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Preventive Medicine

- Encounter for routine gyn exam
  Use additional code:
  - for screening of human papillomavirus, if applicable (Z11.51)
  - for screening vaginal pap smear, if applicable (Z12.72)
  - To identify acquired absence of uterus, if applicable (Z290.71)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z01.411</td>
<td>Encounter for gynecological exam (general) (routine) with abnormal findings</td>
</tr>
<tr>
<td>Z01.419</td>
<td>Encounter for gynecological exam (general) (routine) without abnormal findings</td>
</tr>
</tbody>
</table>

Example

- During a patient's annual gynecologic exam, the provider noticed a breast lump. The provider performs a cervical pap smear and orders a diagnostic mammogram.
  - Z01.411 Encounter for gynecologic examination (general) (routine) with abnormal findings
  - N63 Unspecified lump in breast

Abnormal Pap Smears

- R87.6
- Documentation should include the location (cervix, vagina)
- Cytology findings
  - ASCUS
  - LGSIL
  - HGSIL
  - Inadequate smear
  - Thin preparation
  - Unsatisfactory smear
  - Satisfactory smear but lacking transformation zone
  - Other abnormal cytological findings on specimens
Other Cytology

- R87.8 Human Papillomavirus HPV DNA tests
- Code selection is based on site and severity

<table>
<thead>
<tr>
<th>Cervical dysplasia</th>
<th>N87.0  Mild (CIN1)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N87.1  Moderate (CIN II)</td>
</tr>
<tr>
<td></td>
<td>N87.9  Dysplasia of cervix, unspecified</td>
</tr>
<tr>
<td></td>
<td>Severe (CIN III – reported from D06)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vaginal Dysplasia</th>
<th>N89.0  Mild (VAIN1)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N89.1  Moderate (VAIN II)</td>
</tr>
<tr>
<td></td>
<td>N89.3  Dysplasia of vagina, unspecified</td>
</tr>
<tr>
<td></td>
<td>Severe (VAIN III - reported from D07.2)</td>
</tr>
</tbody>
</table>

Example

- The patient returns to the office to review the abnormal cervical pap smear results. The results show she has LGSIL.
  - R87.612 Low grade squamous intraepithelial lesion on cytologic smear of cervix (LGSIL)

Fibroids

- Noncancerous growths (benign)
- Code selection based on
  - Anatomic site
    - Type
      - Intramural – located within the wall of the uterus
      - Subserosal – located under the peritoneal surface of the uterus
      - Submucous – located in the muscle under the endometrium of the uterus
Operative findings from an exploratory laparotomy and supracervical hysterectomy include a 12 week sized fibroid with the largest measuring approximately 8 cm in the left fundal region. She had normal appearing tubes and ovaries.

- D25.9 Leiomyoma of uterus, unspecified
Inflammation caused by infection or imbalance of vaginal bacteria

Symptoms include:
- Itching
- Discharge
- Pain
- Light vaginal bleeding

Vaginitis

Code selection categorized by
- Acute or chronic
- Type
- Infectious agent
  - Bacterial
  - Candidiasis
  - Trichomonas
  - May require 2 codes – watch instructional notes

Example

A patient presents with pelvic pain and abdominal discharge. The provider diagnosed the patient with bacterial vaginosis.

- N76.0 Acute vaginosis
- B96.89 Other specified bacterial agents as the cause of diseases classified elsewhere
Lichen

- Characterized by patchy, white thinning skin
- Occurs most often on the vulva
- Code selection categorized by:
  - Type
  - Location
  - If type is documented without site report, L90.0
  - All types of lichen occurring on the vulva are coded as N90.4

Example

- During a genital exam, the provider notices a bed of lichen sclerosis on the vulva
  - N90.4 Leukoplakia of vulva

