CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 591

Department of Health & Human Services

Center for Medicare & Medicaid Services

Date: JUNE 24, 2005

Change Request 3888

SUBJECT: Medicare Contractor Annual Update of the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)

I. SUMMARY OF CHANGES: This instruction is CMS' annual reminder to the contractors of the ICD-9-CM update that is effective for the dates of service on and after October 1, 2005, as well as discharges on or after October 1, 2005 for institutional providers.

NEW/REVISED MATERIAL:

EFFECTIVE DATE: October 01, 2005

IMPLEMENTATION DATE: October 03, 2005

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R = REVISED, N = NEW, D = DELETED - Only One Per Row.

R/N/D	Chapter / Section / SubSection / Title
N/A	

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

IV. ATTACHMENTS:

Recurring Notification Form

Attachment – Recurring Update Notification

Pub. 100-04 | Transmittal: 591 | Date: June 24, 2005 | Change Request 3888

SUBJECT: Medicare Contractor Annual Update of the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)

I. GENERAL INFORMATION

A. Background:

In 1979, use of ICD-9-CM codes became mandatory for reporting provider services on Form CMS-1450. On April 1, 1989, use of ICD-9-CM codes became mandatory for all physician services submitted on Form CMS-1500. Effective October 1, 2003 (refer to Transmittal B-03-045, dated June 6, 2003) an ICD-9-CM code is required on all paper and electronic claims billed to Medicare carriers with the exception of ambulance claims (specialty type 59).

Effective for dates of service on and after October 1, 2004, CMS no longer provides a 90-day grace period for providers (billing carriers/DMERCs) to use in billing discontinued ICD-9-CM diagnosis codes on Medicare claims. Institutional providers did not have a grace period, they were always required to bill the new ICD-9-CM codes for discharges on or after October 1.

The ICD-9-CM codes are updated annually as stated in Pub. 100-04, Chapter 23, Section 10.2. The CMS sends the ICD-9-CM Addendum out to the regional offices and Medicare contractors annually.

B. Policy:

This instruction serves as a reminder to contractors regarding the annual ICD-9-CM coding update to be effective for dates of service on or after October 1, 2005 (effective for discharges on or after October 1, 2005 for institutional providers).

An ICD-9-CM code is required for all professional claims, e.g., physicians, non-physician practitioners, independent clinical diagnostic laboratories, occupational and physical therapists, independent diagnostic testing facilities, audiologist, ambulatory surgical centers (ASCs), and for all institutional claims. However, an ICD-9-CM code is not required for ambulance supplier claims.

The CMS posts the new, revised, and discontinued ICD-9-CM diagnosis codes on the CMS Web site at www.cms.hhs.gov/medlearn/icd9code.asp on an annual basis. The updated diagnosis codes are effective for dates of service on and after October 1. Providers can view the new updated codes at this site in June. Providers can also visit the National Center for Health Statistics (NCHS) Web site at www.cdc.gov/nchs/icd9.htm. The NCHS will post the new ICD-9-CM Addendum on their web in June. Providers are also encouraged to purchase a new ICD-9-CM book or CD-ROM on an annual basis.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)							
		F I	R H H I	C a r r i e r	D M E R C		intain M C S	cm C W F	O t h e r
3888.1	Carriers/DMERCs/FIs shall install and accept the new and revised 2005 ICD-9-CM update in order to process claims with dates of service on or after October 1, 2005 (for institutional providers, FIs shall accept the new and revised codes for claims with discharges on or after October 1, 2005).	X	X	X	X				

III. PROVIDER EDUCATION

Requirement	Requirements	Responsibility ("X" indicates								
Number		th	e co	lun	ns	that	app	oly)		
		F	R	C	D		red S		m	О
		I	Н	a	M	Mai	intaiı	ners		t
			H	r r	E R	F	M		С	h e
			1	i	C	1	C	M	W	r
				e		S	S	S	F	
				r		2				
3888.2	A provider education article related to this									
	instruction will be available at									
	www.cms.hhs.gov/medlearn/matters shortly									
	after the CR is released. You will receive									
	notification of the article release via the									
	established "medlearn matters" listserv.									
	Contractors shall post this article, or a direct									
	link to this article, on their Web site and include									
	information about it in a listsery message within									
	1 week of the availability of the provider									
	education article. In addition, the provider									
	education article shall be included in your next									
	regularly scheduled bulletin and incorporated									
	into any educational events on this topic.									
	Contractors are free to supplement Medlearn									
	Matters articles with localized information that									
	would benefit their provider community in									

Requirement	Requirements	Responsibility ("X" indicates								
Number		th	the columns that apply)							
		F	R	C	D	Sha	red S	Syste	m	О
		I	Н	a	M	Mai	intaiı	ners		t
			Н	r	Е	F	M	V	С	h
			I	r	R	Ī	C	M	W	e
				1	С	S	S	S	F	r
				e r		S				
	billing and administering the Medicare program									
	correctly.									
	,									

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: Grouper v23.0, Medicare Code Editor v22.0, non-OPPS v21.0, and Outpatient Code Editor v6.3.

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: Four attachments:

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: October 01, 2005
Implementation Date: October 03, 2005
Pre-Implementation Contact(s): April Billingsley, april.billingsley@cms.hhs.gov or 410-786-0140 (carriers), and Sarah Shirey-Losso, sarah.shireylosso@cms.hhs.gov or 410-786-0187 (FIs)

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

Post-Implementation Contact(s): Appropriate	
regional office	

stUnless otherwise specified, the effective date is the date of service.

Attachments (4)

Attachment 1 Table 6A - New Diagnosis Codes

Diagnosis Code	Description
259.5	Androgen insensitivity syndrome
276.50	Volume depletion, unspecified
276.51	Dehydration
276.52	Hypovolemia
278.02	Overweight
287.30	Primary thrombocytopenia, unspecified
287.31	Immune thrombocytopenic purpura
287.32	Evans' syndrome
287.33	Congenital and hereditary thrombocytopenic purpura
287.39	Other primary thrombocytopenia
291.82	Alcohol induced sleep disorders
292.85	Drug induced sleep disorders
327.00	Organic insomnia, unspecified
327.01	Insomnia due to medical condition classified elsewhere
327.02	Insomnia due to mental disorder
327.09	Other organic insomnia
327.10	Organic hypersomnia, unspecified
327.11	Idiopathic hypersomnia with long sleep time
327.12	Idiopathic hypersomnia without long sleep time
327.13	Recurrent hypersomnia
327.14	Hypersomnia due to medical condition classified elsewhere
327.15	Hypersomnia due to mental disorder
327.19	Other organic hypersomnia
327.20	Organic sleep apnea, unspecified
327.21	Primary central sleep apnea
327.22	High altitude periodic breathing
327.23	Obstructive sleep apnea (adult) (pediatric)
327.24	Idiopathic sleep related non-

Diagnosis Code	Description
	obstructive alveolar hypoventilation
327.25*	Congenital central alveolar hypoventilation syndrome
327.26	Sleep related hypoventilation/hypoxemia in conditions classifiable elsewhere
327.27	Central sleep apnea in conditions classified elsewhere
327.29	Other organic sleep apnea
327.30*	Circadian rhythm sleep disorder, unspecified
327.31*	Circadian rhythm sleep disorder, delayed sleep phase type
327.32*	Circadian rhythm sleep disorder, advanced sleep phase type
327.33*	Circadian rhythm sleep disorder, irregular sleep-wake type
327.34*	Circadian rhythm sleep disorder, free-running type
327.35*	Circadian rhythm sleep disorder, jet lag type
327.36*	Circadian rhythm sleep disorder, shift work type
327.37*	Circadian rhythm sleep disorder in conditions classified elsewhere
327.39*	Other circadian rhythm sleep disorder
327.40*	Organic parasomnia, unspecified
327.41*	Confusional arousals
327.42*	REM sleep behavior disorder
327.43*	Recurrent isolated sleep paralysis
327.44*	Parasomnia in conditions classified elsewhere
327.49*	Other organic parasomnia
327.51*	Periodic limb movement disorder
327.52*	Sleep related leg cramps
327.53*	Sleep related bruxism
327.59*	Other organic sleep related movement disorders

