Validity of Using ICD-9 Codes for Identifying Venous Thromboembolism Following Below Knee Surgery

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NO CONFLICT TO DISCLOSE

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We have no potential conflicts with this presentation
Within the below knee surgical population, wide variation in the use of VTE chemoprophylaxis remains.

Understanding of incidence of VTE following below knee surgery would enable surgeons to select anticoagulant treatment strategies.

The common method utilized in previous studies to identify a VTE event is through ICD-9-CM procedure codes \(^1\text{-}^4\).
Study Objectives

• To determine the incidence of VTE in a large cohort of patients having undergone below knee surgery

• To assess the validity of using ICD-9-CM codes to identify a VTE event in this population
• 21,904 below knee surgical patients were evaluated to assess the validity of the VTE ICD-9-CM code against the documentation of DVT or PE in radiology reports

• Positive predictive value and sensitivity of ICD-9-CM codes were calculated
The overall rate of VTE after below knee surgery was 2.5%
Conclusion

• We illustrated a potential source of inaccuracy in the use of retrospective ICD-9 based data capture methodologies

• Since the current method used for flagging VTE remains unchanged, our findings are relevant for both ICD-9-CM and ICD-10-CM codes

