



Guide to Clinical Validation and Documentation Improvement for Coding

Supporting ICD-10-CM and -PCS code
assignments with clinical documentation

2024

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Candidiasis

B37.2	Candidiasis of skin and nail	
B37.41	Candidal cystitis and urethritis	CC HAC
B37.49	Other urogenital candidiasis	CC HAC
B37.7	Candidal sepsis	MCC
T80.211A	Bloodstream infection due to central venous catheter	CC HAC
T83.510A	Infection and inflammatory reaction due to cystostomy catheter, initial encounter	CC
T83.511A	Infection and inflammatory reaction due to indwelling urethral catheter, initial encounter	CC HAC
T83.512A	Infection and inflammatory reaction due to nephrostomy catheter, initial encounter	CC
T83.518A	Infection and inflammatory reaction due to other urinary catheter, initial encounter	CC HAC
T83.590A	Infection and inflammatory reaction due to implanted urinary neurostimulation device, initial encounter	CC
T83.591A	Infection and inflammatory reaction due to implanted urinary sphincter, initial encounter	CC
T83.592A	Infection and inflammatory reaction due to indwelling ureteral stent, initial encounter	CC
T83.593A	Infection and inflammatory reaction due to other urinary stents, initial encounter	CC
T83.598A	Infection and inflammatory reaction due to other prosthetic device, implant and graft in urinary system, initial encounter	CC

Diagnosis: *Candida* (candidosis) (monilial); sepsis (disseminated) (systemic) (candidemia); urinary tract infection (unspecified) (pyelonephritis) (candiduria); UTI due to CVC, cystostomy, indwelling urethral, nephrostomy, or other urinary catheter, implanted sphincter, neurostimulation device, urinary sphincter, stent, or other prosthetic device)

Note: This clinical review is limited to *Candida* infections related to sepsis/candidemia, urinary tract infections/candiduria, and diaper rash.

Discussion

Candida is a yeast fungal microorganism and some species are endogenous or part of the body's normal flora in certain surface areas and organs. Pathogenic infection, candidiasis, develops when certain conditions promote overgrowth. The conditions that promote overgrowth are predisposing factors or high-risk physiological factors: damaged skin, antibiotic (broad-spectrum) use, which alters the body's normal flora, immunocompromised state (AIDS, chemotherapy, cancer/leukemia, transplant status, dialysis status, steroid use), burns, diabetes, neutropenic state, presence of invasive or indwelling catheter, CVC, or urinary stent, low birth weight newborn, ICU patient, xerostomia, extremes of age, female, bladder dysfunction/stasis or urinary tract obstruction/abnormality, urinary tract instrumentation.

Control of Hemorrhage

Control. Stopping or attempting to stop, postprocedural or other acute bleeding.

Ø93*	Control/Ear, Nose, Sinus
ØW3*	Control/Anatomical Regions, General
ØX3*	Control/Anatomical Regions, Upper Extremities
ØY3*	Control/Anatomical Regions, Lower Extremities

Procedure: (initial) (successful) control of post-op or other acute bleed/hemorrhage (not requiring a more specific root operation procedure such as bypass, detachment, excision, extraction, reposition, replacement or resection), control of epistaxis

Discussion

ICD-10-PCS defines the root operation Control as, “stopping, or attempting to stop, postprocedural or other acute bleeding.” Procedures that fall under root operation Control include:

- Ligation of arterial bleeders
- Cautery or fulguration of source of bleed
- Tamponade (i.e., balloon inflation)
- Vasopressin injection or infusion
- Silver nitrate instillation, irrigation, or chemical cautery with sticks
- Oversewing
- Absorbable Hemostats (i.e., SURGICEL®, Arista™ AH)
- Bakri balloon

The site of the bleeding is most often coded as an anatomical region and not to a specific body part. For example, control of post-tonsillectomy hemorrhage is reported with ØW33XZZ Control bleeding in oral cavity and throat, external approach. The root operation Control is also included in one other body system outside of the Anatomical Regions; the Ear, Nose, Sinus (9) body system with only the body part of Nasal Mucosa and Soft Tissue as an option.

According to ICD-10-PCS guideline B3.7: “Control is the root operation coded when the procedure performed to achieve hemostasis, beyond what would be considered integral to the procedure, utilizes techniques (e.g., cautery, application of substances or pressure, suturing, or ligation or clipping of bleeding points at the site) that are not described by a more specific root operation definition, such as Bypass, Detachment, Excision, Extraction, Reposition, Replacement, or Resection. If a more specific root operation definition applies to the procedure performed, then the more specific root operation is coded instead of control.”

Examples:

Silver nitrate cautery to treat acute nasal bleeding is coded to the root operation Control.

Liquid embolization of the right internal iliac artery to treat acute hematoma by stopping blood flow is coded to the root operation Occlusion.

Suctioning of residual blood to achieve hemostasis during a transbronchial cryobiopsy is considered integral to the cryobiopsy procedure and is not coded separately.

Sedimentation Rate-Increased Level**Reference Range:** Male 0-20 mm/hr; Female 0-30 mm/hr**Hospital Range:** _____

Condition	Signs & Symptoms	Treatment
Cancer of stomach	Weakness, constipation, abdominal pain, anorexia, weight loss, hematemesis, melena	Chemotherapy, radiation therapy, surgery, pain medications
Endocarditis, bacterial	Skin lesions, weight loss, weakness, sweating, fever, heart murmur	Intravenous fluids, antibiotic therapy
Infarction, myocardial, acute	Severe chest pain, gallop rhythm and other cardiac arrhythmias, shortness of breath, diaphoresis	Continuous monitoring, O ₂ therapy, pain medication, intravenous fluids, intravenous medications, possible resuscitation
Infections (acute)	Fever, malaise, chills	Intravenous fluids, antibiotic therapy

Serum Glutamic-Oxaloacetic Transaminase (SGOT)-Increased Level**Reference Range:** 0-35 Units/L.**Hospital Range:** _____

Condition	Signs & Symptoms	Treatment
Embolism, pulmonary	Dyspnea, rales in lungs, sudden onset of substernal pain, dizziness, pallor	Heparin, diuretics
Failure, heart, congestive, all forms except unspecified	Peripheral edema, shortness of breath; cyanosis is present on occasion; heart rate is irregular; moist rales at base of lungs with productive cough; confusion is usually present	Sodium-restricted diet, digitalis regulation, O ₂ therapy, diuretics
Infarction, myocardial, acute	Severe chest pain, gallop rhythm and other cardiac arrhythmias, shortness of breath, diaphoresis	Continuous monitoring, O ₂ therapy, pain medication, intravenous fluids, intravenous medications, possible resuscitation

Serum Glutamic-Pyruvic Transaminase (SGPT) (ALT)-Increased Level**Reference Range:** 0-35 Units/L**Hospital Range:** _____

Condition	Signs & Symptoms	Treatment
Infarction, myocardial, acute	Severe chest pain, gallop rhythm and other cardiac arrhythmias, shortness of breath, diaphoresis	Continuous monitoring, O ₂ therapy, pain medication, intravenous fluids, intravenous medications, possible resuscitation
Failure, heart, congestive, all forms except unspecified	Peripheral edema, shortness of breath; cyanosis is present on occasion; heart rate is irregular; moist rales at base of lungs with productive cough; confusion is usually present	Sodium-restricted diet, digitalis regulation, O ₂ therapy, diuretics