oscar

CLINICAL DOCUMENTATION

# **Bipolar** Disorder

Bipolar disorder (formerly called manic-depressive illness or manic depression) is a mental illness that causes unusual shifts in a person's mood, energy, activity levels, and concentration.

# ICD-10 CODES

- F31.0 Bipolar Disorder, current episode hypomanic
- **F31.1-** Bipolar Disorder, current episode manic without psychotic features
- **F31.2** Bipolar Disorder, current episode manic severe with psychotic features
- **F31.3-** Bipolar Disorder, current episode depressed, mild or moderate severity
- **F31.4** Bipolar Disorder, current episode depressed, severe, without psychotic features

# **F31.5** Bipolar Disorder, current episode depressed, severe, with psychotic features

- F31.6- Bipolar Disorder, current episode mixed
- F31.7- Bipolar Disorder, currently in remission
- F31.8- Other bipolar disorders
- F31.9 Bipolar disorder, unspecified

# DOCUMENTATION ACRONYMS

# **DEEP Diagnosis Elements**

Include elements of DEEP in documentation to clinically support bipolar disorder.

Diagnosis: Bipolar Disorder

**Evidence:** DSM-5 shows moderate depression

<u>Evaluation</u>: Moderate bipolar disorder, currently depressed

**Plan:** Continue Depakote, start fluoxetine, rtc 1 month or call if symptoms worsen

# **Final Assessment Details**

Include DSP for each addressed condition impacting treatment and patient care.

### Diagnosis:

## <u>Type of episode</u>

- Manic
- DepressedMixed
- 1011XEC

# <u>Severity</u>

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- Mild
- Moderate
- Severe
  - With psychotic features
    Without psychotic features

### Status:

#### <u>Control status</u>

- Currently active
- Currentlý in remission
  Partial remission
  - Partial remissi
    Full remission

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# <u>P</u>lan:

- Mental Health interventions
  - Medical management
  - Therapies
    Referrals
  - Control of secondary conditions



# CLINICAL DOCUMENTATION

# **BEST PRACTICES & TIPS**

- Avoid using terms such as "probable", "suspected", "likely", "questionable", "possible" with a confirmed diagnosis of bipolar disorder.
- Documentation should **be consistent** and avoid synchronously documenting multiple types or statuses of bipolar disorder.
- Always indicate the **episode**, (manic, depressed or mixed) **severity** (mild, moderate or severe) **specificit**y with associated complications (with or without psychotic features) and **status** (active, in partial remission or in full remission.)
- Documentation should **always include DEEP elements** to show clinical evidence of bipolar disorder by documenting any signs and the severity of symptoms. The present status of the final bipolar diagnosis should be supported by the documentation.
- **Clearly document** any treatment or therapy for the bipolar disorder along with the final clinical diagnoses of the disease.



For more resources go to: HIOSCAR.COM/PROVIDERS/RESOURCES

