



Western Australian Coding Rule

0817/02 Asynclitic presentation

Q.

What code should be assigned for asynclitic presentation complicating labour and delivery?

A.

Asynclitism occurs when the fetal head is not in the same longitudinal axis as the fetal vertebral column. The gross appearance of an asynclitic head is that of a lateral tilt toward the shoulder. The major problem of asynclitism is that it causes the fetal head to present a larger diameter to the maternal pelvis than it would in an occiput-anterior (OA) position. This could lead to labour dystocia due to a relative cephalopelvic disproportion.

The term asynclitism is not recognised by ICD-10-AM.

In accordance with ACS 1506 *Fetal presentation, disproportion and abnormality of maternal pelvic organs*, assign O64.8 *Labour and delivery affected by other malposition and malpresentation* for documentation of asynclitism affecting labour and delivery, following the Index pathway:

Malpresentation, fetus:

-specified, NEC

- - affecting labour and delivery O64.8

DECISION

In accordance with ACS 1506 *Fetal presentation, disproportion and abnormality of maternal pelvic organs*, assign O64.8 *Labour and delivery affected by other malposition and malpresentation* for documentation of asynclitism affecting labour and delivery.

[Effective 02 Aug 2017, ICD-10-AM/ACHI/ACS 10th Ed.]