

Track Changes
from Chapter 3, Section K V1.10
to Chapter 3, Section K V1.11

Chapter	Section	Page	Change																																		
3	K0510	K-12	<p>Coding Tips for K0510D</p> <ul style="list-style-type: none"> Food elimination diets related to food allergies (e.g. peanut allergy) can be coded as a therapeutic diet. 																																		
3	K0710	K-13	<p>K07010: Percent Intake by Artificial Route</p> <p><i>Complete K07010 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B.</i></p> <p>Replaced screen shot:</p> <p>OLD</p> <table border="1"> <tr> <td colspan="2">K0700. Percent Intake by Artificial Route - Complete K0700 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B</td> </tr> <tr> <td>Enter Code <input type="checkbox"/></td> <td>A. Proportion of total calories the resident received through parenteral or tube feeding 1. 25% or less 2. 26-50% 3. 51% or more</td> </tr> <tr> <td>Enter Code <input type="checkbox"/></td> <td>B. Average fluid intake per day by IV or tube feeding 1. 500 cc/day or less 2. 501 cc/day or more</td> </tr> </table> <p>NEW</p> <table border="1"> <tr> <td colspan="4">K0710. Percent Intake by Artificial Route - Complete K0710 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B</td> </tr> <tr> <td>1. While NOT a Resident Performed <i>while NOT a resident</i> of this facility and within the <i>last 7 days</i>. Only enter a code in column 1 if resident entered (admission or reentry) IN THE LAST 7 DAYS. If resident last entered 7 or more days ago, leave column 1 blank</td> <td>1. While NOT a Resident</td> <td>2. While a Resident</td> <td>3. During Entire 7 Days</td> </tr> <tr> <td>2. While a Resident Performed <i>while a resident</i> of this facility and within the <i>last 7 days</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3. During Entire 7 Days Performed during the entire <i>last 7 days</i></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td colspan="3" style="text-align: center;">Enter Codes</td> </tr> <tr> <td>A. Proportion of total calories the resident received through parenteral or tube feeding 1. 25% or less 2. 26-50% 3. 51% or more</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>B. Average fluid intake per day by IV or tube feeding 1. 500 cc/day or less 2. 501 cc/day or more</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	K0700. Percent Intake by Artificial Route - Complete K0700 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B		Enter Code <input type="checkbox"/>	A. Proportion of total calories the resident received through parenteral or tube feeding 1. 25% or less 2. 26-50% 3. 51% or more	Enter Code <input type="checkbox"/>	B. Average fluid intake per day by IV or tube feeding 1. 500 cc/day or less 2. 501 cc/day or more	K0710. Percent Intake by Artificial Route - Complete K0710 only if Column 1 and/or Column 2 are checked for K0510A and/or K0510B				1. While NOT a Resident Performed <i>while NOT a resident</i> of this facility and within the <i>last 7 days</i> . Only enter a code in column 1 if resident entered (admission or reentry) IN THE LAST 7 DAYS. If resident last entered 7 or more days ago, leave column 1 blank	1. While NOT a Resident	2. While a Resident	3. During Entire 7 Days	2. While a Resident Performed <i>while a resident</i> of this facility and within the <i>last 7 days</i>				3. During Entire 7 Days Performed during the entire <i>last 7 days</i>					Enter Codes			A. Proportion of total calories the resident received through parenteral or tube feeding 1. 25% or less 2. 26-50% 3. 51% or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B. Average fluid intake per day by IV or tube feeding 1. 500 cc/day or less 2. 501 cc/day or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3	K0710	K-14	K07010: Percent Intake by Artificial Route (cont.)																																		
3	K0710	K-14	K07010A, Proportion of Total Calories the Resident Received through Parental or Tube Feedings in the Last 7 Days																																		
3	K0710	K-14 & K-15	<p>Example</p> <p>1. Calculation for Proportion of Total Calories from IV or Tube Feeding</p> <p>Mr. H has had a feeding tube since his surgery two weeks ago. He is currently more alert and feeling much better. He is very motivated to have the tube removed. He has been taking soft solids by mouth, but only in small to medium amounts. For the past 7 days, he has been receiving tube feedings for nutritional supplementation. The dietitian has totaled his calories per day as follows:</p> <p>Coding: K07010A columns 2 and 3 would be coded 3, 51% or more.</p> <p>Rationale: Total Oral intake is 2,450 calories</p>																																		

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			<p>Total Tube intake is 15,000 calories Total calories is 2,450 + 15,000 = 17,450 Calculation of the percentage of total calories by tube feeding: $15,000/17,450 = .859 \times 100 = 85.9\%$ Mr. H received 85.9% of his calories by tube feeding, therefore K07010A code 3, 51% or more is correct.</p>
3	K0710	K-15	K07010: Percent Intake by Artificial Route (cont.)
3	K0710	K-15	K07010B, Average Fluid Intake per Day by IV or Tube Feeding in the Last 7 Days.
3	K0710	K-15 & K-16	<p>1. Calculation for Average Daily Fluid Intake Ms. A, a long term care resident, has swallowing difficulties secondary to Huntington’s disease. She is able to take oral fluids by mouth with supervision, but not enough to maintain hydration. She received the following daily fluid totals by supplemental tube feedings (including water, prepared nutritional supplements, juices) during the last 7 days.</p> <p>Coding: K07010B columns 2 and 3 would be coded 2, 501cc/day or more. Rationale: The total fluid intake by supplemental tube feedings = 6,300 cc 6,300 cc divided by 7 days = 900 cc/day 900 cc is greater than 500 cc, therefore code 2, 501 cc/day or more is correct.</p>
3	K0710	K-16	K07010: Percent Intake by Artificial Route (cont.)
3	K0710	K-16	<p>2. Calculation for Average Daily Fluid Intake Mrs. G. received 1 liter of IV fluids in the hospital on the Tuesday prior to her admission to the nursing home on Saturday afternoon, during the 7-day assessment period. She received no other intake via IV or tube feeding during the last 7 days assessment period.</p> <p>Coding: K07010B column 1 would be coded 1, 500 cc/day or less. Rationale: The total fluid intake by supplemental tube feedings = 1000 cc 1000 cc divided by 7 days = 142.9 cc/day</p>

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			142.9 cc is less than 500 cc, therefore code 1, 500 cc/day or less is correct.