

Session 6 –

Ch 9 Circulatory Hypertension Heart Disease Strokes



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Chapter 9 Diseases of the Circulatory System

This chapter contains the following blocks:

- I00-I02 Acute rheumatic fever
- I05-I09 Chronic rheumatic heart diseases
- I10-I1A Hypertensive diseases
- I20-I25 Ischemic heart diseases
- I26-I28 Pulmonary heart disease and diseases of pulmonary circulation
- I30-I5A Other forms of heart disease
- I60-I69 Cerebrovascular diseases
- I70-I79 Diseases of arteries, arterioles and capillaries
- I80-I89 Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified
- I95-I99 Other and unspecified disorders of the circulatory system

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Hypertension

Specify Type of Hypertension

- Primary/Essential
- Secondary

Specify Body System Affected

- Heart Failure
- CKD
- Heart Failure and CKD

Ch 9 Guidelines Hypertension (I.C.9.a)

- Hypertension Coding Guidelines for Heart and Kidney Involvement
 - When HTN coexists with CHF and CKD a causal relationship is assumed, unless documentation states otherwise
 - Hypertensive heart disease
 - Use codes from category I11
 - Hypertensive CKD
 - Use codes from category I12
 - Hypertensive heart with or w/o CHF and CKD
 - Use codes from category I13



I11 Hypertensive Heart Disease (I.C.9.a)

Alphabetic Index:

Hypertension with heart involvement (See Hypertension, heart)

Includes ONLY

- I50.- — Heart failure
- I51.4 — Myocarditis, unspecified
- I51.5 — Myocardial degeneration
- I51.7 — Cardiomegaly
- I51.89 — Other ill-defined heart diseases (e.g., Carditis /Pericarditis)
- I51.9 — Heart disease, unspecified

Hypertensive Heart Disease (I.C.9.a)

I11.0 – Hypertensive heart disease **with** heart failure

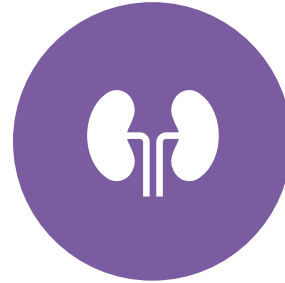
I11.9 - Hypertensive heart disease **without** heart failure (NOS)

Use additional code to identify specific type (e.g., I50.22 – Chronic systolic (congestive) heart failure)

I12 Hypertensive Chronic Kidney Disease (I.C.9.a)



Alphabetic Index:
Hypertension with kidney
involvement (see Hypertension,
kidney)



Includes any condition in N18 (e.g., CKD
any stage, ESRD) and N26 (e.g.,
arteriosclerosis of kidney, nephrosclerosis)
due to hypertension

Hypertensive Chronic Kidney Disease (I.C.9.a)

I12.0 - Hypertensive CKD with
stage 5 CKD or ESRD

Use additional code to
identify stage CKD
(N18.5, N18.6)

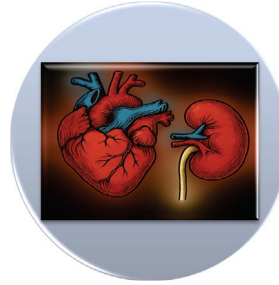
I12.9 – Hypertensive CKD with
stage 1-4 CKD or unspecified
CKD

Use additional code to
identify stage CKD
(N18.1-N18.4, N18.9)

I13 Hypertensive Heart and Chronic Kidney Disease (I.C.9.a)

