



Western Australian Coding Rule

0719/16 Premature rupture of membranes prior to 20 weeks gestation

WA Coding Rule 0110/14 *Premature rupture of membranes prior to 20 weeks* is retired.

ACS 1511 *Termination of pregnancy (abortion)* provides instruction for abortion code sequencing; and instructs that any documented reason(s) for termination should be coded as additional diagnosis/es.

DECISION

WA Coding Rule 0110/14 *Premature rupture of membranes prior to 20 weeks gestation* is retired.

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



Western Australian Coding Rule

0110/14 Premature rupture of membranes prior to 20 weeks gestation

Q.

We have had a number of patients who present with premature rupture of membranes (PROM) before 20 week gestation. After assessment the clinicians decide it is a non-viable pregnancy and recommend the patient has a termination of pregnancy. Should we be coding the termination as the Principal Diagnosis and threatened abortion O20.0 as an additional diagnosis to capture the PROM?

A.

According to ACS 1511 *Termination of Pregnancy* point 1, code O04.9 *Medical Abortion, complete or unspecified, without complication* would be assigned as principal diagnosis followed by the duration of pregnancy code. O20.0 *Threatened abortion* should be assigned as an additional diagnosis to indicate the reason for the termination. If there is no documentation of threatened abortion, assign O42.9 as an additional diagnosis.

DECISION

If pregnancy is deemed non-viable i.e. threatened abortion, assign codes:

O04.x *Medical abortion*

O09.x *Duration of pregnancy*

O20.0 *Threatened abortion*

If no documentation of threatened abortion or non-viable pregnancy (only indication is PROM) assign codes:

O04.x *Medical abortion*

O09.x *Duration of pregnancy*

O42.9 *Premature rupture of membranes, unspecified*

[Effective 20 January 2010, ICD-10-AM/ACHI/ACS 6th Ed.]