

CHARTING SUBSTANCE USE AND SUBSTANCE USE DISORDERS IN EPIC:

Recommendations for charting clinically meaningful and non-judgmental diagnoses

Below are suggestions for appropriate and non-stigmatizing documentation of substance use and substance use disorder. *This document is not intended to replace professional or clinical judgement. See FAQ section below for diagnosing: mild, moderate, or severe use disorder*

Consider using this... (pending clinical judgement):	Instead of this...
Alcohol use disorder: <ul style="list-style-type: none"> - Mild (F10.10) - Moderate (F10.20) HCC - Severe (F10.20) HCC Alcohol intoxication HCC (F10.129) Alcohol withdrawal HCC (F10.239)	Alcohol abuse* (F10.10) Alcoholic HCC (F10.20)
Alcohol use disorder in remission (F10.91) Alcohol use disorder, mild, in sustained remission (F10.11) Alcohol use disorder, moderate, in sustained remission HCC (F10.21) Alcohol use disorder, severe, in sustained remission HCC (F10.21)	History of alcohol abuse* (F10.11)
Opioid use disorder <ul style="list-style-type: none"> - Mild HCC F11.10 - Moderate HCC or severe HCC (both F11.20) Opioid intoxication <ul style="list-style-type: none"> o Without dependence F11.129 or F11.929 o For a patient with physical dependence F11.229 Opioid withdrawal (HCC F11.23)	Opioid abuse HCC (F11.10)
Methamphetamine use, Unspecified severity - F15.9 (use without or with unclear negative consequences) or F15.10 (use with negative consequences) Methamphetamine use disorder: <ul style="list-style-type: none"> - Mild HCC (F15.10) - Moderate or Severe HCC (both F15.20) Methamphetamine intoxication HCC (F15.929 or F15.129) Withdrawal from methamphetamine HCC (F15.23)	Methamphetamine Abuse* HCC (F15.10)
Tobacco use disorder, mild/moderate/severe (All F17.20) Current tobacco use (Z72.0)	Smoker* (F17.200) Tobacco Abuse* (Z72.0) Current Smoker* (F17.200)
Tobacco use disorder, mild/moderate/severe, in sustained remission (All F17.201)	Former Smoker* (Z87.891)
Where possible, specify the specific substance(s) used by the patient, including if a substance use disorder is present. For example, rather than using "Polysubstance abuse," it is more clinically meaningful to use, for example, "moderate cocaine use disorder, severe alcohol use disorder, and moderate tobacco use disorder." If the patient uses substances but does not have a substance use disorder (or you are uncertain), document with, for example, "cocaine use (F14.90) and cannabis use (F12.90)" Polysubstance dependence (HCC) (F19.20) is an alternative.	Substance abuse* HCC (F19.10) Polysubstance abuse* (HCC) (F19.10)



Consider using this... (pending clinical judgement):	Instead of this...
<p>Consider use of Social Determinants of Health codes. For example, if a patient presentation is motivated by their inadequate housing, an alternative may be:</p> <ul style="list-style-type: none"> - Z59.10 Inadequate housing - Z58.81 Basic services unavailable in physical environment 	<p>Drug-seeking behavior (Z76.5) Malingering* (Z76.5)</p>

*TOP 10 MOST FREQUENTLY USED STIGMATIZING DIAGNOSES IN EPIC

FAQS

Q: How do I determine if someone's use disorder is mild, moderate, or severe?

A: Not all substance use meets criteria for an "(X) use disorder." SUDs can be defined as mild, moderate, or severe based on DSM-V criteria below:

	Criteria
Impaired control	<ol style="list-style-type: none"> 1. Used larger amounts/longer than intended 2. Repeated attempts to quit/control use 3. Much time spent using/recovering from/obtaining substance 4. Craving
Social impairment	<ol style="list-style-type: none"> 5. Social/interpersonal problems related to use 6. Neglected major roles (work, home, etc) to use 7. Activities given up to use
Risky use	<ol style="list-style-type: none"> 8. Physically hazardous use 9. Physical/psychological problems related to use
Pharmacologic	<ol style="list-style-type: none"> 10. Tolerance 11. Withdrawal

MILD: 2 OR 3 CRITERIA

MODERATE: 4 OR 5 CRITERIA

SEVERE: ANY 6 OR MORE CRITERIA

Q: What is recovery from a substance use disorder?

A: Recovery is personal and can mean different things to different people; various definitions of "recovery" exist. Generally speaking, recovery is obtained through the reduction or cessation of substance use, which allows the patient to restore and lead self-directed lives. The DSM-5 defines recovery as the absence of criteria for a SUD, which is further classified as early or sustained recovery.

Q: What is early vs sustained recovery?

A: Remission/Recovery is categorized based on duration:

- Early: 3 months to 1 year
- Sustained: > 1 year

Q: What are common challenges in documenting substance use?

A: Commonly used diagnosis codes (derived from ICD10) contain outdated language.

- The same ICD10 code may link to both recommended and non-recommended terms.
 - o For example, "mild alcohol use disorder" (recommended term) and "acute alcohol abuse" (not recommended term) are both descriptions of the F10.10 code.
- Certain non-recommended diagnoses are HCC, while their corresponding recommended diagnoses are not HCC.