Chapter 8

DISEASES OF THE DIGESTIVE, MUSCULOSKELETAL, GENITOURINARY SYSTEMS, SKIN AND SUBCUTANEOUS TISSUES (K00-N99)

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Learning Objectives

- Understand coding guidelines in the musculoskeletal and genitoruinary systems.
- Understand coding guidelines for skin and subcutaneous tissue.
- Properly sequence ICD-10-CM codes in the digestive, musculoskeletal, and genitourinary systems, and skin and subcutaneous tissue.
- Assign ICD-10-CM codes to the highest level of specificity.
- Successfully complete checkpoint exercises and “test your knowledge” exercises.

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Diseases of the Digestive System (K00-K94)

- Chapter 11 in the Tabular List includes the following sections:
- Diseases of Oral Cavity and Salivary Glands (K00-K14):
  - Diseases of Esophagus, Stomach, and Duodenum (K20-K31).
  - Diseases of the Appendix (K35-K38).
  - Hernia (K40-K46).
  - Noninfectious Enteritis and Colitis (K50-K52).
  - Other Diseases of Intestines (K55-K64).

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Diseases of the Digestive System (K00-K94)

- Diseases of the Peritoneum and Retroperitoneum (K65-K68).
- Disease of Liver (K70-K77).
- Disorders of Gallbladder, Biliary Tract and Pancreas (K80-K87).
- Other Diseases of the Digestive System (K90-K94).

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Diseases of the Digestive System (K00-K94)

- Diseases of the digestive system are located in Chapter 11 of the Tabular List.
- The digestive system is responsible for receiving food, breaking it down into nutrients (a process called digestion), absorbing the nutrients into the bloodstream, and eliminating the indigestible parts of food from the body.

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Diseases of the Digestive System (K00-K94)

- The digestive tract consists of the:
  - Mouth.
  - Throat.
  - Esophagus.
  - Stomach.
  - Small intestine.
  - Large intestine.
  - Rectum.
  - Anus.

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Diseases of the Digestive System (K00-K94)

- The digestive system also includes organs that lie outside the digestive tract:
  - Pancreas.
  - Liver.
  - Gallbladder.
- Codes are categorized in a manner that follows the same path as the digestive system, starting with disorders of the teeth.

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Diseases of the Digestive System (K00-K94)

- Pay special attention when coding in this chapter.
- As with previous chapters, a fifth-digit assignment is necessary with many of the codes.
- Make sure to read all Includes and Excludes notes in this chapter.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- The oral cavity is formed by an array of tissues which function in or are associated with the processes that are performed with what we typically refer to as the mouth.
- The organs found within the oral cavity are the tongue and glands that empty their secretory products into the oral cavity, the salivary glands.
- The oral cavity is lined by a stratified squamous epithelium.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- The epithelial lining is divided into two broad types:
  1. Masticatory epithelium covers the surfaces involved in the processing of food (tongue, gingivae, and hard palate). The epithelium is keratinized to different degrees depending on the extent of physical forces exerted on it.
  2. Lining epithelium, ie, nonkeratinised stratified squamous epithelium, covers the remaining surfaces of the oral cavity.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- Salivary gland disorders:
  - The glands are found in and around the mouth and throat.
  - The major salivary glands are the parotid, submandibular, and sublingual glands.
  - These glands secrete saliva into the mouth, the parotid through tubes that drain saliva, called salivary ducts, near the upper teeth, submandibular under the tongue, and the sublingual through many ducts in the floor of the mouth.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- Category K11.- includes diseases of the salivary glands. Conditions in this classification include:
  - Atrophy--wasting away or necrosis of salivary gland tissue.
  - Hypertrophy--overgrowth or overdeveloped salivary gland tissue.
  - Retention cyst of the salivary gland-dilated salivary gland cavity filed with mucous.
  - Stenosis.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- Diseases of the oral soft tissues, excluding lesions specific for gingiva and tongue, are classified in K12.- (stomatitis and related lesions).
- These conditions include:
  - Stomatitis.
  - Canker sores.
  - Cellulitis of the floor of the mouth.
  - Cysts.
  - Diseases of the lips.
  - Hyperplasia of oral mucosa.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

- Stomatitis, or viral stomatitis, is a common infection in children usually between ages one to two years.
  - The child will typically run a fever, drool, and be very uncomfortable.
  - Sores on the tongue or around the mouth are common.
- The Herpes labialis virus (cold sores), typically produce sores towards the front of the mouth, lips, and tongue.

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Diseases of the Oral Cavity and Salivary Glands (K00-K14)

  - Another herpes-related virus that tends to affect the rear of the mouth around the tonsils referred to as Herpangina is not caused by the Herpes virus but by a related herpes-type bug called Coxsackie virus.
- Canker sores, aphthous stomatitis, or aphthous ulcers are not thought of as being associated with fever.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- The esophagus is the channel that leads from the throat (pharynx) to the stomach.
- The walls of the esophagus propel food to the stomach with waves of muscular contractions called peristalsis.
- Near the junction of the throat and the esophagus is a band of muscle called the upper esophageal sphincter.
- Slightly above the junction of the esophagus and the stomach is another band of muscle called the lower esophageal sphincter.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- During swallowing, the sphincters relax so food can pass to the stomach.
- The most common symptoms with esophageal disorders are dysphagia, chest pain, and back pain.
- Categories K20-K22 encompass the diseases of the esophagus.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- Some common conditions in this category include:
  - Ulcers.
  - Inflammation.
  - Reflux.
  - Rupture.
  - Perforation.
  - Spasms.
- Gastroesophageal reflux disease (GERD) refers to the backward flow of acid from the stomach up into the esophagus.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- People experience heartburn, also known as acid indigestion, when excessive amounts of stomach acid flow back into the esophagus.
- GERD is caused by incomplete closure of the sphincter.
- The squamous epithelial lining of the esophagus becomes irritated and inflamed. In some patients, the lining may become ulcerated and scarred.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- Esophagitis is a common medical condition usually caused by gastroesophageal reflux.
  - Less frequent causes include infectious esophagitis (in patients who are immunocompromised), radiation esophagitis, and esophagitis from direct erosive effects of ingested medication or corrosive agents.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- Reflux esophagitis develops when gastric contents are passively regurgitated into the esophagus. Gastric acid, pepsin, and bile irritate the squamous epithelium, leading to erosion and ulceration of esophageal mucosa. Eventually, a columnar epithelial lining may develop. This lining is a premalignant condition termed Barrett esophagus.

