

Vascular Surgery CCs and MCCs

Vascular surgery charts often include findings (clinical indicators) of conditions which increase the patient's Risk of Mortality (ROM) and, if documented as a **Diagnosis** (in progress notes and discharge summary), will increase the coded Severity of Illness (SOI).

For Example:

1. **Acute Blood Loss Anemia.** When a patient has anemia and a "Type 1A endoleak with movement of the stent" or "associated with bleeding from a port, left lower quadrant causing bleeding from the inferior epigastric artery and vein...hemoglobin 10.7, hematocrit 30", then '**acute blood loss anemia**' (ABLA) should be documented as a Diagnosis.
2. **Specified Shock.** When a patient has hypotension requiring vasopressors, then '**shock**' should be documented as a Diagnosis and Linked to a suspected Etiology, often hypovolemic, vasogenic or neurogenic.
3. **Abdominal Aortic Aneurysm.** "Status post endovascular repair using AneuRx modular device for abdominal aortic aneurysm," describes a patient with a Diagnosis of '**personal history of (PHO) abdominal aortic aneurysm**'.
4. **Angioplasty.** Along the same lines, "Status post iliac balloon angioplasty and stenting" should be documented as a Diagnosis of '**PHO angioplasty with (R or L) iliac stent (implant)**'.
5. **PMHx.** Any current medical condition included in Past Medical History (hypertension, osteoarthritis, A.fib, diabetes) should be documented as a Diagnosis.
6. **Labs.** Although abnormal diagnostic test results may be documented and reported as resolved, when they are not included as diagnoses they cannot be coded:
 - i. 'Acidosis'
 - ii. 'Hypernatremia'
 - iii. "Plat: 70" is '**thrombocytopenia**'
 - iv. "BUN: 35, Creat: 3.27" may represent '**CKD**', '**acute renal failure**', or both and have a higher SOI depending on Stage of CKD and Type of acute kidney failure
7. **Respiratory Failure.** "Continue vent, respiratory management" needs a Diagnosis. '**Acute hypoxic respiratory failure**' necessitating a vent has a high SOI and justifies the vent.
 - i. Caution not to use the phrase "Post Op". Link the respiratory failure to the disease not the surgery.

When these diagnoses are included in the notes and discharge summary, the SOI will increase significantly, and physicians will get credit for the care of their very sick patients.

Be sure to document a diagnosis for every: abnormal test result, condition monitored, consultation/drug/treatment ordered, and/or (suspected) etiology.

Remember: Uncertainty is acceptable for inpatients if documented.

- Possible/probable/likely/suspected