Procedure: Bronchoscopy with bronchoalveolar lavage

Indications: Ventilator associated pneumonia

Medicines: Fentanyl 150 mcg, Versed 4 mg

Complications: No immediate complications

Procedure: After obtaining informed consent, the bronchoscope was introduced through the mouth via the ET tube and tracheobronchial tree was examined.

Findings: The endotracheal tube is in good position. The visualized portion of the trachea is of normal caliber. The carina is sharp. The tracheobronchial tree was examined to at least the first subsegmental level. Bronchial mucosa and anatomy are normal; there are no endobronchial lesions, and no secretions.

Bronchoalveolar lavage was performed in the LUL superior lingular segment (B4) and sent for cell count, bacterial culture, viral smears, fungal culture, fungal AFB analysis and compromised host protocol. 90 mL of saline fluid was instilled. 20 ml were returned. The return was blood-tinged. Mucous plugs were present in the return fluid.

Impression: Ventilator associated pneumonia

The examination was normal.

Bronchoalveolar lavage was performed on the LUL.

Recommendation: Await BAL results.

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

CPT® Code: 31624

ICD-10-CM Code: J95.851

Rationales:

CPT®: In the CPT Index look for Lavage/Lung/Bronchial guiding you to code 31624. This is the correct code because the operative report indicates that a bronchoalveolar (bronchial alveolar) lavage is performed in the LUL. This was not a total lavage 32997.

ICD-10-CM: Ventilator-associated pneumonia (VAP) is a lung infection that develops in a person who is on a ventilator. A ventilator is needed when a patient is very ill or during and after surgery. An infection may occur if germs enter through the tube and get into the patient’s lungs. Ventilators can be life-saving, but they can also increase a patient’s chance of getting pneumonia by making it easier for germs to get into the patient’s lungs.
In the Alphabetic Index look for Pneumonia/ventilator associated referring you to code J95.81. The Tabular List verifies this is the correct code to report. If we had the results of the lavage, you can report an additional code to identify the organism. Do not report dependence on respirator [ventilator] Z99.1. See Guideline I.C.21.c.3. Status which indicates that a status code should not be used when it does not supply additional information.

**ICD-9-CM Application**

What ICD-9-CM code(s) is/are reported?

**ICD-9-CM Code:** 997.31

**Rationale:** In the Alphabetic Index look for Pneumonia/ventilator associated referring you to code 997.31. The Tabular List verifies this is the correct code to report. If we had the results of the lavage, you can report an additional code to identify the organism. Do not report dependence on respirator [ventilator] V46.11. See Guideline I.C.18.d.3. Status, which indicates that a status code should not be used when it does not supply additional information.