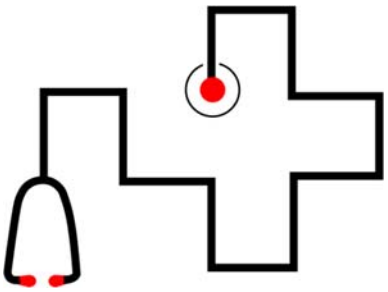
# ICD-10-CM/PCS轉版異動概述_外科(Ⅰ)

## (一般外科、直腸外科、小兒外科、乳房外科、整形外科)

張琳惠委員



## 一般外科

# 一般外科大綱

## ■ I-10轉版後代碼差異概述

➢ 診斷

- Gastric intestinal metaplasia
  胃部的腸化生
- Gastrointestinal Stromal Tumor
  胃腸道間質瘤
- Acute appendicitis
  急性闌尾炎
- Acute vascular disorders of intestine
  急性腸血管性疾患
- Necrotizing enterocolitis
  壞死性腸炎
- Intestinal obstruction
  腸阻塞
- Hepatic failure
  肝衰竭
- Hepatic fibrosis
  肝纖維化
- Hepatic encephalopathy
  肝性腦病變
- Gangrene and perforation of gallbladder in cholecystitis
  膽囊炎所致之膽囊壞疽和穿孔



# K31.A-_Gastric intestinal metaplasia

| 2023 新增疾病代碼 | | | | | |
|---|---|---|---|---|---|
| 類目碼 | 名稱 | 第5位碼 | 有無分化不良 | 第6位碼 | 侵犯部位或程度 |
| K31.A | Gastric intestinal metaplasia<br>胃部的腸化生 | 0 | unspecified | | |
| ➢ GIM「腸化」是指本來正常胃黏膜因慢性發炎而轉變成類似腸細胞的形態。<br>➢ 「腸化」發生與年齡、幽門螺旋桿菌感染、吸煙、高鹽及煙熏食品有關。<br>➢ GIM 是一種癌前病變。 | | 1 | without dysplasia<br>注意侵犯的位置 | 1 | involving the antrum |
| | | | | 2 | involving the body (corpus) |
| | | | | 3 | involving the fundus |
| | | | | 4 | involving the cardia |
| | | | | 5 | involving multiple sites |
| | | | | 9 | unspecified site |
| | | 2 | with dysplasia<br>注意分化不良程度 | 1 | low grade dysplasia |
| | | | | 2 | high grade dysplasia |
| | | | | 9 | Unspecified |

AHA Coding Clinic 2021,Q4,P15-16

# C49.A_Gastrointestinal Stromal Tumor新增並區分細部位

- 胃腸道間質瘤(Gastrointestinal Stromal Tumor)為胃腸道最常見的「非上皮」的腫瘤。
- 依據2019年出版WHO Classification of Tumors 第5版Digestive System Tumors，近期經諮詢台灣病理學會專家後，確認GIST自110年第一季起，所有診斷年個案均視為惡性申報。

C.C.診斷

| 2023 | CM英文名稱 |
|---|---|
| C49.A0 | Gastrointestinal stromal tumor, unspecified site |
| C49.A1 | Gastrointestinal stromal tumor of esophagus |
| C49.A2 | Gastrointestinal stromal tumor of stomach |
| C49.A3 | Gastrointestinal stromal tumor of small intestine |
| C49.A4 | Gastrointestinal stromal tumor of large intestine |
| C49.A5 | Gastrointestinal stromal tumor of rectum |
| C49.A9 | Gastrointestinal stromal tumor of other sites |



# K35.-_Acute appendicitis

AHA Coding Clinic 2018,Q4,P17-18

| 2014 | | 2023_新增併發症 | |
|---|---|---|---|
| 代碼 | 名稱 | 第5位碼 | 疾病嚴重度 |
| K35.2 | Acute appendicitis with generalized peritonitis<br>Ruptured appendix NOS | 0 | without abscess |
| | | 1 | with abscess |
| K35.3 | Acute appendicitis with localized Peritonitis<br>Acute appendicitis with peritoneal abscess | 0 | without perforation or gangrene |
| | | 1 | and gangrene, without perforation |
| | | 2 | with perforation and gangrene, without abscess |
| | | 3 | with perforation and gangrene, with abscess |
| 代碼 | 名稱 | 第6位碼 | 2023_新增併發症 |
| K35.89 | Other acute appendicitis | 0 | without perforation or gangrene |
| | | 1 | without perforation, with gangrene |

**K35.32 Acute appendicitis with perforation, localized peritonitis, and gangrene, without abscess**
(Acute) appendicitis with perforation NOS
Perforated appendix NOS
Ruptured appendix (with localized peritonitis) NOS

**K35.33 Acute appendicitis with perforation, localized peritonitis, and gangrene, with abscess**
(Acute) appendicitis with (peritoneal) abscess NOS
Ruptured appendix with localized peritonitis and abscess

# Appendicitis with perforation and gangrene案例

| | |
|---|---|
| 問題 | An 11-year-old patient is admitted with abdominal pain and vomiting due to acute appendicitis. During laparoscopic appendectomy, purulent fluid was found in the pelvis and the appendix appeared gangrenous with an area of necrosis and perforation. What is the diagnosis code assignment for appendicitis with gangrenous perforation? |
| 回答 | Assign only code K35.32 Acute appendicitis with perforation and localized peritonitis, without abscess.<br>闌尾炎有可能只有壞死而沒有穿孔，但有穿孔一定有壞死。<br>闌尾炎穿孔包含壞疽，故不需分開編碼。 |

不能依據手術發現有Purulent fluid就編Abscess
需醫師明確診斷

急性闌尾炎併腹膜炎沒有明示是局部還是廣泛性時，工具書預設為局部性腹膜炎合併膿瘍K35.33。

**Appendicitis (pneumococcal) (retrocecal) K37**
- with
- - gangrene K35.891
- - - with localized peritonitis K35.31
- - perforation NOS K35.32
- - peritoneal abscess K35.33

with優先參考

- acute (catarrhal) (fulminating) (obstructive) (retrocecal) (suppurative) K35.80
- - with
- - - gangrene K35.891
- - - peritoneal abscess K35.33
- - - peritonitis NEC K35.33
- - - - generalized (with perforation or rupture) K35.20
- - - - - with abscess K35.21
- - - - localized K35.30
- - - - - with
- - - - - - gangrene K35.31
- - - - - - perforation K35.32
- - - - - - - and abscess K35.33

AHA Coding Clinic 2020,Q1,P16



# K55.0-_Acute vascular disorders of intestine

| 2014 | | C.C.診斷 2023_新增部位、疾病嚴重度 | | | |
|---|---|---|---|---|---|
| 代碼 | 名稱 | 第5位碼 | 部位及嚴重度 | 第6位碼 | 侵犯範圍 |
| K55.0 | Acute vascular disorders of intestine<br><br>Acute fulminant ischemic colitis<br>Acute intestinal infarction<br>Acute small intestine ischemia<br>Infarction of appendices epiploicae<br>Mesenteric (artery) (vein) embolism<br>Mesenteric (artery) (vein) infarction<br>Mesenteric (artery) (vein) thrombosis<br>Necrosis of intestine<br>Subacute ischemic colitis | 1 | Acute (reversible) ischemia of small intestine | 1 | Focal (segmental) |
| | | 2 | Acute infarction of small Intestine | 2 | Diffuse |
| | | 3 | Acute (reversible) ischemia of large intestine | 9 | extent unspecified |
| | | 4 | Acute infarction of large intestine | ➢ 以第5碼表示大腸或小腸其缺血程度為可逆(缺血性)或不可逆(梗塞性)<br>➢ 以第6碼表示侵犯的範圍是局部性或瀰漫性 | |
| | | 5 | Acute (reversible) ischemia of intestine, part unspecified | | |
| | | 6 | Acute infarction of intestine, part unspecified | | |

➢ 急性腸血管性疾患，注意部位、缺血/梗塞、範圍

AHA Coding Clinic 2016,Q4,P32

# K55.0-_Mesenteric vein thrombosis

**2023年版**

**Thrombosis, thrombotic (bland) (multiple) (progressive) (silent) (vessel) I82.90**
- mesenteric (artery) (with gangrene) -see also Infarct, intestine K55.069
- - vein (inferior) (superior) K55.0-

**K55 Vascular disorders of intestine**

Excludes1: necrotizing enterocolitis of newborn (P77.-)

**K55.0 Acute vascular disorders of intestine**

Infarction of appendices epiploicae
Mesenteric (artery) (vein) embolism
Mesenteric (artery) (vein) infarction
Mesenteric (artery) (vein) thrombosis

急性腸血管性疾患包含
腸系膜動、靜脈的血栓、梗塞或栓塞

**K55.03 Acute (reversible) ischemia of large intestine**

Acute fulminant ischemic colitis
Subacute ischemic colitis

**K55.031 Focal (segmental) acute (reversible) ischemia of large intestine**
**K55.032 Diffuse acute (reversible) ischemia of large intestine**
**K55.039 Acute (reversible) ischemia of large intestine, extent unspecified**



# Mesenteric vein thrombosis案例

| | |
|---|---|
| 問題 | The patient was diagnosed with **acute ischemia of the ascending colon** due to **mesenteric vein thrombosis**, which was attributed to Antithrombin III deficiency. The Index to Diseases references code **I81, Portal vein, under Thrombosis, mesenteric, vein**. However, mesenteric thrombosis are inclusion terms under subcategory **K55.0-, Acute vascular disorders of intestine**. What is the appropriate code assignment for **mesenteric vein thrombosis**?<br>腸系膜靜脈血栓形成導致升結腸急性缺血 |
| 回答 | **K55.039 Acute (reversible) ischemia of large intestine, extent unspecified**, for mesenteric vein thrombosis, as the provider did not document focal or diffuse.<br>依據醫師診斷編碼，需明示局部或瀰漫性，**不能依據侵犯部位或手術切除的範圍自行認定**。 |

**2014年版**

**Thrombosis, thrombotic (bland) (multiple) (progressive) (silent) (vessel) I82.90**
- mesenteric (artery) (with gangrene) K55.0
- - vein (inferior) (superior) I81

**2023年版**

**Thrombosis, thrombotic (bland) (multiple) (progressive) (silent) (vessel) I82.90**
- mesenteric (artery) (with gangrene) --see also Infarct, intestine K55.069
- - vein (inferior) (superior) K55.0-

AHA Coding Clinic 2019,Q4,P68

# K55.3- Necrotizing enterocolitis-1

| 2014 | | C.C.診斷 2023_新增疾病代碼 | |
|---|---|---|---|
| 類目碼 | 名稱 | 代碼 | 名稱 |
| K55.- | Vascular disorders of intestine | K55.30 | Necrotizing enterocolitis, unspecified |
| 壞死性腸炎是一種嚴重疾病，當炎症、感染或缺血等損傷導致腸道壞死時，就會發生這種情況。 壞死可能侵犯腸壁或整個腸層。 雖然壞死性腸炎最常見於低出生體重的早產兒，但這種情況也可能發生在足月兒和非新生兒中。<br>對應2014年版K55.8 Other vascular disorders of intestine | | K55.31 | Stage 1 necrotizing enterocolitis |
| | | K55.32 | Stage 2 necrotizing enterocolitis<br>Necrotizing enterocolitis with pneumatosis, without perforation |
| | | K55.33 | Stage 3 necrotizing enterocolitis<br>Necrotizing enterocolitis with perforation |

成人壞死性腸炎的病因尚不清楚， 感染、炎症和缺血是常見的可能原因。
第一期出現非特異性臨床和放射學表徵。 患者可能出現腹脹，並伴有腸環增厚和擴張。
第二期有血便、腸阻塞、代謝性酸中毒和腸積氣。
第三期的表現是低血壓、低鈉血症、呼吸困難、彌散性血管內凝血和偶發的腹膜炎。

AHA Coding Clinic 2016,Q4,P32



# K55.3- Necrotizing enterocolitis-2

| 版本 | 2014 | | 2023 | |
|---|---|---|---|---|
| 對象 | NB除外 | NB | NB除外 | NB |
| 類目碼 | K55.-<br>Vascular disorders of intestine | P77.-<br>Necrotizing enterocolitis of newborn | K55.3-<br>Necrotizing enterocolitis | P77.-<br>Necrotizing enterocolitis of newborn |
| MDC | 6<br>消化系統之疾病與疾患 | 15<br>新生兒與其他源於週產期病態之新生兒 | 6<br>消化系統之疾病與疾患 | 15<br>新生兒與其他源於週產期病態之新生兒 |
| 工具書註解 | **K55 Vascular disorders of intestine**<br>**Excludes1:** necrotizing enterocolitis of newborn (P77.-) | | **K55.3 Necrotizing enterocolitis**<br>**Excludes1:** necrotizing enterocolitis of newborn (P77.-)<br>**Excludes2:** necrotizing enterocolitis due to Clostridium difficile (A04.7-) | |
| 病歷書寫 | 1.書寫Necrotizing enterocolitis的分期<br>2.是否有艱難梭菌 | | | |