- Esophageal reflux symptoms occur monthly in 33-44% of the general population; up to 7-10% have daily symptoms. Moderate-to-severe symptoms of this condition produce morbidity secondary to pain and anxiety.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- Other common symptoms include upper abdominal discomfort, nausea, bloating, and fullness.
- Less common symptoms include dysphagia, odynophagia, cough, hoarseness, wheezing, and hematemesis.
- Infants with reflux are at greater risk of aspiration. Symptoms include weight loss, regurgitation, excessive crying, back arching, respiratory distress, and apnea.

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

- Common factors that increase the risk of reflux esophagitis include:
  - Pregnancy.
  - Obesity.
  - Scleroderma.
  - Smoking.
  - Alcohol, coffee, chocolate, fatty, or spicy foods.
  - Certain medications (eg, beta-blockers, nonsteroidal anti-inflammatory drugs [NSAIDs], theophylline, nitrates, alendronate, calcium channel blockers).

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Diseases of the Esophagus, Stomach, and Duodenum (K20-K31)

  - Mental retardation requiring institutionalization.
  - Spinal cord injury.
  - Immunocompromised patients.
  - Radiation therapy for chest tumors.
- Pill esophagitis, thought to be secondary to chemical irritation of esophageal mucosa from certain medications (eg, iron, potassium, quinidine, aspirin, steroids, tetracyclines, NSAIDs), especially when swallowed with too little fluid.

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Ulcers (K25-K28)

- Ulcers are a common disorder treated by many practitioners. An ulcer is a focal area of the stomach or duodenum that has been destroyed by digestive juices and stomach acid. Most ulcers are very small, but they can cause tremendous discomfort and pain. Ulcers in the stomach are called gastric ulcers; ulcers in the duodenum are called duodenal ulcers. In general, ulcers in the stomach and duodenum are referred to as peptic ulcers or PUD.

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Ulcers (K25-K28)

- Although people often attribute ulcers to stress, there are actually two major causes of ulcers:
  - Helicobacter pylori (H pylori).
  - Regular use of nonsteroidal anti-inflammatory drugs (NSAIDS).
- Complications of this disease include:
  - Hemorrhage (bleeding ulcer).
  - Anemia.

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Ulcers (K25-K28)

- Bloody or black stools.
- Nausea in bleeding ulcers.
- Perforation (a hole in the wall of the stomach or duodenum).
- Chronic inflammation and swelling of gastric and duodenal tissues.
- Vomiting and weight loss.

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Ulcers (K25-K28)

- Ulcers are coded using the following categories:
  - K25 Gastric ulcer.
  - K26 Duodenal ulcer.
  - K27 Peptic ulcer.
  - K28 Gastrojejunal ulcer.
- These codes are combination codes which identify complications of ulcers (bleeding and perforation).
  - A secondary code is not required unless the patient had multiple complications.

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Ulcers (K25-K28)

- Information required in documentation includes:
  - Acute or chronic.
  - Hemorrhage.
  - Perforation.
  - Hemorrhage with perforation.
  - Without hemorrhage or perforation.

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Gastritis (K29.-)

- Gastritis is inflammation of the stomach lining in which the lining resists irritation and can usually withstand very strong acid.
- There are several types of gastritis:
  - Acute stress gastritis is caused by a sudden severe illness or injury. The injury may not even be to the stomach.
  - Chronic erosive gastritis can result from irritants such as drugs, especially aspirin and other nonsteroidal anti-inflammatory drugs (NSAIDs); Crohn's disease; and bacterial and viral infections.

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Gastritis (K29.-)

- Viral or fungal gastritis may develop in people with a prolonged illness or an impaired immune system.
- Eosinophilic gastritis may result from an allergic reaction to roundworm infestation.
- Atrophic gastritis results when antibodies attack the stomach lining, causing it to become very thin and lose many or all of the cells that produce acid and enzymes.
- Menetrier’s disease is a form of gastritis whose cause is not known.
- Plasma cell gastritis is another form of gastritis with an unknown cause.

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Other Diseases of Stomach and Duodenum (K31.-)

- Surgical gastrostomy is a method of direct enteral feeding access. Surgical gastrostomy or jejunostomy is most frequently performed when patients are already undergoing laparotomy for related or unrelated abdominal problems.
- Complication of gastrostomy is coded in subclassification Z43.1.
- Codes in this category include:
  - Closure of artificial openings.
  - Passage of sounds or bougies through artificial openings.

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Other Diseases of Stomach and Duodenum (K31.-)

- Cleansing the artificial opening.
- Removal of catheter from the artificial opening.
- Gastrostomy status is reported with code Z93.1.
- If the patient has an infection, this is reported with code K94.22 (gastrostomy infection).
- When coding K94.22, pay attention to the instructional notes that direct the coder to use an additional code to specify the type of infection and the organism which includes cellulitis of the abdominal wall (L03.311) or sepsis (A40-A41).

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Disease of Appendix (K35-K38)

- The appendix is a 3.5-inch-long tube of tissue that extends from the large intestine:
  - It contains lymphoid tissue and may produce antibodies; however, no one is absolutely certain of its function.
  - People live without an appendix, with no apparent consequences.

