## **Aneurysms**

It is important to accurately document and code aneurysms.

## **Documentation**

Provide the following documentation on an annual basis, at minimum, for a patient with an aortic aneurysm:

- ➤ Site (abdominal, thoracic)
- Ascending vs. descending
- ldentify severity (e.g., ectasia vs. aneurysm)
- ▶ Describe any dissection or infection, if present

## **Coding Tips**

Diagnosis codes related to aortic aneurysms fall into the category of **I71.-I72.9**. Diagnosis code **I79.0** should only be coded when an aortic aneurysm is specified as due to another primary disease. The causative disease should be coded first.

The following are the most commonly captured ICD-10 codes for the outpatient setting:

Chronic Aneurysm and Ectasia Codes	
Description	Code
Pulmonary artery aneurysm	I28.1
Thoracic aortic aneurysm, without rupture	I71.2-
Abdominal aortic aneurysm, without rupture	I71.4-
Thoracoabdominal aortic aneurysm, without rupture	I71.6-
Aortic aneurysm of unspecified site, without rupture	171.9
Aneurysm of carotid artery	172.0
Aneurysm of artery of upper extremity	172.1
Aneurysm of renal artery	172.2
Aneurysm of iliac artery	172.3
Aneurysm of artery of lower extremity	172.4
Aneurysm of other specified arteries	172.8
Aneurysm of unspecified site	172.9
Thoracic aortic ectasia	177.810
Abdominal aortic ectasia	177.811
Thoracoabdominal aortic ectasia	177.812
Aortic ectasia, unspecified site	177.819
Aneurysm of aorta in diseases classified elsewhere	179.0





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