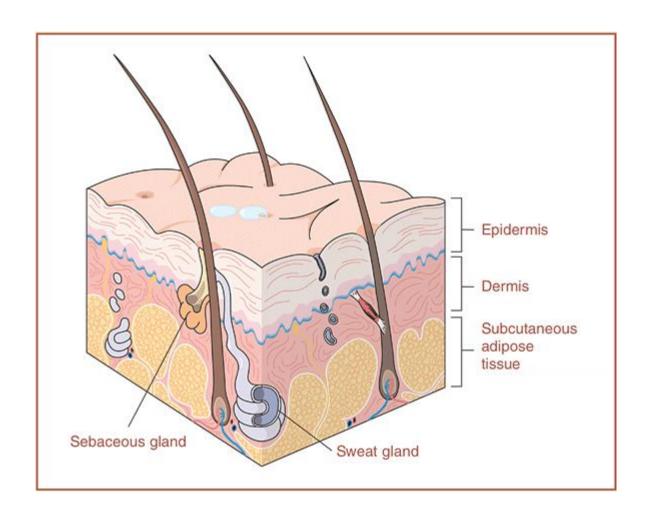
# Chapter 12 Diseases of the Skin and Subcutaneous Tissue L00-L99

Presented by Jesicca Andrews

#### **Skin and Subcutaneous Tissue**



#### Introduction

L00-L08 Infections of skin and subcutaneous tissue

**L10-L14** Bullous Disorders

**L20-L30** Dermatitis and Eczema

**L40-L45** Papulosquamous Disorders

L49-L54 Urticaria and Erythema

L55-L59 Radiation related disorders of the skin and subcutaneous tissue

**L60-L75** Disorders of skin appendages

L76 Intraoperative and postprocedural complications of skin and subcutaneous tissue

**L80-L99** Other disorders of the skin and subcutaneous tissue

Conditions affecting nails, sweat glands, hair and hair follicles are included in this chapter; Congenital disorders of these sites are in Chapter 17.

Neoplasms of the skin are in Chapter 2.

#### **DERMATITIS/ECZEMA L20-L27 & L30**

- **L20- Atopic** (of or relating to hereditary hypersensitivity to certain allergens)
- **L21- Seborrheic** (excessive secretion of sebum or an alteration in its quality)
- L22 Diaper
- **L23- Allergic Contact** (due to metals, adhesive, drugs, dyes, food, and plants)
- **L24- Irritant Contact** ( due to detergents, oils, greases and solvents)
- **L25- Unspecified Contact** (not specified as allergic- or irritant-contact)
- **L26- Exfoliate** (generalized scaling eruption of the skin that is drug induced, idiopathic, or secondary to underlying cutaneous or systemic disease)
- **L27-** Due to substance taken internally
- **L30-** Other and Unspecified (eczema, nos patches of skin become rough and inflamed, with blisters that cause itching and bleeding, typically having no obvious external cause)

Dermatitis and Eczema are used interchangeably in this chapter.

Contact dermatitis is a localized rash or irritation of the skin caused by contact with allergens (allergic-contact dermatitis) or irritants (irritant-contact dermatitis).

#### Dermatitis caused by Medication

- When coding dermatitis caused by medicines, determine whether the condition represents an adverse effect due to the proper administration of a drug or poisoning due to the incorrect use of the drug.
  - When the dermatitis is due to a medication used correctly as prescribed, it is considered an adverse effect.
  - ➤ When the dermatitis is due to incorrect use of the drug, it is classified as a poisoning by drugs, medicaments, and biological substances.
- When coding:
  - ➤ Allergic-contact dermatitis
  - > Irritant-contact dermatitis
  - Unspecified contact dermatitis
  - Dermatitis due to substances taken internally
- ❖ A code from categories T36-T65 should be assigned to indicate the way in which the poisoning or adverse effect occurred (e.g., accidental, intentional self-harm) and the type of drug involved.
- The sequencing of the code from categories T36 T65 will depend on the circumstances:
- When the condition is due to poisoning, the T36-T65 code is assigned first; it is assigned as an additional code when the condition is due to adverse effect

# **Cellulitis and Lymphangitis L03**

- **Cellulitis** is an acute, diffuse infection of the skin and soft tissues that commonly results from a break in the skin, such as a puncture wound, a laceration, or an ulcer.
- **Lymphangitis** is an inflammation of a lymphatic vessel or vessels. Acute lymphangitis may result from spread of bacterial infection into the lymphatics, manifested by painful subcutaneous red streaks along the course of the vessels.
- Occasionally, the break is so small that it cannot be identified by either the patient or the examining physician.
- Clinically, cellulitis usually presents as an abrupt onset of redness, swelling, pain, or heat in the infected area, however coders should not assume that a reference to redness at the edges of a wound or an ulcer represents cellulitis.
- ❖ Both cellulitis and lymphangitis of skin are included in category LO3. However, separate codes are available for cellulitis and lymphangitis.
- An additional code should be assigned to indicate the organism responsible (B95-B96), if this information is available. The responsible organism is usually *Streptococcus*.

