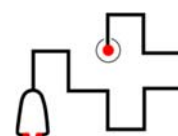




ICD-10-CM/PCS教育訓練課程_疾病分類 (循環、胸內、感染)

1

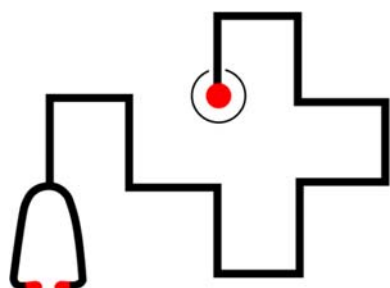
大綱



- 循環系統
 - 轉版後代碼差異概述
 - ICD-10-CM
 - ICD-10-PCS
- 胸內/感染轉版後代碼差異概述
 - ICD-10-CM/PCS
 - 工具書異動



2

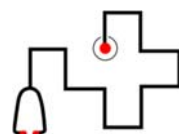


循環系統 轉版後ICD-10-CM代碼差異概述



3

Acute myocardial infarction 增列代碼



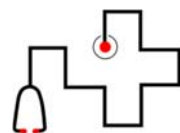
2014版	2023版
I21.01 STEMI involving left main coronary artery	I21.01 STEMI involving left main coronary artery
I21.02 STEMI involving left anterior descending coronary artery	I21.02 STEMI involving left anterior descending coronary artery
I21.09 STEMI involving other coronary artery of anterior wall	I21.09 STEMI involving other coronary artery of anterior wall
I21.11 STEMI involving right coronary artery	I21.11 STEMI involving right coronary artery
I21.19 STEMI involving other coronary artery of inferior wall	I21.19 STEMI involving other coronary artery of inferior wall
I21.21 STEMI involving left circumflex coronary artery	I21.21 STEMI involving left circumflex coronary artery
I21.29 STEMI involving other sites	I21.29 STEMI involving other sites
I21.3 STEMI of unspecified site	I21.3 STEMI of unspecified site
I21.4 NSTEMI	I21.4 NSTEMI
	I21.9 Acute myocardial infarction,unspecified
	I21.A1 Myocardial infarction type 2
	I21.A9 Other myocardial infarction type (含Type 3、4、5)

Type I MI



4

Acute myocardial infarction type



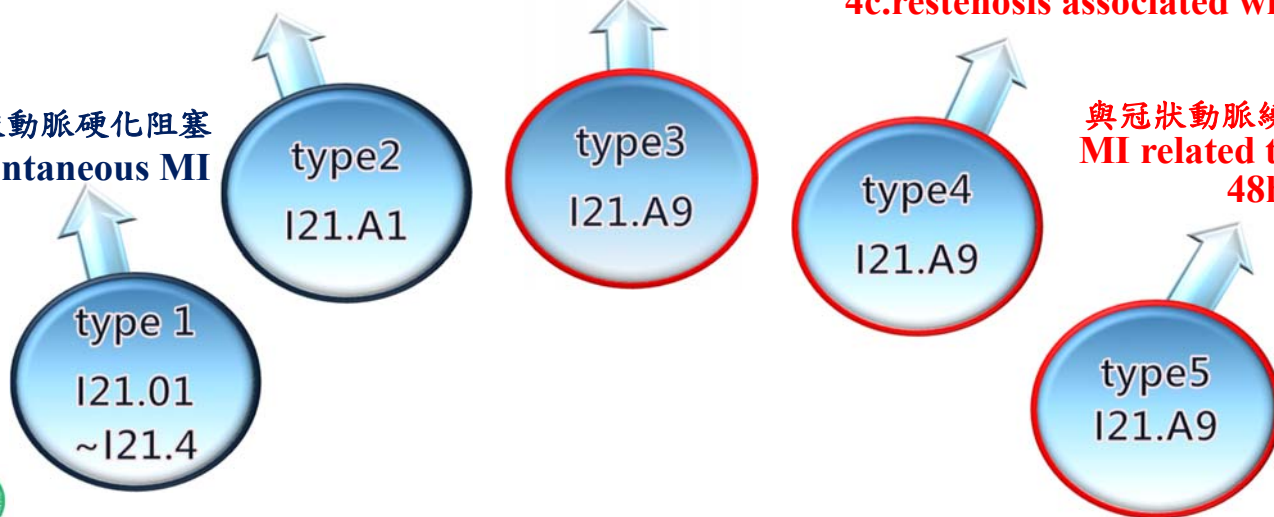
續發於缺血性失衡引起的心肌梗塞
MI secondary to ischemic imbalance

尚未檢驗心肌生化標記或心肌生化標記未上升前，就已死亡
MI resulting in death without biomarkers

與經皮冠狀動脈介入治療有關
4a.MI related to PCI \leq 48hrs
4b.stent thrombosis
4c.restenosis associated with PCI

與冠狀動脈繞道手術有關
MI related to CABG \leq 48hrs

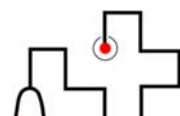
冠狀動脈硬化阻塞
Spontaneous MI



5

ICD-10-CM Official Guidelines

e. Acute myocardial infarction (AMI)



2) Acute myocardial infarction, unspecified

Code I21.9, Acute myocardial infarction, unspecified, is the default for **unspecified acute myocardial infarction** or **unspecified type**. If only type 1 STEMI or **transmural MI without the site** is documented, assign code I21.3, ST elevation (STEMI) myocardial infarction of unspecified site.

未明示急性心肌梗塞或未明示型態的心肌梗塞預設代碼為I21.9 Acute myocardial infarction, unspecified，若只記錄type 1 STEMI或沒有紀錄部位的經心壁型心肌梗塞時，編碼為I21.3 ST elevation (STEMI) myocardial infarction of unspecified site

infarction myocardium trans Search ICD-10-CM & ICD-10-PCS (2023) v

Infarct, infarction
myocardium, myocardial (acute) (with stated duration of 4 weeks or less) I21.9
transmural I21.9 ❌

infarction myocardium trans Search ICD-10-CM & ICD-10-PCS (2024) v

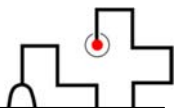
Infarct, infarction
myocardium, myocardial (acute) (with stated duration of 4 weeks or less) I21.9
transmural (see also, Infarct, myocardium, ST elevation, by site) I21.3

ICD-10-CM Official Guidelines 2024 P.53
ICD-10-CM Official Guidelines 2023 Page 52

6

ICD-10-CM Official Guidelines

e. Acute myocardial infarction (AMI)



5) Other Types of Myocardial Infarction

The ICD-10-CM provides codes for different types of myocardial infarction. Type 1 myocardial infarctions are assigned to codes I21.0-I21.4. **Type 2 myocardial infarction (myocardial infarction due to demand ischemia or secondary to ischemic imbalance)** is assigned to code I21.A1, Myocardial infarction type 2 with the underlying cause coded first. Do not assign code I24.89 (2023年版I24.8), Other forms of acute ischemic heart disease, for the demand ischemia. If a type 2 AMI is described as **NSTEMI or STEMI**, only assign code I21.A1. Codes I21.01-I21.4 should only be assigned for type 1 AMIs.

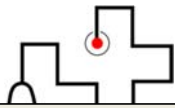
Acute myocardial infarctions type 3, 4a, 4b, 4c and 5 are assigned to code I21.A9, Other myocardial infarction type. ..未完

I24.8 Other forms of acute ischemic heart disease
Excludes1: myocardial infarction due to demand ischemia (I21.A1)

- Type 1 MI：編碼I21.0-I21.4
- Type 2 MI因需求性缺血或繼發於缺血性失衡引起的心肌梗塞：
 - 編碼 I21.A1，並需優先編碼潛在病因。
 - 不要將需求性缺血編碼為I24.89 其他形式的急性缺血性心臟病(2023年版I24.8)
 - 即使描述為 NSTEMI 或 STEMI，也只編碼 I21.A1
- 其他類型（3、4a、4b、4c、5）MI：I21.A9。

ICD-10-CM Official Guidelines

e. Acute myocardial infarction (AMI)



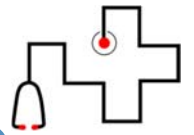
續上-The "Code also" and "Code first" notes should be followed related to complications, and for coding of postprocedural myocardial infarctions **during or following cardiac surgery**.

