

# Coding *Matters*

Newsletter of the National Coding Centre

Volume 1 No. 4 April 1995

## FROM THE DESK OF THE DIRECTOR



And so begins NCC Year 2! Many of the seeds sown in Year 1 are now bearing fruit, the most notable being THE BOOK. This lusty

creation, the four volume set of the Australian Version of ICD-9-CM, will have been launched by the time this reaches you and is available for purchase from the NCC. I trust that the time and effort devoted to this publication will be apparent in the finished product. Please let us know how it works for you. We would welcome suggestions for improvements for the 1996 updates and subsequent versions. On the drawing board already is the electronic version, of which more detail appears in Karen Luxford's column. Megan Roach, recently appointed as Administrative Assistant and database whiz, is organising our databases to cope with orders which are pouring in, so be sure yours is placed for the first edition of this historic book.

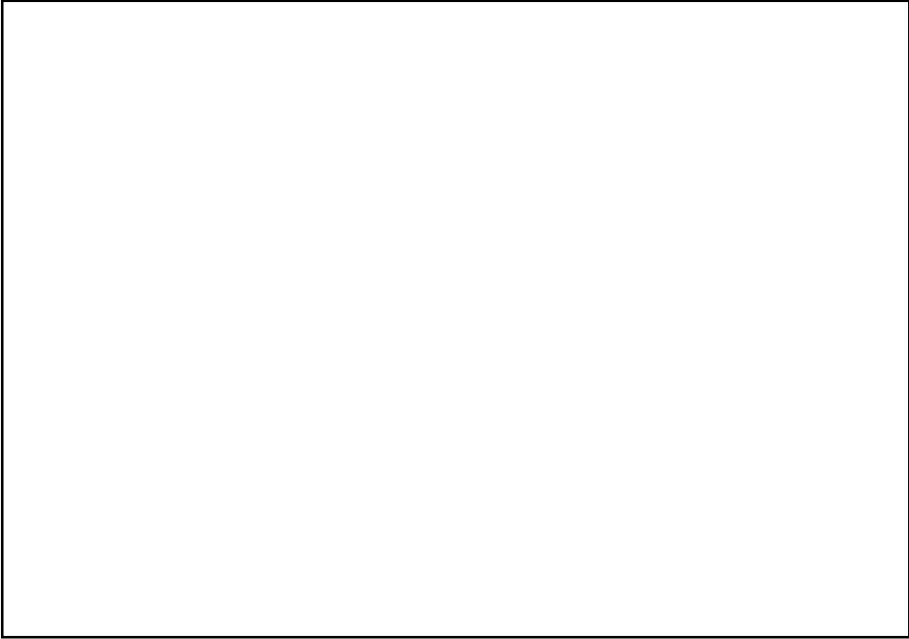
Kerry Innes has already begun work on the next Australian Addendum and Coding Standards update for 1996, with major input expected once more from the Australian Casemix Clinical Committee (ACCC)/NCC Coding and Classification Clinical Groups (CCCGs). Michelle Bramley joined the NCC staff in late February, 1995, as Project Officer assisting Coding Services Manager, Kerry Innes. Her first project has been to map to ICD-9-CM the ophthalmic codes developed by Dr. Michael Hennessy for the Australian Thesaurus of Ophthalmic Terminology (ATOT), a project of the Royal Australian College of

*At the ICD-9-CM Book Launch were, from the left: Professor Judith Kinnear (Dean, Faculty of Health Sciences, University of Sydney), Ms Rosemary Roberts (NCC Director), Dr Karen Luxford (NCC Publications Manager), and Professor Phyllis Watson (Head, School of Health Information Management, Faculty of Health Sciences, University of Sydney)*

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***Enjoying the ICD-9-CM Book Launch were NCC Staff, from the left: Janelle Craig (Coding Education Manager), Karen Luxford (Publications Manager), Rosemary Roberts (Director), Kerry Innes (Coding Services Manager), Megan Roach (Administrative Assistant) and Michelle Bramley (Project Officer)***

Ophthalmologists. The project's aim is to develop a terminology of ophthalmic diagnoses and procedures specific for Australian use. Michelle's introduction to the NCC actually began at the end of 1994 when she evaluated procedure classifications for use with ICD-10. This provided important background to the study currently under way to examine the feasibility of using the Commonwealth Medicare Benefits Schedule (CMBS) as the basis for an Australian procedure classification. This study has been funded through the Casemix Branch, Department of Human Services and Health (DHS), and was reported at the end of March, 1995. At that time, the results of the study were discussed along with recommendations for the introduction of ICD-10 to Australia in 1998. At this stage, we have an opportunity in Australia to create a classification that will work as a language for clinicians as well as for AN-DRGs. The NCC is proposing an Australian Clinical Procedure Classification (ACPC) which maps directly to the item numbers of CMBS.

