CHAPTER SPECIFIC CATEGORY CODE BLOCKS

• N00-N08 Glomerular diseases
• N10-N16 Renal tubulo-interstitial diseases
• N17-N19 Acute kidney failure and chronic kidney disease
• N20-N23 Urolithiasis
• N25-N29 Other disorders of kidney and ureter
• N30-N39 Other diseases of the urinary system
• N40-N53 Diseases of male genital organs
• N60-N65 Disorders of breast
• N70-N77 Inflammatory diseases of female pelvic organs
• N80-N98 Noninflammatory disorders of female genital tract
• N99 Intraoperative and postprocedural complications and disorders of genitourinary system, not elsewhere classified
CHAPTER NOTES

• Several block and category title changes have been made in Chapter 14; for example, subsection 617-629 in ICD-9-CM is Other Disorders of Female Genital Tract, whereas the corresponding section in ICD-10-CM, N80-N98, is Noninflammatory disorders of the female genital tract.

• Codes have also moved to Chapter 14 from other chapters in ICD-9-CM; for example, ICD-9-CM code 099.40, Other nongonococcal urethritis, unspecified, moved from Chapter 1, but its ICD-10-CM counterpart, code N34.1, Nonspecific urethritis is in Chapter 14.

• The range of codes are classified as conditions of the urinary system and of the male and female genital tracts; except for certain genitourinary transmissible infections, neoplasms, and conditions associated with pregnancy, childbirth and the puerperium.
CHAPTER 14

ADDITIONAL CODES

- N17: Code also underlying condition
- N18: Code first etiology
- N30: Additional code infectious agent
- N31: Additional code urinary incontinence
- N33: Code first underlying disease
- N40.1: Additional code for associated symptoms
STAGES OF CHRONIC KIDNEY DISEASE

- The ICD-10-CM classifies CKD based on severity.

- The severity of CKD is designated by stages one through five.

- Stage two, code N18.2, equates to mild CKD; stage three, code N18.3, equates to moderate CKD; and stage four, code N18.4, equates to severe CKD.

- Code N18.6, End stage renal disease (ESRD), is assigned when the provider has documented end-stage-renal disease (ESRD).

- If both a stage of CKD and ESRD are documented, assign code N18.6 only.
Patients who have undergone a kidney transplant may still have some form of chronic kidney disease (CKD) because the kidney transplant may not fully restore kidney function. Therefore, the presence of CKD alone does not constitute a transplant complication. Assign the appropriate N18 code for the patient's stage of CKD and code Z94.0, Kidney transplant status. If a transplant complication such as failure or rejection or other transplant complication is documented, see section I.C.19.g for information on coding complications of a kidney transplant. If the documentation is unclear as to whether the patient has a complication of the transplant, query the provider.
Patients with CKD may also suffer from other serious conditions, most commonly diabetes mellitus and hypertension.

The sequencing of the a CKD code in relationship to codes for other contributing conditions is based on the conventions in the Tabular List.

See I.C.9. Hypertensive chronic kidney disease

CODING EXAMPLES

1. This 40-year-old male presents with proteinuria and hematuria. Diagnosis established is chronic nephritic syndrome with diffuse membranous glomerulonephritis. What diagnosis code is assigned?

Answer: N03.2 Syndrome, nephritic - see also Nephritis. Nephritis, nephritic, chronic, with diffuse membranous glomerulonephritis

Rationale: The indexing of this code is somewhat confusing. If you go to Syndrome, nephritic, there is a note at nephritic syndrome to see Nephritis. There are also terms for nephrotic syndrome, which causes a different path. The proteinuria and hematuria are symptoms and would not be coded. There are many different choices in the Glomerular Diseases (N00-N08) block. A careful review of the category choices in this block is helpful. Nephritic syndrome is not a specific diagnosis, but a clinical syndrome characterized by several signs. Its prognosis depends on the underlying etiology. Nephritic syndrome and nephrotic syndrome are similar but different.
2. This 30-year-old female was seen with frequent urination with pain. Diagnosis: Acute suppurative cystitis, with hematuria due to E. coli. What diagnosis codes are assigned?

