified place of occurrence Unspecified activity</i> |

9. Other ACHI

| | | |
|-----|-----------------|---|
| 9.1 | K00.5 | <i>Hereditary disturbances in tooth structure, not elsewhere classified</i> |
| | 97114-00 [453] | <i>Removal of calculus from surfaces of teeth</i> |
| | 97311-01 [457] | <i>Removal of 1 tooth or part(s) thereof</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97586-00 [469] | <i>Placement of preformed metallic crown</i> |
| | 97531-00 [466] | <i>Adhesive restoration of posterior tooth, 1 surface, direct</i> |
| | 97531-00 [466] | <i>Adhesive restoration of posterior tooth, 1 surface, direct</i> |
| | 92514-99 [1910] | <i>General anaesthesia, ASA 99</i> |

Hint: do not assign 97022-00 [451] *Intraoral periapical or bitewing radiography, per exposure* as per ACS 0042 *Procedures not normally coded/Classification point 11.*

| | | |
|-----|-----------------|--|
| 9.2 | C77.0 | <i>Secondary and unspecified malignant neoplasm of lymph nodes, lymph nodes of head, face and neck</i> |
| | M8070/6 | <i>Squamous cell carcinoma, metastatic NOS</i> |
| | C44.4 | <i>Other malignant neoplasms of skin, skin of scalp and neck</i> |
| | M8070/3 | <i>Squamous cell carcinoma NOS</i> |
| | 96244-01 [806] | <i>Excision of lymphatic structure, neck/cervical</i> |
| | 92514-99 [1910] | <i>General anaesthesia, ASA 99</i> |

| | | |
|-----|-----------------|--|
| 9.3 | M17.1 | <i>Other primary gonarthrosis</i> |
| | Z96.65 | <i>Presence of knee implant</i> |
| | Z50.9 | <i>Care involving use of rehabilitation procedure, unspecified</i> |
| | 95550-15 [1916] | <i>Allied health intervention, exercise physiologist</i> |

| | | |
|-----|-----------------|---|
| 9.4 | O92.11 | <i>Cracked nipple associated with childbirth, with mention of attachment difficulty</i> |
| | 95550-16 [1916] | <i>Allied health intervention, lactation consultant</i> |

| | | |
|-----|------|--|
| 9.5 | TRUE | |
|-----|------|--|

9.6 e) all of the above

9.7 F32.20 *Severe depressive episode without psychotic symptoms,
not specified as arising in the postnatal period*
96253-00 [1908] *Repetitive transcranial magnetic stimulation, 2-20 treatments*

10. Other ACS

10.1 YES

10.2 b) N18.5 *Chronic kidney disease stage 5*

10.3 b) Z49.0 *Preparatory care for dialysis*
U87.1 *Chronic kidney disease, stage 3–5*

10.4 c) Patient admitted for a colonoscopy for follow-up investigation of Crohn's disease. An IV line is inserted, but before sedation is administered, the patient complains of crushing radiating chest pain. The procedure is abandoned but the admission continues for investigation of the chest pain.