The process of assessing the feasibility of using the CMBS item descriptions to derive an Australia procedure classification has been a great challenge for the NCC. We have worked closely with the Medicare Benefits Branch, DHS and with clinicians in the three specialties chosen for the study (Cardiovascular, Orthopaedic and Plastic Surgery). Representatives of the Australian Medical Association (AMA) have been involved, and rewarding consultations have

been held with Dr. Don Walker, Health Care Information Management Unit, Faculty of Medicine, University of Adelaide, especially in relation to computerised classification systems and mappings between classifications. NCC staff working with me on the project, Kerry Innes and Michelle Bramley, have been introduced to acyclic directed graphs, and are coming to grips with the idea of "concepts" of procedures, controlled medical terminologies, and unique numbering systems for classifications as opposed to "meaningful" numbers.

Networks are becoming increasingly important to the NCC as we distribute resource material and disseminate knowledge to coders. The "Train the Trainer" Workshop (February, 1995) to establish the Coding Educator's Network, organised by Janelle Craig (Coding Education Manager), was a brilliant success, and we look forward to joining with these educators in offering the Australian Coding Standards (ACS) workshops in all states and territories before July, 1995. Janelle has used preliminary results from the National Coder Workforce Issues Project (NCWIP) questionnaires in planning the ACS workshops. We look forward to the analysis phase of that project to reveal all on the how, when, where and why of Australian coders.

New Zealand representatives attended the February workshop, and Janelle Craig and Joy Smith ran a week long program for the New Zealand Ministry of Health coding advisers in

Wellington, NZ in February/March, 1995. The New Zealand Workshop was very well received, and a close working relationship is developing between the two countries using AN-DRGs. Although each state, the private sector and New Zealand applies the casemix grouping for different purposes, the basic ingredients of casemix, the disease and procedure codes, are common to all health services. This means that we have a binding force which brings coders together and which ensures that coders and clinicians will collaborate in improving the quality of the information recorded. Quality does not always mean more, and considerations of efficient documentation will help advance progress towards structured formats and electronic recording which will help coders in the abstraction process.

NCC staff also participated in workshops and seminars such as that given by Private Sector Casemix Unit (PSCU) for health insurers in Sydney in February, 1995 and the introductory workshop of the National Allied Health Reference Standards Project in Melbourne, also in February. Both generated a lot of interest and represent groups which before casemix (B.C.) had minimal interest in coding. While health insurers are identifying education needs, allied health professionals are focussing on review of procedure codes in ICD-9-CM to plan for future inclusion of allied health interventions in coded information.

Preliminary plans are being hatched for the second NCC Annual Seminar, to be held this year in Canberra on September 8 and 9. The theme for this year will be "Managing Coding" (*see* page 10 for Preliminary Notice and Call for Papers).

Valued links with the Australian Institute of Health and Welfare (AIHW) have been reinforced by NCC formal membership on the National Health Data Committee commencing in February, 1995. This is especially important because of the interdependence between sections of the National Health Data Dictionary, the classifications used for coding and other fields such as admission weight and same day intent used for AN-DRG grouping.

The NCC farewelled administrative assistant Deborah Duncan-Gouws at the beginning of February, 1995. Initially a temporary replacement, Deborah extended her time with the NCC until late in her pregnancy. Even in that relatively short time, she made a major contribution to the harmony and cheer of the Centre and will be missed by us all.

Remember, keep coding, and keep talking to your clinicians!

❖ ***Rosemary Roberts***

## **NCWIP UPDATE**

***Leanne Holmes, Project Manager of the National Coder Workforce Issues Project (NCWIP) writes to say.....***

There has been an excellent response to the National Coder questionnaire and I would like to take this opportunity to thank all participants for their timely completion of the questionnaire. The questionnaire was sent out to 1,172 hospitals and day care facilities around Australia. 899 facilities (77%) responded and returned their surveys. In total, 1,857 individual questionnaires were received from both Managers and Coders. The results are currently being processed and analysed and an overview of the results will be published in the next issue of *Coding Matters*.

I would like to congratulate both Debbie Abbott and Kavia Cheng for their successful appointments as educators to the NCWIP. Debbie and Kavia will be performing a number of important activities including planning of education programs in collaboration with NCC, delivery of the programs to all states and territories and assisting in coder examination.

Following a recent meeting with the Casemix Branch (DHS), the original timetable for the first coder accreditation exam has been changed to August 1996, giving coders more lead time to prepare for the examination.

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## NCWIP HAS MOVED!

Please note that now the NCWIP team has doubled in size, we have had to move to larger office accommodation.

### NEW LOCATION:

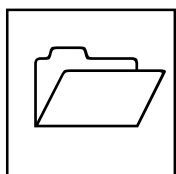
K Tower Plaza Suites,  
9th floor - Suites 27, 28 & 29,  
Corner Wickham St & Ballow Street,  
Fortitude Valley QLD 4006.

### NEW POSTAL ADDRESS:

HIMAA - National Coder Workforce  
Issues Project  
P.O. Box 762  
FORTITUDE VALLEY QLD 4006.