**Enterocolitis** --see also Enteritis K52.9
necrotizing
due to Clostridium difficile A04.7

**Enterocolitis** --see also Enteritis K52.9
necrotizing K55.30
with
perforation K55.33
pneumatosis K55.32
and perforation K55.33
due to Clostridium difficile
not specified as recurrent A04.72
recurrent A04.71

# 2023年ICD-10改版對DRG造成的影響-單一診斷

| 版本 | 2014年 | | 2023年 | |
|---|---|---|---|---|
| 診斷/代碼/DRG | ICD-10-CM | DRG/RW | ICD-10-CM | DRG/RW |
| Necrotizing enterocolitis | K55.8 | DRG 18905<br>其他消化系統診斷(5)，年齡大於等於18歲，無合併症或併發症<br>RW 0.3660<br><br>DRG 19010<br>其他消化系統診斷(5)，年齡0-17歲，無合併症或併發症<br>RW 0.3760 | K55.30 | DRG 18905<br>其他消化系統診斷(5)，年齡大於等於18歲，無合併症或併發症<br>RW 0.3660<br><br>DRG 19010<br>其他消化系統診斷(5)，年齡0-17歲，無合併症或併發症<br>RW 0.3760 |



# 2023年ICD-10改版對DRG造成的影響-多個診斷

| 版本 | 2014年 | | 2023年 | |
|---|---|---|---|---|
| 診斷/代碼/DRG | ICD-10-CM | DRG/RW | ICD-10-CM | DRG/RW |
| Necrotizing entero-colitis<br>necrotizing entero-colitis due to Clostri-dium difficile | A04.7 | DRG183<br>食道炎、胃腸炎及各種消化性疾病，年齡大於等於18歲，無合併症或併發症<br>RW 0.2971<br><br>DRG 18402<br>食道炎、胃腸炎及各種消化性疾病，年齡0-17歲，無合併症或併發症<br>RW 0.2551 | K55.30(主診)<br>A04.72 | DRG 18905<br>其他消化系統診斷(5)，年齡大於等於18歲，無合併症或併發症<br>RW 0.3660<br><br>DRG 19010<br>其他消化系統診斷(5)，年齡0-17歲，無合併症或併發症<br>RW 0.3760 |
| 2023新增Excludes 2, K55.3與A04.7可同時編碼<br>可依病人的入院情況，選取主診<br><br>**K55.3 Necrotizing enterocolitis**<br>**Excludes1:** necrotizing enterocolitis of newborn (P77.-)<br>**Excludes2:** necrotizing enterocolitis due to Clostridium difficile (A04.7-) | | | A04.72(主診)<br>K55.30 | DRG 182<br>食道炎、胃腸炎及各種消化性疾病，年齡大於等於18歲，有合併症或併發症<br>RW 0.4662<br><br>DRG 18401<br>食道炎、胃腸炎及各種消化性疾病，0-17歲，有合併症或併發症<br>RW 0.3527 |

# Intestinal obstruction

AHA Coding Clinic 2017,Q4,P16-17

| 2014 | | C.C.診斷 2023_新增疾病嚴重度 | |
|---|---|---|---|
| 代碼 | 名稱 | 第5位碼 | 阻塞程度 |
| K56.5 | Intestinal adhesions [bands] with obstruction (postprocedural) (postinfection) | 0 | unspecified as to partial versus complete obstruction |
| K91.3 | Postprocedural intestinal obstruction | 1 | with partial obstruction |
| | | 2 | with complete obstruction |
| 代碼 | 名稱 | 第6位碼 | 阻塞程度 |
| K56.60 | Unspecified intestinal obstruction | 0 | Partial intestinal obstruction |
| K56.69 | Other intestinal obstruction | 1 | Complete intestinal obstruction |
| ➢ 腸阻塞的嚴重程度不同，從部分或間歇性阻塞到完全阻塞。<br>➢ 醫師需描述腸阻塞部分性與完全性。<br>➢ 完全阻塞可能導致腸壞疽和穿孔，通常需要手術。 | | 9 | unspecified as to partial versus complete obstruction |

➢ 腸阻塞，注意是部分或完全阻塞



# K72.- Hepatic failure, NEC

**2023年版** 工具書註解改變

**K72 Hepatic failure, not elsewhere classified** 肝衰竭，他處未歸類者 C.C.診斷

**Includes:** ~~acute hepatitis NEC, with hepatic failure~~
fulminant hepatitis NEC, with hepatic failure
~~hepatic encephalopathy NOS~~
liver (cell) necrosis with hepatic failure
malignant hepatitis NEC, with hepatic failure
yellow liver atrophy or dystrophy

**Excludes1:** alcoholic hepatic failure (K70.4)
hepatic failure with toxic liver disease (K71.1-)
icterus of newborn (P55-P59)
postprocedural hepatic failure (K91.82)
~~viral hepatitis with hepatic coma (B15-B19)~~

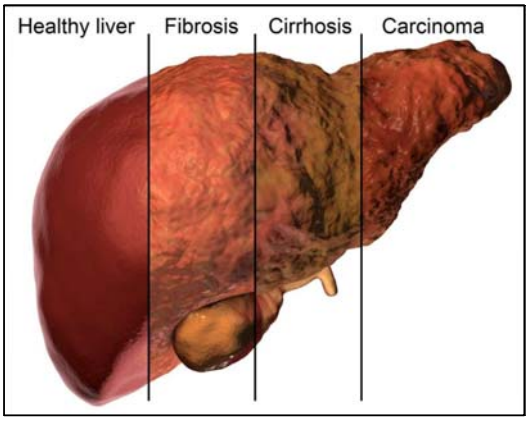
**Excludes2:** hepatic failure complicating abortion or ectopic or molar pregnancy (O00-O07, O08.8)
hepatic failure complicating pregnancy, childbirth and the puerperium (O26.6-)
**viral hepatitis with hepatic coma (B15-B19)**

刪除Includes：
acute hepatitis NEC, with hepatic failure
hepatic encephalopathy NOS
Excludes 1更改為Excludes 2
viral hepatitis with hepatic coma (B15-B19)

# K74.0- Hepatic Fibrosis

**2014年版**

**K74.0 Hepatic fibrosis**




AHA Coding Clinic 2020,Q4,P30-31

**2023年版** 疾病嚴重度細分

**K74.0 Hepatic fibrosis**

**Code first** underlying liver disease, such as:
nonalcoholic steatohepatitis (NASH) (K75.81)

**K74.00 Hepatic fibrosis, unspecified**

**K74.01 Hepatic fibrosis, early fibrosis**
Hepatic fibrosis, stage F1 or stage F2

**K74.02 Hepatic fibrosis, advanced fibrosis**
Hepatic fibrosis, stage F3

**Excludes1:** cirrhosis of liver (K74.6-)
hepatic fibrosis, stage F4 (K74.6-)

當診斷有晚期肝纖維化時(K74.02) 和肝硬化，只需編 K74.60，未明示的肝硬化。



# K76.82 Hepatic encephalopathy

**K76.82 Hepatic encephalopathy** 新增疾病代碼

Hepatic encephalopathy, NOS
Hepatic encephalopathy without coma
Hepatocerebral intoxication
Portal-systemic encephalopathy

用於肝性腦病變未合併昏迷
- 可附加肝衰竭或病毒性肝炎未合併昏迷
- 若合併昏迷應歸類至肝衰竭合併昏迷

**Code also** underlying liver disease, such as:
acute and subacute hepatic failure without coma (K72.00)
alcoholic hepatic failure without coma (K70.40)
chronic hepatic failure without coma (K72.10)
hepatic failure with toxic liver disease without coma (K71.10)
hepatic failure without coma (K72.90)
icterus of newborn (P55-P59)
postprocedural hepatic failure (K91.82)
viral hepatitis without hepatic coma (B15.9, B16.1, B16.9, B17.10, B19.10, B19.20, B19.9)

Hepatic encephalopathy ≠ Hepatic coma

**Excludes1:** acute and subacute hepatic failure with coma (K72.01)
alcoholic hepatic failure with coma (K70.41)
chronic hepatic failure with coma (K72.11)
hepatic failure with coma (K72.91)

# Hepatitis C and Hepatic encephalopathy案例

| | |
|---|---|
| 問題 | The patient is admitted with chronic hepatitis C and hepatic encephalopathy. What are the diagnosis code assignments for these conditions? |
| 回答 | Assign code B18.2 Chronic viral hepatitis C, and code K72.10 Chronic hepatic failure without coma.<br>2023版B18.2 Chronic viral hepatitis C,K76.82 Hepatic encephalopathy<br>Sequencing of these conditions would depend on the circumstances of the admission.主診斷依據入院原因選取 |

**2014年版**

Encephalopathy (acute) G93.40
- hepatic —see Failure, hepatic

**2023年版**

Encephalopathy (acute) G93.40
- hepatic (without coma) K76.82

AHA Coding Clinic 2017,Q1,P41



# K82.A- Gangrene and Perforation of Gallbladder in Cholecystitis

**K82.A Disorders of gallbladder in diseases classified elsewhere**
**Code first** the type of cholecystitis (K81.-), or cholelithiasis with cholecystitis (K80.00-K80.19, K80.40-K80.47, K80.60-K80.67)
**K82.A1 Gangrene of gallbladder in cholecystitis**
C.C.診斷 **K82.A2 Perforation of gallbladder in cholecystitis**

**2023年版**

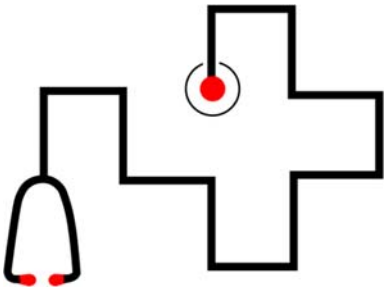
- 膽管長期阻塞或膽囊內膽汁淤積會導致膽囊炎。
- 膽囊炎的嚴重程度可從輕度到嚴重，嚴重發炎會導致組織壞死，最終導致膽囊穿孔。
- 當膽囊炎合併有壞死或穿孔應附加K82.A1或K82.A2

**K81 Cholecystitis**
**Use additional code** for asif applicable sociated gangrene of gallbladder **(K82.A1),** or perforation of gallbladder **(K82.A2)**
**Excludes1:** cholecystitis with cholelithiasis (K80.-)

**2023年版工具書增加註解**

**K80.4 Calculus of bile duct with cholecystitis**
Any condition listed in K80.5 with cholecystitis (with cholangitis)
**Code also** fistula of bile duct (K83.3)
**Use additional code** if applicable for associated gangrene of gallbladder **(K82.A1),** or perforation of gallbladder **(K82.A2)**

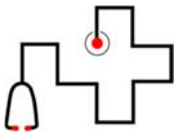
AHA Coding Clinic 2018,Q4,P19-20



# 直腸外科



# 直腸外科大綱



## ■I-10轉版後代碼差異概述

- ➢ 診斷
  - Indeterminate colitis
    不確定性結腸炎
  - Diverticular disease of intestine
    腸憩室性疾病
  - Irritable bowel syndrome
    激躁性腸症候群
  - Megacolon
    巨結腸症
  - Ogilvie syndrome
    Ogilvie氏症候群
  - Abscess of anal and rectal regionas
    肛門及直腸部位膿瘍

# K52.3_Indeterminate colitis

**K52.3 Indeterminate colitis** 新增疾病代碼

Colonic inflammatory bowel disease unclassified (IBDU)

**Excludes1: unspecified colitis (K52.9)**

- 不確定性結腸炎是指伴有結腸炎的發炎性腸道疾病，經大腸鏡檢查、結腸活檢或結腸切除術不能明確診斷為克隆氏症或潰瘍性結腸炎。
- 不確定性結腸炎的另一個術語是未分類的結腸發炎性腸道疾病 (IBDU)。
- 治療與潰瘍性結腸炎的治療類似。

AHA Coding Clinic 2016,Q4,P31



# K57.- Diverticular disease of intestine

**2014年版**

**K57 Diverticular disease of intestine**
**Excludes1:** congenital diverticulum of intestine (Q43.8)
Meckel's diverticulum (Q43.0)
**Excludes2:** diverticulum of appendix (K38.2)

**K57.2 Diverticulitis of large intestine with perforation and abscess**
Diverticulitis of colon with peritonitis
**Excludes1:** diverticulitis of both small and large intestine with perforation and abscess (K57.4-)

工具書註解改變

K57.- 新增Code also if applicable peritonitis K65.-
K57.0-、K57.2-、K57.4-、K57.8-刪除包含術語....with peritonitis
K65.- 新增Code also if applicable diverticular disease of intestine (K57.-)
刪除**Excludes1**
diverticulitis of both small and large intestine with peritonitis (K57.4-)
diverticulitis of colon with peritonitis (K57.2-)
diverticulitis of intestine, NOS, with peritonitis (K57.8-)
diverticulitis of small intestine with peritonitis (K57.0-)

**2023年版**

**K57 Diverticular disease of intestine**
**Code also** if applicable **peritonitis K65.-**
**Excludes1:** congenital diverticulum of intestine (Q43.8)
Meckel's diverticulum (Q43.0)
**Excludes2:** diverticulum of appendix (K38.2)

