**General Surgery Scenario 2: Gram-negative Sepsis, Tracheostomy**

**History of Present Illness**

63-year-old female presented to the ED after being found semi-unconscious at home. Patient admitted to ICU intubated with severe sepsis and acute hypoxic respiratory failure. Blood cultures grew gram-negative coccobacillus. Final diagnosis Gram-negative sepsis with acute respiratory failure. The patient has had multiple unsuccessful attempts to wean from ventilator. Decision made today to perform a tracheostomy.

**Past Medical History**
- Chronic COPD
- Hypertension

**Pertinent Physical Exam**
- Vital Signs: Temperature: 39C, Pulse: 100, RR assisted with vent at 12 to 14  B/P 132/68 Pulse Ox 98%.
- Lungs: Bilateral equal breath sounds, fine crackles in all fields, suctioning Q2 hours for clear thick sputum.
- Cardiac: sinus tachycardia, Bilateral upper and lower pulses strong and equal. Positive plus 1 ankle edema.
- Abdomen: Soft, nontender, being fed via NG tube last BM 24 hours ago
- Skin: warm and moist no areas of breakdown. Turned Q2 hours

**Course in Hospital**

Tracheostomy, A 3-cm incision was made approximately two fingerbreadths above the sternal notch. Subcutaneous fat was dissected and removed. The strap muscles were identified and divided, and an incision was made between the second and third tracheal ring with an inferior based tracheal flap being created. The inferior tracheal flap was sewn to the inferior skin edge, creating a skin flap with 3-0 Vicryl in order to secure the stoma. The ET tube was slowly withdrawn to just above the tracheostomy site. An 8.0 XLT Shiley trach was inserted with no difficulties.
Key ICD-10 Documentation Takeaways

✓ Clarify the type, acuity, and cause and differentiate between failure and insufficiency for respiratory failure
✓ Clarify hypercapnia or hypoxia when clinically indicated for respiratory failure
  o If the patient requires, home oxygen administration further clarify if the patient has chronic respiratory failure and document the suspected cause
✓ Document the infecting organism when known, as well as the following:
  o Acuity, anatomical location and laterality
  o Confirmation of the presence of SIRS, Sepsis, Severe Sepsis, Septic Shock, etc.
  o Infection related manifestations
  o Device related or post-operative
✓ Specify tobacco use and/or dependence and exposure to tobacco smoke
✓ Specify the objective of the procedure and diagnosis supporting medical necessity
✓ Document the approach of procedure (i.e., open, percutaneous or percutaneous endoscopic).
  o Further document when the intended approach is converted to a different approach
✓ Clarify where the bypass is coming from, and the body part bypassed to
✓ Specify the device (i.e. Intraluminal, Tracheostomy) if used

Coding Comparison: Diagnosis Codes

<table>
<thead>
<tr>
<th>ICD-9-CM Diagnosis Codes</th>
<th>ICD-10-CM Diagnosis Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>038.40 Gram-neg septicemia NOS</td>
<td>A41.50 Gram-negative sepsis, unspecified</td>
</tr>
<tr>
<td>995.92 Severe sepsis</td>
<td>R65.20 Severe sepsis without septic shock</td>
</tr>
<tr>
<td>518.81 Acute respiratory failure</td>
<td>J96.01 Acute respiratory failure, with hypoxia</td>
</tr>
</tbody>
</table>

Coding Comparison: Procedure Codes

<table>
<thead>
<tr>
<th>ICD-9 PCS Codes</th>
<th>ICD-10 PCS Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>31.1 Temporary tracheostomy</td>
<td>0B110F4 Bypass Trachea to Cutaneous with Tracheostomy Device, Open Approach</td>
</tr>
</tbody>
</table>
**ICD-10 PCS Characters**

To avoid queries, remember to provide sufficient information for coders to select procedure codes. All codes in ICD-10-PCS are seven characters in length and each of the seven characters represent an aspect of the procedure.

<table>
<thead>
<tr>
<th>Character 1 Section</th>
<th>Character 2 Body System</th>
<th>Character 3 Root Operation</th>
<th>Character 4 Body Part</th>
<th>Character 5 Approach</th>
<th>Character 6 Device</th>
<th>Character 7 Qualifier</th>
</tr>
</thead>
</table>

**Definitions Used in ICD-10-PCS**

ICD-10-PCS has standardized, specific definitions for values and characters. Review the following definitions:

- **Value** - Individual units defined for each character and represented by a number or letter
- **Section (1st character)** – Defines the general type of procedure
- **Body System (2nd character)** – Defines the general physiological system on which the procedure is performed or anatomical region where the procedure is performed
- **Root Operation/Type (3rd character)** – Defines the objective of the procedure
- **Body Part or Region (4th character)** - Defines the specific anatomical site where the procedure is performed
- **Approach (5th character)** - Defines the technique used to reach the site of the procedure
- **Device (6th character)** – Defines the material or appliance the remains in or on the body at the end of the procedure
- **Qualifier (7th character)** – Defines the additional attribute of the procedure performed, if applicable
**Assessment Questions:**
(answers on next page)

1. In the above scenario, what additional **documentation** specificity is needed to document respiratory failure?

2. Based on the above scenario what are the components of the **documentation** that support ICD-10 coding? (select all that apply)
   - ☐ Clarify hypercapnia or hypoxia when clinically indicated for respiratory failure
   - ☐ Document the infecting organism
   - ☐ Specify tobacco use and/or dependence and exposure to tobacco smoke
   - ☐ All of the above

3. Based on the above scenario what are the components of the **documentation** that support the procedure? (select all that apply)
   - ☐ Document the objective of the procedure
   - ☐ Document the approach of procedure (i.e., open, percutaneous or percutaneous endoscopic)
   - ☐ Clarify where the bypass is coming from and the body part bypassed to
   - ☐ All of the above
Assessment Answers:

1. In the above scenario, what additional documentation specificity is needed to document respiratory failure?

   ✓ Acute hypoxic respiratory failure

2. Based on the above scenario what are the components of the documentation that support ICD-10 coding? (select all that apply)

   □ Clarify hypercapnia or hypoxia when clinically indicated for respiratory failure
   □ Document the infecting organism
   □ Specify tobacco use and/or dependence and exposure to tobacco smoke
   ✓ All of the above

3. Based on the above scenario what are the components of the documentation that support the procedure? (select all that apply)

   □ Document the objective of the procedure
   □ Document the approach of procedure (i.e., open, percutaneous or percutaneous endoscopic)
   □ Clarify where the bypass is coming from and the body part bypassed to
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