I21.A1 Myocardial infarction type 2
Myocardial infarction due to demand ischemia
Myocardial infarction secondary to ischemic imbalance
Code first (*), if applicable, the underlying cause, such as:
anemia (D50.0-D64.9)
chronic obstructive pulmonary disease (J44.-)
paroxysmal tachycardia (I47.0-I47.9)
shock (R57.0-R57.9)

I21.A9 Other myocardial infarction type
Myocardial infarction associated with revascularization procedure
Myocardial infarction type 3
Myocardial infarction type 4a
Myocardial infarction type 4b
Myocardial infarction type 4c
Myocardial infarction type 5
Code first, if applicable, postprocedural myocardial infarction following cardiac surgery (I97.190) or postprocedural myocardial infarction during cardiac surgery (I97.790)
Code also complication, if known and applicable, such as:
(acute) stent occlusion (T82.897-)
(acute) stent stenosis (T82.855-)
(acute) stent thrombosis (T82.867-)
cardiac arrest due to underlying cardiac condition (I46.2)
complication of percutaneous coronary intervention (PCI) (I97.89)
occlusion of coronary artery bypass graft (T82.218-)

與併發症相關之病況應遵循"Code also"和"Code first" 註釋，編寫心臟手術期間或手術後心肌梗塞的編碼。

AMI編碼注意事項



T1MI

- 代碼I21.01~I21.4。四周內再發生type 1或未明示AMI編碼I22。無標示急性心肌梗塞的類型時，**預設編於I21.9。**

更正

T2MI

- 需**先編潛在原因**代碼，例如：貧血、慢性阻塞性肺病、陣發性心動過速等，**續編AMI代碼I21.A1。**

T3MI

- **尚未檢驗心肌生化標記**或心肌生化標記還未上升前，**就已死亡**，編於代碼I21.A9。

T4MI

- **先編代碼I97.190或I97.790，續編AMI代碼I21.A9。**
- I97.190心臟手術後之其他醫療處置後心臟功能障礙
- I97.790心臟手術時其他術中心臟功能障礙

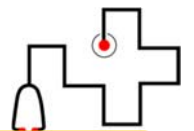
T5MI

- Code also例如：**stent thrombosis (T82.867-)**
occlusion of CABG (T82.218-)



9

Type 2 acute myocardial infarction



Q

- When a patient is readmitted to the hospital with a **new type 2 acute myocardial infarction** occurring with in four weeks of either a **previous** type 1 or type 2 acute myocardial infarction?
- 當患者在四週內因發生新的type 2 AMI 而再次住院，而這四週內曾經發生過type 1 AMI 或第二型 type 2 AMI 時，應如何編碼？

A

- **I21.A1 Myocardial infarction type 2.**
According to the ICD-10-CM Official Guidelines :**Do not assign code I22 for subsequent myocardial infarctions other than type 1 or unspecified.**

根據ICD-10-CM官方指引，代碼I22只能用於type 1或未明示型態 (unspecified) 心肌梗塞的後續心肌梗塞。



10

NSTEMI secondary to stent thrombus

Q A patient, who is **status post coronary angioplasty with stent placement** in the LAD **two days prior**, is readmitted for a non-ST elevation myocardial infarction (**NSTEMI**) **due to thrombus in the stent**. (AHA 2019,Q2,P32-33)

A I97.190, Other postprocedural cardiac functional disturbances following cardiac surgery (心臟手術後之其他醫療處置後心臟功能障礙)

- T82.867A Thrombosis due to cardiac prosthetic devices, implants and grafts, initial encounter (源於心臟裝置物、植入物及移植物所致之血栓形成之初期照護)
- **I21.A9 Other myocardial infarction type**. (其他型心肌梗塞)

I21.A9 :

Code first, if applicable, postprocedural myocardial infarction **following cardiac surgery (I97.190)**, or postprocedural myocardial infarction during cardiac surgery (I97.790)

I21.A9 :

Code also complication, if known and applicable, such as:
(acute) stent occlusion (T82.897-)
(acute) stent stenosis (T82.855-)
(acute) stent thrombosis (T82.867-)
cardiac arrest due to underlying cardiac condition (I46.2)
complication of percutaneous coronary intervention (PCI)(I97.89)
occlusion of coronary artery bypass graft (T82.218-)

11

新增併發症細碼T82.855和T82.856及修訂T82.857和T82.858英文名稱 Stenosis of Coronary Artery and Peripheral Vascular Stent(1/2)

ICD-10	2023 英文名稱	新增說明
T82.855	Stenosis of coronary artery stent	新增 T82.855 和 T82.856 ，表示冠狀動脈支架或 周邊 血管支架的狹窄(stenosis)或再狹窄(restenosis)。
T82.856	Stenosis of peripheral vascular stent	

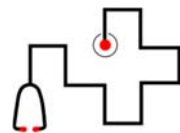


如:ICA stent(內頸動脈支架)

ICD-10	2014 英文名稱	修訂英文名稱說明
T82.857	Stenosis of cardiac prosthetic devices, implants and grafts	已新增T82.855和T82.856表示 支架 的狹窄或再狹窄，因此，修改T82.857和T82.858的英文名稱為心臟或血管 其它(非支架的) 裝置物、植入物或移植物的狹窄。
T82.858	Stenosis of vascular prosthetic devices, implants and grafts	
ICD-10	2023 英文名稱	
T82.857	Stenosis of other cardiac prosthetic devices, implants and grafts	
T82.858	Stenosis of other vascular prosthetic devices, implants and grafts	



In Stent Restenosis (ISR) 查找方式



Index 新增

Restenosis

stent

vascular

in stent

coronary vessel [T82.855](#)

peripheral vessel [T82.856](#)

Stenosis, stenotic (cicatricial) --see also Stricture
artery NEC --see also Arteriosclerosis [I77.1](#)

stent

coronary [T82.855](#)

peripheral [T82.856](#)

Stenosis, stenotic (cicatricial) --see also Stricture
stent

vascular

end stent

adjacent to stent --see Arteriosclerosis

within the stent

coronary [T82.855](#)

peripheral [T82.856](#)

in stent

coronary vessel [T82.855](#)

peripheral vessel [T82.856](#)

Complication (s) (from) (of)

stent

vascular

end stent stenosis --see [Restenosis, stent](#)

in stent stenosis --see [Restenosis, stent](#)

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新增併發症細碼T82.855和T82.856及修訂T82.857和T82.858英文名稱_ Stenosis of Coronary Artery and Peripheral Vascular Stent(2/2)

案例

問題:

A patient has known CAD, status post stent placement in the left anterior descending (LAD), left circumflex (LCx) and right coronary arteries(RCA) . The provider documented, “in-stent” restenosis in all three previously placed coronary artery stents.

答案:

T82.855A Stenosis of coronary artery stent, initial encounter

I25.10 CAD

補充

In ICD-10-CM classifies stenosis or narrowing that is within the stent or “in-stent,” as a complication, unless specifically documented as due to disease progression.

在 ICD-10-CM 中，支架內的狹窄或縮窄，即所謂的「支架內狹窄」，被分類為併發症，除非有明確記載是由疾病進展所引起的。

T82.855 Stenosis of coronary artery stent ⑦

In-stent stenosis (restenosis) of coronary artery stent

Restenosis of coronary artery stent

T82.856 Stenosis of peripheral vascular stent ⑦

In-stent stenosis (restenosis) of peripheral vascular stent

Restenosis of peripheral vascular stent

非缺血性心肌損傷（非創傷性）I5A



- 心肌梗塞的診斷僅適用於心肌缺血作為心肌損傷原因的患者
- 沒有缺血的情況下心肌損傷，分為急性或慢性非缺血性心肌損傷,代碼皆為I5A
- 如果已知且適用，先編潛在原因代碼。例如：acute kidney failure (N17.-)、acute myocarditis (I40.-)等..

I5A Non-ischemic myocardial injury (non-traumatic)

Acute (non-ischemic) myocardial injury
Chronic (non-ischemic) myocardial injury
Unspecified (non-ischemic) myocardial injury

Code first the underlying cause, if known and applicable, such as:

acute kidney failure (N17.-)
acute myocarditis (I40.-)
cardiomyopathy (I42.-)
chronic kidney disease (CKD) (N18.-)
heart failure (I50.-)
hypertensive urgency (I16.0)
nonrheumatic aortic valve disorders (I35.-)
paroxysmal tachycardia (I47.-)
pulmonary embolism (I26.-)
pulmonary hypertension (I27.0, I27.2-)
sepsis (A41.-)
takotsubo syndrome (I51.81)

Excludes1: acute myocardial infarction (I21.-)
injury of heart (S26.-)

Excludes2: other acute ischemic heart diseases (I24.-)

Injury T14.90 - see also specified injury type

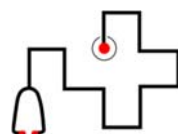
heart (traumatic) S26.90

non-traumatic I5A (acute) (chronic) (non-ischemic)

myocardial (acute) (chronic) (non-ischemic) (non-traumatic) I5A

15

Refractory angina pectoris 頑固性心絞痛



- I20.0 Unstable angina
- I20.1 Angina pectoris with documented spasm
- **I20.2 Refractory angina pectoris**
- I20.8 Other forms of angina pectoris
- I20.9 Angina pectoris, unspecified

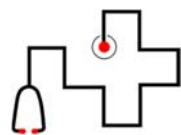
➤ CAD亦新增相關代碼

頑固性心絞痛(refractory angina pectoris)，代碼I20.2。是指因不可逆性原因引起的心絞痛，缺血持續超過三個月，且不能通過藥物、經皮冠狀動脈介入治療(PCI)或冠狀動脈旁路移植術(CABG)手術的組合來控制。

CAD I25-	Native I25.10-I25.11		Angina
			Non angina
	CABG I25.70-至I25.73- I25.79- I25.810	Auto	Angina
			Non angina
	Transplanted heart I25.75-至I25.76-、 I25.811、I25.812	Non auto	Angina
			Non angina
		Native	Angina
		CABG	Non angina

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Refractory angina pectoris 頑固性心絞痛



Q

- A patient with a history of coronary artery disease s/p CABG and PTCA with stent presents to the ER with severe chest pain. Impression of chronic refractory angina pectoris.

