BASICS

- Arrhythmias are uncoordinated or irregular contractions of the heart muscle caused by a problem in the electrical system of the heart
- The most common form of cardiac arrhythmias is atrial fibrillation (aFib), and can lead to stroke or heart failure if not controlled
- Diagnoses that are considered specified heart arrhythmias include:

Root Code	Diagnosis
I47.X	Tachycardia
I48.X	Atrial Fibrillation and Flutter
I49.X	Other Cardiac Arrhythmias

Use ALL applicable codes to accurately document a patient's condition, more than 1 can be documented

Remember to M.E.A.T. (Monitor, Evaluate, Assess and/or Treat) and document:

- Anticoagulant therapy and it's direct relation to cardiac arrhythmias
- Use term and abbreviation - full term first and then can abbreviate later (eg. Atrial Fibrillation followed by aFib or AF)
- Symptoms of aFib and link to diagnosis
- If current, identify rate and rhythm irregularities
- Heart blocks, including degree and site
- If "History of" indicate disease is no longer active or current in assessment

When documenting specified heart arrhythmias it is important to document type, status and severity:

Diagnosis	Root Code	Sub Codes			
Tachycardia	**I47.X**	Re-Entry	Supraventricular	Ventricular	Paroxysmal/Unspecified
		I47.0	I47.1	I47.2	I47.9

Diagnosis	Root Code	Sub Codes					
Atrial Fibrillation	**I48.X**	Paroxysmal	Persistent		Chronic		Unspecified
			Longstanding	Other	Unspecified	Permanent	
		I48.0	I48.11	I48.19	I48.20	I48.21	I48.91

Diagnosis	Root Code	Sub Codes		
Atrial Flutter	**I48.X**	Typical-Type 1	Atypical -Type 2	Unspecified
		I48.3	I48.4	I48.92

Diagnosis	Root Code	Sub Codes			
Other Cardiac Arrhythmias	**I49.X**	Ventricular Fibrillation	Ventricular Flutter	Premature Depolarization	Sick Sinus Syndrome
		I49.01	I49.02	I49.1-I49.4	I49.5

Add non specific codes—

I49.8, I49.9 and R00.00 and note *Codes with a greater degree of specificity should be considered first.

BEYOND THE BASICS
ICD10 CODING CONSIDERATIONS

SEVERITY

- Atrial Fibrillation is the most common type of arrhythmia, and it is important to appropriately document type:

ICD10 Code	Description
I48.0	**Paroxysmal–** irregular rhythm starts suddenly and resolves within 7 days
I48.1	**Persistent–** lasts greater than 7 days and subject to a control strategy, even if currently in normal sinus rhythm as a result to medication
I48.2	**Chronic–** patient and provider agree to remain in atrial fibrillation (permanent) and focus is on rate control and clot prevention
I48.91	**Unspecified** - physician doesn't know or state type in documentation (common with new onset aFib)

HEART BLOCKS

- Always identify the degree of block and site of block (I44.x)

Heart Block Degree	Description
First	Mildest form and may cause no symptoms
Second	Affects heart pumping due to contractions that are strong but less frequent to a disruption in the electrical conduction. Also note if it is a Mobitz type 1 or 2
Third	Total heart block and usually requires a pacemaker. Can be documented as: Complete block, AV dissociation, AV block III or AV block 3.

COMORBIDITIES

- Medical conditions that exist at the same time as diagnosis or can increase the risk of heart arrhythmias

ICD10 Code	Description
I10	Essential (Primary) Hypertension
E66.X	Obesity (Include BMI)
I25.X	Coronary Artery Disease
I34.X-I35.X	Valve Disorders (Specify type of valve)
E10.X, E11.X	Diabetes (Type 1, Type 2)
E05.X	Hyperthyroidism (Specify Type, if known)

MEDICATIONS

- Actively document medications **AND** the link to diagnosis
- Common medications include: anticoagulants, antithrombolitics, antiplatelets, NSAIDs, aspirin

PACEMAKER

- If the pacemaker is the **ONLY** treatment use either code below and not condition it corrects

ICD10 Code	Description
Z95.0	Presence of cardiac pacemaker
Z95.810	Presence of automatic (implantable) cardiac defibrillator

- If the patient has a pacemaker and is also prescribed other medications to treat arrhythmias report the arrhythmia in addition to the pacemaker code

ICD10 CODING SCENARIOS

Example	ICD 10 Coding
Patient with permanent atrial fibrillation and bradycardia and no active symptoms. Patient also has pacemaker, and is taking no medications.	•Z95.0, Presence of a cardiac pacemaker
Patient with permanent atrial fibrillation and bradycardia, and no active symptoms. Patient also has a pacemaker and is currently taking Clopidogrel for prophylaxis of aFIB related thrombi.	•I48.2, Chronic atrial fibrillation AND •Z95.0, Presence of a cardiac pacemaker AND •Z79.2 Long term (current) use of anthithrombotics/antiplatelets