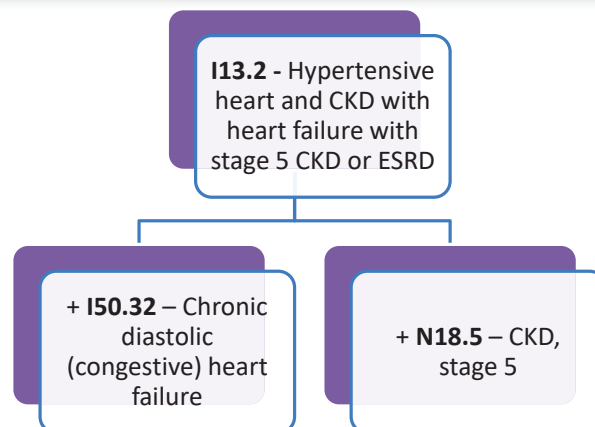


Alphabetic Index:
Hypertension with
cardiorenal

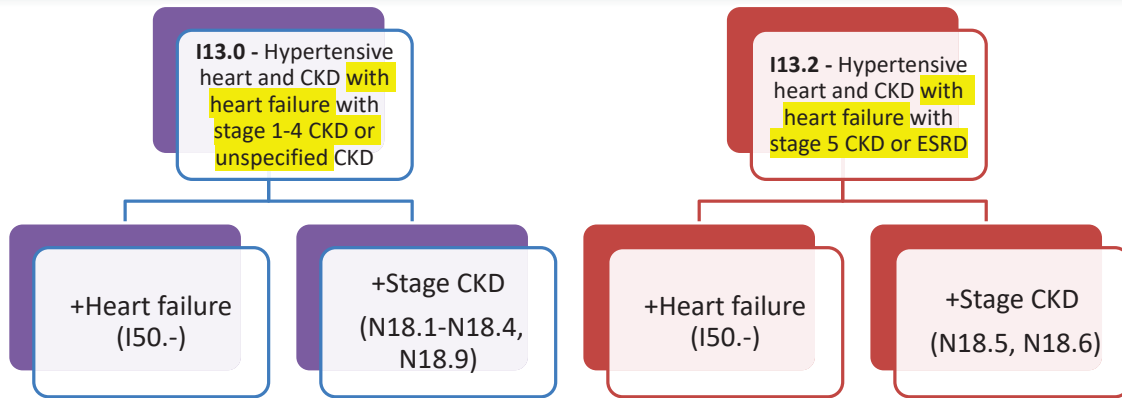


Same includes as heart
and kidney

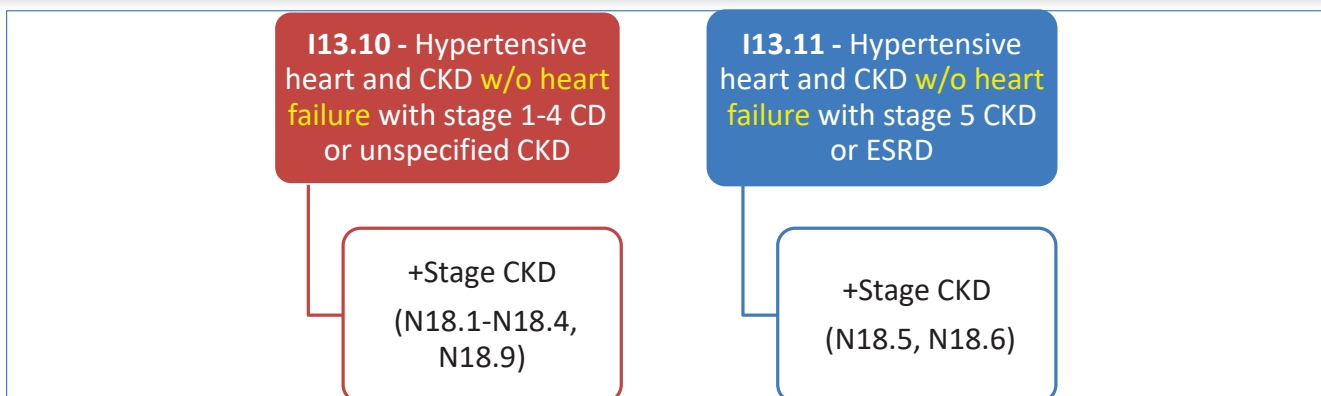
Hypertensive Heart and Chronic Kidney Disease with Heart Failure Coding Example (I.C.9.a)



Hypertensive Heart and Chronic Kidney Disease with Heart Failure (I.C.9.a)



Hypertensive Heart and Chronic Kidney Disease without Heart Failure (I.C.9.a)



Hypertensive Heart, Chronic Kidney Disease **without** Heart Failure and Diabetes Coding Example (I.C.9.a)

I13.10 - Hypertensive heart and CKD **w/o** heart failure with stage 1-4 CKD or unspecified CKD

+N18.4 - CKD, stage 4 (severe)

E11.22 – Type 2 diabetes with diabetic CKD

Stage kidney disease already reported

Secondary Hypertension (I.C.9.a)

I15.0 - Renovascular hypertension

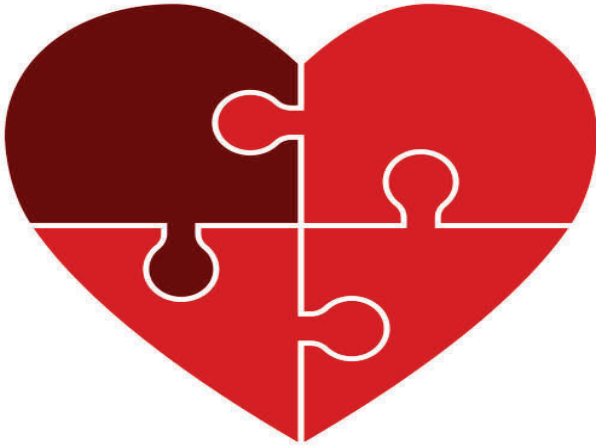
I15.1 - Hypertension secondary to other renal disorders

I15.2 - Hypertension secondary to endocrine disorders

I15.8 - Other secondary hypertension

I15.9 - Secondary hypertension, unspecified

Hypertensive Emergencies (I.C.9.a)



I16.0 - Hypertensive urgency

I16.1 - Hypertensive emergency

I16.9 - Hypertensive crisis, unspecified

Ch 9 Guidelines – Hypertension (I.C.9.a)



- First Listed**
 - Based on reason for encounter
- Hypertensive Cerebrovascular Disease**
 - 1st dx: Category I60-I69 - Cerebrovascular Disease
 - 2nd dx:, Category I10-I1A – Hypertensive Diseases
- Hypertensive Retinopathy**
 - 1st dx: Subcategory H35.0 - Background Retinopathy and retinal changes
 - 2nd dx: Category I10-I15 – Hypertensive Diseases
- Secondary HTN**
 - 2 codes req: underlying etiology code + HTN code (I15 Category)
 - Sequencing: See first listed rule
- Transient HTN**
 - R03.0 Elevated BP without HTN diagnosis

“Resistant” and “Uncontrolled” Hypertension (I.C.9.a)

Resistant Hypertension

Refers to blood pressure of patient with hypertension that remains above goal despite the use of antihypertensive medications

Assign code I1A.0 – Resistant hypertension when documented by the provider

Code first specific type of existing hypertension, if known, such as:

- Essential hypertension (I10)
- Secondary hypertension (I15.-)

Uncontrolled Hypertension

Refers to untreated hypertension or hypertension not responding to current therapeutic regimen

Assign appropriate code from categories I10-I15, Hypertensive diseases

Social and Risk Factors

- Z77.22 - Exposure to environmental tobacco smoke
- Z87.891 - History of tobacco use
- Z57.31 - Occupational exposure to environmental tobacco smoke
- F17.- - Tobacco dependence
- Z72.0 - Tobacco use





IRF Considerations - Etiologic

Primarily Etiologic in

- 09 - Cardiac
 - With heart failure
- 16 - Debility
 - With CKD



IRF Considerations – 60%

- No diagnoses that cause 60%
- None cause to FAIL

IRF Considerations – Tiers

D Tier

- Hypertensive chronic kidney disease with stage 5 CKD/ESRD (**I12**)
- Hypertensive heart and CKD with heart failure (**I13.0, I13.2**)(RIC Exclusion 14)