#### **Cellulitis and Acute Lymphangitis L03**

#### **L03- Cellulitis and ACUTE lymphangitis**

LO3.0- Cellulitis and ACUTE lymphangitis of finger and toe

**L03.01**- Cellulitis of finger

**L03.011** Cellulitis of right finger

**L03.012** Cellulitis of left finger

L03.019 Cellulitis of unspecified finger

L03.02- ACUTE lymphangitis of finger

**L03.021** ACUTE lymphangitis of right finger

L03.022 ACUTE lymphangitis of left finger

**L03.029** ACUTE lymphangitis of unspecified finger

√ Chronic, Subacute and Lymphangitis NOS are coded to I89.1

## **Secondary Cellulitis**

- Coding of cellulitis secondary to superficial injury, burn, or frostbite requires two codes:
  - one for the injury and
  - > one for the cellulitis
- Sequencing of codes depends on the circumstances of the admission:
  - ➤ When the patient is seen primarily for treatment of an open wound, the appropriate code for open wound is assigned, with an additional code for the cellulitis.
  - ➤ When the wound itself is trivial or when it was treated earlier and the patient is now being seen for treatment of the cellulitis, the code for the cellulitis may be sequenced first, with an additional code for the open wound.
- Cellulitis may also present as a postoperative wound infection or as a result of the penetration of the skin involved in intravenous therapy.

#### **Cellulitis and Skin Ulcers**

- Cellulitis frequently develops as a complication of chronic skin ulcers, in which case it is assigned to a code from category L89, L97, or subcategory L98.4.
  - These codes do not include any associated cellulitis, so two codes are required to describe these conditions.
  - ➤ Designation of the principal diagnosis depends on the circumstances of the admission.
- Cellulitis described as gangrenous is classified to code:
  - > 196 Gangrene, not elsewhere classified
- ❖ When gangrene is present with an ulcer or injury, the gangrene is coded first, with the code for the injury or ulcer assigned as an additional code. This practice follows the instructional notes in the Tabular List to code first any associated gangrene (see note under category L89 or L97).

1. Cellulitis of the right finger with chronic lymphangitis.

 Irritant contact dermatitis due to accidental alka-seltzer poisoning, initial encounter.

#### **Extra Credit**

 Acute cellulitis and lymphangitis of the left toe with chronic ulcer of the same toe.

1. Cellulitis of the right finger with chronic lymphangitis. L03.011 + I89.1

 Irritant contact dermatitis due to accidental alkaseltzer poisoning, initial encounter.

T39.011A + L24.4

3. Acute cellulitis and lymphangitis of the left toe with chronic ulcer of the same toe.

L03.032 + L03.042 + L97.529

#### **Chronic Ulcers**

- A wound that does not heal in an orderly set of stages and in a predictable amount of time the way most wounds do; wounds that do not heal within three months are often considered chronic.
- ❖ Most chronic ulcers of the skin are classified in categories:
  - > L89 Pressure ulcer
  - ➤ **L97** Non-pressure chronic ulcer of lower limb, not elsewhere classified
  - ➤ **196** Gangrene, NEC is assigned first when gangrene is present (in both L89 and L97 categories)

## **Ulcers with Underlying Conditions**

- ❖ L97- may be principal dx if no underlying condition is documented as the cause of the ulcer.
- If one of the underlying conditions listed below is documented with a lower-extremity ulcer, a causal condition should be assumed and the underlying condition should be coded first:
  - Atherosclerosis of the lower extremities
  - Chronic venous hypertension
  - Diabetic ulcers
  - Postphlebitic syndrome
  - > Postthrombotic syndrome
  - Varicose ulcer
  - Any associated gangrene
- Arteriosclerosis of the lower extremities is classified to subcategories:
  - > 170.2 through 170.7 with fifth characters 3 or 4 when it is associated with ulceration.
  - ➤ **L97** as an additional code to indicate the severity of the ulcer.
  - If gangrene is present
    - > 170.26- (Atherosclerosis of native arteries of extremities with gangrene)
    - ➤ **I70.36-** (Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene)
    - ➤ **L98.49** as an additional code to identify the severity of any ulcer, if applicable.

