

CODING TIP OF THE MONTH

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Chronic Venous Embolism and Thrombosis effective October 1, 2010

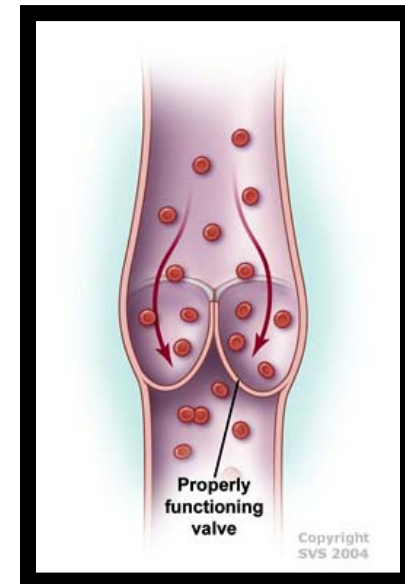
Effective October 1, 2010, two new subcategories (453.5 & 453.7) were created to assist in identifying chronic venous embolism and thrombosis of deep vessels of the lower extremities and other specified vessels. The subcategories were designed to identify specific vascular anatomical sites such as lower extremity, upper extremity,

axillary veins, subclavian veins, internal jugular vein, other thoracic vein and other specified veins.

Prior to the creation of the subcategories, we were limited to the usage of codes 453.4 & 453.8 of which served their purpose well. The difference from acute to chronic is acute has a short but severe cause and chronic simply means persistent over a long period of time. The meaning is the same for Chronic Venous Insufficiency or CVI or also called Chronic Venous Disease or CVD.

We have three kinds of veins: superficial veins-lie close to the skin, deep veins-lie in groups of muscles and perforating veins-connect the superficial to the deep veins. The deep veins lead to the vena cava our body's largest vein of which runs directly to our Hearts. As we are in an upright position, the blood in our leg veins travels against gravity

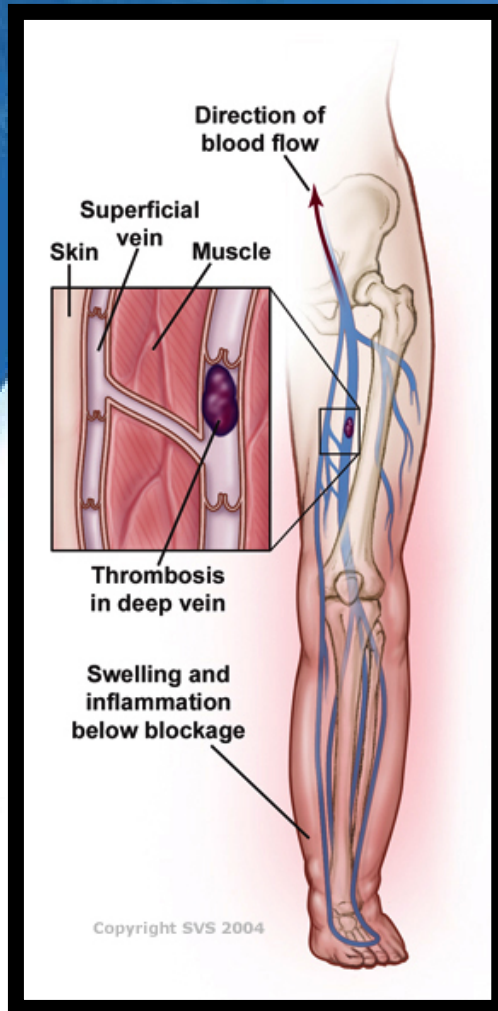
to return to your heart. The leg muscles squeeze the deep veins in the legs and feet to help move blood back to your heart. The valves inside our veins that keep our blood flowing in the right direction close up and this prevents blood from flowing in reverse, back down the legs. This process of sending blood back to the heart is called venous pump.



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As we live our normal lives, our leg muscles squeeze and our venous pump are working. When we sit or stand for long periods, the blood in our legs can pool and increase venous blood pressure. This increase in blood pressure causes our vein walls to stretch, as they are intended. DVT occur when a blood clot blocks blood from flowing toward the heart. Usually occurs in the deep or perforating vein. As blood tries to pass through the blocked vein, blood pressure increases in the vein and overloads the valves. Valves that are not able to work efficiently are called incompetent, because , because they can no longer stretch and this is contributed to CVD.

Phlebitis, is a condition of which the vein becomes swollen and inflamed, occurs in the superficial or deep vein. Thus the inflammation causes the blood clot to develop.

Factors that increase the risk of CVD are overweight, pregnancy, lack of exercise, smoking, standing or sitting for long periods of time, age and gender. Women over 50 most often get CVD. Diagnosing CVD is usually with duplex ultrasound and compression stockings. Anticoagulants most commonly used for treatment of DVT are Warfarin, Coumadin and tissue plasminogen activator. More aggressive treatment can include sclerotherapy, ablation, vein stripping, bypass, valve repair, angioplasty & stenting.



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