



PHISC Addendum to the South African ICD-10 Morbidity Coding Standards and Guidelines document

Proposal from the PHISC ICD-10 Technical Workgroup of the PHISC Clinical Coding subcommittee

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Acknowledgement

The PHISC Addendum to the South African ICD-10 Morbidity Coding Standards and Guidelines document has been agreed and compiled by the PHISC ICD-10 Technical Workgroup. Acknowledgment and thanks to the members for their contribution and efforts in making this document possible.

Introduction and Disclaimer

This addendum has been compiled with the aim of documenting ICD-10 coding standards and guidelines suggested by PHISC, for use IN ADDITION TO The South African ICD-10 Morbidity Coding Standards and Guidelines, Version 6 (April 2014) as officially published for South Africa on the website of the National Department of Health. This addendum does not serve as a training document and is not regulated for use; it is a de-facto PHISC guide to further assist the user in the standardised use of ICD-10.

Coding Standards are:

1. Developed to assist the clinical coder.
2. Developed to keep a record of and track coding standards and guidelines as agreed on by PHISC.
3. To be used concurrently with the South African ICD-10 Morbidity Coding Standards and Guidelines document, the ICD-10 manuals and training material.

User Guide

A standard

- a specification by which something may be tested or measured (specification – details describing something to be done)
- the required level of quality

A guideline

- a statement of principle giving general guidance

PGS0001

PGS – PHISC General Standard

GS00 – Relates to General Coding Standards

01 – A unique number allocated to the standard

PCS0101

PCS – PHISC Chapter Specific Standard

CS01 – Relates to Chapter Specific Standards

01 – A unique number allocated to the standard

Symbols used



Please reference the South African ICD-10 Morbidity Coding Standards and Guidelines, Version 6 (as at April 2014) when this symbol is displayed.

PHISC General Morbidity Coding Standards and Guidelines

PGS0001 Version of ICD-10 used in South Africa

Caution regarding different versions of ICD-10

Please note that not all reference to ICD-10 on the internet is referring to the World Health Organisation (WHO) edition of ICD-10. In South Africa, we use the WHO 'vanilla' version of ICD-10, with a few local code additions. The SA ICD-10 Master Industry Table (MIT), Jan 2014 (containing all WHO Corrigenda updates until January 2014), is the ONLY official reference list for ICD-10 codes appropriate for use in South Africa.

The American ICD-10-CM (Clinical Modification), the new diagnostic coding system replacing ICD-9-CM in America is also referred to as ICD-10 on the internet. This is a very different set of codes, although based on ICD-10, a clinical modification has been done and some of the codes now have up to 7 characters (Format: XXX.XXXX). These are not appropriate for use in South Africa. The WHO also have a version of ICD-10 (2016) available in electronic look-up format on their website but this does not contain the South African local codes or specific rules for use of the code set in South Africa. An updated 2016 set of ICD-10 books is available from DENOSA – please note that there are some new codes in this edition which are not in the SA ICD-10 MIT January 2014.

It is thus vital to always cross-reference your ICD-10 codes to the SA MIT to ensure adherence to local industry requirements. The MIT can be freely downloaded from the website of the National Department of Health: <http://www.health.gov.za/index.php/shortcodes/2015-03-29-10-42-47/2015-06-10-09-23-36/2015-06-10-09-26-11>

http://www.health.gov.za/index.php/shortcodes/2015-03-29-10-42-47/2015-06-10-09-33-36/2015-06-10-09-26-11

