Morbidity Coding

- Facts and figures
  - ICD-9 – ICD-9-CM-A II
  - ICD-10 – ICD-10-AM 1st, 2nd, 3rd and 6th
- Clinical coding in New Zealand
  - Exercise
  - Examples
- Classification changes
- Data quality
Facts and Figures

1969 – ICD-8
1980 – ICD-9
1988 – ICD-9-CM
1995 – ICD-9-CM-A
1999 – ICD-10-AM 1st
2001 – ICD-10-AM 2nd
2004 – ICD-10-AM 3rd
2008 – ICD-10-AM 6th
ICD-9 vs ICD-9-CM

ICD-9 World Health Organization (WHO) International Classification of Diseases – Ninth Revision
- Classify morbidity and causes of death

ICD-9-CM (Clinical Modification) – American
More detail and included procedure classification
Three volume set
- Disease - Tabular list (1) and Alphabetic index (2)
- Procedure - Tabular list and Alphabetic index (3)
Implemented in New Zealand 1 July 1988
ICD-9-CM-A (Australian version)

- Included a fourth volume
  - The Australian Coding Standards
- Australian English spelling
- Addition of fifth characters, new codes

1st Edition – implemented 1 July 1995
2nd Edition – implemented 1 July 1996

Clinical code system = 06
  - Total codes 21,593

New section for activity E889.-
E889 Type of sporting activity

The following codes must be assigned as additional codes with E886.0 *Fall on same level from collision, pushing, or shoving, by or with other person in sport* and E917.0 *Striking against or struck accidentally by objects or persons, in sports* to indicate the sporting activity of the injured person at the time the event occurred. This category may also be used with other external cause codes as appropriate. This category should not be confused with, or be used instead of, the place of occurrence category E849. To ensure consistency for sports injury surveillance data, codes E889.0–E889.8 should not be assigned for sports which are similar to those listed in those categories, e.g. tennis, although those similar to squash should be assigned code E889.9.

☆☆ E889.0 Football, Rugby League Union

☆☆ E889.1 Football, Australian

☆☆ E889.2 Football, Soccer

☆☆ E889.3 Hockey Field hockey

(Excludes) ice hockey (E889.9)

☆☆ E889.4 Squash

☆☆ E889.5 Basketball

☆☆ E889.6 Netball

☆☆ E889.7 Cricket

☆☆ E889.8 Roller blading Roller skating Skateboarding

☆☆ E889.9 Other and unspecified sporting activity
ICD-10 vs ICD-10-AM

ICD-10
World Health Organization (WHO) 1989
Disease classification only
Alphanumeric
Three volume
ICD-10-AM 1st Edition

Australian Modification (based on ICD-10)
Five volume set
Procedure code increased to seven characters
Block convention
Place of occurrence – 4th character
Activity – 5th character
Implemented in New Zealand 1 July 1999
  ➢ Australia 1 July 1998
Clinical code system = 10
  ➢ Total codes – 40,701
ICD-10-AM 2nd Edition

Implemented in New Zealand 1 July 2001
- Australia 1 July 2000

Created unique codes for:
- Place of occurrence (Y92.-)
- Activity (Y93.-)

Clinical code system = 11
- Total codes – 20,731
ICD-10-AM 3rd Edition

Implemented in New Zealand 1 July 2004
  ➢ Australia 1 July 2002

Activity – U category
  ➢ U50-U72   While engaged in sports or leisure
  ➢ U73      While engaged in other activity

Clinical code system = 12
  ➢ Total codes – 22,617
ICD-10-AM 6th Edition

Implemented in New Zealand 1 July 2008
  ➢ Australia 1 July 2008

Reference change
  ➢ No longer referred to as volumes
  ➢ ICD-10-AM – Classification of Diseases
  ➢ ACHI – Australian Classification of Health Interventions
  ➢ ACS – Australian Coding Standards

