

## Read Coding

### History and Purpose

Read Codes are a comprehensive list of terms developed for use in primary care to describe the care and treatment of their patients. Their usage however is not limited to primary care and can be used by any healthcare professional.

First developed by James Read, a GP in the 1980's and handed over to the NHSIA (NHS Information Authority) in 1990 who update and support the codes. Clinical Terms was a name given to Read Code Version 3. All GP Practices currently use Version 2.

In the future Read Codes (predominately primary care) are being amalgamated with Snomed (Predominately Secondary Care) to form Snomed-CT so a more universal line of communication can be achieved between primary and secondary care.

### Purpose of Read Coding

4 main reasons for being able to record patient information

1. Recording data more consistently
2. Retrieving data more easily
3. Analysing data more thoroughly
4. Communicating data by use of a common clinical language

The key take home message is Read Codes are essential in STANDARDISATION for Audit, Research and Performance Monitoring

## Format of Read Coding (Version 2)

The actual code is based on 4 or 5 alphanumeric (number or letter) case-sensitive (capital or small letter) characters.

### Important Point No.1

The first Letter or Number relates to a "Chapter" or broad division of processes involved with Healthcare. You'll see what I mean when I list them below..

Chapter	Contents
0	Occupations
1	History/symptoms
2	Examination/signs
3	Diagnostic procedures
4	Laboratory procedures
5	Radiology/medical physics
6	Preventative procedures
7	Operations and procedures
8	Other therapeutic procedures
9	Administration
A	Infectious/parasitic diseases
B	Neoplasms
C	Endocrine/metabolic
D	Blood diseases
E	Mental disorders
F	Nervous system
G	Circulatory system
H	Respiratory system
J	Digestive system
K	Genito-urinary system
L	Pregnancy/childbirth/puerperium
M	Skin/subcutaneous tissue
N	Musculoskeletal
P	Congenital anomalies
Q	Perinatal conditions
R	Ill-defined conditions/working diagnoses
S	Injury/poisoning
T	Causes of injury/poisoning
a-v	Drugs

I've listed them because it can be quite useful whilst searching to find the most appropriate code as several of them repeat but with different chapter headings. As a rule

Numbers = History/Symptoms/Investigations/Procedures  
Capital Letters = Diseases or Diagnoses  
Small Letters = Drugs

## Read Coding is Hierarchical in Nature

Similar to a Tree with a main trunk, branches, sub-branches, twigs and leaves; specific conditions are sub-divided and sub-divided again in order to further refine the diagnosis made.

### Important Point No.2

Be as generic as possible. Putting a diagnosis further down the "tree" will still allow searches of that diagnosis at a higher level. However you may miss the "branch" altogether if you are too specific.

### eg Acute pneumococcal bronchitis

5 Character Code	Term
H...	Respiratory system Disorders
H0...	Acute Respiratory Infections
H06..	Acute Bronchitis/bronchiolitis
H060.	Acute Bronchitis
H0606	Acute pneumococcal bronchitis.

If I do a search on Acute Bronchitis, if I have coded Acute pneumococcal bronchitis then it will include this in the result, however the opposite is not the case so potential positive searches can be missed this way.

## Read Coding and the Term Key

### Important Point No.3

When searching for codes, all is not as it seems. The first word you type is NOT compared against the actual letters of the Terms but is compared to a separate Column associated with Terms called the Term Key. You can have more than one Term Key per Term

### eg1 Tired All the Time

If I type "TATT" even though the words "TATT" are not in consecutive order within the term its still brings up Tired all the Time. This is because the engine has attached the letter "TATT" with the diagnosis of Tired all the Time. "TATT" will bring up Tired all the time as well as TATTOO and TATTOOING

The second word you type then does a search on the characters with the same Term Key you have typed.

### eg2 Tired All the Time

If I type "TATT Ti" the engine will search through all the Term Keys starting with TATT then do search through the result to see if any have the letters "Ti" in them. This does not necessarily have to be at the beginning of the words being searched.

## Other Smaller Points

**Don't use "history of..." eg "History of MI" is not as good as "Myocardial Infarction".**

**Try to use problems not actions eg "Leg Ulcer" is better than "Dressing of Wound".**

**Don't use NOS if possible. This is to do with its placement in the hierarchy.**

**A good trick is if you are using 2 words to search for a code which you cant find, swap those 2 words around.**

**Family history. DON'T write Angina then "Family history" in text. Use the separate Family History Term.**

**[D]=Records Symptoms as Diagnoses. In chapter R and are used when the diagnosis is not know yet.**

**[X]=derived from ICD-10. Mainly relate to Mental Disorders. Try to use the Codes starting with "Eu" instead.**