NEW TELEPHONE NUMBER: (07) 250 1533

## Coding Tips



### ❑ Alzheimer's Disease

When only "Alzheimer's disease" is documented, rather than "Alzheimer's dementia", the dementia component can be assumed and thus two codes should always be assigned, 290.xx *Senile and presenile organic psychotic conditions* and 331.0 *Alzheimer's disease* (Mental Health CCG, March 1995).

### ❑ Exploration of abdominal wall for undescended testis

In the first instance, exploration is necessary to ascertain whether there is an undescended testis in the abdominal cavity. This procedure would normally not be coded (54.11 *Exploratory laparotomy*) as the exclusion note instructs the coder to omit this code when the exploratory

laparotomy is incidental to intra-abdominal surgery. In cases of undescended testis, however, the exploration is performed independently of the orchiopexy (62.5) to establish whether there is in fact an undescended testis in the abdominal cavity. In these cases, code the orchiopexy (62.5) as the first procedure, followed by the exploratory laparotomy (54.11) or only 54.11 if no testis is found. (Nephrology and Urology CCG, March 1995).

### ❑ Peripheral Neuropathy ? alcoholic

In *Coding Matters*, Vol 1, No. 3, we discussed the difficulties of coding the discharge summary relating to peripheral neuropathy ?alcoholic. The Mental Health CCG has met since our last issue and the coding decision is:

The discharge summary demonstrates ambivalence on the part of the attending clinician as to whether the alcoholism is directly related to the peripheral neuropathy and similarly whether smoking is directly related to the laryngitis. The coder should therefore not assume any relationship between these conditions and code this case with the following codes:

356.9	<i>Unspecified hereditary and idiopathic peripheral neuropathy</i>
V11.3	<i>Personal history of alcoholism</i>
476.0	<i>Chronic laryngitis</i>

## CODING QUERIES ??

Over the last few months a number of queries have been received at the NCC directly from coders. While we would like to help, it is very important that coders use the coding advisory resources of their respective state or territory *before* queries are directed to the NCC because:

- \* it promotes a strong local coding network,
- \* it ensures that the current coding standards document is used as the basis for decision-making, and,
- \* it highlights to state/territory coding committees those areas in the Australian Coding Standards document that may need amendment.

## DO YOU NEED *Help* WITH A CODING PROBLEM ?

The procedure for coding queries is as follows: Your queries should go to your respective state/territory coding advisory body for a decision. The NCC will not be accepting queries directly from coders. An address list of the state/territory coding committees is included below. Most states have a standard "query form" which can be sent with any other supporting documentation for a decision by the state committee. This committee will send an NCC query form to us if they need our advice. We will correspond with the state/territory committees directly by phone or fax if the query is urgent, or otherwise, through the mail. Your state/territory committee will advise you of the answer. If appropriate, the NCC will publish questions and answers in **Coding Matters**. See page 6 for details on the *Private Sector Coding Advice Line*.

### STATE/TERRITORY CODING COMMITTEES

ACT HEALTH INFORMATION  
MANAGEMENT GROUP  
PO Box 316  
Jamison Centre  
**ACT** 2614

QUEENSLAND CODING  
AUTHORITY  
Convenor  
School of Public Health, QUT  
Locked Bag No. 2  
RED HILL **QLD** 4059

NSW CODING ADVISORY  
SUBCOMMITTEE  
Convenor  
NSW Medical Record Association  
PO Box 4119  
Sydney **NSW** 2001

SA CODING COMMITTEE  
Chairperson (Lorraine Van Gemert)  
Statistics and Computing Services  
South Australian Health Commission  
PO Box 65  
Rundle Mall **SA** 5000

TASMANIAN CODING ADVISORY  
COMMITTEE  
c/- Sandy Juriansz  
Division of Information Management  
Dept. of Community & Health Services  
99 Bathurst St, 5th Floor  
HOBART **TAS** 7000

ICD CODING COMMITTEE  
The Secretary  
Information & Performance Evaluation  
Dept. of Health & Community Services  
17th Floor  
GPO Box 4057  
Melbourne **VIC** 3001

WA CODING COMMITTEE  
Chairperson (Barbara Campbell)  
Epidemiology and Health Statistics,  
1st Floor, 'C' Block,  
East Perth Government Offices  
189 Royal Street  
East Perth **WA** 6004

### 😊 "Getting it Right in Paediatric Coding" - A guide to coding for clinicians and coders

This comprehensive document was recently published by the Australian Association of Paediatric Teaching Centres. This book provides extracts from ICD-9-CM with explanatory notes on how the codes should be applied and how clinicians should document certain diagnoses to assist the coders in applying the ICD-9-CM conventions. Enquiries about purchasing this document should be directed to:

John Yeatman  
Chief Executive  
Australian Association of Paediatric  
Teaching Centres  
2 Gatehouse Street  
Parkville **VIC** 3052

## PRIVATE SECTOR CODING ADVICE LINE

The Private Sector Casemix Unit is soon to commence a six month pilot program for the provision of an ICD-9-CM Coding Advice Line for the private sector. The need for this type of service has been identified through recognition of the large number of recently trained coders and coders who have not had the benefit of formal training, working within the private sector. It is intended that this advice line will operate complementary to existing support networks such as the State Coding Committees and the NCC Coding Standards Advisory Committee and with formal reporting links to the National Coding Centre.