Clinical code system = 13
  ➢ Total codes – 23,321
## Summary of Codes

<table>
<thead>
<tr>
<th></th>
<th>6th</th>
<th>3rd</th>
<th>2nd</th>
<th>1st</th>
<th>9-CMAII</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>23,321</td>
<td>22,617</td>
<td>20,731</td>
<td>40,701</td>
<td>21,593</td>
</tr>
<tr>
<td><strong>S – T</strong> (Injury)</td>
<td>1,788</td>
<td>1,784</td>
<td>1,783</td>
<td>1,789</td>
<td>2,405</td>
</tr>
<tr>
<td></td>
<td>(800-999)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ext</strong> (Accident)</td>
<td>3,090</td>
<td>2,896</td>
<td>1,418</td>
<td>21,066</td>
<td>5,891</td>
</tr>
<tr>
<td></td>
<td>(U-Y98)</td>
<td>(U-Y98)</td>
<td>(V01-Y98)</td>
<td>(V01-Y98)</td>
<td></td>
</tr>
<tr>
<td><strong>POO</strong></td>
<td>60</td>
<td>52</td>
<td>12</td>
<td>10 char</td>
<td>E849.--</td>
</tr>
<tr>
<td><strong>Activity</strong></td>
<td>240</td>
<td>236</td>
<td>16</td>
<td>7 char</td>
<td>E889.--</td>
</tr>
</tbody>
</table>
Reporting

ICD-9-CM

- Total of 3 diagnoses and 3 procedures each
- Free text in Patient Management System

ICD-9-CM-A 1995

- Total combination of 25 diagnoses and procedures
- 3M Codefinder – interfaced with PMS
- Decrease in free text on code descriptions

1 July 1998

- Total combination of 99 diagnoses and procedures
Morbidity Coding in New Zealand Public Hospitals
How many

- DHBs
- Hospitals
- Coders

Average discharges

- ~200 – ~10,000 per month
  (inpatients and day patients)
Clinical Coders

How many per hospital

1 – 30

Background

- Workforce
- Training
- Qualifications
Clinical Coding Process

Patient is discharged from hospital facility

Completes discharge summary
Clinical Coding Process

‘The responsibility for recording accurate diagnoses and procedures, in particular principal diagnosis, lies with the clinician, not the clinical coder’

Sent to clinical coding – sorted and stored
Clinical Coding Process

The main aim of coding is:

To translate medical statements into code

Clinical coders have to ensure the clinical record content justifies the assignment of diagnoses and procedures
Clinical Coding Process

Clinical coder reviews all documents for the episode of care

- Entire clinical record
- Discharge summary
- Ambulance, ED notes, ACC45, referral
- Clinical notes (clinician, nurse, other disciplines)
- Operation reports – medical/surgical
- Laboratory results
- Radiology reports
- Clinical letters
Clinical Coding Process

Clinical coder extracts and confirms diagnoses, procedures and external cause

1 – 99 codes can be assigned

Consult clinician to confirm

- Inconsistent or ambiguous documentation
- Investigations/results
Clinical Coding Process

Clinical coder searches and assigns ICD-10-AM/ACHI codes

- 3M Codefinder
- eBook
- Manuals

Apply appropriate coding standards conventions and sequencing guidelines
ACS – Coding Standards

Injury, Poisoning and Certain Other Consequences of External Cause

**External Causes of Morbidity**

- 2001 External cause code use and sequencing
- 2004 Allergic reaction NOS
- 2005 Poisonings & injuries – indication of intent
- 2008 Perpetrator of assault, abuse and neglect
- 2009 Mode of pedestrian conveyance

- 1901 Poisoning
- 1902 Adverse effects
- 1903 Two or more drugs taken in combination
- 1904 Procedural complications
- 1905 Closed head injury/LOC/concussion
- 1906 Current and old injuries
- 1907 Multiple injuries
- 1908 Laceration with nerve and tendon damage
- 1909 Adult and child abuse
- 1910 Skin loss
- 1911 Burns
- 1912 Sequelae of injuries, poisoning...
- 1914 Degloving injury
- 1915 Spinal (cord) injury
- 1916 Superficial injuries
- 1917 Open wounds
- 1918 Fracture and dislocation
- 1919 Open intracranial injury
- 1920 Open intrathoracic/intra-abdominal injury
- 1921 Sprains and strains
- 1922 Crushing injury
- 1923 Contact with venomous/nonvenomous
Sequencing Severity of Injury

