

**CARDIOVASCULAR  
DOC POCKET TOOL**

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Common Cardiovascular MS-DRGs

<b>MS-DRG</b>	<b>RW</b>	<b>LOS</b>
Cardiac Valve & other major CT Procedure w/ cath w/ MCC (216).....	9.3040.....	15.9
Cardiac valve & other major CT Procedure w/ cath w/ CC (217).....	7.5813.....	10.9
Cardiac valve & other major CT Procedure w/ cath w/o CC or MCC (218).....	6.8595.....	8.3
Cardiac valve & other major CT Procedure w/o cath w/ MCC (219).....	7.2072.....	11.7
Cardiac valve & other major CT Procedure w/o cath w/CC (220).....	5.7278.....	7.6
Cardiac valve & other major CT Procedure w/o cath w/o CC or MCC(221).....	5.2463.....	6.0
Cardiac defib implant w/ cath w/ AMI/HF/shock w/ MCC (222).....	8.0234.....	10.8
Cardiac defib implant w/ cath w/ AMI/HF/shock w/o MCC (223).....	6.8809.....	5.0
Cardiac defib implant w/ cath w/o AMI/HF/shock w/ MCC (224).....	7.3178.....	9.2
Cardiac defib implant w/ cath w/o AMI/HF/shock w/o MCC (225).....	6.2956.....	4.5
Cardiac defib implant w/o Cath w/ MCC (226).....	5.9123.....	6.2
Cardiac defib implant w/o cath w/o MCC (227).....	5.0411.....	1.8
Other CT procedures w/ MCC (228).....	6.7400.....	12.0
Other CT procedures w/ CC (229).....	5.3191.....	7.9
Other CT procedures w/o CC Or MCC (230).....	4.7847.....	5.6
CABG w/ PTCA w/ MCC (231).....	7.2993.....	10.8
CABG w/ PTCA w/o MCC (232).....	6.1947.....	8.0
CABG w/ cardiac cath w/ MCC (233).....	6.4496.....	12.4
CABG w/ cardiac cath w/o MCC (234).....	4.9216.....	8.2
CABG w/o cardiac cath w/ MCC (235).....	5.1381.....	9.7
CABG w/o cardiac cath w/o MCC (236).....	3.7307.....	6.1
Major CV procedures w/MCC (237).....	4.4954.....	7.8

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### Common Cardiovascular MS-DRGs

MS-DRG	RW	LOS
Major CV procedures w/o MCC (238) .....	3.1891.....	3.4
Other vascular procedures w/ MCC(252).....	2.7564.....	5.6
Other vascular procedures w/ CC (253) ..	2.2536.....	4.1
Other vascular procedures w/o MCC/CC (254).....	1.6786.....	2.0

### Secondary Conditions

Please document the following secondary conditions, if present, for all types of patients. Conditions shall only be documented if they meet one of the following criteria. The condition was:



1. Clinically evaluated during the stay; or
2. Diagnostically tested during the stay; or
3. Therapeutically treated during the stay; or
4. Increased LOS or nursing care/monitoring



### Cardiovascular MCCs (significant for CABG and Valves)

- Abdominal aneurysm, ruptured
- Acute and subacute bacterial endocarditis
- Acute and subacute infective endocarditis in diseases classified elsewhere
- Acute cor pulmonale
- Acute diastolic heart failure
- Acute endocarditis, unspecified
- Acute on chronic diastolic heart failure
- Acute on chronic systolic heart failure
- Acute Renal Failure
- Acute Respiratory Failure

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### Cardiovascular MCCs (significant for CABG and Valves)