The major objectives of this program are to:

- \* provide quick easy access to coding advice (we envisage a response time of 48 hours)
- \* ensure accurate and consistent advice
- \* identify possible areas of ambiguity and misinterpretation in code allocation
- \* ensure a sharing of information (i.e. problem coding areas and the solutions found)

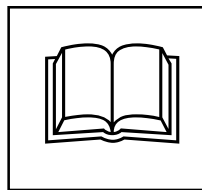
The coding advice line is expected to handle queries from coders within private hospitals and health insurance funds. The Coding Advice Line will not replace the need for continuing coder training. Coders will be expected to pursue all available resources (such as reference materials, clinical advice and the Australian Coding Standards) before turning to the Coding Advice Line. A purpose designed query form will shortly be distributed to all private hospitals and health funds. It is anticipated that the Coding Advice Line will commence operations by April 1, 1995.

To ensure our major objective in establishing this pilot program will be achieved, regular reports detailing the types of queries received and the advice given will be forwarded to the National Coding Centre. The NCC will advise the State Coding Committees of relevant queries which have been, or may need to be, addressed by the State Committees. This will ensure that State Coding bodies are informed of the type of queries emanating from their respective states. After six months the program will be evaluated to determine if there is a continuing need for this type of service or if the service needs to be expanded.

For further information contact:

Karen Hinton  
Acting Director  
Private Sector Casemix Unit  
Australian Private Hospitals Association Ltd  
Suite 1, 25 Napier Close  
DEAKIN ACT 2600  
ph: (06) 285 2716

## PUBLICATION ISSUES



The "*NCC Australian Version of ICD-9-CM*" Book Launch on March 31st 1995 was a great success and a fitting culmination point for 1 years work on the production of this book. Over 60

people from various areas of health services attended the evening, held in the NSW State Library, Sydney. The 4 volume book was well received by all and positive feedback was forthcoming throughout the evening. The *Australian ICD-9-CM* was launched by Dr Stephen Duckett, Secretary of the Commonwealth Department of Human Services and Health. During his opening speech, Dr Duckett stressed the need to develop performance and quality indicators to enable us to prove that Australia's hospital system is "second to none", as is claimed by some sectors of the community.

"If you are to....change the health system and make it more accountable and better for patients and the community as a whole, including the taxpayer, the fundamental basis for that is health information, and.....classification systems", said Dr Duckett, emphasising the importance of coding. Referring to the *Australian ICD-9-CM*, Dr Duckett acknowledged the need for an Australian product with a timely availability, and praised the NCC for completing a project of such high standard. Dr Duckett noted that this Australian publication was much improved by the inclusion of a 4th volume, the Australian Coding Standards.

The new *NCC Australian ICD-9-CM* books are currently being delivered to purchasers all over Australia and New Zealand (and some other countries!), and the orders just keep coming in.

The *Electronic ASCII text list of ICD-9-CM* is now also available from the NCC, containing all current codes effective from 1 July 1995, with flagged entries to indicate valid codes (*see* order form on page 15). The NCC is proud to also present our new sporty NCC baseball caps (*see* order form on page 15), as presented to Dr Duckett at our recent Book Launch. A hat for coders everywhere!! Until next issue...

❖ **Karen Luxford**

## NEW AUSTRALIAN ICD-9-CM CODES EFFECTIVE 1 JULY 1995

From July 1995, new Australian codes will be introduced. An addendum will shortly be distributed by your state/territory health authority with an accompanying guidelines document, as was done at this time last year when the first series of new Australian codes were produced by the NCC.

### However, this year will be different because:

- \* The addendum will be a composite of both American and Australian changes.
- \* It **will not** be necessary to use the addendum to update your books if you have ordered the NCC Australian Version of ICD-9-CM publication for use from 1 July 1995, as the changes in the addendum will already be included in the books.

The addendum is provided to you so that you can identify the changes that are for use from 1 July 1995.

- \* It **will** be necessary to use the addendum to update your books if you intend to use a publication other than the new Australian ICD-9-CM to make them current for use from 1 July 1995.

