

Internal Medicine Coding Alert

Coding Changes: ICD-9 2011 Solves Partial Removal Stumper

Squeeze these V90 retained fragment codes onto fall tickets.

When you can't get all of a splinter out, a new diagnosis code series will soon tell the story.

Internists are familiar with foreign body removal that gets only part of the object \ and come this fall they'll have a diagnosis code that explains the condition.

Pieces of wood, glass, or bullet shrapnel might be left in during foreign body removal. The fragment may break or split, making removing the entire foreign body impossible.

This condition has stumped many an internists. Sometimes, with a wood splinter removal, the procedure removes some foreign body, but not all of it, related one Atlanta internist. Is the FBR ICD-9 code still appropriate? In the event, the patient had further FBR done at another encounter, would using the FBR diagnosis at the initial FBR encounter mean future claims using the same ICD-9 code would be denied?

Add These V90 Codes to Your Diagnosis Charge Ticket

ICD-9 2011 solves both dilemmas. Effective Oct. 1, 2010, you can indicate a foreign body was partially removed. You can even indicate a follow-up check for infection after complete removal with a new code for personal history of retained foreign body fully removed (V15.53).

Check out the below list for fragment codes you should squeeze onto your super bill. Internists might use ICD-9 codes for retained fragments of:

