

# Appendix C: Query Examples

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## Example #1: Diagnosis is documented but is not clinically validated

Dear Doctor,

COPD exacerbation is documented within the clinic note dated 3/5/xx.

There is no documentation in the current health record of increased respiratory rate/shortness of breath, change in cough pattern, or change in the amount or character of sputum production. Based on the clinical indicators and your professional judgment can this diagnosis be further clarified? Please complete by selecting one of the options below:

- COPD exacerbation (if so please include the clinical evidence used to support this diagnosis in your documentation)
- COPD without an exacerbation
- Other explanation of clinical findings \_\_\_\_\_
- Unable to determine
- No further clarification needed\*

\*This option may be included in multiple choice queries but is not required. This option provides an avenue to track the disagreement rate, which can then be used to develop educational material for providers and CDI professionals on compliant queries.

## Example #2: Lack of diagnosis specificity based on the presence of clinical indicators

Dear Doctor,

Anemia is documented within the final diagnostic impression of your office note dated 3/8/xx.

Clinical Indicators: End-stage renal disease is noted in the patient's problem list. The lab work dated 3/5/xx notes a hemoglobin of 8.2.

Based on the clinical indicators and your professional judgment can the "anemia" diagnosis be further specified? Please complete by selecting one of the options below:

- Anemia due to end-stage renal disease
- Chronic blood loss anemia
- Iron-deficiency anemia
- Other explanation of clinical findings \_\_\_\_\_
- Unable to determine
- No further clarification needed

## Example #3: Documented conditions with abnormal ancillary tests in previous health record.

Dear Doctor,

Chronic CHF is documented within the final diagnostic impression of your office note dated 3/2/xx.

Clinical Indicators: Echocardiography finding of cardiac ejection fraction of 30 percent is noted on 2/28/xx. Patient is on lisinopril and Lasix.

Based on the clinical indicators and your professional judgment, can the type of CHF be further specified? Please complete by selecting one of the options below.

- Chronic systolic heart failure
- Chronic systolic and diastolic heart failure
- Other type of heart failure \_\_\_\_\_
- Other explanation of clinical findings \_\_\_\_\_
- Unable to determine
- No further clarification needed

#### Example #4: Documented conditions with abnormal ancillary tests in previous health record.

Dear Doctor,

Chronic asthma is documented within the final diagnostic impression of your office note dated 2/27/xx.

Clinical Indicators: Patient is maintained on inhaled bronchodilators and steroids. The hospital admission pulmonary consultant note dated 2/20/xx documents COPD with chronic asthma.

Based on the clinical indicators and your professional judgment do you agree or disagree with the pulmonary consultant's assessment? Please complete by selecting one of the options below.

- Chronic asthma with COPD
- Chronic asthma without COPD
- Other explanation of clinical findings \_\_\_\_\_
- Unable to determine
- No further clarification needed

#### Example #5: Documentation of the relationship between two conditions

Dear Doctor,

Diabetes mellitus type 2 and cellulitis is documented within the final diagnostic impression of your office note dated 3/1/xx.

Clinical Indicators: Patient is on sliding scale insulin, Glucotrol, and was started on an antibiotic and a two-week follow up was scheduled.

Based on the clinical indicators and your professional judgment can you further specify the relationship between the diabetes mellitus and cellulitis? Please complete by selecting one of the options below.

- Cellulitis is related to the diabetes mellitus
- Cellulitis is unrelated to the diabetes mellitus

- Other explanation of clinical findings \_\_\_\_\_
- Unable to determine
- No further clarification needed

### Additional Resources

For more query examples, see these online resources in AHIMA's HIM Body of Knowledge:

- AHIMA Query Toolkit (<http://bok.ahima.org/doc?oid=302140>)
- Clinical Documentation Improvement (CDI) Toolkit (<http://bok.ahima.org/doc?oid=301829>)
- Outpatient CDI Toolkit (<http://bok.ahima.org/doc?oid=302445>)
- Guidelines for Achieving a Compliant Query Practice (2016 Update) (<http://bok.ahima.org/doc?oid=301357>)

In addition, refer to the CMS ICD-10-CM Official Coding Guidelines for Coding and Reporting Section IV: Diagnostic Coding and Reporting Guidelines for Outpatient Services at:  
[www.cms.gov/Medicare/Coding/ICD10/Downloads/2018-ICD-10-CM-Coding-Guidelines.pdf](http://www.cms.gov/Medicare/Coding/ICD10/Downloads/2018-ICD-10-CM-Coding-Guidelines.pdf).

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