Urology: Commonly Coded Conditions

Jaci Johnson CPC CPCH CPMA CEMC CPCi
President Elect AAPC National Advisory Board 2013 - 2015

No part of this presentation may be reproduced or transmitted in any form or by any means (graphically, electronically, or mechanically, including photocopying, recording, or taping) without the expressed written permission of AAPC.

Commonly Coded in Urology

- N00-N08 – Glomerular disease
- N10 –N16 – Renal tubulo-interstitial diseases
- N17 – N19 – Acute kidney failure and chronic kidney disease
- N20 –N23 – Urolithiasis
- N25 – N29 – Other disorders of kidney and ureter
- N30 – N39 – Other diseases of the urinary system
- N99 – Intraoperative and postprocedural complications and disorders of genitourinary system, NEC
Commonly Codes Conditions

- Acute and chronic Kidney Disease
- Transplants
- Erectile Dysfunction
- Hypospadias
- Urinary Incontinence
- Hematuria (other abnormal urologic findings)

Commonly Codes Conditions

- Calculus
- Hydrocele and Spermatocele
- Neurogenic Bladder
- Benign Prostatic Hypertrophy (BPH)

Chapter 14: Diseases of Genitourinary System (N00–N99)

Stages of Chronic Kidney Disease (CKD)

ICD-10-CM classifies CKD based on severity.
- Stage 2, code N18.2, equates to mild CKD;
- Stage 3, code N18.3, equates to moderate CKD;
- Stage 4, code N18.4, equates to severe CKD;
- Stage 5, code N18.5
- End stage renal disease (ESRD), Code N18.6,
A patient in end stage renal disease is admitted to undergo dialysis. The patient is prepared and fitted for a peritoneal dialysis catheter and dialysis is performed in the outpatient hospital dialysis center.

**Example**

- **Z49.02** Encounter for fitting and adjustment of peritoneal dialysis catheter
- **N18.6** End stage renal disease Chronic kidney disease requiring chronic dialysis

**Commonly Coded in Urology**

- **Z49** Encounter for care involving renal dialysis
- **Z49.01** – Encounter for fitting and adjustment of extracorporeal dialysis catheter
- **Z49.02** – Encounter for fitting and adjustment of peritoneal dialysis catheter
- **Z49.31** – Encounter for adequacy testing for hemodialysis
- **Z49.32** – Encounter for adequacy testing for peritoneal dialysis

**Chapter 14: Diseases of Genitourinary System (N00–N99)**

**Chronic Kidney Disease and Kidney Transplant Status**

- Patients who have undergone kidney transplant may still have some form of CKD, because the kidney transplant may not fully restore kidney function.

**Chronic Kidney Disease with Other Conditions**

- Patients with CKD may also suffer from other serious conditions, most commonly diabetes mellitus and hypertension. The sequencing of the CKD code in relationship to codes for other contributing conditions is based on the conventions in the Tabular List.
Commonly Coded in Urology

- Code T86.1 should be assigned for documented complications of a kidney transplant, such as transplant failure or rejection or other transplant complication.
- Code T86.1 should not be assigned for post kidney transplant patients who have chronic kidney (CKD) unless a transplant complication such as transplant failure or rejection is documented.

Commonly Coded in Urology

- Z43.5 – Encounter for attention to cystostomy
- Z43.6 – Encounter for attention to other artificial openings of urinary tract (nephrostomy, ureterostomy, urethrostomy)
- Z48.22 – Encounter for aftercare following kidney transplant
- Z48.816 – Encounter for surgical aftercare following surgery on the genitourinary system
- Z52.4 – Kidney donor

Commonly Coded in Urology

- N99.11 Postprocedural urethral stricture, male
  – 6th character further defines type/location
- N99.12 Postprocedural urethral stricture, female
Commonly Coded in Urology

- N99.5 – Complications of stoma of urinary tract
  - 6th character describes complication
- N99.51 - Complications of cystostomy
  - 6th character describes complication
- N99.52 - Complications of other external stoma of urinary tract
  - 6th character describes complication
- N99.53 - Complications of other stoma of urinary tract
  - 6th character describes complication

