

### **NICU Quick Reference Guide**

# **Top Documentation Needs**

The following are the most important items to detail in your documentation of the case:

- 1. Weeks gestation and infant birth weight
- 2. Prematurity vs. full-term gestation
- 3. Abnormalities in fetal size and health related to gestational age (SGA, LGA)
- 4. Clarify respiratory distress vs. respiratory failure vs. respiratory arrest
- 5. Specify type of Respiratory Distress Syndrome (1 or 2)
- 6. Etiology or type of newborn apnea (of prematurity or primary)
- 7. Source of aspiration (meconium, milk, other substance)
- 8. Neonatal jaundice of prematurity or other underlying cause of hyperbilirubinemia
- Exposure to or neonatal withdrawal symptoms from maternal use of drug of addiction (specify drug)
- 10. Etiology of hypo- or hyperglycemia (of diabetic mother, transitory)
- 11. Syndrome of infant in a diabetic mother: specify type of diabetes (gestational or pre-existing)
- 12. Grade of intra-ventricular hemorrhage
- 13. Stage of retinopathy of prematurity
- 14. Neonatal cerebral depression, irritability, ischemia, or coma
- 15. Transient neonatal thrombocytopenia
- 16. Congenital anomalies

## **Definitions**

Extreme Immaturity: Less than 28 completed week's gestation

Extremely Low Birth Weight: Implies a birth weight of less than 500 – 999 grams

Prematurity: 28 completed weeks or more, but less than 37 completed week's gestation

Post-Term: Greater than 40 weeks completed gestation through 42 completed weeks

Post-Maturity Newborn, Prolonged Gestation: Greater than 42 completed week's

gestation

Low Birth Weight: Implies a birth weight of 1000 – 2499 grams

Copyright © 2015 Munson Healthcare, Traverse City, MI. All rights reserved.

continued on back



### Side 2: NICU Quick Reference Guide

RDS Type 1: Includes cardiorespiratory distress syndrome of newborn, idiopathic respiratory distress syndrome of newborn, pulmonary hypo-perfusion syndrome

RDS Type 2: Includes TTN, Wet lung syndrome, idiopathic tachypnea of newborn

### Intra-ventricular Hemorrhage Grades

- Grade 1 bleeding into germinal matrix
- Grade 2 bleeding into ventricle
- Grade 3 enlarged ventricle
- Grade 4 bleeding into cerebral cortex

#### Retinopathy of Prematurity Stages

The Stages describe the ophthalmoscopic findings at the junction between the vascularized and avascular retina:

- Stage 1 faint demarcation line; mildest form
- Stage 2 an elevated ridge along the demarcation line
- Stage 3 presence of extraretinal fibrovascular tissue
- Stage 4 sub-total/partial retinal detachment
- Stage 5 total retinal detachment

## **Procedure Documentation**

It is important to document the specific details of the following procedures:

- Chest tube placement (tube thoracostomy)
- Circumcision
- Frenulotomy (tongue tied)
- Intubation with mechanical ventilation (including documentation of length of time on ventilator)
- Umbilical Artery Catheter insertion
- Umbilical Vein Catheter insertion
- Phototherapy

# munsonhealthcare.org/icd10 or email icd10help@mhc.net

Copyright © 2015 Munson Healthcare, Traverse City, MI. All rights reserved.