### ❖ **Kerry Innes**

***Dr Stephen Duckett (Secretary, DHSH) was guest speaker at the NCC Book Launch***



As a preview to the addendum, the **new**

**Australian codes** which will be effective from 1 July 1995 are:

1. **170.01** Malignant neoplasm of craniofacial bones
2. **170.02** Malignant neoplasm of maxillofacial bones
3. **213.01** Benign neoplasm of craniofacial bones
4. **213.02** Benign neoplasm of maxillofacial bones
5. **344.05** Quadriplegia, C1 - C4, complete, acute
6. **344.06** Quadriplegia, C1 - C4, incomplete, chronic
7. **344.07** Quadriplegia, C5 - C7, complete, acute
8. **344.08** Quadriplegia, C5 - C7, incomplete, chronic
9. **733.93** Fibrous dysplasia (monostotic)
10. **V23.61** Duration of pregnancy, < 5 completed weeks
11. **V23.62** Duration of pregnancy, 5 - 13 completed weeks
12. **V23.63** Duration of pregnancy, 14 - 19 completed weeks
13. **V23.64** Duration of pregnancy, 20 - 25 completed weeks
14. **V23.65** Duration of pregnancy, 26 - 33 completed weeks
15. **V23.66** Duration of pregnancy, 34 - 36 completed weeks
16. **V23.69** Unspecified duration of pregnancy

## **CODING EDUCATORS NETWORK “TRAIN - THE - TRAINER” WORKSHOP**

From the 6th - 8th of February 1995, a three day ‘train - the - trainer’ workshop was conducted at the Faculty of Health Sciences, The University of Sydney, for applicants wishing to join the NCC’s Coding Educators Network.

As you may recall, the October 1994 issue of *Coding Matters* carried an advertisement for the Network which sought applications from clinical coders, be they health information managers or clinical/morbidity coders, who had sound experience and expertise as coders and experience in training and education. Applications to join the network were received from 31 clinical coders throughout Australia.

Because it was extremely difficult to determine from written applications how suitable applicants would be in a coding educators’ role, it was decided to bring all applicants into a “train-the-trainer” workshop, the aim of the workshop being:

- \* to educate applicants in the 2nd version of the Australian Coding Standards;
- \* to assess communication/educational skills; and
- \* to encourage interaction between potential members of the network.

A total of 28 applicants to the Coding Educators Network were able to attend the Sydney workshop. In addition, a representative from other relevant educational institutions and organisations involved in clinical classification training also attended the workshop. These included the Schools of Health Information Management from La Trobe University, The University of Sydney and the Queensland University of Technology; the Health Information Management Association’s “Distance Education Program”; and the NSW Open Training and Education Network’s “Medical Record Clerical Course”.

The workshop was conducted with each Network participant preparing and presenting a chapter of the Standards. Presentations were assessed with the assistance of lecturers from the University of Sydney, and thanks are extended to Ms Jennifer Mitchell and Ms Melinda Lewis who assisted with the presentation/communication components of the course. Participant’s presentations were also videoed to allow presenters to assess their own performance and learn from the experience. Coding skills and knowledge of the Standards were assessed via a test/quiz administered by the NCC.

These processes allowed the NCC to determine the suitability of applicants for membership of the Network. It is clear that the majority of applicants are competent clinical coding educators and easily able to undertake training with or on the behalf of the NCC. A small number of applicants require some refining or enhancement of their educational skills and consequently their skills will be further supported and developed by the Centre before being eased into an educational role. Applicants who failed to demonstrate adequate skill and proficiency in the role of coding educator will not be taken on in the capacity of Coding Educator. However, the Centre is keen to maintain the motivation and enthusiasm of these applicants and so may encourage them to partake in educational

***Continued on page 9.....***

***Time out at the trainer workshop....Kerry Innes teaches coding educators how to really juggle!!***





activities through involvement in the administrative and planning aspects of workshops and training sessions.

The services of members of the Coding Educators Network are already being drawn upon as they work with staff from the NCC to deliver the Australian Coding Standards Workshops (*see* page 11 for details). In the long term, these educators will also assist the NCC in other educational programs and activities.

Thank you to all the enthusiastic participants of the workshop. Please join us in welcoming on board members of the...

### **NCC's Coding Educators Network:**

#### *NSW*

Nicole Boyens	Rodney Green
Megan Cumerlato	Judy Redmond
Jane Dimond	Julie Rust
Sue Forsyth	Dianne Sales

#### *Victoria*

Julie Brophy	Maree Taaffe
Jackie Clarke	Alex Toth
Cathy Norrish	Jenni Webster

#### *Queensland*

Debbie Abbott	Joy Smith
Kerri Chalmers	Sallyanne
Helen Cooper	Wissmann

#### *Western Australia*

Barbara Campbell

#### *ACT*

Vicki Bennett

#### *Northern Territory*

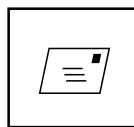
Janine Cassidy

**A photograph of Workshop Attendees appears on page 13 of this issue of *Coding Matters***

☞ Thank you to David Robinson and Nicole Boyens for the photographs in this issue of *Coding Matters*.

## **POSTCARD FROM NEW ZEALAND**

*1 March 1995*



Dear Coding Matters,  
Just a quick note to say hello (that's Kiora in Maori) from New Zealand.  
Joy Smith from the Coding Educators

Network and I are over here in Wellington to conduct a 5 day workshop for clinical coders on behalf of the New Zealand Ministry of Health. We have 30 enthusiastic and highly motivated participants in the course: 7 staff from the Ministry of Health and the remaining 23 each representing a Crown Health Enterprise (akin to a regional/area health service in Australia) from places like Auckland, Wellington, Christchurch, Dunedin and Invercargill.

