

HCC Department Coding Newsletter

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MONTHLY CODING SPOTLIGHT



HEMATOLOGIC ABNORMALITIES

Diseases of the blood and blood forming organs and certain disorders involving the immune mechanism are covered in Chapter 3 of ICD-10. Anemia is the most common condition in this chapter, but it also includes coagulation defects, white blood cell disorders and disorders of the immune system.

Anemia classifications are based on terminology, so it is important to detail this condition as precisely as possible, including information from laboratory and pathology reports. It can be caused by chronic or acute blood loss, chronic disease or the use of chemotherapy. A variety of conditions can be classified as anemia, so the more specific the documentation the better.

Coagulation defects are characterized by prolonged clotting time. Some are congenital in origin while others are acquired.

White blood cell disorders are primarily classified on the basis of whether the WBC count is low or elevated. Code selections will depend on the type of white blood cell affected.

Disorders of the immune mechanism have various classifications including Sarcoidosis but does not include conditions associated with HIV.

Example:

A/P: Chronic anemia, secondary to blood loss due to adenomyosis.

Diagnoses:

- ⇒ **D50.0** Iron deficiency anemia secondary to blood loss
- ⇒ **N80.0** Adenomyosis

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.

HEMATOLOGICAL ABNORMALITIES AT A GLANCE



D50-D53 Nutritional Anemias

- D50_ Iron Deficiency Anemia
- D51_ Vitamin B12 Deficiency Anemia
- D52_ Folate Deficiency Anemia
- D53_ Other Nutritional Anemias

D55-D59 Hemolytic Anemias

- D55_ Anemia due to Enzyme Disorders
- D56_ Thalassemia
- D57_ Sickle-cell Disorders
- D58_ Other Hereditary Hemolytic Anemias
- D59_ Acquired Hemolytic Anemias

D60-D64 Aplastic and Other Anemias and Bone Marrow Failure Syndromes

- D60_ Acquired Pure Red Cell Aplasia
- D61_ Other Aplastic Anemias and Other Bone Marrow Failure Syndromes
- D62_ Acute Post Hemorrhagic Anemia
- D63_ Anemia in Chronic Disease Classified Elsewhere
- D64_ Other Anemias

D65-D69 Coagulation Defects, Purpura and Other Hemorrhagic Conditions

D70-D77 Other Disorders of Blood and Blood Forming Organs

D78 Intraoperative and Postprocedural Complications of the Spleen

D80-D89 Certain Disorders Involving the Immune Mechanism

- Be sure to code adverse effect, if applicable to identify drug responsible
- Be sure to also code any underlying disorders or diseases
- Physician concurrence regarding laboratory or pathology reports should be confirmed/documented
- Surgical procedures are expected to have bleeding, do not assume anemia unless documented
- Prolonged prothrombin time or other abnormal coagulation profiles should not be coded as a coagulation defect, use R79.1 Abnormal Coagulation Profile