Skull fracture with intracranial injury
Internal injuries
Fractures (including skull # w/o intracranial injury)
Burns (full and partial thickness)
Concussion
Crush Injury
Shock
Open wounds and lacerations
Dislocation
Sprains
Contusions
Superficial injuries, abrasions, erythema burns
Clinical Coding Process

Clinical coder completes coding process

- Select event in PMS
- Verify event data
- Enter additional information
  - ACC45, vent/NIV/ICU hours, admission weight
- Activate 3M Codefinder
  - Pathway or direct code entry (1 – 99 codes)
- Free text code descriptions
- Add external cause and procedure dates
### New Zealand (AR) DRG, PCCL, and NDC Information

**X60C**  
Injuries Age<55  
NZwt 0.49 Albs 1.5 Lt 0 Ht 5 Sdwt 0.21 ODwt 0.49 Hicuti wt 0.26  
0 FCCL 0 - SDX is not a CC, or is included in ADRG definition, or is excluded  
021 Injuries, Poisonings & Toxic Effects of Drugs

#### Additional DRG Information

- **DRG Version:** 5.0  
- **ICD-10-AM Edition:** 6th  
- **Date of Admission:** 24/08/2010  
- **Date of Separation:** 24/08/2010  
- **Length of Stay:** 1  
- **Same Day Status:** Same Day  
- **Sex:** Male  
- **Age:** 53  
- **Separation Mode:** Home/Other (9)  
- **Admission Weight:** n/a  
- **Mental Health Legal Status:** n/a

#### Estimated WIES -- New Zealand

- **WIES Score:** 0.2055

#### ICD-10-AM Principal Diagnosis

1. S899 ~Injury of left knee - pain  
2. S309 ~Injury of back - pain  
3. W11 ~Fall from ladder 24/08/2010  
4. Y9201 ~Outside of house  
5. U731 ~Injury occurring while painting exterior of house
Clinical Coding Process

Clinical coder completes coding in PMS

- Check DRG
- Final check
- Print coding sheet and file in clinical record
  - Not all coding units do this
Ministry of Health

Print Date: Tue Aug 24 11:40:26 2010
Gender: Male
Age: 53
Separation: Home/Other (9)
Admit Date: 24/08/2010
LOS: 1
Separ Date: 24/08/2010

DRG
X60C Injuries Age<65
NZwgt 0.49  Albs 1.5  Lt 0  Ht 5  Sdwt 0.21 ODwt 0.49 Hioutl wt 0.25

PCCL
0 PCCL 0 - SDX is not a CC, or is included in ADRG definition, or is excluded

MDC
021 Injuries, Poisonings & Toxic Effects of Drugs

ICD-10-AM Principal Diagnosis
S899 ~Injury of L knee - pain

ICD-10-AM Additional Diagnoses
S399 ~Injury of back - pain
W11 ~Fall from ladder 24/08/2010
Y9201 ~Outside of house
U731 ~Injury occurring while painting exterior of house

Please review the coding listed above to ensure the diagnoses and procedures accurately reflect the episode of care.

If you have any concerns with the coding please contact the coding unit otherwise please sign in the space provided below to verify the coding.

Clinician's Signature ____________________________ Date ____________
Reporting to NMDS

Hospital provides NMDS batch file

- NMDS file specification
- Daily
- Weekly
- Fortnightly
- Monthly

NMDS load process
Challenges for Clinical Coders

- Clinician hand writing
- Inconsistent/inadequate documentation
- Applying standards/conventions
- Communication with clinicians
- End of month deadlines
  - DHB/MoH
- Keeping up to date with new treatments/surgery
- MoH requirements – targets/measures
- Internal hospital processes – event information
- Patient Management Systems (PMS)
Challenges for Clinical Coders

Pressures to perform other activities

- Train new clinical coders
- Educate clinical/administration staff
- Attend training/education
- PMS testing
- Action NMDS error reports
- Data quality activities
- Clinician audits
- Audit
Injury Coding
Case Exercise
Case Exercise – 6th Edition