The workshop is fairly intensive, as it covers not only the Australian Coding Standards (effective in NZ in July 1995) but also topics like Coding and DRGs, Ethics and Coding/Standards for Coding Services and Presentation/Communication Skills. Clinical coders in Australia probably don't realise this, but NZ are currently using the 1986 version of ICD - 9 - CM, so before we did anything, we needed to discuss changes to codes and coding practice between 1986 and 1995 (talk about a quantum leap forward; hang in there New Zealand!!).

The feedback from course participants has been excellent; they really welcome the opportunity to update their knowledge and skills, as well as to interact and network with their colleagues. One interesting point of note is that clinical coders in NZ express many of the same concerns and frustrations as their trans-Tasman counterparts, in terms of poor record documentation, training and continuing education needs and recognition/status issues, and like clinical coders in Australia (and the US for that matter) they too believe they need a society or forum of clinical coders to represent them and their specific needs (a matter the Health Information Association of New Zealand will consider). Anyway bye for now and see you back in Oz. Regards,

***Janelle Craig***

P.S. No such thing as sheep jokes in NZ, just Australian jokes in their place!!

# **THE SECOND ANNUAL**

## ***National Coding***

### ***Centre***

#### **SEMINAR**

#### ***INVITATION TO ATTEND***

The National Coding Centre (NCC) invites you to attend its Second Annual Seminar to be held at Old Parliament House, Canberra, ACT, on the 8 - 9 September 1995.

Following the success of the Inaugural NCC Seminar in 1994, this year's seminar seeks to encourage further debate on important issues related to coding and relevant to all clinical coders nationwide. As such, the theme for the 1995 NCC Seminar is "Managing Coding", a topic which allows us to explore a diverse range of management issues in the domain of coding, such as the management of coding services, potential uses of coded data as a tool for management, and managing codes and classification systems.

#### ***CALL FOR PAPERS***

The National Coding Centre invites the submission of abstracts for papers which address the seminar theme. Authors may wish to focus their paper on the following topics:

- \* Managing the Coding Service
- \* Coding and the Hospital Administrator
- \* Quality Issues in Coding Coding Audits
- \* Coder Competency
- \* Casemix and Coding
- \* Computerised Coding
- \* Ethics in Coding
- \* Coder Education
- \* Developments in Classification Systems
- \* International perspectives in Coding

The NCC will select papers on their relevance to the seminar topics and their written clarity. Guidelines for those wishing to submit an abstract are as follow:

1. Please provide two copies of a typed abstract of the paper (maximum of 500 words).
2. The abstract should include the title of the paper, the author's and the presenter's name, title, position and organisation with address, telephone and facsimile numbers.
3. More than one abstract may be submitted.
4. Abstracts should be submitted to:

Ms Janelle Craig, Coding Education Manager,  
National Coding Centre, PO Box 170,  
LIDCOMBE NSW 2141 by **9 June 1995**

The NCC will notify in writing, of the acceptance or otherwise of papers. The decision on acceptance of papers will be at the discretion of the NCC. Presenters of successful papers will be subsidised by the NCC to attend the seminar by way of payment of full registration fee.

For further information please contact the address above or  
Telephone: (02) 646 6345  
Facsimile: (02) 646 6603

***Pictured (below) at the launch of the NCC Australian ICD-9-CM are Professor John Hickie (Chair, ACCC), Dr Stephen Duckett (Secretary, DSHS) and Ms Rosemary Roberts (Director, NCC)***



# National Coding Centre

## AUSTRALIAN CODING STANDARDS WORKSHOPS

### AIM:

These courses are designed for clinical coders to advise on the use and interpretation of individual coding standards.

### CONTENT:

Workshops will cover standards in the 2nd version of the Australian Coding Standards, with particular emphasis on new or updated standards.

### PARTICIPANTS:

Course participants should be clinical coders (including Health Information Managers who code or manage the Coding Service) who are trained and experienced in the use of ICD - 9 - CM and who actively undertake coding as part of their current duties.

### LOCATION/VENUES/DATES:

Refer to the attached schedule for details of the workshop closest to you. Please note that all workshops are two days in duration, with each day running from 9.00 am to 5.00 pm.

### REGISTRATION FEE:

State/Territory-specific arrangements apply.

### TRAVEL AND ACCOMMODATION:

Travel and accommodation expenses incurred through attendance at the workshops should be met by the participant or their employer/organisation.

### PARKING:

Parking at some venues, particularly, those in capital cities, will be limited. Where possible, you are encouraged to use public transport.

### WHAT TO BRING:

Your Australian Version of ICD - 9 - CM, including Volume 4, the Australian Coding Standards.

(NCC Publication No. AU0195, available exclusively from the NCC).