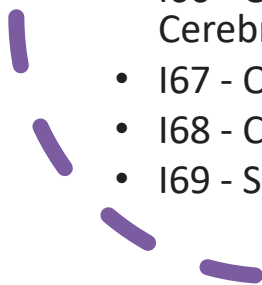
Documenting
and Coding
Strokes





ICD-10-CM Stroke Categories

- I60 - Nontraumatic Subarachnoid Hemorrhage
- I61 - Nontraumatic Intracerebral Hemorrhage
- I62 - Other and Unspecified Nontraumatic Intracranial Hemorrhage
- I63 - Cerebral Infarction
- I65 - Occlusion and Stenosis of Precerebral Arteries, Not Resulting in Cerebral Infarction
- I66 - Occlusion and Stenosis of Cerebral Arteries, Not Resulting in Cerebral Infarction
- I67 - Other Cerebrovascular Diseases
- I68 - Cerebrovascular Disorders in Diseases Classified Elsewhere
- I69 - Sequelae of Cerebrovascular Disease

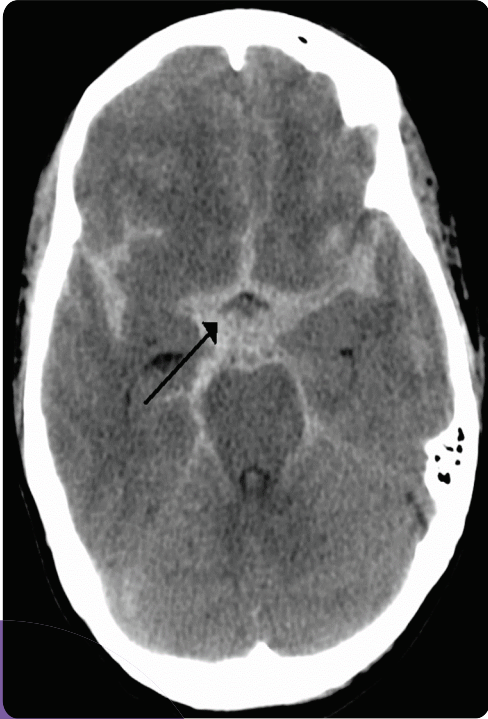


Documenting and Coding for Strokes

CAUSE, LOCATION, RESIDUAL

Sequela (Residual)

- *Side is important! Dominant versus Non- Dominant should be clear;*
- *Codes from I69 used for sequela;*
- *May be assigned with codes from I60-I67;*
- *For current and old deficits from old CVA*



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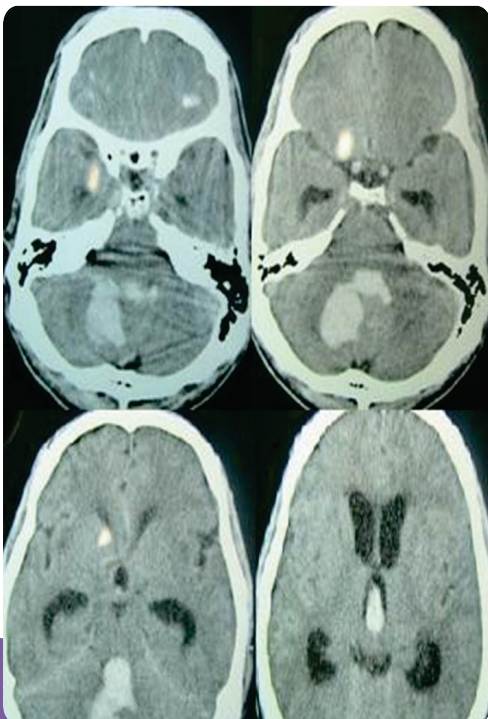
Nontraumatic Subarachnoid Hemorrhage

- *I60.0 - Nontraumatic subarachnoid hemorrhage from carotid siphon and bifurcation
- *I60.1 - ... from middle cerebral artery
- I60.2 - ... from anterior communicating artery
- *I60.3 - ... from posterior communicating artery I60.4 - ... from basilar artery
- *I60.5 - ... from vertebral artery
- I60.6 - ... from other intracranial arteries
- I60.7 - ... from unspecified intracranial artery
- I60.8 - Other nontraumatic subarachnoid hemorrhage
- I60.9 - Nontraumatic subarachnoid hemorrhage, unspecified

*Denotes Additional 5th Digit Required

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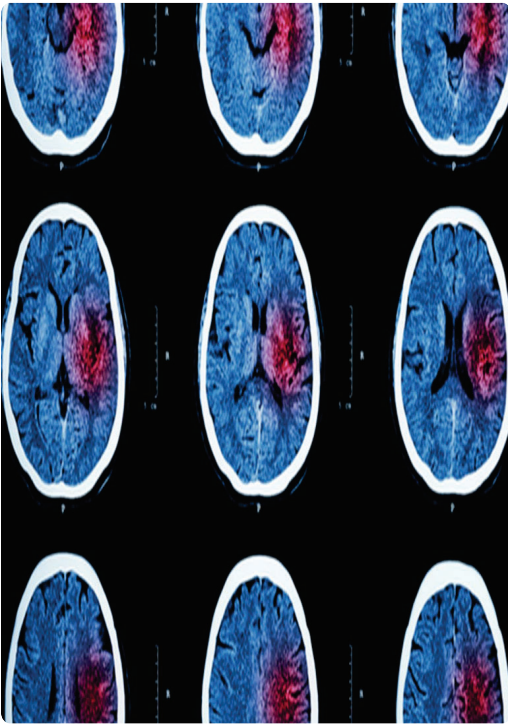
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Nontraumatic Intracerebral Hemorrhage