S099  Unspecified injury of head
      Closed head injury

W066  Fall involving conventional bed
      Fell off queen bed? accidental or caused by sibling

Y9205  Bedroom at home

U732  Injury or poisoning occurring while resting, sleeping, eating or engaging in other vital activity
      Baby had bath lying on bed
S099  Unspecified injury of head
W06   Fall involving bed
Y9209  Other and unspecified place in home
U732  Injury or poisoning occurring while resting, sleeping, eating or engaging in other vital activity
S099  Unspecified injury of head

W06  Fall involving bed

Y920  Other and unspecified place in home

Y934  Injury or poisoning occurring while resting, sleeping, eating or engaging in other vital activity
S099  Unspecified injury of head

W0604  Fall involving bed, home, while resting, sleeping, eating or engaging in other vital activity

4th Character – Place of occurrence
- Use with W00-Y34 except Y06 and Y07
- Total – 10 characters

5th Character – Activity
- Use V01-Y34
- Total – 7 characters
ICD-9-CM-A II

85401  Intracranial injury of other and unspecified nature, without mention of open intracranial wound, with no loss of consciousness

88440  Fall involving bed at home

5th Character – Place of occurrence

➢ Total – 10 characters
### Summary

<table>
<thead>
<tr>
<th></th>
<th>6th</th>
<th>3rd</th>
<th>2nd</th>
<th>1st</th>
<th>9-CMAII</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Diagnosis</strong></td>
<td>S099</td>
<td>S099</td>
<td>S099</td>
<td>S099</td>
<td>85401</td>
</tr>
<tr>
<td><strong>Accident</strong></td>
<td>W066</td>
<td>W06</td>
<td>W06</td>
<td>W0604</td>
<td>88440</td>
</tr>
<tr>
<td><strong>POO</strong></td>
<td>Y9205</td>
<td>Y9209</td>
<td>Y920</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Activity</strong></td>
<td>U732</td>
<td>U732</td>
<td>Y934</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Coding Examples

### Submitted Diagnosis Records

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 B S022</td>
<td></td>
<td>Fracture of nasal bones; bilateral; non-displaced</td>
</tr>
<tr>
<td>B</td>
<td>13 B S6081</td>
<td></td>
<td>Deep graze of left 5th metacarpal</td>
</tr>
<tr>
<td>B</td>
<td>13 B S0081</td>
<td></td>
<td>Graze to right side of face</td>
</tr>
<tr>
<td>B</td>
<td>13 B S5081</td>
<td></td>
<td>Graze of right elbow</td>
</tr>
<tr>
<td>B</td>
<td>13 B S8081</td>
<td></td>
<td>Graze of right knee</td>
</tr>
<tr>
<td>E</td>
<td>13 E V184</td>
<td>09-01-2010</td>
<td>Pedal cyclist injured going downhill, braking &amp; going over handle bars; traffic accident</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y9240</td>
<td></td>
<td>Road</td>
</tr>
<tr>
<td>E</td>
<td>13 E U738</td>
<td></td>
<td>Riding bike while on way to bike shop to get gears on push bike fixed</td>
</tr>
<tr>
<td>O</td>
<td>13 O 5602200</td>
<td>09-01-2010</td>
<td>Computerised tomography of facial bone</td>
</tr>
</tbody>
</table>

### Submitted Diagnosis Records

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 B S0602</td>
<td></td>
<td>Loss of consciousness of brief duration [less than 30 minutes]</td>
</tr>
<tr>
<td>B</td>
<td>13 B S1095</td>
<td></td>
<td>Superficial injury of neck, part unspecified, contusion</td>
</tr>
<tr>
<td>B</td>
<td>13 B S299</td>
<td></td>
<td>Chest wall pain</td>
</tr>
<tr>
<td>B</td>
<td>13 B S399</td>
<td></td>
<td>Back pain</td>
</tr>
<tr>
<td>B</td>
<td>13 A F0400</td>
<td></td>
<td>Post traumatic amnesia, unspecified</td>
</tr>
<tr>
<td>E</td>
<td>13 E V8000</td>
<td>14-05-2010</td>
<td>Rider of horse thrown, no helmet being worn, unwitnessed fall</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y927</td>
<td></td>
<td>Farm</td>
</tr>
<tr>
<td>E</td>
<td>13 E U731</td>
<td></td>
<td>Rounding up bulls</td>
</tr>
</tbody>
</table>
### Submitted Diagnosis Records