### HOW AND WHEN TO REGISTER:

You need to register *at least two weeks* before the workshop you wish to attend. For the workshops scheduled early in the program (i.e. NT, ACT, country NSW and Tasmania) you need to register *as soon as possible (and at least one week prior to the session you wish to attend)*.

**If you have not received a registration form as yet please contact:**

**Janelle Craig, on telephone: (02) 646 6345 or facsimile: (02) 646 6603.**

**As *Coding Matters* goes to press, the Westmead & Cessnock Workshops are already full.**

## LOCATIONS/VENUES/DATES

### **\*\*NEW SOUTH WALES\*\***

#### *SYDNEY*

- i) Prince of Wales Hospital (Edmund Blackett Theatre) - 1 & 2 May
- ii) Northern Sydney Education Centre, Wicks Road, North Ryde, (grounds of Macquarie Hospital) - 8 & 9 May
- iii) Westmead Hospital (Auditorium, Education Block) - 11 & 12 May - **FULL**

#### *ORANGE*

Orange Base Hospital (Conference Room) - 18 & 19 May

#### *PORT MACQUARIE*

Sandcastle on the Beach Motel, 16-24 William Street Port Macquarie - 6 & 7 April

#### *WAGGA WAGGA*

Juvenile Justice Centre (Conference Room), Cnr Fernleigh and Glenfield Streets, Wagga Wagga - 10 & 11 April

#### *LISMORE*

Coraki Conference Centre (Rayner Room), The Campbell Hospital, Coraki - 10 & 11 April

#### *TAMWORTH*

Rural Health Education and Research Centre (Conference Room 2), Dean Street, Tamworth - 10 & 11 April

#### *NEWCASTLE*

Allandale Nursing Home (Nurses' Home), Allandale Road, Cessnock - 15 & 16 May - **FULL**

*Continued on page 12.....*

## **\*\*NORTHERN TERRITORY\*\***

### *DARWIN*

Royal Darwin Hospital (Room 3, Staff Development Centre, 1st Floor, Building 4) - 3 & 4 April

## **\*\*AUSTRALIAN CAPITAL TERRITORY\*\***

### *CANBERRA*

Woden Valley Hospital (Seminar Room, Building 5) - 6 & 7 April

## **\*\*TASMANIA\*\***

### *LAUNCESTON*

Launceston General Hospital (Function Room 2, Level 2) - 20 & 21 April

## **\*\*QUEENSLAND\*\***

### *BRISBANE*

- i) Mater Public Hospital (Des O'Calligan Auditorium) - 4 & 5 May
- ii) Mater Public Hospital (Des O'Calligan Auditorium) - 18 & 19 May

### *CAIRNS*

Cairns Education Centre, 73 Greenslopes St, Cairns - 2 & 3 May

### *ROCKHAMPTON*

Rockhampton Base Hospital (Conference Room B, Yangulla Centre) - 4 & 5 May

### *TOOWOOMBA*

Toowoomba Base Hospital (Suite 1, Freshney House) - 15 & 16 May

## **\*\*WESTERN AUSTRALIA\*\***

### *PERTH*

- i) Department of Health of WA (Seminar Rooms), 189 Royal Street, Perth - 22 & 23 May
- ii) Two additional workshops will be organised by Ms Barbara Campbell. Please contact her on (09) 222 4164 for further details

## **\*\*SOUTH AUSTRALIA\*\***

### *ADELAIDE*

- i) AMA House, 80 Brougham Place, North Adelaide - 25 & 26 May (Public Sector Coders)
- ii) AMA House, 80 Brougham Place, North Adelaide - 5 & 6 June (Private Sector Coders)

## **\*\*VICTORIA\*\***

### *MELBOURNE*

- i) Mercy Public Hospital (Lecture Theatre) - Day 1 - 14 June & Day 2 - 21 June
- ii) Mercy Public Hospital (Lecture Theatre) - Day 1 - 16 June & Day 2 - 23 June

*Continued top of next column.....*

iii) Mercy Public Hospital (Lecture Theatre) - Day 1 - 17 June & Day 2 - 24 June

### *TRARALGON*

La Trobe Regional Hospital (Lecture Hall, Education Centre, Traralgon Campus) - 8 & 9 June

### *WANGARATTA*

Wangaratta District Base Hospital (Conference Room) - 13 & 14 June

### *BENDIGO*

Anne Caudle Centre (Banksia Room), 100-104 Barnard Street, Bendigo - 19 & 20 June

### *GEELONG*

Grace McKellar Centre (Alan David Hall, "The Hub"), 45-95 Ballarat Road, North Geelong - 26 & 27 June

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## **CODING SOCIETY/FORUM UPDATE**

Readers of *Coding Matters* who are also members of the Health Information Management Association of Australia (HIMAA), or were at the NCC Inaugural Seminar in November 1994, will be aware that the HIMAA is working towards the formation of a Coding Society/Forum (name yet to be decided!). For those who have not heard about the Coding Society/Forum before, it is being set up as a group to support coders in educational, industrial and marketing areas. The rationale for establishing a Coding Society/Forum is based on the premise that with the development of coder accreditation and the increasing emphasis on coding and coding accuracy at both the hospital and government level, coders will need a support group to which they can belong.