Commonly Coded in Urology

- N99.6 – Intraoperative hemorrhage and hematoma of a genitourinary system organ or structure complicating a procedure
  - 6th character defines type of procedure
- N99.7 – Accidental puncture and laceration of a genitourinary system organ or structure during a procedure
  - 6th character defines type of procedure

Commonly Coded in Urology

- N99.81 – Other intraoperative complication of genitourinary system
- N99.820 – Postprocedural hemorrhage and hematoma of a genitourinary system organ or structure following a genitourinary system procedure
- N99.821 - Postprocedural hemorrhage and hematoma of a genitourinary system organ or structure following other procedure
Erectile Dysfunction

• Two types of erectile dysfunction with two code categories
  – Psychological
  – Physiological
• F52 contains an Excludes 2 note indicating both conditions could occur at the same time, and both would be reported

Example

• Paul presents for evaluation. He began taking a selective serotonin re-uptake inhibitor (SSRI) anti-depressant last month and shortly after began suffering erectile dysfunction. He states that he takes the medication as prescribed. He is determined to have drug-induced erectile dysfunction.
  
  • N52.2 Drug-induced erectile dysfunction
  • T43.225A Adverse effect of SSRI, initial encounter

Hypospadias

• Congenital abnormality
• Code selection is based on site of the urethral opening
  – Q54.0 balanic: Malposition of urethral meatus on the ventral glans penis
  – Q54.1 penile: Malposition of urethral meatus on the shaft of the penis
  – Q54.2 periscrotal: Malposition of urethral meatus at the junction of the penis and scrotum
  – Q54.3 perineal: Malposition of urethral meatus in the perineum near the anus
  – Q54.4 Congenital chordae
  – Q54.8 Other Hypospadias
Example

- A 1 ½-year-old presents to the operating room for Hypospadias (TTT repair and flap relocation) and Nesbit chordae release. He has penoscrotal Hypospadias and congenital chordae.

- Q54.2 Hypospadias, penoscrotal
- Q54.4 Congenital chordae

Urinary Incontinence

- Codes (most) are located in category N39
- Causes of urinary incontinence
  - Pregnancy, childbirth
  - Aging
  - Physical problems /changes
  - Enlarged prostate
  - Neurologic disorders
- Some Types of UI
  - Stress
  - Urge
  - Mixed
  - Overflow
  - Instructional note in category N39.4 to code also any associated overactive bladder.

Example

- The patient presents for cystoscopy with a diagnosis of recurring bladder infections and urge incontinence, not helped by Detrol LA. The flexible scope is placed through the meatus into the bladder. The bladder was systematically scanned with no abnormal findings of erythema, tumor, or foreign body.

- N39.41 Urge incontinence
- Z87.440 Personal history of urinary (tract) infections
Hematuria

• Category R31
  – R31.0 Gross hematuria
  – R31.1 Benign essential microscopic hematuria
  – R31.2 Other microscopic hematuria
  – R31.9 Hematuria, unspecified

• Category N02
  • Recurrent and Persistent hematuria with underlying conditions
  • Listing in manual

Example

• Patient presents for renal biopsy results. She had originally presented with a history of persistent rust colored urine, but no bright red blood or clots in the urine. CT scan was negative for kidney stones. Renal biopsy results indicate ten Glomerular were present with crescents in eight of them. The Glomerular sections evaluated showed no electron-dense deposits in the filtration membrane or mesangium. She is diagnosed with diffuse crescentic glomerulonephritis with persistent hematuria.
  • N02.7 recurrent and persistent hematuria with diffuse crescentic glomerulonephritis

Other Abnormal Findings

• Category R30 Pain associated with micturition
• Category R33 Retention of urine
  – has instructional notes
• Category R34 Anuria and oliguria
• Category R35 Polyuria
• Category R36 Urethral discharge
• Category R39 Other and unspecified
A 70-year-old male patient presents with nocturia, and dysuria without trauma or provocation. He states this has been occurring off and on, becoming more persistent. Considering patient’s age, may be BPH. Will obtain UA with culture, PSA, and ultrasound.