Menorrhagia

- Excessive or prolonged bleeding occurring at regular intervals
- Symptoms include
  - Heavy bleeding
  - Passing clots
  - Anemia due to blood loss
- Code selection characterized by:
  - Primary
  - Climacteric
  - Menopausal, premenopausal
  - Postclimacteric
  - Postmenopausal
  - Pubertal (menses retained)
ICD-10 Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N92.0</td>
<td>Excessive and frequent menstruation with regular cycle</td>
</tr>
<tr>
<td>N92.1</td>
<td>Excessive and frequent menstruation with irregular cycle</td>
</tr>
<tr>
<td>N92.2</td>
<td>Excessive menstruation at puberty</td>
</tr>
<tr>
<td>N92.3</td>
<td>Ovulation bleeding</td>
</tr>
<tr>
<td>N92.4</td>
<td>Excessive bleeding in the premenopausal period</td>
</tr>
<tr>
<td>N92.5</td>
<td>Other specified irregular menstruation</td>
</tr>
<tr>
<td>N92-</td>
<td>Excludes note for N95.0 post-menopausal bleeding</td>
</tr>
<tr>
<td>N95.0</td>
<td>Post-menopausal bleeding</td>
</tr>
</tbody>
</table>

Example

An Ob-Gyn performs a hysteroscopy with D&C for a patient diagnosed with menorrhagia.

- N92.0 Excessive and frequent menstruation with regular cycle

Ovarian Cysts

- A cyst is a sac filled with liquid or semi-fluid material in or around the ovary.
- Symptoms include:
  - irregular menses
  - Pelvic pain
  - Nausea, vomiting
  - Breast tenderness
  - Pressure on rectum or bladder
Specialty Code Set Training Gynecology

- Code selection is categorized by:
  - Adherent
  - Chocolate
  - Corpus Luteum
  - Endometrial
  - Developmental
  - Dermoid
  - Follicular
  - Cause/ contributing factor

Ovarian Cysts

- Endometriosis of ovary (chocolate) - N80.1
- Follicular cyst of ovary - N83.0
- Corpus luteum cyst - N83.1
- Unspecified ovarian cysts - N83.20
- Other specified cyst (retention cyst, simple cyst) - N83.29

ICD-10 Codes

N80.1 Endometriosis of ovary (chocolate)
N83.0 Follicular cyst of ovary
N83.1 Corpus luteum cyst
N83.20 Unspecified ovarian cysts
N83.29 Other specified cyst (retention cyst, simple cyst)

N83.20 and N83.29 Excludes I developmental ovarian cyst (Q50.1), neoplastic ovarian cyst (D27.), polycystic ovarian syndrome (E28.2), Stein-Leventhal syndrome (E28.2)
N83 Excludes2 – hydrosalpinx N70.1
The findings for a diagnostic laparoscopy with right ovarian cystectomy includes a large amount of clot within the pelvis (hemoperitoneum) and right side of the abdomen, approximately 800 cc. Right ovarian cyst filled with clot was found to be bleeding at the time of surgery. Tubes bilaterally were normal in appearance. Uterus and left ovary were normal in appearance.

- N83.20 Ovarian cyst (hemorrhagic)
- K66.1 Hemoperitoneum

Menopausal Disorders

- Category N95
- Postmenopausal bleeding
- Menopausal Climacteric State
- Postmenopausal atrophic vaginitis

ICD-10 Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N95.1</td>
<td>Menopausal and female climacteric states</td>
</tr>
<tr>
<td></td>
<td>Use an additional code for associated symptoms</td>
</tr>
<tr>
<td></td>
<td>Excludes asymptomatic menopausal syndrome (Z78.0), symptoms associated with artificial menopause (E89.41), symptoms associated with premature menopause (E28.310)</td>
</tr>
<tr>
<td>N95.2</td>
<td>Postmenopausal atrophic vaginitis</td>
</tr>
<tr>
<td>N95.8</td>
<td>Other specified menopausal and perimenopausal disorders</td>
</tr>
</tbody>
</table>
A patient presents complaining of headache and night sweats. The OBG contributes her symptoms to menopause.

