Chapter 10: Diseases of the Respiratory System
Scenario 96

An 81-year-old woman is admitted to home health with a primary diagnosis of aspiration pneumonia due to the aspiration of food. She suffers from chronic obstructive bronchitis and Alzheimer’s disease.

**Primary:**  
J69.0  Pneumonitis due to inhalation of food and vomit

**Secondary:**  
T17.290D  Food in respiratory tract, part unspecified, causing asphyxiation, subsequent encounter

**Secondary:**  
J44.9  Chronic obstructive pulmonary disease, unspecified

**Secondary:**  
G30.9  Alzheimer’s disease, unspecified

**Secondary:**  
F02.80  Dementia in other diseases classified elsewhere without behavioral disturbance

Aspiration pneumonia & ventilator-associated pneumonia are not included in “respiratory infection” codes in ICD-10. Thus, they can’t prompt the use of the combination code J44.0 (Chronic obstructive pulmonary disease with acute lower respiratory infection) in a patient with chronic obstructive bronchitis, according to the Coding Clinic.

Capture this scenario with J44.9 (Chronic obstructive pulmonary disease, unspecified) and J69.0 (Pneumonitis due to inhalation of food and vomit) in the case of aspiration pneumonia, according to Q1 2017 Coding Clinic. The codes are sequenced according to the focus of care.

Note, there is a “Code Also” note at J69.0 to code also any associated foreign body in respiratory track (T17.-). Thus you would assign T17.290D after the J69.0 code.

“Asphyxiation” can be indexed from the term aspiration, as well as the terms choking or choked if the patient choked on food, which is the most common cause of aspiration pneumonia in elderly patients and those with dysphagia.
Scenario 97

A 75-year-old woman is admitted to home health after being hospitalized with pneumonia caused by streptococcus pneumoniae, which caused an acute exacerbation of her chronic obstructive bronchitis. The pneumonia is still resolving and is the focus of care. She will continue taking oral antibiotics for the next several weeks.

**Primary:** J13 Pneumonia due to Streptococcus pneumoniae

**Secondary:** J44.0 Chronic obstructive pulmonary disease with (acute) lower respiratory infection

**Secondary:** J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation

**Secondary:** Z79.2 Long term (current) use of antibiotics

Because it’s the focus of care, the pneumonia is coded first. The “code also” note on J44.0 instructs to code also the pneumonia but a “code also” note does not provide sequencing instruction, which allows the pneumonia code to be sequenced first, as the focus of care.

A code for acute exacerbated chronic obstructive bronchitis is also necessary and is thus assigned, to capture the fact that the pneumonia caused an exacerbation. An Excludes 2 note on J44.0 allows their assignment of both J44.- codes.

Code Z79.2 is assigned to capture continued antibiotics for the next several weeks.