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included throughout the Tabular List to ensure accurate coding, providing additional information on common diseases and conditions. Placeholder X symbol reminds you to assign placeholder X for codes less than 6 characters that require a 7th character. Present on Admission symbol identifies the diseases that will always be coded as present on admission. Manifestation code identifies conditions for which it is important to record both the etiology and the symptom of the disease. CC (Complications & Comorbidities) and MCC (Major CC) symbols identify codes associated with the presence of secondary diagnoses from MS-DRGs, and call attention to CC and MCC exceptions. Age and Sex edits from the Definition of Medicare Code Edits help to ensure accuracy by denoting codes that are used only with patients of a specific age or sex. American Hospital Association's Coding Clinic? citations include official ICD-10-CM coding advice relating to specific codes and their usage. Codingupdates.com companion website includes the latest changes to the ICD coding system. NEW! 2016 ICD-10-CM for Hospitals replaces Carol Buck's ICD-9-CM for Hospitals, Volumes 1 and 2; this manual includes an introduction to ICD-10-CM coding in Part I, an alphabetic index to diseases and injuries in Part II, and the Tabular List of diseases and injuries in Part III. UPDATED 2016 Official Code set reflects the latest ICD-10 codes needed for diagnosis coding.

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and enhance understanding of specific coding situations. Official Guidelines for Coding and Reporting (OGCRs) are listed in full and also integrated within the code set, providing fast, easy access to coding rules. Convenient Guide to the Updates in the front of the book lists all new, revised, and deleted codes, providing at-a-glance lookup of the annual changes. Symbols and highlights draw attention to codes that may require special consideration before coding, including: New, Revised, and Deleted Codes that call for the use of additional character(s) Includes, Excludes 1 and Excludes 2 Use Additional Unspecified Code First and Code Also Items are included throughout the Tabular List to ensure accurate coding, providing additional information on common diseases and conditions. Placeholder X symbol reminds you to assign placeholder X for codes less than 6 characters that require a 7th character. Additional elements within specific codes define terms and add coding instructions relating to difficult terminology, diseases and conditions, or coding in a specific category. Manifestation code identifies conditions for which it is important to record both the etiology and the symptom of the disease. Age and Sex edits from the Definition of Medicare Code Edits help to ensure accuracy by denoting codes that are used only with patients of a specific age or sex. American Hospital Association's Coding Clinic® citations include official ICD-10-CM coding advice relating to specific codes and their usage. Codingupdates.com companion website includes the latest changes to the ICD coding system. NEW! 2016 ICD-10-CM for Physicians replaces Carol Buck's ICD-9-CM for Physicians, Volumes 1 and 2; this manual includes an introduction to ICD-10-CM coding in Part I, an alphabetic index to diseases and injuries in Part II, and the Tabular List of diseases and injuries in Part III. UPDATED 2016 Official Code set reflects the latest ICD-10 codes needed for diagnosis coding.

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ICD-10-CM for Hospitals: Draft Anita Hart, 2013-09 Now featuring our hallmark color-coding and symbols reflecting the new ICD-10 MS-DRG reimbursement edits, the 2014 ICD-10-CM: The Complete Official Draft Code Set makes facing the challenge of learning a new code set easier. Prepare for the future of coding with the latest and most comprehensive update to the code set. The current rule published in the Federal Register sets the adoption of ICD-10-CM to replace ICD-9-CM Volumes 1 and 2 to go into effect October 1, 2014.

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Medical Coding: Icd-10-Pcs BarCharts, Inc,Shelley C. Safian,2012-05-31 The health care industry is moving toward a major change in the code set, or language, used to report the reasons why a physician or health care professional provided care to a patient. Since 1978, the industry has used codes from ICD-9-CM, volume 3, to report the procedures, services, and

treatments provided to inpatients in acute care facilities. Within the next few years, the transition will be made to ICD-10-PCS. The transition from ICD-9-CM, volume 3, to ICD-10-PCS will only affect those health information management professionals (and those getting ready to enter this profession) working on hospital inpatient procedure coding, but it will require even the most seasoned professionals to learn how to accurately report what has been provided to patients. With the use of tabular examples and color-coded text, this QuickStudy guide helps make the transition smoother and promote better understanding and greater comfort with the new code set.

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