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ICD-10 Documents

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- Circular No.06 of 2014 Validation of Secondary ICD-10 Codes [Details](#) [Download](#)
- ICD-10 Compliance Data Grid [Details](#) [Download](#)
- Circular No.04 of 2014 Errata: Code Z09.0 [Details](#) [Download](#)
- Circular No.05 of 2014 Inclusion of ICD-10 Codes on Prescription [Details](#) [Download](#)
- Changes to the SA ICD-10 Morbidity Coding Standard Version 6 June 2014 [Details](#) [Download](#)
- New Codes with notes: WHO updates to ICD-10 2013 [Details](#) [Download](#)
- The South African ICD-10 Morbidity Coding Standards and Guidelines [Details](#) [Download](#)
- Errata ICD-10 Master Industry Table (MIT) of 01 January 2014 [Details](#) [Download](#)
- ICD-10 Circular 2 of 2014 Submission of Aggregated ICD-10 Compliance Data 2014 [Details](#) [Download](#)
- ICD-10_MIT_2014 Changes Add Delete Modify 1 Jan 2014 [Details](#) [Download](#)
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PGS0002 ICD-10 Quick Reference Code (QRC) lists or Short lists

The use of ICD-10 Quick Reference Code (QRC) lists / short lists / “cheat-sheets” is not recommended as this compromises coding accuracy affecting health information data used for epidemiology, disease management, re-imburement e.g. prescribed minimum benefits (PMB's), etc¹

¹ Reference: ICD-10 Implementation Review January 2004 – March 2010.

PHISC Chapter Specific Coding Standards and Guidelines

PCS01 Certain infectious and parasitic diseases (A00 – B99)

PCS02 Neoplasms (C00 – D48)

PCS03 Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50 – D89)

PCS04 Endocrine, nutritional and metabolic diseases (E00 – E90)

PCS05 Mental and behavioural disorders (F00 – F99)

PCS06 Diseases of the nervous system (G00 –G99)

PCS07 Diseases of the eye and adnexa (H00 – H59)

PCS08 Diseases of the ear and mastoid process (H60 – H95)

PCS09 Diseases of the circulatory system (I00 – I99)

PCS10 Diseases of the respiratory system (J00 – J99)

PCS11 Diseases of the digestive system (K00 – K93)

PCS12 Diseases of the skin and subcutaneous tissue (L00 – L99)

PCS13 Diseases of the musculoskeletal system and connective tissue (M00 – M99)

PCS14 Diseases of the genitourinary system (N00 – N99)

PCS15 Diseases of Pregnancy, Childbirth and the Puerperium (O00 – O99)

PCS16 Certain conditions originating in the perinatal period (P00 – P96)

PCS17 Congenital malformations, deformations and chromosomal abnormalities (Q00 – Q99)

PCS18 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00 – R99)

PCS19 Injury, poisoning and certain other consequences of external causes (S00 – T98)

PCS20 External causes of morbidity and mortality (V01 – Y98)

PCS21 Factors influencing health status and contact with health services (Z00 – Z99)

PCS22 Codes for special purposes (U00 – U99)

PCS01 Certain infectious and parasitic diseases (A00 – B99)

PCS0101 ICD-10 codes to be assigned for Enterococcus Faecalis

Example 1:

Patient admitted with a urinary tract infection, causative organism Enterococcus Faecalis

PDX: N39.0 Urinary tract infection, site not specified

SDX: B96.8 Other specified bacterial agents as the cause of diseases classified to other chapters

Example 2:

Patient admitted with a urinary tract infection, causative organism Enterococcus Faecalis, noted as resistant to multiple antimicrobial drugs

PDX: N39.0 Urinary tract infection, site not specified

SDX: B96.8 Other specified bacterial agents as the cause of diseases classified to other chapters

SDX: U84.7 Resistance to multiple antimicrobial drugs

PCS0102 ICD-10 codes to be assigned for invasive non-typhoidal salmonella caused by the Novel Pathogen

Assign codes as follows:

PDX: A02.8 Other specified salmonella infections

SDX: B96.8 Other specified bacterial agents as the cause of diseases classified to other chapters

PCS0103 ICD-10 code to be assigned for Sindbis virus (SINV)

Assign **A92.8 Other specified mosquito-borne viral fevers** for Sindbis virus (SINV)

PCS0104 ICD-10 code to be assigned for Extended Spectrum Betalactamase (ESBL)

Assign an ICD-10 code for the infection followed by **U82.2 Extended spectrum betalactamase (ESBL) resistance**.

