ICD-10-Thai Modification
Development in Thailand

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Background ICD-10 in Thailand

- 1994 Start ICD-10 in Morbidity and Mortality coding
- Distributed coding by coders in hospitals
- 1997 “New” codes appeared in data
- Hospital created their own code for some diseases ie. Necrotizing fasciitis, Dengue shock syndrome, Cobra and green pit viper bite etc.
ICD-10-TM Development process

- 2000 ICD-10-TM research project team
- Central ICD coders, ICD trainers, Medical Specialists, Dentists

Development process

1. Collect diseases reported as “no appropriate ICD codes”
2. Comprehensive review collected data and ICD codes available
3. Some diseases could be assigned to pre-existing ICD codes -> 386 diagnostic terms added into index, tabular list
Development process

4. 1072 new codes add to existing chapter and old structure of ICD-10 for specific diseases without specific codes
5. Procedural coding systems created to be use in doctor-fee scheme
6. New coding system was named as ICD-10-TM (Thai Modification)

Development process

7. Public hearing process
8. 2003 First set of ICD-10-TM books
   1. Tabular lists of diseases
   2. Alphabetical indexes
   3. Procedural coding system
   4. Index to procedures
   5. Standard coding guidelines
Example of ICD-10-TM codes

- A91.1  Dengue shock syndrome
- O49    Preterm labour
- J44.2  Wheezing associated respiratory illness (WARI)
- T63.00 Hematotoxin snake poison
- T63.01 Neurotoxin snake poison

Pilot study

- 15 hospital all around the country
- 3 University hospitals
- 2 Tertiary hospital
- 8 General hospital
- 2 Private hospital
Preliminary result

- 5-10% of ICD codes in morbidity data are ICD-10-TM codes
- Some of new codes can be used to discriminated high cost diseases ie. Necrotizing fasciitis, Dengue shock syndrome, Premature contraction of uterus without labour
- New codes add in 2006, ICD-10-TM 2\textsuperscript{nd} edition

Discussion

- Major driven factor for modifying ICD-10 was unavailability of original ICD codes for specific diseases commonly found in Thailand
- Modification mechanism is essential to supply new codes to be use in health data
- Any modified code or modifying process should not deviated from original ICD