



# **ICD-10-CM Coding Workbook for OB/GYN**

*Specialty coding guidance for ICD-10-CM*

**2016**

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## Case Study #8—Ablation of Endometriosis and Endometria

### 1. Determine the appropriate diagnosis codes to indicate why the procedure was performed.

**N92.0 Excessive and frequent menstruation with regular cycle**

**D50.0 Iron deficiency anemia secondary to blood loss (chronic)**

**N80.3 Endometriosis of pelvic peritoneum**

**N73.6 Female pelvic peritoneal adhesions (postinfective)**

*The surgeon does not indicate if this is menopausal/climacteric menorrhagia, or if the patient is pre- or postmenopausal, but the patient's age (41) does rule out pubertal menorrhagia. As further information is not available, code N92.0 is the best choice, as notes included with this code indicate that it is used for menorrhagia NOS. In this situation, additional review of the admission note may reveal more information, or the coder could ask the surgeon whether the patient was premenopausal or menopausal as existing documentation does not support a more specific code.*

*In the indications paragraph, the surgeon further defines the menorrhagia as "resulting in anemia." Menorrhagia is the loss of blood and is a chronic, rather than an acute, condition. In this circumstance the coder should report D50.0. The index main term "Anemia" refers the user to D64.9, for other anemia, but there is more information in the operative report that would allow more specific coding. The subterms "chronic, blood loss" refer the coder to D50.0. Note that the ICD-10-CM guidelines do not yet include information for chapter three.*

*The endometriosis is noted to be in the cul-de-sac. The index main term "Endometriosis" and subterm "cul-de-sac" refer the user to code N80.3 for the pelvic peritoneum. It is important to note that the endometriosis is not confined to the uterus.*

*The pelvic adhesions of the bowel to the uterus can be reported. It is important to note that the adhesions are separate from the endometriosis and are therefore a separate condition treated by the surgeon. The index main term "Adhesions" and subterms "peritoneum/peritoneal" and "to uterus" leads the user to code N73.6. The subterm "bowel" refers the user to "peritoneum." As with any coding scenario, it is important to verify the codes in the tabular list and review any printed notes.*

### 2. When looking at the alphabetic index, how does the coder use the words in parentheses?

- a. They must be in the physician's diagnostic statement
- b. They are examples of terms that may be included in the diagnostic statement**
- c. The coder can decide how to use them
- d. They are clues to selecting the appropriate CPT code to report with the diagnosis code

*Parenthetical words are considered supplementary words. They may be present but are not required to be part of the diagnostic statement. The ICD-10-CM guidelines also indicate that parenthetical terms are nonessential modifiers (see 1.A.7). The parenthetical main term "Chronic" is not required to report code N50.0, but it does differentiate the code from codes describing acute bleeding. The parenthetical term "postinfective" with code N73.6 indicates that the same code would be used even if the bowel adhesion were from a peritoneal infection.*

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**3. What are key terms to selecting the anemia code?**

- a. Hematocrit
- b. Menopause
- c. Blood loss**
- d. All of the above

*The anemia code is selected based upon the physician's diagnostic statement. It does not depend on meeting specific laboratory values. Menopause may contribute to the anemia. The surgeon's note specifically states that the anemia is due to the menorrhagia; thus the main term "Blood loss" is a key term to determining the type of anemia.*

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**4. What is the definition of menorrhagia?**

- a. Frequent vaginal bleeding
- b. Bleeding with intercourse
- c. Regular menstrual cycles in puberty

**d. Excessive and frequent vaginal bleeding**

*The code description defines menorrhagia as excessive and frequent bleeding, as do medical dictionaries. Stedman's Medical Dictionary lists the synonym as "hypermenorrhea."*

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**5. It is incorrect to report a separate code for both the endometriosis and the bowel adhesions.**

- a. True
- b. False**

*Endometriosis is often associated with adhesions, especially of the uterus to other pelvic organs. However, endometriosis is diagnosed by the type of tissue and the specific appearance. Adhesions can be any type of tissue and often occur due to some type of change such as prior surgery or infection. In this operative report, the endometriosis is of one specific site, and the dense adhesions are a separate condition of another site.*