- I61.0 - Nontraumatic intracerebral hemorrhage in hemisphere, subcortical
- I61.1 - ...cortical
- I61.2 - ...hemisphere unspecified
- I61.3 - ...brain stem
- I61.4 - ...cerebellum
- I61.5 - ...intraventricular
- I61.6 - ...multiple localized
- I61.8 - Other nontraumatic intracerebral hemorrhage
- I61.9 - Nontraumatic intracerebral hemorrhage, unspecified

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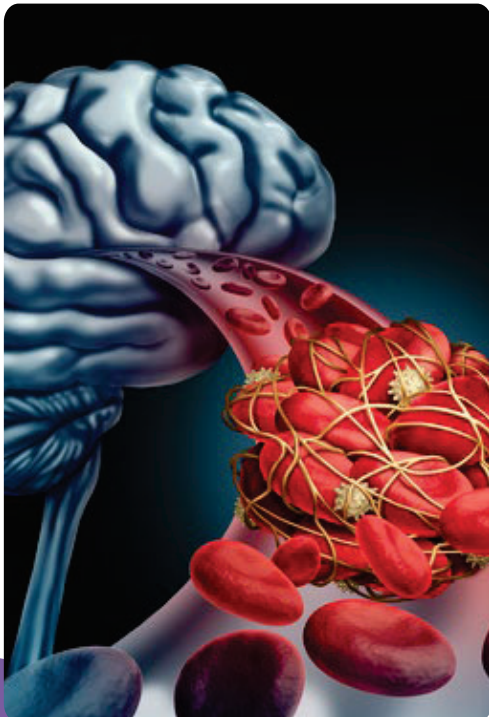
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Other and Unspecified Nontraumatic Intracranial Hemorrhage

- I62.00 - Nontraumatic subdural hemorrhage, unspecified
 - I62.01 - ...acute
 - I62.02 - ...subacute
 - I62.03 - ...chronic
- I62.1 - Nontraumatic extradural hemorrhage
- I62.9 - Nontraumatic intracranial hemorrhage, unspecified

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Cerebral Infarction

- I63.0 - Cerebral infarction due to thrombosis of precerebral arteries
 - I63.00 - ...unspecified precerebral artery
 - I63.01 - ...vertebral artery
 - Additional 6th Digit Required to specify laterality (right, left, bilateral, unspecified)
 - I63.02 - ...basilar artery
 - I63.03 - ...carotid artery
 - Additional 6th Digit Required to specify laterality (right, left, bilateral, unspecified)
 - I63.09 - ...other precerebral artery
- I63.1 - ...due to embolism of precerebral arteries
 - Additional 5th Digit Required
- I63.2 - ...due to unspecified occlusion or stenosis of precerebral arteries

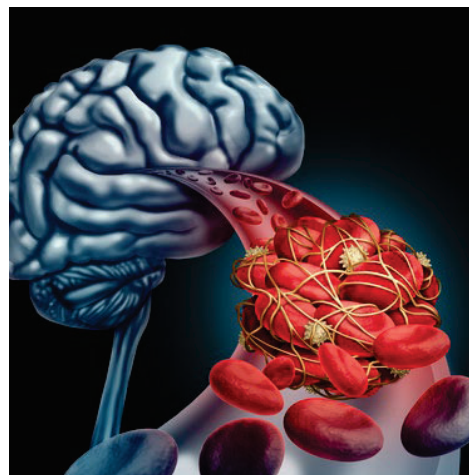
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Cerebral Infarction

- I63.3 – Cerebral infarction due to thrombosis of cerebral arteries
 - I63.30 - ...unspecified cerebral artery
 - *I63.31 - ...middle cerebral artery
 - *I63.32 - Anterior cerebral artery
 - *I63.33 - Posterior cerebral artery
 - *I63.34 - Cerebellar artery
- I63.4 - ...due to embolism of cerebral arteries
- I63.5 - ...due to unspecified occlusion or stenosis of cerebral arteries
- I63.6 - ...due to cerebral venous thrombosis, nonpyogenic
- I63.8 - Other cerebral infarction
- I63.9 - Cerebral infarction, unspecified

***Denotes Additional 6th Digit Required to specify laterality (right, left, bilateral, unspecified)**



NIHSS

- Tool used by healthcare providers to objectively quantify the impairment caused by a stroke
- Composed of 11 items, each of which scores a specific ability between a 0 and 4
- Score of 0 indicates normal function in that specific ability, while a higher score is indicative of some level of impairment

Score	Stroke Severity
0	No Stroke Symptoms
1-4	Minor Stroke
5-15	Moderate Stroke
16-20	Moderate to Severe Stroke
21-42	Severe Stroke



Occlusion and Stenosis of Precerebral Arteries, Not Resulting in Cerebral Infarction

- I65.01 - I65.09 - Occlusion and stenosis of vertebral artery (*laterality R/L/Bil/Unsp*)
- I65.1 - Occlusion and stenosis of basilar artery
- I65.21 - I65.29 - Occlusion and stenosis of carotid artery (*laterality R/L/Bil/Unsp*)
- I65.8 - Occlusion and stenosis of other precerebral arteries
- I65.9 - Occlusion and stenosis of unspecified precerebral artery NOS