若同時有腹膜炎也可編碼

AHA Coding Clinic 2022,Q1,P26-27

# Diverticulitis 案例

| | | |
|---|---|---|
| 問題1 | When a patient is admitted with diverticulitis of the colon and an intra-abdominal abscess, is code K65.1, Peritoneal abscess, assigned along with code K57.20, Diverticulitis of large intestine with perforation and abscess without bleeding? | K57.20 Diverticulitis of large intestine with perforation and abscess without bleeding,<br>K65.1 Peritoneal abscess, to further specify the location of the abscess. |
| 問題2 | A patient is admitted with peritonitis likely secondary to perforated sigmoid diverticulitis. Is code K65.9, Peritonitis, unspecified,assigned with code K57.20, Diverticulitis of large intestine with perforation and abscess without bleeding? | K57.20 Diverticulitis of large intestine with perforation and abscess without bleeding, followed by<br>K65.9 Peritonitis, unspecified |

**K65 Peritonitis**

**Use additional** code (B95-B97), to identify infectious agent, if known

**Code also** if applicable diverticular disease of intestine (K57.-)

K57.- 若同時有腹膜炎也可編碼

AHA Coding Clinic,2022,Q1,P26-27



# Diverticulitis –合併症併發症主診斷(附表7.1.4.2)

| | |
|---|---|
| K5700 | Diverticulitis of small intestine with perforation and abscess without bleeding |
| K5701 | Diverticulitis of small intestine with perforation and abscess with bleeding |
| K5720 | Diverticulitis of large intestine with perforation and abscess without bleeding |
| K5721 | Diverticulitis of large intestine with perforation and abscess with bleeding |
| K5740 | Diverticulitis of both small and large intestine with perforation and abscess without bleeding |
| K5741 | Diverticulitis of both small and large intestine with perforation and abscess with bleeding |
| K5752 | Diverticulitis of both small and large intestine without perforation or abscess without bleeding |
| K5780 | Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding |
| K5781 | Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding |

# Diverticulitis –合併症併發症(附表7.1.4)

| 次診斷代碼 | 主診斷代碼排除組別 | 次診斷英文名稱 |
|---|---|---|
| K5700 | 0793 | Diverticulitis of small intestine with perforation and abscess without bleeding |
| K5701 | 0770 | Diverticulitis of small intestine with perforation and abscess with bleeding |
| K5711 | 0770 | Diverticulosis of small intestine without perforation or abscess with bleeding |
| K5712 | 0793 | Diverticulitis of small intestine without perforation or abscess without bleeding |
| K5713 | 0770 | Diverticulitis of small intestine without perforation or abscess with bleeding |
| K5720 | 0794 | Diverticulitis of large intestine with perforation and abscess without bleeding |
| K5721 | 0770 | Diverticulitis of large intestine with perforation and abscess with bleeding |
| K5731 | 0770 | Diverticulosis of large intestine without perforation or abscess with bleeding |
| K5732 | 0794 | Diverticulitis of large intestine without perforation or abscess without bleeding |
| K5733 | 0770 | Diverticulitis of large intestine without perforation or abscess with bleeding |
| K5740 | 0794 | Diverticulitis of both small and large intestine with perforation and abscess without bleeding |
| K5741 | 0770 | Diverticulitis of both small and large intestine with perforation and abscess with bleeding |
| K5751 | 0770 | Diverticulosis of both small and large intestine without perforation or abscess with bleeding |
| K5752 | 0794 | Diverticulitis of both small and large intestine without perforation or abscess without bleeding |
| K5753 | 0770 | Diverticulitis of both small and large intestine without perforation or abscess with bleeding |
| K5780 | 0794 | Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding |
| K5781 | 0770 | Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding |
| K5791 | 0770 | Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding |
| K5792 | 0794 | Diverticulitis of intestine, part unspecified, without perforation or abscess without bleeding |
| K5793 | 0770 | Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding |



# K58.-_Irritable bowel syndrome

**2014年版**

**K58 Irritable bowel syndrome**

**Includes:** irritable colon
spastic colon

**K58.0 Irritable bowel syndrome with diarrhea**

**K58.9 Irritable bowel syndrome without diarrhea**
Irritable bowel syndrome NOS

**IBS激躁性腸症候群的類型和症狀決定治療方法，藥物可以減少便秘和腹瀉。**

**2023年版** 疾病型態細分

**K58 Irritable bowel syndrome**

**Includes:** irritable colon
spastic colon

**K58.0 Irritable bowel syndrome with diarrhea**

**K58.1 Irritable bowel syndrome with constipation**

**K58.2 Mixed irritable bowel syndrome**

**K58.8 Other irritable bowel syndrome**

**K58.9 Irritable bowel syndrome without diarrhea**
Irritable bowel syndrome NOS

AHA Coding Clinic 2016,Q4,P33

# K59.3-_Megacolon

AHA Coding Clinic 2016,Q4,P33

**2014年版**

**K59.3 Megacolon, not elsewhere classified**
Dilatation of colon
Toxic megacolon
**Code first** (T51-T65) to identify toxic agent
**Excludes1:** congenital megacolon (aganglionic) (Q43.1)
megacolon (due to) (in) Chagas' disease (B57.32)
megacolon (due to) (in) Clostridium difficile (A04.7)
megacolon (due to) (in) Hirschsprung's disease (Q43.1)

- 毒性巨結腸症的定義是在X光下可發現大腸脹大到直徑超過6公分以上，合併全身性的毒性症狀。
- 此病在西方國家主要由發炎性腸道疾病如潰瘍性結腸炎或克隆氏症引起。台灣則多以沙門氏菌腸炎或止瀉藥物濫用造成。
- 快速擴大可能會導致腹痛和壓痛、發燒、結腸穿孔、心率加快、休克和敗血症。

C.C.診斷

**2023年版**

**K59.3 Megacolon, not elsewhere classified**
Dilatation of colon

**Code first**, if applicable (T51-T65) to identify toxic agent

**Excludes1:** congenital megacolon (aganglionic) (Q43.1)
megacolon (due to) (in) Chagas' disease (B57.32)
megacolon (due to) (in) Clostridium difficile (A04.7-)
megacolon (due to) (in) Hirschsprung's disease (Q43.1)

**K59.31 Toxic megacolon**

**K59.39 Other megacolon**
Megacolon NOS

細分疾病型態

- 巨結腸症注意疾病型態
- 若因毒性物質造成，請注意物質名稱



# K59.81_Ogilvie syndrome

**2014年版**

**K59.8 Other specified functional intestinal disorders**
Atony of colon
Pseudo-obstruction (acute) (chronic) of intestine

**2023年版**

新增疾病代碼

**K59.8 Other specified functional intestinal disorders**

**K59.81 Ogilvie syndrome**
Acute colonic pseudo-obstruction (ACPO)

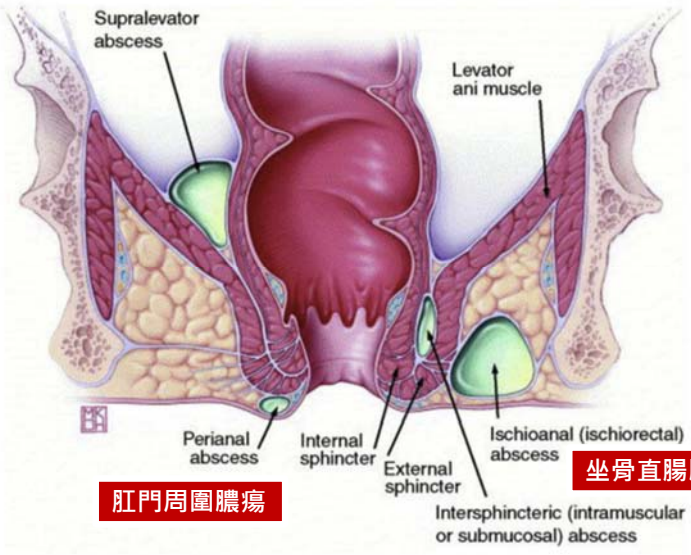
**K59.89 Other specified functional intestinal disorders**
Atony of colon
Pseudo-obstruction (acute) (chronic) of intestine

- 「奧格維氏症候群」(Ogilvie syndrome) 也稱為急性大腸阻塞(acute colonic ileus)和急性結腸假性阻塞 (ACPO)，是一種影響大腸的少見疾病。
- Ogilvie syndrome與慢性假性腸阻塞不同，是因神經或肌肉問題影響結腸蠕動所造成。
  - 症狀包括噁心、嘔吐、腹痛、腹瀉和便秘。
  - 結腸擴張可能危及生命，導致結腸穿孔和結腸血流不足。
  - 如果不治療，可能會導致營養不良、結腸細菌過度生長和體重減輕。

AHA Coding Clinic 2020,Q4,P29-30

# Abscess of anal and rectal regions

提肛肌上膿瘍




肛門周圍膿瘍

坐骨直腸膿瘍

括約肌內膿瘍

肛門和直腸區域的膿瘍根據解剖位置進行分類：
肛門周圍膿瘍：最常見
坐骨直腸膿瘍：第二常見，馬蹄形膿瘍是坐骨直腸膿瘍的一種特殊類型
括約肌間膿瘍：位於外括約肌和內括約肌之間
提肛肌上膿瘍：位於深入到真骨盆的提肛肌

AHA Coding Clinic 2018,Q4,P19

http://www.emdocs.net/anorectal-abscesses-ed-clinical-presentation-evaluation-and-management/



# K61.3- Ischiorectal abscess

**2014年版**

**K61 Abscess of anal and rectal regions**
**Includes:** abscess of anal and rectal regions
cellulitis of anal and rectal regions

**K61.0 Anal abscess**
Perianal abscess
**Excludes1:** intrasphincteric abscess (K61.4)

**K61.1 Rectal abscess**
Perirectal abscess
**Excludes1:** ischiorectal abscess (K61.3)

**K61.2 Anorectal abscess**

**K61.3 Ischiorectal abscess**
Abscess of ischiorectal fossa

**K61.4 Intrasphincteric abscess**

➢ 請注意肛門和直腸膿瘍的詳細部位

**2023年版**

**K61 Abscess of anal and rectal regions**
**Includes:** abscess of anal and rectal regions
cellulitis of anal and rectal regions

C.C.診斷 **K61.0 Anal abscess**
Perianal abscess
**Excludes2:** intrasphincteric abscess (K61.4)

C.C.診斷 **K61.1 Rectal abscess**
Perirectal abscess
**Excludes1:** ischiorectal abscess (K61.39)

C.C.診斷 **K61.2 Anorectal abscess**

**K61.3 Ischiorectal abscess**

新增細部位

**K61.31 Horseshoe abscess**

**K61.39 Other ischiorectal abscess**
Abscess of ischiorectal fossa
Ischiorectal abscess, NOS

C.C.診斷 **K61.4 Intrasphincteric abscess**
Intersphincteric abscess

**K61.5 Supralevator abscess**

# 小兒外科大綱

## ■ I-10轉版後代碼差異概述

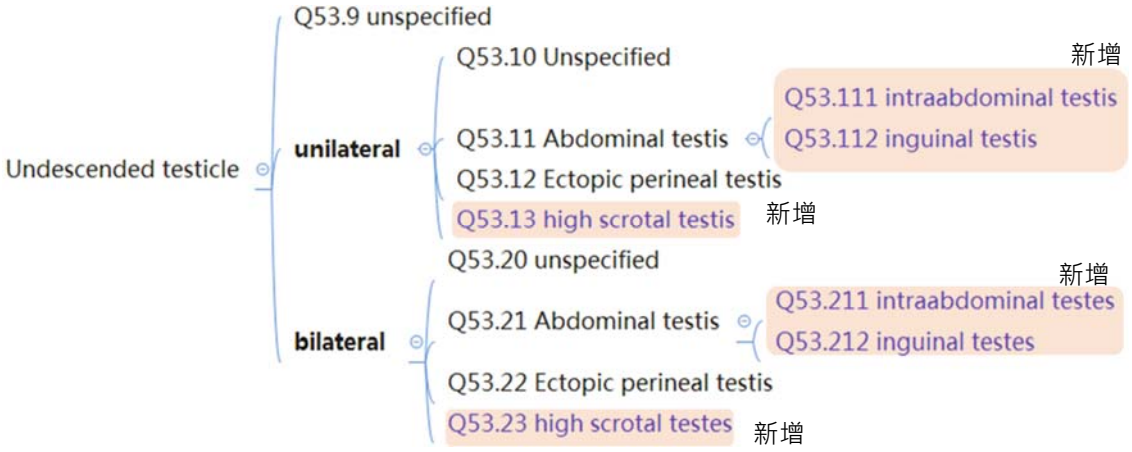
- ➢ 診斷
  - Acute appendicitis
  - Necrotizing enterocolitis
  - Intestinal obstruction
  - Megacolon
  - Abscess of anal and rectal regions
  - Cryptorchidism
  - Salter-Harris fracture

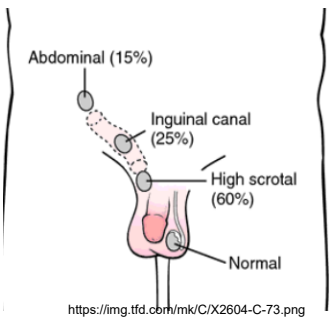


# Cryptorchidism

AHA Coding Clinic 2017,Q4,P23

出生時睪丸未自行從後腹腔沿腹股溝下降到達陰囊內，就是隱睪症，出生4～6個月後仍有可能會自行下降至陰囊，目前致病原因不明。隱睪症病人中約80%在腹股溝內，10%的病人睪丸在腹腔內。新版代碼依下降位置及側性區分如下:




