

Disorders of the Conjunctiva (H10-H11)

Conjunctivitis is an inflammation of the conjunctiva, usually caused by viruses, bacteria, or allergies. Conjunctivitis can sometimes last for months or years. This type of conjunctivitis may be caused by conditions in which an eyelid is turned outward (ectropion) or inward (entropion), problems with the tear ducts, sensitivity to chemicals, exposure to irritants, and infection by particular bacteria—typically *Chlamydia*. Conjunctivitis is coded with category H10.—. The diagnosis is coded to the highest level of specificity. Selections are based on etiology and manifestation in some conditions. The following is an example:

EXAMPLE: *A patient has acute toxic conjunctivitis in both eyes.*

Alphabetic Index:

Conjunctivitis → *acute* → *toxic* → H10.21—

Tabular List:

H10.213 → *Toxic conjunctivitis, bilateral*

Correct Code:

H10.213

Note the sixth character “3” identifies that the condition affects both eyes.

Disorders of Lens (H25-H28)

CATARACTS

A cataract is a cloudiness (opacity) in the eye's lens that impairs vision. Over time, cataracts produce a progressive loss of vision. Cataracts are most common in older adults but can be congenital or traumatic (due to trauma to the eye). Diabetes can also be the cause of cataracts.

A cataract can be seen while examining the eye with an ophthalmoscope (an instrument used to view the inside of the eye). The exact location of the cataract and the extent of its opacity can be viewed by an instrument called a slit lamp. Surgery is the choice for most patients with this condition, when vision hampers driving, daily tasks, etc. Eyeglasses and contact lenses may improve vision without surgery.

Cataract surgery, which can be performed on a person of any age, usually does not require general anesthesia or an overnight hospital stay. During the operation

the human lens is removed and usually an intraocular lens (lens implant) is inserted. Usually, a patient's vision can be restored without the use of contact lenses or glasses, but these aids may be necessary to sharpen vision after cataract surgery. Review Figure 6.15, which is an example in the Alphabetic Index of a traumatic cataract.

FIGURE 6.15 Excerpt from the Alphabetic Index: *Traumatic Cataract*

Cataract
traumatic H26.10-
 localized H26.11-
 partially resolved H26.12-
 total H26.13-

Now review the following example. Open the codebook and locate the correct code beginning with the Alphabetic Index and reference the Tabular List.

EXAMPLE: *A 30-year-old male patient who suffered an eye injury in an accident is referred to an ophthalmologist for evaluation. The patient complains that since his accident, he is experiencing a complete loss of vision in the left eye. After taking a comprehensive history and performing an ophthalmologic examination, the physician diagnoses a total traumatic cataract of the left eye. The physician discusses options with the patient, and the patient will follow up in one month for a recheck.*

Alphabetic Index:

Cataract → *traumatic* → *total* → H26.13—

Tabular List:

H26.13 → *left eye* → H26.132

Note: Laterality is critical when selecting the appropriate sixth character, which identifies right, left, or unspecified eye.

Correct Code:

H26.132

Now review this example and locate the correct code(s).

EXAMPLE: *A 68-year-old male patient is examined by an ophthalmologist. The patient complains of reduced vision that makes it impossible to see traffic lights or signs clearly when driving. The physician examines the patient with a slit lamp and diagnoses a mature senile cataract of the right eye. Cataract extraction with an intraocular lens implant is scheduled for the next week.*

Alphabetic Index:

Cataract → *senile* → H25.9

Tabular List:

H25.9 → *Unspecified age-related cataract*

Correct Code(s):

H25.9 *Unspecified age related cataract*

CODING TIP When no more information is available, use the unspecified code. It is recommended that the practitioner is queried if possible before selecting an unspecified code.

CODING TIP When the note states to code the underlying condition first, the underlying condition is the first listed diagnosis.

DISORDERS OF THE CHOROID AND RETINA (H30-H36)

The retina is the light-sensitive membrane on the inner surface of the back of the eye. The optic nerve extends from the brain to about the center of the retina and then branches out. The central area of the retina, called the macula, contains the highest density of light-sensing nerves and, thus, produces the sharpest visual resolution. The retinal vein and artery reach the retina near the optic nerve and then branch out, following the paths of the nerves. Like the optic nerve and its branches, the retina itself has a rich supply of vessels that carry blood and oxygen. The cornea and lens near the front of the eye focus light onto the retina. Then, the branches of the optic nerve sense the light and the optic nerve transmits it to the brain, where it is interpreted as visual images.

Retinal Detachment

Retinal detachment is the separation of the retina from its underlying support. Detachment may begin in a small area, but if it is not treated, the entire retina can detach.

