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異動概述

產科

1130921_QA P.23

Question	Answer
產科 P.23提及不保證型胎兒狀態(不穩定的胎兒狀態)(non-reassuring fetal status) 用來取代舊名「胎兒窘迫(fetal distress)」 若醫師書寫方式Pregnancy at 38 weeks 6 days with acute fetal distress(Non-reassuring fetal status). Polyhydramnios. Placenta abruptio. 當次C/S. 建議編碼O77.8或O76?? 問題點O76沒有fetal stress的字眼，心律問題一定是經儀器檢測發現，身體檢查評估On auscultation the fetal heart beat is audible at 146 bpm. Sono was revealed adequate amount of amino fluid, but truly decreased fetal movement found.	✓ 建議編碼O76 Abnormality in fetal heart rate and rhythm complicating labor and delivery Pregnancy (single) (uterine) --see also Delivery and Puerperal complicated by (care of) (management affected by) **fetal** (maternal care for) heart rate irregularity **(bradycardia)** (decelerations) (tachycardia) O76 *https://my.clevelandclinic.org/health/diseases/23971-fetal-distress*

1130921_QA P.29

Question	Answer
再次確認產科P. 29 及P. 31 請問產科手術術後敗血症編碼為O86.04和附加明確的敗血症A41.-，但不適合編碼為O85呢?	✓ O85產後敗血症是一種生殖道感染，發生在羊膜破裂或生產至產後 42 天之間的任何時間。A40 (鏈球菌敗血症)或 A41(其他敗血症)的代碼不應使用於產後敗血症。 ✓ O86.04產科手術後敗血症。於次診斷附加明確的敗血症代碼A40 (鏈球菌敗血症)或 A41(其他敗血症)。

O85 Puerperal sepsis
Postpartum sepsis
Puerperal peritonitis
Puerperal pyemia

A40 (鏈球菌敗血症)或 A41(其他敗血症)的代碼不應用於產後敗血症

Use additional code (B95-B97), to identify infectious agent
code (R65.2-) to identify severe sepsis, if applicable

O86.04 Sepsis following an obstetrical procedure
Use additional code to identify the sepsis

可附加明確的敗血症代碼
A40 (鏈球菌敗血症)或 A41(其他敗血症)

1130921_QA P.38

Question	Answer
入院39+6週 、40+2週才生，編碼 O48.0或O80?	✓ 病人住院時是39+6 weeks gestation， 在醫院好幾天之後才自然分娩，問題是住院的主要原因為何？是否還有其他診斷被遺漏了。例如Prolonged labor或許是病歷書寫問題？ ✓ 代碼O80 Encounter for full-term uncomplicated delivery是沒有任何併發症且37~40週使用。此案例不適合編碼O80。 ✓ 建議編碼O48.0 Post-term pregnancy。
O48.0除了週數超過40週的產婦，有其他狀況的產婦也能用嗎?(如37週GDM)	✓ 只要產婦週數超過40+1週，病歷不需書寫Post-term pregnancy或Prolonged pregnancy，即可逕行依週數編碼。 **"Pregnancy over 40 completed weeks to 42 completed weeks gestation."** **The provider does not have to document "post-term" or "post-dates."** *Coding Clinic 2022, Q2, P.3*

1130921_QA P.40

Question	Answer
院外生產入院取胎盤2017. Q3. P.5 答案placenta is part of the products of conception 10E0XZZ; PPT 40 的10D17Z_ 是否針對診斷是胎盤滯留用的例如2022 Q1 P19 Spontaneous Abortion with Retained Placenta of Twin B 答案才是10D17ZZ?	✓ 院外生產，入院取胎盤→**10E0XZZ** Delivery of Products of Conception, External Approach ✓ 胎盤滯留Retained placenta→ **10D17Z(9/Z)** (Manual) Extraction of Products of Conception, Retained, Via Natural or Artificial Opening

Section	**1**	Obstetrics
Body System	**0**	Pregnancy
Operation	**D**	Extraction: Pulling or stripping out or off all or a portion of a body part by the use of force

Body Part	*Approach*	*Device*	*Qualifier*
1 Products of Conception, Retained	**7** Via Natural or Artificial Opening **8** Via Natural or Artificial Opening Endoscopic	**Z** No Device	**9** Manual **Z** No Qualifier

1130921_QA P.45

Question	Answer
簡報P.45,請問O42.-也要編碼嗎?	✓ 妊娠16週併早期破水在ER已做處理後返家，又因陰道多量咖啡色分泌物再度入院，經醫師解釋後決定終止妊娠入院引產的個案 ✓ Under the impression of pregnancy at 16+3 weeks with preterm premature rupture of membrane, she admitted for termination. Laminaria and Cytotec. ✓ 建議編碼**Z33.2** Encounter for elective termination of pregnancy+**O42.-** Premature rupture of membranes
32週入院安胎，34週安不住轉生產，因申報關係切帳申報，請問生產時之週數如何編碼？	✓ 32週入院安胎，34週安不住轉生產，安胎這段建議編碼**Z3A.32**。 ✓ 34週安不住轉生產，因申報切帳，生產時之週數建議編碼**Z3A.34**。

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兒科

1130921_QA P.48

Question	Answer
投影片P.48 若診斷呈現full mouth periodontitis是否等同generalized periodontitis?	✓ 經詢問本院臨床醫師full mouth periodontitis與generalized periodontitis其意義上來說應該是類似的。 ✓ full mouth periodontitis是俗稱。

1130921_QA

Question	Answer
NB AGE應如何編碼問題，若編P78.3 Neonatal diarrhea ，因新生兒腹瀉、看不出來嬰兒為胃腸炎	✓ 建議編碼**P78.89** Other specified perinatal digestive system disorders再加編胃腸炎的代碼**K52.9** Noninfective gastroenteritis and colitis, unspecified