

Home Health ICD-9/ICD-10 Alert

Reader Questions: Choose The Right Amputation Aftercare Code

Unless otherwise indicated, reader questions were answered by **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, consultant and principal of **Selman-Holman & Associates** in Denton, TX.

Question: I am confused about a coding example given in your January issue concerning dressing changes following toe amputation for a diabetic patient. Your article suggested listing V58.49 (Other specified aftercare following surgery) in M0230. Why wouldn't you report V58.78 or V58.73? To me, these diagnoses seem more specific.

Iowa Subscriber

Answer: Our article suggested reporting aftercare code V58.49 because the reason for this patient's amputation is gangrene. Gangrene is coded with 785.4 (Gangrene). If you look at the notes following the codes in the V58.7x, you'll find that the code 785.4 doesn't fit in any of the code ranges classifiable to any of the V58.7x codes. For example, V58.73 (Aftercare following surgery of the circulatory system, NEC) is appropriate for conditions classifiable to 390-459 while V58.78 (Aftercare following surgery of the musculoskeletal system, NEC) is appropriate for conditions classifiable to 710-739.

Because the scenario mentions that the gangrene was caused by the peripheral angiopathy of diabetes (443.81), you could have used V58.73. But reporting V58.78 is incorrect. Gangrene is the reason for the amputation so V58.49 is the correct choice.