Diagnosis Code	Description
327.8*	Other organic sleep disorders
362.03	Nonproliferative diabetic retinopathy NOS
362.04	Mild nonproliferative diabetic retinopathy
362.05	Moderate nonproliferative diabetic retinopathy
362.06	Severe nonproliferative diabetic retinopathy
362.07	Diabetic macular edema
426.82	Long QT syndrome
443.82	Erythromelalgia
525.40	Complete edentulism, unspecified
525.41	Complete edentulism, class I
525.42	Complete edentulism, class II
525.43	Complete edentulism, class III
525.44	Complete edentulism, class IV
525.50	Partial edentulism, unspecified
525.51	Partial edentulism, class I
525.52	Partial edentulism, class II
525.53	Partial edentulism, class III
525.54	Partial edentulism, class IV
567.21	Peritonitis (acute) generalized
567.22	Peritoneal abscess
567.23	Spontaneous bacterial peritonitis
567.29	Other suppurative peritonitis
567.31*	Psoas muscle abscess
567.38	Other retroperitoneal abscess
567.39	Other retroperitoneal infections
567.81	Choleperitonitis
567.82	Sclerosing mesenteritis
567.89	Other specified peritonitis
585.1	Chronic kidney disease, Stage I
585.2	Chronic kidney disease, Stage II (mild)
585.3	Chronic kidney disease, Stage III (moderate)

Diagnosis Code	Description
585.4	Chronic kidney disease, Stage IV (severe)
585.5	Chronic kidney disease, Stage V
585.6	End stage renal disease
585.9	Chronic kidney disease, unspecified
599.60	Urinary obstruction, unspecified
599.69	Urinary obstruction, not elsewhere classified
651.70	Multiple gestation following (elective) fetal reduction, unspecified as to episode of care or not applicable
651.71	Multiple gestation following (elective) fetal reduction, delivered, with or without mention of antepartum condition
651.73	Multiple gestation following (elective) fetal reduction, antepartum condition or complication
760.77	Anticonvulsants
760.78	Antimetabolic agents
763.84	Meconium passage during delivery
770.10	Fetal and newborn aspiration, unspecified
770.11	Meconium aspiration without respiratory symptoms
770.12	Meconium aspiration with respiratory symptoms
770.13*	Aspiration of clear amniotic fluid without respiratory symptoms
770.14*	Aspiration of clear amniotic fluid with respiratory symptoms
770.15*	Aspiration of blood without respiratory symptoms
770.16*	Aspiration of blood with
770 17	respiratory symptoms Other fetal and newborn
770.17	aspiration without
	respiratory symptoms
770.18	Other fetal and newborn aspiration with

Diagnosis	Description
Code	-
770 054	respiratory symptoms
770.85*	Aspiration of postnatal stomach contents without respiratory symptoms
770.86*	Aspiration of postnatal stomach contents with respiratory symptoms
779.84	Meconium staining
780.95	Other excessive crying
799.01	Asphyxia
799.02	Hypoxemia
996.40	Unspecified mechanical complication of internal orthopedic device, implant, and graft
996.41	Mechanical loosening of prosthetic joint
996.42	Dislocation of prosthetic joint
996.43	Prosthetic joint implant failure
996.44	Peri-prosthetic fracture around prosthetic joint
996.45	Peri-prosthetic osteolysis
996.46	Articular bearing surface wear of prosthetic joint
996.47	Other mechanical complication of prosthetic joint implant
996.49	Other mechanical complication of other internal orthopedic device, implant, and graft
V12.42	Personal history, Infections of the central nervous system
V12.60	Personal history, Unspecified disease of respiratory system
V12.61	Personal history, Pneumonia (recurrent)
V12.69	Personal history, Other diseases of respiratory system
V13.02	Personal history, Urinary (tract) infection
V13.03	Personal history, Nephrotic syndrome
V15.88	History of fall
V17.81	Family history, Osteoporosis

Diagnosis	Doggrintion
Diagnosis Code	Description
V17.89	Family history, Other
	musculoskeletal diseases
V18.9	Family history, Genetic disease
	carrier
V26.31	Testing for genetic disease
	carrier status
V26.32	Other genetic testing
V26.33	Genetic counseling
V46.13	Encounter for weaning from
	respirator [ventilator]
V46.14	Mechanical complication of
7740.04	respirator [ventilator]
V49.84	Bed confinement status
V58.11*	Encounter for antineoplastic chemotherapy
V58.12*	Encounter for immunotherapy for
	neoplastic condition
V59.70	Egg (oocyte) (ovum) donor, unspecified
V59.71	Egg (oocyte) (ovum) donor, under
	age 35, anonymous recipient
V59.72	Egg (oocyte) (ovum) donor, under age 35,designated recipient
V59.73	Egg (oocyte) (ovum) donor, age 35 and over, anonymous recipient
V59.74	Egg (oocyte) (ovum) donor, age 35 and over, designated recipient
V62.84	Suicidal ideation
V64.00	Vaccination not carried out,
V 04.00	unspecified reason
V64.01	Vaccination not carried out
	because of acute illness
V64.02	Vaccination not carried out
	because of chronic illness or condition
V64.03	Vaccination not carried out
V 04.03	because of immune compromised
	state
V64.04	Vaccination not carried out
	because of allergy to vaccine or
*****	component
V64.05	Vaccination not carried out because of caregiver refusal
V64.06	Vaccination not carried out
v 04.00	because of patient refusal
V64.07	Vaccination not carried out for
L	

Diagnosis Code	Description		
	religious reasons		
V64.08	Vaccination not carried out because patient had disease being vaccinated against		
V64.09	Vaccination not carried out for other reason		
V69.5	Behavioral insomnia of childhood		
V72.42*	Pregnancy examination or test, positive result		
V72.86	Encounter for blood typing		
V85.0	Body Mass Index less than 19, adult		
V85.1	Body Mass Index between 19-24, adult		
V85.21	Body Mass Index 25.0-25.9, adult		
V85.22	Body Mass Index 26.0-26.9, adult		
V85.23	Body Mass Index 27.0-27.9, adult		
V85.24	Body Mass Index 28.0-28.9, adult		
V85.25	Body Mass Index 29.0-29.9, adult		
V85.30	Body Mass Index 30.0-30.9, adult		
V85.31	Body Mass Index 31.0-31.9, adult		
V85.32	Body Mass Index 32.0-32.9, adult		
V85.33	Body Mass Index 33.0-33.9, adult		
V85.34	Body Mass Index 34.0-34.9, adult		
V85.35	Body Mass Index 35.0-35.9, adult		
V85.36	Body Mass Index 36.0-36.9, adult		
V85.37	Body Mass Index 37.0-37.9, adult		
V85.38	Body Mass Index 38.0-38.9, adult		
V85.39	Body Mass Index 39.0-39.9, adult		
V85.4	Body Mass Index 40 and over, adult		

Secondary Diagnosis of Major Problem in DRG 387 & 389
 Principal Diagnosis of Significant HIV Related Condition
 Principal or Secondary Diagnosis of Major Problem

^{*}These diagnosis codes were discussed at the March 31 – April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule.

Procedure Code	Description
00.18*	Infusion of immunosuppressive antibody therapy during induction phase of solid organ transplantation
00.40	Procedure on single vessel
00.41	Procedure on two vessels
00.42	Procedure on three vessels
00.43	Procedure on four or more vessels
00.45	Insertion of one vascular stent
00.46	Insertion of two vascular stents
00.47	Insertion of three vascular stents
00.48	Insertion of four or more vascular stents
00.66*	Percutaneous transluminal coronary angioplasty [PTCA]
	or coronary atherectomy
00.70	Revision of hip replacement, both acetabular and femoral
00.71	components
00.71	Revision of hip replacement, acetabular component
00.72	Revision of hip replacement, femoral component
00.73	Revision of hip replacement, acetabular liner and/or femoral head only
00.74*	Hip replacement bearing surface, metal on polyethylene
00.75*	Hip replacement bearing surface, metal-on-metal
00.76*	Hip replacement bearing surface, ceramic-on-ceramic
00.80	Revision of knee replacement, total (all components)
00.81	Revision of knee replacement, tibial component
00.82	Revision of knee replacement, femoral component
00.83	Revision of knee replacement, patellar component
00.84	Revision of total knee replacement, tibial insert (liner)
01.26*	Insertion of catheter into cranial cavity
01.27*	Removal of catheter from cranial cavity
37.41	Implantation of prosthetic cardiac support device around the heart
37.49	Other repair of heart and pericardium
39.73*	Endovascular implantation of graft in thoracic aorta
81.18*	Subtalar joint arthroereisis
84.56	Insertion of (cement) spacer
84.57	Removal of (cement) spacer

Procedure Code	Description
84.58*	Implantation of interspinous process decompression device
84.71*	Application of external fixator device, monoplanar system
84.72*	Application of external fixator device, ring system
84.73*	Application of hybrid external fixator device
86.97	Insertion or replacement of single array rechargeable neurostimulator pulse generator
86.98	Insertion or replacement of dual array rechargeable neurostimulator pulse generator
92.20*	Infusion of liquid brachytherapy radioisotope

 $^{^*}$ These procedure codes were discussed at the March 31 – April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include with the proposed rule.

TABLE 6C -- INVALID DIAGNOSIS CODES

Diagnosis Code	Description			
276.5	Volume depletion			
287.3	Primary thrombocytopenia			
567.2	Other suppurative peritonitis			
567.8	Other specified peritonitis			
585	Chronic renal failure			
599.6	Urinary obstruction, unspecified			
770.1	Meconium aspiration syndrome			
799.0	Asphyxia			
996.4	Mechanical complication of internal orthopedic device, implant, and graft			
V12.6	Diseases of the respiratory system			
V17.8	Other musculoskeletal diseases			
V26.3	Genetic counseling and testing			
V58.1*	Chemotherapy			
V64.0	Vaccination not carried out because of contradiction			

^{*}This diagnosis code was discussed at the March 31 - April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include with the proposed rule.

TABLE 6D--INVALID PROCEDURE CODES

Procedure Code	Description		
36.01*1	Single vessel percutaneous transluminal coronary angioplasty [PTCA] or coronary atherectomy without mention of thrombolytic agent		
36.02	Single vessel percutaneous transluminal coronary angioplasty [PTCA] or coronary atherectomy with mention of thrombolytic agent		
36.05	Multiple vessel percutaneous transluminal coronary angioplasty [PTCA] or coronary atherectomy performed during the same operation, with or without mention of thrombolytic agent		
37.4	Repair of heart and pericardium		
81.61*	360 degree spinal fusion, single incision approach		

^{*}These procedure codes were discussed at the March 31 – April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include with the proposed rule.

TABLE 6E--REVISED DIAGNOSIS CODE TITLES

Diagnosis Code	Description
285.21*	Anemia in chronic kidney disease
307.45*	Circadian rhythm sleep disorder of nonorganic origin
403.00	Hypertensive kidney disease, malignant, without chronic kidney disease
403.01	Hypertensive kidney disease, malignant, with chronic kidney disease
403.10	Hypertensive kidney disease, benign, without chronic kidney disease
403.11	Hypertensive kidney disease, benign, with chronic kidney disease
403.90	Hypertensive kidney disease, unspecified, without chronic

¹Code 36.01 was listed as a revised code in Table 6F of the proposed rule. We are deleting this code and creating new code 00.66 instead.

Diagnosis Code	Description		
	kidney disease		
403.91	Hypertensive kidney disease, unspecified, with chronic kidney disease		
404.00	Hypertensive heart and kidney disease, malignant, without heart failure or chronic kidney disease		
404.01	Hypertensive heart and kidney disease, malignant, with heart failure		
404.02	Hypertensive heart and kidney disease, malignant, with chronic kidney disease		
404.03	Hypertensive heart and kidney disease, malignant, with heart failure and chronic kidney disease		
404.10	Hypertensive heart and kidney disease, benign, without heart failure or chronic kidney disease		
404.11	Hypertensive heart and kidney disease, benign, with heart failure		
404.12	Hypertensive heart and kidney disease, benign, with chronic kidney disease		
404.13	Hypertensive heart and kidney disease, benign, with heart failure and chronic kidney disease		
404.90	Hypertensive heart and kidney disease, unspecified, without heart failure or chronic kidney disease		
404.91	Hypertensive heart and kidney disease, unspecified, with heart failure		
404.92	Hypertensive heart and kidney disease, unspecified, with chronic kidney disease		
404.93	Hypertensive heart and kidney disease, unspecified, with heart failure and chronic kidney disease		
728.87	Muscle weakness (generalized)		
780.51	Insomnia with sleep apnea, unspecified		
780.52	Insomnia, unspecified		
780.53	Hypersomnia with sleep apnea, unspecified		
780.54	Hypersomnia, unspecified		
780.55*	Disruption of 24 hour sleep wake cycle, unspecified		
780.57	Unspecified sleep apnea		
	Sleep related movement disorder, unspecified		

¹ Major Problem in DRG 387 & 389

*These diagnosis codes were discussed at the March 31 – April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include with the proposed rule.

TABLE 6F--REVISED PROCEDURE CODE TITLES

Description
Revision or relocation of cardiac device pocket
Application of external fixator device, unspecified site
Application of external fixator device, scapula, clavicle, and thorax [ribs and sternum]
Application of external fixator device, humerus
Application of external fixator device, radius and ulna
Application of external fixator device, carpals and metacarpals
Application of external fixator device, femur
Application of external fixator device, patella
Application of external fixator device, tibia and fibula
Application of external fixator device, tarsals and metatarsals
Application of external fixator device, other
Revision of hip replacement, not otherwise specified
Revision of knee replacement, not otherwise specified

^{*}These procedure codes were discussed at the March 31 – April 1, 2005 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include with the proposed rule.

FY 2006 Final Addenda ICD-9-CM Volume 3, Procedures Effective October 1, 2005

Tabular List

00.02 Therapeutic ultrasound of heart

Excludes:

Revise exclusion term ultrasonic angioplasty of coronary vessels (36.01, 36.02,

36.05, 00.66, 36.09)

New Code 00.18 Infusion of immunosuppressive antibody therapy during

induction phase of solid organ transplantation

monoclonal antibody therapy polyclonal antibody therapy

00.2 Intravascular imaging of blood vessels

Add inclusion term <u>Intravascular [ultrasound] imaging of blood vessels</u>

Add Note Note: real-time imaging of lumen of blood vessel(s) using sound

waves

Excludes:

Add exclusion term adjunct vascular system procedures, number of vessels

treated (00.40 –00.43)

Add exclusion term <u>diagnostic procedures on blood vessels (38.21 – 38.29)</u>
Add exclusion term <u>diagnostic procedures on blood vessels (38.21 – 38.29)</u>
<u>diagnostic ultrasound of peripheral vascular system (88.77)</u>

Add exclusion term magnetic resonance imaging (MRI) (88.91-88.97)

New subcategory 00.4 Adjunct Vascular System Procedures

Note: These codes can apply to both coronary and peripheral vessels. These codes are to be used in conjunction with other therapeutic procedure codes to provide additional information on the number of vessels upon which a procedure was performed and/or the number of stents inserted. As appropriate, code both the number of vessels operated on (00.40-00.43), and the number of stents inserted (00.45-00.48).

