

Acog Documentation Guidelines For Antepartum Care

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The American College of Obstetricians and Gynecologists (ACOG) has developed guidelines on antepartum fetal surveillance. The goal of antepartum fetal surveillance is to prevent fetal death.

ACOG Guidelines on Antepartum Fetal Surveillance ...

The purpose of this document is to provide a review of the current indications for and techniques of antepartum fetal surveillance and outline management guidelines for antepartum fetal surveillance that are consistent with the best scientific evidence. Used with permission. Copyright the American College of Obstetricians and Gynecologists.

ACOG Guidelines at a Glance: Antepartum fetal surveillance ...

Acog Documentation Guidelines For Antepartum The following ACOG recommendations are based on limited or inconsistent scientific evidence (Level B): Women at high risk for stillbirth should undergo antepartum fetal surveillance using the nonstress test, contraction... Initiation of testing at 32 to 34 weeks of gestation is appropriate for most ...

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Guidelines for Perinatal Care was developed through the cooperative efforts of the American Academy of Pediatrics (AAP) Committee on Fetus and Newborn and the American College of Obstetricians and Gynecologists (ACOG) Committee on Obstetric Practice. This information is designed as an educational resource to aid clinicians in

Guidelines for PERINATAL CARE - ACOG

Physicians must follow facility documentation guidelines, if any, when documenting delivery notes for vaginal deliveries. Physicians must also ensure that CPT code description elements for the code(s) reported are documented as applicable. CPT codes for vaginal delivery are as follows: Before ...

Documentation Requirements for Vaginal Deliveries | ACOG

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Obstetrics Coding and Documentation Reference Guide CPT Coding CPT defines maternity-related services as: 59400 Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care 59409 Vaginal delivery only (with or without episiotomy and/or forceps); 59410 Vaginal delivery only (with or without episiotomy and/or forceps) ...

Obstetrics Coding and Documentation This Quick Reference ...

Back to guidelines homepage. Antepartum Haemorrhage (Green-top Guideline No. 63) Published: 05/12/2011 Antepartum Haemorrhage (Green-top Guideline No. 63) This guideline provides advice for clinicians working in obstetric units on how to deal with antepartum haemorrhage.

Antepartum Haemorrhage (Green-top Guideline No. 63)

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Centers for Medicare and Medicaid Services (CMS) in the 1997 Documentation Guidelines. Such documentation should be maintained and available upon request. ... Antepartum care only: CPT® codes 59425 (4-6 visits) and 59426 ... (ACOG) coding guidelines

Global Maternity/Obstetric Package

If the patient is treated for antepartum services only, the physician should use CPT code 59426 if 7 or more visits are provided, CPT code 59427 if 4-6 visits are provided, or each E/M visit if only providing 1-3 visits. As per ACOG and AMA guidelines, the antepartum care only codes 59425 or 59426 should be reported as described below,

OB & GYN - Coding Guidelines - Coding Info

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CLINICAL MANAGEMENT GUIDELINES FOR OBSTETRICIAN-GYNECOLOGISTS NUMBER 106, JULY 2009 Replaces Practice Bulletin Number 70, December 2005 This Practice Bulletin was developed by the ACOG Committee on Practice Bulletins with the assistance of George A. Macones, MD. The information is designed to aid practitioners in making decisions

ACOG PRACTICE BULLETIN

For HCPCS code Z1034 (antepartum office visit): • Documentation for primary obstetrical providers must conform to current standards equivalent to those defined by the American Congress of Obstetricians and Gynecologists (ACOG) for antepartum visits. • Documentation by consultants, including those who co-manage a pregnancy, should

Workbook Obstetrics (ob hap) - Medi-Cal

Antepartum Haemorrhage Page 2 of 17 Obstetrics & Gynaecology Initial management: MFAU antepartum haemorrhage (APH) QRG This Quick Reference Guide must be used in conjunction with the full guideline. Medical and midwifery staff should be familiar with the contents of the full guideline.

CLINICAL PRACTICE GUIDELINE Antepartum Haemorrhage

Screening, treatment and documentation requirements per trimester are listed below. (AAP/ACOG, 2012; Platt, 2010) Initial visit . The initial visit optimally should occur in the first trimester. The following screening should be performed regardless of the gestational age at the initial visit: 1.

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