

Home Health ICD-9/ICD-10 Alert

Reader Questions

Trauma And Surgery Create Coding Confusion

Question: A patient admitted to home care has a traumatic wound following a car accident. The wound has been debrided, and we are seeing the patient for wound care. Is the wound now a surgical wound or is it still a traumatic wound?

Answer: Look to what originally caused the wound. Once a wound is a traumatic wound, it stays a traumatic wound. A wound can develop complications, which you would then code, but it's still a traumatic wound. Even if a physician performs a procedure on the wound, it stays a traumatic wound. In this case, you'd use one code to reflect the procedure, such as V58.43 (Aftercare following surgery for injury and trauma) - and then record the trauma wound code.

Tip: "A wound is a surgical wound if and only if surgery created the wound," explains consultant **Lynda Dilts-Benson** with **Reingruber & Co.** in St. Petersburg, FL.

For example, if a patient's fall results in a contusion on her hip (skin is intact) and then develops a hematoma, she may need an incision and drainage to the hematoma site. If the agency is providing wound care following the I&D, the wound would count as a surgical wound on OASIS. Chapter 8 of the OASIS User's Manual contains a more complete description of when a wound is considered surgical.

Develop A System For Coding Wounds

Question: We see a lot of wounds, some surgical, some traumatic. We usually see the patient for dressing changes and often for IV antibiotics. What is the best process for deciding how to code an infected wound?

Answer: Code the wound first, Dilts-Benson recommends. Ask what kind of wound it is, whether the wound is complicated, if the complication is due to a surgical procedure or due to infection. Code the wound first and then the complication, unless there is a combination code that describes them both. Next, if you know the causative agent of an infection (such as staph or pseudomonas etc.), you code that. If an aftercare V code applies, you typically put that in M0230, with the wound and its complications in M0245(a) and (b), and the infectious agent in M0240.