

Track Changes
from Chapter 3 Section I V1.07
to Chapter 3 Section I V1.08

Chapter	Section	Page	Change
3	I	I-1	Intent: The items in this section are intended to code diseases that have a direct relationship to the resident's current functional status, cognitive status, mood or behavior status, medical treatments, nursing monitoring, or risk of death. One of the important functions of the MDS assessment is to generate an updated, accurate picture of the resident's current health status.
3	I	I-1	Replaced screen shot.

OLD

Active Diagnoses in the last 7 days - Check all that apply	
Diagnoses listed in parentheses are provided as examples and should not be considered as all-inclusive lists	
<input type="checkbox"/>	Cancer
<input type="checkbox"/>	I0100. Cancer (with or without metastasis)
<input type="checkbox"/>	Heart/Circulation
<input type="checkbox"/>	I0200. Anemia (e.g., aplastic, iron deficiency, pernicious, and sickle cell)
<input type="checkbox"/>	I0300. Atrial Fibrillation or Other Dysrhythmias (e.g., bradycardias and tachycardias)
<input type="checkbox"/>	I0400. Coronary Artery Disease (CAD) (e.g., angina, myocardial infarction, and atherosclerotic heart disease (ASHD))
<input type="checkbox"/>	I0500. Deep Venous Thrombosis (DVT), Pulmonary Embolus (PE), or Pulmonary Thrombo-Embolism (PTE)
<input type="checkbox"/>	I0600. Heart Failure (e.g., congestive heart failure (CHF) and pulmonary edema)
<input type="checkbox"/>	I0700. Hypertension
<input type="checkbox"/>	I0800. Orthostatic Hypotension
<input type="checkbox"/>	I0900. Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD)
<input type="checkbox"/>	Gastrointestinal
<input type="checkbox"/>	I1100. Cirrhosis
<input type="checkbox"/>	I1200. Gastroesophageal Reflux Disease (GERD) or Ulcer (e.g., esophageal, gastric, and peptic ulcers)
<input type="checkbox"/>	I1300. Ulcerative Colitis, Crohn's Disease, or Inflammatory Bowel Disease
<input type="checkbox"/>	Genitourinary
<input type="checkbox"/>	I1400. Benign Prostatic Hyperplasia (BPH)
<input type="checkbox"/>	I1500. Renal Insufficiency, Renal Failure, or End-Stage Renal Disease (ESRD)
<input type="checkbox"/>	I1550. Neurogenic Bladder
<input type="checkbox"/>	I1650. Obstructive Uropathy
<input type="checkbox"/>	Infections
<input type="checkbox"/>	I1700. Multidrug-Resistant Organism (MDRO)
<input type="checkbox"/>	I2000. Pneumonia
<input type="checkbox"/>	I2100. Septicemia
<input type="checkbox"/>	I2200. Tuberculosis
<input type="checkbox"/>	I2300. Urinary Tract Infection (UTI) (LAST 30 DAYS)
<input type="checkbox"/>	I2400. Viral Hepatitis (e.g., Hepatitis A, B, C, D, and E)
<input type="checkbox"/>	I2500. Wound Infection (other than foot)
<input type="checkbox"/>	Metabolic
<input type="checkbox"/>	I2900. Diabetes Mellitus (DM) (e.g., diabetic retinopathy, nephropathy, and neuropathy)
<input type="checkbox"/>	I3100. Hyponatremia
<input type="checkbox"/>	I3200. Hyperkalemia
<input type="checkbox"/>	I3300. Hyperlipidemia (e.g., hypercholesterolemia)
<input type="checkbox"/>	I3400. Thyroid Disorder (e.g., hypothyroidism, hyperthyroidism, and Hashimoto's thyroiditis)
<input type="checkbox"/>	Musculoskeletal
<input type="checkbox"/>	I3700. Arthritis (e.g., degenerative joint disease (DJD), osteoarthritis, and rheumatoid arthritis (RA))
<input type="checkbox"/>	I3800. Osteoporosis
<input type="checkbox"/>	I3900. Hip Fracture - any hip fracture that has a relationship to current status, treatments, monitoring (e.g., sub-capital fractures, and fractures of the trochanter and femoral neck)
<input type="checkbox"/>	I4000. Other Fracture
<input type="checkbox"/>	Neurological
<input type="checkbox"/>	I4200. Alzheimer's Disease
<input type="checkbox"/>	I4300. Aphasia
<input type="checkbox"/>	I4400. Cerebral Palsy
<input type="checkbox"/>	I4500. Cerebrovascular Accident (CVA), Transient Ischemic Attack (TIA), or Stroke
<input type="checkbox"/>	I4800. Dementia (e.g. Non-Alzheimer's dementia such as vascular or multi-infarct dementia; mixed dementia; frontotemporal dementia such as Pick's disease; and dementia related to stroke, Parkinson's or Creutzfeldt-Jakob diseases)

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<input type="checkbox"/>	I4500. Cerebrovascular Accident (CVA), Transient Ischemic Attack (TIA), or Stroke
<input type="checkbox"/>	I4800. Non-Alzheimer's Dementia (e.g. Lewybody dementia, vascular or multi-infarct dementia; mixed dementia; frontotemporal dementia such as Pick's disease; and dementia related to stroke, Parkinson's or Creutzfeldt-Jakob diseases)
Neurological Diagnoses continued on next page	

