

MONTHLY CODING SPOTLIGHT



RESPIRATORY ILLNESS

Diseases of the respiratory system in ICD-10 are categorized by location, acute vs chronic and etiology. The more common conditions include pneumonia, influenza, COPD, asthma, respiratory failure and pulmonary edema.

Codes in this category cannot be assigned, nor can outcomes be assumed based on labs alone, there must be clinical documentation to support all diagnoses.

Example:

A patient with emphysema develops acute respiratory failure.

- ⇒ J96.00 Acute respiratory failure, unspecified
- ⇒ J43.9 Emphysema

Things to keep in mind when coding for respiratory diseases:

- Pneumonia is a common infection that is coded with the responsible organism
- Influenza may be coded alone or in combination with other codes
- ♦ COPD is always caused by another condition
- Asthma is classified with a fourth character to indicate type and a fifth character to indicate status asthmaticus
- Respiratory failure is always due to an underlying condition, therefore it is important to be sure that the principal and secondary diagnoses are properly assigned
- Acute pulmonary edema can either be cardiogenic as related to heart failure, or non-cardiogenic such as in drowning
- Procedures involving the respiratory system include biopsies, ablations, mechanical and non mechanical ventilation and tracheostomies
- Identify exposure to tobacco smoke, use, dependence or a past history of smoking

AZPC Coding and Documentation materials are based on current guidelines and are to be used for reference only. Clinical and coding decisions are to be made based on the independent judgement of the treating physician or qualified health care practitioner and the best interests of the patient. ICD-10-CM, CPT and HCPCS are the authoritative references for purposes of assigning diagnoses and procedure codes to be reported. It is the responsibility of the physician and/or coding staff to determine and submit accurate codes, charges and modifiers for services rendered.

RESPIRATORY CATEGORIES AT A GLANCE



J00-J06 Acute Upper Respiratory Infections

Common Cold, Sinusitis, Pharyngitis, Tonsillitis, Laryngitis

J09-J18 Influenza and Pneumonia

Influenza due to viruses and all Pneumonias

J20-J22 Other Acute Lower Respiratory Infections

Acute Bronchitis, Bronchiolitis

J30-J39 Other Diseases of Upper Respiratory Tract

Allergies, Rhinitis, Chronic Pharyngitis, Chronic Sinusitis, Polyps, Nasal Disorders, Chronic Tonsillitis, Chronic Laryngitis, Vocal Chords, Larynx

J40-J47 Chronic Lower Respiratory Diseases

Chronic Bronchitis, Emphysema, COPD, Asthma, Bronchiectasis

J60-J70 Lung Diseases Due to External Agents

Pneumoconiosis, Airways Diseases including Inhalation and Ingestion

J80-J84 Other Respiratory Disease Principally Affecting the Interstitium

Pulmonary Edema, Eosinophilia, Fibrosis

J85-J86 Suppurative and Necrotic Conditions of the Lower Respiratory Tract

Abscess of Lung, Pyothorax

J90-J94 Other Diseases of the Pleura

Pleural Effusion, Plaque, Pneumothorax

J95 Intraoperative and Post-procedural Complications and Disorders of Respiratory System, Not Elsewhere Classified

Tracheostomy Complications, Pulmonary Insufficiency, Punctures, Lacerations, Ventilator Complications

J96-J99 Other Diseases of the Respiratory System

Respiratory Failure, Bronchus, Pulmonary Collapse, Disease of Mediastinum, Diaphragm Disorders

AZPC Coding and Documentation materials are based on current guidelines and are to be used for reference only. Clinical and coding decisions are to be made based on the independent judgement of the treating physician or qualified health care practitioner and the best interests of the patient. ICD-10-CM, CPT and HCPCS are the authoritative references for purposes of assigning diagnoses and procedure codes to be reported. It is the responsibility of the physician and/or coding staff to determine and submit accurate codes, charges and modifiers for services rendered.