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Disease of Appendix (K35-K38)

- The most common disease in this classification is appendicitis:
  - Appendicitis is an inflammation of the appendix.
  - It is a medical emergency that requires prompt surgery to remove the appendix.
  - Left untreated, an inflamed appendix will eventually burst, or perforate, causing infection into the abdominal cavity.
  - This can lead to peritonitis, a serious infection of the abdominal cavity's lining (the peritoneum), which can be fatal unless it is treated quickly with strong antibiotics.

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Disease of Appendix (K35-K38)

- The symptoms of appendicitis include:
  - Dull pain near the navel or the upper abdomen that becomes sharp as it moves to the lower right abdomen.
  - Loss of appetite.
  - Nausea and/or vomiting soon after abdominal pain begins.
  - Temperature of 99° F to 102° F.
  - Constipation or diarrhea.
  - Gas.

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Disease of Appendix (K35-K38)

- Other symptoms that could appear:
  - Dull or sharp pain anywhere in the upper or lower abdomen, back, or rectum.
  - Painful urination.
  - Vomiting that precedes the abdominal pain.

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Coding Tip

- K37 is a generalized code not to be used in an acute care setting.

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Hernia (K40-K46)

- There are various types of hernias:
  - Inguinal hernias, which make up approximately 75% of abdominal wall hernias.
  - An incisional hernia is caused by a flaw in the abdominal wall and creates an area of weakness in which the hernia may develop.
  - A femoral hernia is the path through which the femoral artery, vein, and nerve leave the abdominal cavity to enter the thigh.

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Hernia (K40-K46)

- An umbilical hernia, a protrusion of the umbilicus (bellybutton), typically occurs at birth. Epigastric hernias occur between the naval and lower part of the ribcage, midline of the abdomen.
- A Spigelian hernia occurs along the edge of the rectus abdominus muscle through the spigelian fascia, which is to the side of the middle of the abdomen; they are rare.
- A diaphragmatic hernia is a birth defect.

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Hernia (K40-K46)

- Hiatal hernia is found in category K44.-
  - Following are general types of hiatal hernias:
    - A hiatal hernia, an abnormal bulging of a portion of the stomach through the diaphragm, is coded as K44.9, diaphragmatic hernia. A hiatal hernia with obstruction is coded as K44.0. A hiatal hernia with gangrene is coded as K44.1.
    - A sliding hiatal hernia exists when the junction between the esophagus and the stomach (which is normally below the diaphragm) protrudes above the diaphragm.

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Hernia (K40-K46)

- A paraesophageal hiatal hernia exists when the junction between the esophagus and stomach is in the normal place below the diaphragm, but a portion of the stomach is pushed above the diaphragm and lies beside the esophagus.

- The cause of hiatal hernia is usually unknown; it may be a birth defect or the result of an injury. People who have a sliding hiatal hernia usually have either no symptoms or minor ones.

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Noninfectious Enteritis and Colitis (K50-K52)

- The major part of digestion occurs in the small intestine.
- Predigested material supplied by the stomach (chyme) is further subjected to the action of three powerful digestive fluids within the small intestine:
  - Pancreatic fluid.
  - Intestinal enzymes.
  - Bile.

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Inflammatory Bowel Disease

- Several distinct diseases cause intestinal inflammation. Two of the most common inflammatory bowel diseases are:
  - Ulcerative colitis.
  - Crohn’s disease.
- Ulcerative colitis causes inflammation and ulcers in the top layers of the large intestinal lining.
- Crohn’s disease is an inflammatory condition that causes inflammation in the small intestine, but can affect any segment of the gastrointestinal tract.

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Inflammatory Bowel Disease

- Crohn’s disease is commonly referred to as enteritis.
- Symptoms of Crohn’s disease include:
  - Abdominal pain.
  - Diarrhea.
  - Weight loss.
  - Rectal bleeding.
  - Anemia in some patients.
  - Intestinal blockage.

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Other Diseases of Intestines (K55-K64)

- Irritable bowel syndrome is a common disorder.
- Some symptoms of this disorder include:
  - Cramping.
  - Constipation.
  - Diarrhea.
  - Lower abdominal pain.
  - Gas.
  - Bloating.
  - Change in bowel habits.

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Other Diseases of Intestines (K55-K64)

- The most common syndrome in this category is rectal polyps, which is found under “other disorders of the intestine” (K62.0-K62.1).
  - Colorectal cancer is the second most common cancer and the third leading cause of death from cancer among American men and women.
  - These cancers arise in the colon.
  - Tumors may also arise in the lining of the very last part of the colon, the rectum.
  - If detected early, colon cancer is treatable.

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Other Diseases of Intestines (K55-K64)

- Cancer of the colon and rectum usually begins as a polyp.
  - Polyps are benign growths in the lining of the large intestine.
  - Although most polyps never become cancerous, virtually all colon and rectal cancers start from these benign growths.

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Other Diseases of Intestines (K55-K64)

- Polyps and cancer develop when there are mutations or errors in the genetic code that controls the growth and repair of the cells lining the colon.
  - In addition, people may inherit genetic diseases in which the risk of colon polyps and cancer is very high.
- There are two common types of polyps found in the large intestine:
  - Hyperplastic polyps: small, completely benign polyps that do not carry a risk of developing into cancer.
  - Adenomas: benign polyps that are considered precursors (the first stage) of colon cancer.

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Other Diseases of Intestines (K55-K64)

- Risk factors for colorectal cancer include:
  - Polyps.
  - Diet high in fat and low in fiber.
  - Family history of polyps or colorectal cancer.
  - Family history of familial polyposis, a disease in which hundreds of polyps cover the colon.
  - Inflammatory bowel disease (Crohn's disease or ulcerative colitis).

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Other Diseases of Intestines (K55-K64)

- Symptoms of colorectal cancer include the following:
  - A change in bowel habits (constipation or diarrhea).
  - Blood on or in the stool that is either bright or dark.
  - Unusual abdominal or gas pains.
  - Very narrow stool.
  - A feeling that the bowel has not emptied completely after passing stool.
  - Unexplained weight loss.
  - Fatigue.

