Coding Tip of the Month

April 2009

Coding and Sequencing of Poisoning Codes

Coding for poisoning is not difficult; however you must remember to always assign the poisoning code as the Principal Diagnosis, followed by the codes for the manifestations. Assign an additional diagnosis code for respiratory failure, coma, tachycardia, delirium, gastrointestinal hemorrhaging, vomiting, hypokalemia, hepatitis, renal failure, or other reaction when a patient is admitted after a poisoning. The poisoning code is sequenced first, because there is a chapter-specific guideline that provides sequencing directions and specifies that the poisoning code is sequenced first, followed by a code for the manifestation. Coding Clinic has stated, “The acute respiratory failure or other physical condition is a manifestation of the poisoning, and it would be incorrect coding to select respiratory failure as the principal diagnosis just because the patient is placed on ventilation.”

A poisoning is an error in the drug prescription or administration. An overdose of drugs taken by the patient is also included in poisoning codes. The interaction of prescription drugs with alcohol is classified as a poisoning, with the poisoning code taking precedence over the code for the resulting condition. Appropriate E-codes for initial treatment of the poisoning should also be assigned as additional codes.

Although this usually results in a lower weighted MS-DRG assignment, especially when the patient has a severe reaction such as respiratory failure, this sequencing is an Official Coding Guideline and chapter-specific guideline in ICD-9-CM. Poisonings are normally grouped to MS-DRG’s 917 and 918.

<table>
<thead>
<tr>
<th>MS-DRG</th>
<th>Description</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>917</td>
<td>Poisoning &amp; toxic effects of drugs w MCC</td>
<td>1.4155</td>
</tr>
<tr>
<td>918</td>
<td>Poisoning &amp; toxic effects of drugs w/o MCC</td>
<td>0.5812</td>
</tr>
</tbody>
</table>

Appropriate physician documentation is necessary to assign these codes correctly, therefore, when documentation is conflicting or is not clearly stated, the coder should clarify the correct diagnoses, including the cause and effect, with the physician.

Adverse Effect Of Drug

Poisoning
(a) Error was made in drug prescription
   Errors made in drug prescription or in the administration of the drug by
   provider, nurse, patient, or other person, use the appropriate poisoning code
   from the 960-979 series.

(b) Overdose of a drug intentionally taken
   If an overdose of a drug was intentionally taken or administered and resulted
   in drug toxicity, it would be coded as a poisoning (960-979 series).

(c) Nonprescribed drug taken with correctly prescribed and properly
    administered drug
   If a nonprescribed drug or medicinal agent was taken in combination with a
   correctly prescribed and properly administered drug, any drug toxicity or
   other reaction resulting from the interaction of the two drugs would be
   classified as a poisoning.

(d) Sequencing of poisoning
   When coding a poisoning or reaction to the improper use of a medication
   (e.g., wrong dose, wrong substance, wrong route of administration) the
   poisoning code is sequenced first, followed by a code for the manifestation. If
   there is also a diagnosis of drug abuse or dependence to the substance, the
   abuse or dependence is coded as an additional code.

References:
ICD-9-CM Official Guidelines for Coding & Reporting Coding Clinic, Fourth Quarter 2008
   (Section 1, C 17, e, 2, d)  Page: 191
Acute Respiratory Failure Due to Poisoning Coding Clinic, Third Quarter 2007, Page: 7
Poisoning sequencing - guideline Coding Clinic, Second Quarter 1990, Page: 11
Crack overdose with respiratory failure Coding Clinic, First Quarter 1993, Page: 25

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