➢ 請注意隱睪症的發生部位與側位

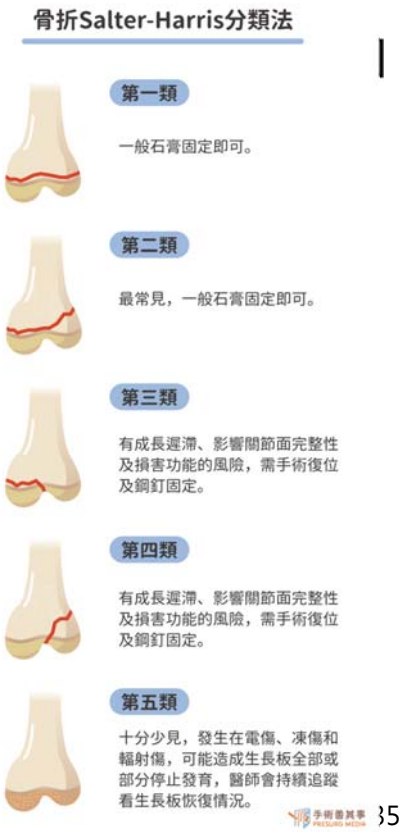
# Salter-Harris fracture-1

- Salter-Harris骨折也稱生長板骨折(Physeal fracture) ，專指一種發生於兒童的骨折型態.
- ICD-10-CM 代碼已經存在適用於肢體長骨(upper end of humerus, lower end of humerus,lower end of ulna, upper end of radius, lower end of radius, upper end of femur, lower end of femur, upper end of tibia, lower end of tibia, upper end of fibula, lower end of fibula)的多種生長板骨折類型。然而，因為這些骨折也可能影響足部各種骨骼的生長板，包括跟骨(Calcaneus)、蹠骨(Metatarsals)和趾骨(Phalanges)。

表一 Salter-Harris骨折分類

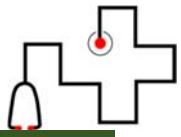
| 分類 | 縮寫 | 記憶法 | |
|---|---|---|---|
| Type I | S | Straight across | 骨折直接橫截生長板 |
| Type II | A | Above | 骨折處位於生長板及其上 |
| Type III | L | Lower | 骨折處位於生長板及其下 |
| Type IV | TE | Through Everything | 骨折從上到下都有 |
| Type V | R | Rammed (crushed) | 生長板被粉碎碾壓 |

https://www.sem.org.tw/EJournal/Detail/343
https://www.presurgmedia.com/knowledge/pediatric-fracture






# Salter-Harris fracture-2



■ Salter-Harris生長板骨折於肱骨(humerus)分類如下: C.C.診斷 第7碼A,K,P

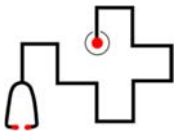
| 生長板骨折部位 | Type I | Type II | Type III | Type IV | other types (Type V) |
|---|---|---|---|---|---|
| Physeal fracture of upper end of humerus | S49.01- | S49.02- | S49.03- | S49.04- | S49.09- |
| Physeal fracture of lower end of humerus | S49.11- | S49.12- | S49.13- | S49.14- | S49.19- |

**S49.01** Salter-Harris Type I physeal fracture of upper end of humerus
- **S49.011** Salter-Harris Type I physeal fracture of upper end of humerus, right arm ⑦
- **S49.012** Salter-Harris Type I physeal fracture of upper end of humerus, left arm ⑦
- **S49.019** Salter-Harris Type I physeal fracture of upper end of humerus, unspecified arm ⑦

**S49.11** Salter-Harris Type I physeal fracture of lower end of humerus
- **S49.111** Salter-Harris Type I physeal fracture of lower end of humerus, right arm ⑦
- **S49.112** Salter-Harris Type I physeal fracture of lower end of humerus, left arm ⑦
- **S49.119** Salter-Harris Type I physeal fracture of lower end of humerus, unspecified arm ⑦

The appropriate 7th character is to be added to each code from subcategories S49.0 and S49.1
- A initial encounter for closed fracture
- D subsequent encounter for fracture with routine healing
- G subsequent encounter for fracture with delayed healing
- K subsequent encounter for fracture with nonunion
- P subsequent encounter for fracture with malunion
- S sequela

# Salter-Harris fracture-3



■ Salter-Harris生長板骨折於腳(foot)和腳踝(ankle)新增分類如下:

| 生長板骨折部位 | Type I | Type II | Type III | Type IV | other types(Type V) |
|---|---|---|---|---|---|
| Physeal fracture of calcaneus | S99.01- | S99.02- | S99.03- | S99.04- | S99.09- |
| Physeal fracture of metatarsal | S99.11- | S99.12- | S99.13- | S99.14- | S99.19- |
| Physeal fracture of phalanx of toe | S99.21- | S99.22- | S99.23- | S99.24- | S99.29- |

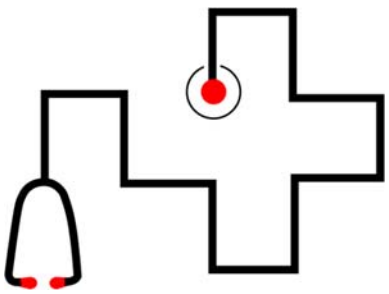
**S99.01 Salter-Harris Type I physeal fracture of calcaneus**

**S99.011 Salter-Harris Type I physeal fracture of right calcaneus ⑦**

**S99.012 Salter-Harris Type I physeal fracture of left calcaneus ⑦**

**S99.019 Salter-Harris Type I physeal fracture of unspecified calcaneus ⑦**





## 處置

# 大綱

## ■ I-10轉版後代碼差異概述

➢ 處置部位或手術

- Omentum
- Intestinal bypass
- Repositioning intestine
- Laparoscopic-assisted intestinal pull-through
- Extraction procedures
- Division liver procedure
- Transorifice endoscopic hepatobiliary and pancreas procedures
- Irreversible electroporation(IRE)
  不可逆性電穿孔破壞術

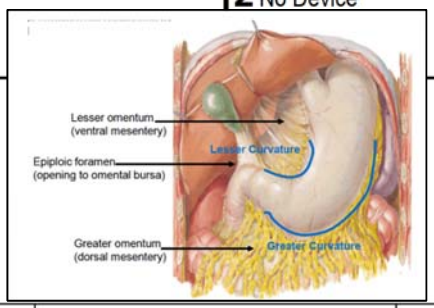
- LITT雷射間質熱療法
- Fluorescence imaging of hepatobiliary system



# 0D_Omentum

**2014年版**

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **R** Anal Sphincter<br>**S** Greater Omentum<br>**T** Lesser Omentum<br>**V** Mesentery<br>**W** Peritoneum | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **Z** No Device | **X** Diagnostic<br>**Z** No Qualifier |




**刪除Body Part名稱Greater,Lesser**

**2023年版**

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **R** Anal Sphincter<br>**U** Omentum<br>**V** Mesentery<br>**W** Peritoneum | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **Z** No Device | **X** Diagnostic<br>**Z** No Qualifier |

AHA Coding Clinic 2017,Q4,P46-55

# 0D1_Intestinal bypass

適用於醫生無法確定腸道特定解剖部位的繞道手術，
例如先前接受過結腸切除術的患者執行結腸造口術。

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **1** | Bypass: Altering the route of passage of the contents of a tubular body part |

**2023年版** 新增小腸和大腸Body Part /Qualifier

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **8** Small Intestine | **0** Open<br>**4** Percutaneous Endoscopic<br>**8** Via Natural or Artificial Opening Endoscopic | **7** Autologous Tissue Substitute<br>**J** Synthetic Substitute<br>**K** Nonautologous Tissue Substitute<br>**Z** No Device | **4** Cutaneous<br>**8** Small Intestine<br>**H** Cecum<br>**K** Ascending Colon<br>**L** Transverse Colon<br>**M** Descending Colon<br>**N** Sigmoid Colon<br>**P** Rectum<br>**Q** Anus |
| **E** Large Intestine | **0** Open<br>**4** Percutaneous Endoscopic<br>**8** Via Natural or Artificial Opening Endoscopic | **7** Autologous Tissue Substitute<br>**J** Synthetic Substitute<br>**K** Nonautologous Tissue Substitute<br>**Z** No Device | **4** Cutaneous<br>**E** Large Intestine<br>**P** Rectum |

AHA Coding Clinic 2019,Q4,P29



# 0DS_Repositioning of the Intestine

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **S** | Reposition: Moving to its normal location, or other suitable location, all or a portion of a body part |

**2014年版**

| *Body Part* | *Approach* | *Device* |
|---|---|---|
| **5** Esophagus<br>**6** Stomach<br>**9** Duodenum<br>**A** Jejunum<br>**B** Ileum<br>**H** Cecum<br>**K** Ascending Colon<br>**L** Transverse Colon<br>**M** Descending Colon<br>**N** Sigmoid Colon<br>**P** Rectum<br>**Q** Anus | **0** Open<br>**4** Percut<br>**7** Via Na<br>**8** Via Na<br>**X** Extern | |

腸道復位手術 (0DS)新增身體部位小腸和大腸以利編碼，例如矯正小腸或大腸旋轉不良。

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **S** | Reposition: Moving to its normal location, or other suitable location, all or a portion of a body part |

**2023年版**

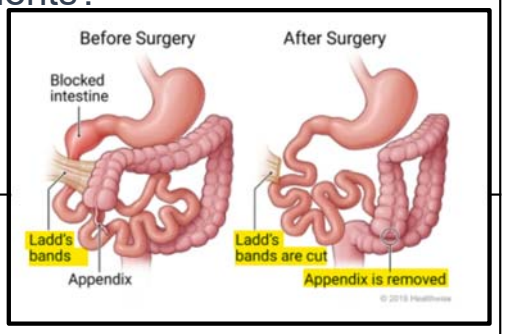
| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **5** Esophagus<br>**6** Stomach<br>**9** Duodenum<br>**A** Jejunum<br>**B** Ileum<br>**H** Cecum<br>**K** Ascending Colon<br>**L** Transverse Colon<br>**M** Descending Colon<br>**N** Sigmoid Colon<br>**P** Rectum<br>**Q** Anus | **0** Open<br>**4** Percutaneous Endoscopic<br>**7** Via Natural or Artificial Opening<br>**8** Via Natural or Artificial Opening Endoscopic<br>**X** External | **Z** No Device | **Z** No Qualifier |
| **8** Small Intestine<br>**E** Large Intestine | **0** Open<br>**4** Percutaneous Endoscopic<br>**7** Via Natural or Artificial Opening<br>**8** Via Natural or Artificial Opening Endoscopic | **Z** No Device | **Z** No Qualifier |

新增Body Part

AHA Coding Clinic 2017,Q4,P49

# Repair of malrotation of small and large intestine案例

| | |
|---|---|
| 問題 | The patient presented with a small bowel obstruction secondary to malrotation, and underwent open repair of malrotation of small and large intestine, appendectomy and lysis of Ladd's bands(異常帶狀組織).<br>What are the appropriate procedure code assignments?<br>因先天性腸旋轉不良導致小腸阻塞<br>開放性大腸小腸復位手術<br>闌尾切除術<br>**Ladd's bands 鬆解術** |
| 回答 | **0DS80ZZ** Reposition small intestine, open approach<br>**0DSE0ZZ** Reposition large intestine, open approach<br>**0DTJ0ZZ** Resection of appendix, open approach<br>for the incidental appendectomy<br>**0DN80ZZ** Release small intestine, open approach<br>for the lysis of peritoneal adhesions to free the small bowel obstruction |




AHA Coding Clinic,2017,Q4,P49-50



# Laparoscopic-assisted intestinal pull-through-1

| Body System | | Root Operation | | Body Part | | 新增Approach | |
|---|---|---|---|---|---|---|---|
| D | Gastrointestinal System | B | Excision | G | Large Intestine, Left | F | Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance<br>經自然開口或人工造口經皮內視鏡 |
| | | T | Resection | L | Transverse Colon | | |
| | | | | M | Descending Colon | | |
| | | | | N | Sigmoid Colon | | |

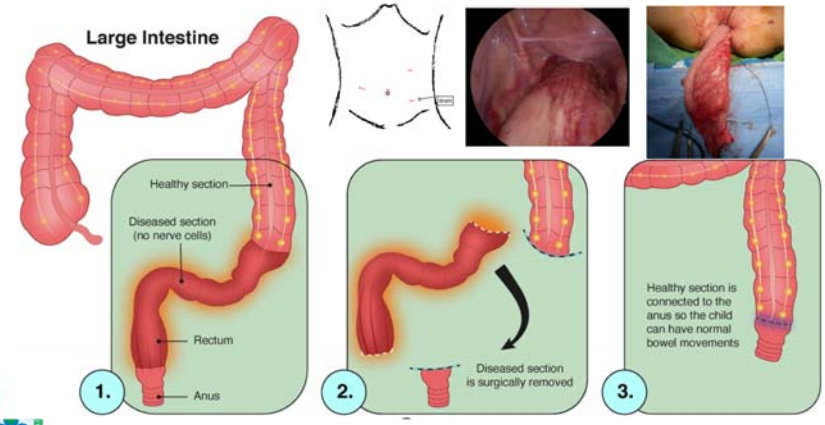
| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **B** | Excision: Cutting out or off, without replacement, a portion of a body part |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **G** Large Intestine, Left<br>**L** Transverse Colon<br>**M** Descending Colon<br>**N** Sigmoid Colon | **F** Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance | **Z** No Device | **Z** No Qualifier |

