Provider Education

Quality Documentation & Coding Pearls Ineke M. Ayubi-Moak, MD

PERIPHERAL ARTERIAL DISEASE

Peripheral arterial disease (PAD) affects 20% of adults 55 years and older and is considered a coronary heart disease (CHD) risk equivalent. PAD is the leading cause of lower extremity wounds and amputations and commonly causes impaired ambulation. PAD often goes undiagnosed because the majority of patients are asymptomatic and have a normal exam.

Early detection is important in order to properly risk stratify, manage, and treat patients. Patients should be started on a medium to high dose statin, encouraged to quit smoking, control blood pressure and glucose, exercise, and maintain a healthy weight and diet. Symptomatic patients should be started on antiplatelet therapy.

Screen patients with high risk of PAD:

- Claudication or ischemic pain at rest (symptoms can vary)
- Abnormal lower extremity pulses
- Age ≥ 70
- Age 50-69 years with a history of smoking or diabetes
- Age < 50 with diabetes and at least one additional risk factor (smoking, dyslipidemia, HTN, or homocysteinemia)
- Known atherosclerosis or other sites (coronary, carotids or renal)



The screening tool of choice is an ABI which can be done in the office setting. A score of ≤ 0.9 is 90% sensitive and 95% specific for

Atherosclerosis can also be seen on radiology reports as calcifications, plaque, and atheromatous changes.

Foot ulcers are a dangerous consequence of PAD. *They typically occur* at the termination of arterial branches:

- Tip of toes
- Between digits
- Areas of increase focal pressure (lateral malleolus and metatarsal
- Appear punched out, are painful, and bleed very little

CODING TIPS

PAD in diabetes:

E11.51 DM II w/ peripheral angiopathy w/o gangrene

E11.52 DM II w/ peripheral angiopathy w/ gangrene

PAD in extremities:

Atherosclerosis of the 170.2 extremity

Specify:

- Site
- Laterality
- With or without ulcer

Specify ULCER if present:

- Site
- Laterality
- Severity

Atherosclerotic changes in other arteries

170.0 Aortic atherosclerosis 177.81_ Aortic ectasia

177.1 Aortic tortuosity

170.1 Renal artery atherosclerosis

STAR Measures

Statin goal: All patients with cardiovascular disease should be on a medium to high dose statin

Statin compliance: Ensure patients takes their medication at least 80% of the prescription time period

Prescribe patients a 90 day supply