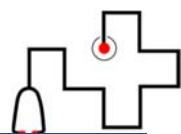
A

- I25.702, Atherosclerosis of coronary artery bypass graft(s), unspecified, with refractory angina pectoris.
(未明示冠狀動脈繞道術的動脈粥樣硬化症伴有頑固性心絞痛)
- Z98.61, Coronary angioplasty status
(冠狀動脈血管成形術後狀態)

AHA2020,Q4,P21-22

17

高血壓危象



➤ 新增疾病代碼：Hypertensive crisis I16

I16 Hypertensive crisis

Code also any identified hypertensive disease (I10-I15)

I16.0 Hypertensive urgency (高血壓緊急狀況)

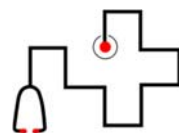
I16.1 Hypertensive emergency (高血壓急症)

I16.9 Hypertensive crisis, unspecified (高血壓危象)

Hypertensive Crisis

Assign a code from category I16, Hypertensive crisis, for documented hypertensive urgency, hypertensive emergency or unspecified hypertensive crisis. Code also any identified hypertensive disease (I10-I15). The sequencing is based on the reason for the encounter
需加編已確認的高血壓疾病代碼 (I10-I15)。代碼的排序取決於此次就診的主要原因

Hypertensive crisis I16



I16.1 Hypertensive emergency

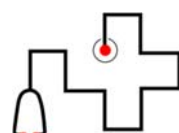
Use additional [2025] code, if applicable to identify specific organ dysfunction such as:

acute kidney injury (N17.-)
 acute myocardial infarction (I21.-)
 acute pulmonary edema (left and/or right ventricular failure) (J81.0, I50.-)
 aortic dissection (I71.0-)
 cerebral hemorrhage (I60.-, I61.-, I62.-)
 cerebral infarction (I63.-)
 eclampsia (O15.-)
 hypertensive encephalopathy (I67.4)
 seizure (R56.9)



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心臟衰竭增列代碼



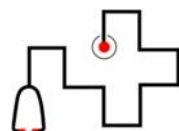
➤ 新增疾病分群代碼：Other heart failure, I50.8

I50.1	<u>Left</u> ventricular failure	I50.810	Right heart failure, unspecified
I50.2	<u>Systolic</u> heart failure	I50.811	Acute right heart failure
I50.3	<u>Diastolic</u> heart failure	I50.812	Chronic right heart failure
I50.4	<u>Combined</u> systolic and diastolic heart failure	I50.813	Acute on chronic right heart failure
I50.8	<u>Other</u> heart failure	I50.814	Right heart failure due to left heart failure
I50.9	Heart failure, <u>unspecified</u>	I50.82	Biventricular heart failure
➤ I50.2、I50.3、I50.4 第5位碼細分： <u>0</u> Unspecified, <u>1</u> Acute, <u>2</u> Chronic, <u>3</u> Acute on chronic		I50.83	High output heart failure
		I50.84	End stage heart failure
		I50.89	Other heart failure



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心臟衰竭Index 差異



2014年版

2023年版

Biventricular failure (heart) I50.9
Failure, failed
biventricular I50.9
 heart (acute) (senile) (sudden) I50.9
biventricular I50.9

Biventricular failure (heart) I50.82
Failure, failed
biventricular I50.82
 due to left heart **failure I50.814**
 heart (acute) (senile) (sudden) I50.9
biventricular I50.82
 due to left heart **failure I50.814**

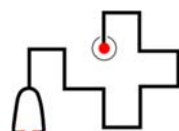
Failure, failed
 heart (acute) (senile) (sudden) I50.9
combined left-right sided I50.9
right (ventricular) (secondary to left heart failure) --see Failure, heart, congestive

Failure, failed
heart (acute) (senile) (sudden) I50.9
 with
decompensation I50.9
right I50.813
combined left-right sided I50.82
 due to left heart **failure I50.814**
right (isolated) (ventricular) I50.810
 acute I50.811
 and chronic (on) I50.813
 chronic I50.812
 and acute I50.813
 secondary to left heart **failure I50.814**



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心臟衰竭編碼注意事項

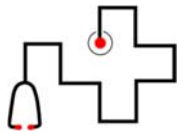


- I50 Heart failure
Excludes2: cardiac arrest (I46.-); neonatal cardiac failure (P29.0)
- I50.2 Systolic (congestive) heart failure / I50.3 Diastolic (congestive) heart failure
Code also: End stage heart failure, if applicable (I50.84)
Excludes1: Combined systolic (congestive) and diastolic (congestive) heart failure (I50.4.-)
- I50.4 Combined systolic (congestive) and diastolic (congestive) heart failure
Code also: end stage heart failure, if applicable (I50.84)
- I50.814 Right heart failure due to left heart failure
Code also :the type of left ventricular failure, if known (I50.2-I50.43)
Excludes1: Right heart failure with but not due to left heart failure (I50.82)
- I50.82 Biventricular heart failure / I50.84 End stage heart failure
Code also: the type of left ventricular failure as systolic, diastolic, or combined, if known (I50.2-I50.43)
- I50.9 Heart failure, unspecified
Excludes1: fluid overload (E87.70)
Excludes2: fluid overload unrelated to congestive heart failure (E87.70)



22

非風濕性二尖瓣（瓣膜）環鈣化



➤ 增列成因代碼： I34.81

I34.0 Nonrheumatic mitral (valve) insufficiency

I34.1 Nonrheumatic mitral (valve) prolapse

I34.2 Nonrheumatic mitral (valve) stenosis

I34.81 Nonrheumatic mitral (valve) annulus calcification(環鈣化)

Code also , if applicable:

nonrheumatic mitral (valve) insufficiency (I34.0)

nonrheumatic mitral (valve) stenosis (I34.2)

I34.89 Other nonrheumatic mitral valve disorders

I34.9 Nonrheumatic mitral valve disorder, unspecified

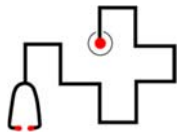


➤ Rheumatic mitral (valve) annulus calcification編於I05.8



23

續發性肺高壓



➤ 疾病成因細分：Secondary pulmonary hypertension, I27.2-

2014版

I27.2 Other secondary pulmonary hypertension

2023版

I27.20 Pulmonary hypertension, unspecified

I27.21 Secondary pulmonary arterial hypertension (Group 1)

I27.22 Pulmonary hypertension due to left heart disease (Group 2)

I27.23 Pulmonary hypertension due to lung diseases and hypoxia (Group 3)

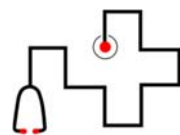
I27.24 Chronic thromboembolic pulmonary hypertension (Group 4)

I27.29 Other secondary pulmonary hypertension (Group 5)



24

肺高壓類型



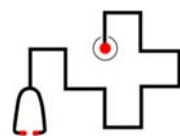
- 原發性肺動脈高壓(I27.0)，也稱為特發性和遺傳性肺高壓。
- Group 1肺高壓(I27.21):其續發性原因包括藥物和毒素引起或與先天性心臟病和 HIV 感染等疾病有關
- Group 2是因左心疾病引起的肺高壓 (I27.22)。
- Group 3是續發於肺部疾病或缺氧的肺動高壓 (I27.23)
- Group 4是慢性血栓栓塞性肺高壓 (I27.24)
- Group 5是上述以外的其他因素引起肺高壓(I27.29)，例如：血液系統疾病、全身性疾病、代謝障礙、甲狀腺疾病及其他病況。

編碼注意事項：

- 若有提及藥物或毒物的不良影響或相關的病因，例如：HIV，血栓栓塞…等，需要加編。
- 若續發性肺動脈高壓是因為正確處方和給藥的藥物不良反應時，編碼I27.21, 次診再加編藥物的不良反應代碼。
- 若續發性肺動脈高壓是因相關病症(因)引起時，例如血栓栓塞，則主次編碼順序則依據入院的理由選擇

25

惡性心包膜積液



➤ 疾病成因細分： Pericardial effusion , I31.3

I31.3 Pericardial effusion (noninflammatory)

Excludes1: acute pericardial effusion (I30.9)

**I31.31 Malignant pericardial effusion in diseases
classified elsewhere**

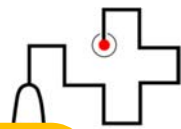
Code first underlying neoplasm

I31.39 Other pericardial effusion (noninflammatory)



26

Malignant pericardial effusion



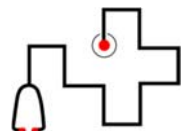
Q Lung cancer presented to ER with complaints of dry cough, shortness of breath and sharp pleuritic chest pain, Impression of malignant pericardial effusion.

- A**
- **C34.90** Malignant neoplasm of unspecified part of unspecified bronchus or lung.
(未明示側性支氣管或肺惡性腫瘤)
 - **I31.31** Malignant pericardial effusion in diseases classified elsewhere
(歸類於他處疾病所致之惡性心包積液)



27

心室心搏過速



➤ 新增疾病分群代碼：Ventricular tachycardia, I47.2

- I47.0 Re-entry ventricular arrhythmia
- I47.1 Supraventricular tachycardia
- **I47.20 Ventricular tachycardia, unspecified**
- **I47.21 I47.29 Other ventricular tachycardia**
- I47.9 Paroxysmal tachycardia, unspecified

tors

已可由2023版工具書index查到碼

Torsades de pointes **I47.21**

Torsades de pointes(多型性心室心搏過速)是罕見的心搏過速心律不整,可由某些藥物引發,例如:抗精神病藥、止吐藥或抗心律不整藥。也可能與電解質異常有關。

I47.21 Torsades de pointes [2023]

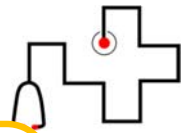
Use additional [2023] code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)

Code also [2023], if applicable, long QT syndrome (I45.81)



28

Torsades de pointes



Q A patient presented to the ER due to dizziness and palpitations. EKG was performed and the patient was diagnosed with **Torsades de pointes** due to an adverse effect of prescribed antipsychotic medication.

