ICD-10-CM: Obstetrics: Encounter for Uncomplicated Delivery vs. with Complication

The most important thing a coder can do to prepare for coding obstetric cases in ICD-10-CM is to read the ICD-10-CM Official Guidelines for Coding and Reporting. The current version is for fiscal year 2015 and may be found at: http://www.cms.gov/Medicare/Coding/ICD10/Downloads/icd10cm-guidelines-2015.pdf

We will cover only a select few of the Guidelines to review for the purpose of the exercises we will be doing.

General Guidelines:

- Obstetric cases require codes from chapter 15, codes in the range O00-O9A, Pregnancy, Childbirth, and the Puerperium. Chapter 15 codes have sequencing priority over codes from other chapters.
- Additional codes from other chapters may be used in conjunction with chapter 15 codes to further specify conditions.
- Should the provider document that the pregnancy is incidental to the encounter, then code Z33.1, Pregnant state, Incidental, should be used in place of any chapter 15 codes.
- It is the provider’s responsibility to state that the condition being treated is not affecting the pregnancy.
- When a delivery occurs, the principal diagnosis should correspond to the main circumstances or complication of the delivery.
- In cases of cesarean delivery, the selection of the principal diagnosis should be the condition established after study that was responsible for the patient’s admission.
  - If the patient was admitted with a condition that resulted in the performance of a cesarean procedure, that condition should be selected as the principal diagnosis.
  - If the reason for the admission/encounter was unrelated to the condition resulting in the cesarean delivery, the condition related to the reason for the admission/encounter should be selected as the principal diagnosis.

Uncomplicated Delivery Guidelines:

- Code O80 should be assigned when a woman is admitted for a full-term normal delivery and delivers a single, healthy infant without any complications antepartum, during the delivery, or postpartum during the delivery episode.
- Code O80 is always a principal diagnosis.
  - It is not to be used if any other code from chapter 15 is needed to describe a current complication of the antenatal, delivery, or perinatal period.
  - Additional codes from other chapters may be used with code O80 if they are not related to or are in any way complicating the pregnancy.
- Code O80 may be used if the patient had a complication at some point during the pregnancy, but the complication is not present at the time of the admission for delivery.
- Z37.0, Single live birth, is the only outcome of delivery code appropriate for use with O80.

The code book also gives us guidance under: O80 - Encounter for full-term uncomplicated delivery

- Delivery requiring minimal or no assistance, with or without episiotomy, without fetal manipulation [e.g., rotation version] or instrumentation [forceps] of a spontaneous, cephalic, vaginal, full-term, single, live-born infant. This code is for use as a single diagnosis code and is not to be used with any other code from chapter 15.
- Use additional code to indicate outcome of delivery (Z37.0)

Scenario: Patient, 26 year-old female at 38 weeks gestation, presents in labor. She labored for 5 hours and delivered a single healthy male with Apgars of 8 and 9.

What does the coder know?

1. There are no current complications
2. There was a single liveborn
3. Weeks of gestation: 38

1. “There are no current complications”
2. “There was a single liveborn”

**ICD-10-CM Index**

Outcome of delivery Z37.9

- single NEC Z37.9
  - liveborn Z37.0
  - stillborn Z37.1

**ICD-10-CM Tabular**

Z37 Outcome of delivery

This category is intended for use as an additional code to identify the outcome of delivery on the mother’s record. It is not for use on the newborn record.

Excludes1: stillbirth (P95)

Z37.0 Single live birth

3. “Weeks of gestation: 38”

**ICD-10-CM Index**

Pregnancy (single) (uterine) — see also Delivery and Puerperal

- weeks of gestation
  - 37 weeks Z3A.37
  - 38 weeks Z3A.38
  - 39 weeks Z3A.39
  - 40 weeks Z3A.40

**ICD-10-CM Tabular**

Z3A Weeks of gestation

Note: Codes from category Z3A are for use, only on the maternal record, to indicate the weeks of gestation of the pregnancy.

Code first: complications of pregnancy, childbirth and the puerperium (O00-O9A)

Z3Z.3 Weeks of gestation of pregnancy, weeks 30-39

Z3A.38 38 weeks gestation of pregnancy

**Delivery with Complication(s), Guidelines:**

- Certain categories in Chapter 15 distinguish between conditions of the mother that existed prior to pregnancy (pre-existing) and those that are a direct result of pregnancy.
  - When assigning codes from Chapter 15, it is important to assess if a condition was pre-existing prior to pregnancy or developed during or due to the pregnancy in order to assign the correct code.