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Other Diseases of Intestines (K55-K64)

- There are three types of screening methods:
  - Sigmoidoscopy:
    - A thin, lighted tube called an endoscope is inserted into the rectum and the lower half of the colon.
    - The inside lining of the colon can be viewed through the endoscope.
  - Colonoscopy:
    - Colonoscopy is the same test as sigmoidoscopy.
    - In this case, the endoscope is passed through the entire colon.

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Other Diseases of Intestines (K55-K64)

- Barium enema:
  - A chalky white substance (barium) is given as an enema before an X-ray is taken of the colon. The barium highlights the colon and rectum.

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Coding Tip

- If the documentation indicates the patient has an adenomatous polyp, it is coded as a neoplasm with D12.8.

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Other Diseases of the Digestive System

- The biliary system includes the organs and duct system that create, transport, store, and release bile into the duodenum (the first part of the small intestine) for digestion.
- In order to code in the biliary system, knowledge of the common diseases is important.
- The biliary system includes the liver, gallbladder, and bile ducts (named the cystic, hepatic, common hepatic, common bile, and pancreatic duct).
- There are many disorders of the biliary system that require clinical care by a physician.

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Other Diseases of the Digestive System

- These conditions include:
  - Gallstones.
  - Cholangitis.
  - Cholecystitis.
  - Biliary Cirrhosis/Bile duct cancer.
- When gallstones (calculus) are present in the gallbladder, it is called cholelithiasis.

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Other Diseases of the Digestive System

- When gallstones are present in the bile ducts, it is called choledocholithiasis.
  - Cholelithiasis is coded to K80.-
  - A fifth character subclassification is required when coding these conditions.
  - The fourth-digit subclassification indicates the type of cholelithiasis, and the fifth digit indicates where obstruction is present.

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Other Diseases of the Digestive System

- Symptoms range from moderate to severe, and may include:
  - Pain in the right upper quadrant of the abdomen.
  - Fever and chills.
  - Jaundice (yellowing of the skin and eyes).
  - Low blood pressure.
  - Lethargy.
  - A decreased level of alertness.

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Other Diseases of the Digestive System

- Cholecystitis is an inflammation of the gallbladder wall and nearby abdominal lining. Cholecystitis is usually caused by a gallstone in the cystic duct, the duct that connects the gallbladder to the hepatic duct.
- Other causes of cholecystitis may include:
  - Bacterial infection in the bile duct system. The bile duct system is the drainage system that carries bile from the liver and gallbladder into the area of the small intestine called the duodenum.
  - Tumor of the pancreas or liver.

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Other Diseases of the Digestive System

- Decreased blood supply to the gallbladder (sometimes occurs in persons with diabetes).
- Gallbladder "sludge,“ a thick material that cannot be absorbed by bile in the gallbladder and most commonly occurs in pregnant women or individuals who have experienced a rapid weight loss.
- Cholecystitis may occur quite suddenly or gradually over many years.
- A typical cholecystitis attack normally lasts two to three days.

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Other Diseases of the Digestive System

- Symptoms include:
  - Intense, sudden pain in upper quadrant of abdomen.
  - Painful recurring attacks for several hours after meals.
  - Vomiting.
  - Rigid abdominal muscles on the right side.
  - Nausea.
  - Fever and chills.
  - Jaundice.
  - Itching (rare).
  - Abdominal bloating.
  - Loose, light-colored bowel movements.

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Diseases of the Skin and Subcutaneous Tissue (L00-L99)

- Chapter 12 in the Tabular List includes the following sections:
  - Infections of Skin and Subcutaneous Tissue (L00-L08).
  - Bullous Disorders (L10-L14).
  - Dermatitis and Eczema (L20-L30).
  - Papulosquamous Disorders (L40-L45).
  - Urticaria and Erythema (L49-L54).
  - Radiation-related Disorders of the Skin and Subcutaneous Tissue (L55-L59).

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Diseases of the Skin and Subcutaneous Tissue (L00-L99)

- Disorders of Skin Appendages (L60-L75).
- Intraoperative and Postprocedural Complications of Skin and Subcutaneous Tissue (L76).
- Other Disorders of the Skin and Subcutaneous Tissue (L80-L99).

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Diseases of the Skin and Subcutaneous Tissue (L00-L99)

- This category includes the following conditions:
  - Impetigo.
  - Furuncles.
  - Carbuncles or abscesses.
  - Cellulitis and lymphangitis.
- A furuncle or boil is a skin abscess that is small and solitary, usually caused by a staphylococcal infection of follicular or sebaceous glands.

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Diseases of the Skin and Subcutaneous Tissue (L00-L99)

- A carbuncle is a group of confluent furuncles (boils) with associated connecting sinus tracts and multiple openings in the skin.
- This lesion usually occurs on the back of the neck.
- Diabetics are especially prone to develop carbuncles because of their reduced resistance to infection.

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Coding Issues

- Many codes in this category are identified by type of condition and anatomic location of the body.
- In addition, if an infectious agent is present, the user is instructed to use an additional code from categories B95-B97 to identify the infectious agent.
- Pay careful attention to the Excludes1 and Excludes2 notes in these categories.

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Dermatitis and Eczema (L20-L30)

- This section includes codes relating to dermatitis:
  - Dermatitis is a generic, clinical term used to describe a wide variety of skin conditions, all characterized by inflammation of the skin (commonly called eczema).
  - Dermatitis accounts for about one-third of patients who consult a dermatologist. Symptoms include itchy skin that can redden, with acute attacks ranging from blisters or crusty scales.

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Dermatitis and Eczema (L20-L30)

- Types of dermatitis include:
  - Contact dermatitis.
  - Eczema.
  - Seborrheic dermatitis.
  - Nummular dermatitis.
- Contact dermatitis occurs as a delayed hypersensitivity reaction to chemical allergens such as clothing, cosmetics, jewelry, and various metals.