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3	I	I-2	Replaced screen shot.
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OLD

Active Diagnoses in the last 7 days - Check all that apply	
Diagnoses listed in parentheses are provided as examples and should not be considered as all-inclusive lists	
Neurological - Continued	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	I4900. Hemiplegia or Hemiparesis I5000. Paraplegia I5100. Quadriplegia I5200. Multiple Sclerosis (MS) I5250. Huntington's Disease I5300. Parkinson's Disease I5350. Tourette's Syndrome I5400. Seizure Disorder or Epilepsy I5500. Traumatic Brain Injury (TBI)
Nutritional	
<input type="checkbox"/>	I5600. Malnutrition (protein or calorie) or at risk for malnutrition
Psychiatric/Mood Disorder	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	I5700. Anxiety Disorder I5800. Depression (other than bipolar) I5900. Manic Depression (bipolar disease) I5950. Psychotic Disorder (other than schizophrenia) I6000. Schizophrenia (e.g., schizoaffective and schizophreniform disorders) I6100. Post Traumatic Stress Disorder (PTSD)
Pulmonary	
<input type="checkbox"/> <input type="checkbox"/>	I6200. Asthma, Chronic Obstructive Pulmonary Disease (COPD), or Chronic Lung Disease (e.g., chronic bronchitis and restrictive lung diseases such as asbestosis) I6300. Respiratory Failure
Vision	
<input type="checkbox"/>	I6500. Cataracts, Glaucoma, or Macular Degeneration
None of Above	
<input type="checkbox"/>	I7900. None of the above active diagnoses within the last 7 days
Other	
<input type="checkbox"/>	I8000. Additional active diagnoses Enter diagnosis on line and ICD code in boxes. Include the decimal for the code in the appropriate box.
A. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
B. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
C. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
D. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
E. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
F. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
G. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
H. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
I. _____	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; flex-wrap: wrap;"> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> <div style="width: 25px; height: 15px; border: 1px solid black;"></div> </div>
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Diagnoses listed in parentheses are provided as examples and should not be considered as all-inclusive lists

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A. _____	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
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F. _____	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
G. _____	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
H. _____	<table border="1" style="display: inline-table; width: 150px; height: 20px;"></table>
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**Track Changes
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to Chapter 3 Section I V1.08**

3	I	I-3	<p>Replaced definition box.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>OLD</p> <div style="border: 1px solid black; padding: 5px;"> <p>DEFINITIONS</p> <p>ACTIVE DIAGNOSES Physician-documented diagnoses in the last 60 days that have a direct relationship to the resident's functional status, cognitive status, mood or behavior, medical treatments, nursing monitoring, or risk of death during the 7-day look-back period.</p> <p>FUNCTIONAL LIMITATIONS Loss of range of motion, contractures, muscle weakness, fatigue, decreased ability to perform ADLs, paresis, or paralysis.</p> </div> </div> <div style="width: 48%;"> <p>NEW</p> <div style="border: 1px solid black; padding: 5px;"> <p>DEFINITIONS</p> <p>ACTIVE DIAGNOSES Physician-documented diagnoses in the last 60 days that have a direct relationship to the resident's current functional status, cognitive status, mood or behavior, medical treatments, nursing monitoring, or risk of death during the 7-day look-back period..</p> <p>FUNCTIONAL LIMITATIONS Loss of range of motion, contractures, muscle weakness, fatigue, decreased ability to perform, ADLs, paresis, or paralysis.</p> <p>NURSING MONITORING Nursing Monitoring includes clinical monitoring by a licensed nurse (e.g. serial blood pressure evaluations, medication management, etc.).</p> </div> </div> </div>
3	I	I-3	<p>2. Determine whether diagnoses are active: Once a diagnosis is identified, it must be determined if the diagnosis is active it must be determined if the diagnosis is active. Do not include conditions that have been resolved or have no longer affected the resident's current functioning or plan of care, or that the resident has adjusted to as their "new normal," during the last 7 days. Item I2300 UTI, has specific coding criteria and does not use the active 7-day look-back. Please refer to Page I-8 for specific coding instructions for Item I2300 UTI.</p>
3	I	I-4	<ul style="list-style-type: none"> • Active diagnoses have a directdirect relationship to the resident's functional status, cognitive status, mood or behavior, medical treatments, nursing monitoring, or risk of death during the look-back period. • Check the following information sources in the medical record for the last 7 days to identify "active" diagnoses: transfer documents, physician progress notes, recent history and physical, recent discharge summaries, nursing assessments, nursing care plans, medication sheets, doctor's orders, consults and official diagnostic reports, and other sources as available.

**Track Changes
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			<p>Coding Instructions</p> <p><i>Code diseases that have a documented diagnosis in the last 60 days and have a direct relationship to the resident's current functional status, cognitive status, mood or behavior status, medical treatments, nursing monitoring, or risk of death during the 7-day look-back period (except Item I2300 UTI, which does not use the active diagnosis 7-day look-back. Please refer to Item I2300 UTI, Page I-8 for specific coding instructions).</i></p>
3	I	I-6	<ul style="list-style-type: none"> 14800, dementia (e.g., non-Alzheimer's dementia, including Lewy-Body dementia; vascular or multi-infarct dementia; mixed dementia; frontotemporal dementia, such as Pick's disease; and dementia related to stroke, Parkinson's disease or Creutzfeldt-Jakob diseases)