ICD-10 Diagnosis Documentation Tips – Ophthalmology

**Infections:**
- State first location and type (osteomyelitis right 5th metacarpal)
- Indicate organism if known

**Increased Number of Codes:** do to enhanced specificity in ICD-10
- Laterality: specify right, left or bilateral
- Upper or lower lid: for example chalazion
- Anatomy: parasitic endophlamitis now localized to retina or (iris, ciliary body, or anterior chamber)

**Diabetes with Ophthalmic Complications:**
- Axes of classification (what is necessary to code)
  - Type of diabetes: Type 1, Type 2, underlying condition, drug or chemical induced, other
  - Type of complication: ophthalmic [has its own section]
  - Specific manifestation
    - Mild non-proliferative diabetic retinopathy (NDR), moderate NDR, severe NDR, proliferative diabetic retinopathy, unspecified, diabetic cataract, other
    - With or without macular edema (for appropriate dx)
- Example documentation: type 1 diabetes with proliferative diabetic retinopathy with macular degeneration

**Glaucoma:**
- New categories: 20 to eye trauma, 20 to eye inflammation, 20 to other eye disorders, 20 to drugs

**Ocular Injuries:**
- New documentation requirement – Laterality (Right, Left, Both)
- Episode of care must be coded: initial, subsequent or sequela
ICD-10 [INPATIENT] Procedural Coding Tips – Ophthalmology

Characters:
- Section – almost always medical/surgical, don’t need to state
- Body system – should be self-evident from the description
- Root operation – describes the intent of the procedure
  - Replacement – intra-ocular lens
  - Detachment – enucleation
- Body part – describe with anatomic specificity
- Approach – open, percutaneous
- Device – describe any device left in the patient
- Qualifier - Used typically to add further specificity

Examples of complete documentation:
- Penetrating keratoplasty of left cornea with donor matched cornea, percutaneous [codes as non-autologous tissue substitute]
- Layered repair eyelid, left and closure superficial laceration face
- Dilation lacrimal ducts, bilateral
  - Codes as two separate cases
  - NOTE: always describe each component procedure in detail
- Recession medial rectus muscle, advancement lateral rectus muscle, left eye
  - Again… two procedures