Western Australian Coding Rule

0719/46 Red Man Syndrome

WA Coding Rule 0312/05 Red Man Syndrome is retired.

In ICD-10-AM/ACHI/ACS Eleventh Edition (effective 1 July 2019) ACS 0005 Syndromes was amended and new code U91 Syndrome, NEC created.


DECISION

WA Coding Rule 0312/05 Red Man Syndrome is retired.

[Effective 1 Jul 2019, ICD-10-AM/ACHI/ACS 11th Ed.]
Western Australian Coding Rule

0312/05 Red Man Syndrome

Q.
We have a query regarding Red Man’s Syndrome, a reaction to Vancomycin.
How should this be coded — are codes assigned for the symptoms presenting at the time e.g. rash or erythema and/or other symptoms e.g. swelling.

A.
Red Man Syndrome (RMS) is a commonly observed adverse drug event associated with Vancomycin drug therapy. It is characterized by a sudden and/or profound drop in blood pressure, a maculopapular rash, angioedema, pruitus, erythema, wheezing or dyspnea. Any or all of these effects may be seen.

ACS 0005 Syndromes states that if no single code is available to describe all elements of a syndrome – follow the 6 guideline points. When assigning codes to represent the syndrome assign codes only for the manifestations that are relevant for the patient in question – all standard manifestations of a syndrome may not be present in every patient with the syndrome.

DECISION

To code Red Man Syndrome, follow the guidelines in ACS 0005 Syndromes. When assigning multiple codes to represent the syndrome, assign codes only for the manifestations that are relevant for the patient in question – all standard manifestations of a syndrome may not be present in every patient with the syndrome. The manifestation codes will be followed by the external cause codes to represent the adverse Vancomycin reaction.

[Effective 28 Mar 2012, ICD-10-AM/ACHI/ACS 7th Ed.]