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 B S7310</td>
<td>(L) HIP SPRAIN</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>13 B S9340</td>
<td>(R) ANKLE SPRAIN</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>13 E V2709</td>
<td>23-04-2010</td>
<td>HIT BUMP WHILST RACING MOTORCYCLE AT 150 KPH</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y9233</td>
<td>23-04-2010</td>
<td>RUAPUNA RACEWAY</td>
</tr>
<tr>
<td>E</td>
<td>13 E U738</td>
<td>23-04-2010</td>
<td>MOTORCYCLE RACING</td>
</tr>
<tr>
<td>O</td>
<td>13 O 5622100</td>
<td>23-04-2010</td>
<td>COMPUTERISED TOMOGRAPHY OF SPINE, THORACIC REGION</td>
</tr>
<tr>
<td>O</td>
<td>13 O 9555003</td>
<td>24-04-2010</td>
<td>ALLIED HEALTH INTERVENTION, PHYSIOTHERAPY</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 B S7211</td>
<td>Fracture of intertrochanteric section of R) femur</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>13 A E876</td>
<td>Hypokalaemia</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>13 E V971</td>
<td>27-04-2010</td>
<td>Fall down steps when alighting from aircraft</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y9258</td>
<td>27-04-2010</td>
<td>Place of occurrence at Invercargill Airport</td>
</tr>
<tr>
<td>E</td>
<td>13 E U739</td>
<td>27-04-2010</td>
<td>Injury occurring while engaged in unspecified activity</td>
</tr>
<tr>
<td>O</td>
<td>13 O 4751900</td>
<td>28-04-2010</td>
<td>[1479] Internal fixation of fracture of trochanteric R) femur</td>
</tr>
<tr>
<td>O</td>
<td>13 O 9251529</td>
<td>28-04-2010</td>
<td>Sedation, ASA 29</td>
</tr>
<tr>
<td>O</td>
<td>13 O 9250829</td>
<td>28-04-2010</td>
<td>Neuraxial block, ASA 29</td>
</tr>
</tbody>
</table>
# Coding Examples

## Submitted Diagnosis Records

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 Y Z509</td>
<td></td>
<td>CARE INVOLVING USE OF REHABILITATION</td>
</tr>
<tr>
<td>B</td>
<td>13 B S4221</td>
<td></td>
<td>FRACTURE OF HEAD OF R) HUMERUS</td>
</tr>
<tr>
<td>B</td>
<td>13 B S4303</td>
<td></td>
<td>INFERIOR DISLOCATION OF R) HUMERUS</td>
</tr>
<tr>
<td>B</td>
<td>13 B S4223</td>
<td></td>
<td>FRACTURE OF ANATOMICAL NECK OF HUMERUS R) + L)</td>
</tr>
<tr>
<td>B</td>
<td>13 B S4224</td>
<td></td>
<td>FRACTURE OF GREATER TUBEROSITY OF HUMERUS L)</td>
</tr>
<tr>
<td>B</td>
<td>13 B S4229</td>
<td></td>
<td>FRACTURE OF LESSER TUBEROSITY L) HUMERUS</td>
</tr>
<tr>
<td>B</td>
<td>13 A G4732</td>
<td>29-03-2010</td>
<td>OBSTRUCTIVE SLEEP APNOEA</td>
</tr>
<tr>
<td>B</td>
<td>13 Y Z720</td>
<td></td>
<td>TOBACCO USE, CURRENT.</td>
</tr>
<tr>
<td>B</td>
<td>13 Y Z716</td>
<td></td>
<td>COUNSELLING FOR TOBACCO USE</td>
</tr>
<tr>
<td>E</td>
<td>13 E V4849</td>
<td>29-03-2010</td>
<td>INJURED WHILE TRYING TO GET INTO RUNAWAY CAR</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y9200</td>
<td>29-03-2010</td>
<td>PLACE OF OCCURRENCE - DRIVEWAY TO HOME</td>
</tr>
<tr>
<td>E</td>
<td>13 E U738</td>
<td>29-03-2010</td>
<td>INJURY WHILE TRYING TO STOP CAR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Code</th>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>13 B S1095</td>
<td></td>
<td>Contusion neck (R) side</td>
</tr>
<tr>
<td>B</td>
<td>13 B S700</td>
<td></td>
<td>Contusion of hips - bilat</td>
</tr>
<tr>
<td>B</td>
<td>13 B S202</td>
<td></td>
<td>Contusion of thorax (L) 2* Seat belt</td>
</tr>
<tr>
<td>B</td>
<td>13 A R000</td>
<td></td>
<td>Tachycardia, unspecific</td>
</tr>
<tr>
<td>E</td>
<td>13 E V4760</td>
<td>08-06-2010</td>
<td>Back seat passenger in vehicle that skidded on ice , went off road, hit tree</td>
</tr>
<tr>
<td>E</td>
<td>13 E Y9240</td>
<td>08-06-2010</td>
<td>North Gates of Haast Bridge</td>
</tr>
<tr>
<td>E</td>
<td>13 E U738</td>
<td>08-06-2010</td>
<td>Injury travelling on holiday from Australia</td>
</tr>
</tbody>
</table>
6th Edition Classification Changes