Answer: N30.01 Cystitis (exudative) (hemorrhagic) (septic) (suppurative), acute, with hematuria

B96.20 Escherichia (E.) coli, as cause of disease classified elsewhere

Rationale: Suppurative is a nonessential modifier for cystitis, so it is included in the code. There is a combination code for acute cystitis with hematuria (N30.01). The frequent urination and pain are integral to the cystitis and not assigned codes. A note at category N30 states to use additional code to identify infectious agent (B95-B97). This code is never in the first position.
3. An 80-year-old man presented with complaints of lower abdominal pain and the inability to urinate over the past 24 hours, diagnosed as acute kidney failure due to acute tubular necrosis, caused by a urinary obstruction. The urinary obstruction was a result of the patient's benign prostatic hypertrophy. The patient was treated with medications and the acute kidney failure was resolved prior to discharge. The patient will require resection of the prostate but will return at a later date for surgery. What diagnosis codes are assigned?

Answer:  
N17.0 Failure, failed, kidney, acute (see also Failure, renal, acute).  
Failure, renal, acute, with, tubular necrosis.  
N40.1 Hypertrophy, prostate – see Enlargement, enlarged, prostate, with lower urinary tract symptoms (LUTS)  
N13.8 Obstruction, urinary (moderate)
CODING EXAMPLES (cont.)

Rationale to example three: The prostate hypertrophy and urinary obstruction are coded separately in ICD-10-CM. This note is available under subcategory N40.1: Use additional code for associated symptoms, when specified: urinary obstruction (N13.8). There is also a cross reference at code N13.8 stating to code, if applicable, any causal condition first, such as: enlarged prostate (N40.1). Currently, in ICD-9-CM, sequencing guidelines are provided in Coding Clinic, 3rd Quarter, 2002 that were used to determine sequencing in this case, but any future ICD-10-CM guidance would determine code assignment.

4. Assign the code(s) for the following diagnosis: Premenopausal menorrhagia.

Answer: N92.4 Menorrhagia (primary), preclimacteric or premenopausal

Rationale: Subcategory N92.4, Excessive bleeding in the premenopausal period includes climacteric, menopausal, preclimacteric, or premenopausal menorrhagia or metrorrhagia.
CODING EXAMPLES (cont.)

5. This 45-year-old female is currently being treated for chronic kidney disease, stage three. She has previously undergone a kidney transplant but still continues to suffer from chronic kidney disease. This patient is also treated for hypothyroidism following removal of the thyroid for thyroid carcinoma. At this time, there is no longer evidence of an existing thyroid malignancy. What diagnosis codes are assigned?

**Answer:**
- N18.3 Disease, diseased, kidney (functional) (pelvis), chronic, stage 3 (moderate)
- Z94.0 Status (post), transplant – see Transplant, kidney
- E89.0 Hypothyroidism (acquired), postsurgical
- Z85.850 History, personal (of), malignant neoplasm (of), thyroid

**Rationale:** The coding guidelines state that “the presence of CKD alone does not constitute a transplant complication. Assign the appropriate N18 code for the patient’s stage of CKD and code Z94.0, Kidney transplant status.” The note at category N18 states: Use additional code to identify kidney transplant status, if applicable.
6. A 78-year-old female is seen with fever, malaise and left flank pain. A urinalysis shows bacteria of more than 100,000/ml present in the urine and subsequent urine culture shows Proteus growth as the cause of the urinary tract infection. The patient was treated with intravenous antibiotics. The patient also has a history of repeated UTIs over the past several years. What diagnosis code are assigned?

**Answer:**

N39.0 Infection, infected, infective, (opportunistic), urinary (tract)
B96.4 Infection, infected, infective (opportunistic), bacterial NOS, as cause of disease classified elsewhere, proteus (mirabilis) (morganii)
Z87.440 History, personal (of), infection, urinary (recurrent) (tract)

**Rationale:**

As in ICD-9-CM, the bacteria causing the urinary tract infection is coded as a secondary diagnosis. The following note at code N39.0 states “Use additional code (B95-B97) to identify infectious agent.” The history of UTI does have a separate history code that should be added as an additional diagnosis.
TRAINING SOURCES
American Health Information Management Association
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