

Government of **Western Australia** Department of **Health** 

# Western Australian Coding Rule

### 0318/38 Fetal distress

In ICD-10-AM/ACHI/ACS Tenth Edition, ACS 1546 *Fetal heart rate decelerations* was retired. As with any other additional diagnosis (except those addressed in a specific standard), fetal distress should be coded when it meets the criteria in ACS 0002 *Additional diagnoses*. WA Coding Rule 1013/01 *Fetal distress* is therefore retired.

#### DECISION

#### WA Coding Rule 1013/01 Fetal distress is retired.

[Effective 01 Jul 2017, ICD-10-AM/ACHI/ACS 10th Ed.]



Government of **Western Australia** Department of **Health** 

# Western Australian Coding Rule

## 1013/01 Fetal distress

#### Q.

Is CCWA decision about coding of fetal distress from March 2011 still current? Should fetal distress **only** be coded if instrumental or surgical intervention is undertaken or should it be coded if it meets the criteria in ACS 0002?

#### Α.

Previous CCWA decision states:

#### Q.

ACS 1546 Fetal heart rate decelerations states: Documentation of 'early', 'late' or 'variable' decelerations should only be coded in the presence of documented 'fetal distress' or instrumental or surgical intervention is undertaken. Does this mean that if fetal distress is documented, it should automatically be coded?

#### Α.

ACS 1546 was introduced in second edition (1 July 2000). Subsequently, Coding Matters vol 8 no 1 (June 2001) provided clarification that fetal distress should only be coded if it requires instrumental or surgical intervention.

#### DECISION

# Documentation of 'fetal distress' or 'decelerations' should only be coded if instrumental or surgical intervention is undertaken.

ACS 1546 does not instruct on when fetal distress should be coded. It only instructs on when 'decelerations' should be coded (when in the presence of fetal distress **or** when instrumental or surgical intervention is undertaken).

As with any other additional diagnosis (except those addressed in a specific standard), fetal distress should be coded when it meets the criteria in ACS 0002 *Additional diagnoses.* 

#### DECISION

#### Fetal distress should be coded if it meets the criteria in ACS 0002 Additional diagnoses.

[Effective 18 Oct 2013, ICD-10-AM/ACHI/ACS 8<sup>th</sup> Ed.]



Government of **Western Australia** Department of **Health** 

# Western Australian Coding Rule

### 0311/01 Fetal distress

#### Q.

ACS 1546 Fetal heart rate decelerations states: Documentation of 'early', 'late' or 'variable' decelerations should only be coded in the presence of documented 'fetal distress' or instrumental or surgical intervention is undertaken. Does this mean that if fetal distress is documented, it should automatically be coded?

#### Α.

ACS 1546 was introduced in second edition (1 July 2000). Subsequently, Coding Matters vol 8 no 1 (June 2001) provided clarification that fetal distress should only be coded if it requires instrumental or surgical intervention.

### DECISION

Documentation of 'fetal distress' or 'decelerations' should only be coded if instrumental or surgical intervention is undertaken.

[Effective 23 Mar 2011, ICD-10-AM/ACHI/ACS 7<sup>th</sup> Ed.]

better health • better care • better value