- New codes
  - External cause of injury
  - Place of occurrence
  - Activity
External Cause of Injury

W06 Fall involving bed
External Cause of Injury

W07 Fall involving chair
<table>
<thead>
<tr>
<th>Fall, falling (accidental) W19</th>
<th>- - - special purpose W06.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>- from, off (see also Fall, falling, involving)</td>
<td>- - - specified NEC W06.8</td>
</tr>
<tr>
<td>- - bed NEC W06.9</td>
<td>- - - stretcher W06.8</td>
</tr>
<tr>
<td>- - bassinet W06.3</td>
<td>- - - waterbed W06.8</td>
</tr>
<tr>
<td>- - bunk (middle) (top) NEC W06.0</td>
<td>- - chair W07.9</td>
</tr>
<tr>
<td>- - - bottom W06.6</td>
<td>- - - arm W07.8</td>
</tr>
<tr>
<td>- - camp W06.8</td>
<td>- - - bath W07.5</td>
</tr>
<tr>
<td>- - conventional W06.6</td>
<td>- - - bench W07.8</td>
</tr>
<tr>
<td>- - cot W06.2</td>
<td>- - - camp W07.1</td>
</tr>
<tr>
<td>- - cradle W06.4</td>
<td>- - - commode W07.6</td>
</tr>
<tr>
<td>- - crib W06.2</td>
<td>- - - dining W07.8</td>
</tr>
<tr>
<td>- - double NEC W06.6</td>
<td>- - - folding W07.1</td>
</tr>
<tr>
<td>- - folding W06.8</td>
<td>- - - gliding W07.0</td>
</tr>
<tr>
<td>- - futon W06.8</td>
<td>- - - high (on castors) W07.4</td>
</tr>
<tr>
<td>- - hammock (baby) W06.5</td>
<td>- - - kitchen W07.8</td>
</tr>
<tr>
<td>- - hospital W06.1</td>
<td>- - - lift assistance W07.7</td>
</tr>
<tr>
<td>- - king NEC W06.6</td>
<td>- - - revolving (on castors) W07.2</td>
</tr>
<tr>
<td>- - loft W06.8</td>
<td>- - - rocking W07.0</td>
</tr>
<tr>
<td>- - orthopaedic W06.1</td>
<td>- - - shower W07.5</td>
</tr>
<tr>
<td>- - queen NEC W06.6</td>
<td>- - - Smoky Dawson W07.7</td>
</tr>
<tr>
<td>- - single NEC W06.6</td>
<td>- - - specified NEC W07.2</td>
</tr>
<tr>
<td>- - sofa W06.8</td>
<td>- - - swivel (on castors) W07.2</td>
</tr>
</tbody>
</table>
External Cause of Injury

