



PROFESSIONAL MEDICAL BILLERS ASSOCIATION USA (PMBA)

SEPSIS ICD-11 CODING



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SEPSIS:

Any type of infection - bacterial, viral, fungal or protozoal, can cause sepsis and must be coded as well. Sepsis is not considered to be a disease in itself, but a reaction to an infectious disease which may be of bacterial, viral, fungal or protozoal aetiology.

Sepsis is a life-threatening organ dysfunction caused by a dysregulated host response to infection.

The ICD-10-CM code A41.9, which previously represented "Sepsis, unspecified organism," was reclassified in the ICD-11 as the code 1G40, indicating "Sepsis without septic shock." The term "Septicemia" was listed as an inclusion for A41.9 in ICD-10 but was classified as an exclusion for 1G40 in ICD-11. Instead, it was directed to use the code MA15, which pertains to microbiological findings in blood, blood-forming organs, or the immune system.

The ICD-11 code 1G40 provides a more accurate and comprehensive representation of sepsis within a broader context. However, in the specific case of septicemia, the appropriate code to utilize is MA15. This distinction ensures that the coding accurately reflects the specific condition being diagnosed and facilitates precise medical documentation and reporting.

When the site of infection is unknown, select a code for Infection of unspecified site by organism followed by the appropriate code for sepsis

Note: IN ICD-11 assign MA15.0 for bacteraemia/septicaemia

Assign code - Bacterial infection of unspecified site (1C41)

- Puerperal sepsis (JB40.0)
- Sepsis during labour (JB0D)
- Sepsis of fetus or newborn (KA60)

Bacteraemia: The presence of bacteria in the blood. A positive blood culture without signs of infection.

Sepsis extension codes

- XS5E Mild sepsis
- XS65 Severe sepsis
- XS26 Septic shock

SIRS:

Another important consideration within the realm of sepsis is Systemic Inflammatory Response Syndrome (SIRS), which can occur in both infectious and noninfectious contexts. In ICD-11, the coding for SIRS is as follows:

For SIRS of noninfectious origin (such as trauma or burns), the code is MG46. It is essential to code the underlying condition alongside the SIRS code for comprehensive reporting.

For SIRS of infectious origin, the code is 1H0Z, followed by an additional code for the specific site of infection. This ensures accurate coding of both the infection and the associated systemic inflammatory response syndrome.

Septic Shock:

Septic shock is a subset of sepsis in which profound circulatory, cellular and metabolic abnormalities are associated with a greater risk of mortality than with sepsis alone.

1G40 Sepsis without septic shock

1G41 Sepsis with septic shock - Any type of infection - bacterial, viral, fungal or protozoal, can cause sepsis and must be coded as well. When the site of infection is unknown, select a code for Infection of unspecified site by organism followed by the appropriate code for sepsis.

For HUS: Assign ICD-11 code - 3A21.2 Haemolytic uraemic syndrome

SEPSIS ICD-11 Coding:

A cluster involving a case of documented sepsis should include:

- First, a stem code representing the causing infection (specified or unspecified) and as applicable, an optional extension code for the infectious agent if it is known.
- Second, a stem code for sepsis with or without septic shock depending on the documentation

Example-1

Pneumococcal pneumonia causing sepsis

Cluster: CA40.07/1G40

CA40.07 Pneumonia due to Streptococcus pneumonia

1G40 Sepsis without septic shock

Example # 2

Patient is a 44-year-old male who presents with fever, chills, and hypotension. Blood cultures have returned positive for Methicillin-resistant Staphylococcus aureus (MRSA). The patient's clinical status has worsened.

Assessment:

Sepsis secondary to MRSA infection.

1C41&XN6BM&XY6M - Sepsis due to Staphylococcus aureus without mention of septic shock-Present on admission.

Example-3: Diagnosis:

Sepsis due to acute appendicitis

ICD-11 Code cluster

The correct answer is: DB10.02/1G40

- DB10.02 Acute appendicitis without localised or generalised peritonitis
- 1G40 Sepsis without septic shock

Example-4:

1. Admission Diagnosis: Urinary Tract Infection (UTI)

Admission Assessment:

Upon admission, the patient underwent a comprehensive evaluation, including a urinalysis and blood cultures. The urinalysis results indicated the presence of Escherichia coli (E. coli), confirming that the UTI was caused by this bacterium. The blood cultures were sent for analysis.

Progression:

On day 2 of the patient's hospitalization, a noticeable decline in their condition was observed. As a result, repeat blood cultures were promptly obtained to further investigate the underlying cause.

Day 3 Assessment:

The attending physician recorded on day 3 that the patient developed generalized sepsis attributed to E. coli, as confirmed by the results of the second set of blood cultures.

Main Condition	ICD-11 Codes -2023
Urinary tract infection, site not specified, due to Escherichia coli & Main resource condition & Present on admission	GC08.0&XY7B&XY6M
Other Conditions	
Sepsis without mention of septic shock & Escherichia coli & Developed after admission	1G40&XN6P4&XY69

Example-5:

Sepsis due to E-coli

Code first the causing infection. In this example, a specific infection is not documented; therefore a code for (1C41 Bacterial infection of unspecified site), is coded with optional extension code for (XN6P4 Escherichia coli) and postcoordinate with the stem code for (1G40 Sepsis without septic shock).

Main condition cluster 1C41&XN6P4/1G40

Example-6:

A 61-year-old female is admitted with sepsis with septic shock that has caused hypoxic, acute respiratory failure.

CB41.0/1G41

CB41.0 Acute respiratory failure (When acute respiratory failure causes a low level of oxygen in the blood without a high level of carbon dioxide, it's called hypoxemic acute respiratory failure.)

IG41- Sepsis with septic shock

Example-7:

Example 4:

Patient presented with septic shock and died shortly after admission.

Main condition: Septic shock, unknown infection

Code first the causing infection. In this example, a specific infection is unknown; therefore, a code for [1H0Z Infection, unspecified] and then postcoordinate with the code for (1G41 Sepsis with septic shock)

Main condition cluster: [1H0Z] / 1G41

Example-8:

Salmonella sepsis

1C41&XN0QE

Example-9

The patient was admitted to the hospital with a fever, weakness.

Upon admission, the patient exhibited symptoms and signs consistent with sepsis, including high fever, tachycardia, hypotension, altered mental status, and evidence of systemic inflammation. Laboratory tests revealed an elevated white blood cell count and other markers of infection.

Diagnosis and Microbiological Identification:

Through further investigation, the causative organism was identified as Mirabilis Proteus. Relevant cultures were obtained from blood, urine, or any other suspected sites of infection to confirm the presence of the bacteria.

ICD-11 Codes: 1G40&XN9ZF

1G40 Sepsis without septic shock

XN9ZF Proteus mirabilis

Example: 10

Patient is a 44-year-old male who presents with fever, chills, and hypotension. Blood cultures have returned positive for Methicillin-resistant Staphylococcus aureus (MRSA). The patient's clinical status has worsened.

Assessment:

Sepsis secondary to MRSA infection.

1C41&XN6BM&XY6M - Sepsis due to Staphylococcus aureus without mention of septic shock-Present on admission.

Reference:

1. https://www.cdc.gov/nchs/data/icd/SEPSIS_tabular_final_dp.pdf
2. <https://icd.who.int/en>

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