

Physiatry ICD-10 documentation

Seven key impacts to ICD-10 documentation

1. Disease or disorder site
2. Acuity and/or encounter status of treatment
3. Etiology, causative agent, or disease type and injury/
poisoning cause, intent, activity at the time of the event
and place event occurred
4. Underlying and associated conditions
5. Manifestations
6. Complications or adverse events
7. Supporting info such as lab values or socioeconomic key
impacts to ICD-10 documentation

Most commonly used diagnoses

ICD-9 Name	ICD-9 Code	ICD-10 Code	ICD-10 Name	Documentation tips
Quadriplegic infantile cerebral palsy	343.2	G80.0	Spastic quadriplegic cerebral palsy	Refer to 7 key impacts of ICD-10 Documentation
Unspecified infantile cerebral palsy	343.9	G80.9	Cerebral palsy, unspecified	
Anoxic brain damage	348.1	G93.1	Anoxic brain damage, not elsewhere classified	
Debility, unspecified	799.3	R53.81	Other malaise	
Intracranial injury of other and unspecified nature, without mention of open intracranial wound, with state of consciousness unspecified	854.00	S06.890A	Other specified intracranial injury without loss of consciousness, initial encounter	
		S06.890D	Other specified intracranial injury without loss of consciousness, subsequent encounter	
		S06.890S	Other specified intracranial injury without loss of consciousness, sequela	

The ICD-10 Provider Specialty Tool Kit is meant to assist providers with documentation best practices necessary for the transition from ICD-9-CM to ICD-10-CM. This tool kit includes the most commonly used diagnoses for a specialty using 2012 claims data for top encounters and top number of dollars per diagnosis. The tool kit can be used as a quick reference guide for providers and can also be shared with Practice Managers. This tool kit is not meant to be a coding cross walk and therefore should not be used as such. Questions regarding this tool kit and/or ICD-10 should be submitted via email to ICD10@choa.org.

