Scottish Clinical Coding Standards-ICD10

Carrier of viral hepatitis
Code Z22.5 Carrier of viral hepatitis, has been removed from ICD-10 V5. Although the following terminology is now clinically inappropriate or ambiguous, the following coding applies when the clinical statements below are supplied. Coders should first seek clarification from the responsible clinician and must only use these codes when no further information is available.

“Carrier of viral hepatitis” B19.9
“Carrier of acute viral hepatitis B” B16.9
“Carrier of chronic viral hepatitis C” B18.2
“Hepatitis B positive/+ve” B18.1
“Hepatitis C positive/+ve” B18.2

Infections
Coders have difficulty when coding certain bacterial/viral infections as to whether they should code to the infection or carrier status. The same expression can lead to different coding for different bacteria e.g. Helicobacter positive indicates a Helicobacter infection whereas MRSA positive would be coded to the carrier status.

Below is a table with some of the more common infections and the expressions coders may be given. Where there are blanks, the expression is not applicable to that infection.

<table>
<thead>
<tr>
<th></th>
<th>+ve</th>
<th>Colonised with</th>
<th>Present in nasal swab</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRSA</td>
<td>Carrier Z22.3 (+ U82.1)</td>
<td>Carrier Z22.3 (+ U82.1)</td>
<td>Carrier Z22.3 (+ U82.1)</td>
</tr>
<tr>
<td>Helicobacter</td>
<td>Infection A04.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strep B</td>
<td>Carrier Z22.3</td>
<td>Carrier Z22.3</td>
<td>Carrier Z22.3</td>
</tr>
<tr>
<td>Hep B</td>
<td>B18.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hep C</td>
<td>B18.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VRE</td>
<td>Carrier Z22.3 (+ U83.0)</td>
<td>Carrier Z22.3 (+ U83.0)</td>
<td></td>
</tr>
</tbody>
</table>

Coders should not make any assumptions of the current status of a patient who has had a bacterial infection at some time in the past. Current laboratory reports should always be consulted.

N.B. Use of codes in categories U82-U85 is optional in Scotland.

For more information visit: www.isdscotland.org/Products-and Services/Terminology Services
Transitional Cell Carcinoma (papillary) of urinary tract

There has been difficulty with coding neoplasms of the urinary tract because of the terminology used in pathology reports and discharge documentation.

After discussion with our colleagues in the Scottish Cancer Registry, please adhere to the following standards.

<table>
<thead>
<tr>
<th>Diagnostic term</th>
<th>Pathological Grade/Stage</th>
<th>Site and ICD-10 code</th>
<th>Other and unspecified urinary organs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Bladder</td>
<td>Ureter</td>
</tr>
<tr>
<td>(papillary) TCC, primary invasive</td>
<td>pT1 or worse</td>
<td>C67.</td>
<td>C66.X</td>
</tr>
<tr>
<td>(papillary) TCC, in situ</td>
<td>pTis</td>
<td>D09.0</td>
<td>D09.1</td>
</tr>
<tr>
<td>(papillary) TCC, G3 high grade non-invasive</td>
<td>G3pTa</td>
<td>D09.0</td>
<td>D09.1</td>
</tr>
<tr>
<td>(papillary) TCC, G2 (low or high grade) non-invasive</td>
<td>G2pTa</td>
<td>D09.0</td>
<td>D09.1</td>
</tr>
<tr>
<td>(papillary) TCC, G1 low grade non-invasive</td>
<td>G1pTa</td>
<td>D09.0</td>
<td>D09.1</td>
</tr>
<tr>
<td>(papillary) TCC, G1 (low grade not mentioned) non-invasive</td>
<td>G1pTa</td>
<td>D41.4</td>
<td>D41.2</td>
</tr>
<tr>
<td>(papillary) TCC, NOS*</td>
<td>Not known</td>
<td>D41.4</td>
<td>D41.2</td>
</tr>
</tbody>
</table>

* Not otherwise specified and no further information obtainable. **When given statements such as TCC bladder or cancer bladder, coders should first seek clarification from the clinician.**

**Please note** that Transitional cell carcinomas of the kidney are most likely to have arisen in the renal pelvis and should be recorded with the appropriate ICD10 neoplasm code for renal pelvis. See table above. If there is specific evidence to show that the transitional cell carcinoma arose in any other part of the kidney then code accordingly although this is unlikely.

**Recording of NSTEMI article, SCCS No.11 March 2016 (Amendment to reference)**

On page 6 of SCCS No.11 March 2016, the article entitled “Recording of NSTEMI”, the reference in the last paragraph should read “SCCS 8 September 2014” not “Coding Guidelines 26 October 2010”.
ICD-10 V5 Errata

NHS Digital (formerly HSCIC) in England has identified and been informed of further errata in ICD-10 V5. These are listed in the tables below. Please amend your ICD10 V5 books accordingly.

