START SMART CODING TIP

Pulmonary Embolism

Coding pulmonary embolism – types, chronicity & Coding Clinics

RELEVANT CODING CLINICS

- 4Q 2024
- 2Q 2022
- 2Q 2021

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PULMONARY EMBOLISMS

Acute, Chronic & the Basics

What a PE is — and why chronicity must be documented, never assumed

WHAT IS A PE?

An embolism (usually a clot) lodges in the lungs, blocking the pulmonary arteries and reducing blood flow to the lungs and heart.

The clot often starts elsewhere — often a leg or arm — and travels through the veins to the lung.

ACUTE VS. CHRONIC

A PE can be **acute** or **chronic** (long-standing — occurring over weeks, months, or years).

CHRONIC PE

Code a chronic PE as current **only** if the provider explicitly documents it as such. Do **not** assume chronicity based on duration.

LONG-TERM ANTICOAGULANTS

Assign **Z79.01** for associated long-term (current) use of anticoagulant therapy.

RESOLVED / HISTORY OF PE

If the PE has completely resolved and the provider documents history of PE, assign **Z86.711** (personal history of pulmonary embolism).

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PE SUBTYPES

Septic & Saddle PEs

Two distinct subtypes — capture the right documentation for each

SEPTIC PES

Usually originate from an **infected thrombus** elsewhere in the body.
Common sources: right-sided infective endocarditis, infected IV lines / catheters, septic thrombophlebitis.

Documentation should include **"septic"** and the source of infection, if known.

SADDLE PES

A large clot spans an **arterial bifurcation** – high risk of a life-threatening event.
Documentation may note **"with acute cor pulmonale"** (massive PE causing acute right ventricular failure).
ICD-10-CM has distinct codes for saddle PEs **with and without** acute cor pulmonale.

PE CODING CLINIC · 4Q 2024

Cement & Fat Pulmonary Emboli

New I26 codes with and without acute cor pulmonale — effective Oct 1, 2024

NEW CODES · SUBCATEGORY I26

	With acute cor pulmonale	Without acute cor pulmonale
Cement embolism	**I26.03**	**I26.95**
Fat embolism	**I26.04**	**I26.96**

QUICK DEFINITIONS

Cement embolism (PCE): iatrogenic condition where bone cement made from PMMA used during procedures such as vertebroplasty/kyphoplasty, leaks into the venous system & subsequently hardens creating a PCE

Fat embolism (FE): One or more droplet-like particles of fat enter the bloodstream & block the systemic or pulmonary circulatory system. Often occur after acute fractures of major bones, orthopedic surgery, or non-traumatic causes such as pancreatitis, sickle cell disease, and alcoholic and fatty liver disease

Cor pulmonale: right-sided heart failure or pulmonary heart disease.

EXAMPLE · CEMENT EMBOLISM

Fall → T11 vertebral fracture → vertebroplasty complicated by acute postprocedural respiratory failure; imaging confirmed a pulmonary artery cement embolism.

S22.089A · J95.821 · T81.718A · I26.95

EXAMPLE · FAT EMBOLISM

Post-surgical fat embolism in the pulmonary artery: **T81.718A · I26.96**

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PE CODING CLINICS

Segmental, Subsegmental & Chronic

When more than one code is needed to fully describe the emboli

2Q 2022 · SEGMENTAL & SUBSEGMENTAL

CTA shows segmental emboli in the right middle/lower lobes plus bilateral subsegmental emboli; the provider documents "segmental and subsegmental pulmonary emboli."

Two codes are needed to capture this scenario – segmental maps to **I26.99** and multiple subsegmental to **I26.94** (both without acute cor pulmonale).

2Q 2021 · BILATERAL CHRONIC SUBSEGMENTAL

Patient diagnosed with **chronic** bilateral subsegmental PE.

Two codes are needed to capture this scenario– multiple subsegmental **I26.94** and chronic PE **I27.82**. The Excludes2 note at I26 permits using both when appropriate.

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