AHA Coding Clinic,2017,Q4,P61

# Laparoscopically-assisted anal-pull through procedure-2

- 腹腔鏡輔助下經肛門拉出術是針對患有先天性巨結腸症的患者進行的手術
  - 在肛門拉通手術中，受影響的腸道被移除，健康的腸道部分被拉至肛門。
- 例如Laparoscopy-assisted Swenson's procedure for Hirschsprung's disease
  - 將無神經節的腸段切除，再將有神經節的腸段拉下，和遠端肛門口做端對端接合。
  - 手術途徑以 F 經自然開口或人工造口經皮內視鏡編碼。




**Tips & Expertise: ICD-10-PCS for GI Procedures**

by Kristi Pollard | Jun 22, 2020 | Webinar Q&As | 0 comments

**Q: Can you explain when the approach for laparoscopically-assisted procedure through an orifice would be used?**

**A:** This approach was added to the GI system in fiscal year 2018 to report a laparoscopically-assisted anal-pull through procedure. This procedure is performed on patients with Hirschprung's disease. Hirschprung's disease is a congenital disorder in which nerve ganglions in a segment of bowel are absent. This causes inability to move the bowels. In an anal pull-through procedure, the affected bowel is removed, and the healthy portion of bowel is pulled down to the anus.

https://www.thehaugengroup.com/tips-expertise-icd-10-pcs-for-gi-procedures/



# Extraction procedures

**2014年版**

**Aspiration** *see* Drainage

工具書索引改變

**2023年版**

**Aspiration, fine needle**
Fluid or gas *see* Drainage
Tissue biopsy
*see* Excision
*see* Extraction

手術性處置-附表7.1.2

| Body System | | 新增 Root Operation | |
|---|---|---|---|
| D | Gastrointestinal System | D | Extraction |
| F | Hepatobiliary System and Pancreas | | |

- Percutaneous aspiration biopsies and brush biopsies 手術方式以 Extraction編碼

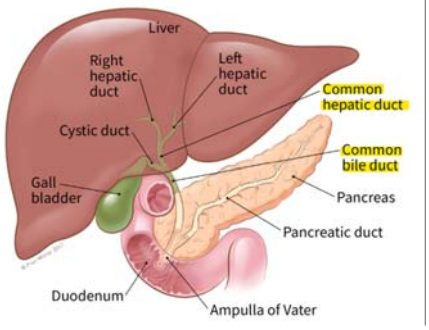
- 細針抽吸組織(fine needle aspiration of tissue)
  - 先以Extraction表中找合適的部位，如果有合適的身體部位，手術方式則以Extraction編碼。
  - 如果在Extraction下沒有適當的身體部位可選時，手術方式則以Excision編碼。

| | | |
|---|---|---|
| Y | 0DDJ3ZX | Extraction of Appendix, Percutaneous Approach, Diagnostic |
| Y | 0DDJ4ZX | Extraction of Appendix, Percutaneous Endoscopic Approach, Diagnostic |
| Y | 0FD04ZX | Extraction of Liver, Percutaneous Endoscopic Approach, Diagnostic |
| Y | 0FD14ZX | Extraction of Right Lobe Liver, Percutaneous Endoscopic Approach, Diagnostic |
| Y | 0FD24ZX | Extraction of Left Lobe Liver, Percutaneous Endoscopic Approach, Diagnostic |

AHA Coding Clinic 2017,Q4,P41
AHA Coding Clinic 2018,Q4,P39,84-85

# Common hepatic duct

| Body System | | Root Operation | | | | 新增Body Part | |
|---|---|---|---|---|---|---|---|
| F | Hepatobiliary System and Pancreas | 1 | Bypass | M | Reattachment | 7 | Common Hepatic Duct |
| | | 5 | Destruction | N | Release | | |
| | | 7 | Dilation | Q | Repair | | |
| | | 9 | Drainage | R | Replacement | | |
| | | B | Excision | S | Reposition | | |
| | | C | Extirpation | T | Resection | | |
| | | F | Fragmentation | U | Supplement | | |
| | | L | Occlusion | V | Restriction | | |




AHA Coding Clinic,2017,Q4,P47-48



# Aspiration biopsy of common hepatic duct案例

| | |
|---|---|
| 問題 | The patient is seen for upper endoscopic ultrasound (EUS) with fine needle aspiration biopsy. An ill-defined area of the common hepatic duct was sampled using ultrasound guidance. What is the appropriate procedure code assignment? |
| 回答 | 0FB98ZX Excision of common bile duct, via natural or artificial opening endoscopic, diagnostic, for the needle aspiration biopsy of the common hepatic duct via EUS AHA Coding Clinic,2016,Q1,P23-24 |

2023年版：0FD78ZX

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *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* |
|---|---|---|---|
| **4** Gallbladder<br>**5** Hepatic Duct, Right<br>**6** Hepatic Duct, Left<br>**7** Hepatic Duct, Common<br>**8** Cystic Duct<br>**9** Common Bile Duct<br>**C** Ampulla of Vater<br>**D** Pancreatic Duct<br>**F** Pancreatic Duct, Accessory<br>**G** Pancreas | **3** Percutaneous<br>**4** Percutaneous Endoscopic<br>**8** Via Natural or Artificial Opening Endoscopic | **Z** No Device | **X** Diagnostic |

# 0F8_Division liver procedure

**2014年版**

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Operation* | **8** | Division: Cutting into a body part, without draining fluids and/or gases from the body part, in order to separate or transect a body part |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **G** Pancreas | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **Z** No Device | **Z** No Qualifier |

**2023年版**

**新增Body Part**

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Operation* | **8** | Division: Cutting into a body part, without draining fluids and/or gases from the body part, in order to separate or transect a body part |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **0** Liver<br>**1** Liver, Right Lobe<br>**2** Liver, Left Lobe<br>**G** Pancreas | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **Z** No Device | **Z** No Qualifier |

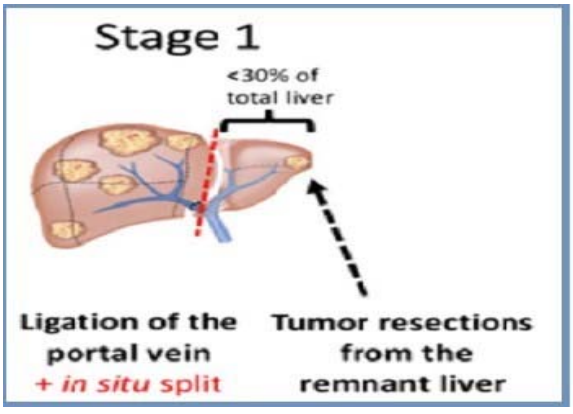
AHA Coding Clinic,2021,Q4,P48-49

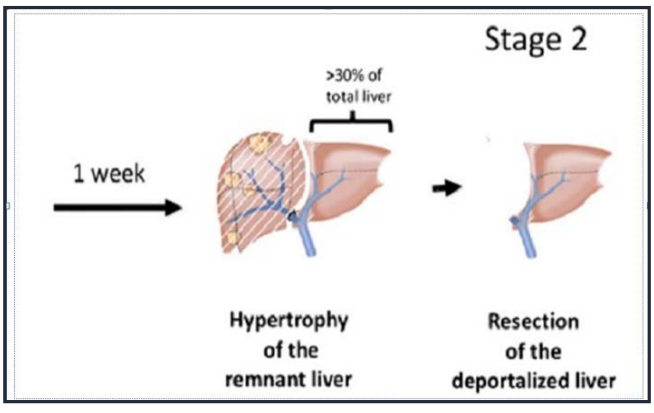


# Division of liver for staged hepatectomy案例-1

**Associating liver partition and portal vein ligation for staged hepatectomy (ALPPS)**
**聯合肝臟分割和門靜脈結紮術進行分階段肝切除術**

聯合肝臟分割和門靜脈結紮術進行分階段肝切除術(ALPPS)分為兩階段，首先將右側肝臟的門靜脈結紮，使門脈血流的營養全數供應至左側肝臟，並將左右肝切割分離，約7至10日後，待左側肝臟成長60%至100%，再切除右側肝葉。




AHA Coding Clinic,2021,Q4,P48-49

# Division of liver for staged hepatectomy案例-2

| | |
|---|---|
| 問題 | Intrahepatic cholangiocellular carcinoma of the right liver lobe<br>Robotic assisted laparoscopic Stage 1 ALPPS procedures. The procedure is carried out in order to create hypertrophy in the small left lateral liver lobe.<br>A cholecystectomy was performed. Then, the right portal vein was isolated and a Hem-o-lock clip was placed, completely occluding portal flow.<br>為左肝增大進行ALPPS第一階段手術，機器手臂輔助腹腔鏡肝臟分割、門靜脈結紮術及膽囊切除。 |
| 回答 | 0F824ZZ Division of left lobe liver, percutaneous endoscopic approach<br>0FT44ZZ Resection of gallbladder, percutaneous endoscopic approach<br>06L84CZ Occlusion of portal vein with extraluminal device, percutaneous endoscopic approach<br>~~8E0W3CZ~~ Robotic assisted procedure of trunk region, percutaneous approach |

8E0W4CZ

如果在執行肝右葉部分切除或全部切除同時切除膽囊，則膽囊切除不需編碼。
Coding Clinic案例在執行ALPPS時切除膽囊，因此需加編膽囊切除0FT44ZZ 。

AHA Coding Clinic,2021,Q4,P49-50



# 0F_Transorifice endoscopic hepatobiliary procedures

| Body System | | Root Operation | | | | Body Part | | 新增Approach | |
|---|---|---|---|---|---|---|---|---|---|
| F | Hepatobiliary System and Pancreas | 5 | Destruction | J | Inspection | 4 | Gallbladder | 8 | Via Natural or Artificial Opening Endoscopic 經自然開口或人工造口經皮內視鏡 |
| | | 9 | Drainage | N | Release | G | Pancreas | | |
| | | B | Excision | Q | Repair | | | | |
| | | C | Extirpation | U | Supplement | | | | |
| | | R | Replacement | S | Reposition | all body part | | | |
| | | U | Supplement | | | | | | |

AHA Coding Clinic,2017,Q4,P59-60

# 0F9_Drainage of pancreas

**2014年版**

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Operation* | **9** | Drainage: Taking or letting out fluids and/or gases from a body part |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **0** Liver<br>**1** Liver, Right Lobe<br>**2** Liver, Left Lobe<br>**4** Gallbladder<br>**G** Pancreas | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **0** Drainage Device | **Z** No Qualifier |

**2023年版** 新增Approach

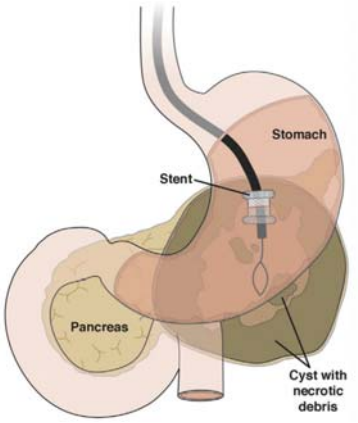
| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Operation* | **9** | Drainage: Taking or letting out fluids and/or gases from a body part |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **4** Gallbladder<br>**G** Pancreas | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic<br>**8** Via Natural or Artificial Opening Endoscopic | **0** Drainage Device | **Z** No Qualifier |



# Drainage of pancreatic pseudocyst案例

| | |
|---|---|
| 問題 | A patient diagnosed with walled off pancreatic necrosis and pancreatic pseudocyst adjacent to the stomach body, under went endoscopic cystogastrostomy using the AXIOS™ Stent system. The endoscope was placed under direct vision, and the stomach wall and pancreatic pseudocyst were punctured under endosonographic guidance. An AXIOS™ stent was placed in close approximation to the walls of the cyst and the stomach through the cystogastrostomy.<br>胰臟假性囊腫，使用 AXIOS™ 支架系統進行了內視鏡囊腫胃造口術。 將內視鏡置於直視下，在內視鏡超音波導引下穿刺胃壁和胰臟假性囊腫。透過囊腫胃造口將AXIOS™ 支架放置在靠近囊腫壁和胃的位置。 |
| 回答 | 0F9G80Z Drainage of pancreas with drainage device, via natural or artificial opening endoscopic, for the cystogastrostomy with AXIOS™ stent, to drain the cyst. (支架是為了保持引流通暢不需編碼) |