Code also any:

angioplasty or atherectomy (00.61-00.62, 00.66, 39.50)

endarterectomy (38.10 – 38.18)

insertion of vascular stent(s) (00.55, 00.63-00.65, 36.06 -36.07, 39.90)

other removal of coronary artery obstruction (36.09)

New code 00.40 Procedure on single vessel Number of vessels, unspecified Excludes: (aorto)coronary bypass (36.10 – 36.19) intravascular imaging of blood vessels (00.21-00.29) New code 00.41 Procedure on two vessels Excludes: (aorto) coronary bypass (36.10 – 36.19) intravascular imaging of blood vessels (00.21-00.29) New code 00.42 Procedure on three vessels Excludes: (aorto) coronary bypass (36.10 – 36.19) intravascular imaging of blood vessels (00.21-00.29) New code 00.43 Procedure on four or more vessels Excludes: (aorto) coronary bypass (36.10 – 36.19) intravascular imaging of blood vessels (00.21-00.29) New code 00.45 Insertion of one vascular stent Number of stents, unspecified New code 00.46 Insertion of two vascular stents New code 00.47 Insertion of three vascular stents 00.48 Insertion of four or more vascular stents New code 00.50 Implantation of cardiac resynchronization pacemaker without mention of defibrillation, total system [CRT-P] Add inclusion term That with CRT-P generator and one or more leads 00.51 Implantation of cardiac resynchronization defibrillator, total system [CRT-D] Add inclusion term That with CRT-D generator and one or more leads 00.55 Insertion of drug-eluting peripheral vessel stent(s) Revise code also note Code also any: any angioplasty or atherectomy of other non-coronary vessel(s) (39.50) Add code also note angioplasty or atherectomy of other non-coronary vessels(s) (39.50)

Add code also note
Add code also note
Add code also note 00.6Delete exclusion term $\frac{\text{number of vascular stents inserted } (00.45 - 00.48)}{\text{number of vessels treated } (00.40 - 00.43)}$ $\frac{\text{number of vascular stents inserted } (00.40 - 00.43)}{\text{Procedures on blood vessels}}$

angioplasty or atherectomy of other non-coronary vessel(s) (39.50)

insertion of coronary artery stent(s) (36.06-36.07)

insertion of drug eluting peripheral vessel stent(s) (00.55) insertion of non-drug eluting peripheral vessel stent(s) (39.90)

00.61 Percutaneous angioplasty or atherectomy of precerebral (extracranial) vessel(s)

Code also any:

Add code also note $\frac{\text{number of vascular stents inserted }(00.45 - 00.48)}{\text{number of vessels treated }(00.40 - 00.43)}$

00.62 Percutaneous angioplasty or atherectomy of intracranial vessel(s)

Code also any:

Add code also note $\frac{\text{number of vascular stents inserted }(00.45 - 00.48)}{\text{number of vessels treated }(00.40 - 00.43)}$

00.63 Percutaneous insertion of carotid artery stent(s)

Revise code also note Code also <u>any:</u> percutaneous angioplasty or atherectomy of precerebral vessel(s) (00.61)

Add code also note $\frac{\text{number of vascular stents inserted }(00.45 - 00.48)}{\text{number of vessels treated }(00.40 - 00.43)}$

Add code also note <u>percutaneous angioplasty or atherectomy of precerebral vessel(s)</u> (00.61)

Add exclusion term Excludes:

angioplasty or atherectomy of other non-coronary

vessel(s) (39.50)
insertion of drug-eluting peripheral vessel stent(s) (00.55)

00.64 Percutaneous insertion of other precerebral (extracranial) artery stent(s)

Revise code also note Code also <u>any: percutaneous angioplasty or atherectomy of</u>

precerebral vessel(s) (00.61)

Add code also note number of vessels treated (00.40 - 00.43)

Add code also note <u>percutaneous angioplasty or atherectomy of precerebral vessel(s)</u>

(00.61)

Add exclusion term Excludes:

angioplasty or atherectomy of other non-coronary

vessel(s) (39.50)

insertion of drug-eluting peripheral vessel stent(s) (00.55)

00.65 Percutaneous insertion of intracranial vascular stent(s)

Revise code also note Code also any: percutaneous angioplasty or atherectomy of

intracranial vessel(s) (00.62)

Add code also note $\underline{\text{number of vascular stents inserted }}(00.45 - 00.48)$

Add code also note $\underline{\text{number of vessels treated } (00.40 - 00.43)}$

Add code also note percutaneous angioplasty or atherectomy of intracranial vessel(s)

(00.62)

Excludes:

Add exclusion term angioplasty or atherectomy of other non-coronary

vessel(s) (39.50)

Add exclusion term insertion of drug-eluting peripheral vessel stent(s) (00.55)

New code 00.66 Percutaneous transluminal coronary angioplasty [PTCA] or

coronary atherectomy

Balloon angioplasty of coronary artery

Coronary atherectomy

Percutaneous coronary angioplasty NOS

PTCA NOS Code also any:

injection or infusion of thrombolytic agent (99.10) insertion of coronary artery stent(s) (36.06-36.07)

intracoronary artery thrombolytic infusion (36.04) number of vascular stents inserted (00.45 - 00.48)

number of vessels treated (00.40 - 00.43)

New subcategory 00.7 Other hip procedures

New code 00.70 Revision of hip replacement, both acetabular and femoral

components Total hip revision Code also any:

removal of (cement) (joint) spacer (84.57)

type of bearing surface, if known (00.74 - 00.76)

Excludes:

revision of hip replacement, acetabular component only (00.71) revision of hip replacement, femoral component only (00.72) revision of hip replacement, Not Otherwise Specified (81.53)

revision with replacement of acetabular liner and/or femoral head only (00.73) New code 00.71 Revision of hip replacement, acetabular component Partial, acetabular component only That with: exchange of acetabular cup and liner exchange of femoral head Code also any type of bearing surface, if known (00.74 - 00.76)**Excludes:** revision of hip replacement, both acetabular and femoral components (00.70) revision of hip replacement, femoral component (00.72) revision of hip replacement, Not Otherwise Specified (81.53) revision with replacement of acetabular liner and/or femoral head only (00.73) New code 00.72 Revision of hip replacement, femoral component Partial, femoral component only That with: exchange of acetabular liner exchange of femoral stem and head Code also any type of bearing surface, if known (00.74 - 00.76) Excludes: revision of hip replacement, acetabular component (00.71) revision of hip replacement, both acetabular and femoral components (00.70) revision of hip replacement, not otherwise specified (81.53) revision with replacement of acetabular liner and/or femoral head only (00.73) New code 00.73 Revision of hip replacement, acetabular liner and/or femoral head Code also any type of bearing surface, if known (00.74 - 00.76)New code 00.74 Hip replacement bearing surface, metal on polyethylene New code 00.75 Hip replacement bearing surface, metal-on-metal New code 00.76 Hip replacement bearing surface, ceramic-on-ceramic