A

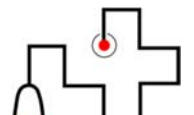
- **I47.21** Torsades de pointes. (多型性心室心搏過速)
- **T43.505A** Adverse effect of unspecified antipsychotics and neuroleptics, initial encounter
(未明示抗精神病藥劑及神經精神藥劑不良反應之初期照護)

AHA 2022,Q4,P24



29

心房顫動



I48.1 Persistent atrial fibrillation
I48.2 Chronic atrial fibrillation
Permanent atrial fibrillation

I48.1 Persistent atrial fibrillation
Excludes1: Permanent atrial fibrillation (**I48.21**)
I48.11 Longstanding persistent atrial fibrillation
I48.19 Other persistent atrial fibrillation
Chronic persistent atrial fibrillation
Persistent atrial fibrillation, NOS
I48.2 Chronic atrial fibrillation
I48.20 Chronic atrial fibrillation, unspecified
Excludes1: Chronic persistent atrial fibrillation (**I48.19**)
I48.21 Permanent atrial fibrillation

- 如果醫生同時記錄了慢性和持續性atrial fibrillation,因慢性AF較不具體，故只需編I48.1即可
- 慢性持續性心房顫動 (**Chronic persistent AF**) 在臨床定義或意義上未被廣泛的接受。針對慢性持續性心房顫動，應使用代碼 **I48.19 其他持續性心房顫動** 來編碼。

Coding Clinic, 2019 Q2 P.3

Coding Clinic, 2019 Q4 P.7

30

胸主動脈剝離/胸主動脈瘤

2014版

I71.01 Dissection of thoracic aorta

I71.1 Thoracic aortic aneurysm, ruptured

I71.2 Thoracic aortic aneurysm, without rupture

2023版

增列部位代碼

I71.010 Dissection of **ascending aorta**

I71.011 Dissection of **aortic arch**

I71.012 Dissection of **descending thoracic aorta**

I71.019 Dissection of thoracic aorta, unspecified

I71.10 Thoracic aortic aneurysm, ruptured, unspecified

I71.11 Aneurysm of the **ascending aorta**, ruptured

I71.12 Aneurysm of the **aortic arch**, ruptured

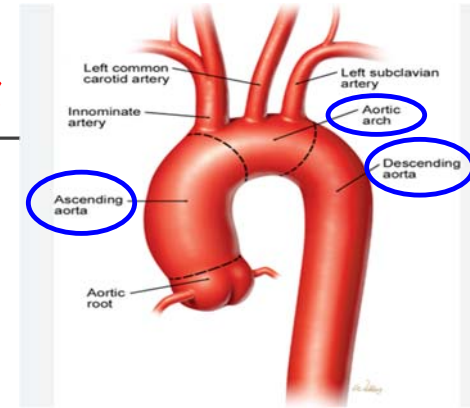
I71.13 Aneurysm of the **descending thoracic aorta**, ruptured

I71.20 Thoracic aortic aneurysm, without rupture, **unspecified**

I71.21 Aneurysm of the **ascending aorta**, without rupture

I71.22 Aneurysm of the **aortic arch**, without rupture

I71.23 Aneurysm of the **descending thoracic aorta**, without rupture



診斷為Dissection of **Ascending Aorta, Aortic Arch** and **Descending Thoracic Aorta**

需編多個代碼以符合病人所有診斷, 編碼I71.010+I71.011+I71.012

C.C.2024 Q2 P.17

31

腹主動脈瘤

➤ 疾病部位細分：Abdominal aortic aneurysm, I71.3、I71.4

2014版

I71.3 Abdominal aortic aneurysm, ruptured

I71.4 Abdominal aortic aneurysm, without rupture

2023版

腹主動脈瘤根據與腎動脈的關係來描述

I71.30 Abdominal aortic aneurysm, ruptured, unspecified

I71.31 **Pararenal**(腎旁) abdominal aortic aneurysm, ruptured

I71.32 **Juxtarenal**(近腎) abdominal aortic aneurysm, ruptured

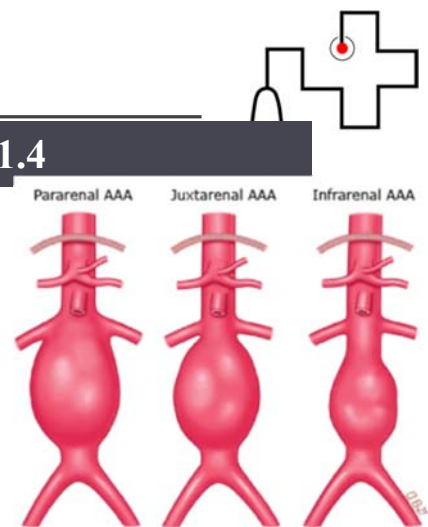
I71.33 **Infrarenal**(腎下) abdominal aortic aneurysm, ruptured

I71.40 Abdominal aortic aneurysm, without rupture, unspecified

I71.41 **Pararenal** abdominal aortic aneurysm, without rupture

I71.42 **Juxtarenal** abdominal aortic aneurysm, without rupture

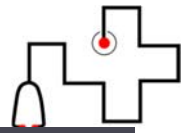
I71.43 **Infrarenal** abdominal aortic aneurysm, without rupture



Suprarenal AAA are a type of pararenal AAA. 故Suprarenal AAA 編 I71.41 (C.C.2024 Q2 P.16)

32

胸腹主動脈瘤



➤ 疾病部位細分：Thoracoabdominal aortic aneurysm, I71.5、I71.6

2014版

I71.5 Thoracoabdominal aortic aneurysm, ruptured

I71.6 Thoracoabdominal aortic aneurysm, without rupture

2023版

I71.50 Thoracoabdominal aortic aneurysm, ruptured, unspecified

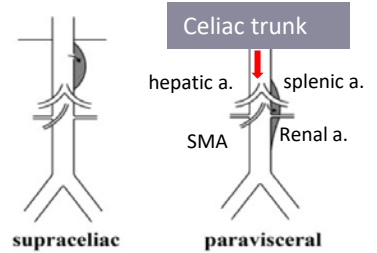
I71.51 **Supraceliac**(上腹部)aneurysm of the abdominal aorta, ruptured

I71.52 **Paravisceral**(內臟旁) aneurysm of the abdominal aorta, ruptured

I71.60 Thoracoabdominal aortic aneurysm, without rupture, unspecified

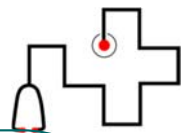
I71.61 **Supraceliac** aneurysm of the abdominal aorta, without rupture

I71.62 **Paravisceral** aneurysm of the abdominal aorta, without rupture



33

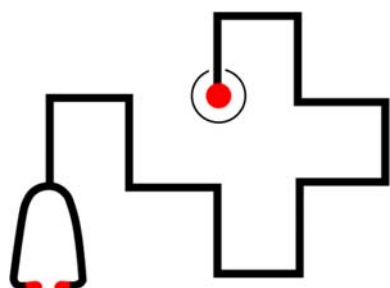
剝離動脈瘤



- **剝離(dissection)**是血管內層異常、突然的撕裂，使血液在**血管壁各層間流動而分開**，假腔內積聚的血液會導致血栓或阻塞血流。
- **動脈瘤(aneurysm)**是血管局部異常擴張。隨著動脈瘤的進展，張力可能會增加，使動脈瘤破裂，導致死亡。
- 主動脈剝離或動脈瘤的患者，根據部位進行治療，新代碼描述了剝離和動脈瘤的位置，以及動脈瘤是否破裂。
- **剝離動脈瘤(dissecting aneurysm)**是血液進入動脈壁並分離血管壁各層，導致動脈壁隆起，為急性動脈剝離，剝離是最主要的問題，因此剝離動脈瘤，**僅編剝離(dissection)代碼**。
- 例如：Dissecting aneurysm of left middle cerebral artery僅編代碼 I67.0 腦動脈剝離,未破裂者



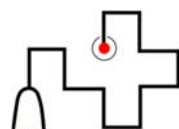
34



循環系統 轉版後ICD-10-PCS代碼差異概述

35

02 Heart and Great Vessels body part revised

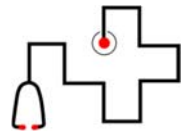


<i>From</i>	<i>To</i>
Body Part	Body Part
0 Coronary Artery, One Site	0 Coronary Artery, One <u>Artery</u>
1 Coronary Artery, Two Sites	1 Coronary Artery, Two <u>Arteries</u>
2 Coronary Artery, Three Sites	2 Coronary Artery, Three <u>Arteries</u>
3 Coronary Artery, Four or More Sites	3 Coronary Artery, Four or More <u>Arteries</u>

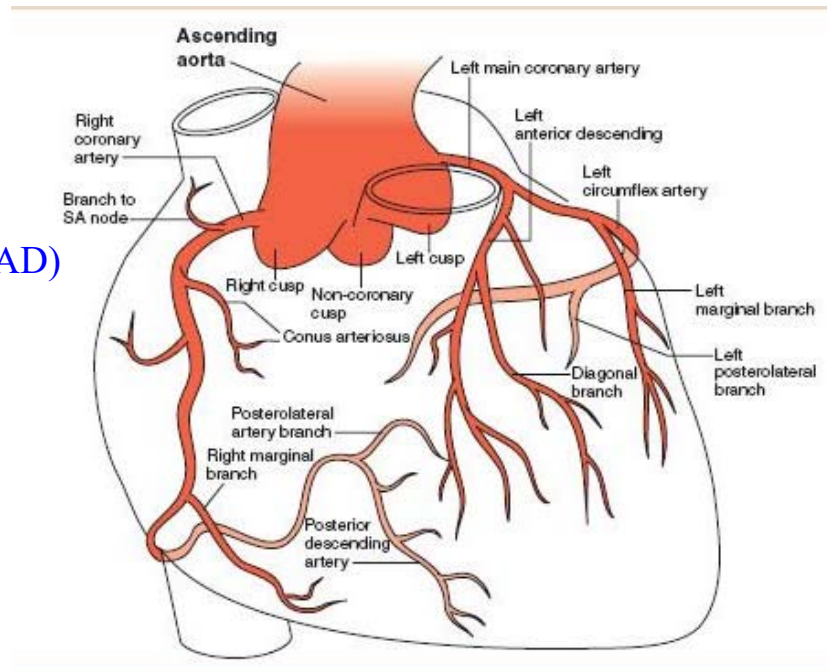
➤ 冠狀動脈手術的身體部位值從病兆數量修改為動脈數量，包含：
1_Bypass, 7_Dilation, C_Extirpation, F_Fragmentation, H_Insertion, N_Release, Q_Repair, S_Reposition, U_Supplement

