ICD-10 Clinician Coding Primer Chronic Pain and Substance Abuse



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1. Chronic Pain - Initial Eval - Coding

S: 44 yo male referred by Workers Comp doctor for chronic pain evaluation and management. Four year old LS injury with three different surgical interventions over 18 mos. L2-S1 pain, leg pain (L) and numbness with left foot drop. Full history, exam and review of outside records completed... No meds past 30 days.

1. G89.4 Chronic pain syndrome

2. M54.5 Lumbago/low back pain

3. Z51.81 Therapeutic drug monitoring

4. Z79.899 Management high-risk med

P: Continue Norco 7.5-325mg TID (ran out 4 wks ago.) Robaxin 500mg/TID. Pt is motivated, drug screen appropriate. Contract signed. PT eval, EMG and Labs ordered. CT and MRI ordered. RTN 3wk.

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2. Chronic Pain + Codes

S: 52 yo chronic pain x 3 years, with DM2 uncontrolled orals and insulin, kidney infection - treated by *Renal Health*. After long discussion pain not controlled, using cannabis to "self medicate"- renal vs. MS?? - repeat UA & culture.

Assessment: Diagnosis(as) and ICD-10 codes

- 1. G89.29 Chronic pain
- 2. M45.2 Cervical spondylitis (not on sheet) Norco 5-325 90, TID
- 3. E11.65 DM 2 uncontrolled inc. Lantus 70u AM, 42u PM
- 4. Z79.4 Long term insulin -increase scale 1u for each level
- 5. F12.90 Cannabis use

CP "Syndrome" not mentioned? Therapeutic drug monitoring & high-risk med not mentioned?

Where is code for UA and culture??

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3. Bipolar w/substance abuse - Codes

S: 45 yo with long-standing bipolar disease mixed with increase problems with alcohol dependence. Stress r/t to daughter's meth addiction... Increased insomnia... She says mood is stabilizing, thinks she should increase Trileptal.... Some remission at this point.

Assessment

- 1. F31.77 Bipolar, partial remission, most recent episode mixed [Active] Trileptal 300mg
- 2. F10.20 versus F10.282? Alcohol dependence
- 3. G47.00 Insomnia, worsening Atarax

Plan: Drug screen today appropriate. Start Atarax. Back to AA. Continue therapy, return 3 weeks. No alcohol.

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4. Substance - Codes

S: 28 yo female FU meth addiction - one year chip tonight! Also FU for Hep C? - our last labs show no virus detected and LFTs only slightly above normal. Now she wants to quit smoking.

Assessment:

- 1. F15.21 Meth in remission one year
- 2. R79.9 Abnormal labs, monitor for Hep C?
- 3. F17.210 Nicotine dependence/cigarettes

FU on labs, and call patient. Return 8 weeks unless problems. Nicoderm patches.

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5. Methamphetamine Relapse - Story

S: 27 yo presents with meth relapse..just got out of jail, was depressed..drinking pint a day of whiskey along with meth...Family hx of alcoholism...the last two weekends used some heroin..kids saw her loaded...is scheduled for therapy with BH. Homeless

A: Amphetamine dependence , Dysthymia

P: Discussed with patient whether she was "done" using. Discussed this needs to be her work, and what is it about meth/alcohol that works for her. Did get a sponsor who is several years sober. To social worker for housing.

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5. Meth. Relapse + - Codes

S: 27 yo presents with meth relapse..just got out of jail, was depressed..drinking pint a day of whiskey along with meth...Fhx of alcoholism...the last two weekends used some heroin..kids saw her loaded...is scheduled for therapy with BH... Homeless.

I10 Assessment

- 1. F15.20 Stimulant dependence
- 2. F10.10 Alcohol abuse, uncomplicated
- 3. F11.90 Opioid use, uncomplicated
- 4. F34.1 Dysthymia, (not on sheet)
- 5. Z81.1 Family history of alcoholism
- 6. Z59.0 Homeless

P: Discussed with patient whether she was "done" using. Discussed this needs to be her work, and what is it about meth/alcohol that works for her. Did get a sponsor who is several years sober. To social worker re housing.

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6. Pregnancy/Substance - Code

S: 24 yo pregnant female (2nd trimester). FU buprenophine treatment for opiate addition. Complete eval and hx reviewed with her...a little rough lately... needed to take 2nd dose early (feels sick) concerned about going up on dose (withdrawl) Has been at XXX Center for 3 mos, will stay through delivery...164 days clean. Continues with addiction counselor. Dr. XXX sees weekly for pregnancy.

A: 1. 099.322 Pregnancy with drug addition 2. F11.20 Opiate addition

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7. Non-compliance Story & Codes

36 yo SA client who was N/S for past two appointments comes in today requesting form completion of form for a parking sticker. Note: This homeless patient has lifetime suspension on driving privileges. Drug screen today reveals heroine and meth an sedatives... Is alcohol intoxicated. Disability parking sticker not issued. Patient became verbally aggressive and was encouraged to leave and told to find other medical care elsewhere and to go to the ED in the event of an emergency. Hotline phone number provided.

Assessment: Polysubstance abuse

- 1. F11.24 Opiate addiction with mood disorder
- F15.20 Stimulant dependences
- 3. F13.14 Sedative abuse with mood disorder
- F10.220 Alcohol intoxication
- F10.220 Alcohol intoxication
 Z91.19 Noncompliance with medical treatment

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