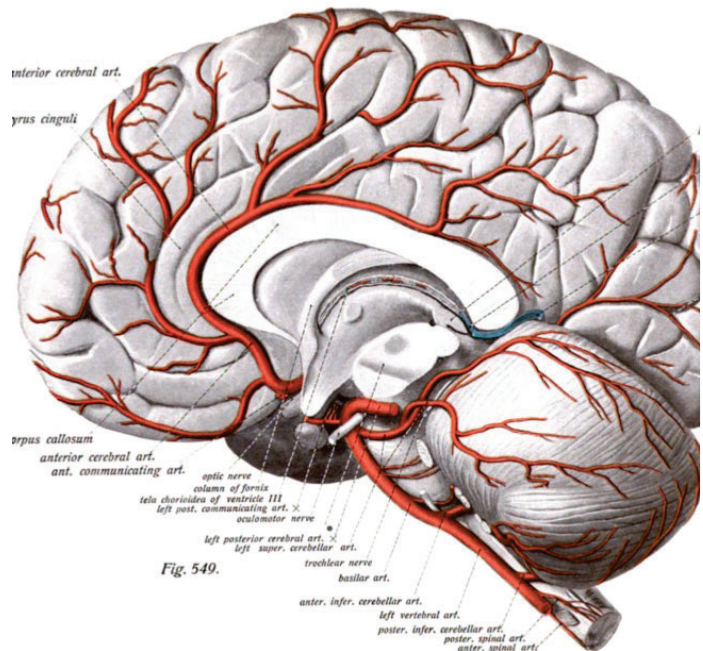
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Occlusion & Stenosis of Cerebral Arteries

- I66.01 – I66.09 - Middle cerebral artery (R/L/Bil/Unsp)
- I66.11 - I66.19 - Anterior cerebral artery (R/L/Bil/Unsp)
- I66.21 - I66.29 - Posterior cerebral artery (R/L/Bil/Unsp)
- I66.3 - Cerebellar arteries
- I66.8 - Other cerebral arteries
- I66.9 - Unspecified cerebral artery



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Other Cerebrovascular Diseases

- I67.0 - Dissection of cerebral arteries, nonruptured
- I67.1 - Cerebral aneurysm, nonruptured
- I67.2 - Cerebral atherosclerosis
- I67.3 - Progressive vascular leukoencephalopathy
- I67.4 - Hypertensive encephalopathy
- I67.5 - Moyamoya disease
- I67.6 - Nonpyogenic thrombosis of intracranial venous system
- I67.7 - Cerebral arteritis, not elsewhere classified
- I67.8 - Other specified cerebrovascular diseases (5th Digit Required)
- I67.9 - Cerebrovascular disease, unspecified

Other Cerebrovascular Diseases

• Non-Traumatic Hemorrhage

- Location
 - Subarachnoid (exact vessel - location)
 - Intracerebral (exact vessel - location)
 - Subdural (acute, subacute, chronic)
 - Extradural

• Cerebral Infarction

- Embolism
- Thrombosis
- Occlusion



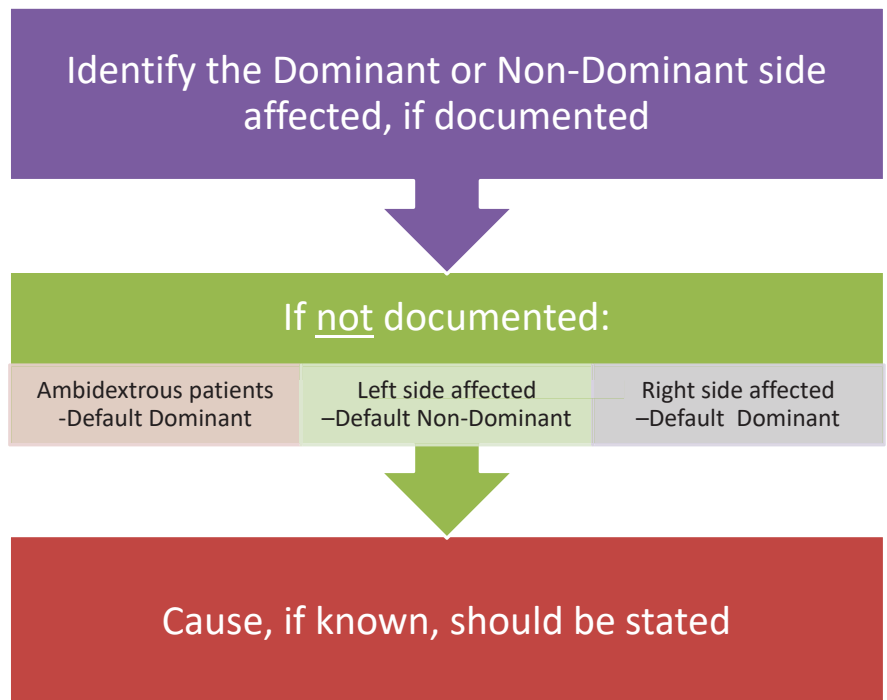
**Precerebral, Cerebral,
Venous
(specific artery)
(laterality, e.g., right/left)**

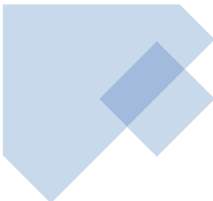
Sequelae of Stroke

- *169.0 – Sequelae of nontraumatic subarachnoid hemorrhage
- *169.1 - ...intracerebral hemorrhage
- *169.2 - ...other nontraumatic intracranial hemorrhage
- *169.3 - ...cerebral infarction
- *169.8 - ...other cerebrovascular diseases
- *169.9 - ...unspecified cerebrovascular diseases

***Denotes Additional 5th or 6th Digits Required**

Plegias Guidelines (Dominant & Non-Dominant)





Documenting Diplegia Hemiplegia Paraplegia Quadriplegia Monoplegia

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State Associations (Cause and Effects)

- Cause: e.g., Cerebral Palsy, Stroke, Other
- Effects: e.g., Cauda equina syndrome, myositis ossificans of right shoulder d/t paraplegia

Type


- Hemiplegia: Spastic, Flaccid
- Paraplegia: Complete, Incomplete
- Quadriplegia: Complete, Incomplete, Level (C4)

Affected Side

- Dominant v. non-dominant
- Specified Limb(s)

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CVA (Stroke) Residuals (Combo)

