

TOBACCO USE DURING PREGNANCY

QUICK REFERENCE: ICD-10-CM TOBACCO USE DURING PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM

Codes under subcategory O99.33-- Smoking (tobacco) complicating pregnancy, childbirth, and the puerperium, should be assigned for any pregnancy case *when a woman uses any type of tobacco product during the pregnancy or postpartum.*

ICD-10 coding instructions require a secondary code from Category F17- to identify the type of nicotine product the patient uses. Clinicians should document the type of product used to support proper code selection.

Codes	
O99.330	... unspecified trimester
O99.331	... first trimester
O99.332	... second trimester
O99.333	... third trimester
O99.334	... childbirth
O99.335	... the puerperium

Use a secondary code from category F17.-- Nicotine dependence, to identify the type of nicotine dependence.

DOCUMENT AND CODE FOR SMOKING CESSATION COUNSELING

If a pregnant patient presents solely for assistance with quitting tobacco use, or when a prenatal visit or visit for another issue progresses into the provision of cessation counseling, the clinician should document and code the counseling and time spent on this activity in the patient's medical record.

Codes	
Z71.6	Tobacco abuse counseling

Use a secondary code from category F17.2—Nicotine dependence to identify the type of nicotine dependence

DOCUMENTATION TIPS:

- ✓ To accurately select and support ICD-10 diagnosis codes relating to tobacco use, specify if the patient is engaging in the use of tobacco or has developed a dependence on tobacco/nicotine.
- ✓ Include the type of tobacco product used and whether or not there are nicotine-induced disorders such as remission or withdrawal.
- ✓ Perform a thorough history to obtain this information from the patient. Templates within an electronic health records (EHR) can serve as reminders to ask for this information along with use of a tobacco use status sticker (within the patient's chart) or use of computerized reminder systems.
- ✓ Checking tobacco use status may be done by members of the healthcare team other than the treating clinician.

Asking women who are pregnant or seeking pregnancy about her tobacco use increases the rate of clinician intervention.