#### **Ulcer Staging**

- Pressure ulcer staging may be based on nursing documentation; however, the associated diagnosis of pressure ulcer can only be coded on the basis of the provider's documentation
- ❖ Don't confuse a pressure ulcer in which the stage is <u>unspecified</u> or <u>not documented</u> (sixth character of "9") with a pressure ulcer documented as unstageable (sixth character of "0").
- The staging of pressure ulcers takes into account the depth of tissue loss and the depth of tissue exposed.
- Unstageable" refers to pressure ulcers whose stage cannot be clinically determined (e.g., the ulcer is covered by eschar or has been treated with a skin or muscle graft) as well as pressure ulcers documented as deep tissue injury but not documented as due to trauma.
- Documentation of pressure ulcers may sometimes refer to "deep tissue injury." Determine if the term refers to a traumatic injury or a pressure ulcer. The Alphabetic Index entry for:
  - ➤ Injury, deep tissue see contusion, by site
  - ➤ Injury, deep tissue, meaning pressure ulcer see pressure ulcer, unstageable, by site
- If a patient is admitted with a pressure ulcer of one stage, and it progresses to a higher stage, the code for the highest stage reported for that site should be reported.

# **Healed or Healing Ulcer**

- ❖ Distinguish between pressure ulcers documented as "healed" (no code assigned) and "healing" (assign the appropriate code for the stage documented).
- ❖ If the documentation does not provide information about the stage of the healing pressure ulcer, assign the appropriate code for unspecified stage.

#### Pressure/Decubitus Ulcer L89.-

Localized injuries to the skin and/or underlying tissue that usually occur over a bony prominence as a result of pressure, or pressure in combination with shear and/or friction.

4 <sup>th</sup> Character Specifies Site	5 <sup>th</sup> Characte	r Specifies Laterality	6 <sup>th</sup> Character Specifies Stage
<b>.0-</b> Elbow	<b>0</b> Unspec	cified	<b>0</b> Unstageable
<b>.1-</b> Back	1 Right		1 Stage 1
<b>.2</b> - Hip	<b>2</b> Left		2 Stage 2
.3- Buttock			<b>3</b> Stage 3
.4- Contiguous, back, buttock, hip			4 Stage 4
.5- Ankle			9 Unspecified Stage
. <b>6-</b> Heel			
.8- Other Site			
.9- Unspecified site			

#### Non-Pressure Ulcer L97.-

4 <sup>th</sup> & 5 <sup>th</sup> Character Specifies Site & Laterality	6 <sup>th</sup> Character Specifies Severity Level
<b>L97.3-</b> Non-pressure chronic ulcer ankle	1 Limited to break down of skin
<b>L97.30-</b> Non-pressure chronic ulcer of unspecified ankle	2 With fat layer exposed
<b>L97.31-</b> Non-pressure chronic ulcer of right ankle	3 With necrosis of muscle
<b>L97.32-</b> Non-pressure chronic ulcer of left ankle	4 With necrosis of bone
	9 Unspecified Severity

#### Stasis, Venous or Varicose Ulcer

- ❖ Wounds that are thought to occur due to improper functioning of venous valves, usually of the legs.
- ❖ Stasis ulcers are ordinarily due to varicose veins of the lower extremities and are coded to category **I83**, Varicose veins of lower extremities, rather than to the categories for conditions of the skin.
- ❖ When the physician has used the term "stasis ulcer" but has identified a cause other than varicose veins, code the condition to **187.2**, Venous insufficiency (chronic) (peripheral).
- ❖ A basic rule of coding is that further research must be done when the title of the code suggested by the Alphabetic Index clearly does not identify the condition correctly; In this case, even though the Index directs the coder to a code involving varicose veins, the code should not be used when no varicosities are present.

- 1. Arteriosclerosis of the left leg with chronic ulcer of the ankle, fat layer exposed.
- 2. Gangrenous pressure ulcer of the right buttock, stage 4.