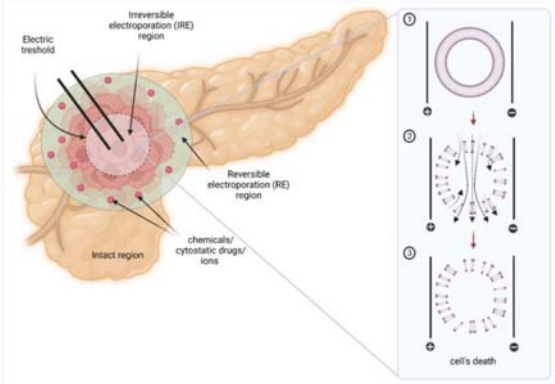



AHA Coding Clinic,2020,Q3,P34-35

# 0F5_Irreversible electroporation(IRE)

| Body System | | Root Operation | | Body Part | | 新增 Qualifier | |
|---|---|---|---|---|---|---|---|
| F | Hepatobiliary System and Pancreas | 5 | Destruction | 0 | Liver | F | Irreversible Electroporation |
| | | | | 1 | Liver, Right Lobe | | |
| | | | | 2 | Liver, Left Lobe | | |
| | | | | G | Pancreas | | |

- 不可逆性電穿孔破壞術（IRE）是一種新的**非熱組織消融方式**，用於治療肝癌和胰臟癌晚期患者。
- IRE 的原理是可向癌組織提供短脈衝強電場，並通過**破壞細胞膜誘導細胞死亡**。**IRE 僅影響細胞膜**，不影響組織中的其他結構。
- IRE 可通過開放手術、腹腔鏡或經皮使用。




AHA Coding Clinic,2018,Q4,P39-40



# Irreversible electroporation to ablate the pancreatic tumor案例

| | |
|---|---|
| 問題 | A female patient with locally advanced, unresectable stage III cancer of the body of the pancreas underwent laparoscopic irreversible electroporation to ablate the pancreatic tumor. How should this be coded? 腹腔鏡胰臟腫瘤不可逆性電穿孔破壞術 |
| 回答 | ➢ C25.1, Malignant neoplasm of body of pancreas, for the diagnosis of stage III cancer of the body of the pancreas.<br>➢ 0F5G4ZF Destruction of pancreas using irreversible electroporation, percutaneous endoscopic approach<br>AHA Coding Clinic,2018,Q4,P39-40 |

**IRE (Irreversible Electroporation) see Destruction, Hepatobiliary System and Pancreas 0F5**

| | | |
|---|---|---|
| *Section* | **0** | Medical and Surgical |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Operation* | **5** | Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent |

| *Body Part* | *Approach* | *Device* | *Qualifier* |
|---|---|---|---|
| **G** Pancreas | **0** Open<br>**3** Percutaneous<br>**4** Percutaneous Endoscopic | **Z** No Device | **3** Laser Interstitial Thermal Therapy<br>**F** Irreversible Electroporation<br>**Z** No Qualifier |
| **G** Pancreas | **8** Via Natural or Artificial Opening Endoscopic | **Z** No Device | **Z** No Qualifier |

# LITT雷射間質熱療法：D放射治療章節→0內外科章節

| Body System | | Root Operation | | 2023_新增 Qualifier | |
|---|---|---|---|---|---|
| 0 | Central Nervous System and Cranial Nerves | 5 | Destruction | 3 | Laser Interstitial Thermal Therapy |
| B | Respiratory System | | | | |
| D | Gastrointestinal System | | | | |
| F | Hepatobiliary System and Pancreas | | | | |
| G | Endocrine System | | | | |
| H | Skin and Breast | | | | |
| V | Male Reproductive System | | | | |
| P | Upper Bones | | | | |
| Q | Lower Bones | | | | |

- **LITT雷射間質熱療法**利用激光探頭產生的熱量來破壞目標部位的軟組織。
- **LITT 為熱療法而不是放射療法**，重新歸類到內外科章節(0)，以更準確地符合手術目的。
- 從**放射治療章節**(D0Y, DBY, DDY, DFY, DGY, DMY, and DVY)**刪除31個**第5位碼治療型態”K” Laser Interstitial Thermal Therapy

AHA Coding Clinic,2022,Q4,P53-54,62 2023,Q1,P10

**2014年版**

| *Section* | **D** | Radiation Therapy |
|---|---|---|
| *Body System* | **B** | Respiratory System |
| *Modality* | **Y** | Other Radiation |

| *Treatment Site* | *Modality Qualifier* | *Isotope* | *Qualifier* |
|---|---|---|---|
| **0** Trachea<br>**1** Bronchus<br>**2** Lung<br>**5** Pleura<br>**6** Mediastinum<br>**7** Chest Wall<br>**8** Diaphragm | **7** Contact Radiation<br>**8** Hyperthermia<br>**F** Plaque Radiation<br>**K** Laser Interstitial Thermal Therapy | **Z** None | **Z** None |



# “Other imaging” type

**Imaging, Hepatobiliary System and Pancreas**

| | |
|---|---|
| BF0 | Imaging, Plain Radiography |
| BF1 | Imaging, Fluoroscopy |
| BF2 | Imaging, Computerized Tomography (CT Scan) |
| BF3 | Imaging, Magnetic Resonance Imaging (MRI) |
| BF4 | Imaging, Ultrasonography |

新增影像型態“Other Imaging”(NEC)
定義：Other specified modality for visualizing a body part
用於可視化身體部位的其他特定方式

**Imaging, Hepatobiliary System and Pancreas**

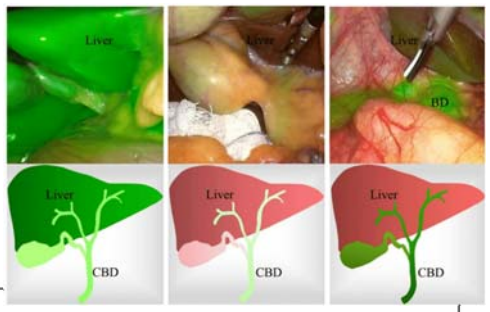
ICD-10-PCS operation values in the Hepatobiliary System and Pancreas of the Imaging section are listed below. Click on an operation to access the corresponding ICD-10-PCS table.

BF0 Plain Radiography
BF1 Fluoroscopy
BF2 Computerized Tomography (CT Scan)
BF3 Magnetic Resonance Imaging (MRI)
BF4 Ultrasonography
BF5 Other Imaging

AHA Coding Clinic,2020,Q4,P66

# BF5_Fluorescence imaging of hepatobiliary system

- 腹腔鏡膽囊切除術術中使用靛青綠(ICG) 染料影像檢查，能更好地可視化膽管解剖位置並避免膽管損傷。
- 肝膽手術術中使用 ICG熒光染料影像應分開編碼




**Other Imaging**

Bile Duct, Indocyanine Green Dye, Intraoperative BF50200

Bile Duct and Gallbladder, Indocyanine Green Dye, Intraoperative BF53200

| | | |
|---|---|---|
| *Section* | **B** | Imaging |
| *Body System* | **F** | Hepatobiliary System and Pancreas |
| *Type* | **5** | Other Imaging: Other specified modality for visualizing a body part |

| *Body Part* | *Contrast* | *Qualifier* | *Qualifier* |
|---|---|---|---|
| **0** Bile Ducts<br>**2** Gallbladder<br>**3** Gallbladder and Bile Ducts<br>**5** Liver<br>**6** Liver and Spleen<br>**7** Pancreas<br>**C** Hepatobiliary System, All | **2** Fluorescing Agent | **0** Indocyanine Green Dye<br>**Z** None | **0** Intraoperative<br>**Z** None |

AHA Coding Clinic,2020,Q4,P66-68



# 乳房外科

# 乳房外科大綱

## ■I-10轉版後代碼差異概述

- ➢ 診斷
  - Inflammatory disorders of breast
  - Lump in breast
  - Anaplastic large cell lymphoma, ALK-negative
- ➢ 處置
  - Breast procedures



# Inflammatory disorders of breast

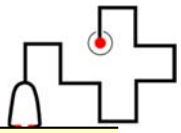
| 2014 | | 2023(新增疾病類型與側位) | |
|---|---|---|---|
| N61 | 乳房炎性疾患<br>Inflammatory disorders of breast | N61.0 | Mastitis without abscess |
| | | N61.1 | Abscess of the breast and nipple |
| | | N61.2 (0,1,2,3) | Granulomatous mastitis, (unspecified,right,left,bilateral) breast |

★通常乳腺炎常見在泌乳期婦女,是一種罕見的慢性炎症性疾病,肉芽腫性乳腺炎經常與癌症混淆，但它是一種完全良性（非癌性）的疾病。
★由於肉芽腫性乳腺炎與其他乳腺肉芽腫性病變在治療上有差異，因此準確診斷非常重要

➢ 請注意乳房炎性疾患的疾病類型與側位

# Lump in breast

Coding Clinic 2017, Q4, p.19



| 2014 | | 2023(第4、5位碼新增側性及象限) | |
|---|---|---|---|
| N63 | 乳房腫塊<br>Unspecified lump in breast | N63.1(0,1,2,3,4,5) | 乳房腫塊(象限)<br>Unspecified lump in the **right** breast |
| | | N63.2(0,1,2,3,4,5) | 乳房腫塊(象限)<br>Unspecified lump in the **left** breast |

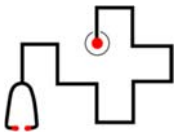
**N63.10** Unspecified lump in the right breast, unspecified quadrant
**N63.11** Unspecified lump in the right breast, upper outer quadrant
**N63.12** Unspecified lump in the right breast, upper inner quadrant
**N63.13** Unspecified lump in the right breast, lower outer quadrant
**N63.14** Unspecified lump in the right breast, lower inner quadrant
**N63.15** Unspecified lump in the right breast, overlapping quadrants

- 請注意乳房腫塊的象限位置與側位



# Anaplastic large cell lymphoma, ALK-negative

## 異生性巨大細胞淋巴瘤ALK-陰性 新增細碼



- 新增細碼C84.7A以識別**乳房**之異生性巨大細胞淋巴瘤ALK-陰性，此代碼包含Breast implant associated anaplastic large cell lymphoma (BIAALCL) (乳房植入物相關異生性巨大細胞淋巴瘤)。

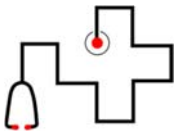
**C84.7A** **Anaplastic large cell lymphoma, ALK-negative, breast** 乳房之異生性巨大細胞淋巴瘤ALK-陰性
C.C.診斷 Breast implant associated anaplastic large cell lymphoma (BIA-ALCL)
**Use additional** code to identify:
breast implant status (Z98.82)
personal history of breast implant removal (Z98.86)

ALK-陰性乳房植入物相關的乳房之異生性巨大細胞淋巴瘤，是一種乳房植入物周圍發生的淋巴瘤，BIA-ALCL的編碼是 C84.7A， **不可編在第19章併發症的代碼**

- 目前實施的DRG項目是單側/雙側乳房原位癌全/次全切除術
- 病理報告若盡速完成且確認是癌症，則不屬於DRG案件

# 0H Breast procedures

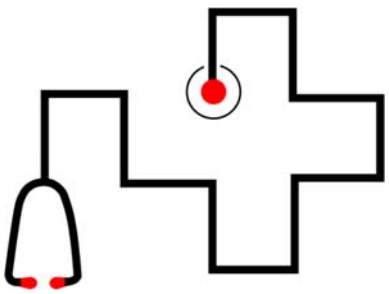
AHA Coding Clinic 2019,Q4,P30-31



| Body System | | Root Operation | | | | Body Part | | 刪除Approach | |
|---|---|---|---|---|---|---|---|---|---|
| H | Skin and Breast | 0 | Alteration | J | Inspection | T | Breast, Right | ~~X~~ | ~~External~~ |
| | | 5 | Destruction | N | Release | U | Breast, Left | 刪除乳房外部處置的83個代碼，如果手術是執行在皮膚，Body Part應以Skin, Chest，Approach 以External編碼。 | |
| | | 9 | Drainage | P | Removal | V | Breast, Bilateral | | |
| | | B | Excision | Q | Repair | Y | Supernumerary Breast | | |
| | | C | Extirpation | R | Replacement | | | | |
| | | D | Extraction | U | Supplement | | | | |
| | | H | Insertion | W | Revision | | | | |

| Body System | | Root Operation | | 新增 Body Part | | 新增Approach | |
|---|---|---|---|---|---|---|---|
| H | Skin and Breast | D | Extraction | T | Breast, Right | 0 | Open |
| | | This change will allow reporting of nonexcisional debridement of breast tissue beneath the level of the skin of the chest. | | U | Breast, Left | | |
| | | | | V | Breast, Bilateral | | |
| | | | | Y | Supernumerary Breast | | |





整形外科

# 整形外科大綱

## ■I-10轉版後代碼差異概述

- ➢ 診斷
  - Pressure ulcer
  - Non-pressure chronic ulcer
  - Fournier disease or gangrene
  - Facial bone fracture



# L89.- Pressure ulcer

AHA Coding Clinic,2019,Q4,P10~11

| 2014 | | 2023_新增疾病嚴重度 | |
|---|---|---|---|
| 類目碼 | 名稱 | 第6位碼 | 嚴重度 |
| L89 | Pressure ulcer | 0 | unstageable |
| 深部組織性壓瘡2014年版編碼為unstageable無法分期(第6位碼為0) | | 1 | stage 1 |
| | | 2 | stage 2 |
| | | 3 | stage 3 |
| | | 4 | stage 4 |
| | | 6(新增) | deep tissue damage |
| | | 9 | unspecified stage |