To date the response from those who have heard about the Coding Society/Forum has been very encouraging and the next step is to set up a Steering Committee to assist with establishing the Society and its rules of conduct (constitution). Anyone, involved with coding, who is interested in helping to establish the Coding Society/Forum or would just like further information is asked to contact:-

Anne Irwin  
Executive Officer  
Health Information Management  
Association of Australia  
P.O. BOX 1458  
PARRAMATTA NSW 2124  
Ph. (015) 436 708  
Fax. (02) 899 7097

***The***  
***WESLEY HOSPITAL***

**CLINICAL CODER**

The Wesley Hospital is the largest private hospital in Queensland. It has 335 beds including Maternity, Psychiatry, Paediatric, Oncology and general surgical and medical inpatient services. Approx. 27,000 patients were seen in 1994 across these speciality services.

The primary function of this position is to classify patient episodes using ICD-9-CM. The successful applicant will participate in quality assurance activities associated with the collection of morbidity and casemix data. S/he will be using the 3M Coding & Grouping Software and will be involved with Casemix developments within the hospital.

We invite applications from suitably qualified, enthusiastic persons for this position. Preference will be given to those applicants with a qualification in ICD-9-CM from a recognised program or extensive experience in this field.

Salary will be equivalent to the A03 Queensland Public Award (approx. \$28,000 - \$31,500) and conditions will be in accordance with Hospital Board policy.

Enquires should be directed to Mrs Sara Graham on ph: (07) 377 7279 before Friday 12th May 1995.

TV Trivia....  
Strange, but true...

**Q.** Which long-running TV series features a spaceship with the identifying code "NCC - 1701 - A"? What is the name of the spaceship?

**A.** Star Trek. Federation Starship "Enterprise".

***Pictured below are the NCC "Train - the - Trainer" Workshop Attendees (February 1995)***

New from the NCC

## ***Electronic ASCII Text List of ICD-9-CM\****

Order Now...Only **\$300** (including postage within Australia)



Buy the most current Australian information



Full text descriptions



All ICD-9-CM codes (diseases and procedures)  
effective from 1 July 1995



Field separated, text delimited entries



Valid codes are flagged for your convenience



Including V codes and E codes

***This new ASCII list is ideal for database-type applications.***

\* Not for resale. Free of licencing agreements when used within one facility or when incorporated into software intended for resale.

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**New NCC Cap**

### **Coders.....**

Don't just put on your thinking cap...

Put on your coding cap!

Get into the coding spirit - Why have just any old cap, when you can buy an NCC Baseball Cap?

These new black caps with stylish red & white embroidery are now available from the NCC for only **\$15** (including postage within Australia), and can be ordered on the form below.

Be a sport and show your true coding colours!! Order your cap now..

***Pictured on the left are NCC models Megan and Michelle sporting our new NCC baseball caps***

**These 2 new products are now available from the NCC. To place an order just complete the order form on the opposite page and post your order to the NCC as detailed on the order form. If you haven't yet ordered your NCC Australian ICD-9-CM coding books, telephone us on ph: (02) 646 6461 and ask for an order form to be sent to you.**



# National Coding Centre

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**Lidcombe NSW 2141**  
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# Coding *Matters*

April 1995  
Vol. 1 No. 4

National Coding Centre  
PO Box 170  
Lidcombe NSW  
Australia 2141

Phone: (02) 646 6461  
Fax: (02) 646 6603

Editor: Karen Luxford



ISSN 1322-1922

Subject to availability of space, advertisements will be accepted for forthcoming issues of *Coding Matters*. The deadline for submissions for the July newsletter issue is 23 June, 1995.

Call ph: (02) 646 6478 for inquires on advertising rates.

**Dr Karen Luxford, NCC Publications Manager, speaking at the launch of the Australian Version of ICD-9-CM. Karen has worked tirelessly on this publication which will be a constant companion to Australian clinical coders for the next few years. Thank you & congratulations Karen.**

## Medical Record Moments.....

☹ We hope this poor patient was "fasting" and not "farting" on the day of surgery!! Just an example of the problems faced by coders when interpreting handwriting on medical records.....

## Coder Bumper Sticker Competition

😊 Seriously now, let's have a bit of fun!! 😊

"Old coders never die, they..... "  
"Coders do it....."

Enter our competition by coming up with a catchy bumper sticker text for coders (keep it short please!) and win an NCC Baseball Cap and copies of the stickers printed with your winning phase. The above phrases are only suggestions.

To enter, post your suggestion and address details to:

**National Coding Centre  
Sticker Competition  
P.O. Box 170  
LIDCOMBE NSW 2141**

Entries close 23 June 1995 and the winner will be announced in the July 1995 issue of *Coding Matters*.