PCS0105 ICD-10 code to be assigned for MERS virus

Middle East respiratory syndrome (MERS) is a viral respiratory disease caused by a novel coronavirus (MERS-CoV) that was first identified in Saudi Arabia in 2012².

Assign as follows:

Example 1:

Patient admitted with severe acute respiratory syndrome (SARS) caused by Middle East Respiratory Syndrome (MERS)

PDX: U04.9 Severe acute respiratory syndrome, unspecified

SDX: B97.2 Coronavirus as the cause of diseases classified to other chapters

Example 2:

Patient admitted with respiratory distress syndrome caused by Middle East Respiratory Syndrome (MERS)

PDX: J80 Adult respiratory distress syndrome

SDX: B97.2 Coronavirus as the cause of diseases classified to other chapters

² <http://www.who.int/mediacentre/factsheets/mers-cov/en/>

PCS02 Neoplasms (C00 – D48)

PCS0201 Neoplasm Coding



DSN0201 Neoplasm Coding

Guideline

The abbreviation “Ca” will be deemed to mean “cancer” and the morphology code **M8000/3 Neoplasm, malignant, primary site** will be assigned unless preceded by a morphological description.

PHISC addition to “Ca” guideline:

Clinical Coders should make every effort to identify the detailed morphological description and the default code should only be assigned as the last resort.

PHISC change to guideline

Second sentence removed from the guideline

Z51.2 Other chemotherapy should be assigned when chemotherapy is administered for treatment of non-cancer diagnoses e.g. for the treatment of auto-immune conditions.

PCS09 Diseases of the circulatory system (I00 – I99)

PCS0901 Coding of the Circulatory System (I00 – I99)



DSN0901 Coding of the Circulatory System

Hypertension and renal disease or conditions

Rule:

For hypertension and renal disease or renal failure, only presume a link or causal relationship between the two conditions if it is clearly stated by the physician that the renal disease is due to the hypertension. Phrases such as hypertensive and due to hypertension indicate a causal relation.

Table 1³

Instruction	Tabular list entries
Revise inclusion: (January 2010)	<p>I12 Hypertensive renal disease <i>Includes:</i> any condition in N18.-, N19, or N26 with any condition in I10 due to hypertension arteriosclerosis of kidney arteriosclerotic nephritis (chronic)(interstitial) hypertensive nephropathy nephrosclerosis</p> <p><i>Excludes:</i> secondary hypertension (I15.-)</p> <p>I12.0 Hypertensive renal disease with renal failure Hypertensive renal failure</p> <p>I12.9 Hypertensive renal disease without renal failure Hypertensive renal disease NOS</p>

³ WHO Corrigenda, Official WHO Updates combined 1996 2015 VOLUME 1

PCS10 Diseases of the respiratory system (J00 – J99)



DSN10 Diseases of the respiratory system (J00 – J99)

PHISC Guideline for the coding of Respiratory Distress

Neonate within 28 days

Premature newborn admitted with respiratory distress following delivery in hospital.

PDX: P22.9 Respiratory distress of newborn, unspecified

SDX: P07.3 Other preterm infants

SDX: Z38.0 Singleton, born in hospital

Premature newborn admitted with respiratory distress syndrome following delivery in hospital.

PDX: P22.0 Respiratory distress syndrome of newborn

SDX: P07.3 Other preterm infants

SDX: Z38.0 Singleton, born in hospital

Neonate readmitted after 28 days linked to perinatal period

Six week old baby re-admitted with respiratory distress.

PDX: P22.9 Respiratory distress of newborn, unspecified

Six week old baby re-admitted with respiratory distress syndrome.

PDX: P22.0 Respiratory distress syndrome of newborn

First time after 28 days

Six week old baby admitted with respiratory distress.