36

Coronary arteries and branches

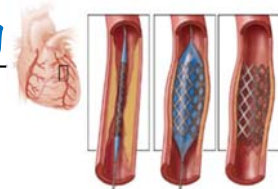


- Right coronary artery (RCA)
- Right marginal
- Right posterior descending
- Left main coronary artery (LMCA)
- Left anterior descending branch (LAD)
- Diagonal
- Septal
- Left circumflex (LCX)
- Obtuse marginal (OM)
- Posterior descending
- Posterolateral



37

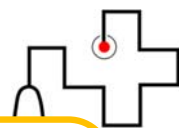
PTCA Body part和Device的



0 Medical and Surgical 2 Heart and Great Vessels 7 Dilation			
Body Part	Approach	Device	Qualifier
0 Coronary Artery, One Artery 1 Coronary Artery, Two Arteries 2 Coronary Artery, Three Arteries 3 Coronary Artery, Four or More Arteries	0 Open 3 Percutaneous 4 Percutaneous Endoscopic	4 Intraluminal Device, Drug-eluting 5 Intraluminal Device, Drug-eluting, Two 6 Intraluminal Device, Drug-eluting, Three 7 Intraluminal Device, Drug-eluting, Four or More D Intraluminal Device E Intraluminal Device, Two F Intraluminal Device, Three G Intraluminal Device, Four or More T Intraluminal Device, Radioactive Z No Device	6 Bifurcation Z No Qualifier
治療冠狀動脈 body part 由 病兆數修改為 動脈數		PTCA device 新增塗藥和非塗藥支架具體數量	

38

PTCA with stents

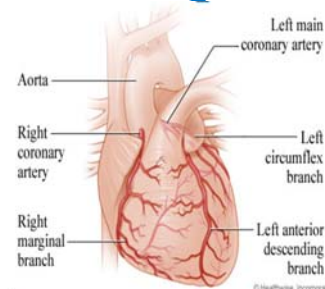


Q

- The patient underwent placement of **two overlapping drug-eluting stents** to treat a long lesion in the **left anterior descending** coronary artery with another **drug-eluting stent** placed in the **left circumflex** coronary artery. In addition, **two nondrug-eluting stents** were placed in the **right coronary artery** to treat two separate lesions.

A

- 027136Z , Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach (經皮**兩條**冠狀動脈擴張術，使用**三個塗藥腔內裝置**)
- 02703EZ , Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Percutaneous Approach (經皮**一條**冠狀動脈擴張術，使用**兩個管腔內裝置**)

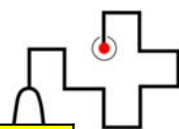


➤ PTCA Device值不同，冠狀動脈數量分開累計並計算支架數量

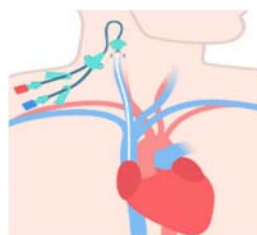
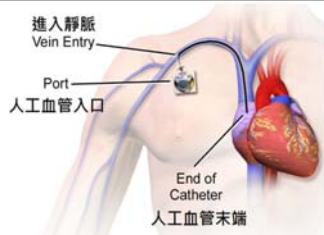


39

血管通路裝置名稱改變



2014版	2023版
Device	Device
W Vascular Access Device, Reservoir (儲存)	W Vascular Access Device, Totally Implantable (全置入式)
X Vascular Access Device	X Vascular Access Device, Tunneled (隧道式)

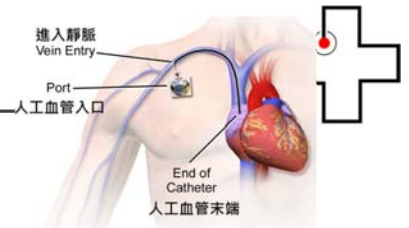


- 隧道導管(tunneled catheter)在皮下形成導管穿過的隧道，導管有入口和出口部位。



40

Insertion porta cath

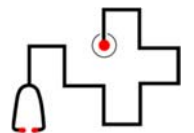


Q Insertion of a vascular access device ending in the s superior vena cava and a porta-cath?

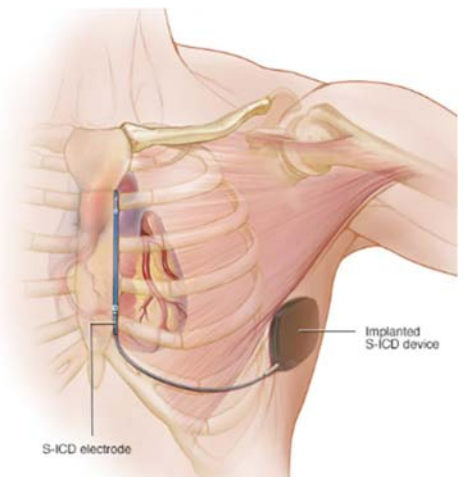
A	2014版	2023版
	<ul style="list-style-type: none"> 02HV33Z, <u>Insertion</u> of Infusion Device into Superior Vena Cava, Percutaneous Approach (經皮植入上腔靜脈輸液裝置) 0JH60XZ, <u>Insertion</u> of Vascular Access Device into Chest Subcutaneous Tissue and Fascia, Open Approach (開放性植入胸部皮下組織及筋膜血管通路裝置) 	<ul style="list-style-type: none"> 02HV33Z, <u>Insertion</u> of Infusion Device into Superior Vena Cava, Percutaneous Approach (經皮植入上腔靜脈輸液裝置) 0JH60WZ, <u>Insertion</u> of Totally Implantable Vascular Access Device into Chest Subcutaneous Tissue and Fascia, Open Approach (開放性植入胸部皮下組織及筋膜全置入式血管通路裝置)

41

皮下植入式心臟整流去顫器

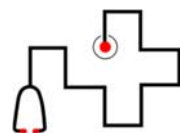


- 皮下植入式心臟整流去顫器 (Subcutaneous Implantable cardioverter defibrillator, **S-ICD**)，用於治療危及生命的心室頻脈 (VT) 與心室顫動 (Vf)。
- S-ICD與傳統ICD不同，傳統ICD須經由靜脈管腔將去顫器導線植入心臟腔室內，S-ICD導線埋在皮下，不受上肢擺動及活動度之影響，S-ICD只能做去顫功能，無法當節律器使用。



42

Insertion S-ICD lead



- 0JH, Subcutaneous Tissue and Fascia, **Insertion**

Body Part	Approach	Device	Qualifier
6 Subcutaneous Tissue and Fascia, Chest	0 Open 3 Percutaneous	<u>E</u> <u>Subcutaneous</u> <u>Defibrillator</u> <u>Lead</u>	Z No Qualifier 0JH63FZ

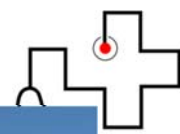
- 0JP, Subcutaneous Tissue and Fascia, Removal
- 0JW, Subcutaneous Tissue and Fascia, Revision

Body Part	Approach	Device	Qualifier
T Subcutaneous Tissue and Fascia, Trunk	0 Open 3 Percutaneous	<u>E</u> <u>Subcutaneous</u> <u>Defibrillator</u> <u>Lead</u>	Z No Qualifier



43

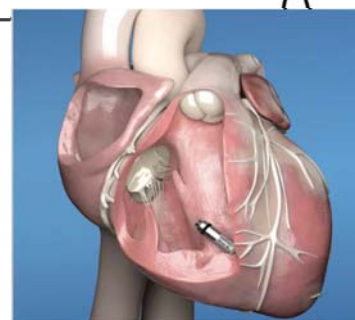
無導線心臟節律器



02H Insertion of Heart and Great Vessels
02P Removal of Heart and Great Vessels
02W Revision of Heart and Great Vessels

Device

N Intracardiac Pacemaker

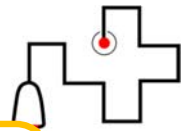


- **Intracardiac pacemakers** are also known as **leadless pacemakers** and transcatheter pacemakers.
- 所有組件微型化為膠囊狀裝置，**植入右心室**的單個裝置，用於**單腔**起搏。沒有皮下袋(pocket)，也沒有隧道式導線(lead)。



44

Leadless pacemaker



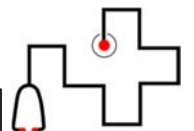
Q The patient with **unexplained syncope**, who had recently undergone **single-chamber leadless pacemaker implant** insertion **right ventricle**.

