Closing Gaps & Meeting Metrics Coding Tips & Best Practices

Peripheral Vascular Disease

Peripheral vascular disease (PVD), also referred to as Peripheral Artery Disease (PAD), encompasses conditions that affect the blood vessels outside of the heart and brain. These conditions result from inadequate blood flow within the vessels and result in circulation disorders and symptoms. PVD may be functional or organic.

- Functional: No structural defects are present.
- Organic: Presence of structural defects within the vessels such as inflammation or plaque buildup, which may lead to circulation symptoms.

According to the National Institute of Health, PVD affects nearly 200 million people worldwide, including approximately 40 to 45 million Americans. The disease is uncommon in younger people; however, incidence increases sharply with age, with more than 20% of people over 80 years old having peripheral vascular disease.

Risk Factors

- Tobacco use
- Diabetes mellitus
- Hypertension
- HIV
- High cholesterol
- Over 50 years of age
- Elevated homocysteine levels
- BMI greater than 30
- Family history of cardiovascular disease

Diagnosis Methods

- Clinical presentation, and physical exam findings.
- Ankle-brachial index (ABI)
- Duplex ultrasonography
- Magnetic resonance angiography (MRA) or computed tomography angiography (CTA)



Treatment or Management

Patients diagnosed with PVD require a reasoned approach to account for age, risk factors, disease severity, and functional status. Management is divided into two broad categories: decreasing cardiovascular events and improving symptoms. Therefore, PVD management begins with lifestyle modification to prevent disease progression. Medical and interventional therapy are required for improved symptomatic control and cardiovascular event risk reduction.

Complications

- Acute coronary syndrome
- Stroke
- Nonhealing ulcer
- Gangrene
- Amputation
- Deep vein thrombosis
- Erectile dysfunction

Documentation Tips

For accurate reporting of the ICD-10-CM diagnosis codes, documentation should be as specific as possible to describe the particular type of PVD and identify all related manifestations. Capture the following:

- Specific symptoms, severity, and complications related to PVD (e.g., rest pain, ulcers)
- Positive findings from the physical examination including specific body part affected by peripheral vascular disease and/or its complications (e.g., bilateral absent of pulses, cool extremities, ulcer of right calf)
- ABI values, imaging studies results and their implications for the diagnosis of PVD (e.g., Doppler ultrasound bilateral lower extremities impression: atherosclerosis of bilateral lower extremities)
- Underlying causative condition (e.g., diabetes, high cholesterol)
- A clear and concise treatment plan (e.g., medications, exercise and weight control, management of underlying conditions such as diabetes, Hypertension)

The acronym PVD is a common abbreviation for peripheral vascular disease and also posterior vitreous detachment. Always spell out in full the first notation (e.g., Peripheral vascular disease (PVD)). Subsequent documentation of the condition can be made using the abbreviation.

Do not use "history of" to describe a current peripheral vascular disease that is active and ongoing. "History of" indicates the patient no longer has the condition.

Do not use descriptors such as probable, consistent with, likely to, etc. to describe a confirmed diagnosis of PVD. These terms imply uncertainty and prevent medical coders from abstracting the diagnosis. In an outpatient setting when PVD is suspected but not yet confirmed, document signs and symptoms.

Note that arteriosclerosis and atherosclerosis are used interchangeably for coding and documentation purposes.

Coding Tips

The following tables have applicable PVD codes. For most, additional characters are required to provide greater specificity and to complete the code.

ICD Code	Description	Code Notes
173.8-	Other specified peripheral vascular diseases	Erythromelalgia Acrocyanosis Erythrocyanosis Simple acroparesthesia [Schultze's type] Vasomotor acroparesthesia [Nothnagel's type]
173.9	Peripheral vascular disease, unspecified	Intermittent claudication Peripheral angiopathy NOS Spasm of artery



ICD Code	Description	Code Notes
170.20-	Unspecified atherosclerosis of native arteries of extremities	Monckeberg's (medial) sclerosis Use additional code, if applicable, to identify chronic total occlusion of artery of extremity (I70.92)
170.21-	Atherosclerosis of native arteries of extremities with intermittent claudication	
170.22-	Atherosclerosis of native arteries of extremities with rest pain	
170.23-	Atherosclerosis of native arteries of right leg with ulceration	Indicate a condition that has progressed to ulceration Each diagnosis code includes rest pain and/or intermittent claudication. Use additional code to identify severity of ulcer (L97) Use additional code, if applicable, to identify chronic total occlusion of artery of extremity (I70.92)
170.24-	Atherosclerosis of native arteries of left leg with ulceration	
170.25	Atherosclerosis of native arteries of other extremities with ulceration	Indicate a condition that has progressed to ulceration Each diagnosis code includes rest pain and/or intermittent claudication Use additional code to identify the severity of the ulcer (L98.49-) Use additional code, if applicable, to identify chronic total
		occlusion of artery of extremity (I70.92)
170.26-	Atherosclerosis of native arteries of extremities with gangrene	Indicates the presence of gangrene Use additional code to identify the severity of any ulcer (L97, L98.49-), if applicable Use additional code, if applicable, to identify chronic total occlusion of artery of extremity (I70.92)

Atherosclerosis of the Native Arteries of the Extremities

Atherosclerosis of Extremities Involving a Graft

ICD Code	Description	Code Notes
170.3-	Atherosclerosis of unspecified type of bypass graft(s) of the extremities	 Provide inclusion terms such as: Critical limb ischemia Chronic limb-threatening ischemia Use additional characters to indicate the progression of the disease Use additional code, if applicable, to identify chronic total occlusion of artery of extremity (I70.92)
170.4-	Atherosclerosis of autologous vein bypass graft(s) of the extremities	
170.5-	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities	
170.6-	Atherosclerosis of nonbiological bypass graft(s) of the extremities	
170.7-	Atherosclerosis of other type of bypass graft(s) of the extremities	



Diabetic Peripheral Vascular Disease

PVD is a frequent complication of diabetes. The table below has the ICD codes for this condition. Additional characters are required to provide greater specificity and to complete the code.

ICD Code	Description	Code Notes
E08	Diabetes mellitus due to underlying condition	 .51 peripheral angiopathy without gangrene .52 peripheral angiopathy with gangrene Code A48.0, Gas gangrene, is assigned as an additional code for diagnosis of gas gangrene.
E09	Drug or chemical induced diabetes mellitus	
E10	Type 1 diabetes mellitus	
E11	Type 2 diabetes mellitus	Types of peripheral angiopathy:
E13 Other specifie	Other specified diabetes mellitus	 Peripheral arteriosclerosis Peripheral vascular disease Peripheral arterial disease Diabetes with atherosclerotic peripheral artery disease: Use additional code from subcategory 170.2-,
		Per ICD-10-CM Official Guidelines there is an assumed relationship between diabetes and peripheral angiopathy when both conditions are present; unless the physician indicates peripheral angiopathy and diabetes are totally unrelated.

References

- Peripheral Vascular Disease StatPearls NCBI Bookshelf (nih.gov)
- Optum Encoder Pro.com Professional Home
- American Hospital Association (AHA) Coding Clinic
- ICD-10-CM and ICD-10-PCS Coding Handbook

