



Western Australian Coding Rule

0719/19 ACCD Coding Rule: Coding from findings on medical imaging (radiological) reports

WA Coding Rule 0217/01 *ACCD Coding Rule: Coding from findings on medical imaging (radiological) reports, December 2015* is retired.

In ICD-10-AM/ACHI/ACS Eleventh Edition (effective 1 July 2019) ACS 0010 *Clinical documentation and general abstraction guidelines* provides guidance about coding of diagnostic test results that add specificity to already documented conditions.

DECISION

WA Coding Rule 0217/01 *ACCD Coding Rule: Coding from findings on medical imaging (radiological) reports, December 2015* is retired.

[Effective 1 Jul 2019, ICD-10-AM/ACHI/ACS 11th Ed.]



Western Australian Coding Rule

0217/01 ACCD Coding Rule *Coding from findings on medical imaging (radiological) reports* December 2015

Q.

Please clarify whether the ACCD Coding Rule *Coding from findings on medical imaging (radiological) reports* (Dec 2015) should be applied to all test results e.g. histopathology?

A.

The ACCD Coding Rule *Coding from findings on medical imaging (radiological) reports* (Dec 2015) responds to questions about abstracting findings from radiological reports and is based on application of ACS 0010 *General abstraction guidelines, test result*. ACS 0010 states that test results may only be used to add specificity to a **documented** condition. This Coding Rule further asserts that for conditions with multiple concepts (that are linked in the classification) each concept must be documented. For example, although the classification links ureteric calculus and hydronephrosis, each condition must be documented or confirmed by the clinician to inform code assignment i.e. hydronephrosis abstracted from a radiological report alone is insufficient; it must also be documented elsewhere in the clinical record. WACCAG interprets this ACCD Coding Rule to apply to all test results including histopathology, in keeping with ACS 0010. Some examples:

- Cervical erosion with cervicitis (cervicitis on histo report only) N86
- Cholelithiasis with cholecystitis (cholecystitis on histo report only) K80.2-
- Acute appendicitis with peritonitis (peritonitis on histo report only) K35.8
- Appendicitis with perforation (microperforation on histo report only) K35.8

In all these examples, each condition must be documented or confirmed by the clinician rather than solely using the histopathology report to inform code assignment.

Qualifying a single concept using histopathology results remains acceptable, in accordance with ACS 0010. For example:

- Skin eruption, lichenoid
- Skin lesion, malignant (BCC, SCC)
- Polyp stomach, adenomatous
- Cholecystitis, emphysematous, gangrenous

Please note: same-day elective diagnostic endoscopy findings should be coded in accordance with ACS 0051 *Same-day endoscopy – Diagnostic*.

DECISION

WACCAG interprets that the ACCD Coding Rule *Coding from findings on medical imaging (radiological) reports* (Dec 2015) applies to all test results, including histopathology. Same-day elective endoscopy findings should be coded in accordance with ACS 0051 *Same-day endoscopy – Diagnostic*.

This advice has a minor modification to correspond with an update in ICD-10-AM/ACHI/ACS Tenth Edition.

[Effective 15 February 2017, ICD-10-AM/ACHI/ACS 9th Ed.]