

*Tuesday, March 1, 1:30PM-3:00PM
Concurrent Breakout Session C*

Teratogenic Syndromes: Ascertainment and Coding (and other coding frustrations)

Moderator: Moderator: Angela Lin, MassGeneral Hospital for Children, and the Massachusetts Birth Defects Monitoring Program, DPH, Boston, MA

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Disclaimer: The ability to ascertain and code teratogenic syndromes is limited. The codes are straightforward to use if the specific diagnosis is available in the chart. If there is known maternal exposure and features consistent with the typical syndrome, then the diagnosis might be inferred; however, that is a decision that will need to be made at the clinical reviewer level. If the defects present are suggestive of one of these syndromes, but there is no documented maternal exposure, it will be almost impossible to assign one of these codes without a diagnosis in the medical record.

The most important thing is for the surveillance program to be malleable enough to add case finding and code options for newly identified teratogens.

Standard BPA coding includes three identified chemical teratogen syndromes

760.710 – Fetal Alcohol Syndrome
760.650 – Fetal Hydantoin (Dilantin) Syndrome
760.760 – Fetal Isotretinoin (Accutane) Syndrome

BPA coding also includes some teratogen syndromes related to maternal infectious diseases

090.000 – Congenital Syphilis
771.000 – Congenital Rubella
771.100 – TORCH infection unspecified
 Toxoplasmosis, Other, Rubella, CMV, Herpes
 Also TORCHES –with addition of Epstein-Barr Virus and Syphilis
771.210 – Toxoplasmosis
771.220 – Herpes simplex
771.280 – Congenital infection, other specified
774.480 and 774.490 – Neonatal hepatitis

The infections are treated as conditional inclusions: code the infection only in the presence of structural defects. Congenital syphilis and congenital rubella syndromes have a defined set of features.

We will spend some time discussing other ways that teratogens are monitored. As time allows we will spend time discussing other problematic codes. The audience members are encouraged to bring questions.