A • 02HK3NZ , Insertion of **Intracardiac Pacemaker** into Right Ventricle, Percutaneous Approach
(經皮植入右心室心內節律器)



45

Percutaneous transluminal angioplasty



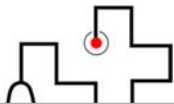
Section	0 Medical and Surgical		
Body System	4 Lower Arteries		
Operation	7 Dilation Expanding an orifice or the lumen of a tubular body part		
Code Description: 047 Lower Arteries, Dilation			
Body Part	Approach	Device	Qualifier
<input type="radio"/> 0 Abdominal Aorta <input type="radio"/> 1 Celiac Artery <input type="radio"/> 2 Gastric Artery <input type="radio"/> 3 Hepatic Artery <input type="radio"/> 4 Splenic Artery <input type="radio"/> 5 Superior Mesenteric Artery <input type="radio"/> 6 Colic Artery, Right <input type="radio"/> 7 Colic Artery, Left <input type="radio"/> 8 Colic Artery, Middle <input type="radio"/> 9 Renal Artery, Right <input type="radio"/> A Renal Artery, Left <input type="radio"/> B Inferior Mesenteric Artery <input type="radio"/> C Common Iliac Artery, Right <input type="radio"/> D Common Iliac Artery, Left <input type="radio"/> E Internal Iliac Artery, Right <input type="radio"/> F Internal Iliac Artery, Left <input type="radio"/> H External Iliac Artery, Right <input type="radio"/> J External Iliac Artery, Left <input checked="" type="radio"/> K Femoral Artery, Right <input type="radio"/> L Femoral Artery, Left <input type="radio"/> M Popliteal Artery, Right <input type="radio"/> N Popliteal Artery, Left	<input type="radio"/> 0 Open <input type="radio"/> 3 Percutaneous <input type="radio"/> 4 Percutaneous Endoscopic	<input type="radio"/> 4 Intraluminal Device, Drug-eluting <input type="radio"/> 5 Intraluminal Device, Drug-eluting, Two <input type="radio"/> 6 Intraluminal Device, Drug-eluting, Three <input type="radio"/> 7 Intraluminal Device, Drug-eluting, Four or More <input type="radio"/> D Intraluminal Device <input type="radio"/> E Intraluminal Device, Two <input type="radio"/> F Intraluminal Device, Three <input type="radio"/> G Intraluminal Device, Four or More <input type="radio"/> Z No Device	<input type="radio"/> 1 Drug-Coated Balloon <input type="radio"/> Z No Qualifier

➤ 第6位碼Device新增塗藥和非塗藥支架具體數量

➤ 第7位碼Qualifier新增塗藥氣球, 代碼" 1"



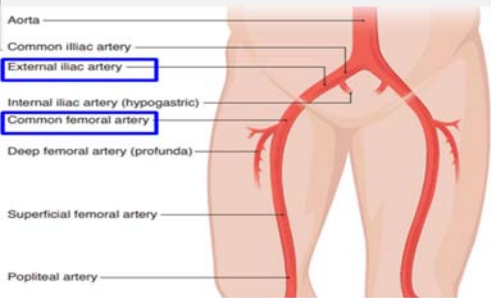
46



If a **single vascular** procedure is performed on a continuous section of **an arterial or venous** body part, code the body part value corresponding to the anatomically most proximal (closest to the heart) portion of **the arterial or venous body part**.

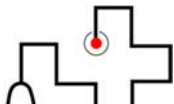
Example: A procedure performed on a continuous section of artery from the femoral artery to the external iliac artery with the point of entry at the femoral artery is coded to the external iliac body part. A procedure performed on a continuous section of artery from the femoral artery to the external iliac artery with the point of entry at the external iliac artery is also coded to the external iliac artery body part.

若在**動脈或靜脈身體部位**的一個**連續部分**上執行了**單一血管**手術，應編碼**最接近心臟的部位**。例如，若手術從股動脈到外髂動脈，進入點在股動脈，則編碼為外髂動脈；若進入點在外髂動脈，仍編碼為外髂動脈。

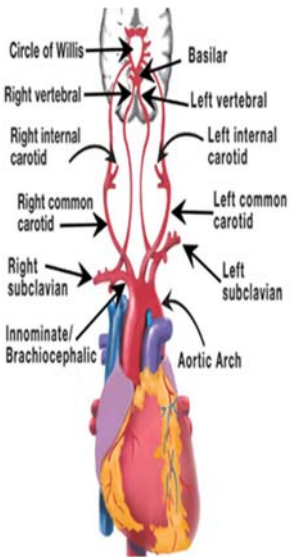


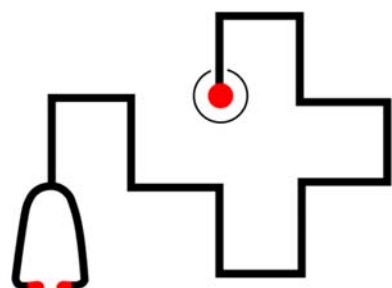
ICD-10-PCS Official Guidelines 2024 P.13

B4.1c 修訂說明



說明重點	出處
B4.1c only applies to the vasculature, such as arteries and veins , not other tubular organs, such as esophagus, stomach, large and small intestines. B4.1c 僅適用於 血管 ，例如動脈和靜脈，而 不適用於其他管狀器官 ，如食道、胃、大腸和小腸。	2022 Q1 P.10-P.13
B4.1c only applies to surgeries that involve a single lesion that spans across multiple body parts. 指引B4.1c僅適用於涉及跨越多個身體部位的 單一病變 的手術。	
Procedures involving separate lesions found in/on multiple body parts should be coded separately. (such as thrombus, clots, plaque, etc., within multiple body parts, rather than a single continuous lesion) 涉及多個不同身體部位上 單獨病變 的手術（例如血栓、血塊、斑塊等位於多個部位，而不是單一連續病變時） 應分別編碼	
A single procedure of carotid endarterectomy performed on a single continuous lesion involving both the common carotid artery and the internal carotid artery should only be coded as carotid endarterectomy of the common carotid artery. 在涉及 總頸動脈和內頸動脈 的單一連續病變上進行頸動脈內膜剝離的單一手術，只需編碼 總頸動脈 內膜剝離	



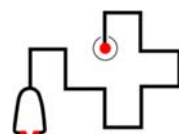


胸內/感染 轉版後ICD-10-CM/PCS代碼差異概述



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疾病成因細分_Viral pneumonia



2014		2023 (新增代碼)	
代碼	名稱	代碼	名稱
J12.81	Pneumonia due to SARS-associated coronavirus	J12.81	Pneumonia due to SARS-associated coronavirus
		J12.82	Pneumonia due to coronavirus disease 2019
J12.89	Other viral pneumonia	J12.89	Other viral pneumonia

J12.8 Other viral pneumonia

2014年版

J12.81 Pneumonia due to SARS-associated coronavirus
Severe acute respiratory syndrome NOS

J12.89 Other viral pneumonia

J12.8 Other viral pneumonia

2023年版

J12.81 Pneumonia due to SARS-associated coronavirus
Severe acute respiratory syndrome NOS

J12.82 Pneumonia due to coronavirus disease 2019
Pneumonia due to 2019 novel coronavirus (SARS-CoV-2)
Pneumonia due to COVID-19

Code first COVID-19 (U07.1)

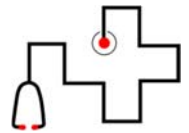
J12.89 Other viral pneumonia



50

Progressive Fibrotic Interstitial Lung Disease

(漸進性纖維化間質性肺疾病)



歸類於他處疾病所致之其他間質性肺疾病伴有纖維化變性

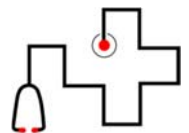
J84.17 Other interstitial pulmonary diseases with fibrosis in diseases classified elsewhere
 Interstitial pneumonia (nonspecific) (usual) due to collagen vascular disease
 Interstitial pneumonia (nonspecific) (usual) in diseases classified elsewhere
 Organizing pneumonia due to collagen vascular disease
 Organizing pneumonia in diseases classified elsewhere
Code first underlying disease, such as:
 progressive systemic sclerosis (M34.0)
 rheumatoid arthritis (M05.00-M06.9)
 systemic lupus erythematosus (M32.0-M32.9)

J84.170 Interstitial lung disease with progressive fibrotic phenotype in diseases classified elsewhere
 Progressive fibrotic interstitial lung disease 歸類於他處疾病所致之進行性間質性肺疾病伴有纖維化變性
Code first underlying disease, such as:
 lung diseases due to external agents (J60-J70)
 rheumatoid arthritis (M05.00-M06.9)
 sarcoidosis (D86)
 systemic connective tissue disorders (M30-M36)

J84.178 Other interstitial pulmonary diseases with fibrosis in diseases classified elsewhere
 Interstitial pneumonia (nonspecific) (usual) due to collagen vascular disease
 Interstitial pneumonia (nonspecific) (usual) in diseases classified elsewhere
 Organizing pneumonia due to collagen vascular disease
 Organizing pneumonia in diseases classified elsewhere
Code first underlying disease, such as:
 progressive systemic sclerosis (M34.0)
 rheumatoid arthritis (M05.00-M06.9)
 systemic lupus erythematosus (M32.0-M32.9)

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新增疾病代碼_Transfusion-associated dyspnea (TAD)



2023 新增代碼

代碼	名稱
J95.87	Transfusion-associated dyspnea (TAD) 輸血相關呼吸困難

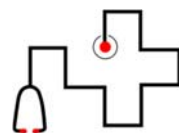
J95.87 Transfusion-associated dyspnea (TAD)

Excludes1: transfusion associated circulatory overload (TACO) (E87.71)
 transfusion-related acute lung injury (TRALI) (J95.84)