Whole story in 1 code:

- I69.110 - Attention and concentration deficit following nontraumatic intracerebral hemorrhage
- I69.220 - Aphasia following other nontraumatic intracranial hemorrhage

Additional codes required:

- I69.191 - Dysphagia following nontraumatic intracerebral hemorrhage needs an additional code from R13.1- to identify the type of dysphagia, if known

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Reporting Strokes on the IRF-PAI vs UB

- **Principal (Rehab) = Primary Stroke Residual precipitating need for rehab (e.g., hemiplegia)**
- **Comorbidities = Residuals using codes for stroke sequelae**
 - I69.991 - Dysphagia following unspecified cerebrovascular disease & type R13.11 Dysphagia, oral phase
 - I69.390 - Apraxia following cerebral infarction
 - I69.393 – Ataxia following cerebral infarction
 - I69.322- Dysarthria following cerebral infarction

- **Etiologic = Acute Stroke (when new stroke causes admission)**
- **Comorbidities = Residuals using “acute” codes**
 - R13.11 – Dysphagia, oral phase
 - R48.2 - Apraxia
 - R27.0 – Ataxia, unspecified
 - R47.1 - Dysarthria and anarthria
 - Hemiplegia (Included in IGC) for new strokes



IRF Considerations - Etiologic

Primarily Etiologic in

- Stroke
- Nontraumatic Brain (SDH)

IRF Considerations – 60%

- 1.1-1.4 compliant with no restrictions
- IGC 1.9 fails with some etiologic diagnosis
 - Monoplegia of upper limb
 - Monoplegia of lower limb, unspecified side
 - Hemiplegia, unspecified side
 - Other Paralytic Syndrome, unspecified side

IRF Considerations – 60%

- Specific NT Hemorrhage (NT subarachnoid hemorrhage right carotid siphon and bifurcation, NT intracerebral hemorrhage in hemisphere, subcortical)
- Specific Cerebral Infarction (Cerebral infarction due to unspecified occlusion or stenosis of right vertebral arteries, Cerebral infarction due to embolism of left MCA)
- Monoplegia of upper or lower limbs
- Hemiplegia
- Other Paralytic Syndrome
- Intraoperative and Postoperative strokes

IRF Considerations – Tiers

C Tier

- Dysphagia
 - RIC Exclusion: 01

D Tier

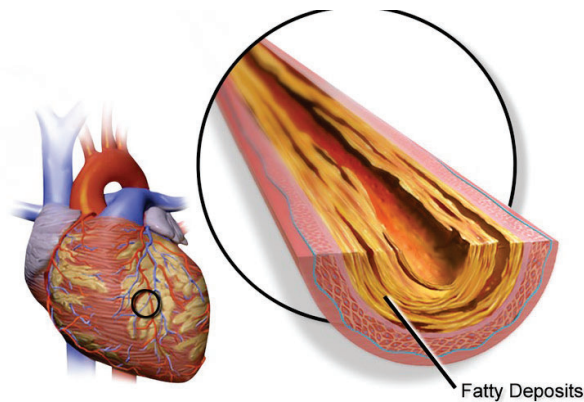
- NT Hemorrhage (Subarachnoid, intracerebral, Subdural)
 - RIC Exclusion: 01, 02, 03
- Cerebral Infarction
 - RIC Exclusion: 01
- **Note - Hemiplegia not associated to CVA and Flaccid are D tiers but not for stroke patients**

Activity

74-year-old right-handed male admitted to rehab status cerebral infarction due to thrombosis of left middle cerebral artery. The provider documents patient has right sided hemiplegia, oral dysphagia, aphasia, and right sided and facial droop.

- **Code Etiologic and Comorbid Conditions**
- **Are there tiered comorbidities**
- **UB-04 codes/PDx and comorbidities**

Atherosclerotic/Arteriosclerotic Disease



Partially Blocked Coronary Artery

- Extremities (I70)
- Brain (I67)
- Heart (I25)

Peripheral Artery Disease

I70.0 - Aorta

I70.1 - Renal artery

(I70.2-) - Native arteries

- I70.201 - ...right Leg
- I70.211 - ...w/intermittent claudication
- I70.221 - ...w/rest pain
- I70.231 - ...w/ulceration, thigh
- I70.261 - ...w/gangrene

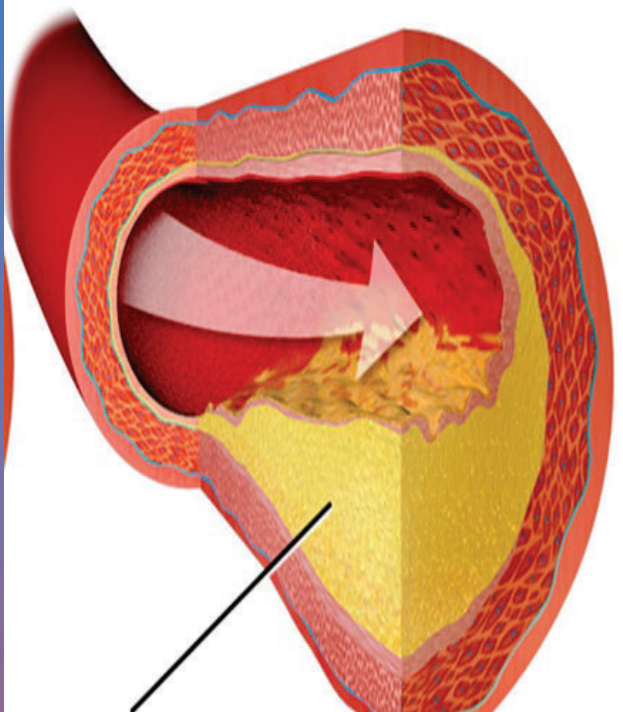
- (I70.3-) - Unspecified type of Graft
- (I70.4-) - Autologous vein graft
- (I70.5-) - Nonautologous biological bypass graft
- (I70.6-) - Nonbiological bypass graft
- (I70.7-) - Other type of bypass graft
- (I70.8) - Atherosclerosis of other arteries
- (I70.9-) - Other and unspecified atherosclerosis
 - Generalized/unspecified