### NHS ICD-10 5th Edition Errata

#### ICD-10 5th Edition Volume 3 – Alphabetical Index changes

<table>
<thead>
<tr>
<th>Page</th>
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</thead>
</table>
| 15   | Amend modifier | Abortion–continued  
- attempted–continued  
- - illegal medical–continued  
- - - complicated by–continued |
| 39   | Add modifier and code | Albuminuria, albuminuric (acute) (chronic) (subacute) (see also Proteinuria) R80  
- complicating pregnancy, childbirth or puerperium O12.1  
- gestational O12.1 |
| 99   | Amend fourth character | Castleman's disease D47. 47 |
| 130  | Delete/ Add modifiers and codes | Conditions arising in the perinatal period–continued  
...  
- diarrhea, diarrheal (disease) (endemic) (infantile) (summer) (see also Conditions arising in the perinatal period, enteritis)  
- - neonatal (noninfective) P78.3 NEC A09.9  
- - - infectious A09.0  
- - - non-infectious P78.3 |
| 138  | Amend modifier | Conditions arising in the perinatal period–continued  
...  
- infection, infected (opportunistic) (see also Conditions arising in the perinatal period, inflammation) |
| 154  | Delete modifier and code | Contraction, contracture, contracted  
...  
- epiglottis S10.0 |
| 155  | Add modifier and code | Contusion (skin surface intact) (see also Injury, superficial) T14.0  
...  
- epigastric region S30.1  
- epiglottis S10.0  
- esophagus (thoracic) S27.8 |

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<table>
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</table>
| 166  | Amend fourth characters | Cyst–continued  
- nasoalveolar K09.81  
- nasolabial K09.81 |
| 190  | Amend modifier | Delivery–continued  
- complicated–continued  
- laceration–continued  
- vagina, vaginal wall (low) (minor) O70.0  
- and muscles (perianal perineal) (vaginal) O70.1 |
| 191  | Delete modifier and code | Delivery–continued  
- postoperative F05.8 |
| 202  | Add fourth character | Diarrhea, diarrheal (disease) (infantile) A09–.9 |
| 226  | Amend fourth character | Disorder–continued  
- personality (see also Personality) F60.9  
- organic F07.90 |
| 241  | Delete modifiers | Dyspepsia (allergic) (congenital) (functional) (gastrointestinal) (occupational) (reflex) R10.1 |
| 258  | Delete/ Amend modifiers and code | Enteritis–continued  
- influenzal (specific virus not identified) J11.8  
--- certain identified influenza virus J09  
- ether seasonal influenza virus identified J10.8  
- zoonotic or pandemic influenza virus identified J09 |
| 323  | Delete extra hyphen | History–continued  
- female  
- circumcision Z91.7 |

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<table>
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</table>
| 351  | Add modifiers and codes | Infection, infected—continued  
…  
- Enterobius vermicularis B80  
- enterococcal (faecalis) NEC A49.1  
- - as cause of disease classified elsewhere B95.2  
- enterovirus NEC B34.1 |
| 405  | Amend cross reference | Lymphangitis I89.1  
- with  
- - abscess – see Abscess, by site  
- - cellulitis – see Abscess, by site Cellulitis |
| 406 – 407 | Amend fourth characters and delete modifiers | Lymphoma—continued  
…  
- centroblastic-centrocytic (diffuse) C83.9  
- - follicular C82.69  
…  
- follicular (centroblastic-centrocytic) (nodular) (with or without diffuse areas) C82.9  
…  
- - noncleaved (large cell) C82.82  
…  
- nodular (with or without diffuse areas) C82.9  
…  
- small cell (diffuse) C83.0  
…  
- - cleaved (diffuse) C83.1  
…  
- - - follicular C82.90 |
| 436  | Delete extra hyphen | Neglect (newborn) T74.0  
…  
- - self R46.8 |

Continued overleaf
### NHS ICD-10 5th Edition Errata

#### Page Instruction Action

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</table>
| 473  | Move modifier and code | Nephropathy (see also Nephritis) N28.9  
|      |             | …  
|      |             | - hereditary NEC N07.-  
|      |             | - - end-stage (failure) I12.0  
|      |             | Nephropathy–continued  
|      |             | - hypertensive (see also Hypertension, kidney) I12.9  
|      |             | - - end-stage (failure) I12.0  
|      |             | - IgA N02.8  |
| 479  | Delete modifier | Nevus–continued  
|      |             | …  
|      |             | - Spitz – see Nevus, spindle cell  |
| 492  | Delete extra hyphen | Osteophyte M25.7  
|      |             | - - facet joint – see Spondylosis  |
| 522  | Add code | Polyarteritis  
|      |             | - microscopic M31.7  
|      |             | - nodosa M30.0  |
| 615  | Delete modifier and code | Tear, torn (traumatic) – see also Wound, open  
|      |             | …  
|      |             | - cartilage – see also Sprain  
|      |             | - - articular, old M24.1  
|      |             | ---traumatic S37.6  |
| 643  | Add modifier | Ulcer, ulcerated–continued  
|      |             | - retina H30.0  
|      |             | - rodent – see also Neoplasm, skin, malignant  |
| 686  | Delete extra hyphen | Earthquake (any injury) X34  
|      |             | - - cataclysmic earth movements X34  |

