

Deep Vein Thrombosis

Deep Vein Thrombosis (DVT) occurs when a blood clot forms in the deep veins, primarily in the legs, potentially causing blockage and symptoms like swelling, pain, redness, and warmth. This condition primarily affects older adults, but anyone can develop DVT, especially those with risk factors like immobility, recent surgery, pregnancy, genetic conditions, or certain medications. A dislodged clot, called an embolism, can travel to vital organs like the lungs, heart, or brain, causing life-threatening complications. An acute DVT refers to a new clot necessitating initial anticoagulation therapy, chronic DVT represents a pre-existing clot requiring ongoing treatment. Conversely, historical DVT indicates the absence of a current clot but the continued use of blood thinners for preventive measures. Accurate documentation and coding of DVT ensure the proper reflection of a patient's health status and guide appropriate management strategies.

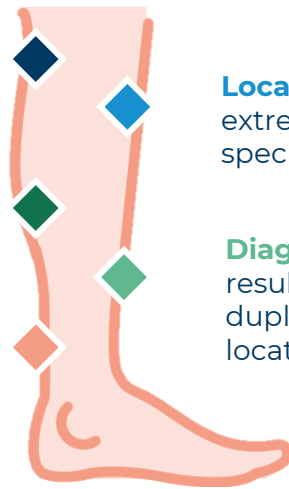
Best Documentation Practices

Acuity: State if acute (new and symptomatic) or chronic (established and requiring ongoing anticoagulation)

Note: Recurrent is not synonymous with chronic

Symptoms & Exam: Document present symptoms, physical exam findings and relevant medical history including risk factors for DVT

Plan: Document prescribed anticoagulation therapy including medication type, dosage, and duration and specify time for follow up visit for monitoring and further evaluation



Location: Specify the affected extremity, side of the body, and the specific vein affected

Diagnostic Findings: Include test results of diagnostic tests such as duplex ultrasound including the location and extent of the thrombus

M.E.A.T. the Condition

Proper documentation requires at least one of these four elements be present in the documentation for each condition



How is the patient doing?

Document signs, symptoms, disease progression/regression or ongoing surveillance



What is the current state of the condition?

Document current state, test results, medication effectiveness or response to treatment



How will the condition be evaluated?

Document discussion, review of records, counseling, or ordering further tests



What is being done to help the condition?

Document care, prescribed medications, referral to specialist or other modalities

CMS requires **annual coding and reporting of all chronic conditions**. A condition is not considered present in a given year unless it's appropriately documented and coded in that year.

Deep Vein Thrombosis ICD-10 Category Reference Guide

This list of ICD-10 codes (containing some incomplete codes) is not exhaustive. Refer to the current version of the ICD-10-CM Official Guidelines for Coding and Reporting, the ICD-10-CM Index to Diseases and Injuries, and the Tabular List of Diseases for a list of all ICD-10-CM codes and coding instructions. Copies of the Risk Adjustment models can be found at www.cms.gov/medicare/payment/medicare-advantage-rates-statistics/risk-adjustment.

Deep Vein Thrombosis

I82.2XX	Embolism and thrombosis of vena cava and other thoracic veins
I82.4XX	Acute embolism and thrombosis of deep veins of lower extremity
I82.5XX	Chronic embolism and thrombosis of deep veins of lower extremity
I82.62X	Acute embolism and thrombosis of deep veins of upper extremity
I82.72X	Chronic embolism and thrombosis of deep veins of upper extremity
I82.AXX	Embolism and thrombosis of axillary vein
I82.BXX	Embolism and thrombosis of subclavian vein
I82.CXX	Embolism and thrombosis of internal jugular vein
Z86.718	Personal history of other venous thrombosis and embolism

Coding Example 1

Documentation

Reason for Visit: Follow up of DVT.

HPI: Patient symptomatic of DVT 4 months ago. Imaging in the hospital confirmed a DVT in the femoral vein of his right leg. He was discharged on Xarelto. Repeat ultrasound last month still showed evidence of chronic thrombosis in the femoral vein.

Assessment & Plan: Chronic DVT right femoral vein – Continue Xarelto. If pain, redness or swelling, he is to go directly to the hospital for evaluation. Otherwise, will see him next month for repeat ultrasound.

ICD-10 Code(s)

I82.511 Chronic embolism and thrombosis of right femoral vein

Rationale

The diagnosis of Chronic DVT of the right femoral vein is appropriately supported as documented by the clinician. The key elements—location, chronicity, and ongoing treatment—are all present and appropriately supported within the HPI and Assessment.

Coding Example 2

Documentation

Reason for Visit: History of DVT.

Subjective: Patient reports feeling well, denies lower extremity pain, swelling or redness. Good compliance with Xarelto and will complete his current regimen next week.

Ultrasound (RLE): Report reviewed. Femoral vein patent, no evidence of thrombus.

Assessment & Plan: History of DVT – Resolved. Xarelto therapy complete next week.

ICD-10 Code(s)

Z86.718 Personal history of other venous thrombosis and embolism

Rationale

With the completion of therapy and imaging confirming vessel patency, the DVT is now considered resolved.

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NOTE: This tool is intended to assist with documentation only and not intended to take the place of clinical analysis. Information regarding any law or regulation does not constitute legal or tax advice and is subject to change based upon the issuance of new guidance and/or change in laws or regulations. Reference Official ICD-10-CM coding guidelines and manuals or electronic medical coding software for accurate ICD-10-CM codes and specificity.

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