New subcategory 8.00 Other knee procedures Note: Report up to two components using 00.81 - 00.83 to describe revision of knee replacements. If all three components are revised, report 00.80. New code 00.80 Revision of knee replacement, total (all components) Replacement of femoral, tibial, and patellar components (all components) Code also any removal of (cement) (joint) spacer (84.57) **Excludes:** revision of only one or two components (tibial, femoral or patellar component) (00.81 - 00.84)New code 00.81 Revision of knee replacement, tibial component Replacement of tibial baseplate and tibial insert (liner) **Excludes:** revision of knee replacement, total (all components) (00.80) New code 00.82 Revision of knee replacement, femoral component That with replacement of tibial insert (liner) **Excludes:** revision of knee replacement, total (all components) (00.80) New code 00.83 Revision of knee replacement, patellar component **Excludes:** revision of knee replacement, total (all components) (00.80) New code 00.84 Revision of total knee replacement, tibial insert (liner) Replacement of tibial insert (liner) **Excludes:** that with replacement of tibial component (tibial baseplate and liner) (00.81) New code 01.26 Insertion of catheter into cranial cavity Code also any concomitant procedure (e.g. resection (01.59)) New code 01.27 Removal of catheter from cranial cavity 03.53 Repair of vertebral fracture

Revise code Excludes: kyphoplasty (78.49) (81.66) Revise code vertebroplasty (78.49) (81.65)

36 Operations on vessels of heart

Revise code also note Code also any:

Revise code also note any injection or infusion of platelet inhibitor (99.20)

Add code also note injection or infusion of thrombolytic agent (99.10)

Delete code 36.01 Single vessel percutaneous transluminal coronary

angioplasty [PTCA] or coronary atherectomy without

mention of thrombolytic agent

Delete inclusion term Balloon angioplasty of coronary artery

Delete inclusion term Coronary atherectomy

Delete inclusion term Percutaneous coronary angioplasty NOS

Delete inclusion term PTCA NOS

Delete code also note

Code also any insertion of coronary stent(s) (36.06)

Excludes: multiple vessel percutaneous transluminal

coronary angioplasty [PTCA] or coronary atherectomy

performed during the same operation (36.05)

Delete code 36.02 Single vessel percutaneous transluminal coronary

angioplasty [PTCA] or coronary atherectomy with mention

of thrombolytic agent

Delete inclusion term Balloon angioplasty of coronary artery with infusion of

thrombolytic agent [streptokinase]

Delete inclusion term Coronary atherectomy

Delete exclusion term Excludes: multiple vessel percutaneous transluminal

coronary angioplasty [PTCA] or coronary atherectomy

performed during the same operation (36.05)

Delete exclusion term single vessel PTCA or coronary atherectomy

without mention of thrombolytic agent (36.01)

Delete code also note Code also any insertion of coronary stent(s) (36.06)

36.03 Open chest coronary artery angioplasty

Revise code also note
Add code also note

Add code also note number of vessels treated (00.40 - 00.43)

36.04 Intracoronary artery thrombolytic infusion Excludes:

Revise exclusion term that associated with any procedure in 36.02, 00.66, 36.03

Delete code 36.05-Multiple vessel percutaneous transluminal coronary

angioplasty [PTCA] or coronary atherectomy performed

during the same operation, with or without mention of thrombolytic

agent

Delete inclusion term Balloon angioplasty of multiple coronary arteries

Delete inclusion term Coronary atherectomy

Delete code also note Code also any:

Delete code also note intracoronary artery thrombolytic infusion (36.04)

Delete code also note <u>insertion of coronary stent(s) (36.06)</u>

mention of thrombolytic agent (36.01)

Delete exclusion term with mention of thrombolytic agent (36.02)

36.06 Insertion of non-drug-eluting coronary artery stent(s)

Code also any:

Add code also note $\frac{\text{number of vascular stents inserted }(00.45 - 00.48)}{\text{number of vascular stents inserted }(00.45 - 00.48)}$

Add code also note number of vessels treated (00.40 - 00.43)

Revise code also note percutaneous transluminal coronary angioplasty [PTCA] or coronary

atherectomy (36.01, 36.02, 36.05 00.66)

36.07 Insertion of drug-eluting coronary artery stent(s)

Code also any:

Add code also note number of vascular stents inserted (00.45 - 00.48)

Add code also note <u>number of vessels treated</u> (00.40 - 00.43)

Revise code also note percutaneous transluminal coronary angioplasty [PTCA] or coronary

atherectomy (36.01, 36.02, 36.05 00.66)

36.09 Other removal of coronary artery obstruction

Add code also note Code also any:

Add code also note $\frac{\text{number of vascular stents inserted}}{\text{number of vascular stents}}$

Add code also note number of vessels treated (00.40 - 00.43)

Excludes:

Revise exclusion term that by percutaneous transluminal coronary angioplasty [PTCA] or

coronary atherectomy (36.01, 36.02, 36.05 00.66)

36.1 Bypass anastomosis for heart revascularization

Add note Note: Do not assign codes from series 00.40 - 00.43 with codes from series

36.10-36.19

New category New code	37.4 Repair of heart and pericardium 37.41 Implantation of prosthetic cardiac support device around the heart Cardiac support device (CSD) Epicardial support device Fabric (textile) (mesh) device Ventricular support device on surface of heart Code also any: cardiopulmonary bypass [extracorporeal circulation] [heartlung machine] if performed (39.61) mitral valve repair (35.02, 35.12) mitral valve replacement (35.23 -35.24) transesophageal echocardiography (88.72) Excludes: circulatory assist systems (37.61 – 37.68)		
New code	37.49 Other repair of heart and pericardium		
Add exclusion term	37.6 Implantation of heart and circulatory assist system <u>Excludes: implantation of prosthetic cardiac support system</u> (37.41)		
Revise code title	37.7 Insertion, revision, replacement, and removal of pacemaker leads; insertion of temporary pacemaker system; or revision of cardiac device pocket		
Revise code title Add inclusion term	37.79 Revision or relocation of pacemaker cardiac device pocket Revision or relocation of pacemaker, defibrillator, or other implanted cardiac device pocket		
Add exclusion term	37.99 Other Excludes: implantation of prosthetic cardiac support device (37.41)		
Add code also note Add code also note Add code also note	38.1 Endarterectomy <u>Code also any:</u> <u>number of vascular stents inserted (00.45 – 00.48)</u> <u>number of vessels treated (00.40 – 00.43)</u>		
Add exclusion term	38.2 Diagnostic procedures on blood vessels <u>Excludes:</u> <u>adjunct vascular system procedures (00.40 – 00.43)</u>		

39.50 Angioplasty or atherectomy of other non-coronary vessel(s) Code also any:

Add code also note
Add code also note

number of vascular stents inserted (00.45 – 00.48)

number of vessels treated (00.40 - 00.43)

Delete code also note percutaneous insertion of carotid artery stent(s) (00.63)

New code

39.73 Endovascular implantation of graft in thoracic aorta

Endograft(s)

Endovascular graft(s)

Endovascular repair of defect of thoracic aorta with

graft(s) or device(s)
Stent graft(s) or device(s)

That for repair of aneurysm, dissection, or injury

Excludes: fenestration of dissecting aneurysm of thoracic

aorta (39.54)

39.79 Other endovascular repair (of aneurysm) of other vessels

Excludes:

Add exclusion term

endovascular implantation of graft in thoracic aorta (39.73)

39.90 Insertion of non-drug-eluting peripheral vessel stent(s)

Code also any:

Add code also note

number of vascular stents inserted (00.45 - 00.48)

Add code also note <u>number of vessels treated (00.40 - 00.43)</u>

77.8 Other partial ostectomy

Excludes:

Revise exclusion term

excision of head of femur with synchronous replacement (00.70-00.73,

81.51-81.53)

Revise title

78.1 Application of external <u>fixator</u> fixation device

Revise inclusion term Add code also note <u>MinifF</u>ixator with insertion of pins/wires/screws into bone Code also any type of fixator device, if known (84.71-84.73)

79 Reduction of fracture and dislocation

Revise code also note

Code also any:

Revise code also note <u>application of external fixator fixation device (78.10-78.19)</u>

Add code also note		type of fixator device, if known (84.71-84.73)
Delete inclusion term Add code also note Add code also note Add code also note	80.0	Arthrotomy for removal of prosthesis Includes: Cement spacer Code also any: insertion of (cement)(joint) spacer (84.56) removal of (cement)(joint) spacer (84.57)
Delete code also note	81.0	Spinal fusion Code also any 360 degree spinal fusion by a single incision (81.61)
Add inclusion term	81.06	Lumbar and lumbosacral fusion, anterior technique <u>Anterior lumbar interbody fusion (ALIF)</u>
Add inclusion term Add inclusion term	81.08	Lumbar and lumbosacral fusion, posterior technique Posterior lumbar interbody fusion (PLIF) Transforaminal lumbar interbody fusion (TLIF)
Revise category title	81.1	Arthrodesis and arthroereisis of foot and ankle
Add exclusion term	81.13	Subtalar fusion Excludes: arthroereisis (81.18)
New code	81.18	Subtalar joint arthroereisis
Delete code also note	81.3	Refusion of spine Code also any 360 degree spinal refusion by a single incision (81.61)
Add inclusion term	81.36	Refusion of lumbar and lumbosacral spine, anterior technique Anterior lumbar interbody fusion (ALIF)
Add inclusion term Add inclusion term	81.38	Refusion of lumbar and lumbosacral spine, posterior technique <u>Posterior lumbar interbody fusion (PLIF)</u> <u>Transforaminal lumbar interbody fusion (TLIF)</u>
Add code also note	81.51	Total hip replacement Code also any type of bearing surface, if known (00.74 – 00.76)

81.52 Partial hip replacement

Add code also note Code also any type of bearing surface, if known (00.74 - 00.76)

Revise code title 81.53 Revision of hip replacement, not otherwise specified

Delete inclusion term **Partial** Delete inclusion term **Total**

Add inclusion term Revision of hip replacement, not specified as to

components(s) replaced, (acetabular, femoral or both)

Add code also note Code also any:

Add code also note removal of (cement)(joint) spacer (84.57)

type of bearing surface, if known (00.74 - 00.76)Add code also note

Add exclusion term Excludes:

revision of hip replacement, components specified (00.70-00.73)

Revise code title 81.55 Revision of knee replacement, not otherwise specified Add code also note

Code also any removal of (cement) spacer (84.57)

Excludes:

Add exclusion term revision of knee replacement, components specified (00.80-00.84)

Delete code 81.61 360 degree spinal fusion, single incision approach

That by a single incision but fusing or refusing both

anterior and posterior spine Code also refusion of spine (81.30 -81.39) Code also spinal fusion (81.00 81.08)

New code 84.56 Insertion of (cement) spacer

Insertion of joint spacer

New code 84.57 Removal of (cement) spacer

Removal of joint spacer

New code 84.58 Implantation of interspinous process decompression device

Excludes: fusion of spine (81.00-81.08, 81.30-81.39)

84.7 Adjunct codes for external fixator devices New subcategory

Code also any primary procedure performed:

application of external fixator device (78.10, 78.12-78.13, 78.15, 78.17-

78.19)

reduction of fracture and dislocation (79.00-79.89)

New code 84.71 Application of external fixator device, monoplanar system

Excludes:

other hybrid device or system (84.73)

ring device or system (84.72)

New code 84.72 Application of external fixator device, ring system

Ilizarov type Sheffield type

Excludes:

monoplanar device or system (84.71) other hybrid device or system (84.73)

New Code 84.73 Application of hybrid external fixator device

Hybrid system using both ring and monoplanar devices

Excludes:

monoplanar device or system, when used alone (84.71)

ring device or system, when used alone (84.72)

86.09 Other incision of skin and subcutaneous tissue

Delete inclusion term Creation of loop recorder pocket, new site and

insertion/relocation of device

Delete inclusion term Creation of pocket for implantable, patient-activated

cardiac event recorder and insertion/relocation of

device

Excludes:

Add exclusion term <u>creation of loop recorder pocket, new site and</u>

insertion/relocation of device (37.79)

Add exclusion term creation of pocket for implantable, patient-activated cardiac event

recorder and insertion/relocation of device (37.79)

Add exclusion term removal of catheter from cranial cavity (01.27)

Revise code title 86.94 Insertion or replacement of single array neurostimulator

pulse generator, not specified as rechargeable

Add exclusion term Excludes: insertion or replacement of single array rechargeable

neurostimulator pulse generator (86.97)

Revise code title 86.95 Insertion or replacement of dual array neurostimulator

pulse generator, not specified as rechargeable

Add exclusion term Excludes: insertion or replacement of dual array rechargeable

neurostimulator pulse generator (86.98)

86.96 Insertion or replacement of other neurostimulator pulse generator

Excludes:

Revise exclusion term insertion of dual array neurostimulator pulse generator (86.95, 86.98) insertion of single array neurostimulator pulse generator (86.94, 86.97)

New code 86.97 Insertion or replacement of single array rechargeable

neurostimulator pulse generator

Rechargeable pulse generator (single array, single channel) for intracranial, spinal, and peripheral neurostimulator

Code also any associated lead implantation (02.93,03.93,04.92)

New code 86.98 Insertion or replacement of dual array rechargeable

neurostimulator pulse generator

Rechargeable pulse generator (dual array, dual channel) for intracranial, spinal, and peripheral neurostimulator

Code also any associated lead implantation (02.93,03.93,04.92)

88.77 Diagnostic ultrasound of peripheral vascular system

Add exclusion term Excludes:

adjunct vascular system procedures (00.40 – 00.43)

New code 92.20 Infusion of liquid brachytherapy radioisotope

I-125 radioisotope

Intracavitary brachytherapy Includes: removal of radioisotope

92.27 Implantation or insertion of radioactive elements

Add exclusion term

Excludes:

Add exclusion term <u>infusion of liquid brachytherapy radioisotope (92.20)</u>

92.28 Injection or instillation of radioisotopes

Add exclusion term

Excludes:

Add exclusion term infusion of liquid brachytherapy radioisotope (92.20)

93.5 Other immobilization, pressure, and attention to wound

Excludes:

Add exclusion term <u>external fixator device (84.71-84.73)</u>

99.10 Injection or infusion of thrombolytic agent

Excludes:

Delete exclusion term single vessel percutaneous transluminal coronary angioplasty [PTCA]

or coronary atherectomy with mention of thrombolytic agent (36.02)

Index

Aneurysmorrhaphy NEC 39.52

by or with

endovascular graft

Revise code thoracic aorta 39.79 39.73

Angioplasty (laser) – see also Repair, blood vessel

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

balloon

Revise subterm coronary artery (single vessel) 36.01 <u>00.66</u>

Delete subterm with thrombolytic agent infusion 36.02

Delete subterm multiple vessels 36.05

coronary 36.09

Revise subterm percutaneous transluminal (balloon) (single vessel) 36.01 <u>00.66</u>

Delete subterm with thrombolytic agent infusion 36.02

multiple vessel 36.05

Revise subterm percutaneous transluminal (balloon) (single vessel)
Revise subterm coronary (balloon) (single vessel) 36.01-00.66

