## URINARY TRACT INFECTION (UTI)

<table>
<thead>
<tr>
<th>ICD-9 CODE</th>
<th>ICD-9 DESCRIPTION</th>
<th>ICD-10 CODE</th>
<th>ICD-10 DESCRIPTION</th>
<th>DOCUMENTATION CONCEPTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>599.0</td>
<td>Urinary tract infection, site not specified</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

More specific ICD-10 choices include:

- **R30.0** Dysuria
- **R30.9** Painful micturition, unspecified
- **N39.0** Urinary tract infection, site not specified
- **N30.00** Acute cystitis w/o hematuria
- **N30.01** Acute cystitis with hematuria
- **N30.10** Interstitial cystitis (chronic) without hematuria
- **N30.11** Interstitial cystitis (chronic) with hematuria
- **N31.40** Irradiation cystitis without hematuria
- **N31.41** Irradiation cystitis with hematuria
- **N15.9** Renal tubule-interstitial disease, unspecified

**Site:**
- Bladder
- Urethra or ureter
- Kidney

**Type:**
- Pyelonephritis (obstructive, reflux uropathy, drug or heavy metal induced)
- Cystitis (obstructive, interstitial, trigonitis, irradiation, etc.)

**Acuity:**
- Acute, chronic or acute on chronic

**Causal organism:**
- E. Coli, Enterococcus
- Klebsiella pneumoniae
- Pseudomonas, Candida
- Gonococcal, Chlamydial
- MRSA, MSSA, other, etc.

**Complication (due to):**
- Indwelling Foley catheter
- Cystostomy or nephrostomy tube
- Suprapubic catheter
- Urethral stents or other devices
- Postoperative / postprocedural, etc.

**Associated conditions:**
- Hydronephrosis (due to ureteral stricture, calculus obstruction, reflux nephropathy, hydroureter, etc.)
- Urethritis
- Hematuria
# URINARY TRACT INFECTION (UTI)

<table>
<thead>
<tr>
<th>ICD-9 DESCRIPTION</th>
<th>ICD-10 DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INAPPROPRIATE DOCUMENTATION EXAMPLE</strong></td>
<td><strong>APPROPRIATE DOCUMENTATION EXAMPLE</strong></td>
</tr>
<tr>
<td><strong>Diagnosis:</strong> 788.1 Dysuria</td>
<td><strong>Diagnosis:</strong> N30.01 Acute cystitis with hematuria</td>
</tr>
<tr>
<td><strong>HPI:</strong> This is the patient's initial GU exam. Progression since onset is unchanged.</td>
<td><strong>HPI:</strong> This is the patient's initial GU exam. Progression since onset is unchanged.</td>
</tr>
<tr>
<td><strong>Associated symptoms:</strong> “burning” with urination, urgency, frequency, odor, past 7 days.</td>
<td><strong>Associated symptoms:</strong> Dysuria, urinary urgency, frequency, odor, past 7 days.</td>
</tr>
<tr>
<td><strong>Pertinent negatives:</strong> No vaginal discharge or vaginal bleeding.</td>
<td><strong>Pertinent negatives:</strong> No vaginal discharge or vaginal bleeding.</td>
</tr>
<tr>
<td><strong>Sexual activity:</strong> Sexually active, monogamous relationship. No history of prior STD.</td>
<td><strong>Sexual activity:</strong> Sexually active, monogamous relationship. No history of prior STD.</td>
</tr>
<tr>
<td><strong>Partner with STD symptoms:</strong> No.</td>
<td><strong>Partner with STD symptoms:</strong> No.</td>
</tr>
<tr>
<td><strong>Assessment/Plan:</strong> Dysuria, UA cloudy, +LE, +bacteria, +nitrates, +RBCs, WBCs&gt;50. Bactrim DS PO tablet; Take 1 tablet by mouth 2 times a day for 10 days.</td>
<td><strong>Assessment/Plan:</strong> Acute cystitis with hematuria. Temp 100.1 °F, other VS unremarkable. UA with micro positive for UTI; urine culture to lab; treat for acute bladder infection with Bactrim DS PO. Take 1 tablet by mouth 2 times a day for 10 days. Dispense: 20 tablets; Refill: 0. Return for follow up care if symptoms do not improve within 5 days.</td>
</tr>
</tbody>
</table>

**Concept(s) requirement not met:** No type, no site, no acuity, no complications, no causal organism, no associated conditions

**Concept(s) requirement met:** type, site, acuity, associated conditions