- Where applicable, a 7th character is to be assigned for certain categories (O31, O32, O33.3 - O33.6, O35, O36, O40, O41, O60.1, O60.2, O64, and O69) to identify the fetus for which the complication code applies.
  - Assign 7th character “0”:
    - For single gestations
    - When the documentation in the record is insufficient to determine the fetus affected and it is not possible to obtain clarification.
    - When it is not possible to clinically determine which fetus is affected.

**Scenario:** Patient, a 27 year-old female, G2P1, presents at 35 weeks gestation and delivers a frank breech presentation, preterm, single liveborn female over a first degree perineal laceration.

Coder knows:

1. Preterm delivery O60.14x0
2. Breech presentation O32.1xx0
3. First degree perineal laceration O70.0
4. There was a single liveborn Z37.0
5. Weeks of gestation: 35 Z3A.35
1. “Preterm delivery”

**ICD-10-CM Index**

**Pregnancy (single) (uterine) —**

- see also Delivery and Puerperal
  - complicated by (care of) (management affected by)
    - preterm delivery **O60.10**
  - preterm labor
    - with delivery **O60.10**

**ICD-10-CM Tabular**

**O60 Preterm labor**

**Includes:** onset (spontaneous) of labor before 37 completed weeks of gestation

**Excludes1:** false labor (O47.0-) threatened labor NOS (O47.0-)

**O60.1 Preterm labor with preterm delivery**

One of the following 7th characters is to be assigned to each code under category O60.1. 7th character 0 is for single gestations and multiple gestations where the fetus is unspecified. 7th characters 1 through 9 are for cases of multiple gestations to identify the fetus for which the code applies. The appropriate code from category O30, Multiple gestation, must also be assigned when assigning a code from category O32 that has a 7th character of 1 through 9.

- 0 - not applicable or unspecified
- 1 - fetus 1
- 2 - fetus 2
- 3 - fetus 3

**O60.14 Preterm labor third trimester with preterm delivery third trimester**

2. “Breech presentation”

**ICD-10-CM Index**

**Breech presentation (mother) O32.1**

- causing obstructed labor O64.1
- footling O32.8
- causing obstructed labor O64.8
- incomplete O32.8
- causing obstructed labor O64.8

**ICD-10-CM Tabular**

**O32 Maternal care for malpresentation of fetus**

**Includes:** the listed conditions as a reason for observation, hospitalization or other obstetric care of the mother, or for cesarean delivery before onset of labor

**Excludes1:** malpresentation of fetus with obstructed labor (O64.-)

One of the following 7th characters is to be assigned to each code under category O32. 7th character 0 is for single gestations and multiple gestations where the fetus is unspecified. 7th characters 1 through 9 are for cases of multiple gestations to identify the fetus for which the code applies. The appropriate code from category O30, Multiple gestation, must also be assigned when assigning a code from category O32 that has a 7th character of 1 through 9.

- 0 - not applicable or unspecified
- 1 - fetus 1
- 2 - fetus 2
- 3 - fetus 3

**O32.1 Maternal care for breech presentation**

Maternal care for buttocks presentation
Maternal care for complete breech
Maternal care for frank breech

**Excludes1:** footling presentation (O32.8) incomplete breech (O32.8)
### 3. “First degree perineal laceration”

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<thead>
<tr>
<th>ICD-10-CM Index</th>
<th>Delivery (childbirth) (labor)</th>
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<td>- complicated O75.9</td>
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<td></td>
<td>- - laceration (perineal) O70.9</td>
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<td></td>
<td>- - - perineum, perineal O70.9</td>
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<td>- - - - first degree O70.0</td>
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<tr>
<th>ICD-10-CM Tabular</th>
<th>O70 Perineal laceration during delivery</th>
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<tr>
<td>Includes:</td>
<td>episiotomy extended by laceration</td>
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<td>Excludes1:</td>
<td>obstetric high vaginal laceration alone (O71.4)</td>
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### 4. There was a single liveborn

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### 5. “Weeks of gestation: 35”

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<td>- - 34 weeks Z3A.34</td>
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<td>- - 35 weeks Z3A.35</td>
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<td>- - 36 weeks Z3A.36</td>
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<td>- - 37 weeks Z3A.37</td>
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<td>Z3A.35 35 weeks gestation of pregnancy</td>
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Note: The coder must be guided by documentation in the medical record of each individual case to make the correct code selections.