#### Extra credit

3. Varicose ulcer of bilateral thighs with skin breakdown.

1. Arteriosclerosis of the left leg with chronic ulcer of the ankle, fat layer exposed.

$$170.243 + L97.322$$

2. Gangrenous pressure ulcer of the right buttock, stage 4.

$$196 + L89.314$$

3. Varicose ulcer of bilateral thighs with skin breakdown.

#### **Abscess, Furuncle and Carbuncle L02.-**

ABSCESS: a swollen area within body tissue, containing an accumulation of pus

**FURUNCLE:** technical term for boil (infection of the hair follicle)

CARBUNCLE: a severe abscess or multiple boil in the skin, typically infected with

staphylococcus bacteria

L02.0- Cutaneous abcess, furuncle and carbuncle of face	5 <sup>th</sup> Character
LO2.1- Cutaneous abcess, furuncle and carbuncle of neck	1 Abcess
L02.2- Cutaneous abcess, furuncle and carbuncle of trunk	2 Furnucle
LO2.3- Cutaneous abcess, furuncle and carbuncle of buttock	3 Carbuncle
L02.4- Cutaneous abcess, furuncle and carbuncle of limb	
LO2.5- Cutaneous abcess, furuncle and carbuncle of hand	
L02.6- Cutaneous abcess, furuncle and carbuncle of foot	
L02.8- Cutaneous abcess, furuncle and carbuncle of other sites	
L02.9- Cutaneous abcess, furuncle and carbuncle, unspecified	

√6<sup>th</sup> Character further specifies site

#### **Psoriasis L40.-**

A skin disease marked by red, itchy, scaly patches

L40.0 Psoriasis vulgaris
<b>L40.1</b> Generalized pustular psoriasis
L40.2 Acrodermatitis continua
<b>L40.3</b> Pustulosis palmaris et plantaris
L40.4 Guttate psoriasis
<b>L40.5</b> - Arthropathic psoriasis
L40.8 Other psoriasis
L40.9 Psoriasis, unspecified

#### **Urticaria L50.-**

A rash of round, red welts on the skin that itch intensely, sometimes with dangerous swelling, caused by an allergic reaction, typically to specific foods.

L50.0	Allergic
L50.1	Idiopathic
L50.2	Due to cold and heat
L50.3	Dermatographic
L50.4	Vibratory
L50.5	Cholonergic
L50.6	Contact
L50.8	Other
L50.9	Unspecified

# Radiation Related Skin Disorders L55.- L59.-

L55.- Sunburn
L56.- Other acute skin changes due to ultraviolet radiation
L57.- Skin changes due to chronic exposure to nonionizing radiation
L57.0 Actinic Keratosis
L58.- Radiodermatitis
L59.- Other disorders of skin and subcutaneous tissue related to radiation

#### **Acne L70.-**

The occurrence of inflamed or infected sebaceous glands in the skin; in particular, a condition characterized by red pimples on the face, prevalent chiefly among teenagers

L70.0	Acne vulgaris
L70.1	Acne conglobata
L70.2	Acne varioliformis
L70.3	Acne tropica
L70.4	Infantile acne
L70.5	Acne excoriee des jeunes filles
L70.8	Other
L70.9	Unspecified

#### **Keratosis L82, L85, L86**

Any horny growth, such as a wart or callus; the most common types are actinic keratosis and seborrheic keratosis

L82	Seborrheic <b>keratosis</b>	
L82.0		Inflamed
L82.1		Other
L85	Other epidermal thickening	
L85.1		Acquired <b>keratosis</b> palmaris et plantaris
L85.2		Keratosis punctata (palmaris et plantaris)
L86	Keratoderma in diseases classified elsewhere	
L57.0	Due to chronic exposure to radiation	Actinic <b>keratosis</b>

#### Viral Warts B07.-

A small rough growth resembling a cauliflower or a solid blister caused by a viral infection

B07	Viral Warts
B07.0	Plantar warts (verruca plantaris)
B07.8	Other viral warts (common, flat, verruca plana)
B07.9	Viral warts, unspecified

## **Neoplasms of the Skin**

- Use the Neoplasm Table
- Neoplasm, Skin, Trunk, Behavior

Neoplasm	Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain	Unspecified
Skin, NOS	C44.90	C79.2	D04.9	D23.9	D48.5	D49.2
Trunk	C44.509	C79.2	D04.5	D23.5	D48.5	D49.2
- Basal cell	C44.519					
- Specified type, NEC	C44.599					
- Squamous cell	C44.529					

1. Actinic Keratosis

2. Benign Skin Neoplasm of the nose

#### **Extra Credit**

3. Contusion of the right elbow with cellulitis.

Actinic Keratosis
 L57.0

2. Benign Skin Neoplasm of the nose D23.39

3. Contusion of the right elbow with cellulitis \$50.01xA + L03.113