## **Prefixing in Obstetrics**

The following article should be read with these generic concepts in mind.

- 1. The prefixing of diagnosis codes is a separate concept to the coding itself.
- 2. The prefix that is assigned to a code should not influence the principal diagnosis decision or any other coding decision.
- The codes should be assigned and sequenced according to coding convention and the Australian Coding Standards.
- 4. Prefixes should then be assigned in accordance with the directions contained in the Victorian Addition to the Australian Coding Standards 0048 Condition Onset Flag

In Victoria a prefix is assigned to each diagnosis code. The accepted prefixes are:

- P Primary condition
- C Complicating condition occurring after admission
- A Associated condition not treated in this episode
- M Morphology

In the Victorian Additions to the Australian Coding Standards release for July 2006, specific information was published regarding prefixing of Obstetric admissions, in particular the delivery episode. For the July 2007 release of the Victorian Additions to the Australian Coding Standards, this advice was removed and Victorian coders were advised to prefix obstetric episodes as they would any other episode. That being:

- Prefix with P conditions that are present at the time of admission (or when the episode of care commenced) and require treatment, diagnostic procedures, increased nursing care or monitoring, or increase length of stay;
- Prefix with C conditions or diagnoses that are NOT present at the time of admission (or when the episode of care commenced); and
- Obstetric admissions can also have conditions that are prefixed with A.

As with all admissions, there can be more than one code prefixed with a P. Before assigning your prefixes, select your principal diagnosis in accordance with ACS 0001 *Principal Diagnosis*. This code must always be prefixed with a P.

Z codes related to outcome of delivery (Z37.-), place of birth (Z38.-) and post partum care (Z39.0-) are considered primary codes and must always be prefixed with P.

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The obstetric case may or may not have a condition that was present on admission that would be prefixed with a P. If all the diagnoses occur after the time of admission (that is they meet criteria for a complication - C) then in most instances the principal diagnosis will be based on the sequence of events surrounding the delivery, and will be prefixed with a P. The remaining conditions in these cases would be prefixed with a C, (with the exception of those requiring an A prefix). In all cases the coder should refer to ACS 0001 *Principal Diagnosis* (See Coding Matters, Volume 13, No. 2, FAQ).

## **Example 1**

A woman is admitted for induction of labour due to post dates. During delivery she suffers a 1st degree tear that is sutured and a post partum haemorrhage. Codes and prefixes are assigned as follows:

PO48 Prolonged pregnancy (present on admission so prefix with P)

PZ37.0 Outcome of delivery – Singleton Liveborn (not present on admission but prefix as P due to instructional notes)

CO70.0 First degree perineal laceration during delivery (not present on admission so prefix with C)

CO72.1 Other immediate post partum haemorrhage (not present on admission so prefix with C) (ACS 1528)

+ Procedure codes

## Example 2

A woman is admitted in early labour at 40 weeks. Her labour progresses slowly and therefore augmented with Syntocinon for a prolonged first stage and maternal distress. After the augmentation she progresses quickly to deliver a live born female. During delivery she sustained a second degree tear which was sutured. The woman had a post partum haemorrhoid which was treated and she went home on day 4 with her baby.

PO63.0 Prolonged first stage of labour (not present on admission but prefix as P as it is principal diagnosis – first in the sequence of events)

PZ37.0 Outcome of delivery – Singleton liveborn (not present on admission but prefix as P due to instructional notes)

CO75.0 Maternal distress during labour and delivery (not present on admission so prefix with C)

CO70.1 Second degree perineal laceration during delivery (not present on admission so prefix with C)

CO87.2 Haemorrhoids in the puerperium (not present on admission so prefix with C)

+ Procedure codes

Please note this article has been written as a guide only and there will be situations in which these examples may not be applicable.

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