

Home Health ICD-9/ICD-10 Alert

READER QUESTIONS: Do Renal Manifestations Still Exist After Transplant?

Question: Our patient is recovering from a kidney transplant for chronic renal failure due to diabetes. We are providing IV Gancyclovir as prophylaxis. Should we use 250.0x because his kidney failure no longer exists or should we code 250.4x with 583.81 since the patient is receiving the Gancyclovir?

Nebraska Subscriber

Answer: You should report the following codes:

V58.44 (Aftercare following organ transplant);

V42.0 (Organ or tissue replaced by transplant, kidney); 250.4(Diabetes with renal manifestations);583.81 (Nephritis and nephropathy, not specified as acute or chronic, in diseases classified elsewhere);

V58.81 (Fitting and adjustment of vascular catheter);

V58.62 (Long-term [current] use of antibiotics).

Code 250.4x (Diabetes with renal manifestations) explains why the patient had the kidney transplant in the first place. The patient still has the diabetes. Only one kidney was replaced, but if the patient was in chronic renal failure, the other kidney must also be diseased.

In addition, according to the new ICD-9-CM Official Guidelines for Coding and Reporting, effective Dec. 1, 2005, patients who have undergone a kidney transplant may still have some form of chronic kidney disease because the kidney transplant may not fully restore kidney function.

When you look up 583.81 (Nephritis and nephropathy, not specified as acute or chronic, in diseases classified elsewhere) in your ICD-9 coding manual, you'll see the note, "Code first underlying disease." So, you have to code the diabetes with renal manifestations (250.4x) that caused the patient to need the transplant, followed by the manifestation, 583.81.

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