- N95.1 Menopausal and female climacteric states
- R61 Generalized hyperhidrosis
- R51 Headaches

Example

During a pelvic exam, the provider documents the patient has vaginal dryness and thin mucosa with diffuse erythema. The patient is diagnosed with atrophic vaginitis. The provider prescribes topical hormone replacement therapy.

- N95.2 Post menopausal atrophic vaginitis

Pelvic Pain

- R10.2 Pelvic and perineal pain
- Common symptoms associated with multiple conditions
- Abdominal pain has more options based on:
  - Type
  - Site
The patient presents to her OBG complaining of pelvic pain lasting three days. She states the pain started right after her period. She is not experiencing any pain on urination or during sexual activity. The provider performs a Pap smear and orders urinalysis and pelvic US.

**Example**

- R10.2 Pelvic and perineal pain

**Prolapse**

- Frequent problem for women having multiple births
- Symptoms include:
  - Discomfort, pain
  - Protrusion of organs from introitus
  - Pressure
  - Urinary incontinence
- Code selection based on:
  - Site of the prolapse
  - Complete or incomplete (or the stage of the prolapse)

**Stage of Prolapse**

- First degree prolapse
  - Uterus drops to upper portion of vagina (incomplete)
- Second degree prolapse
  - Uterus drops to lower portion of the vagina (incomplete)
- Third degree prolapse
  - Uterus drops with cervix located at vaginal opening (complete)
### ICD-10 Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N81.0</td>
<td>Urethrocele</td>
</tr>
<tr>
<td>N81.1</td>
<td>Cystocele, unspecified</td>
</tr>
<tr>
<td>N81.11</td>
<td>Cystocele, midline</td>
</tr>
<tr>
<td>(R1S)</td>
<td></td>
</tr>
<tr>
<td>N81.12</td>
<td>Cystocele, unilateral</td>
</tr>
<tr>
<td>N81.2</td>
<td>Incomplete uterovaginal prolapse</td>
</tr>
<tr>
<td>N81.3</td>
<td>Complete uterovaginal prolapse</td>
</tr>
<tr>
<td>N81.4</td>
<td>Uterovaginal prolapse, unspecified</td>
</tr>
<tr>
<td>Excludes I– genital prolapse complicating pregnancy (O34.5), prolapse of vaginal wall after hysterectomy (N99.3)</td>
<td></td>
</tr>
<tr>
<td>N81.5</td>
<td>Vaginal enterocele</td>
</tr>
<tr>
<td>N81.6</td>
<td>Rectocele</td>
</tr>
<tr>
<td>N81.81</td>
<td>Perineocele</td>
</tr>
<tr>
<td>N81.83</td>
<td>Weakening of pubocervical tissue</td>
</tr>
<tr>
<td>N81.84</td>
<td>Weakening of rectovaginal tissue</td>
</tr>
<tr>
<td>N81.85</td>
<td>Weakening of rectovaginal tissue</td>
</tr>
<tr>
<td>N81.89</td>
<td>Other female genital prolapse</td>
</tr>
</tbody>
</table>

### Coding Tips
- Coding for rectocele has instructional note to code any associated fecal incontinence.
- Not uncommon for female patients to have more than one type of prolapse.
- For uterine prolapse and cystocele, rectocele or enterocele, select code only for the uterine prolapse. (Excludes note for N81.10-N81.12, N81.5, and N81.6)

### Example
- A patient diagnosed with a third degree prolapse and rectocele undergoes a total vaginal hysterectomy and posterior colporrhaphy repair.
  - N81.3 Complete uterovaginal prolapse
Urinary Tract Infections

- Urinary tract infections are usually caused by bacteria
- Symptoms of UTI
  - Dysuria
  - Frequency
  - Urgency
  - Pressure
- Instructional note states to code also the infectious agent (B95-B97)
- Contains two combination codes

