



## Clinical Documentation Pocket Guide: Orthopedics

### \*\*\*Please Document Acuity\*\*\*

#### Reason for Admission

- Please document underlying condition causing need for surgical procedure
  - For example
    - BKA due to atherosclerotic disease with or without gangrene

#### Coexisting Conditions

- Please document chronic diseases
  - For example:
    - Diabetes, CKD, COPD, heart failure, arrhythmias etc.

#### Conditions after Surgery

- Acute blood loss anemia
- Acute Renal Failure
- Atelectasis
- Hyponatremia
- Ileus
- Malnutrition
- Urinary retention
- Other (specify)

#### Anemia

- Due to:
  - Acute blood loss, name source
  - Chronic blood loss, name source
  - Congenital anemia, name it
  - Deficiency anemia, name it
  - Chronic Kidney Disease

- Neoplasm
- Chemotherapy
- Other – specify

#### Fractures

- Identify fractures by bone
- Identify fracture laterality
  - Left
  - Right
- Identify if fracture open or closed
  - If open please specify:
    - Gustilo Classification Scale:
      - I, II, IIIA, IIIB or IIIC
    - Healing process
      - Initial, subsequent or sequelae
- Identify if fracture is
  - Pathological
    - Due to
      - Metastasis
      - Osteoporosis
      - Other (specify)
  - Traumatic
- If rib fractures, please specify number of rib fractures

#### Encephalopathy

- Acute/Chronic
- Congenital
- Alcoholic

- Due to drugs – specify
- Hepatic
- Hyperbilirubinemic, newborn
- Hypertensive
- In (due to) (e.g. birth injury, hyperinsulinism, influenza...)
- Saturnine
- Toxic
- Metabolic
- Traumatic (post-concussion)

#### Malnutrition

- Protein Calorie
  - Mild, Moderate, Severe
  - 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> degree
- Due to:
  - GI surgery
  - Failure to Thrive
  - Vitamin/Mineral Deficiency – specify
  - Other – specify
- Cachexia
- Marasmus
- Intestinal Malabsorption
  - Following GI surgery
  - Celiac/Sprue Disease
  - Blind Loop Syndrome (SIBO)
  - Other – specify

#### Diabetes

- Note if out of control/poorly controlled
- State Type I or Type II DM
  - Hyperglycemia
  - Hypoglycemia with or without coma
- Drug/Chemical Induced (specify)



## Clinical Documentation Pocket Guide: Orthopedics

### \*\*\*Please Document Acuity\*\*\*

- Link DM to other related conditions
  - Gastroparesis
  - Retinopathy
  - Neuropathy

### **Sepsis (if assoc. with organ failure – list the organs)**

- Due to
  - Pneumonia, UTI, other named source
  - Infected device or catheter

### **Organ Failures**

- Septic shock
- Acute renal failure
- Acute hepatic failure
- Acute Encephalopathy – specify type
- Acute/Chronic Systolic/Diastolic heart failure
- ARDS
- Other – specify

### **Non-infectious SIRS (Systemic Inflammatory Response)**

- State cause
- Name each failed organ

### **Respiratory Failure**

- Acute
  - Hypoxemia – PO<sub>2</sub> 10-15% lower than expected for that patient
  - Hypercapnia – PH <7.35 and PCO<sub>2</sub> >55 regardless of PO<sub>2</sub>
- Acute on Chronic

- Chronic
  - Identified by Ph-7.4 and PCO<sub>2</sub> > 50-60 or PO<sub>2</sub> < 50
  - May consider CO<sub>2</sub> > 35 on BMP in absence of other acid-base disease

### **Common Hospital Acquired Condition (HAC)**

- If not a HAC the condition must be documented as Present on Admission (POA) to prevent a negative impact on scorecards for care
- Pressure Ulcers/Decubs (stage 3&4)
- Falls/Trauma
- Manifestations of Poor Glycemic Control
- Catheter Associated UTI
- Vascular Catheter Associated Infection
- Surgical Site Infections
- DVTs/PEs