Documentation and Coding:
Vascular Diseases – Deep Vein Thrombosis (DVT)

Created May 2020

At Healthfirst, we are committed to helping providers accurately document and code their patients' health records. Proper ICD-10 coding can provide a comprehensive view of a patient's overall health.

In late 2019, the Centers for Medicare and Medicaid Services (CMS) updated its 2020 ICD-10 Clinical Modifications (ICD-10-CM) guidelines to include greater specificity around coding for **Deep Vein Thrombosis (DVT)** diagnoses and to avoid limitations with capturing patient safety-related events. This tip sheet offers guidance on how to submit a diagnosis code with greater specificity, including details on the severity, laterality, vein, and location of the diagnosis.

What should documentation and coding for DVT include?

- Description of DVT severity as acute, chronic, or historical.

- Specification of laterality (left or right).

- Specification of the vein (i.e., femoral, iliac, or tibial).

- Specification of location (upper or lower extremity).

- Medication (anticoagulants) and length of treatment; clearly link the therapy to the diagnosis and purpose of anticoagulant therapy.

- Educational information, patient's next appointment orders, or diagnostic tool used.

Common coding practices for DVT that providers should avoid:

- Do not document DVT as resolved if the condition is current.

- Do not document a suspected or unconfirmed diagnosis as if it were confirmed.

- Do not describe current chronic DVT as "history of" or "past medical history." The phrases "history of" and "past medical history" mean the condition is historical and no longer exists.

- Do not use terms that imply uncertainty, such as "probable," "apparently," "likely," "consistent with," etc. to describe a current, confirmed peripheral vascular disease condition.

Vascular Diseases – Deep Vein Thrombosis (DVT)

Severity

Always document DVT to the highest specificity as acute, chronic, or historical.

Acute	**Chronic**	**Historical**
A new and often symptomatic thrombosis is found, and the patient is starting anticoagulation therapy.	Old or established, which requires ongoing anticoagulation therapy.	Patient no longer has thrombosis, but is taking anticoagulation therapy prophylactically.

According to the American Heart Association, a thrombus is referred to as acute when it is within two weeks and chronic when it is more than six months.

Acute within two weeks	→	Chronic more than six months

Vein, Laterality, and Location

Always document the vein, the laterality, and the exact location of the diagnosis (i.e., lower extremity versus upper extremity).

Deep Vein Thrombosis Diagnoses for Lower Extremities:

Acute embolism and thrombosis of lower extremity		Chronic embolism and thrombosis of lower extremity	
I82.41x	Femoral vein	I82.51x	Femoral vein
I82.42x	Iliac vein	I82.52x	Iliac vein
I82.43x	Popliteal vein	I82.53x	Popliteal vein
I82.44x	Tibial vein	I82.54x	Tibial vein
I82.45x	Peroneal vein	I82.55x	Peroneal vein
I82.46x	Calf muscular vein	I82.56x	Calf muscular vein
I82.49x	Other specified deep vein of lower extremity	I82.59x	Other specified deep vein of lower extremity

Deep Vein Thrombosis Diagnoses for Upper Extremities:

Acute embolism and thrombosis of upper extremity		Chronic embolism and thrombosis of upper extremity	
I82.61x	Superficial veins of upper extremity	I82.71x	Superficial veins of upper extremity
I82.62x	Deep veins of upper extremity	I82.72x	Deep veins of upper extremity
I82.A1x	Axillary vein	I82.A2x	Axillary vein
I82.B1x	Subclavian vein	I82.B2x	Subclavian vein
I82.C1x	Internal jugular vein	I82.C2x	Internal jugular vein

Other Embolism and Thrombosis Diagnoses:

Embolism and thrombosis of	
I82.81x	Veins of lower extremities
I82.82x	Other specified veins

In the grids above, each x that appears at the end of a code represents an additional digit that is required for completion of the code. **Please note that this is not an inclusive list.**

Vascular Diseases – Deep Vein Thrombosis (DVT)

Coding Examples

Here are some examples on how to code diagnoses properly:

What you documented in your notes for the diagnosis	What you coded for the diagnosis	What your code means	What code to use to represent the diagnosis accurately
Recurrent right DVT. On Xarelto prophylactically.	I82.91 – Chronic embolism and thrombosis of unspecified vein.	The code does not match the documentation. Recurrent does not mean chronic. Since the patient is taking Xarelto prophylactically, this means the patient has a history of this diagnosis. This is historical in severity.	Z86.718 – Personal history of other venous thrombosis and embolism.
DVT on chronic anticoagulation therapy.	I82.891 – Chronic embolism and thrombosis of other unspecified vein.	The code does not match the documentation. Chronic anticoagulation or chronic use of medication does not mean DVT is chronic. Acuity should have been documented for clarity.	I82.890 – Acute embolism and thrombosis of other unspecified vein.
Acute DVT of right lower leg. Starting Coumadin treatment.	I82.890 – Acute embolism and thrombosis of other unspecified vein.	The code does not match the documentation. Documentation specifies laterality and patient is starting on Coumadin treatment.	I82.401 – Acute embolism and thrombosis of unspecified deep veins of right lower extremity.

For questions, please contact **#Risk_Adjustments_and_clinical_Documentation@healthfirst.org**.

References: EncoderPro (https://www.encoderpro.com/epro/); AHA Coding Clinic Advisor (https://www.codingclinicadvisor.com/); supercoder.com; Gornik, Heather L. and Sharma, Aditya M., *Duplex Ultrasound in the Diagnosis of Lower-Extremity Deep Venous Thrombosis,* ahajournals.org/doi/full/10.1161/circulationaha.113.002966. Accessed May 15, 2020.

0551-20