Example

- The patient presents with lower abdominal pain and burning with urination. She has suffered from UTI in the past. The provider performs a urinalysis and urine culture. The culture returns positive for group B streptococcus.
  - N39.0 Urinary tract infection, site not specified
  - B95.1 *Streptococcus, group B, as the cause of diseases classified elsewhere.*

Urinary Incontinence

- Urinary incontinence is the loss of bladder control.
- Symptoms include:
  - Minimal leakage to uncontrolled wetting
  - Occurring with cough or sneeze
- Code selection based on:
  - Type
  - Cause
ICD-10 Codes Incontinence

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N39.3</td>
<td>Stress incontinence</td>
</tr>
<tr>
<td>N39.41</td>
<td>Urge incontinence *</td>
</tr>
<tr>
<td>N39.42</td>
<td>Incontinence without sensory awareness</td>
</tr>
<tr>
<td>N39.43</td>
<td>Post-void dribbling</td>
</tr>
<tr>
<td>N39.44</td>
<td>Nocturnal enuresis</td>
</tr>
<tr>
<td>N39.45</td>
<td>Continuous dribbling</td>
</tr>
<tr>
<td>N39.46</td>
<td>Mixed incontinence (urge and stress)</td>
</tr>
<tr>
<td>N39.490</td>
<td>Overflow incontinence</td>
</tr>
<tr>
<td>N39.498</td>
<td>Other specified (total or reflex)</td>
</tr>
</tbody>
</table>

*N39.3 and N39.41 code also overactive bladder

Excludes I note listed under N39.3 and N39.4

Example

A patient presents with predominant urge incontinence, which was preceded by stress incontinence. This has also resulted in a urinary tract infection about once a month. We will have her obtain a MESA symptom score, voiding diary and a local cystourethroscopy. We will obtain her records from her PCP for further evaluation and review.

– N39.46 Mixed incontinence

Cystitis

- Codes are located in Category N30
- Symptoms include:
  - Frequency
  - Hematuria
  - Cloudy or foul smelling urine
  - Discomfort
  - Low grade fever
- Code selection is based on:
  - Acute or chronic
  - Location or cause
  - W/ or without hematuria, default without hematuria
- Instructional note to use additional code to identify infectious agent (B95-B97)
A patient presents with burning and frequency of urination. The OBG orders a urinalysis and UA culture. The culture returns positive for E coli. The provider call in an antibiotic to treat the patient's acute cystitis.

N30.00 Acute cystitis without hematuria
B96.20 Unspecified Escherichia coli (E coli) as the cause of diseases classified elsewhere

Complications of Care Codes

- Intraoperative and post-procedural complications are found within the body system chapters with codes specific to the organs and structures of that body system.
- Complications codes are sequenced as the first-listed, followed by the code for the specific complication.
### ICD-10-CM Codes

<table>
<thead>
<tr>
<th>Category N99</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N99.61</td>
<td>Intraoperative hemorrhage and hematoma of a genitourinary system organ or stricture</td>
</tr>
<tr>
<td></td>
<td>N99.71</td>
<td>Accidental puncture and laceration of genitourinary organ system</td>
</tr>
<tr>
<td></td>
<td>N99.72</td>
<td>Accidental puncture and laceration of genitourinary system, organ, structure during other procedure</td>
</tr>
<tr>
<td></td>
<td>N99.81</td>
<td>Other intraoperative complication of genitourinary system</td>
</tr>
<tr>
<td></td>
<td>N99.820</td>
<td>Post-procedural hemorrhage and hematoma of genitourinary system, organ, or structure following a genitourinary system procedure</td>
</tr>
<tr>
<td></td>
<td>N99.821</td>
<td>Post-procedural hemorrhage and hematoma of genitourinary system, organ, or structure following an genitourinary system procedure</td>
</tr>
</tbody>
</table>

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### Questions

**CEU SFO123**