

Codefile

Quarterly Newsletter of the Queensland Coding Committee

April 2008
Issue No 29

Inside this Issue

- 1 [Coding Auditing/ Education Unit Update](#)
- 2 [Codefinder Update](#)
- 3 [Performance Indicators for Coding Quality \(PICQ\) Update](#)
- 4 [Coding Standards Advisory Committee \(CSAC\) Update](#)
- 5 [QCC Update](#)
- 6 [Coders' InSite](#)
- 7 [Departmental Name Changes](#)
- 8 [Definition of a Clinician](#)
- 9 [Chemotherapy via Port-o-Cath](#)
- 10 [Contact Details](#)

Queensland Coding Committee
Data Quality and Strategy Unit
Statistical Data Standards &
Strategy
Statistical Library & Services
Centre
Queensland Health
GPO BOX 48
BRISBANE 4001

1. Coding Auditing/ Education Unit (CAEU) Update

Since last E-Bulletin, there have been some changes in the team of the CAEU. Lucy Kennedy has returned to Logan Hospital to her substantive position. Lucy did such a great job as the Corporate Clinical Classification Auditor Educator. She brings such commitment and knowledge to any role that she takes on. Thanks Lucy for all your hard work and dedication. It was very much appreciated.

Although it was sad to see Lucy go, the position has been very ably filled by Lisette Ramsden. Lisette is a Health Information Manager (HIM) who has a wealth of experience in clinical coding and coding auditing.

Julie and Lisette have completed auditing at Redland Hospital and are currently at Ipswich and Logan hospitals. They are really enjoying it and comments from them have indicated, yet again, the value of this unit's work. It not only provides our unit with invaluable input and data; it is of immeasurable value to the hospitals.

2. Codefinder Update [home](#)

The Data Quality Unit (DQU) continues to provide Codefinder support to all public hospital Clinical Coding personnel. Meegan Snell from 3M has been visiting hospital facilities to meet with Clinical Coders demonstrating the functionality and enhancements associated with the 3M Codefinder's most recent release, v4.5.2.

To date, Meegan has visited the following facilities this year:

- Toowoomba
- Warwick
- Gladstone
- Bundaberg
- Rockhampton
- Mackay
- Logan (incorporating staff from QEII and Redland Hospitals)
- Princess Alexandra Hospital
- The Prince Charles Hospital
- Redcliffe
- Caboolture

For those public hospital Clinical Coders who may require Codefinder assistance the DQU A/Codefinder Support Officer (CSO) – Corrie Martin, can be contacted at Codefinder@gld.health.gov.au or alternatively please telephone Corrie on **(07) 34055255**. Please note the new contact telephone number for your reference and update your records accordingly.

Support issues would include reporting faults with any of the coding pathways, advice and assistance with the use of certain Codefinder features and the installation process for the new releases.

Functionality Tip:

Some Codefinder users may not be aware that from their own workstation, they can use Codefinder to code patients from more than one HBCIS site. For example, coders in Mackay can use Codefinder to assist with coding for the HBCIS sites; Mackay, Moranbah, Clermont, & Dysart from their single workstation.

As long as HBCIS users have a username and password for the particular site, their workstation can be configured so that Codefinder will interface with their workstation simply by logging a call with the InfoService Centre (1800 198 175).

3. PICQ Update [home](#)

DQU has just sent out another round of PICQ reports to all Queensland Health Hospitals. This report provides PICQ indicators on data from 1 Sept 2007 – 31 December 2007. DQU recognises that not all data for that period will be available in the extract.

DQU is currently in negotiations with the National Centre for Classification in Health (NCCH) to purchase PICQ 2008. The plan is to purchase the PICQ product for the state and to allow for access to the product to those public hospitals who request access. This is similar to the way that the PICQ product is made available to Victorian hospitals by the Health Data Standards & Systems (HDSS).

4. CSAC Update [home](#)

At the last CSAC meeting on 17th March in Sydney, the CSAC members discussed further the evolution of the public submission process. It is intended that the public submission process will be on-line and accessible 12 months of the year. Due to resourcing issues in the NCCH, the project completion date has been extended to July 2008.

Currently, there are only 19 queries outstanding in the NCCH query process. The future intention regarding query responses from the NCCH is to pass queries through CSAC for ratification. Ratified queries will be then published in Coding Matters or in the 10-AM Commandments.

There were further discussions regarding the principal diagnosis in obstetrics. CSAC members are firmly committed to a standardised process of coding obstetrics.

We have started (already!) progress toward 7th Edition. At the March meeting we considered agenda papers on:

- Kaposi sarcoma
- Ischaemic Heart Disease
- Morphology sequencing
- STING procedure
- Uncinectomy
- Extracorporeal radiation
- Endoscopic Lothrop procedure
- Thymectomy
- Fat graft
- Meckel's diverticulum
- Laparoscopic cholecystectomy
- Correction of stenosis
- Giant cell reparative granuloma
- Premature rupture of membranes
- Hysteroscopy with replacement of IUD
- Admission for removal of contraceptive device
- Postpartum haemorrhage
- MBS updates Nov 06, May 07 and Nov 07
- Single Event Multilevel Surgery (SEMLS)
- Closed (endoscopic) drainage of pleura
- Administration of surfactant to newborn
- Changing the behaviour codes of morphology codes to indicate a secondary status of the neoplasm

The importance of the NCCH T code survey was re-iterated. I would encourage Queensland coders to take the time to do the T code survey. Please refer to the NCCH site for further information:

http://nis-web.fhs.usyd.edu.au/ncch_new/icd_10_am_t_code_survey_guidlines.aspx

5. QCC Update [home](#)

The QCC has had a busy first few months of the year. What with assisting in adding the final touches to 6th Edition through CSAC, reviewing the edits for the new edition and providing feedback regarding the new data elements being introduced from 1 July 2008, we have barely had time to draw breath. The QCC has discussed 21 queries, reviewed 18 responses from the NCCH and sent 7 queries to the NCCH.