PDX: R06.0 Dyspnoea

Six week old baby admitted with respiratory distress syndrome.

PDX: J80 Adult respiratory distress syndrome

Two year old child admitted with respiratory distress syndrome.

PDX: J80 Adult respiratory distress syndrome

PCS11 Diseases of the digestive system (K00 – K93)



DSN11 Diseases of the digestive system (K00 – K93)

PHISC Guideline for the coding of liver failure caused by chronic viral Hepatitis C infection

Assign a code for the liver failure followed by the cause of the liver failure

Example:

Patient has liver failure caused by chronic viral Hepatitis C infection

PDX: K72.9 Hepatic failure, unspecified

SDX: B18.2 Chronic viral hepatitis C

PCS14 Diseases of the genitourinary system (N00 – N99)



DSN14 Diseases of the genitourinary system (N00 – N99)

PCS1401 Coding of acute on chronic renal failure

Assign ICD-10 codes for both acute kidney failure and chronic kidney disease or end stage renal disease if clearly documented by the medical practitioner as there is no ICD-10 code that describes an acute exacerbation of chronic kidney disease or end stage renal disease.

Example 1

Patient admitted with acute kidney failure and a urinary tract infection. Known to have chronic kidney disease.

PDX: N17.9 Acute renal failure, unspecified

SDX: N39.0 Urinary tract infection, site not specified

SDX: N18.9 Chronic kidney disease, unspecified

PCS15 Diseases of Pregnancy, Childbirth and the Puerperium (O00 – O99)



DSN1503 Labour and Delivery

PHISC Guideline: ICD-10 codes to be assigned on claims for the transporting of a patient in labour

For normal labour without complications such as haemorrhage, obstruction, preterm labour or premature rupture of membranes (PROM) etc. and where the baby is not delivered in the ambulance, assign a code from the following range of ICD-10 codes:

Z34.0 Supervision of normal first pregnancy
Z34.8 Supervision of other normal pregnancy
Z34.9 Supervision of normal pregnancy, unspecified

If the patient has a high risk pregnancy then assign a code from the following range of ICD-10 codes:

Z35.0 Supervision of pregnancy with history of infertility
Z35.1 Supervision of pregnancy with history of abortive outcome
Z35.2 Supervision of pregnancy with other poor reproductive or obstetric history
Z35.3 Supervision of pregnancy with history of insufficient antenatal care
Z35.4 Supervision of pregnancy with grand multiparity
Z35.5 Supervision of elderly primigravida
Z35.6 Supervision of very young primigravida
Z35.7 Supervision of high-risk pregnancy due to social problems
Z35.8 Supervision of other high-risk pregnancies
Z35.9 Supervision of high-risk pregnancy, unspecified

- ❖ If it is a preterm labour, or there are other complications (PROM, haemorrhage etc.) or the baby is delivered in the ambulance, then assign the appropriate ICD-10 code.

PCS16 Certain conditions originating in the perinatal period (P00 – P96)



DSN1605 Fetal death of unspecified cause (P95)

DSN1605 Fetal death of unspecified cause (P95)

Whenever possible, fetal deaths should be classified according to the cause of death. P95 should only be used if the cause of death is unknown.

PHISC addition to above standard:

P95 should not be assigned as the outcome of delivery on the mother's record. Refer to DSN1503 Labour and Delivery.

PCS18 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00 – R99)



DSN18 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)

Guidelines when using sign and symptom codes e.g. R-codes

PHISC amendment to above guideline:

Signs and/or symptoms inherent to a diagnosis should not be assigned in addition to the code assigned for the specified diagnosis unless these represent important problems in medical care in their own right and provide additional valuable clinical information for management of the patient.

