

## Video Accompaniment – Nursing Codes

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More videos are available at <http://www.chip-az.org/downloads.htm>

We will cover:

- Coding an Activity Entry into CHIP-AZ
- Critical Codes Monitored
- How To Apply The Nursing Diagnosis Codes To Various Situations

## Coding an Activity Entry

### **6 Questions to Ask Yourself**

When entering nursing codes for an activity, ask these questions.

	<b>Question</b>	<b>Enter Code</b>	<b>Code Description</b>
1	Was it an illness?	1	Illness - Nsg Assess/Tx
	Was it an injury?	5 10	Injury at School - Nsg Assess/Tx Injury at Home or Other
	Neither applies	--	--
2	Did I administer a PRN Med?	18	Medications - PRN
	Or a non-scheduled procedure?	20	Skilled Nursing Procedures (consents required)
		21	IEP (required) Related Interventions
3	Does a Chronic code apply?	Such as 310.11	Allergy - Known as of 5/1
	Does an Acute code apply?	Such as 515.33	Commun. Rash - Varicella - Referred
	Any Nursing Dx codes apply?		
4	Did I do any kind of screening? <i>Select appropriate screening Code(s), i.e. Pediculosis, etc.</i>	125	Pediculosis - screened
	Re-screen	130	Pediculosis - RN re-screened
	Referral	131	Pediculosis - Referred
5	Did I contact the parent?	30	Parental Contacts
6	Did I send the student home?	280	Students Sent Home by RN
		285	Students Sent Home by Health Assistant

## Critical Codes Monitored

The codes selected by ADHS to monitor on a daily basis are:

- 515.33 Communicable Rash – Varicella – Referred
- 517.33 Communicable Rash – Rubella/Rubeola – Referred
- 543.33 Gastrointestinal – Vomiting and Diarrhea w or w/o fever – Referred
- 561.33 Meningitis/Encephalitis – Bacterial/Viral – Referred
- 582.33 Respiratory – Influenza-like Illness (ILI) – Referred

***This information is uploaded when you are asked to perform ESP upload.***

# How to Apply the Nursing Codes to Various Situations

## 7 Scenarios

What codes (chronic, acute, nursing diagnosis and any other) could you apply to the following scenario's?

**Pause your video and fill in your answers.**

Compare your answers with the answers from a survey of school nurses below.

Scenario	Enter Codes	Code Description
1 A student comes to your office with slight fever and individual small fluid-filled blisters on the face and <i>back</i> .		
2 A student comes to your office with fever of 101 F and a fine pink rash on the face and spreading to the <i>chest</i> .		
3 A student comes to your office with high fever, stiff neck, chills and a macular rash.		
4 A student comes to your office with a fever of 101.6 F with a headache and a sore throat.		

<b>Scenario</b>	<b>Enter Codes</b>	<b>Code Description</b>
5	A student comes to your office with coughing, sore throat and a fever. The student has a primary care provider letter stating that the student has asthma.	
6	A student comes to your office with coughing, wheezing and shortness of breath. The student has documentation of diagnosis of asthma.	
7	A student comes to your office with coughing, wheezing and shortness of breath, but has no history of asthma.	

**Compare your answers with the answers from a survey of school nurses below.**

Compare your answers with the answers from a survey of school nurses below.