新增代碼 J95.87，輸血相關性呼吸困難 (TAD)，用於停止輸血 24 小時內發生的急性呼吸窘迫。新增該代碼的原因是 TAD 不符合輸血循環超負荷 (TACO)、輸血相關急性肺損傷 (TRALI) 或輸血引起的過敏反應的定義。輸血相關肺部事件 (TAD、TACO 和 TRALI) 佔輸血相關的不良事件：嚴重反應的 35% 和死亡的 65%。TAD 可能是由紅血球、血小板或血漿輸注引起的，據報導是繼發於 COVID-19 恢復期血漿輸注的不良反應。



新增疾病代碼_Mediastinitis



2014		2023 新增細碼	
代碼	名稱	代碼	名稱
J98.5	Diseases of mediastinum, not elsewhere classified Fibrosis of mediastinum Hernia of mediastinum Retraction of mediastinum Mediastinitis	J98.51	Mediastinitis
		J98.59	Other diseases of mediastinum, not elsewhere classified

J98.5 Diseases of mediastinum, not elsewhere classified

Excludes2: abscess of mediastinum (J85.3)

J98.51 Mediastinitis

如果存在已知的潛在病症，先編潛在病症，例如術後縱隔炎 (T81.-)再附加 J98.51。

Code first underlying condition, if applicable, such as postoperative mediastinitis (T81.-)

J98.59 Other diseases of mediastinum, not elsewhere classified

Fibrosis of mediastinum
Hernia of mediastinum
Retraction of mediastinum

AHA Coding Clinic 2016,4Q,P29

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新增新興疾病代碼

➤ Zika virus 相關代碼

A92.5 Zika virus disease

Zika virus fever
Zika virus infection
Zika NOS

Excludes1: congenital Zika virus disease (P35.4)

2014	2023
A92.8 Other specified mosquito-borne viral fevers	A92.5 Zika virus disease
P35.8 Other congenital viral diseases	P35.4 Congenital Zika virus disease
Z20.828 Contact with and (suspected) exposure to other viral communicable diseases	Z20.821 Contact with and (suspected) exposure to Zika virus

編碼原則

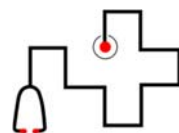
只可針對確診個案(Code only a confirmed)編 **A92.5** Zika virus disease

病歷書寫“**Suspected**”, “**Possible**” or “**Probable**” **Zika**，不可編A92.5代碼，只能編入院症狀（如發燒、皮疹或關節疼痛），或 **Z20.821** Contact with and (suspected) exposure to Zika virus

如果病歷紀錄表示病患曾有茲卡病毒感染病史編碼 **Z86.19** Personal history of other infectious and parasitic diseases

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新增新興疾病代碼



➤ Covid-19相關代碼

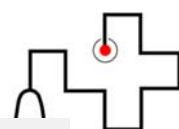
2014(目前健保公告使用)	2023
U07.1 COVID-19	U07.1 COVID-19
J12.89 Other viral pneumonia	J12.82 Pneumonia due to coronavirus disease 2019
U09.9 Post COVID-19 condition, unspecified	U09.9 Post COVID-19 condition, unspecified [2022]
Z20.822 Contact with and (suspected) exposure to COVID-19	Z20.822 Contact with and (suspected) exposure to COVID-19
Z86.16 Personal history of COVID-19	Z86.16 Personal history of COVID-19
Z11.52 Encounter for screening for COVID-19	Z11.52 Encounter for screening for COVID-19

J12.82 Pneumonia due to coronavirus disease 2019 [2021]
Pneumonia due to 2019 novel coronavirus (SARS-CoV-2)
Pneumonia due to COVID-19
Code first [2021] COVID-19 (U07.1)

U09.9 Post COVID-19 condition, unspecified [2022]
Code first [2022] the specific condition related to COVID-19 if known, such as:
chronic respiratory failure ([J96.1-](#))
loss of smell ([R43.8](#))
loss of taste ([R43.8](#))
multisystem inflammatory syndrome ([M35.81](#))
pulmonary embolism ([I26.-](#))
pulmonary fibrosis ([J84.10](#))

Multisystem Inflammatory Syndrome

多系統發炎症候群



M35.8 Other specified systemic involvement of connective tissue

M35.8 Other specified systemic involvement of connective tissue

M35.81 Multisystem inflammatory syndrome

MIS-A

MIS-C

Multisystem inflammatory syndrome in adults

Multisystem inflammatory syndrome in children

Pediatric inflammatory multisystem syndrome

PIMS

Code first, if applicable, COVID-19 ([U07.1](#))

Use additional code, if applicable, for:

exposure to COVID-19 or SARS-CoV-2 infection ([Z20.822](#))

personal history of COVID-19 ([Z86.16](#))

post COVID-19 condition ([U09.9](#))

Code also any associated complications such as:

acute hepatic failure ([K72.0-](#))

acute kidney failure ([N17.-](#))

acute myocarditis ([I40.-](#))

acute respiratory distress syndrome ([J80](#))

cardiac arrhythmia ([I47-I49.-](#))

pneumonia due to COVID-19 ([J12.82](#))

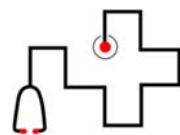
severe sepsis ([R65.2-](#))

viral cardiomyopathy ([B33.24](#))

viral pericarditis ([B33.23](#))

M35.89 Other specified systemic involvement of connective tissue

Multisystem Inflammatory Syndrome 多系統發炎症候群



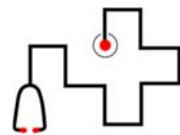
MIS 編碼注意事項:

1. MIS 與 COVID-19 同時存在：主要診斷為 U07.1 (COVID-19)，附加診斷 M35.81 (MIS)
2. MIS 因先前 COVID-19 感染引起：編碼 M35.81 和 U09.9 (Post COVID-19 condition)
3. 有 COVID-19 病史但未指明 MIS 與其相關：編碼 M35.81 和 Z86.16 (COVID-19 病史)
4. 接觸或疑似接觸 COVID-19，但當前沒有感染或 COVID-19 病史：編碼 M35.81 和 Z20.822 (接觸或疑似暴露於 COVID-19)
5. 對於 MIS 的任何相關併發症，需額外編碼



57

Ventilatory Assistance by High Flow or High Velocity Nasal Cannula Devices 高流量或高速度鼻導管裝置的通氣輔助



在 ICD-10-PCS table 5A0 中，新增了一個新的修飾值“A 高流量/速度鼻導管”。

Section				5 Extracorporeal or Systemic Assistance and Performance ▼			
Body System				A Physiological Systems ▼			
Operation				0 Assistance ▼ Taking over a portion of a physiological function by extracorporeal means			
Code Description 5A0 Extracorporeal or Systemic Assistance and Performance, Physiological Systems, Assistance							
Body System		Duration		Function		Qualifier	
<input type="radio"/> 2 Cardiac <input type="radio"/> 5 Circulatory <input checked="" type="radio"/> 9 Respiratory		<input type="radio"/> 1 Intermittent <input type="radio"/> 2 Continuous <input type="radio"/> 3 Less than 24 Consecutive Hours <input type="radio"/> 4 24-96 Consecutive Hours <input type="radio"/> 5 Greater than 96 Consecutive Hours		<input type="radio"/> 0 Filtration <input type="radio"/> 1 Output <input type="radio"/> 2 Oxygenation <input checked="" type="radio"/> 5 Ventilation		<input type="radio"/> 0 Balloon Pump <input type="radio"/> 1 Hyperbaric <input type="radio"/> 5 Pulsatile Compression <input type="radio"/> 6 Other Pump <input type="radio"/> 7 Continuous Positive Airway Pressure <input type="radio"/> 8 Intermittent Positive Airway Pressure <input type="radio"/> 9 Continuous Negative Airway Pressure <input checked="" type="radio"/> A High Nasal Flow/Velocity <input type="radio"/> B Intermittent Negative Airway Pressure	

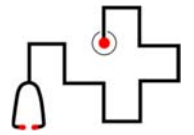
高鼻流量治療是一種呼吸支持方式，通過鼻導管輸送高流量氧氣，通常與壓縮空氣和加濕一起使用，它被認為是在呼吸器照護中侵入性較小的替代方案。

健保醫令碼：57030B/57031B 濕化高流量氧氣治療
(High Flow Nasal Cannula Oxygen Therapy, HFNC)



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Index 變更



2014年版

Disease, diseased --see also Syndrome
lung J98.4
obstructive (chronic) J44.9
with
emphysema J44.9



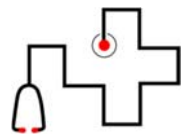
2023年版

Disease, diseased --see also Syndrome
lung J98.4
obstructive (chronic) J44.9
with
emphysema J43.9



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新增EXCLUDE1



B34.2 Coronavirus infection, unspecified

2014年版

Excludes1: pneumonia due to SARS-associated coronavirus (J12.81)



B34.2 Coronavirus infection, unspecified

2023年版

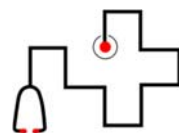
Excludes1: COVID-19 (U07.1)

pneumonia due to SARS-associated coronavirus (J12.81)



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新增EXCLUDE1及Code first note



2014年版

B97.4 Respiratory syncytial virus as the cause of diseases classified elsewhere



2023年版

B97.4 Respiratory syncytial virus as the cause of diseases classified elsewhere

RSV as the cause of diseases classified elsewhere

Code first related disorders, such as:

otitis media (H65.-)

upper respiratory infection (J06.9)

Excludes1: acute bronchiolitis due to respiratory syncytial virus (RSV) (J21.0)

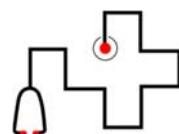
acute bronchitis due to respiratory syncytial virus (RSV) (J20.5)

respiratory syncytial virus (RSV) pneumonia (J12.1)



