Documentation Dissection

CC: Abdominal Pain.

HPI: 23-year-old female, established patient presenting with abd pain for the last 3 days. Patient rates the pain at an 8/10 and has been alternating Tylenol and ibuprofen for pain without relief. Some urinary frequency and burning with urination. Some Nausea but no emesis. LMP was 6 weeks ago. Patient states she is irregular with her menstrual cycle. She is not currently taking birth control and is sexually active.

ROS: No Fever, Complains of abd pain in lower quadrants with some nausea, no vomiting or diarrhea, Complains of frequency and dysuria.

PSFH: Patient is single and works in a department store. No use of alcohol or tobacco. She is up to date on all immunization including influenza vaccine. Patient had an appendectomy at the age of 17. Not currently taking any medication and no known drug allergies.

Exam: Vitals: Pulse 89 Temp 97.9 BP 112/78 Height/Weight 65' 142 lbs Sats 98%

Eyes: Normal, Resp: Normal, CV: Normal, GU: suprapubic pain, no cva tenderness, Neuro: Normal, Pysch: Normal

Orders: Automated UA without microscope/ Urine HCG |1|

Urine sample collected from patient |1|

Results: Urine HCG: Controls good Results: Negative |1|

UA: Leukocytes: Large Nitrites: Positive SPGR: 1.025 Blood: Trace Urine Cloudy [1]

DX: Acute Cystitis |2|

Orders/Results for Urinalysis and HCG Pregnancy.

^[2] Diagnosis.

What are the lab CPT* and ICD-10-CM codes reported?

CPT® Codes: 81003-QW, 81025

ICD-10-CM Code: N30.01

Rationales:

CPT°: In the CPT° Index look for Urinalysis referring you to code range 81000–81099. Two type of urine tests were performed, automated urinalysis without microscope, 81003 and a urine HCG pregnancy test, code 81025. 81003 is a CLIA waived lab and you would need to append modifier QW to that lab.

ICD-10-CM: Alphabetic Index look up Cystitis/Acute leads to N30.0. Verification in the Tabular Index indicated a 5th character is needed to specify with or without hematuria. Trace of blood is shown in urinalysis and N30.01, Acute cystitis, with hematuria is correct. Hematuria does not make a distinction between gross and microscopic blood.