<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Documentation Requirements</th>
</tr>
</thead>
</table>
| **Acute Coronary Syndrome (ACS)** | 1) Be clear on your intended diagnosis. Would one of the following better describe the patient’s condition?  
   - Intermediate/insufficiency syndrome  
   - Unstable angina  
   - Myocardial infarction  
   - Other diagnosis |
| **Acute Kidney Failure**          | 1) Document etiology, if known or suspected, such as:  
   - Acute tubular, cortical, or medullary necrosis  
   - Postprocedural  
   - Posttraumatic |
| **Atrial Fibrillation and Atrial Flutter** | 1) For atrial fibrillation, document type as:  
   - Paroxysmal  
   - Persistent or  
   - Chronic  
   2) For atrial flutter, document type as:  
   - Typical or Type 1  
   - Atypical or Type 2 |
| **Burns**                         | 1) Document:  
   - Anatomical site  
   - Degree, if external burn  
   2) Distinguish between:  
   - Thermal burns (caused by heat)  
   - Corrosive burns (caused by chemicals) |
| **Cardiac Arrest**                | 1) Document cause as due to:  
   - Underlying cardiac or noncardiac condition  
   - Show cause and effect by using words such as “due to” or “secondary to” |
| **Chronic Kidney Disease (CKD)**  | 1) Document stage:  
   - Stage 15  
   - End stage  
   2) Document etiology, for example:  
   - Diabetic CKD  
   - Hypertensive CKD |
| **Emphysema**                     | 1) Document type:  
   - Unilateral  
   - Panlobular  
   - Centrilobular  
   - Other type |
### Diagnosis: Obesity

1) **Document etiology:**
   - Due to excess calories or nutritional
   - Due to drugs
   - Other, for example, due to thyroid or pituitary disorder

2) **Document if morbidly obese, also document if with alveolar hypoventilation**

### Diagnosis: Pulmonary Insufficiency

1) **Document severity:**
   - Acute
   - Chronic

2) **Document cause:**
   - Shock
   - Surgery (thoracic versus nonthoracic surgery)
   - Trauma

### Diagnosis: Pulmonary Embolism

1) **Document type such as:**
   - Saddle
   - Septic

2) **Document**
   - Document cause
     - Tobacco use/abuse
     - Dependence

### Diagnosis: Respiratory Insufficiency/Respiratory Distress

1) **Insufficiency and distress are symptomatic of an underlying condition**

2) **Be clear on your diagnosis. Is your intended diagnosis:**
   - Acute
   - Chronic
   - Acute on chronic respiratory failure

### Diagnosis: Respiratory Failure

1) **Document:**
   - Acute
   - Chronic
   - Acute on chronic

2) **If acute respiratory failure, document if:**
   - Hypoxemic
   - Hypercapnic
   - Both

### Diagnosis: Sepsis

1) **Document organism causing the infection**

2) **Document any associated organ dysfunction, such as:**
   - Acute kidney failure
   - Acute respiratory failure
   - Encephalopathy
   - Hepatic failure

3) **Document presence of septic shock**

### Diagnosis: Tobacco

1) **Differentiate between:**
   - Tobacco use/abuse
   - Dependence

2) **Document type of tobacco product, such as:**
   - Cigarettes
   - Chewing tobacco
   - Cigars

3) **Differentiate between patients who no longer smoke and those that do**
   - Note that "history of smoking" can be an ambiguous statement

### Diagnosis: Drug Underdosing

1) **Document:**
   - Intentional versus
   - Unintentional

2) **Document reason for underdosing, for example:**
   - Financial hardship
   - Age related dementia

### Diagnosis: Urinary Tract Infection (UTI)

1) **Identify the specific site of the UTI, if known, such as:**
   - Bladder
   - Urethra
   - Kidney

2) **If UTI is related to device, such as Foley catheter or cystostomy tube, clearly indicate this by using words such as "due to" or "secondary to."

3) **Document causative organism, when known or suspected, such as E. coli or Candida.**

### Diagnosis: Urosepsis

1) **Do not use this term. There is no code for urosepsis.**

2) **Be clear on your diagnosis. Is your intended diagnosis one of the following?**
   - UTI
   - Sepsis
   - Bacteremia
   - Severe sepsis