

Scenario #3**99202 (1995-1997 Guidelines)****99203 (2021 Guidelines)****Provider Documentation****Visit type**

New patient

Chief complaint

Vaginal discharge, vulvar itching, vaginal odor

History of Present Illness

This is a 39-year-old female seen today for evaluation of vaginal discharge, vulvar itching, vaginal odor. The symptoms started approximately two weeks ago but have been on and off for a month. This is an acute problem for this new patient.

Social History

She is sexually active with a single partner. She reports she has not been exposed to new soaps or hygienic products, no aggravating factors such as swimsuit wear or recent antibiotics. She has had a previous treatment for this condition, which included OTC antifungal treatment. She states this therapy has resulted in no relief of symptoms.

Review of Systems:

- Constitutional: Denies body aches, night sweats
- Genitourinary: Admits vaginal discharge. Denies urgency, frequency, incontinence, dyspareunia, post-coital bleeding.
- Endocrine: Denies polyuria, cold or heat intolerance

Vitals

- BP: 112/74
- HR: 78
- Weight: 150
- Height: 5'6"

Exam

- Constitutional: well-nourished, well-developed female in no acute distress.
- Genitourinary: External genitalia: normal appearance, no discharge present, no inflammatory lesions present, no tenderness.
- Vagina: Normal vaginal vault without central or paravaginal defects. White colored discharge present, no lesions noted.

Assessment:

Candidiasis vulvovaginitis, B37.3

Orders:

Lab: Acute vaginitis by DNA probe (87480), B37.3

Medications: Diflucan 50 mg. oral tablet, take one tablet by oral route for one day
Return to clinic as needed. Avoid tight fitting clothing such as leggings or swimsuits. Use mild soap.

Coding

Number and complexity of Problems addressed:

1 acute, uncomplicated illness (low)

Amount and/or complexity of data to be reviewed and analyzed:

1 lab panel

Risk of complications and/or morbidity or mortality of patient management:

Moderate (prescription management)

Level of MDM based on 2 out of 3 Elements of MDM:

Low

Code:

99203

Rationale

The note has an expanded problem focused history, and focused exam. The approved revisions to 99202-99215 require that a medically appropriate history and examination be performed. Beyond this requirement, the history and exam do not affect coding. The complexity of MDM is based on 2 out of 3 elements. The low complexity of the problem, 1 data point and prescription drug management support low complexity for 99203. Under the 1995 and 1997 guidelines, this would be 99202 (exam). Under the 2021 guidelines, the complexity of MDM increases the code to 99203.