



# Western Australian Coding Rule

## **1218/06 Neonatal sepsis/risk of sepsis**

WA Coding Rule 0611/01 *Risk of sepsis versus symptoms of infection in newborn* is superseded by ACCD Coding Rule **Neonatal sepsis/risk of sepsis** (Ref No: Q3259) effective 1 January 2019; (log in to view on the [ACCD CLIP portal](#)).

## **DECISION**

**WA Coding Rule 0611/01 *Risk of sepsis versus symptoms of infection in newborn* is retired.**

[Effective 1 Jan 2019, ICD-10-AM/ACHI/ACS 10<sup>th</sup> Ed.]



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## 0611/01 Risk of sepsis versus symptoms of infection in newborn

### Q.

*ACS 1617 Neonatal sepsis/risk of sepsis* directs us to assign a code from *Z03 Medical observation and evaluation for suspected diseases and conditions* for diagnosis of 'risk of sepsis'.

If documentation in a neonatal episode states high C Reactive Protein (CRP) for which a course of oral antibiotics is administered, without documented statements such as "suspected infection" or "risk of sepsis" can we follow ACS 1617 and assign Z03.71?

### A.

*ACS 1617 Neonatal sepsis/risk of sepsis* and *ACS 1611 Observation and evaluation of newborn and infants for suspected condition not found* should be followed only when patient has no symptoms.

If there are symptoms of infection e.g. fever, high C Reactive Protein (CRP) these should be coded instead of Z03.71. Assign *R79.8 Other specified abnormal findings of blood chemistry* for high CRP treated with oral antibiotics.

### DECISION

**Z03.7 Observation of newborn for suspected condition not found** codes should only be assigned when no symptoms or condition found, and newborn requires increased monitoring/observation of a suspected condition.

[Effective 15 June 2011, ICD-10-AM/ACHI/ACS 7<sup>th</sup> Ed.]