## Answers to Scenarios

<b>Scenario</b>	<b>Enter Codes</b>	<b>Code Description</b>
1 A student comes to your office with slight fever and individual small fluid-filled blisters on the face and back.	1	Illness - Nsg Assess/Tx
	515.22/.33	Commun. Rash - Varicella
	645.22	Hyperthermia - Nursing Intervention
	280 or 285	Sent Home by RN or Health Asst.
	30	Parental Contacts
	210	Conferences w/ school personnel
	220	Community Contacts / Meetings – (report to county)
	175	Health Education /Promotion /Resource (May change after physician diagnosis)
<b>Scenario</b>	<b>Enter Codes</b>	<b>Code Description</b>
2 A student comes to your office with fever of 101 F and a fine pink rash on the face and spreading to the chest.	1	Illness - Nsg Assess/Tx
	517.22/.33	Commun. Rash - Rubella/Rubeola
	645.22/.33	Hyperthermia
	30	Parental Contacts
	280 or 285	Sent Home by RN or Health Asst.
	210	Conferences w/ school personnel
	220	Community Contacts / Meetings – (report to county)
	175	Health Education /Promotion /Resource (May change after physician diagnosis)
<b>Scenario</b>	<b>Enter Codes</b>	<b>Code Description</b>
3 A student comes to your office with high fever, stiff neck, chills and a macular rash.	1	Illness - Nsg Assess/Tx
	561.22/.33	Meningitis/Encephalitis - Bacterial/ Viral
	531.22/.33	Fever >101 with or w/o headache & no other recognizable symptoms
	30	Parental Contacts
	280 or 285	Sent Home by RN or Health Asst.
	210	Conferences w/ school personnel
	220	Community Contacts / Meetings – (report to county)
	175	Health Education /Promotion /Resource (May change after physician diagnosis)
	18	PRN if given
760.22/.33	Infection, Risk for (May also apply)	

<b>Scenario</b>		<b>Enter Codes</b>	<b>Code Description</b>
4	A student comes to your office with a fever of 101.6 F with a headache and a sore throat.	1	Illness - Nsg Assess/Tx
		582.22/.33	Respiratory - Influenza-like Illness (ILI)
		Or 580.22/.33	Respiratory
		531.22/.33	Fever >101 with or w/o headache & no other recognizable symptoms
		645.22/.33	Hyperthermia
		675.22	Pain
		18	PRN if given
		30	Parental Contacts
		280 or 285	Sent Home by RN or Health Asst.
		210	Conferences w/ school personnel
		175	Health Education /Promotion /Resource (If physician diagnosis of step)
<b>Scenario</b>		<b>Enter Codes</b>	<b>Code Description</b>
5	A student comes to your office with coughing, sore throat and a fever. The student has a primary care provider letter stating that the student has asthma.	1	Illness - Nsg Assess/Tx
		580.22	Respiratory
		645.22	Hyperthermia
		675.22	Pain (Corresponding referral codes depending on findings)
		18	PRN if given
		30	Parental Contacts
		280 or 285	Sent Home by RN or Health Asst.
		210	Conferences w/ school personnel
		325.22 or 326.22	(If peak flow done and exchange of air was compromised) Asthma - without PCP Action Plan or Asthma - with PCP Action Plan
<b>Scenario</b>		<b>Enter Codes</b>	<b>Code Description</b>
6	A student comes to your office with coughing, wheezing and shortness of breath. The student has documentation of diagnosis of asthma.	1	Illness - Nsg Assess/Tx
		325.22 or 326.22	Asthma - without PCP Action Plan or Asthma - with PCP Action Plan
		620.22	Activity Intolerance (if applies)
		18	PRN if given
		30	Parental Contacts
		325.33 or 326.33	Asthma - without PCP Action Plan or Asthma - with PCP Action Plan (If unresponsive to treatment or does not have appropriate medications/ treatment plan available.)
		835.22/.33	Ineffective Airway Clearance (if applies)
		210	Conferences w/ school personnel (possible)
		280 or 285	Sent Home by RN or Health Asst.

<b>Scenario</b>	<b>Enter Codes</b>	<b>Code Description</b>
7 A student comes to your office with coughing, wheezing and shortness of breath, but has no history of asthma.	1	Illness - Nsg Assess/Tx
	580.22/.33	Respiratory (.33 if referred)
	30	Parental Contacts
	280 or 285	Sent Home by RN or Health Asst.
	210	Conferences w/ school personnel
	620.22 or	Activity Intolerance (if applies)
	835.22	Ineffective Airway Clearance (if applies)
	775.22	Knowledge Deficit (Parent may need instructions to make sure knows severity of symptoms)