

Internal Medicine Coding Alert

Reader Questions: Deduce Angina Type Before Coding

Question: What is the proper diagnosis code for "angina pectoris"?

Missouri Subscriber

Answer: Also known as simply "angina," angina pectoris is the medical term for chest pain, usually caused by coronary artery disease. Patients may experience angina as constricting chest pain, perhaps radiating to the left shoulder and arm. Angina often presents as "attacks" that occur with provocation, such as exercise or emotional excitement. Several types of angina exist, and they have corresponding diagnosis codes:

- Stable angina occurs when a patient has recurring episodes of fairly predictable chest pain -- regularly occurring with exertion, for instance. Report stable angina not classified with any more information as 413.9 (Other and unspecified angina pectoris).
- Unstable angina occurs unpredictably or suddenly increasing in severity or frequency. Attacks may occur without provocation, may not respond to nitroglycerin and may be of unusually long duration. This condition can be an immediate precursor to a heart attack. If the patient presents with unstable angina and does not advance to a more serious condition, you should code it as 411.1 (Intermediate coronary syndrome).
- Variant angina (also called Prinzmetal angina) occurs while the patient is lying down and at rest. The cause is transient spasm of the coronary artery, which is often associated with ST-segment elevations on an electrocardiogram (ECG). Code this condition as 413.1 (Prinzmetal angina).

-- Answers to You Be the Coder and Reader Questions were reviewed by **Bruce Rappoport, MD, CPC, CHCC**, a board-certified internist and medical director of Broward Health's Best Choice Plus and Total Claims Administration in Fort Lauderdale, Fla.