



# Western Australian Coding Rule

## 0725/13 Cauterisation for epistaxis, without active haemorrhage

### Q.

Is nasal cauterisation for epistaxis classified as 'arrest of nasal haemorrhage' even without active haemorrhage at the time of cauterisation?

### A.

Epistaxis is due to the rupture of a blood vessel within the richly perfused nasal mucosa. Rupture may be spontaneous or initiated by trauma. An increase in blood pressure tends to increase the duration of spontaneous epistaxis. Most nose bleeds occur in the anterior (front) part of the nasal septum, also known as the Little's area. Bleeding farther back in the nose is known as a posterior bleed and is often more prolonged and difficult to control.

The ACHI Alphabetic Index pathways:

#### **Arrest (of)**

- haemorrhage
- - nose, nasal (anterior) (Little's area) 41677-00 [373]
- ...
- - - posterior 41656-00 [373]

and the Instructional note in block [374] *Other destruction procedures on nose*:

**Excludes:** that for arrest of nasal haemorrhage (see block [373])

are applicable for nasal cauterisation for epistaxis, even when there isn't active haemorrhage at the time of cauterisation.

### **DECISION**

**For nasal cauterisation for epistaxis, with or without active haemorrhage, assign the appropriate ACHI code from block [373] *Arrest of nasal haemorrhage*.**

**This WA Coding Rule 0725/13 *Cauterisation for epistaxis, without active haemorrhage* supersedes WA Coding Rule 1111/06 *Arrest of nasal haemorrhage*.**

This Rule has been modified to improve clarity; and to correspond with an update in ICD-10-AM/ACHI/ACS Twelfth Edition.

Effective 1 July 2025, ICD-10-AM/ACHI/ACS 13<sup>th</sup> Ed.

As per the Patient Activity Data Policy (MP 0164/21) Western Australian Coding Rules must be followed.



# Western Australian Coding Rule

## 1111/06 Arrest of nasal haemorrhage

### Q.

Please confirm past coding advice for arrest of nasal haemorrhage for chronic epistaxis?

### A.

Past advice (WA decision W0506) is still current.

Epistaxis or nosebleeds are due to the rupture of a blood vessel within the richly perfused nasal mucosa. Rupture may be spontaneous or initiated by trauma. An increase in blood pressure tends to increase the duration of spontaneous epistaxis. The vast majority of nose bleeds occur in the anterior (front) part of the nose from the nasal septum. This area is also known as Little's area. Bleeding farther back in the nose is known as a posterior bleed and is often prolonged and difficult to control. They can be associated with bleeding from both nostrils and with a greater flow of blood into the mouth.

If a patient has chronic epistaxis or suffered a recent episode of epistaxis, and the site is not documented as anterior or posterior, assign the default code: 41677-00 [373] *Arrest of anterior nasal haemorrhage by packing and/or cauterization.*

### DECISION

**Cauterisation of septum or Little's area (41674-01) when performed for epistaxis, with or without current active bleeding, should be coded to 41677-00 [373] *Arrest of anterior nasal haemorrhage by packing and/or cauterization.***

[Effective 16 Nov 2011, ICD-10-AM/ACHI/ACS 7<sup>th</sup> Ed.]