- Acute systolic & diastolic heart failure
- Acute systolic heart failure
- AMI specify type and location
- Aortic aneurysm of unspecified site, ruptured
- Cardiac arrest\*
- Cardiogenic shock\*
- Cerebral embolism w/ cerebral infarction
- Cerebral thrombosis w/ cerebral infarction
- Coma
- Dissection of specific vessels
- End Stage Renal Disease
- Heart lacerations and contusions, specify
- Iatrogenic pulmonary embolism and infarction
- Injury to multiple intrathoracic organs with open wound into cavity
- Intracerebral hemorrhage
- Mediastinitis
- Nontraumatic extradural hemorrhage
- Occlusion & stenosis of specific arteries
- Other pulmonary embolism and infarction
- Other shock without mention of trauma\*
- Pulmonary Insufficiency following trauma or surgery
- Respiratory arrest\*
- Rupture of chordae tendineae
- Rupture of papillary muscle
- Septic myocarditis
- Septicemia
- Specified pleural effusions
- Subarachnoid hemorrhage
- Subdural hemorrhage
- Subendocardial infarction, initial episode of care
- Thoracic aneurysm, ruptured
- Thoracoabdominal aneurysm, ruptured
- True posterior wall, initial episode of care
- Unspecified cerebral artery occlusion w/ cerebral infarction
- Unspecified heart injury with open wound into thorax
- Venous embolism and thrombosis of vena cava
- Ventricular fibrillation\*
- Ventricular flutter

\* if patient discharged alive

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### Cardiovascular CCs (significant for Valves)

- Acute but ill-defined cerebrovascular disease
- Acute coronary occlusion without myocardial infarction
- Acute exacerbation of COPD
- Acute Pericarditis
- Acute hemorrhagic anemia
- Atelectasis—Pulmonary Collapse
- Atheroembolism of kidney
- Bacteremia
- "itils" gastrointestinal diagnoses
- Benb
- Benign hypertensive heart failure and chronic kidney disease (stage I-IV)
- Chronic diastolic heart failure
- Chronic Disease of the Kidney Stage IV and V
- Chronic Respiratory Failure
- Chronic systolic heart failure
- Complications of transplanted heart
- Embolism and thrombosis of abdominal artery
- Embolism and thrombosis of thoracic artery
- Infection and inflammatory reaction due to cardiac device, implant, and graft
- Infection and inflammatory reaction due to vascular device, implant, and graft
- Intermediate coronary syndrome
- Left heart failure
- Malignant hypertensive heart disease with heart failure
- Malignant hypertensive heart failure & chronic kidney disease (stage I-IV)
- Malignant hypertensive heart failure & chronic kidney disease (stage V or end stage)
- Other aneurysm of heart
- Other bundle branch block
- Other complications of internal prosthetic cardiac device, implant, & graft
- Phlebitis and thrombophlebitis, femoral vein
- Postmyocardial infarction syndrome
- Precipitous drop in Hematocrit
- Rheumatic heart failure, congestive
- Shock, unspecified
- Systolic & diastolic heart failure
- Systolic heart failure, NOS
- Trifascicular block
- Unspecified hypertensive heart failure & chronic kidney disease (stage I-IV)
- Unspecified hypertensive heart failure & chronic kidney disease (stage V or end stage)
- Unspecified intracranial hemorrhage
- UTI

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### Tests

Whenever you order a test, document the "reason" for the test in the progress notes or your orders. Include BOTH the symptom and the condition that you are attempting to rule out.

Whenever tests are abnormal, document the condition that the abnormal result represents.

### Heart Failure and Congestive Heart Failure

Fully describe the type of heart failure. Specify whether it is acute, chronic, or acute on chronic. In addition, specify whether it is systolic, diastolic, or systolic and diastolic; or right, left, or right and left; or rheumatic. Clearly document if heart failure is associated with hypertension, chronic kidney disease (stage) or both.

### Specificity and MS-DRGs

- Acute vs. chronic
- Etiology of condition
- Causative organism in infection
- Degree of severity of diseases
- Proper staging of chronic conditions (i.e.-chronic kidney disease)
- Accompanying conditions (i.e.-hemorrhage, coma, heart failure, chronic kidney disease)
- Benign vs. malignant hypertension when specifying organ disease due to hypertension
- Congestive heart failure-specify if it is acute or chronic, in addition whether it is right or left sided (or both) and systolic or diastolic (or both)
- Specify severity of malnutrition
- If patient is receiving tube feedings or TPN, document the nutrition diagnosis
- Document the total time the patient is on ventilation if it is prolonged
- Every diagnostic test and medication ordered should have a documented diagnosis
- Clinically significant diagnoses from diagnostic reports should be documented in the progress notes
- Arrows, plus signs, and many abbreviations are not sufficient documentation (i.e.-document hypokalemia not ↓ K)