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Dermatitis and Eczema (L20-L30)

- Atopic dermatitis or eczema is dermatitis of unknown etiology marked by itching and scratching in an individual with inherently irritable skin.
- Seborrheic dermatitis is a common form of dermatitis that occurs in sites of greatest concentration of sebaceous glands: scalp, face, ears, neck, axillae, breasts, umbilicus, and anogenital regions.
- Nummular dermatitis occurs more commonly in men than women; typically occurs in patients over 55; and can be caused by taking hot showers or living in a dry climate.

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Papulosquamous Disorders (L40-L45)

- Two of the most common disorders in these categories are psoriasis and urticaria:
  - Psoriasis is a chronic inflammatory disease of skin of unknown cause that varies greatly in severity and is characterized by thickened areas of skin with silver-colored scales.
  - Urticaria (hives) is an acute patchy eruption of elevated wheals or skin redness with severe itching or stinging.

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Radiation-related Disorders of the Skin and Subcutaneous Tissue (L55-L59)

- Sunburns are classified in category L55 and are coded based on first-, second-, or third-degree sunburn.
  - A sunburn results from too much sun exposure.
  - Another source of sunburn is related to improper tanning bed usage.
  - Injury can occur within 30 minutes of exposure. Some people burn differently than others, depending on their skin type.

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Radiation-related Disorders of the Skin and Subcutaneous Tissue (L55-L59)

- Common symptoms of sunburn are:
  - Fever.
  - Chills.
  - Blistering.
  - Nausea.
  - Vomiting.
  - Skin loss or peeling.

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Radiation-related Disorders of the Skin and Subcutaneous Tissue (L55-L59)

- Actinic keratoses is a condition resulting in a crusty or scaly bump on the skin's surface.
- They are sometimes referred to as sun spots, age spots, or solar keratoses.
- Typically referred to as AK's, these are considered to be precancerous and the first step to the development of cancer.

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Radiation-related Disorders of the Skin and Subcutaneous Tissue (L55-L59)

- Treatment can include cryosurgery--freezing the area with liquid nitrogen, which eradicates the AK.
  - Curettage is another method, whereby the lesion is scraped and may be submitted to pathology for analysis.
  - Chemical peels are sometimes helpful in removing an AK, as is shave excision.

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Other Disorders of Skin and Subcutaneous Tissue (L80-L99)

- Chronic ulcers of the skin are longstanding, slow-to-heal ulcers accompanied by sloughing of inflamed necrotic tissue.
- Codes for decubitus ulcers are classified in L89 and non-decubitus ulcers (L97) both are coded with a sixth character.
- The fifth character identifies the site of the ulcer, and the sixth character is used for reporting the depth of the ulcer.

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Other Disorders of Skin and Subcutaneous Tissue (L80-L99)

- If gangrene is present, it is reported first as I96.
- Decubitus ulcers in this category includes:
  - Bed sores.
  - Plaster ulcers.
  - Pressure ulcers.
  - Pressure sores.

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Other Disorders of Skin and Subcutaneous Tissue (L80-L99)

- Non-decubitus ulcers include:
  - Chronic ulcer of the skin.
  - Nonhealing ulcer of skin.
  - Noninfected sinus of skin.
  - Trophic ulcer NOS.
  - Tropical ulcer NOS.
  - Ulcer of skin NOS.
- In order to code decubitus and non-decubitus ulcers, site and depth must be documented in the medical record.
  - Review Table 8.1.

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Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- Chapter 13 of the Tabular List includes the following sections:
  - Infectious Arthropathies (M00-M02).
  - Inflammatory Polyarthropathies (M05-M14).
  - Osteoarthritis (M15-M19).
  - Other Joint Disorders (M20-M25).
  - Dentofacial Anomallies [including malocclusion] and Other Disorders of Jaw (M26-M27).
  - Systemic Connective Tissue Disorders (M30-M36).

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Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- Deforming Dorsopathies (M40-M43).
- Spondylopathies (M45-M49).
- Other Dorsopathies (M50-M54).
- Disorders of Muscles (M60-M63).
- Disorders of Synovium and Tendon (M65-M67).
- Other Soft Tissue Disorders (M70-M79).
- Disorders of Bone Density and Structure (M80-M85).

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Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- Other Osteopathies (M86-M90).
- Chrondropathies (M81-M94).
- Other Disorder of the Musculoskeletal System and Connective Tissue (M95).
- Intraoperative and Postprocedural Complications and Disorders of Musculoskeletal System, Not Elsewhere Classified (M96).
- Biomechanical Lesions, Not Elsewhere Classified (M99).

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Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- Many conditions in Chapter 13 of ICD-10-CM are results of trauma or previous injury to a site, or are recurrent conditions.
- A current acute injury is reported with an injury code.
- Also included in this chapter are recurrent bone, joint, and muscle conditions.
- Most codes in Chapter 13 have site and laterality designations.

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Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- The site designations for the limbs are:
  - Upper arm.
  - Lower arm.
  - Upper and lower leg:
    - Humerus.
    - Ulna.
    - Femur.
    - Tibia.
    - Fibula.

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Arthropathies and related disorders (M00-M25)

- This section includes some of the following conditions:
  - Systemic lupus erythematosus is a chronic autoimmune inflammatory disease involving multiple organ systems and marked by periods of exacerbation and remission.
  - Arthropathy (any disease of joint) associated with infections includes arthritis, arthropathy, polyarthritis, and polyarthropathy.

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Arthropathies and related disorders (M00-M25)

- Rheumatoid arthritis and other inflammatory polyarthropathies include juvenile chronic polyarthritis.
- Osteoarthrosis and allied disorders include degenerative and hypertrophic arthritis or polyarthritis, degenerative joint disease, and osteoarthritis.

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Dorsopathies (M40-M54)

- Dorsopathy is any disease of the back (dorso--word root meaning “back”).
- This section of codes includes codes for spondylosis (any degenerative condition of the spine), intervertebral disk disorders, lumbago (low back pain), and sciatica (severe pain in the leg along the course of the sciatic nerve felt at the back of the thigh and running down the inside of the leg).