PAD Associated Conditions

- Intermittent Claudication
 - Intermittent Pain in extremities
- Rest Pain
 - Pain lasting longer no relief from medications or constant
- Ulceration(s)/Gangrene
 - Self explanatory
 - Report also ulcer severity L97.- or L98.-

Atherosclerotic Heart Disease

- (I25.1-) - ...native coronary artery
 - (I25.75-) - ...transplanted heart
 - W or w/o unstable angina and severity of angina (unstable (0), with spasm (1), other (8) and unspecified(9))
- (I25.70-) - ...unspecified bypass graft(s)
 - (I25.76-) - ...transplanted Heart
 - W or w/o unstable angina and severity of angina (unstable (0), with spasm (1), other (8) and unspecified(9))
- (I25.81-) - ...other coronary vessels w/o angina
- I25.82 - Chronic total occlusion (CTO)
- I25.83 - CAD d/t lipid rich plaque
- I25.84 - CAD d/t calcified coronary lesion
- I25.89 - Other chronic ischemic heart disease
- I25.9 - Chronic ischemic heart disease, unspecified



Reporting Angina Alone (I20.-)

- (0) - Unstable Angina
- (1) - ...without documented spasm
- (2) - refractory
- (8) - ...other (use addition codes for symptoms)
- (9) - unspecified



IRF Considerations - Etiologic

Primarily Etiologic in

- Cardiac
- Amputation



IRF Considerations – 60%

- No Diagnoses that cause 60%
- None cause to FAIL



IRF Considerations – Tiers

D Tier

- Atherosclerosis of native arteries of lower extremities with ulceration (RIC Exclusion: 10, 11)
- Atherosclerosis of native arteries of native arteries of lower extremities with gangrene (RIC Exclusion: 10, 11)
- Chronic Total Occlusion of extremities
- Dissection of Aorta
- Aortic Aneurysm
- Septic Arterial Embolism
- Gangrene, NOS

Acute MIs

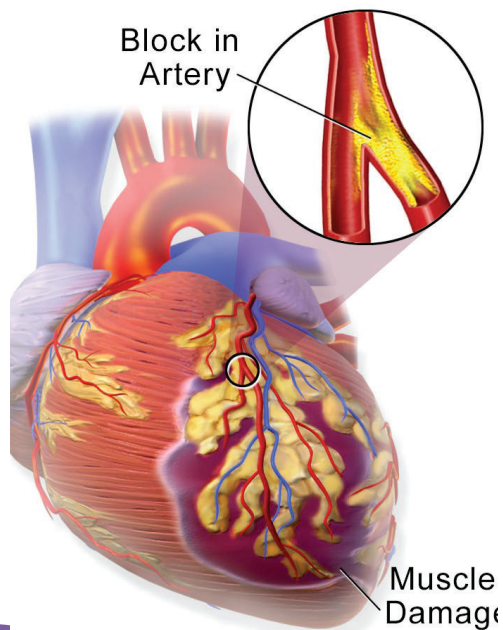
- **Two types**
 - STEMI (ST-segment Elevation Myocardial Infarction)
 - NSTEMI (Non-ST segment Elevation Myocardial Infarction)



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Heart Attack

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Acute MIs

- Code Range - I21.01-I22.9
- Time frame for healed/old MI is 4 weeks
- Site and type of Infarction should be documented
- New AMI w/in 4 weeks of a previous AMI reported with:
 - I22.- & I21.-

STEMI vs NSTEMI Coding

I21.01 - STEMI left main coronary artery

I21.02 - ...left anterior descending coronary artery

I21.09 - ...other coronary artery of anterior wall

I21.11 - ...right coronary artery

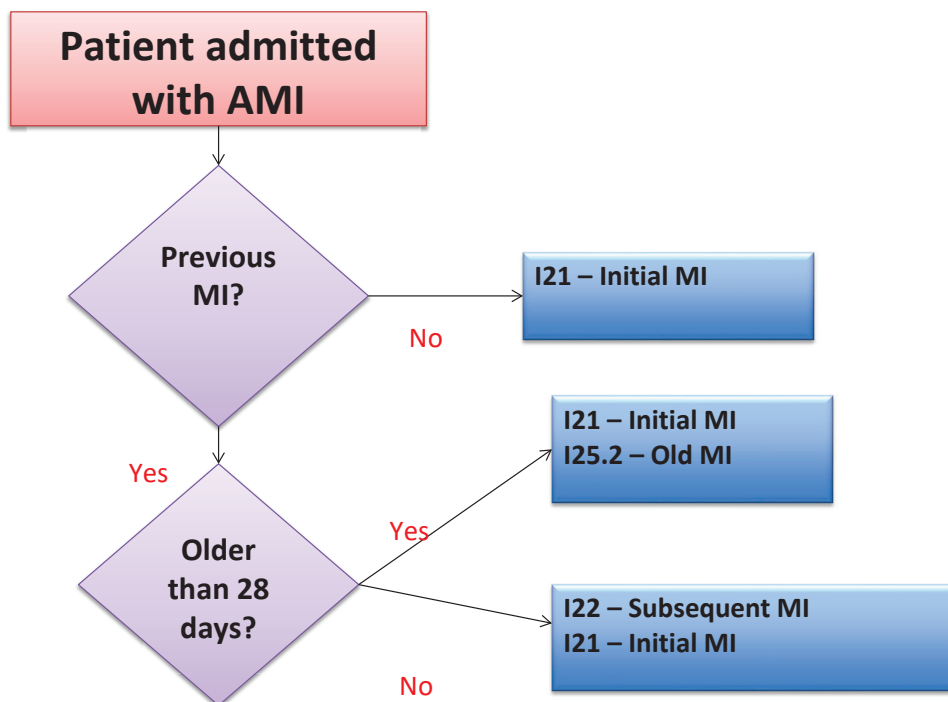
I21.19 - ...other coronary artery of inferior wall

