

Home Health ICD-9/ICD-10 Alert

Reader Question: Signal 'No Diagnosis' to Your FI

Question: When is it appropriate to report signs-and-symptoms codes?

Arizona Subscriber

Answer: In a nutshell, you should code signs and symptoms when the patient's medical record does not contain a definitive diagnosis. Let's say a patient has a rash that may be due to a virus, a bacterial infection, or an adverse reaction to medications or food. The rash is coded, not the "possible" or "probable" diagnosis, says **Wanda Jewett, RHIT**, in Beavercreek, Ohio.

"Only inpatient hospital coders code 'possible' diagnoses," she says. All outpatient coders, long-term care, home care, outpatient hospice, and physician office coders will code symptoms if the physician has not yet made a definite diagnosis.

As another example, suppose the medical record cites nausea, vomiting and urinary frequency, and a urinary tract infection is suspected. You should not report the code for a UTI until the medical record includes positive test results for a UTI. Instead, a home health coder would report the codes for the symptoms.