C.C.診斷

C.C.診斷

**L89.15 Pressure ulcer of sacral region**
Pressure ulcer of coccyx
Pressure ulcer of tailbone

**L89.150 Pressure ulcer of sacral region, unstageable**

**L89.151 Pressure ulcer of sacral region, stage 1**
Healing pressure ulcer of sacral region, stage 1
Pressure pre-ulcer skin changes limited to persistent focal edema, sacral region

**L89.152 Pressure ulcer of sacral region, stage 2**
Healing pressure ulcer of sacral region, stage 2
Pressure ulcer with abrasion, blister, partial thickness skin loss involving epidermis and/

**L89.153 Pressure ulcer of sacral region, stage 3**
Healing pressure ulcer of sacral region, stage 3
Pressure ulcer with full thickness skin loss involving damage or necrosis of subcutaneou

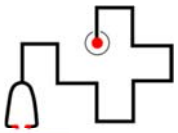
**L89.154 Pressure ulcer of sacral region, stage 4**
Healing pressure ulcer of sacral region, stage 4
Pressure ulcer with necrosis of soft tissues through to underlying muscle, tendon, or bon

**L89.156 Pressure-induced deep tissue damage of sacral region**

**L89.159 Pressure ulcer of sacral region, unspecified stage**
Healing pressure ulcer of sacral region NOS
Healing pressure ulcer of sacral region, unspecified stage

- ➢ 壓迫性潰瘍，請注意潰瘍部位與嚴重度(分期)
- ➢ 第3期或第4期是CC

# L97 / L98.4- Non-pressure chronic ulcer

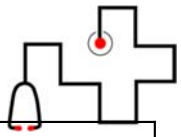


| 2014 | | 2023_細分疾病嚴重度 C.C.診斷 | |
|---|---|---|---|
| 類目碼 | 名稱 | 第6位碼 | 嚴重度 |
| L97 | Non-pressure chronic ulcer of lower limb, not elsewhere classified | 1 | limited to breakdown of skin |
| L98.4 | Non-pressure chronic ulcer of skin, not elsewhere classified | 2 | with fat layer exposed |
| ➢ 類目碼L97 (Non-pressure chronic ulcer of lower limb)新增63個代碼，以識別潰瘍嚴重程度。(第6位碼1-9是CC)<br>➢ 次類目碼L98.4 (Non-pressure chronic ulcer of buttock)新增了9個新的代碼，用來識別潰瘍的嚴重程度。(第6位碼5-8是CC) | | 3 | with necrosis of muscle |
| | | 4 | with necrosis of bone |
| | | 5(新增) | with muscle involvement without evidence of necrosis |
| | | 6(新增) | with bone involvement without evidence of necrosis |
| | | 8(新增) | with other specified severity |
| | | 9 | with unspecified severity |

AHA Coding Clinic,2017,Q4,P17



# Non-pressure chronic ulcer案例



| | |
|---|---|
| 問題 | A 75-year-old patient with type 2 diabetes mellitus is admitted for treatment of a nonhealing diabetic ulcer of the right ankle with muscle involvement. There is no evidence of necrosis on visual inspection of the ulcer. What are the appropriate diagnoses codes? |
| 回答 | 主診編 E11.622 Type 2 diabetes mellitus with other skin ulcer<br>次診編 L97.315 Non-pressure chronic ulcer of right ankle with muscle involvement without evidence of necrosis |

**Diabetes, diabetic (mellitus) (sugar) E11.9**
- type 2 E11.9
- - with
- - - skin complication NEC E11.628
- - - **skin ulcer NEC E11.622**

**Ulcer, ulcerated, ulcerating, ulceration, ulcerative**
- lower limb (atrophic) (chronic) L97.909
- - ankle L97.309
- - - right L97.319
- - - - with
- - - - - bone involvement without evidence of necrosis L97.316
- - - - - bone necrosis L97.314
- - - - - exposed fat layer L97.312
- - - - - muscle involvement without evidence of necrosis L97.315
- - - - - muscle necrosis L97.313
- - - - - skin breakdown only L97.311
- - - - - specified severity NEC L97.318

AHA Coding Clinic 2017,Q4,P17

# Fournier disease or gangrene

| 2014 | | 2023新增細碼 | |
|---|---|---|---|
| 男 | 女 | 男 | 女 |
| N49.3 | N76.89 | N49.3 | N76.82 |
| Fournier gangrene | Other specified inflammation of vagina and vulva | Fournier gangrene | Fournier disease of vagina and vulva |
| MDC12 男性生殖系統之疾病與疾患 | MDC13 女性生殖系統之疾病與疾患 | MDC12 男性生殖系統之疾病與疾患 | MDC13 女性生殖系統之疾病與疾患 |

**N49 Inflammatory disorders of male genital organs, not elsewhere classified**
**Use additional** code (B95-B97), to identify infectious agent
**Excludes1:** inflammation of penis (N48.1, N48.2-)
orchitis and epididymitis (N45.-)

**N76.89 Other specified inflammation of vagina and vulva**

**N49 Inflammatory disorders of male genital organs, not elsewhere classified**
**Use additional** code (B95-B97), to identify infectious agent
**Excludes1:** inflammation of penis (N48.1, N48.2-)
orchitis and epididymitis (N45.-)

**N76.82 Fournier disease of vagina and vulva [2023]**
Fournier gangrene of vagina and vulva
**Code also [2023]** , if applicable, diabetes mellitus (E08-E13 with .9)
**Excludes1 [2023]:** gangrene in diabetes mellitus (E08-E13 with .52)



# 修訂T31 & T32 Body surface of burns and corrosions

AHA Coding Clinic 2021,Q4,P93

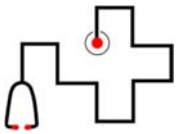
**編碼注意事項**

- 燒傷(Burns)和腐蝕傷(Corrosions)個案，除了編燒傷和腐蝕傷代碼外，需加編**T31**或**T32**表示燒傷和腐蝕傷的總體表面積，
- 若第七位碼使用S(sequelae)(後遺症狀況)，則不需加編T31或T32代碼。
- T31和T32只適用在急性期的燒傷和腐蝕傷代碼。

損傷、骨折及藥物中毒的章節使用第7碼來描述病患就診時機：
A (初期照護 Initial encounter)用於病患因損傷接受積極性治療:例手術治療、急診就診、初次接觸醫生的評估及治療
D (後續照護 Subsequent encounter)用於病患因損傷接受積極性治療之後，在癒合(healing)或恢復期階段之例行性損傷照護:例更換或移除石膏、外固定或內固定裝置物的移除、藥物調整、其他後續照護及損傷治療的追蹤
S (後遺症 Sequela)用於直接由損傷造成的併發症或病況:例如如燒傷後疤痕形成，疤痕是燒傷的後遺症

- TBSA 10-19%以上(T31.10-T31.99)屬於合併症

# S02.1 Skull bone fracture新增部位、文字與側性



| ICD-10 | 2023 CM英文名稱 |
|---|---|
| S02.101 | Fracture of base of skull, right side |
| S02.102 | Fracture of base of skull, left side |
| S02.109 | Fracture of base of skull, unspecified side |
| S02.110 | Type I occipital condyle fracture, unspecified side |
| S02.111 | Type II occipital condyle fracture, unspecified side |
| S02.112 | Type III occipital condyle fracture, unspecified side |
| S02.113 | Unspecified occipital condyle fracture |
| S02.118 | Other fracture of occiput, unspecified side |
| S02.119 | Unspecified fracture of occiput |

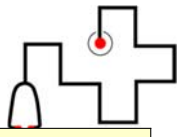
| ICD-10 | 2023 CM英文名稱 |
|---|---|
| S02.11A | Type I occipital condyle fracture, right side |
| S02.11B | Type I occipital condyle fracture, left side |
| S02.11C | Type II occipital condyle fracture, right side |
| S02.11D | Type II occipital condyle fracture, left side |
| S02.11E | Type III occipital condyle fracture, right side |
| S02.11F | Type III occipital condyle fracture, left side |
| S02.11G | Other fracture of occiput, right side |
| S02.11H | Other fracture of occiput, left side |
| S02.121 | Fracture of orbital roof, right side |
| S02.122 | Fracture of orbital roof, left side |
| S02.129 | Fracture of orbital roof, unspecified side |
| S02.19 | Other fracture of base of skull |

- **S02.1**(Fracture of base of skull)，新增側性及骨折部位:眶頂(Orbital roof)。



AHA Coding Clinic 2019,Q4,P16-17

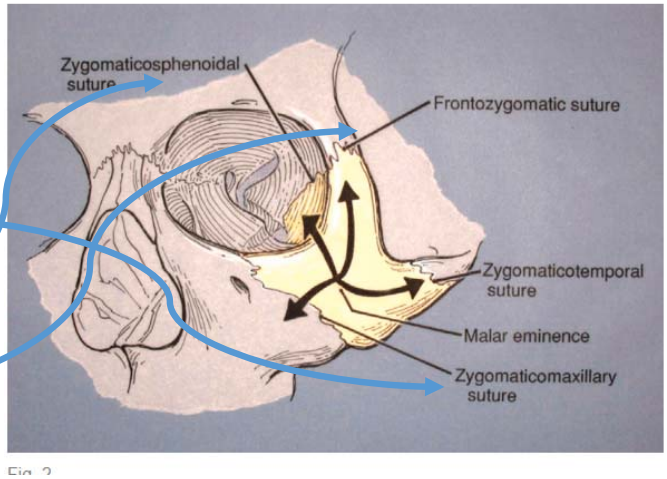
# Facial bone fracture 新增部位、側性



| ICD-10-CM | 2023 英文名稱 | 新增項目 |
|---|---|---|
| S02.12- | Fracture of orbital roof眶頂 | 新增部位orbital roof<br>與側位right ,left ,unspecified side |
| S02.3- | Fracture of orbital floor眶底 | 新增側位unspecified,right ,left side |
| S02.40- | Fracture of malar, maxillary and zygoma bones | 新增部位malar,maxillary,zygoma<br>新增側位unspecified,right ,left side |
| S02.6- | Fracture of mandible | 新增側位unspecified,right ,left side |
| S02.80-S02.82 | Fracture of other specified skull and facial bones | 新增側位unspecified ,right ,left side |
| S02.83- | Fracture of medial orbital wall眶內壁 | 新增部位medial orbital wall<br>與側位right ,left , unspecified side |
| S02.84- | Fracture of lateral orbital wall眶側壁 | 新增部位lateral orbital wall<br>與側位right ,left , unspecified side |
| S02.85- | Fracture of orbit, unspecified眼眶 | 新增部位orbital |

# Zygomaticomaxillary complex (ZMC) fractures

- The Zygomaticomaxillary complex (ZMC)是一種 3 維結構，它定義中顏面寬度，並提供眼眶形狀
- Zygomaticomaxillary complex (ZMC) fractures 是顴骨隆起處的 4 個支撐物斷裂。
- There are four points of fixation of the zygoma
- Zygomatico**maxillary** articulation and inferior orbital rim.顴上頷關節和眼眶下緣。
- Zygomatico**sphenoid** articulation in the lateral orbital wall.眶外壁的顴蝶關節
- Zygomatico**frontal** articulation and the lateral orbital rim.顴額關節和眼眶外側緣
- Zygomatic **arch**.顴弓
- Zygomatic tripod fracture在ICD-10-CM無特定代碼



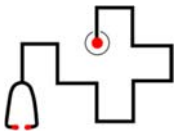

➢ 請醫師分別書寫各骨折部位

https://www.theplasticsfella.com/zygomaticomaxillary-complex-fractures/
https://plasticsurgerykey.com/zygomaticomaxillary-fractures/



# 併發症

# T81.4 術後感染/手術部位感染深度
# Post operation wound/surgical site infection



| ICD-10 | 2014 英文名稱 | 第七位碼 |
|---|---|---|
| T81.4 | Infection following a procedure | A - initial encounter<br>D - subsequent encounter<br>S - sequela |
| **ICD-10** | **2023 英文名稱** | |
| T81.40 | Infection following a procedure, unspecified | |
| T81.41 | Infection following a procedure, superficial incisional surgical site | |
| T81.42 | Infection following a procedure, deep incisional surgical site | |
| T81.43 | Infection following a procedure, organ and space surgical site | |
| T81.44 | Sepsis following a procedure | |
| T81.49 | Infection following a procedure, other surgical site | |

| 補充 | ▪外科部位感染 (Surgical site infection,SSI) 定義改變:以切口、器官腔室等部位之特異性 (site specific) 為主，區分深度為 Superficial incisional、deep incisional surgical site 及organ/space surgical site)，以區別手術後感染的嚴重程度。 |
|---|---|

Coding Clinic 2018, 4Q, P.33-34



工具書Tabular List

**T81.4 Infection following a procedure** 2014年版

Intra-abdominal abscess following a procedure
Postprocedural infection, not elsewhere classified
Sepsis following a procedure
Stitch abscess following a procedure
Subphrenic abscess following a procedure
Wound abscess following a procedure

2023年版

**T81.41 Infection following a procedure, superficial incisional surgical site**
Subcutaneous abscess following a procedure
Stitch abscess following a procedure