Delete subterm with thrombolytic agent infusion (36.02

Delete subterm multiple vessels 36.05

Application

Revise subterm bone morphogenetic protein (<u>Infuse TM</u>)(<u>OP-1TM</u>) (recombinant)(rhBMP)

84.52

Revise subterm external fixation fixator device (bone) 78.10

Add subterm <u>hybrid device or system 84.73</u>

Add subterm <u>Ilizarov type 84.72</u>

Add subterm <u>monoplanar system or device 84.71</u>

Add subterm <u>ring device or system 84.72</u>

Add subterm Sheffield type 84.72

Arthrodesis (compression) (extra-articular) (intra-articular) (with bone

graft) (with fixation device) lumbosacral, lumbar NEC 81.08

Add subterm

ALIF (anterior lumbar interbody fusion) 81.06

Add subterm

Add subterm

ALIF (posterior lumbar interbody fusion) 81.08

TLIF (transforaminal lumbar interbody fusion) 81.08

Add term <u>Arthroereisis, subtalar joint 81.18</u>

Add term
Add subterm

Add term Cardiac support device (CSD) 37.41

Revise term Cardiorrhaphy 37.4 37.49

Closure – see also Repair

fistula

Revise subterm pleuropericardial 37.4 37.49

Add term CorCap TM 37.41

Creation - see also Formation

Revise subterm cardiac device (defibrillator) (pacemaker) pocket

Revise subterm with initial insertion of pacemaker cardiac device – omit code

pocket

Revise subterm cardiac device (defibrillator) (pacemaker)

Revise subterm with initial insertion of pacemaker cardiac device – *omit code*

Revise code loop recorder 86.09 37.79

Debridement

Add subterm <u>bursa</u> 83.5 Add subterm <u>fascia</u> 83.39

Add term <u>Device</u>

Add note

Add subterm <u>CorCapTM 37.41</u>

Add subterm external fixator – *see* Fixator, external

Endarterectomy (gas)(with patch graft) 38.10

head and neck (open) NEC 38.12

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

intracranial (open) NEC 38.11

Delete subterm percutaneous approach, precerebral (extracranial) vessel(s) 00.61

Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular stents inserted

Endoaneurysmorrhaphy (see also Aneurysmorrhaphy) 39.52

by or with

endovascular graft

Revise code thoracic aorta 39.79 39.73

Fixation

bone

external, without reduction 93.59

Add subterm external fixator – see Fixator, external

Add subterm
Add subterm
Add subterm
Add subterm

Add subterm

Other cast 93.53

Add subterm splint 93.54

Add term Fixator, external

Add subterm <u>hybrid device or system 84.73</u>

Add subterm <u>Ilizarov type 84.72</u>

Add subterm <u>monoplanar system 84.71</u>

Add subterm ring device or system 84.72

Add subterm Sheffield type 84.72

Formation

Revise subterm cardiac <u>device (defibrillator) (pacemaker)</u> pocket

Revise subterm with initial insertion of pacemaker cardiac device – omit code

pocket

Revise subterm cardiac <u>device</u> (<u>defibrillator</u>) (<u>pacemaker</u>)

Revise subterm with initial insertion of pacemaker cardiac device – omit code

Add subterm <u>loop recorder</u> <u>37.79</u>

Fusion

spinal (with graft)(with internal fixation)(with instrumentation) 81.00

Delete subterm 360 degree 81.61

Add subterm

Girdlestone operation

Revise subterm resection of femoral head and neck (without insertion of joint prosthesis) 77.85

Add subterm <u>with replacement prosthesis - see Implant, joint, hip</u>

Add subterm resection of hip prosthesis 80.05

Add subterm with replacement prosthesis - see Implant, joint, hip

Graft, grafting

aneurysm 39.52 endovascular

Revise code thoracic aorta 39.79 39.73

Implant, implantation

Revise subterm bone morphogenetic protein (Infuse TM))(OP-1TM)(recombinant)

(rhBMP) 84.52

cardiac resynchronization device

Revise subterm defibrillator (CRT-D) (device and one or more leads) (total

system) 00.51

Revise subterm pacemaker (CRT-P) (device and one or more leads) (total system)

00.50

Add subterm <u>cardiac support device (CSD) 37.41</u>

Add subterm CorCapTM 37.41

Revise subterm CRT-D (cardiac resynchronization defibrillator) (device and one or more leads) 00.51 Revise subterm CRT-P (cardiac resynchronization pacemaker) (device and one or more leads) 00.50 device Add subterm cardiac support device (CSD) 37.41 Add subterm CorCapTM 37.41 Add subterm epicardial support device 37.41 prosthetic cardiac support device 37.41 Add subterm Add subterm ventricular support device 37.41 heart Add subterm cardiac support device (CSD) 37.41 CorCapTM 37.41 Add subterm Add subterm epicardial support device 37.41 Add subterm prosthetic cardiac support device 37.41 ventricular support device 37.41 Add subterm joint (prosthesis) (silastic) (Swanson type) NEC 81.96 femoral (bipolar endoprosthesis) 81.52 Add subterm revision NOS 81.53 Add subterm acetabular and femoral components (total) 00.70 Add subterm acetabular component only 00.71 Add subterm acetabular liner and/or femoral head only 00.73 femoral component only 00.72 Add subterm femoral head only and/or acetabular liner 00.73 Add subterm total (acetabular and femoral components) 00.70 Add subterm hip (partial) 81.52 revision NOS 81.53 Revise subterm Add subterm acetabular and femoral components (total) 00.70 Add subterm acetabular component only 00.71 acetabular liner and/or femoral head only 00.73 Add subterm Add subterm femoral component only 00.72 femoral head only and/or acetabular liner 00.73 Add subterm Add subterm partial Add subterm acetabular component only 00.71 Add subterm acetabular liner and/or femoral head only 00.73 femoral component only 00.72 Add subterm Add subterm femoral head only and/or acetabular liner 00.73 total (acetabular and femoral components) 00.70 Add subterm total 81.51 Revise subterm revision (acetabular and femoral components) 00.70

knee (partial) (total) 81.54

Revise subterm revision NOS 81.55

Add subterm femoral component 00.82

Add subterm <u>partial</u>

Add subterm

I ibial component 00.81
I ibial insert 00.84

Add subterm total (all components) 00.80

neurostimulator

pulse generator 86.96 dual array 86.95

Add subterm <u>rechargeable</u> 86.98

single array 86.94

Add subterm <u>rechargeable</u> <u>86.97</u>

pacemaker

cardiac (device) (initial) (permanent) (replacement) 37.80

resynchronization device (CRT-P)

Revise subterm total system (device and one or more leads) 00.50

prosthesis, prosthetic device

Add subterm cardiac support device (CSD) (CorCapTM) 37.41

femoral head (Austin-Moore) (bipolar) (Eicher)

(Thompson) 81.52 revision NOS 81.53

Add subterm <u>acetabular and femoral components (total) 00.70</u>

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm partial

Add subterm

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm <u>femoral component only 00.72</u>

Add subterm
Add subterm

femoral head only and/or acetabular liner 00.73

total (acetabular and femoral components) 00.70

joint (Swanson type) NEC 81.96 hip (partial) 81.52 Add subterm revision NOS 81.53

Add subterm acetabular and femoral components (total) 00.70

Add subterm <u>acetabular component only 00.71</u>

Add subterm <u>acetabular liner and/or femoral head only 00.73</u>

Add subterm <u>femoral component only 00.72</u>

Add subterm <u>femoral head only and/or acetabular liner 00.73</u>

Add subterm <u>partial</u>

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm total (acetabular and femoral components) 00.70

total 81.51

Add subterm revision (acetabular and femoral components) 00.70

knee (partial) (total) 81.54

Revise subterm revision NOS 81.55

Add subterm <u>femoral component 00.82</u>

Add subterm <u>partial</u>

Add subterm

Add subterm <u>tibial component 00.81</u> Add subterm tibial insert 00.84

Add subterm total (all components) 00.80

Add subterm spine NEC 84.59

Add subterm interspinous process decompression device 84.58

Infusion (intra-arterial)(intravenous)

Add subterm immunosuppressive antibody therapy 00.18

Add subterm radioisotope (liquid brachytherapy) (liquid I-125) 92.20

thrombolytic agent (enzyme) (streptokinase) 99.10

with percutaneous transluminal angioplasty

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated.

