

ICD 10 Coding Alert

Reader Question: Differentiate Acidosis and Alkalosis For Correct Code Choice

Question: A patient presents with severe asthma (J45.xx) and develops fever (R50.9), wheezing (R06.2) and fatigue (R53.83). Tests confirm a diagnosis of acidosis (E87.2). The physician inserts an endotracheal tube (31500, Intubation, endotracheal, emergency procedure) during treatment.

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Answer: You may see many signs and symptoms that make your pulmonologist decide on an acidosis or alkalosis diagnosis, but you should bridge only the primary condition and the procedure codes.

You can report this case using the following codes:

- J45.xx (Asthma ...) for the asthma
- R50.9 (Fever, unspecified) for the fever
- R06.2 (Wheezing) for wheezing
- R53.83 (Other fatigue) for fatigue.

However, you must make sure to report E87.2 (Acidosis) connected to your procedure code (31500, Intubation, endotracheal, emergency procedure) for the acidosis.

Sometimes, excess carbon dioxide (CO₂) collects in the blood of a patient, which usually is a classic presentation of respiratory acidosis. The excess CO₂ causes a depletion of the blood's pH level. The increased CO₂ can be caused due to many reasons such as upper or lower airway obstruction, acute lung infections or inflammation, bronchial tissue infections and other acute or chronic lung conditions. The correct code for this condition is E87.2, not to be confused with E87.3 (Alkalosis), which is for when too little carbon dioxide raises the pH level in a patient's blood.