#### ICD-10 5th Edition Volume 1 – Tabular List changes

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<tbody>
<tr>
<td>95</td>
<td>Amend category range</td>
<td>Codes for special purposes (U00-U9985)</td>
</tr>
<tr>
<td>101</td>
<td>Amend category description</td>
<td>A04 Other bacterial intestinal infections</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Page</th>
<th>Instruction</th>
<th>Action</th>
<th>Notes</th>
</tr>
</thead>
</table>
| 158  | Amend excludes notes | B81 Other intestinal helminthiases, not elsewhere classified  
Excl.: angiostrongyliasis due to:  
• *Angiostrongylus costaricensis cantonensis* (B83.2)  
• *Parasstrongylus costaricensis cantonensis* (B83.2) |
| 223  | Amend code description | D46.0 Refractory anaemia without ringed sideroblasts, so stated  
D46.1 Refractory anaemia with ringed sideroblasts |
| 426  | Amend note | I22 Subsequent myocardial infarction  
*Note:* For morbidity coding, this category should be assigned for infarction of any myocardial site, occurring within 4 weeks (28 days) from onset of a previous infarction |
| 461  | Amend excludes note | J09 Influenza due to identified zoonotic or pandemic influenza virus  
...  
*Excl.* *Haemophilus influenzae* [H. influenzae]:  
• Infection NOS (A49.2)  
• Meningitis (G00.0)  
• Pneumonia (J14)  
Influenza due to identified seasonal influenza virus (J09 J10) |
| 461  | Amend code description | J10 Influenza due to seasonal influenza virus |
| 464  | Amend code description | J15.3 Pneumonia due to *Staphylococcus* *Streptococcus*, group B |
| 464  | Amend code description | J15.6 Pneumonia due to other aerobic Gram-negative bacteria |
| 495  | Delete/Add inclusion terms | K09.0 Developmental odontogenic cysts  
Cyst *(cf.)*:  
• nasolabial [nasoalveolar]  
• nasopalatine duct [incisive canal]  
• dentigerous  
• eruption  
• follicular  
• gingival  
• lateral periodontal  
• primordial |
| 499  | Amend note | K14 Diseases of tongue  
*Incl.* *Excl.* erythroplakia |

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</thead>
</table>
| 616  | Delete excludes note | N18 Chronic kidney disease  
...  
*Excl.*: chronic renal failure with hypertension (I12.0) |
| 619  | Amend excludes note | N28.1 Cyst of kidney  
Cyst (acquired) (multiple) (solitary) of kidney  
*Excl.*: cystic kidney disease, (congenital) (Q61.-) |
| 703  | Amend excludes note | P78.3 Noninfective neonatal diarrhoea  
*Excl.*: neonatal diarrhoea:  
- NOS (A09.9)  
- infectious (A09.80) |
| 735  | Amend inclusion | Q61.1 Polycystic kidney, autosomal recessive  
Congenital cyst of kidney (single) Polycystic kidney, infantile type |
| 939  | Amend code description | W26 Contact with other sharp object(s) |
| 942  | Amend includes and excludes notes | W45 Foreign body or object entering through skin  
*Incl.*: foreign body or object embedded in skin:  
- nail  
- splinter  
*Excl.*: contact with:  
- hand tools (nonpowered)(powered) (W27-W29)  
- hypodermic needle (W46)  
- knife, sword or dagger other sharp object(s) (W26)  
- sharp glass (W25)  
struck by objects (W20-W22) |
| 957  | Amend excludes note | X54 Lack of water  
...  
*Excl.*: insufficient intake of water due to self neglect (R63.36) |
| 1033 | Amend category range | Codes for special purposes  
(U00-U9985) |
General Information

Implementation of OPCS4.8
The latest edition of OPCS (V4.8) has been approved for use in Scotland and in keeping with NHS England, is to be implemented in April 2017.

The new codes should be used with effect from April 1st 2017, for all discharges on or after that date. ISD will provide the new OPCS4 reference files by April 1st 2017.

NHS Digital – formerly known as Health and Social Care Information Centre – has managed the OPCS update as part of the three-yearly cycle of amendments to the classifications (ICD and OPCS).

New books will be available from The Stationery Office as usual. Details of costs and how to order these will follow. An electronic version will also be made available, free of charge, from NHS Digital. If sites wish to use this instead of, or in addition to, having books, the software will be available via download from the Technology Reference data Update Distribution site (TRUD). It is envisaged that the software will be available towards the end of this year.

ISD have notified Simplecode and Medicode of the plan to move to OPCS4.8 and as they are involved with the implementation in NHS England, they do not foresee any problems in having the Scottish version of the encoders available for NHS Scotland. Sites should however, make contact with their encoder and PAS/PMS suppliers as soon as possible to ensure the correct interfacing is in place for the implementation date.

Should you have any questions regarding the implementation of OPCS4.8, please contact Liz Williamson, Clinical Coding Tutor, Terminology Services, ISD or lizwilliamson@nhs.net.

PLEASE NOTE THAT CLINICAL CODING STANDARDS IN THIS EDITION APPLY TO ALL DISCHARGES ON AND AFTER 1ST OCTOBER 2016.

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