

Home Health ICD-9/ICD-10 Alert

Reader Questions: Use These Aftercare Codes for Appendectomy

Question: Our new patient had a ruptured appendix with a peritoneal abscess. His appendix was removed and a Jackson-Pratt drain was inserted. He is receiving antibiotics for the abscess. He also had an acute myocardial infarction (MI). We will be providing skilled nursing for surgical aftercare (the focus of our care), as well as physical therapy, and occupational therapy for the MI. How should we code for this patient?

Georgia Subscriber

Answer: The circumstances of your surgical wound dictate which code you should use for aftercare. If your focus of care for this patient is aftercare for his appendectomy, you'll list V58.75 (Aftercare following surgery of the teeth, oral cavity and digestive system, NEC) in M1020. Notes following V58.75 indicate that this is the correct code to list when the surgery pertained to conditions classifiable to 520-579. 540.1 (Acute appendicitis with peritoneal abscess) falls within the specified range, so V58.75 is your code.

V58.75 replaces 540.1 in M1020, so report 540.1 in M1024 because this code will earn you case mix points.

If the patient is still on antibiotics for the active peritonitis, then code the peritonitis (540.1) as primary, rather than using an aftercare code. Ordinarily, if the patient had peritonitis with an appendectomy, the surgical wound is left open to heal by secondary intention. Finally, list 410.92 (Acute myocardial infarction; unspecified site; subsequent episode of care) to report your patient's MI.