

# Medical Coding ICD-10-PC

#### INPATIENT PROCEDURE CODING

#### Selection of Principal Procedure

The following instructions should be applied in the selection of the principal procedure and clarification on the importance of its relation to the principal diagnosis when more than one procedure is performed.

1. Procedure was performed for definitive treatment of both the principal

diagnosis and secondary diagnosis.

a. Sequence procedure was performed for definitive treatment most related to a principal diagnosis as the principal procedure.

2. Procedure was performed for definitive treatment, and diagnostic procedures were performed for both the principal diagnosis and secondary diagnosis. a Sequence procedure was performed for definitive treatment most

related to a principal diagnosis as the principal procedure.

3. A diagnostic procedure was performed for the principal diagnosis, and a procedure was performed for definitive treatment of a secondary diagnosis.

a. Sequence diagnostic procedure as the principal precedure, since the procedure most related to the principal diagnosis takes precedence.

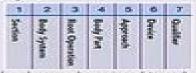
4. No procedures are performed that are related to the principal diagnosis; procedures were performed for definitive treatment, and diagnostic procedures were performed for secondary diagnosis.

a Sequence procedure was performed for definitive treatment of a secondary diagnosis as the principal procedure, since there are no procedures (definitive or nondefinitive treatment) related to the principal diagnosis.

#### ICD-10-PCS Coding Conventions

A1 ICD-10-PCS codes are composed of seven characters. Each character is an axis of classification that specifies information about the procedure performed. Within a defined code range, a character specifies the same type of information in that axis of classification.

EX: The fifth axis of classification specifies the approach in sections 0 through 4 and 7 through 9 of the system



A2 One of 34 possible values can be assigned to each axis of classification in the seven-character code: they are the numbers 0 through 9 and the alphabet (except I and O because they are easily confused with the numbers 1 and 0). The number of unique values used in an axis of classification differs as needed. EX: Where the 58th axis of classification specifies the approach, seven different

approach values are currently used to specify the approach.

A3 The valid values for an axis of classification can be added to as needed.

EX: If a significantly distinct type of device is used in a new procedure, a new device value can be added to the system.

At As with words in their context, the meaning of any single value is a combination of its asia of classification and any preceding values on which it may be

EX: The meaning of a body part value in the Medical and Surgical section is always dependent on the body system value. The body part value 0 in the Central Nervous body system specifies firsin and the body part value 0 in the Peripheral Nervous body system specifies Cervical Plexus.

A5. As the system is expanded to become increasingly detailed, over time more values will depend on preceding values for their meaning.

EX: In the Lower Joints body system, the device value 3 in the root operation insertion specifies infusion Device and the device value 3 in the root operation. Replacement specifies Ceramic Synthetic Substitute.

- A6 The purpose of the alphabetic index is to locate the appropriate table that contains all information necessary to construct a procedure code. The PCS tables should always be consulted to find the most appropriate valid code.
- AT It is not required to consult the index first before proceeding to the tables to complete the code. A valid code may be chosen directly from the tables.
- All seven characters must be specified to be a valid code. If the documentation is incomplete for coding purposes, the physician should be queried for the mecessary information.
- A9 Within a PCS table, valid codes include all combinations of choices in characters 4 through 7 contained in the same row of the table. In the example below, DICPY37Z is a valid code, and DICPYX7Z is not a valid code.

Body Part	Approach	Device	On the last
X: Upper Muscle Y: Lower Muscle	0: Open 3: Percutaneous 4: Percutaneous Endoscopic	Drainage Dovice     Autologous Tissue Substitute     Symbetic Substitute     Nonautologous Tissue Substitute     Nonautologous Tissue Substitute	Z Mone
X: Upper Muscle Y: Lower Muscle		M: Stimulator Lead Y: Other Device	Z
	X: External	Drainage Device     M: Stimulator Lead	None

A18 "And," when used in a code description, means "and/or."

6 Martinal and Scientifical

EX: Lower Arm and Whist Muscle means lower arm and/or wrist muscle.

A11 Many of the terms used to construct PCS codes are defined within the system. It is the coder's responsibility to determine what the documentation in the medical record equates to in the PCS definitions. The physician is not expected to use the terms in the PCS code descriptions, nor is the coder required to query the physician when the correlation between the documentation and the defined PCS terms is clear.

EX: When the physician documents "partial resection," the coder can inde-pendently correlate "partial resection" to the root operation Excision without querying the physician for clarification.

#### ICD-10-PGS Sections & Subsections

0. Medical and Surgical Central Nonrous Systems Peripheral Nervous System Heart and Great Vessels Ulpipier Airtemes Lower Arteries Upper Weins. Lower Veins Lymphatic and Hemic Systems. Elar, Noses, Siecus. Respiratory System Mouth and Throat Gestrointestinal System Hopatobiliary System and Pancreas

Subcutaneous Tissue and Fascia

Endocrine System

Skim and Breast

Muscles Feedors Bursae and Ligaments Head and Facial Bones Upper Bones Lower Bones Uppper Joints Lower Joints Urinary System Female Reproductive System Male Reproductive System. Anatomical Regions: General Anatomical Regions: Upper Extremities Amatomical Regions: Lower Extremities

Observation.

2. Placement

Anatomical Regions Anatomical Ordinos 3. Administration 4. Measurement and Monitoring 5. Extracorporoal or Systemic Assistance and Providentance

Extracorporeal or Systemic Thorapies

7. Osteopothic

8. Other Procedures

9. Chiropractic

B. Imaging C. Nuclear Medicine D. Radiation Therapy

Physical Rehabilitation and Diagnostic Audiology G. Montal Health

H. Substance Abuse Treatment

X. New Technology

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SJ Ball

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