Western Australian Coding Rule

0916/08 Staging laparotomy

Q.
Laparotomy performed for bowel obstruction, and at operation malignancy was found and was the cause of the obstruction. A bowel bypass was performed along with biopsies of the malignant mass and peritoneum, and excision of abdominal lymph nodes.

What is the correct ACHI code to assign for the lymph node excision? There is no documentation of ‘staging’ on the operation report.

A.
The intent of the lymph node excision is to determine whether the malignancy has metastasised to the lymph nodes, which is for staging of the malignancy. However, the term ‘staging’ is an essential modifier in the ACHI index:

**Excision**
- lymph node
-- intra-abdominal (simple)(total) NEC 90282-00 [811]
---for staging of malignancy 35726-01 [985]

Therefore ‘staging’ must be documented before assigning 35726-01 [985] *Staging laparotomy*. The intent of this code is for operations specifically performed for staging of a malignancy.

For the scenario in this query, ‘staging’ was not documented and was not the sole intent of the procedure. The correct code to assign for lymph node excision is 90282-00 [811] *Excision of lymph node of other site*.

**DECISION**

Following the index, assign 90282-00 [811] *Excision of lymph node of other site* for excision of lymph nodes performed during a laparotomy. ‘Staging’ is an essential modifier which must be documented prior to assignment of 35726-01 [985] *Staging laparotomy*.

[Effective 21 Sep 2016, ICD-10-AM/ACHI/ACS 9th Ed.]