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Other Soft Tissue Disorders (M70-M79)

- Rheumatism is a general term for acute and chronic conditions characterized by inflammation, muscle soreness and stiffness, and pain in joints and associated structures.
- It includes arthritis due to rheumatic fever or trauma, degenerative joint disease, neurogenic arthropathy, hydroarthrosis, myositis, bursitis, fibromyositis, and many other conditions.
- The term enthesopathy appears under category M76 and represents disorders of peripheral ligamentous or muscular attachments.

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Muscle Weakness (M62.81)

- Weakness may be subjective (the person feels weak, but has no measurable loss of strength) or objective (measurable loss of strength noted in a physical exam).
- Weakness may be generalized (total body weakness) or localized to a specific area, side of the body, limb, or muscle.
- Measurable weakness may result from a variety of conditions including metabolic, neurologic, primary muscular diseases, and toxic disorders.

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Common Causes of Muscle Weakness

- Causes of muscle weakness include:
  - Metabolic.
  - Addison's disease.
  - Thyrotoxicosis.
- Neurologic:
  - Stroke (often localized or focal weakness).
  - Bell's Palsy (weakness of one side of the face).
- A nerve impingement syndrome, such as a slipped disk in the spine.

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Common Causes of Muscle Weakness

- Multiple sclerosis.
- Amyotrophic lateral sclerosis (ALS, or Lou Gehrig's disease; focal developing to generalized).
- Cerebral palsy (focal weakness associated with spasticity).
- Guillain-Barre syndrome.

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Common Causes of Muscle Weakness

- Primary muscular diseases:
  - Muscular dystrophy (Duchenne).
  - Becker muscular dystrophy.
  - Myotonic dystrophy.
  - Dermatomyositis.
- Toxic:
  - Organophosphate poisoning (insecticides, nerve gas).
  - Paralytic shellfish poisoning.
  - Botulism.

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Common Causes of Muscle Weakness

- Other:
  - Myasthenia gravis (an autoimmune disorder that interferes with the transmission of nerve impulses to muscle).
  - Poliomyelitis (an infectious disease that damages motor neurons).
  - Dermatomyositis/polymyositis (autoimmune diseases leading to proximal muscle weakness, muscle pain, and sometimes skin rashes).

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Osteopathies and Chondropathies (M80-M94)

- This section includes the following conditions:
  - Osteoporosis.
  - Osteomalacia.
  - Stress fractures.
  - Pathological fractures.
  - Dysplasia.
  - Osteitis.
  - Disorder of bone density and structure.

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Osteopathies and Chondropathies (M80-M94)

Osteoporosis

- There are two categories of codes in ICD-10-CM:
  - M80 Osteoporosis with current pathologic fracture.
  - M81 Osteoporosis without current pathologic fracture.

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Osteopathies and Chondropathies (M80-M94)

Osteoporosis

- Osteoporosis is a systemic condition where all bones of the musculoskeletal system are affected:
  - Category M81 is reported for patients who do not currently have a pathologic fracture due to the osteoporosis, but may have had a pathologic fracture in the past.
  - For patients with a history of fractures as a result of osteoporosis, a status code Z87.310 is reported.

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Osteopathies and Chondropathies (M80-M94)

Osteoporosis

- Category M80 is reported for a patient who has a current pathologic fracture.
- A traumatic fracture care code is not reported for a patient with known osteoporosis who suffers a fracture even if the patient has a minor fall or trauma, if that fall would not usually break a normal healthy bone.

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Osteopathies and Chondropathies (M80-M94)

Osteomyelitis

- Osteomyelitis is an inflammation of the bone, especially the marrow, caused by a pathogenic organism.
  - Symptoms include pain in the affected part, fever, sweats, leukocytosis, rigid overlying muscles, inflamed skin, and pain on pressure over the affected part.
  - This code provides instructions to use a fifth digit to identify the causative organism, such as *staphylococcus*.

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Osteopathies and Chondropathies (M80-M94)

- Osteochondropathies are diseases of the bone and cartilage.
- Osteochrondrosis is a disease causing degenerative changes in the ossification centers of the epiphyses of bones, particularly during periods of rapid growth in children.
  - The process continues to the stage of avascular and aseptic necrosis, and there is slow healing and repair.

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Osteopathies and Chondropathies (M80-M94)

- Curvatures of the spine include:
  - Kyphosis (also known as “hunchback”), an abnormal increase in the outward curvature of the thoracic spine.
  - Lordosis (also known as “swayback”), an abnormal increase in the forward curvature of the lower or lumbar spine.
  - Scoliosis, an abnormal lateral or sideways curvature of the spine.

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Nontraumatic Compartment Syndrome

- Nontraumatic compartment syndrome is coded in category M79.-
- Compartment syndromes are classified either as traumatic or nontraumatic and may be acute or chronic.
- Compartment syndromes due to trauma are not coded in this category.

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Pathological Fractures

- A traumatic fracture is a break in normal healthy bone, whereas a pathological fracture occurs in diseased or weakened bone with no trauma or only minor trauma that would not normally break a healthy bone.
- Some conditions that weaken a bone and make it susceptible to fracture are:
  - Generalized disorders in children:
    - Osteogenesis imperfecta.
    - Rickets.

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Pathological Fractures

- Generalized disorders in adults:
  - Osteomalacia.
  - Osteosclerosis.
  - Hyperparathyroidism.
- Generalized disorders in the aged:
  - Osteoporosis of bone (senile or postmenopausal).
  - Paget’s disease of bone.
  - Carcinomatosis.
  - Multiple myelomatosis.

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Pathological Fractures

- Local lesions-benign:
  - Solitary bone cyst in children and adolescents.
  - Parathyroid lesion (localized).
  - Enchondroma of bone in hands and feet.
  - Osteomyelitis.
- Malignant lesions:
  - Secondary deposit in bone from primary lesion in the thyroid, bronchus, breast, kidney, or prostate.
  - Primary malignant tumor in bone (eg, Ewing's tumor).

