

CODING TIP OF THE MONTH FEBRUARY 2010

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Late Effect of Cerebrovascular Accident

Cerebrovascular Accident is the sudden death of some brain cells due to lack of oxygen. Blood flow to the brain could be caused by a blockage or rupture of an artery to the brain. A CVA is also referred to as a Stroke. Neurologic symptoms such as hemiplegia, loss of sensation, speech disturbances or reflex changes could occur. These symptoms are directly related to the area of cerebral damage. If the right side of the brain is affected the neurologic deficit occurs usually on the left or the opposite side of the body. The severity of symptoms of a Stroke could vary in type, severity and permanency. Some symptoms will resolve with time while others will never completely resolve.

Codes from categories 430-437 should be used for the initial episode of care for an acute cerebral hemorrhage or infarction. Coders should be aware that if the CVA culminates in neurological deficits, they occur immediately. If any sequelae are present (e.g. hemiplegia {a code from category 342}, aphasia {784.3}, etc.) they are coded as secondary diagnosis(es) [refer to Coding Clinic 1998, Fourth Quarter, page 88 to 89 & Coding Clinic 1998, page 87]. If the neurologic deficit is not present at the TIME of DISCHARGE, it should NOT be coded [refer to Coding Clinic 1989, Second Quarter, page 8].



After the initial episode of care for an acute cerebral hemorrhage or infarction has been completed, or the patient is discharged from care, codes from category 438 should be assigned instead of codes from the 430-437 series in order to identify any residual neurologic deficit [refer to Coding Clinic 1998, Fourth Quarter, page 88-89]. The neurologic deficit may diminish or disappear, in some cases, within weeks or month from initial acute CVA. The degree of impairment varies from case to case. Code V12.59, Personal history of other diseases of the circulatory system, may only be assigned if there are no neurologic deficit remaining and the patient completely recovered. Coding history of an illness, even if no longer present, is important information that may affect the type of treatment rendered. History codes are acceptable on any medical record regardless of the reason for visit.



Coding Clinic References used are the following:

- *Second Quarter, 1998, Page 8*
- *Fourth Quarter, 1997, Page 35 to 37*
- *Fourth Quarter, 1998, Page 88 to 89*
- *Fourth Quarter, 1999, Page 3 to 4*