QCC is currently in the throes of reviewing our Terms of Reference as it has been a number of years since we have and the Committee has moved forward since then.

The QCC has reviewed the Commonwealth rare, sex and age edits for incorporation into the Queensland Health edits. QCC has also been advising and reviewing the proposed 1 July 2008 changes to the Condition Present on Admission Indicator and the new public hospital Indicators for 1 July 2008.

6. Coders InSite [home](#)

Congratulations to Matthew Shaw (Webmaster Coders' InSite) as Coders InSite won the Best Site Award from the 4th Annual Web Publishers Forum, which judged sites from across the state. This was very exciting for all of us as everyone in the unit put such a lot of work and effort into Coders InSite; especially Matt. Well done to the whole team and especially to those coders who continue to use and support the site.

The NCCH Sixth Edition education module is now available on Coders InSite. To access the materiel, you must contact either Corrie Martin (Sabina.Martin@health.qld.gov.au) or Matthew Shaw (Matthew.L.Shaw@health.qld.gov.au) for the password. This requirement is due to the NCCH having to count the number of individuals who access the education for Commonwealth reporting.

7. Departmental Name Changes [home](#)

As you would be aware, our centre has had a few name changes of late. I am assured that these are the last for some time.

Therefore,

Statistical Library & Services Centre (SLSC) is now the Health Statistics Centre (HSC).

Statistical Data Standards and Strategy is now Statistical Standards (SS)

Data Quality and Standards (DQ&S) is now the Data Quality Unit (DQU).

Coding Auditing and Education Unit (CAEU) remains the same.

8. Definition of a clinician [home](#)

There has always been confusion about the definition of a clinician and coders have often wondered whether they should code conditions that are documented by nurses and allied health professionals.

On p.4 of the Australian Coding Standards the following is written:

"The term 'clinician' is used throughout the document and refers to the treating medical officer but may refer to other clinicians such as midwives, nurses and allied health professionals. In order to assign a code associated with a particular clinician's documentation, the documented information must be appropriate to the clinician's discipline."

Therefore, where documentation that is written is appropriate to the clinician's discipline (e.g. pressure ulcer presence and staging for nurses) the coder may either allocate a code or refer to that clinician for further information. In addition, if a nurse has documented the presence of a pressure ulcer and has not indicated the stage; the coder can consult with the nurse regarding staging.

9. Chemotherapy via Port-O-Cath [home](#)

Please refer to NCCH query 2345

VICC Query:

"Patient admitted for chemotherapy for metastatic bowel cancer.

IV access into portacath, 19g surecan needle - patent, flashback blood.

Chemotherapy given in two and a half hours. Connected to 5FU infusion to run over 46/24 via infusabottle.

To return on 28 July 2006 for removal of pump.

VICC #2084 states that you should assign 96204-00 [1920] Administration of pharmacological agent via external vascular catheter, antineoplastic agent for loading of a portacath, yet at the NCCH ICD-10-AM/ACHI/ACS Fifth Edition education workshop, exercise Pharmacotherapy (1) assigns 96207-00 [1921] Loading of implantable infusion device or pump, antineoplastic agent, for chemotherapy via a portacath.

Suggested codes for the above scenario: 96207-00 [1921] Loading of implantable infusion device or pump, antineoplastic agent (because chemotherapy was given via the portacath prior to the external pump being loaded) ;and 96208-00 [1921] Loading of ambulatory drug delivery device, antineoplastic agent (for loading of the external pump).

On 28 July 2006 patient admitted to oncology unit for r/o chemo. Portacath hep locked with 10000in 9mls N/s - needle removed. Discharged.

Do we use 13942-01 [766] Maintenance (alone) of ambulatory drug delivery device or 34530-03 [766] Removal of implantable vascular infusion device or pump?"

NCCH Response:

"The NCCH acknowledges that there is a problem with the codes and terminology for pharmacotherapy and drug delivery devices in ACHI Fifth Edition.

The most appropriate codes to assign for the scenarios cited are:

1. 96204-00 [1920] 'Administration of pharmacological agent via external vascular catheter, antineoplastic agent' (for administration of chemotherapy for neoplasm via portacath).

2. 96208-00 [1921] 'Loading of ambulatory drug delivery device, antineoplastic agent' (for administration of chemotherapy for neoplasm via infusabottle).

3. 13939-01 [766] 'Maintenance (alone) of implantable infusion device or pump' (for heparin locking of portacath and removal of needle).

These areas have been substantially revised for ACHI Sixth Edition to update terminology and clarify code selection.”

QCC Convenor Note:

This issue has been addressed in Sixth Edition; however, QCC members felt that it was still worthy for publishing in Codefile

10. Codefile Comments, Queries and Suggestions [home](#)

Please forward to:

The Convenor

Queensland Coding Committee

Data Services Unit

Queensland Health

GPO Box 48

Brisbane QLD 4001

Telephone: 07 34055255

Facsimile: 07 32340564

Email: QCC@health.qld.gov.au