

Documentation Tips - 2017

KEY “General Surgery” Diagnoses/Tips:

- **BMI: Specify #** (If $\geq 40 \rightarrow$ “**Morbid Obesity**”) (Increased Risk for Wound Dehiscence, etc.)
- **Malnutrition:** Make Clin. Dx; “**Cachexia?**” & Consult Dietician to use special criteria to differentiate Mild vs. Moderate vs. Severe;
- **Wound Dehiscence:** Specify if it was POA;
- **Peritonitis:** Note--- “Rebound Tenderness” + “Rigid Abdomen” do NOT capture Severity;
- **Infections:** Specify If surgery-related / POA; (Specify if “**Bacterial**”, “**Gram Neg**”; +Add Site)
- **Acute Blood Loss Anemia:** Specify Cause; or Specify d/t underlying Dx, medication, or “As expected” w/ a normally bloody proced.;
- **Caution w/ the term “Post-Op” + [Dx]:** Which may trigger a “complication” code; (Explain causes of new Dx, esp. if they are an exacerbation of an underlying Acute/Chronic Dx)
- **Adhesiolysis:** Specify Site, Reason & Time;
- **Debridement:** Specify, If “**Excisional**” + Instruments used, Nature of Tissue Removed, Appearance, Wound Size, Debridement Depth...

Use Anesthesia & Medicine Consult Notes: ID all acute/chronic Med Dx in Post-Op Note; (Include All Surg & Med Dx in your DC summary)