Scottish Clinical Coding Standards - ICD10

Attention to/Flushing of Hickman Line; Sequencing of codes

Question
On an SMR01 Inpatient or Day Case episode, should Z45.2 (Adjustment and management of vascular access device) be recorded as the main condition followed by the patient’s clinical diagnosis when the sole purpose of admission is attention to/flushing of Hickman Line?

Answer
In the case of an SMR01 Inpatient or Day Case episode, where the patient has e.g. Lung cancer, and the patient has been admitted solely for the purpose of attention to/flushing of Hickman line, and where no further treatment or investigation was undertaken for the lung cancer during that episode of care then the attention to/flushing of the Hickman line must be considered to be the primary reason for admission and treatment. Therefore this must be reflected by assigning code Z45.2 Adjustment and management of vascular access device in main condition to indicate the attention to/flushing of the Hickman line. If information is available as to why the Hickman Line is in place then this should also be recorded.

The example above would therefore be coded as follows:

Z45.2 Adjustment and management of vascular access device
C34.9 Malignant neoplasm of bronchus or lung, unspecified

Please note that this does not apply to admission for radiotherapy (Z51.0) or chemotherapy (Z51.1) where the cancer code must come first. This is because in these situations the cancer is the primary reason for admission and treatment.

Human papillomavirus (HPV). Amendment to previous Coding Guideline

Human papillomavirus infection, with no manifestation, should be coded to B34.4, Papovavirus infection, unspecified and not A63.8 Other specified predominantly sexually transmitted diseases, as previously advised in Coding Guidelines No.28 March 2011. Coders are advised to amend their ICD10 Index accordingly.
Scottish Clinical Coding Standards – OPCS4

Laparoscopically-assisted vaginal hysterectomy and Bilateral salpingoophorectomy

When a vaginal hysterectomy is carried out simultaneously with a bilateral salpingoophorectomy this should be coded as a recognised Scottish pair code. However, when a laparoscopically-assisted vaginal hysterectomy and bilateral salpingoophorectomy are performed together these should be coded as follows;

Q08.9 Vaginal excision of uterus, unspecified
Y75.1 Laparoscopically assisted approach to abdominal cavity

And

Q22.1 Bilateral salpingoophorectomy
Y75.1 Laparoscopically assisted approach to abdominal cavity

Instrumented spinal fusions with decompression and bone graft

When a spinal decompression is performed in addition to a spinal fusion and instrumentation procedure, it is only necessary to assign an additional code for the spinal decompression if the code description (for the fusion/instrumentation procedure) does not state both ‘fusion’ and ‘decompression’.

Example:
Patient admitted for L5/S1 Transforaminal Lumbar Interbody Fusion (TLIF) with posterior decompression of lumbar spine.

V38.6 Primary transforaminal interbody fusion of joint of lumbar spine
V25.5 Primary posterior decompression of lumbar spine NEC

An example of a code which describes both decompression and fusion is
V25.3 Primary posterior decompression of lumbar spine and intertransverse fusion of joint of lumbar spine.

A bone graft (synthetic or allograft) is an integral part of the spinal fusion and instrumentation procedure. Therefore it is not necessary to assign an additional OPCS-4 code for the bone graft when it is performed together with spinal fusion and instrumentation. However, in instances where an autograft has been used during the fusion and instrumentation procedure, it is necessary to assign an additional OPCS-4 code from category Y66 Harvest of bone to identify the location where the bone was harvested from.

Example:
Patient admitted for L3/L5 primary anterior lumbar interbody fusion (ALIF) and posterior instrumentation with the use of bone autograft from the right iliac crest:

V33.6 Primary anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spine
Y66.3 Harvest of bone from iliac crest

This article is © Crown Copyright, 2013

Contains public sector information licensed under the Open Government Licence v1.0.
PLEASE NOTE THAT ALL NEW STANDARDS IN THIS EDITION APPLY TO ALL DISCHARGES ON AND AFTER 1ST APRIL 2013.

Scottish Clinical Coding Standards is the new title for Coding Guidelines. This is to reflect the fact that the standards published herein are coding rules which apply in Scotland.

GENERAL INFORMATION

Terminology Services Team News
Murray Bell has taken up a new role with us as a Clinical Coding Tutor. We wish him well in his new post.

© National Services Scotland 2013. You can copy or reproduce the information in this document for use within NHSScotland and for non-commercial educational purposes. Use of this document for commercial purposes is permitted only with the written permission of NSS.

Contact
Please note that the Terminology Advisory Service Telephone Number is 0131 275 7283.

The number is manned Tuesday to Thursday from 09.00 to 17.00 hrs.

The link for previous coding guidelines online is: www.isdscotland.org/Products-and-Services/Terminology-Services/Clinical-Coding-Guidelines