I21.21 - ...left circumflex coronary artery

I21.29 - ...other sites

I21.3 - ...unspecified site

- Reported with code I21.4
 - Acute subendocardial myocardial infarction
 - Non-Q wave myocardial infarction NOS
 - Nontransmural myocardial infarction NOS
 - Type 1 non-ST elevation myocardial infarction



Other Types of Myocardial Infarction

- I21.A1 – Myocardial infarction type 2
- I21.A9 - Other myocardial infarction type
 - AMI Associated With Revascularization Procedure
 - Type 3
 - Type 4a
 - Type 4b
 - Type 4c
 - Type 5
- I21.B - MI with coronary microvascular dysfunction
- Pay attention: “code also” and “code first”

Subsequent MIs (I22.-)

- **Subsequent STEMI**
 - Specified As:
 - Anterior/Interior Wall
 - Other
 - Unspecified
- **Subsequent NSTEMI**



Complications of MIs



Complications of MIs reported with code I23.0-I23.8

- Used for complications within the first 28 days
- Specify type of complication



Other AMI Options

- I25.2 - Healed/Old/Past
 - Diagnosed on EKG but without symptoms
- Intraoperative
 - I97.790 - Other intraoperative cardiac functional disturbances during cardiac surgery
 - I97.791 - Other intraoperative cardiac functional disturbances during other surgery
 - Use additional code, if applicable, to further specify disorder
- I24.1 - Post myocardial infarction syndrome

Activity

A patient is seen for an acute subendocardial myocardial infarction

Activity

A patient underwent a percutaneous coronary intervention and during the procedure the patient has a type 4A Myocardial Infarction

Activity

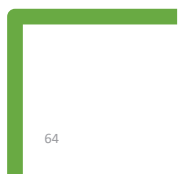
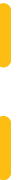
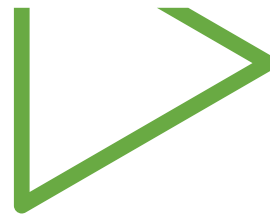
A patient is seen diagnosed with a STEMI of the inferior wall. This STEMI is subsequent to a previous STEMI suffered 15 days prior

Coding vs. Documentation

Things to know/look for in Documentation

- Type (includes any cause)
 - STEMI (I21.x)
 - NSTEMI (I21.4)
 - Unspecified (I21.9)
 - Other (I21.A)
- Occurrence
 - Acute (28 days or less)
 - Subsequent Attack (I22.x) - not subsequent visit!
- Site/Location: e.g., anterolateral, posterior wall

Episode of Care – Not a factor!





IRF Considerations - Etiologic

Primarily Etiologic in

- Cardiac

IRF Considerations – 60%

- No Diagnoses that cause 60%
- None cause to FAIL

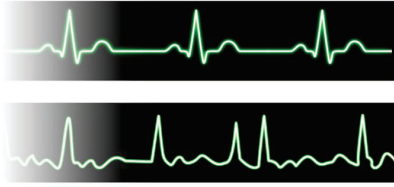
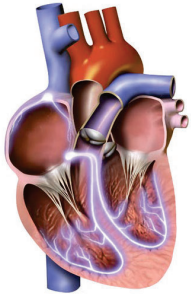
IRF Considerations – Tiers

- AMI codes are A tiers (Not on Tiered Comorbidity List)

Congestive Heart Failure

ICD-10	Description
I50.1	Left ventricular failure, unspecified
I50.20-I50.23	Systolic (congestive) heart failure
I50.30-I50.33	Diastolic (congestive) heart failure
I50.41-I50.43	Combined systolic (congestive) and diastolic (congestive) heart failure
I50.810-I50.84	Other specified types of heart failure
I50.89	Other heart failure
I50.9	Heart failure, unspecified

AFIB and Flutter



Atrial Fibrillation

- I48.0 - Paroxysmal atrial fibrillation
- (I48.1-) - Persistent atrial fibrillation
 - *Specify as Longstanding vs Other*
- (I48.2-) - Chronic atrial fibrillation
 - *Specify Permanent vs Other Chronic*
- I48.3 - Typical atrial flutter
- I48.4 - Atypical atrial flutter
- I48.91 - Unspecified atrial fibrillation
- I48.92 - Unspecified atrial flutter

IRF Considerations - Etiologic

Primarily Etiologic in

- Cardiac
- Debility



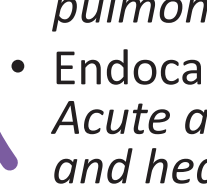
IRF Considerations – 60%

- No Diagnoses that cause 60%
- None cause to FAIL



IRF Considerations – Tiers

D Tier

- 
- Myocarditis (*Rheumatic, Infective, Isolated, Acute, Other, etc.*)
 - Pulmonary Embolism (*Septic pulmonary embolism, Saddle embolus of pulmonary artery, Multiple subsegmental pulmonary emboli, etc.*)
 - Endocarditis (*Acute and subacute infective endocarditis, Acute and subacute endocarditis, unspecified; Endocarditis and heart valve disorders in diseases classified elsewhere*)

IRF Considerations – Tiers

D Tier

- Cardiac Arrest
- Ventricular fibrillation
- Left ventricular failure, unspecified
- Specified CHF (*Acute systolic, Chronic Diastolic, etc.*)

- Quiz
- Activities
- Revisit Recordings
- Community Check-In

*What has been the **most valuable thing** you've learned so far?*

