Western Australian Coding Rule

0920/02 Chronic obstructive pulmonary disease (COPD) with influenza

WA Coding Rule 1219/02 Chronic obstructive pulmonary disease (COPD) is superseded by ICD-10-AM/ACHI/ACS Coding Rule COPD exacerbation and influenza (Ref No: Q3505) effective 1 October 2020; (log in to view on the IHPA Australian Classification Exchange).
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Q. Should multiple codes be assigned for COPD with influenza to capture each concept?

A. ACS 1008 *Chronic Obstructive Pulmonary Disease* states:

**Infective exacerbation of COPD** does not require an additional code to reflect the infective description unless the infective condition is a condition in its own right, such as pneumonia (see COPD with pneumonia). If there is no documented infective disorder, a diagnosis of ‘infective exacerbation of COPD’ or ‘chest infection exacerbating COPD’ is classified to J44.0 *Chronic obstructive pulmonary disease with acute lower respiratory infection.*

At J44.0 *COPD with acute lower respiratory infection,* there is an Excludes note:

*Excludes:* with influenza (J09-J11)

This is likely to be an Excludes note that supports mortality coding (single condition coding). This will be queried with IHPA. In the meantime, apply the Multiple Condition Coding convention i.e. Influenza and COPD are separate clinical concepts, and because there is no single Index pathway incorporating both concepts, multiple codes should be assigned to capture the multiple clinical concepts.

The doctor’s selection of principal diagnosis on the discharge summary will determine whether COPD or influenza is sequenced as principal diagnosis. This is also emphasised in ACS 1008 *Chronic Obstructive Pulmonary Disease/COPD with pneumonia.*

**DECISION**

COPD and influenza are separate clinical concepts, and because there is no single Index pathway incorporating both concepts, multiple codes are required as per the ICD-10-AM convention **Multiple condition coding.**

[Effective 01 January 2020, ICD-10-AM/ACHI/ACS 11th Ed.]