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Pathological Fractures

- Pathological fractures are coded in category M84.4-
- A seventh character is required that indicates the treatment encounter.
- The pathological fracture is designated as the principal diagnosis when the patient is being treated solely for the pathological fracture.
- The coder must differentiate between traumatic, accident-induced fractures and spontaneous, pathological fractures (a fracture with or without trauma that would not normally occur in a healthy bone).

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Pathological Fractures

- Always code the pathological fracture to M84.-, based on site and laterality.
- If the underlying condition of the pathological fracture is known, always code the underlying condition as the secondary diagnosis when treatment is for the pathological fracture.
- A physician diagnosis of spontaneous fracture is coded in category M84.- regardless of whether the documentation includes the underlying condition.

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Malunion of a Fracture

- The term “malunion” implies that bony healing has occurred but the fracture fragments are in poor position.
- Treatment of a malunion, in general, involves the surgical cutting of the bone (osteotomy), repositioning the bone, and usually the addition of some type of internal fixation, with or without bone graft.
- Malunions are frequently diagnosed during a fracture's healing stages.

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Malunion of a Fracture

- Many malunions may be left without surgical interventions in hopes that the patient will have no functional problems.
- Surgery usually results from some functional disability or pain as a result of the less-than-anatomical position of the bones.

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Nonunion of a Fracture

- "Nonunion" indicates that healing has not occurred between the two fracture parts.
- Treatment of a nonunion, in general, involves opening the fracture, scraping away the intervening soft tissue (usually scar tissue), and performing a partial debridement of the bone end with repositioning of the bone.
- Usually, some type of internal fixation and bone grafting is also performed.

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Nonunion of a Fracture

- The treatment of a nonunion is more complicated and difficult to perform than treatment of a malunion.
- Since either the malunion or non union of a fracture is considered a “Late effect” of a Fracture, the late effect referred to as sequelae.
- Codes may be assigned at any time after the acute injury.

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Stress Fractures

- Stress fractures are fractures usually occurring in weight-bearing bones, caused by repeated minimal stresses.
- Stress fractures are caused by overuse or repetitive jarring of the bone.
- They can occur following unaccustomed strenuous exercise by the patient.
- They commonly occur in the metatarsals of the foot, lumbar spine, upper tibia and fibula, and neck of the femur.

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Stress Fractures

- Stress fractures are coded to subclassification M84.3-
- Typically the patient has diffuse pain of a few weeks' duration, with no history of any specific injury to the site.
- The patient may complain of localized tenderness of the site. X-rays may show a hairline crack in the bone and there may be some callus around the site.

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Diseases of the Genitourinary System (N00-N99)

Glomerular Diseases

- Chapter 14 in the Tabular List includes the following sections:
- Glomerular Diseases (N00-N08).
- Renal Tubulo-Interstitial Diseases (N10-N16).
- Acute Kidney Failure and Chronic Kidney Disease (N17-N19).
- Urolithiasis (N20-N23).
- Other Disorders of Kidneys and Ureter (N25-N29).
- Other Disease of the Urinary System (N30-N39).

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Diseases of the Genitourinary System (N00-N99)

Glomerular Diseases

- Diseases of Male Genital Organs (N40-N53).
- Disorders of Breast (N60-N65).
- Inflammatory Diseases of Female Pelvic Organs (N70-N77).
- Noninflammatory Disorders of Female Genital Tract (N80-N98).
- Intraoperative and Postprocedural Complications and Disorders of Genitourinary System, Not Elsewhere Classified (N99).

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Diseases of the Genitourinary System (N00-N99)

Glomerular Diseases

- This section excludes hypertensive kidney disease, which is found in category I12.-
- Diseases coded in the section include:
  - Nephritis: inflammation of the kidney.
  - Glomerulonephritis: a form of nephritis in which the lesions involve primarily the glomerulus (bundle of capillaries that acts as filters in the formation of urine in the kidney).
  - Can be acute, subacute, or chronic; generally bilateral.

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Diseases of the Genitourinary System (N00-N99)

Glomerular Diseases

- Nephrotic syndrome: occurs when damage to glomeruli results in retention of body fluids and loss of vital proteins.
- Nephrosis: condition in which degenerative changes occur in the kidneys, without inflammation.
- Renal failure: decline in kidney efficiency; can be acute or chronic.
- Chronic renal failure is also referred to as chronic uremia (toxic condition associated with renal insufficiency and the retention in the blood of substances normally excreted by the kidney).

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Kidney is classified into category N18.
- End stage renal disease (ESRD) or chronic kidney disease (CKD) is that stage of kidney impairment that requires either a regular course of dialysis or kidney transplantation.
- ESRD occurs from the destruction of normal kidney tissue over a long period of time.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Often, there are no symptoms until the kidney has lost more than half of its function.
- The loss of kidney function in ESRD is usually irreversible and permanent, with the patient most commonly on dialysis.
- Chronic kidney failure develops as a complication of other diseases such as primary hypertension, nephrosis, systemic lupus erythematosus, glomerulonephritis, and polycystic kidney disease, to name a few.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Chronic renal failure is coded in category N18.9
- Acute kidney failure (AKF) is the rapid breakdown of renal (kidney) function that occurs when high levels of uremic toxins (waste products of the body's metabolism) accumulate in the blood.
- Acute renal failure occurs when the kidneys are unable to excrete (discharge) the daily load of toxins in the urine.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- The numerous potential causes of damage to the kidneys include:
  - Decreased blood flow--this may occur when there is extremely low blood pressure caused by trauma, complicated surgery, septic shock, hemorrhage, or burns; associated dehydration; or other severe or complicated illnesses.
  - Acute tubular necrosis, which may occur when tissues aren't getting enough oxygen or when the renal artery is blocked or narrowed

