c Coding: Introduction to ICD-9-CM Key Words

ADDENDA-List of new, revised, and deleted diagnosis codes

ADVERSE EFFECT-Unintentional harmful reaction to proper dosage of drugs

ALPHABETIC INDEX-Medical terms in Tabular List. List of common terms, organized by condition. Look here first, but do not ever code from this listing

CATEGORY-Three digit code that covers a single condition

CHIEF COMPLAINT (CC)-Medical reason that the patient presents for that particular visit in his own words

CHRONIC-Condition continues over a long period of time or re-occur frequently

CO-EXISTING-Conditions occur the same time as the primary diagnosis. Affects the treatment or recovery from the primary diagnosis

COMBINATION CODE-Describes both the etiology and manifestation using one code

CODING SIGNS AND SYMPTOMS-When a final or primary diagnosis has not been assigned,

Code sign: objective-indication that can be evaluated by the physician Code symptom: pain, weight loss, weight gain

CONVENTION-Typographic techniques standard practices that provide visual guidelines for understanding printed material and symbols

CROSS REFERENCE "SEE"-Must refer to term that follows

CROSSWALK-Printed or computerized resources that connects two sets of data

DIAGNOSTIC STATEMENT-Medical term describing the condition for which the patient is receiving care. The main reason for the encounter given by the physician

E-CODES-Identify external causes of injuries and poisonings

EPONYM-Conditions or diseases named for a person or procedure

ETIOLOGY-The cause or origin

ICD-9-CM-International Classification of Diseases, 9th Edition, Clinical Modification-Mandated by HIPAA

INCLUDES-Notes in the ICD-9-CM tabular list indicate conditions that are classifiable to the above code

LATE EFFECT-Condition that remains after a patient's acute illness or injury has ended. Often called residual.

Effects happen soon after the disease is over or can occur later. Requires two codes. One for the late effect and the other for the cause

MAIN TERM-Printed in bold face and followed by a code

ology and second for the manifestation, the disease. Typical ter a term []

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NEC-NOT ELSEWHERE CLASSIFIED-No code that a specific for the condition. No code matches the exact situation

NEOPLASM TABLE-Cancer-Carcinomas, Malignant, Benign, Uncertain, Unspecified

NOS-NOT OTHER SPECIFIED CODE-Code to be used when too little information is available to assign a more specific code

PRIMARY DIAGNOSIS-Patients most serious condition, regardless of the reason for the encounter. MUST be coded first.

RULE OF NINES-Used for coding burns

SEE-Must refer to term that follows

SEE ALSO-May look up related terms that follow

SEE ALSO CATEGORY-See related category

SUBCATEGORY-4 digit subdivision of a category

SUBCLASSIFICATION-5 digit subdivision of a subcategory

SUBTERM-Below the main term

SUPPLEMENTARY TERMS-For main term in alphabetic index are shown in (). Are non-essential to selection of a correct code and are often referred to non-essential modifiers

TABULAR LIST-List of diagnosis codes in numeric order by category. Code from here

UNSPECIFIED-Condition is not completely described

V-CODES-Encounters that are not due to illness and factors that influence the patient's health status