Home Health ICD-9/ICD-10 Alert

You Be the Coder: Know When to Use V Codes with Complicated Wound

Question:

Our new patient was admitted for an infected abdominal wound following colon resection for primary colon cancer. Nursing will perform daily wound care and administer Vancomycin via central line. Peaks and troughs are ordered. The patient has not started chemotherapy yet. His wound is positive for MRSA. How should we code for this patient?

Maryland Subscriber

Answer:

Code for this patient as follows, says **Tricia A. Twombly, BSN, RN, HCS-D, CHCE,** senior education consultant and director of coding with **Foundation Management Services** in Denton, Texas.

M1020a: 998.59 (Other postoperative infection);

M1022b: 041.12 (Methicillin resistant Staphylococcus aureus);

M1022c: 153.9 (Malignant neoplasm of colon; unspecified);

M1022d: V58.81 (Fitting and adjustment of vascular catheter);

M1022e: V58.83 (Encounter for therapeutic drug monitoring);

M1022f: V58.62 (Long-term [current] use of antibiotics).

Your focus of care is the patient's infected abdominal wound, so your principal diagnosis code must represent this condition. Although the wound occurred following surgery, it's not appropriate to list a surgical aftercare code because the wound has been complicated by infection. Look to complication code 998.59 to report an infected surgical wound.

Next, include 041.12 to indicate that the wound is positive for MRSA. The 041.xx codes added greater

detail for MRSA in the 2010 ICD-9 update, allowing you to be more specific with this condition.

Tip: It's no longer necessary to list a V09 (Infection with drug-resistant microorganisms) code to indicate resistance to MRSA.

Follow this with 153.9 to report your patient's colon cancer diagnosis. If you have more specific information about the location of the tumor, such as colon and rectum, then use a more specific code such as 154.0 (Malignant neoplasm of rectosigmoid junction).

The codes that describe the remainder of the care you'll provide this patient are all V codes. While coding guidelines state that it's inappropriate to report a patient's condition with a V code if there is a complication present, that doesn't mean you can't list any V codes for such a patient.

Rather, it means you can't list a V code to describe the patient's complicated condition -- in this case the infected surgical wound. You can, and should, report the V codes for catheter care, as well as the monitoring and administering of Vancomycin.

Codify
BY AAPC