Retinal detachment is painless, and some common symptoms are as follows:

- Images of irregular floating shapes
- Flashes of light
- Blurred vision
- Vision loss

Vision loss begins in one part of the visual field, and, as the detachment progresses, the vision loss spreads. If the macular area of the retina becomes detached,

vision rapidly deteriorates and everything becomes blurred. An ophthalmologist will diagnose this condition by examining the retina through an instrument used to view the inside of the eye.

Review the following example. Open the ICD-10-CM codebook and locate the main term “detachment.”

EXAMPLE: *A patient is diagnosed with a partial retinal detachment with giant tear of the left eye.*

Alphabetic Index:

Detachment → *retina* → *with retinal break* → *giant* → H33.03-

Tabular List:

H33.032 → *retinal detachment with giant retinal tear, left eye*

Correct Code:

H33.032

CODING TIP Many of the diagnosis codes related to conditions/diseases of the eye include laterality in the code. If the laterality is not documented, it is recommended that the provider is queried instead of selecting an unspecified code.

EXAMPLE: *A 68-year-old patient experiences sudden vision loss with the sensation of a veil over his right eye. He is seen by his ophthalmologist the same day. The ophthalmologist examines the patient and diagnoses him with proliferative vitreo-retinopathy with retinal detachment. The patient is scheduled for laser therapy to be performed that afternoon.*

Alphabetic Index:

Detachment → *retina (without retinal break) (serous)* → *traction* → H33.4-

Tabular List:

H33.4 → *Traction detachment of the retina, right eye* → H33.41

Correct Code:

H33.41

Diabetic Retinopathy

This condition may occur in people with type 1 and type 2 diabetes. This condition is among the leading causes of blindness. Diabetes affects the retina because high blood glucose levels make the walls of small blood vessels thicker but weaker and, therefore, more prone to deformity and leakage.

The types of retinopathy are as follows:

- Background diabetic retinopathy (nonproliferative)
- Proliferative diabetic retinopathy

CHECKPOINT EXERCISE 6-3

Using the ICD-10-CM manual, code the following:

1. _____ Leprosy with infective dermatitis of left eyelid
2. _____ Cataract, senile, bilateral
3. _____ Lattice corneal dystrophy, bilateral
4. _____ Proliferative diabetic retinopathy in a patient with uncontrolled type 1 diabetes
5. _____ Optic neuritis
6. _____ After cataract, right eye
7. _____ Scleritis, left eye
8. _____ Blepharospasm, both eyes
9. _____ Eye strain
10. _____ Glaucoma with bilateral central retinal vein occlusion
11. _____ A 53-year-old hyperopic woman with a family history of angle closure glaucoma was previously noted to have an intraocular pressure of 22. She returns for further diagnostic evaluation by gonioscopy. After a comprehensive ophthalmic examination, the physician diagnoses narrow-angle glaucoma of both eyes.
12. _____ A 67-year-old man sees his ophthalmologist with sudden loss of vision (right eye) in an otherwise normal eye. The patient is found to have a subretinal hemorrhage in the posterior pole, obscuring examination of the deeper ocular elements. Intravenous fluorescein angiography cannot demonstrate any abnormalities of the posterior pole. The patient undergoes indocyanine-green video angiography, which detects a treatable subretinal neovascular membrane. The subretinal neovascular membrane is treated with laser photocoagulation.
13. _____ A 60-year-old white man, who is noted to have a pigmented choroidal lesion on the right eye, is referred for evaluation and documentation. The dilated examination shows a 5 × 6-mm pigmented choroidal mass in the right eye that is slightly elevated.
14. _____ A 64-year-old with a recent onset of decreased vision is diagnosed with senile cataracts of both eyes and macular drusen.
15. _____ A 32-year-old with a 12-year history of type 1 diabetes has blurred vision and sudden onset of vitreous floaters in the left eye.

Chapter 8, Diseases of the Ear and Mastoid Process (H60-H95)

Chapter 8 in the Tabular List includes the following sections:

- Diseases of external ear (H60-H62)
- Diseases of middle ear and mastoid (H65-H75)
- Diseases of inner ear (H80-H83)
- Other disorders of ear (H90-H94)
- Intraoperative and postprocedural complications and disorders of ear and mastoid process, not elsewhere classified (H95)

The ear is the organ of hearing and balance and consists of the outer, middle, and inner ear. The outer ear captures sound waves that are converted into mechanical energy by the middle ear. The inner ear converts the mechanical energy into nerve impulses, which then travel to the brain. The inner ear also helps maintain balance.

DISEASES OF THE EXTERNAL EAR (H60-H62)

Otitis Externa

Otitis externa is an infection of the ear canal. The infection may affect the entire canal, as in generalized external otitis, or just one small area, as with a boil.