**T81.42 Infection following a procedure, deep incisional surgical site**
Intra-muscular abscess following a procedure

**T81.43 Infection following a procedure, organ and space surgical site**
Intra-abdominal abscess following a procedure
Subphrenic abscess following a procedure

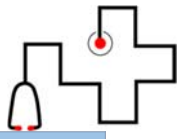
**T81.44 Sepsis following a procedure**
Use additional code code (R65.2-) to identify severe sepsis, if applicable
Use additional code to identify infection

➢ 術後感染病歷書寫，請描述感染部位深度及併發的病況(sepsis..)

| 診斷記錄例如 | 2023 ICD-10建議編碼 |
|---|---|
| Post-OP infection | T81.40 (unspecified) |
| Post-OP wound infection | T81.49 (other specified) |
| Subcutaneous or wound abscess following a procedure<br>Stitch abscess following a procedure | T81.41 (superfacial incisional) |
| Intra-muscular abscess following a procedure | T81.42 (deep incisional) |
| Intra-abdominal abscess following a procedure<br>Subphrenic abscess following a procedure | T81.43 (organ or cavity) |
| Post-OP sepsis | T81.44 + A41.9 (sepsis) |
| Post-OP septic shock | T81.44 + A41.9 + R65.21 (septic shock) |
| **T81.4 Use additional code** code (R65.2-) to identify severe sepsis, if applicable (2014版 & 2023版)<br>**T81.4 Use additional code** to identify infection (2023版) | |
| **T81.4 Excludes 2**<br>bleb associated endophthalmitis (H59.4-)<br>infection due to infusion, transfusion and therapeutic injection (T80.2-)<br>infection due to prosthetic devices, implants and grafts (T82.6-T82.7, T83.5-T83.6, T84.5-T84.7, T85.7)<br>obstetric surgical wound infection (O86.0)<br>postprocedural fever NOS (R50.82)<br>postprocedural retroperitoneal abscess (K68.11) | 2014為Excludes 1,左側代碼不能與T81.4同時編碼<br>2023改為Excludes 2,左側代碼與T81.4可同時編碼 |



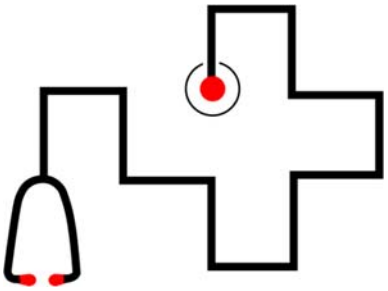
# Procedure converted to open procedure



| 2014 | 2023 | |
|---|---|---|
| Z53.8<br>Procedure and treatment not carried out for other reasons<br>因其他原因而未執行醫療處置或治療 | Z53.31 | Laparoscopic surgical procedure converted to open procedure<br>腹腔鏡手術轉換為開放手術 |
| | Z53.32 | Thoracoscopic surgical procedure converted to open procedure<br>胸腔鏡手術轉換為開放手術 |
| | Z53.33 | Arthroscopic surgical procedure converted to open procedure<br>關節鏡手術轉換為開放手術 |
| | Z53.39 | Other specified procedure converted to open procedure<br>其他手術途徑轉換為開放手術 |

PCS Guidelines B3.2.d

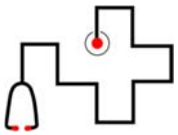
- The intended root operation is attempted using one approach but is converted to a different approach.
- Example: Laparoscopic cholecystectomy converted to an open cholecystectomy coded as percutaneous endoscopic Inspection and open Resection



# X New Technology新技術章節

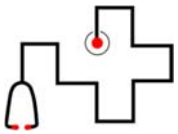


## X章節 New Technology



- 隨著醫療科技的進步及時間的推移而發展，自October 1, 2015起針對New Technology新技術新增Section X章節，以提供特定代碼呈現＂新技術＂
- X章節為獨立代碼而非補充代碼
  - –若代碼描述可完整呈現特定新技術處置，不需要附加其他章節代碼。
  - –當執行多個處置時，X章節代碼附加其他章節代碼以完整呈現。
- 新技術章節(X章節)主要針對下列系統增加特定代碼：
  - –心血管系統
  - –皮膚皮下組織
  - –肌肉肌腱韌帶、骨、關節系統
  - –男性生殖系統等
- 類別區分：
  - –手術類、特材類、藥物類、輸液類與監測/測量類

# X章節代碼組成



- 第2位碼、第3位碼分別為身體系統及處置方式
- 第6位碼為Device / Substance / Technology表示新器材、新設備或是使用新器材或新技術執行的方法。
- 第7位碼為修飾詞表示新技術群組：
- 每年都有新技術的產生，表示代碼新增的年度。例如第一年新增的X章節第7位碼數值為"1" New Technology Group 1，隔年新增X章節其第7位碼數值為"2" New Technology Group 2，以此類推。

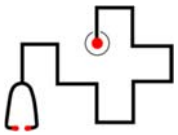
| 年度 | 新技術群組 |
|---|---|
| 2020 | Group 5 |
| 2021 | Group 6 |
| 2022 | Group 7 |
| 2023 | Group 8 |

| | | |
|---|---|---|
| *Section* | **X** | New Technology |
| *Body System* | **2** | Cardiovascular System |
| *Operation* | **7** | Dilation: Expanding an orifice or the lumen of a tubular body part |

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **H** Femoral Artery, Right<br>**J** Femoral Artery, Left | **3** Percutaneous | **8** Intraluminal Device, Sustained Release Drug- | 5 New Technology Group 5 |



# 第7位碼_新技術群組異動



- X章節代碼具靈活性和一致性，允許可收回第3位碼、第4位碼與第6位碼數值。
- 於2022年版已刪除X章節New Technology Group 1代碼，並於內外科章節新增代碼呈現

Orbital Atherectomy動脈軌道旋磨術

X2C0361 [2016版] Extirpation of Matter from Coronary Artery, One Artery using Orbital Atherectomy Technology, Percutaneous Approach, New Technology Group 1

02C03Z7 [2022版] Extirpation of Matter from Coronary Artery, One Artery, Orbital Atherectomy Technique, Percutaneous Approach

Concentrated Bone Marrow Aspirate (CBMA) injection, intramuscular濃縮骨髓抽取物

XK02303 [2018版] Introduction of Concentrated Bone Marrow Aspirate into Muscle, Percutaneous Approach, New Technology Group 3

3E023GC [2022版] Introduction of Other Therapeutic Substance into Muscle, Percutaneous Approach

| 年度 | 新技術群組 | |
|---|---|---|
| 2016 | Group 1 | 已刪除 |
| 2017 | Group 2 | |
| 2018 | Group 3 | |
| 2019 | Group 4 | |
| 2020 | Group 5 | |
| 2021 | Group 6 | |
| 2022 | Group 7 | |
| 2023 | Group 8 | |

Coding Clinic2021, Q4, p57

# XD2_ Monitoring of tissue oxygen saturation in gastrointestinal tract

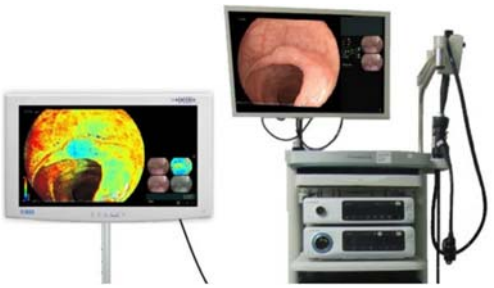
監測消化道血氧飽和度，第7群新科技

| | | |
|---|---|---|
| *Section* | **X** | New Technology |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **2** | Monitoring: Determining the level of a physiological or physical function repetitively over a period of time |

新科技_Technology

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **G** Upper GI<br>**H** Lower GI | **4** Percutaneous Endoscopic<br>**8** Via Natural or Artificial Opening Endoscopic | **V** Oxygen Saturation | **7** New Technology Group 7 |

- 新科技代碼XD2適用於腸胃道手術期間使用2D 內視鏡圖像可視化系統，監測腸胃道表淺組織中血液的血紅蛋白氧飽和度(StO2)。
- 該技術可幫助醫生識別未適當充氧的潛在缺血組織。
- 如有任何伴隨的外科手術應分開編碼。



AHA Coding Clinic,2021,Q4,P63



# XDP_Colonic irrigation for colonoscopy

經自然開口或人工造口內視鏡下腸胃道使用術中一次性使用袖套灌洗，第7群新科技

| | | |
|---|---|---|
| *Section* | **X** | New Technology |
| *Body System* | **D** | Gastrointestinal System |
| *Operation* | **P** | Irrigation: Putting in or on a cleansing substance |

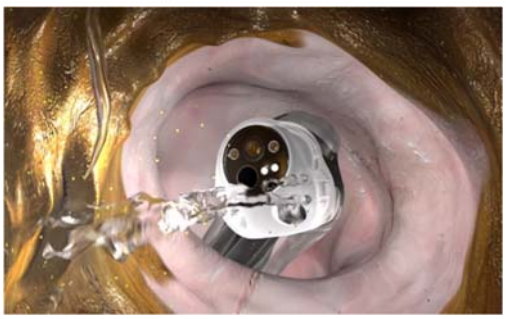
新科技_ Technology

| *Body Part* | *Approach* | *Device / Substance / Technology* | *Qualifier* |
|---|---|---|---|
| **H** Lower GI | **8** Via Natural or Artificial Opening Endoscopic | **K** Intraoperative Single-use Oversleeve | **7** New Technology Group 7 |

**結腸鏡檢查術中使用一次性袖套進行結腸沖洗**

Pure-Vu® 系統是一種連接結腸鏡具袖套的高強度術中清潔裝置。

- ✓ 經由脈衝渦流沖洗結腸壁，分解糞便、血凝塊和其他碎片。
- ✓ 同時通過兩個抽吸通道清除碎片。
- ✓ 適應症包括無法進行充分腸道準備的下消化道出血。



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https://www.medgadget.com/2016/10/pure-vu-colonoscopy-system-cleansing-dirty-colons.html

# XFJ_single-use duodenoscope during ERCP

經自然開口或人工造口內視鏡肝膽管/胰管視查術，使用一次性使用十二指腸鏡，第7群新科技

| | | | | |
|---|---|---|---|---|
| *Section* | **X** | New Technology | 新科技_Device | **Single-use Duodenoscope** XFJ |
| *Body System* | **F** | Hepatobiliary System and Pancreas | | |
| *Operation* | **J** | Inspection: Visually and/or manually exploring a body part | | |
| *Body Part* | | *Approach* | *Device / Substance / Technology* | *Qualifier* |
| **B** Hepatobiliary Duct<br>**D** Pancreatic Duct | | **8** Via Natural or Artificial Opening Endoscopic | **A** Single-use Duodenoscope | **7** New Technology Group 7 |

- 內視鏡逆行性膽胰管攝影術/ERCP，是藉由十二指腸鏡進入十二指腸壺腹處，再經內視鏡管腔將導管放入膽胰管內，注入顯影劑顯現膽胰管內的病灶，進行診斷及後續的治療。
- 使用一次性使用十二指腸鏡可減少重複使用之感染風險。
- 可加編ERCP(BF1)或有進一步的治療性處置應先編碼。


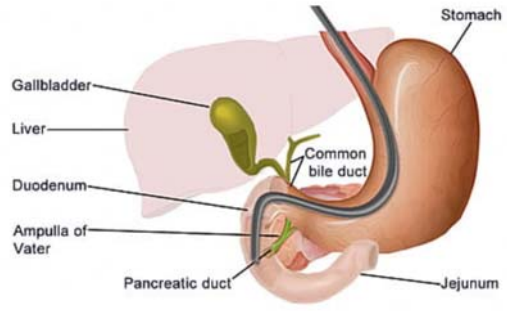


Illustration depicting an ERCP procedure.

AHA Coding Clinic,2021,Q4,P65



# XF5_ Extracorporeal histotripsy of targeted liver tissue using ultrasound-guided cavitation

經由外部肝臟破壞術，使用超音波導引空蝕，第8群新科技

**Histotripsy, liver** *see* New Technology, Hepatobiliary System and Pancreas XF5

| | | | | |
|---|---|---|---|---|
| *Section* | **X** | New Technology | 新科技_ Technology | |
| *Body System* | **F** | Hepatobiliary System and Pancreas | | |
| *Operation* | **5** | Destruction: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent | | |
| *Body Part* | | *Approach* | *Device / Substance / Technology* | *Qualifier* |
| **0** Liver<br>**1** Liver, Right Lobe<br>**2** Liver, Left Lobe | | **X** External | **0** Ultrasound-guided Cavitation | **8** New Technology Group 8 |

- Histotripsy是一種非侵入性、非熱超音波導引消融技術，用於治療肝細胞癌。
- 超音波在液體中形成小真空泡或空腔，稱為空化，當氣泡不再吸收能量時，它們會內爆並破壞目標組織。

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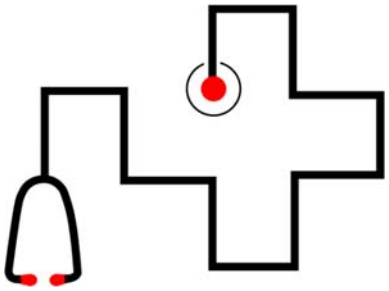

# 感謝聆聽　敬請指教