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Pneumonia is an inflammatory process that affects the lung tissue. Robert S. Gold, MD, and Shelley C. Safian, PhD, MAOM/HSM, CCS-P, CPC-H, CHA, explain the clinical and documentation pieces of pneumonia coding.

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guidelines Despite the  
changing clinical  
preferences for  
diagnosing pneumonia,  
the positive chest x-ray  
is still considered the  
standard by recovery  
audit contractors (RAC),

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the Office of Inspector General, and other auditors, King said. As such, coders need to watch for it in documentation.

~~Pneumonia with a negative chest x-ray: Clinical ... HCPro~~  
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the first diagnosis. The second diagnosis was malnutrition secondary to feeding difficulties of the elderly. Two days later, the physician inserted a percutaneous gastrostomy tube. A day or two later, the physician documented only that the patient had aspirated. Our clinical documentation analyst queried the physician

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~~Q&A: Coding for  
pneumonia with ...  
www.hcpro.com~~

Do you now have to  
code the pneumonia as  
a COPD with a lower  
respiratory infection? A:  
Yes, the AHA 's  
Coding Clinic for ICD  
10-CM/PCS , Third  
Quarter 2016, discusses  
an instruction note

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found at code J44.0, chronic obstructive pulmonary disease with acute lower respiratory infection requires that the COPD be coded first, followed by a code for the lower respiratory infection.

~~Q&A: Coding  
guidelines for COPD  
and pneumonia +  
ACDIS~~

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Q: A physician admitted a patient with pneumonia, which was the first listed diagnosis. The second diagnosis was malnutrition secondary to feeding difficulties of the elderly. Two days later, the physician inserted a percutaneous gastrostomy tube. A day or two later, the physician documented

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Only that the patient had aspirated. Our clinical documentation analyst queried the physician for ...

~~Q&A: Query for  
aspiration pneumonia—  
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The early Coding Clinics instructed coders to sequence the pneumonia first, ahead of the code for acute

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respiratory failure. Then the Guidelines switched to say the opposite (that we should sequence the respiratory failure first). This caused a rise in concern since many professionals saw respiratory failure as a symptom versus a definitive diagnosis and the final instruction stated that the circumstances of



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admission must be  
considered.

~~Q&A: Pneumonia  
versus acute respiratory  
failure as ...~~

Complex Pneumonia  
-AB are not general first  
line, Risk factors for  
"Complex" pneumonia  
are present, Poor  
response to initial tx  
with change in AB  
noted, May require

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longer length of stay,  
and discharged on  
broad spectrum AB.

The query should ask  
the physician to "please  
clarify the most likely  
type of pneumonia you  
are treating."

Pneumonia—ACDIS  
Forums

pneumonia; code J44.0,  
Chronic obstructive  
pulmonary disease with

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acute lower respiratory infection; code J15.9, Unspecified bacterial pneumonia; and code J44.1, Chronic obstructive pulmonary disease with (acute) exacerbation. All four codes are needed to capture the diagnostic statement. The circumstances of the admission would determine the

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Problems Pneumonia is  
an inflammatory process  
that affects the lung

tissue (i.e., the par MAY  
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by Richard D. Pinson,  
MD, FACP In its 2016  
Third Quarter edition,  
the AHA ' s Coding  
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## ICD-10-CM/PCS

clarified the use of the following two ICD-10 codes: J44.0: Chronic obstructive pulmonary disease with acute lower respiratory infection

J44.1: Chronic obstructive pulmonary disease with (acute) exacerbation Code

J44.0 requires that the lower respiratory infection be

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