

DSC Notice: 78/2002 (W)
English DSCN Equivalent: N/A
Date of Issue: January 2003

IRSS Information Requirements and Standards Sub Committee	Subject:
	Data Standards: Coding of Renal Dialysis and Chemotherapy
	Implementation date: Immediate

DATA SET CHANGE CONTROL PROCEDURE

This paper gives clarification of the recording of Regular Day Attenders for Renal Dialysis and Chemotherapy.

Summary of change:

Notification of the amendment to NHS Information Authority Coding Clinic March 2002 for immediate implementation in Wales.

Summary of impact:

The implication on staffing levels would be dependent upon the number of regular day attenders that the Trusts have recorded. Most Trusts have, until recently, been capturing this information on a regular basis; therefore the impact should be minimal.

Change Proposal Reference No:
IRSS (02) 31

The Information Requirements and Standards Sub Committee (IRSS), is responsible for approving information standards.

Please address enquiry's about this DSCN to the Data Standards and Information Quality Team, HSW, Brunel House, 2 Fitzalan Road, Cardiff CF24 0HL Tel: 029 20502463 or E-mail Data.Standards@hsm.wales.nhs.uk

Data Set Change Notices are available via the Intranet Service HOWIS <http://howis.wales.nhs.uk/> or by contacting the above address.

DSCN numbering format = sequence number/year of issue, (W) for Welsh DSCN's.

DATA SET CHANGE NOTICE 78/2002 (W)

Reference: IRSS (02) 31

Subject: Coding of Renal Dialysis and Chemotherapy

Effective Date: Immediate

Reason for Change: To come into line with English practice. To ensure that statistical data held on PEDW/APC is of uniform high quality and to remove inaccurate recording of Day Cases. This is following identified inconsistencies in capturing this information in Wales.

The aim is to improve consistency of the quality of the data collected, and identify important clinical conditions occurring as a consequence of the treatment of dialysis or chemotherapy. It should also be of great importance to clinicians when discussing resources and staffing levels within the Units that provide this type of care.

Summary:

The training of staff on the recording of regular day attenders for renal dialysis and chemotherapy will be incorporated within the Clinical Coding Training Programme. See Annex A for further information.

Impact on NHS Wales Data Dictionary:

This DSCN is in line with the existing standards within Ver 2.4 of the NHS Wales Data Dictionary for *Regular Day Admission* and *Record Type*.

Additional Information:

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Annex A



AMENDMENT TO NHS INFORMATION AUTHORITY CODING CLINIC MARCH 2002 FOR IMPLEMENTATION IN WALES

RENAL DIALYSIS

Patients requiring renal dialysis are admitted in the following scenarios:

a) A single dialysis treatment during an inpatient stay.

Example:

Patient admitted with Chest Infection, which was main condition treated known to have end stage renal disease.

Given one session of Haemodialysis.

Diagnosis:

J22.X Unspecified acute lower respiratory infection

N18.0 End stage renal disease

Z99.2 Dependence on renal dialysis

Procedure:

X40.3 Haemodialysis nec

b) Patient attends as a regular day admission for a series of dialysis, one session given per visit.

Diagnosis:

N18.0 End stage renal disease

Z49.1 Extracorporeal dialysis

Procedure:

X40.3 Haemodialysis nec

This standard is in line with England

Annex A

AMENDMENT TO NHS INFORMATION AUTHORITY CODING CLINIC CONTINUED

c) **Multiple dialysis sessions during an in-patient stay.**

Example:

Patient admitted with end stage renal failure for help and supervision with his first sessions of Haemodialysis (5 sessions).

Diagnosis:

N18.0 End stage renal dialysis
Z49.1 Extracorporeal dialysis

Procedure:

X40.3 Haemodialysis nec
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Most patients who are admitted specifically to have dialysis should be classified as 'regular day or night attenders'. Each attendance will generate an episode and each episode should be coded. They come under patient classification 3 & 4 and Trusts send details to PEDW/APC, who receive them as part of the data extract in order to check the validity of the Trust assigned patient classification.

The OPCS-4 codes that cover the procedure of dialysis are X40.- Compensation for renal failure.

If a patient is admitted specifically to have renal dialysis, then the ICD-10 code Z49.- Care involving dialysis, should be used as a secondary code, the primary diagnosis will be the renal condition.

However, if the patient is admitted for other treatment, for instance, a transplant, but receives dialysis during in patient stay, it is not appropriate to record Z49.-.

Annex A



Clarification regarding the recording of

CHEMOTHERAPY

Patients requiring Chemotherapy are admitted in the following scenarios:

d) One Chemotherapy treatment during an inpatient stay.

Example:

Patient admitted with Lobar Pneumonia, which was main condition treated known to have malignant neoplasm Lung.

Given one session of Chemotherapy.

Diagnosis:

J18.0 Bronchopneumonia

C34.9 Malignant neoplasm bronchus or lung unspecified.

M8000/3 Neoplasm Malignant

Procedure:

X35.2 Intravenous Chemotherapy

e) Patient attends as a regular day admission for a series of Chemotherapy sessions, one session given per visit.

Diagnosis:

C18.9 Adenocarcinoma Colon Unspecified

M8140/3 Adenocarcinoma NOS.

Z51.1 Chemotherapy session for neoplasm

Procedure:

X35.2 Intravenous Chemotherapy

This standard is in line with England

Annex A

f) **Multiple Chemotherapy sessions during an in-patient stay.**

Example:

Patient admitted with suspected bone metastasis (not confirmed) from Carcinoma of Prostate, during in-patient stay received Chemotherapy (5 sessions).

Diagnosis:

C61.X Malignant neoplasm of prostate
M8010/3 Carcinoma NOS

Procedure:

X35.2 Intravenous Chemotherapy
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Most patients who are admitted specifically to have Chemotherapy should be classified as 'regular day or night attenders'. Each attendance will generate an episode and each episode should be coded.

They come under patient classification 3 & 4 and Trusts send details to PEDW/APC, who receive them as part of the data extract in order to check the validity of the Trust assigned patient classification.

The OPCS-4 codes that cover the procedure of Chemotherapy are X35.2 Intravenous Chemotherapy, X37.2 Intramuscular Chemotherapy or X38.2 Subcutaneous Chemotherapy.

If a patient is admitted specifically to have Chemotherapy, then the ICD-10 code Z51.1 Chemotherapy session for neoplasm should be used as a secondary code, the primary diagnosis will be the malignant neoplasm.

However, if the patient is admitted for other treatment, but receives Chemotherapy during in patient stay, it is not appropriate to record Z51.1.