- R35.1 Nocturia
- R30.0 Dysuria

### Calculus

- Four major types of stones
- Codes are specific to location
  - Kidney, ureter, bladder, urethra, multiple areas
- Categories N20 through N22
- Category N22 contains an instructional note that states to code first the underlying disease

### Example

Urology is called when a male patient presents with sharp pain in the lower back that comes in waves and pain on urination. CT indicates large right Ureteral stone

- N20.1 Calculus of ureter
Example

- Brian presents to the clinic. He has chronic idiopathic gout in the right foot that has flared up. He was referred for evaluation as he now has kidney stones.
- M1A.0710 Idiopathic chronic gout, right ankle and foot without tophus
- N22 Calculus of urinary tract in diseases classified elsewhere

Other codes

Other codes that relate to calculus of the urinary system:
- Q63.8 Other specified congenital malformations of kidney; congenital kidney stones
- N13.2 Hydronephrosis with renal and ureteral calculous obstruction
- N13.6 Pyonephrosis: urinary tract obstruction, may be from calculus, with infection
- Instructional note with this code to use additional code (B95-B97) to identify infectious agent
- Excludes 2 note with Category N13, Obstructive and reflux uropathy

Hydrocele/Spermatocele

- Hydrocele
  - Code selection based on Congenital or Non-congenital
  - P83.5 Congenital hydrocele
  - Category N43.0-N43.3 - Non-congenital hydrocele
- Spermatocele
  - Typically asymptomatic
  - 3 codes for non-congenital N43.40-N43.42
  - Q55.4 Congenital spermatocele
Example

- A male patient presents with swelling in the groin. He admits to no trauma and states he noticed it a couple of days ago. On exam, swelling was noted in the left inguinal region that moved downward when the testis was gently pulled downward. US confirmed encysted hydrocele.

- N43.0 Encysted hydrocele

Neurogenic Bladder

- Category N31
- Common causes of neurogenic bladder
  - Stroke
  - Multiple sclerosis
  - Spina bifida
  - Traumatic spinal cord injury
- Code selection based on Type
  - Uninhibited, reflex, flaccid, other, neuromuscular
  - Instructional note for category N31 states to use an additional code for associated urinary incontinence (N39.3, N39.4)

Example

- A patient presents for treatment options with a reflex neurogenic bladder with stress incontinence. After review of diagnostic studies and physical exam, treatment options were discussed. Treatment started with bethanechol 25 mg orally four times a day.

- N31.1 Reflex neuropathic bladder, not elsewhere classified
- N39.3 Stress incontinence (male) (female)
Benign Prostatic Hypertrophy

- Category N40
- Divided by type
  - Enlarged or nodular
  - With or without lower urinary tract symptoms (LUTS)
  - N40.0 Enlarged prostate w/o LUTS
  - N40.1 Enlarged prostate with LUTS
  - N40.2 Nodular prostate w/o LUTS
  - N40.3 Nodular prostate with LUTS

LUTS

- Instructional note for N40.1 and N40.3 state to code also associated symptoms:
  - Incomplete emptying (R39.14)
  - Nocturia (R35.1)
  - Straining on urination (R39.16
  - Urinary frequency (R35.0)
  - Urinary hesitancy (R39.11)
  - Urinary incontinence (N39.4)
  - Urinary obstruction (N13.8)
  - Urinary retention (R33.8)
  - Urinary urgency (R39.15)
  - Weak urinary stream (R39.12)
  - This instruction is the same as in ICD-9

Example

- A 58-year-old man presents for follow-up. He presented originally for urinary frequency, hesitancy, weak stream, and nocturia, for over 2 years with recent progression. Physical exam revealed soft and enlarged prostate 50g. His IPSS score was 18 (moderate). We discussed his labs today, showing normal U/A and PSA of 1.2 ng/ml. He states there is not change in his symptoms. Patient is diagnosed with enlarged prostate with LUTS and started on alpha-blockers.

- N40.1 Enlarged prostate with LUTS
- R35.0 Frequency of micturition
- R29.11 Hesitancy of micturition
- R39.12 Poor urinary stream
- R35.1 Nocturia,
A 60-year-old patient presents for check-up of his nodular prostate and ED. He states that his nocturia and urgency have improved. He states his ED is still present but is improving as his other symptoms are improving. UA, PSA, and BUN all within normal limits.

- N40.3 Nodular prostate with LUTS
- R35.1 Nocturia
- R39.15 Urgency of urination
- N52.9 Male erectile dysfunction

Example

Thank You!