

Acute Conditions at Ambulatory Visits: Ischemic Stroke

An acute stroke code (I63.-):

- Should only be used for the episode of care when the stroke is first diagnosed (typically by an emergency room evaluation and/or an inpatient admission).

After the initial episode of care for an acute ischemic stroke:

- Sequelae of the acute ischemic stroke (I69.3-) should be coded if they are present.

Pearl: examples of sequelae include:

- cognitive deficits (I69.31-)
- speech and language deficits (I69.32-)
- monoplegia of the upper (I69.33-) and lower (I69.34-) limbs
- hemiplegia/hemiparesis (I69.35-)

If no sequelae are present:

- personal history of transient ischemic attack (TIA) and cerebral infarction without residual deficits (Z86.73) can be used as a billing diagnosis.