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EXCLUDE2異動



2014年版

B94.9 Sequelae of unspecified infectious and parasitic disease



2023年版

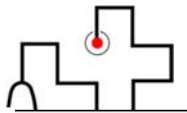
B94.9 Sequelae of unspecified infectious and parasitic disease

Excludes2: post COVID-19 condition (U09.9)



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Excludes1變 Excludes2



J43 Emphysema

2014年版

Use additional code to identify:

exposure to environmental tobacco smoke (Z77.22)
history of tobacco use (Z87.891)
occupational exposure to environmental tobacco smoke (Z57.31)
tobacco dependence (F17.-)
tobacco use (Z72.0)

Excludes1: compensatory emphysema (J98.3)

emphysema due to inhalation of chemicals, gases, fumes or vapors (J68.4)
emphysema with chronic (obstructive) bronchitis (J44.-)
emphysematous (obstructive) bronchitis (J44.-)
interstitial emphysema (J98.2)
mediastinal emphysema (J98.2)
neonatal interstitial emphysema (P25.0)
surgical (subcutaneous) emphysema (T81.82)
traumatic subcutaneous emphysema (T79.7)

J43 Emphysema

2023年版

Use additional code to identify:

exposure to environmental tobacco smoke (Z77.22)
history of tobacco dependence (Z87.891)
occupational exposure to environmental tobacco smoke (Z57.31)
tobacco dependence (F17.-)
tobacco use (Z72.0)

Excludes1: compensatory emphysema (J98.3)

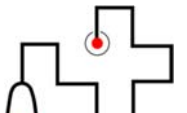
emphysema due to inhalation of chemicals, gases, fumes or vapors (J68.4)
emphysema with chronic (obstructive) bronchitis (J44.-)
emphysematous (obstructive) bronchitis (J44.-)
interstitial emphysema (J98.2)
mediastinal emphysema (J98.2)
neonatal interstitial emphysema (P25.0)
surgical (subcutaneous) emphysema (T81.82)

Excludes2: traumatic subcutaneous emphysema (T79.7)



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Excludes1變 Excludes2



2014年版

J44 Other chronic obstructive pulmonary disease

Excludes1: bronchiectasis (J47.-)

chronic bronchitis NOS (J42)
chronic simple and mucopurulent bronchitis (J41.-)
chronic tracheitis (J42)
chronic tracheobronchitis (J42)
emphysema without chronic bronchitis (J43.-)
lung diseases due to external agents (J60-J70)

2023年版

J44.9 Chronic obstructive pulmonary disease, unspecified

Chronic obstructive airway disease NOS
Chronic obstructive lung disease NOS

Excludes2: lung diseases due to external agents (J60-J70)

J45 Asthma

Excludes1: detergent asthma (J69.8)

eosinophilic asthma (J82)
lung diseases due to external agents (J60-J70)
miner's asthma (J60)
wheezing NOS (R06.2)
wood asthma (J67.8)

J45 Asthma

Excludes1 (*): detergent asthma (J69.8)

miner's asthma (J60)
wheezing NOS (R06.2)
wood asthma (J67.8)

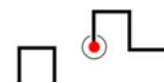
J45.909 Unspecified asthma, uncomplicated

Asthma NOS

Excludes2: lung diseases due to external agents (J60-J70)



Excludes1變 Excludes2



2023年版

2024年版

J44 Other chronic obstructive pulmonary disease

Includes: asthma with chronic obstructive pulmonary disease

chronic asthmatic (obstructive) bronchitis
chronic bronchitis with airway obstruction
chronic bronchitis with emphysema
chronic emphysematous bronchitis
chronic obstructive asthma
chronic obstructive bronchitis
chronic obstructive tracheobronchitis

Use additional code to identify:

exposure to environmental tobacco smoke (Z77.22)
history of tobacco dependence (Z87.891)
occupational exposure to environmental tobacco smoke (Z57.31)
tobacco dependence (F17.-)
tobacco use (Z72.0)

Code also type of asthma, if applicable (J45.-)

Excludes1: bronchiectasis (J47.-)

chronic bronchitis NOS (J42)
chronic simple and mucopurulent bronchitis (J41.-)
chronic tracheitis (J42)
chronic tracheobronchitis (J42)
emphysema without chronic bronchitis (J43.-)

J44 Other chronic obstructive pulmonary disease

Includes: asthma with chronic obstructive pulmonary disease

chronic asthmatic (obstructive) bronchitis
chronic bronchitis with airway obstruction
chronic bronchitis with emphysema
chronic emphysematous bronchitis
chronic obstructive asthma
chronic obstructive bronchitis
chronic obstructive tracheobronchitis

Code also type of asthma, if applicable (J45.-)

Excludes1 (*): chronic bronchitis NOS (J42)

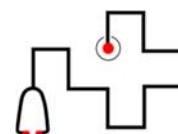
chronic simple and mucopurulent bronchitis (J41.-)
chronic tracheitis (J42)
chronic tracheobronchitis (J42)

Excludes2 [2024]: bronchiectasis (J47.-)

emphysema without chronic bronchitis (J43.-)

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Emphysema/Bronchiectasis and COPD



Question:

In previous issues of Coding Clinic (Fourth Quarter 2017 and First Quarter 2019), it was advised to report only code J43.9, Emphysema, unspecified, for a patient with both chronic obstructive pulmonary disease (COPD) and emphysema because emphysema is a specific form of COPD. This Coding Clinic advice further stated that it was not appropriate to report codes from both categories J43, Emphysema, and J44, Other chronic obstructive pulmonary disease, because of the Excludes1 notes at both categories.

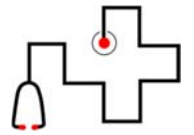
Effective with the October 1, 2023, updates, the Excludes1 notes found at categories J43 and J44 were changed to Excludes2 notes, which now appears to allow the reporting of codes from both categories, when appropriate. However, when referencing “Disease, lung, obstructive (chronic), with emphysema,” only code J43.9 is provided. Do these Excludes note changes allow the reporting of COPD separately in a patient with emphysema? Please clarify the proper code assignment for COPD in a patient with emphysema.

Coding Clinic 2017年第4季和2019年第1季中，說明因為肺氣腫是COPD的一種具體形式，建議對於同時患有COPD和肺氣腫的患者僅申報代碼J43.9肺氣腫。該Coding Clinic建議，因為這兩個類目碼互為Excludes1，故不應同時申報J43肺氣腫和J44的類目碼。隨著2023年10月1日的更新，J43和J44類目碼中的Excludes1已更改為Excludes2，這似乎允許在適當的情況下同時申報來自這兩個類目碼。但，在查詢“Disease, lung, obstructive (chronic), with emphysema,”時，僅查找到代碼J43.9。這些Excludes註解的變更是否允許在肺氣腫患者中另外申報COPD？請澄清在患有肺氣腫的患者中COPD的正確代碼。



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Emphysema and COPD



Answer:

Assign only code J43.9, Emphysema, unspecified, for a patient with COPD and emphysema. No additional code for COPD is assigned **unless it is further specified (i.e., with infection or with acute exacerbation)**. As stated in previous Coding Clinic guidance, emphysema is a form of COPD; therefore, it is not appropriate to assign code J44.9, Chronic obstructive pulmonary disease, **unspecified**, in addition to code J43.9.

Code J43.9 can be referenced in the Alphabetic Index as follows:

Disease, diseased
-lung
--obstructive (chronic)
---with
----emphysema J43.9

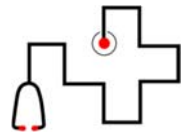
對於同時患有COPD和肺氣腫的患者，僅申報J43.9。除非進一步具體說明COPD的情況（例如，伴有感染或急性發作），否則不需另外編COPD的代碼。正如之前的Coding Clinic指導所述，肺氣腫是COPD的一種，因此不應額外報告代碼J44.9」。

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COPD, Pneumonia and Bronchiectasis



Question:

A patient was admitted due to bilateral pneumonia, COPD exacerbation, acute respiratory failure, and sepsis. The provider documented **bilateral pneumonia secondary to severe COPD with chronic bronchiectasis**. Is it appropriate to report codes for both COPD and bronchiectasis when both conditions meet reporting requirements? What is the correct code assignment for COPD exacerbation with pneumonia in a patient with chronic bronchiectasis? 當慢性阻塞性肺疾病（COPD）和支氣管擴張症同時符合申報規則時，是否可以同時編碼？在有慢性支氣管擴張症的患者中，COPD急性發作伴隨肺炎的正確編碼是什麼？

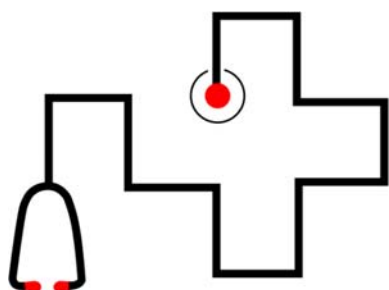
Answer:

- For COPD exacerbation with pneumonia and chronic bronchiectasis, the following codes should be reported: **J44.0, J44.1, and J47.9**.
- Additional codes** should be assigned to **specify pneumonia, acute respiratory failure, and sepsis** as applicable.
- If COPD is **not further specified (J44.9)**, only bronchiectasis (J47.-) should be reported.
- COPD 惡化併發肺炎且有慢性支氣管擴張症時，應申報 J44.0、J44.1 和 J47.9 代碼。
- 需加編其他代碼來詳細說明肺炎、急性呼吸衰竭和敗血症。
- 如果 COPD沒有進一步說明其型態或具體病況，則僅申報支氣管擴張症 (J47.-)。

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感謝聆聽 敬請指教