X15 Contact with hot household appliances
External Cause of Injury

New codes

V00 Pedestrian injured in collision with pedestrian conveyance

- Fourth character subdivision identifies whether the accident was:
  - .0 Nontraffic accident
  - .1 Traffic accident
  - .9 Unspecified whether traffic or nontraffic

- Fifth character subdivision identifies the mode of pedestrian conveyance used by the counterpart at the time of the injury
External Cause of Injury

Example

Mother pushing stroller on the footpath injured when struck by a person on a skateboard

V00.12  Pedestrian injured in collision with pedestrian conveyance, traffic accident, skateboard
The following fifth character subdivisions are for use with V00 to identify the mode of pedestrian conveyance used by the counterpart at the time of the accident:

- **0**: Unspecified pedestrian conveyance
- **1**: On foot
- **2**: Skateboard
- **3**: Roller-skates
- **4**: Scooter, powered
  - **4a**: Gopher
- **5**: Scooter, nonpowered
- **6**: Wheelchair, powered
  - **6a**: Electric wheelchair
- **7**: Wheelchair, nonpowered
  - **7a**: Wheelchair NOS
- **8**: Baby carriage
  - **8a**: Pram
  - **8b**: Pusher
  - **8c**: Stroller
- **9**: Other specified pedestrian conveyance

**4th character identifies if the accident was the result of a traffic, nontraffic or unspecified accident**

- **0**: Pedestrian injured in collision with pedestrian conveyance, nontraffic accident
- **1**: Pedestrian injured in collision with pedestrian conveyance, traffic accident

**5th character identifies the mode of pedestrian conveyance used by the counterpart at the time of the accident**
Place of Occurrence

New codes place of occurrence at home

Y92.00  Driveway to home
Y92.01  Outdoor areas (garden, tennis court)
Y92.02  Garage (carport, shed)
Y92.03  Bathroom (toilet)
Y92.04  Kitchen
Y92.05  Bedroom
Y92.06  Laundry
Y92.07  Indoor living areas, nec
Y92.09  Other and unspecified place in home
Activity

U54.60 Water ski jumping

U54.61 Wake boarding
  ➢ Knee boarding

U54.68 Other specified water skiing
  ➢ Barefoot water skiing

U54.69 Water skiing, unspecified

U63.31 Horse racing
  ➢ Excludes: trotting and harness racing (U63.6)

U63.32 Hurdle racing
  A horse race in which artificial barriers in the form of hurdles, fences, etc, must be leaped
  ➢ Excludes: steeplechase and cross-country eventing (U63.03)

U66.5 Land sailing
Data Quality

NZHIS Audit Team

- Perform DHB face to record audits
- Last external audit 2002/2003

2003 NZHIS Audit team was disestablished

- Focus changed
  - Monitoring/support/education/training
At a national level, this is best achieved using a broad coding quality analysis tool. An example is Performance Indicators for Coding Quality (PICQ) — this contains a series of pre-defined indicators that analyse admitted patient morbidity data coded with ICD-10-AM/ACHI and is based on Australian Coding Standards and coding conventions. PICQ identifies possible coding errors and is used on a national level to regularly monitor coding quality and identify areas where additional education and training may be required.
Data Quality

Regional – DHB

At the DHB Coding Unit level data quality responsibilities are managed using either data quality software or the traditional face-to-record audit process, or ideally a combination of both. The Australian Coding Benchmark Audit (ACBA) and PICQ are already used in some Coding Units. Both tools have been designed on the philosophy of continuous quality improvement and clinical coder education.
Data Quality

Local – Clinical Coder

At individual level all clinical coders, regardless of qualification and experience, benefit from having their work individually audited as a means of checking progress eg, peer reviews, clinician reviews, individual face to record audits and PICQ to identify specific problem areas and coding difficulties. Results can then be compared over time as a measure of success and ongoing competence and education.
Questions?

Can be addressed to:
Tracy Thompson
Email: Tracy_Thompson@moh.govt.nz