

MDS Alert

Coding Quizzer Answers: How Would You Code These MDS Section E Behavior Examples?

E0100: Potential Indicators of Psychosis

RAI Scenario No. 1: The resident believes the doll is a baby which is a delusion and she hears the doll crying which is an auditory hallucination. **E0100A would be checked and E0100B would be checked.**

RAI Scenario No. 2: The resident misinterpreted a real sound in the external environment. Because he is able to accept the alternative explanation for the cause of the sound, his report of a gunshot is not a fixed false belief and is therefore not a delusion. **E0100Z would be checked.**

RAI Scenario No. 3: The resident reports an auditory sensation that occurs in the absence of any external stimulus. Therefore, this is a hallucination. **E0100A would be checked.**

RAI Scenario No. 4: The resident adheres to the belief that he still works, even after being reminded about his retirement status. Because the belief is held firmly despite an explanation of the real situation, it is a delusion. **E0100B would be checked.**

RAI Scenario No. 5: The resident's initial false belief is readily altered with a simple reminder, suggesting that her mistaken belief is due to forgetfulness (i.e., memory loss) rather than psychosis. Because it is not a firmly held false belief, it does not fit the definition of a delusion. **E0100Z would be checked.**

E0200 Behavioral Symptoms -- Presence & Frequency

RAI Scenario No. 1: Scratching the nursing assistant was a physical behavior directed toward others. **E0200A would be coded 2, behavior of this type occurred 4-6 days, but less than daily.**

RAI Scenario No. 2: The behavior did not occur during the look-back period. **E0200C would be coded 0, behavior not exhibited.**

RAI Scenario No. 3: Throwing a tray was a physical behavior directed toward others. Although a possible explanation exists, the behavior is noted as present because it occurred. **E0200A would be coded 1, behavior of this type occurred 1-3 days of the last 7 days.**

E0500A, B, C: Impact on Resident

RAI Scenario No. 1: This behavior interfered with delivery of essential personal care. **E0500B would be coded 1, yes.**

RAI Scenario No. 2: The behavior interfered significantly with delivery of her medical and nursing care and put her at clinically significant risk for physical illness. **E0500A and E0500B would both be coded 1, yes.**

RAI Scenario No. 3: This behavior significantly interfered with personal care (i.e., feeding) and put the resident at risk for malnutrition and physical illness. **E0500A and E0500B would both be coded 1, yes.**

RAI Scenario No. 4: This behavior interfered with his ability to participate in the activity. **E0500C would be coded 1, yes.**

RAI Scenario No. 5: The staff determined the resident's behavior interfered with the ability to participate in any activities. **E0500C would be coded 1, yes.**

E0600A, B, C: Impact on Others

RAI Scenario No. 1: The behavior put the other resident at risk for falling and physical injury. **E0600A would be coded 1, yes; E0600B and E0600C would be coded 0, no. But you may also need to consider coding B and C depending on the specific situation in the environment or care setting.**

RAI Scenario No. 2: The behavior does not put others at risk for significant injury. The behavior does create a climate of excessive noise, disrupting the living environment and the activity of others. **E0600A would be coded 0, no.; E0600B and E0600C would be coded 1, yes.**

RAI Scenario No. 3: This is an intrusion and violates other residents' privacy regardless of whether they complain or communicate their distress. **E0600A and E0600C would be coded 0, no; E0600B would be coded 1, yes.**

RAI Scenario No. 4: This behavior violates other residents' privacy as it is an intrusion on the personal space and property (food tray). In addition, the behavior is pervasive and disrupts the staff's ability to deliver nutritious meals in dining room (an organized activity). **E0600A would be coded 0, no. E0600B and E0600C would be coded 1, yes.**

RAI Scenario No. 5: This behavior is an intrusion on another resident's private telephone conversation. **E0600A and E0600C would be coded 0, no; E0600B would be coded 1, yes.**

RAI Scenario No. 6: The behavior is intruding on the other residents' game. The game is not an organized facility event and does not involve care. It is an activity in which the two residents wanted to engage. **E0600A and E0600C would be coded 0, no; E0600B would be coded 1, yes.**

RAI Scenario No. 7: This behavior disrupts the delivery of physical care (exercise) to the group participants and creates an environment of excessive noise. **E0600A and E0600B would be coded 0, no; E0600C would be coded 1, yes.**

RAI Scenario No. 8: This behavior does not put other residents at risk for significant injury. The behavior restricts full participation in the organized activity, and limits the enjoyment of other residents. It also causes fear, thereby disrupting the living environment. **E0600A and E0600B would be coded 0, no; E0600C would be coded 1, yes.**

E0800: Rejection of Care -- Presence & Frequency

RAI Scenario No. 1: This resident has communicated that she considers physical therapy to be both intolerable and futile. The resident discussed this with her physician. Her choice to not accept physical therapy treatment is consistent with her values and goals for health care. Therefore, this would **not** be coded as rejection of care. **E0800 would be coded 0, behavior not exhibited.**

RAI Scenario No. 2: The resident's departure is consistent with his stated preferences and goals for health care. Therefore, this is **not** coded as care rejection. **E0800 would be coded 0, behavior not exhibited.**

RAI Scenario No. 3: The resident's care rejection behavior is not consistent with his values and goals for health and well-being. Therefore, this is classified as care rejection that occurred twice. **E0800 would be coded 1, behavior of this type occurred 1-3 days.**

RAI Scenario No. 4: Although choosing not to eat is consistent with the resident's desire to avoid diarrhea, it is also in conflict with her stated goal to maintain adequate nutrition. **E0800 would be coded 1, behavior of this type occurred 1-3 days.**

RAI Scenario No. 5: The behavioral rejection of antibiotics prevents the resident from achieving his stated goals for health care listed in his advance directives. Therefore, the behavior is coded as care rejection. **E0800 would be coded 2, behavior of this type occurred 4-6 days, but less than daily.**

RAI Scenario No. 6: Even though the resident's health care goal is to regain her ambulatory status, her fear of falling results in rejection of physical therapy and interferes with her rehabilitation. This would be coded as rejection of care. **E0800 would be coded 2, behavior of this type occurred 4-6 days.**

RAI Scenario No. 7: The resident's choice not to eat is not consistent with her goal of weight maintenance and health. Choosing not to eat may be related to a medical condition such as a disturbance of taste sensation, gastrointestinal illness, endocrine condition, depressive disorder, or medication side effects. **E0800 would be coded 3, behavior of this type occurred daily.**

Source: The Long-Term Care Facility Resident Assessment Instruments User's Manual MDS 3.0, V1.08 (April 2012).