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Overexposure to metals, solvents, radiographic contrast materials, certain antibiotics, and other medications or substances.
- Myoglobinuria (myoglobin in the urine)--this condition may be caused by rhabdomyolysis, alcohol abuse, a crush injury, tissue death of muscles from any cause, seizures, and other disorders.
- Direct injury to the kidney.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- The numerous potential causes of damage to the kidneys include:
  - Infections such as acute pyelonephritis or septicemia.
  - Urinary tract obstruction, such as a narrowing of the urinary tract (stricture), tumors, kidney stones, nephrocalcinosis, or enlarged prostate with subsequent acute bilateral obstructive uropathy.
  - Severe acute nephritic syndrome.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Disorders of the blood, such as idiopathic thrombocytopenic purpura transfusion reaction or other hemolytic disorders, malignant hypertension, and disorders resulting from childbirth, such as bleeding placenta or placental previa, can damage the kidneys.
- Autoimmune disorders such as scleroderma can cause acute renal failure.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- In young children, hemolytic uremic syndrome is an increasingly common cause of acute renal failure.
  - A toxin-secreting bacterium, *Escherichia coli* (*E coli*), found in contaminated undercooked meats, has been implicated as the cause of hemolytic uremic syndrome.
- Symptoms include:
  - Decreased urine output.
  - No urine output.
  - Excessive urination at night.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Edema.
- Generalized fluid retention.
- Decrease in sensation.
- Changes in mental status/mood.
- Sluggish movement.
- Hand tremor.
- Nausea and vomiting.

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Diseases of the Genitourinary System (N00-N99)

Chronic Kidney Disease (CKD)

- Seizures.
- Prolonged bleeding or bruising.
- Fatigue.
- Breath odor.
- Breast development in males.
- Ear noise/buzzing.

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Coding Issues

- Since there is a relationship with other conditions such as hypertension and diabetes mellitus, there are specific coding rules for both conditions when kidney disease is present.

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Other Diseases of the Urinary System (N30-N39)

- Diseases found in this section include the following:
  - Pyelonephritis: inflammation of the kidney pelvis; can be acute or chronic.
  - Hydronephrosis: abnormal accumulation of urine in the kidney and renal pelvis due to obstruction.
  - Urinary stones (calculi): caused by crystallization of minerals in the urine to form hard, stonelike masses in various locations within the urinary tract including the kidneys, ureters, and bladder.

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Other Diseases of the Urinary System (N30-N39)

- Cystitis: inflammation of the bladder, most commonly caused by *Escherichia coli* (*E coli*), or other gram-negative bacteria such as *Proteus* and *Pseudomonas*.
- Enterobacter and Klebsiella. The classic symptoms of cystitis are dysuria (painful urination), urgency, and frequency.
- Infectious organisms can invade the urinary tract via the urethra.

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Other Diseases of the Urinary System (N30-N39)

- The urethral route is most plaguing to women.
- In the male, the long penile urethra plus the presence of antibacterial secretions from the prostate discourage this route.
- Urethritis: inflammation of the urethra.

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Diseases of Male Genital Organs (N40-N53)

- Diseases of the male genital organs are included in this section because of the anatomic interconnection between the male urinary system and the male reproductive system.
  - Hyperplasia of the prostate is an enlargement of the prostate, also referred to as hypertrophy.
  - Prostatitis is an inflammation of the prostate that can be acute or chronic and is often associated with considerable pain and discomfort.

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Diseases of Male Genital Organs (N40-N53)

- Orchitis is an inflammation of the testes.
- Epididymitis is an inflammation of the epididymis (located on the posterior side of the each testis and constituting the first part of the excretory duct of each testis).

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Disorders of Breast (N60-N65)

- Although this section of codes would appear to be used to report disorders of the female breast, some codes listed in this section apply to both men and women.
- Conditions that are coded from this section include benign mammary dysplasia, which is also referred to as fibrocystic disease; and fibrous masses or cysts, part of a hormonally mediated proliferative condition.

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Disorders of Breast (N60-N65)

- Other disorders of the breast include inflammatory disease (eg, abscess, mastitis), hypertrophy, atrophy, and galactocele (milk-filled cyst caused by a blocked milk duct).
- This section also includes signs and symptoms in the breast that may require further investigation, such as mastodynia (pain in the breast), lump or mass in breast, and nipple discharge.

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Inflammatory Disease of Female Pelvic Organs (N70-N77)

- This section begins with a note to use an additional code(s) to infectious agent, such as *staphylococcus* or *streptococcus*.
- This section excludes inflammatory disease of the female pelvic organs that is associated with pregnancy, abortion, childbirth, or the puerperium, which is located in Chapter 15 of ICD-10-CM.

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Inflammatory Disease of Female Pelvic Organs (N70-N77)

- This section includes acute and chronic inflammatory conditions of the:
  - Ovary, fallopian tube, pelvic cellular tissue, and peritoneum.
  - Uterus, except the cervix.
  - Cervix, vagina, and vulva.

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Non-Inflammatory Disorders of Female Genital Tract (N80-N98)

- This section includes endometriosis, a benign condition in which endometrial material is present outside of the endometrial cavity.
- Some common sites of endometriosis are the ovaries, uterus, and fallopian tubes.

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Non-Inflammatory Disorders of Female Genital Tract (N80-N98)

- Genital prolapse is downward displacement or weakness in walls of organs of reproduction. This category of codes instructs the coder to use an additional code to identify urinary incontinence associated with the genital prolapse. Some of the conditions included are:
  - Cystocele: a hernia of the bladder wall into the vagina, causing a soft anterior fullness.

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Non-Inflammatory Disorders of Female Genital Tract (N80-N98)

- Rectocele: herniation of the terminal rectum into the posterior vagina, causing a collapsible, pouchlike fullness.
- Enterocele: a vaginal vault hernia containing small intestine, usually in the posterior vagina.

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