

## Eli's Hospice Insider

### Reader Questions: 481 or 485? Count Lobes To Clear Up Pneumonia Confusion

**Look for changes coming this October.**

**Question:** What is the difference between "lobar pneumonia" and "lobular pneumonia?" When there is no further clarification from the physician, is code 481 (Pneumococcal pneumonia [Streptococcus pneumoniae pneumonia]) the appropriate code assignment for both "lobar pneumonia" and "multilobar pneumonia?" When should we use 481 versus 485?

Answer: A patient with lobar pneumonia has pneumonia that affects a large and continuous area of the lobe of a lung. A patient who is diagnosed with lobular pneumonia, or bronchopneumonia, has an acute inflammation of the walls of his bronchioles; affecting many small areas of his lung tissue rather than the large area impacted by lobar pneumonia.

Multilobar pneumonia affects more than one lobe of your patient's lung and is a more serious illness than lobar pneumonia. Absent any additional details about the cause of your patient's pneumonia, you would list 481 for either lobar or multilobar pneumonia. However, to code most accurately for pneumonia of any type, you should query the physician to determine the causal organism.

Coming soon: As of Oct. 1, when you look up multilobar pneumonia in your ICD-9 manual's alphabetic index, you'll be directed to "see Pneumonia, by type."

You'll list 485 (Bronchopneumonia, organism unspecified) when your patient has lobular pneumonia, but you are unable to determine the causative organism.