PCS19 Injury, poisoning and certain other consequences of external causes (S00 – T98)



DSN1901 Poisoning, Overdose and Adverse Effects

Poisoning

A poisoning is identified as the:

- Wrong dosage given or taken
- Wrong medication given or taken
- Medication given or taken by the wrong person
- Intoxication (other than cumulative effect)
- Overdose
- Correct medicine taken with alcohol causing an unexpected adverse effect.
- Correct medicine taken with non prescription drug, causing an unexpected adverse effect.
- Wrong route of administration
- Therapeutic misadventure
- Toxic effect / Toxicity

PHISC addition

Therapeutic misadventure – refer to definition of misadventure (**DSN1906 Complications of Surgery and Medical care**)

Guideline

- Assign a code for each drug if multiple drugs documented.
- Assign a code for each active ingredient of a combination drug sequencing the one with the highest strength in the absence of detailed information.
- Code the manifestation in addition to the poisoning code and then the external cause code.
- A poisoning will be coded as undetermined if it is not stated as accidental or intentional although the note below “event of undetermined intent” indicates “but not poisoning” in the ICD-10 Tabular List.

PHISC amendment to point 4 of the “Poisoning Guideline”:

Event of undetermined intent (Y10 – Y34)

Note: This section covers events where available information is insufficient to enable a medical or legal authority to make a distinction between accident, self-harm and assault. It includes self-inflicted injuries, but not poisoning, when not specified whether accidental or with intent to harm (X40-X49). Follow legal rulings when available⁴.



DSN1906 Complications of Surgery and Medical Care

PHISC amendment to the definition of “Misadventure” in the SA ICD-10 Coding Standards and Guidelines document.

Misadventure

A misadventure is an instance of misfortune, a mishap, an un-intentional error in surgery or other fields of medicine.

⁴ ICD-10 Tabular List, 2010 Edition

Mishaps in hospital, even if the patient does not sustain an injury

Example 1

A 75 year old male patient was admitted for a biopsy of a lung mass. He fell while trying to sit on a chair a day after the procedure. No injury was sustained as per the clinical notes.

PDX: R91 Abnormal findings on diagnostic imaging of lung

SDX: Z04.3 Examination and observation following other accident

SDX: W07.28 Fall involving chair, school, other institution and public administrative area, while engaged in other specified activities

Example 2

A 2 year child admitted for observation following a fall at home. ? Head injury mentioned. Child stable. No bruises noted.

PDX: Z04.3 Examination and observation following other accident

SDX: W19.09 Unspecified fall, home, during unspecified activity



DSN2001 External Cause Codes – an external cause code should be assigned with Z04.–

PCS20 External causes of morbidity and mortality (V01 – Y98)



DSN2001 External Cause Codes

External Cause Codes not linked to Injury, poisoning and certain other consequences of external causes

As per the notes in Volume 1 (Tabular List), Chapter XX External causes of morbidity and mortality, it states:

“This chapter, which in previous revisions of ICD constituted a supplementary classification, permits the classification of environmental events and circumstances as the cause of injury, poisoning and other adverse effects.

Most often, the condition will be classifiable to chapter XIX Injury, poisoning and certain other consequences of external causes (S00-T98).

Other conditions that may be stated to be due to external causes are classified in chapters I to XVIII. For these conditions, codes from Chapter XX should be used to provide additional information for multiple-condition analysis only⁵.”

There are instructions to provide an ECC for non-injury codes in the volume 1 (tabular list) Examples below:

H26.1 Traumatic cataract

Use additional external cause code (Chapter XX), if desired, to identify cause.

H26.2 Complicated cataract

Cataract in chronic iridocyclitis

Cataract secondary to ocular disorders

Glaucomatous flecks (subcapsular)

H26.3 Drug-induced cataract

Use additional external cause code (Chapter XX), if desired, to identify drug.

⁵ ICD-10 Tabular List, 2010 Edition

Definitions, Acronyms and Abbreviations

Abbreviation	Term / Definition
PHISC	Private Healthcare Information Standards Committee
NDoH	National Department of Health
ICD-10	International Statistical Classification of Diseases and Related Health problems, 10 th Revision
MIT	Master Industry Table