

OASIS ITEM:	
(M0210) List the patient's Medical Diagnoses and ICD-9-CM code categories (three digits required; five digits optional) for those conditions requiring <u>changed medical or treatment regimen</u> (no surgical or V-codes):	
<u>Changed Medical Regimen Diagnosis</u>	<u>ICD-9-CM</u>
a. _____	(_____.____)
b. _____	(_____.____)
c. _____	(_____.____)
d. _____	(_____.____)
DEFINITION:	
Identifies the diagnosis(es) that have caused an addition or change to the patient's treatment, regimen, health care services received, or medication within the past 14 days. (Past 14 days encompasses the two-week period immediately preceding the start/resumption of care [or the date of the discharge visit].)	
TIME POINTS ITEM(S) COMPLETED:	
Start of care Resumption of care Discharge from agency – not to an inpatient facility	
RESPONSE—SPECIFIC INSTRUCTIONS:	
<ul style="list-style-type: none"> • Can be a new diagnosis or an exacerbation to an existing condition. • No surgical codes - list the underlying diagnosis. • No V-codes or E-codes - list the appropriate diagnosis. • Three-digit code required; digits to the right of the decimal are optional. • Response to this item may include the same diagnoses as M0190 if the condition was treated during an inpatient stay AND caused changes in the treatment regimen. 	
ASSESSMENT STRATEGIES:	
Obtain diagnosis from patient, caregiver, or referring physician. The current ICD-9-CM code book should be the source for coding.	