

Long-Term Care Survey Alert

MDS CODING CORNER: Know Where, How To Code A Skin Tear On The MDS

Are you documenting this critical difference?

Frail elders can easily suffer a skin tear. In order to correctly code--and track the severity of--these injuries, assess them carefully.

"If the skin tear does not penetrate to subcutaneous tissue, code it at M4a as an abrasion," advises **Lynn Gerard, RN**, director of nursing for **Guardian Angels Care Center** in Elk River, MN.

You only code skin tears at M4f (skin tears or cuts other than surgery) when the tear is deep enough to reach the subcutaneous tissue, advises Gerard.

Helpful idea: Revamp documentation tools to include the "length, width and depth for skin tears," suggests Gerard. Alternatively, you could use a "yes/no" check box to indicate whether the skin tear reached subcutaneous tissue, she adds.

Good question: Would you code a skin tear at M4 if it were caused by pressure and shearing forces, such as dragging the resident up in bed? The RAI manual instructs you to code skin tears/shears at M4 unless pressure was a contributing factor, says **Marilyn Mines, RN, BC, RAC-C**, director of clinical affairs with **FR&R Healthcare Consulting** in Deerfield, IL. The manual also says you don't code at M4 pressure or stasis ulcers coded in M2. Thus, it's "either a pressure ulcer or a skin tear," Mines concludes.