Home Health ICD-9/ICD-10 Alert

READER QUESTIONS: Scleroderma Can Slow Wound Healing

Question: We admitted a patient with scleroderma who lacerated her right hand in a fall against a kitchen appliance. The laceration has sutures and we are going in to change the dressing and assess healing, which is complicated by the scleroderma. How should we code this?

Answer: First, you must choose the more appropriate of the two codes for scleroderma - 701.0 (Circumscribed scleroderma) or 710.1 (Systemic sclerosis). Then, you must consider the kind of laceration to determine its correct code.

A laceration is considered a trauma wound. The **Centers for Medicare & Medicaid** Services gave agencies a coding example in which a patient with atheosclerosis of the lower extremities bumped his shin against furniture. Because of the underlying condition, which would delay healing, CMS coded it as a trauma wound. As long as your documentation is very good and reflects a delay in healing, then use a trauma or open wound code.

If there is no tendon injury and if the fingers are not the only part of the hand involved, use code 882.0 (Open wound of hand except fingers alone, without mention of complication).

If the laceration had been superficial and only required additional monitoring, use the superficial injury codes (910-919) and then scleroderma.