

Diagnosis	Documentation Requirements		
Acute Myocardial Infarction (AMI)	Document type: - STEMI - Non-STEMI Document initial occurrence date of MI, subsequent MIs are defined as occurring within 28 days of 'first' MI	Document location: - Anterior wall (Left main, LAD, other) - Inferior wall (Right coronary artery, other) - Other sites	Document any tobacco use, abuse, dependence, or exposure Delineate acute coronary syndrome and acute ischemic heart disease from true MI
A-Fib/A-Flutter	Differentiate between: - Atrial fibrillation - Atrial flutter	Specify Atrial Fibrillation as: - Paroxymal - Persistent - Chronic	Specify Atrial Flutter as: - Typical A-flutter or Type I - Atypical A-flutter or Type 2
Arrhythmia & Dysrhythmia	Specify type: - Ventricular fibrillation - Ventricular flutter - Sick sinus syndrome - PCAs - Other	Document underlying cause: - Calan - Pulmonary emboli - Hypothermia - Other	
Artioventricular and Left Bundle-branch Block	Document type: - First degree - Second degree - Complete	Specify location: - Left anterior fascicular - Left posterior fascicular	Document underlying cause: - Digoxin - AMI - Myocarditis - Rheumatic fever - Other
Cerebral Infarction & Occlusion	Document etiology: - Due to embolus, thrombosis, occlusion, or stenosis Document laterality: -Right -Left	Document specific artery affected: - Precerebral (vertebral, basilar, or carotid) - Cerebral Artery (middle, anterior, posterior) - Cerebellar arteries	Specify if intraoperative or postprocedural complication Document any related deficits: (Right or left hemiparesis, aphasia, seizure, etc.) Document: - TPA administration
Chest Pain	Document location: - Precordial - Intercostal - Anterior wall	Document underlying cause: GERD, Angina, Pleurisy, Acute MI, Anxiety, etc.	Document presence of hypoxemia and hypercapnea
Congestive Heart Failure (CHF)	Document acuity: - Acute - Chronic - Acute on chronic Specify if rheumatic heart failure	Document type: - Systolic (include ejection fraction) - Diastolic - Combined	List any casual relationships: - Hypertension - Chronic kidney disease - Obstetric surgery/procedures - Surgery
Coronary Artery Disease (CAD)	Document: - With or without angina - Type of angina (stable, unstable, spasm, etc.) Specify when the cause is a lipid rich plaque or calcified coronary lesion (note also if chronic total occlusion)	Document site (vessels): - Native arteries - Bypass graft (autologous artery or vein, nonautologous vessel)	Document site (vessels) of transplanted heart: - Native arteries - Bypass graft Document any tobacco use, abuse, dependence, or exposure
Diabetes Mellitus	Document: - Type I or Type II - Long-term insulin use for Type II Document any cause/effect relationship between diabetes and other conditions (e.g. PVD, Ulcer, Neuropathy, etc.)	Document: Insulin underdosing or overdosing related to insulin pump malfunction Document any underlying condition, drug or chemical responsible for secondary Diabetes (e.g., steroid induced)	Differentiate: - Diabetes accompanied by hypoglycemia OR hyperglycemia Document: - Hypoglycemia with OR without coma
Drug Underdosing	Document: - Intentional versus - Unintentional	Document reason for underdosing: - Financial hardship or - Age related dementia	
Lipid Disorders	Document specific type such as: - Group A - pure hypercholesterolemia - Group B - pure hyperglyceridemia	Document specific type such as: - Group C - mixed hyperlipidemia - Group D - hyperchylomicronemia	Document specific type such as: - Familial combined hyperlipidemia



Cardiology & Cardiothoracic Medicine Tip Sheet for ICD-10

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Hypertension	Document: - Essential - Secondary - Benign - Arterial - Malignant	Link hypertension to heart disease Link hypertension to kidney disease	Document any tobacco use, abuse, dependence, or exposure
Paroxysmal Tachycardia	Document type: - Re-entry - Supraventricular - Ventricular	Document underlying cause (e.g. illicit drug use, hyperkalemia, etc.)	
Tobacco Use Disorder	Document type: - Cigarettes - Chewing tobacco - Other Delineate between: - Tobacco use/abuse - Tobacco dependence	Document state of dependence: - In remission - With withdrawal - Without withdrawal	Document if used during pregnancy, childbirth, puerperium Describe history, including product and time
Valvular Diseases	Specify valve: - Aortic - Mitral - Tricuspid - Pulmonary	Specify acuity of disease: - Stenosis - Insufficiency - Stenosis with insufficiency - Prolapse	Identify the specific cardiac condition (e.g., acute rheumatic myocarditis, rheumatic tricuspid stenosis, etc.)
Procedure		Documentation Requirements	
Coronary Arteriography	Document if imaging performed was: - Aortography - Bypass graft - Coronary arteries - Internal mammary artery graft - Left or right heart - Pulmonary - Ventricles - Vena Cava	Document: - Single artery - Multiple arteries Note if procedure was done with fluoroscopy	Document type of contrast used: - None - Low osmolar - High osmolar - Other Document: - Single catheter - Double catheter
Heart Cardiac Catheter	Document site of catheterization: - Left heart - Right heart - Bilateral heart	Document approach: - Open - Percutaneous	
Diagnostic Ultrasound-heart	Document site: - Coronary arteries(multiple or single) - Heart w/aorta - Left or right heart - Pediatric heart - Pericardium	Document laterality: - Right - Left	
Percutaneous Transluminal Coronary Angioplasty	Document laterality: - Right - Left - Bilateral	Document approach: - Open - Percutaneous	
Insertion of Drug-eluting Stent(s)	Document site of stent insertion: - Coronary artery - Lower arteries Document how many sites were treated: - One - Two - Three - Four or more	Document approach: - Open - Percutaneous - Percutaneous endoscopic	Note if the procedure is on vessel bifurcation
Heart Cardioversion	Document: - Atrial cardioversion - Carotid sinus stimulation - Conversion of cardiac rhythm - Other electric countershock	Document: - Elective - Emergent (internal OR external)	