



Western Australian Coding Rule

0124/02 Urinary tract infection (UTI) post insertion of indwelling catheter (IDC)

Q.

How do you classify urinary tract infection (UTI), post insertion of indwelling catheter (IDC), without documentation of a causal link between the infection and catheter?

A.

This query was submitted to the Independent Health and Aged Care Pricing Authority (IHACPA) in 2021 but remains answered.

TN1504 *ACS 1904 Procedural complications* (published 28 June 2019, updated 15 June 2022) states:

A causal relationship does not need to be documented to assign a procedural complication when a condition is classified to block T82–T85 unless there is a specific national coding advice or ACS that indicates otherwise (e.g. complications related to coronary artery bypass graft).

For a medical condition occurring during or following insertion of prosthetic devices but not classified to T82–T85, see *ACS 1904 Procedural complications/Intraoperative/postoperative medical conditions*.

The practice of not requiring a documented causal relationship for conditions classified to T82-T85 was introduced in Tenth Edition for ease of classification of complications obviously caused by devices e.g. mechanical complications, haematoma, pain, stenosis.

The following Index pathways, classified to T82-T85:

Complication(s)

- bladder device
- infection or inflammation T83.5

Complication(s)

- genitourinary NEC
- device, implant or graft
- urinary
- infection or inflammation T83.5

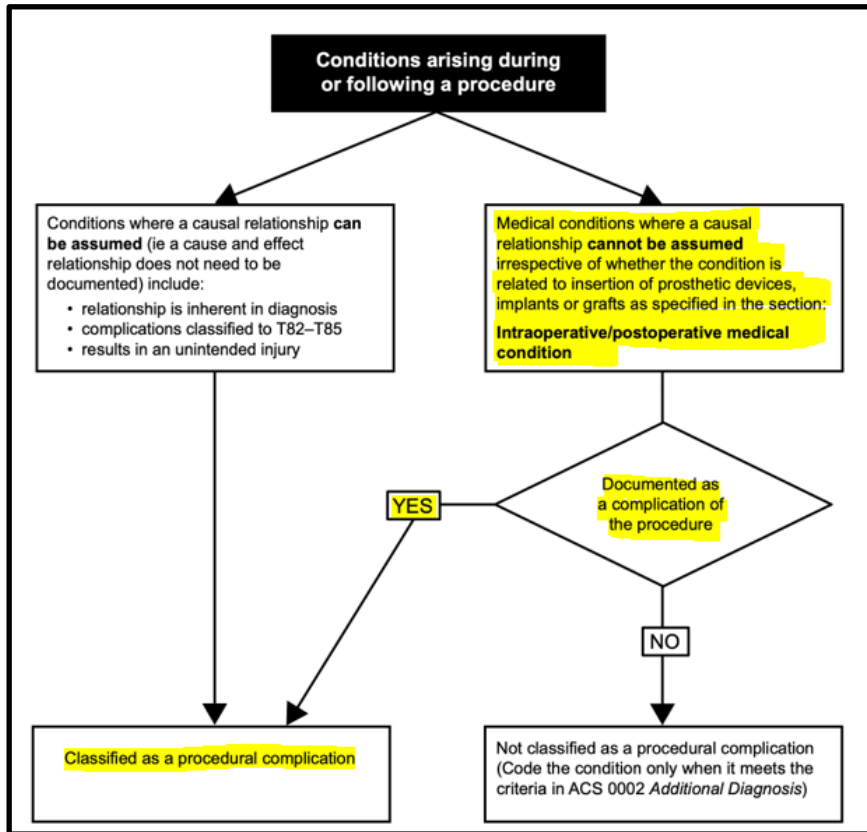
Complication(s)

- urethral catheter NEC
- infection or inflammation T83.5

allow for obvious complications such as “infected device” or “infected catheter” to be classified to T83.5. However, they have potential to be interpreted as allowing UTI post insertion of IDC to be

classified to T83.5 in the absence of a documented causal link, based on TN 1504 and ACS 1904 *Procedural complications/Overview/third dot point*.

For UTI post insertion of IDC, the above Index pathways should only be followed if there is a documented causal link between the UTI and the IDC, in accordance with the highlighted path in the flowchart in ACS 1904/Figure 1:



The following Alphabetic Index essential modifier ‘due to or resulting from’ also supports the need for a documented causal link between a UTI and an IDC:

Infection, infected

- due to or resulting from
- - device, implant or graft NEC
- - - catheter
- - - - urinary

In the absence of a documented causal link, assign N39.0 *Urinary tract infection, site not specified*.

In 2023 IHACPA acknowledged that due to issues with lack of clarity in applying ACS 1904, the entire standard will be revised for Thirteenth Edition.

DECISION

In the absence of a documented causal link between urinary tract infection and indwelling catheter, assign N39.0 *Urinary tract infection, site not specified*.

[Effective 1 January 2024, ICD-10-AM/ACHI/ACS 12th Ed.]