Coronary artery disease with stable angina

Overview:
Coronary artery disease with stable angina pectoris (I25.118) may be recommended when:
- A patient experiences chest pain or discomfort due to inadequate blood supply to the heart that is provoked in a predictable manner by exertion or another stress and is relieved by rest or short acting nitroglycerin
  or
- A patient previously experienced symptoms of stable angina and those symptoms are now minimal or absent due to ongoing treatment with medications such as isosorbide mononitrate (Imdur) or ranolazine (Ranexa)

Documentation Examples:

<table>
<thead>
<tr>
<th>Assessment/Plan: CAD with stable angina:</th>
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<tbody>
<tr>
<td>Episodes of chest pain while raking or walking up hills that are relieved with rest. Continue statin and Nitroglycerin prn.</td>
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<td>CAD with stable angina is well documented in both scenarios.</td>
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<td>Case #1: Pt. reports chest pain specific with activity and relieved with rest; clear evaluation and treatment plan to support stable angina</td>
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<td>OR:</td>
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<td>CAD with stable angina: Denies recent chest pain and/or shortness of breath. Is walking 2 miles daily. Continue Imdur, aspirin, statin.</td>
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<td>Case #2: Documentation supports chronic angina is well controlled on active treatment (Imdur)</td>
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Active Management (“MEAT”):

**Monitor**
- Symptoms
- Disease progression/regression
- Ordering tests

**Evaluate**
- Test results
- Medication effectiveness
- Response to treatment
- Exam finding

**Assess/Address**
- Review records
- Counseling
- Documenting status

**Treat**
- Prescribe/continue medication/stopping
- Surgical/other interventions
- Referral to a specialist

Common Pitfalls:
- Nonspecific diagnosis
- Documentation and reported ICD-10 codes do not match, such as **CAD with stable angina (I25.118) and CAD without angina (I25.10)** both being coded in the same visit
- Not enough information to indicate active assessment/management
- Not linking data/medications to the relevant condition in the assessment/plan.
- Not addressing both conditions when a single ICD-10 code represents a condition and its complication/manifestation
- Inappropriately coding acute conditions such as **unstable angina (I20.0)**

Resources:
Management of Stable Angina (dynamed.com), Up to Date, Initial evaluation of suspected acute coronary syndrome (myocardial infarction, unstable angina) in the emergency department; ICD-10-CM 2022, The Complete Official Codebook, American Medical Association; Up to Date, Chronic coronary syndrome: Overview of care