ICD-10-PCS Root Operation Groups, Part 3

By Kathy DeVault, RHIA, CCS

Root Operations That Alter the Diameter/Route of a Tubular Body Part and That Define Other Repairs

The medical and surgical procedure section of ICD-10-PCS contains most, but not all, procedures typically coded and reported in the hospital inpatient setting. This article is the third in a series explaining ICD-10-PCS root operation groupings in this important and largest section of ICD-10-PCS.

There are 31 root operations in the medical and surgical procedure section of ICD-10-PCS. These root operations are arranged into nine groups that share similar attributes. This article focuses on two of these groups: root operations that alter the diameter/route of a tubular body part and root operations that define other repairs.

In choosing the appropriate root operation for the procedure being performed it is important to apply the full definition of the root operation as contained in the tables.

Root Operations That Alter the Diameter/Route of a Tubular Body Part

This group of operations includes:

- Restriction
- Occlusion
- Dilation
- Bypass

Restriction-Root Operation V

Restriction is defined as partially closing an orifice or the lumen of a tubular body part. The restriction root operation can be performed on an orifice that is natural or artificially created. The objective of the restriction procedure is to narrow the diameter of a tubular body part or orifice. This includes either intraluminal or extraluminal methods for narrowing the diameter.

Examples of restriction procedures include esophagogastric fundoplication, cervical cerclage, and clipping of an aneurysm.

Occlusion-Root Operation L

Occlusion is defined as completely closing an orifice or the lumen of a tubular body part. The orifice can be natural or artificially created.

The objective of the occlusion procedure is to close off a tubular body part or orifice. It includes both intraluminal and extraluminal methods of closing off the body part. Dividing the tubular body part before closing is an integral part of the occlusion procedure.

The occlusion root operation is similar to restriction with the key difference being complete closure rather than partial closure.

Examples of occlusion procedures include fallopian tube ligation and ligation of inferior vena cava.

Dilation-Root Operation 7

Dilation is defined as expanding an orifice or the lumen of a tubular body part. The orifice can be natural or artificially created. The dilation procedure is accomplished by stretching a tubular body part using intraluminal pressure or by cutting part of the orifice or wall of the tubular body part.

The objective of the dilation procedure is to enlarge the diameter of a tubular body part or orifice. It includes both intraluminal and extraluminal methods for enlarging the diameter. A device placed to maintain the new diameter is an integral part of the dilation procedure and is coded to a sixth-character device value.

Examples of dilation procedures include percutaneous transluminal angioplasty, dilation of the common bile duct, and percutaneous transluminal coronary angioplasty.

Bypass-Root Operation 1

Bypass is defined as altering the route of passage of the contents of a tubular body part. Rerouting contents of a body part can be done in three ways:

- To a downstream area of the normal route
- To a similar route and body part
- To an abnormal route and dissimilar body part

Bypass includes one or more anastomoses, with or without the use of a device. The range of bypass procedures includes normal routes such as those made in coronary artery bypass procedures and abnormal routes such as those made in colostomy formation procedures.

Bypass procedures are coded according to the direction of flow of the contents of a tubular body part. In the bypass procedure codes, the body part value identifies the origin of the bypass and the qualifier identifies the destination of the bypass.

The exception to this is the coronary arteries. In the case of coronary arteries the body part value identifies the number of coronary artery sites bypassed and the qualifier identifies the origin of the bypass.

Examples of bypass procedures include coronary artery bypass graft, gastric bypass, and colostomy formation.

Root Operations That Define Other Repairs

This group of operations includes:

- Control
- Repair

Control-Root Operation 3

Control is defined as stopping, or attempting to stop, postprocedural bleeding. In the control root operation, the site of the bleeding is coded as an anatomical region and not to a specific body part. The root operation is used to represent a small range of procedures performed to treat postprocedural bleeding. If another root operation is performed to stop the bleeding (e.g., excision, extraction, or resection), then control is not coded separately.

Control includes irrigation or evacuation of hematoma done at the operative site. Both irrigation and evacuation may be necessary to clear the operative field and effectively stop the bleeding.

Examples of control procedures include control of post-prostatectomy hemorrhage and control of post-tonsillectomy hemorrhage.

Repair-Root Operation Q

Repair is defined as restoring, to the extent possible, a body part to its normal anatomic structure and function. This root operation is used only when the method to accomplish the repair is not one of the other root operations. The repair root operation represents a broad range of procedures for restoring the anatomic structure of a body part such as suture of lacerations.

The root operation repair functions as the "not elsewhere classified" root operation to be used when the procedure performed does not meet the definition of one of the other root operations. Fixation devices are included for procedures to repair the bones and joints.

Examples of repair procedures include herniorrhapy and suture of laceration.

More Resources Available in the BoK

For more on ICD-10, check out the following articles in the AHIMA Body of Knowledge:

- ICD-10-PCS Root Operation Groups, Part 1
- ICD-10-PCS Root Operation Groups, Part 2
- Putting the ICD-10-CM/PCS GEMs into Practice
- Converting MS-DRGs to ICD-10-CM/PCS
- AHIMA ICD-10-CM/PCS Readiness Assessment and Prioritization Tool
- Planning Organizational Transition to ICD-10-CM/PCS
- Transitioning ICD-10-CM/PCS Data Management Processes
- Differentiating Procedure Approach in ICD-10-PCS
- ICD-10-CM/PCS Project Management Resources

References

Centers for Medicare and Medicaid Services (CMS). "2010 ICD-10-PCS Code Tables and Index." Available online at www.cms.hhs.gov/ICD10.

CMS. "2010 ICD-10-PCS Reference Manual." Available online at www.cms.hhs.gov/ICD10.

CMS. "ICD-10-PCS Draft Coding Guidelines." Appendix B in "2010 ICD-10-PCS Reference Manual." Available online at www.cms.hhs.gov/ICD10.

Kathy DeVault (kathryn.devault@ahima.org) is a professional practice resource manager at AHIMA.

Article citation:
DeVault, Kathryn. "ICD-10-PCS Root Operation Groups, Part 3" *Journal of AHIMA* 81, no.9 (September 2010): 72-74.