Western Australian Coding Rule

0920/03 Influenza with lower respiratory tract infection (LRTI)

WA Coding Rule 1219/01 *Influenza with lower respiratory tract infection* is superseded by ICD-10-AM/ACHI/ACS Coding Rule *Influenza with lower respiratory tract infection (LRTI)* (Ref No: Q3504) effective 1 October 2020; (log in to view on the [IHPA Australian Classification Exchange](https://www.ihpa.health.gov.au/)).
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1219/01  Influenza with lower respiratory infection

Q.
Should multiple codes be assigned for influenza with lower respiratory tract infection (LRTI) to capture each concept?

A.
At Alphabetic Index entry:

**Infection**
- **respiratory (tract) NEC**

the sub-terms ‘influenzal’ and ‘lower’ are at equal indentation i.e. influenza and LRTI are not bundled into a single code.

The coding convention *Multiple Condition Coding* (problem with an underlying cause) is applicable.

Influenza and LRTI are separate clinical concepts, and because there is no single Index pathway incorporating both concepts, multiple codes are required to capture the problem and underlying cause.

Other respiratory manifestations listed at J10.1/J11.1 *Influenza with other respiratory manifestations* have either a specific Index pathway and/or Tabular List instruction for assignment of the influenza code **alone** i.e. do not require multiple coding.

The doctor’s selection of principal diagnosis on the discharge summary will determine whether influenza or LRTI is sequenced as principal diagnosis.

Note: influenza with pneumonia has its own specific code.

**DECISION**

Influenza and LRTI are separate clinical concepts, and because there is no single Index pathway incorporating both concepts, multiple codes are required to capture the problem and underlying cause as per the ICD-10-AM convention *Multiple condition coding*.

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