

ANEMIA

ICD-9 CODE	ICD-9 DESCRIPTION	ICD-10 CODE	ICD-10 DESCRIPTION	DOCUMENTATION CONCEPTS
285.9	<p style="text-align: center;"> Not a complete list </p> <p>Anemia, unspecified</p>		<p style="background-color: #008000; color: white; padding: 5px;">More specific ICD-10 options include:</p> <p>D64.9 Anemia, unspecified</p> <p>D62 Acute posthemorrhagic anemia</p> <p>D50.9 Iron deficiency anemia, unspecified</p> <p>D53.8 Other specified nutritional anemias</p> <p>D64.81 Anemia due to antineoplastic chemotherapy</p> <p>D61.9 Aplastic anemia, unspecified</p> <p>D59.9 Acquired hemolytic anemia, unspecified</p> <p>I97.611 Postprocedural hemorrhage and hematoma of circulatory system organ or structure following CABG</p>	<p><u>Type</u></p> <p>Nutritional (specify vitamin and/or mineral deficiency)</p> <p>Hemolytic (hereditary, acquired, enzyme disorder, autoimmune, or non-autoimmune or due to other condition)</p> <p>Aplastic (acquired, drug-induced, congenital, idiopathic, etc.)</p> <p>Blood loss (due to...)</p> <p><u>Acuity</u></p> <p>Acute</p> <p>Chronic</p> <p>Acute on chronic</p> <p><u>Underlying cause (etiology)</u></p> <p>Postoperative / postprocedural (specify if complication or expected blood loss)</p> <p>CKD or other chronic disease</p> <p>Trauma</p> <p>Ulcer</p> <p>Malignancy</p> <p>Chemotherapy or other drug-induced</p> <p>Unknown cause, etc.</p> <p><u>Link findings to a diagnosis</u></p> <p>Low vitamin B12 due to pernicious anemia</p> <p>Leukocytosis due to hereditary hemolytic anemia</p>

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ICD-9 DESCRIPTION	ICD-10 DESCRIPTION
<p>INAPPROPRIATE DOCUMENTATION EXAMPLE</p>	<p>APPROPRIATE DOCUMENTATION EXAMPLE</p>
<p>Diagnosis: 285.9 Anemia, unspecified</p> <p>HPI: Patient follow-up visit for complaints of chronic fatigue and weakness. Associated symptoms: Shortness of breath, occasional lightheadedness when standing. Pallor noted; mild postural hypotension. BP 120/70 sitting, 102/68 standing. Recent labs with low serum iron, increased TIBC. Pertinent negatives: No cough, no fever. Lungs clear to auscultation. Compliance with medications: Compliant. Social history: Nonsmoker. No alcohol.</p> <p>Assessment/Plan: Anemia. On OTC ferrous sulfate, 325 mg daily with meal. Patient Education: Dietary Supplement fact sheet: Iron. Repeat serum iron, chemistry profile, TIBC level in 3 months.</p> <div data-bbox="144 899 963 974" style="background-color: red; color: white; padding: 5px; text-align: center;"> <p>Concept(s) requirement not met: no type, acuity or relationship underlying cause</p> </div>	<p>Diagnosis: D50.8 Other Iron deficiency anemia (due to nutrition)</p> <p>HPI: Patient follow-up visit for complaints of chronic fatigue and weakness. Associated symptoms: Shortness of breath, occasional lightheadedness when standing. Pallor noted; mild postural hypotension. BP 120/70 sitting, 102/68 standing. Recent labs with low serum iron, increased TIBC are indicative of Iron deficiency anemia; suspect nutritional deficiency rather than malabsorption. Pertinent negatives: No cough, no fever. Lungs clear to auscultation. Compliance with medications: Compliant. Social history: Nonsmoker. No alcohol.</p> <p>Assessment/Plan: Nutritional iron-deficiency anemia (chronic). On OTC ferrous sulfate, 325 mg daily with meal. Patient Education: Dietary Supplement fact sheet: Iron. Repeat serum iron, chemistry profile, TIBC level in 3 months</p> <div data-bbox="1089 899 1980 974" style="background-color: green; color: white; padding: 5px; text-align: center;"> <p>Concept(s) requirement met: type, acuity and relationship to underlying cause</p> </div>