Revise subterm coronary (single vessel) 36.02 00.66

Delete subterm multiple vessels 36.05

Injection (into)(hypodermically)(intramuscularly) (intravenously)(acting locally or systemically) thrombolytic agent (enzyme) (streptokinase) 99.10

with percutaneous transluminal angioplasty

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated.

Revise subterm coronary (single vessel) 36.02 00.66

Delete subterm multiple vessels 36.05

Insertion

Revise subterm bone morphogenetic protein (Infuse TM))(OP-1TM)(recombinant)

(rhBMP) 84.52

cardiac resynchronization device

Revise subterm defibrillator (CRT-D) (total system) (device and one

or more leads) 00.51

Revise subterm pacemaker (CRT-P) (total system) (device and one or

more leads) 00.50

Add subterm cardiac support device (CSD) (CorCapTM) 37.41

carotid artery stent(s) (stent graft) 00.63

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

catheter

Add subterm <u>cranial cavity 01.26</u>

Add subterm CorCapTM 37.41

coronary (artery)

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

Revise subterm CRT-D (cardiac resynchronization defibrillator) (device

and one or more leads) 00.51

Revise subterm CRT-P (cardiac resynchronization pacemaker) (device

and one or more leads) 00.50

device

Add subterm cardiac support device (CSD) 37.41

Add subterm CorCapTM 37.41

Add subterm epicardial support device 37.41

Add subterm prosthetic cardiac support device 37.41

Add subterm ventricular support device 37.41

endograft(s), endovascular graft(s) Add subterm endovascular, abdominal aorta 39.71

Add subterm endovascular, thoracic aorta 39.73

heart

Add subterm cardiac support device (CSD) 37.41

Add subterm CorCapTM 37.41

epicardial support device 37.41 Add subterm

Add subterm prosthetic cardiac support device 37.41

ventricular support device 37.41 Add subterm

hip prosthesis (partial) 81.52

Revise subterm revision NOS 81.53

Add subterm acetabular and femoral components (total) 00.70

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm partial

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73 total (acetabular and femoral components) 00.70 Add subterm

total 81.51

Revise subterm revision 81.53

Add subterm acetabular and femoral components (total) 00.70 Add subterm total (acetabular and femoral components) 00.70

Add subterm knee prosthesis (partial (total) 81.54

Add subterm revision NOS 81.55

Add subterm femoral component 00.82

Add subterm partial

Add subterm femoral component 00.82 patellar component 00.83 Add subterm Add subterm tibial component 00.81 Add subterm tibial insert 00.84 Add subterm patellar component 00.83 Add subterm tibial component 00.81

Add subterm tibial insert 00.84 Add subterm total (all components) 00.80

Revise code loop recorder 86.09 37.79

non-coronary vessel stent(s) (stent graft)

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the total

number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

pacemaker

cardiac (device) (initial) (permanent) (replacement) 37.80

resynchronization (CRT-P) (device)

Revise subterm total system (device and one or more leads) 00.50

prosthesis, prosthetic device acetabulum (partial) 81.52

Add subterm <u>hip 81.52</u>

Add subterm revision NOS 81.53

Add subterm <u>acetabular and femoral components (total) 00.70</u>

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm <u>partial</u>

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73
Add subterm total (acetabular and femoral components) 00.70

Add subterm cardiac support device (CSD) (CorCapTM) 37.41

hip (partial) 81.52

Revise subterm revision NOS 81.53

Add subterm acetabular and femoral components (total) 00.70

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm partial

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73
Add subterm total (acetabular and femoral components) 00.70

total 81.51

Revise subterm revision 81.53

Add subterm acetabular and femoral components (total) 00.70
Add subterm total (acetabular and femoral components) 00.70

knee (partial (total) 81.54

Revise subterm revision NOS 81.55

Add subterm <u>femoral component 00.82</u>

Add subterm <u>partial</u>

Add subterm

Add subterm total (all components) 00.80

Revise subterm spacer (cement) (joint) in joint – see category 80.0 84.56

spine

Add note

Add subterm <u>interspinous process decompression device</u> 84.58

stent(s) (stent graft)

artery (bare) (bonded) (drug-coated) (non-drug-eluting)

Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

coronary (artery) (bare) (bonded) (drug-coated) (non-drug-eluting) 36.06

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

non-coronary vessel

Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the

> total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

peripheral 39.90

Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the

> total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

precerebral 00.64

Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the

> total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

subclavian 39.90

Add note Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the

> total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

vertebral 00.64

Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the

> total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular

stents inserted.

Latzko operation

Revise code colpocleisis 70.4 70.8

Revise subterm

Operation

Girdlestone

resection of femoral head and neck (without insertion of joint prosthesis)

Add subterm with replacement prosthesis - see Implant, joint, hip

Add subterm resection of hip prosthesis 80.05

with replacement prosthesis - see Implant, joint, hip Add subterm

Revise code Pericardioplasty 37.4 37.49

Revise code Pericardiorrhaphy 37.4 37.49 Refusion

spinal, NOS 81.30

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Add subterm

Add subterm

Add subterm

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Add subterm transforaminal lumbar interbody fusion (TLIF) 81.38

Relocation – see also Revision

Revise subterm cardiac device (CRT-D) (CRT-P) (defibrillator) (pacemaker)

pocket, new site (skin) (subcutaneous) 37.79

Revise code CRT-D pocket 37.99 37.79

Removal– see also Excision

catheter (indwelling) - see also Removal, tube

Add subterm <u>cranial cavity</u> <u>01.27</u>

coronary artery obstruction (thrombus) 36.09

Revise subterm percutaneous transluminal (balloon) (single vessel) 36.01-00.66

Add note <u>Note: Also use 00.40, 00.41, 00.42, or 00.43 to show the</u>

total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

Delete subterm with thrombolytic agent infusion 36.02

Delete subterm multiple vessels 36.05

device (therapeutic) NEC 97.89

Add subterm spine 80.09

neurostimulator

pulse generator (single array, dual array) 86.05

with synchronous replacement 86.96

dual array 86.95

Add subterm <u>rechargeable</u> 86.98

single array 86.94

Add subterm <u>rechargeable</u> 86.97

Add subterm spacer (cement) (joint) 84.57

tube

Add subterm cranial cavity 01.27

Repair aneurysm (false)(true) 39.52 by or with endovascular graft 39.79 Revise code thoracic aorta 39.79 39.73 artery NEC 39.59 by endovascular approach Add subterm abdominal aorta 39.71 percutaneous repair of intracranial vessel(s) (for stent insertion) 00.62 Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular stents inserted. percutaneous repair of precerebral (extracranial) vessel(s) (for stent insertion) 00.61 Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular stents inserted. Add subterm thoracic aorta 39.73 non-coronary percutaneous transluminal angioplasty or atherectomy *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the Add note total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular stents inserted. blood vessel NEC 39.59 peripheral vessel NEC 39.59 by angioplasty 39.50 Add note *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the total number of vessels treated. In addition, use 00.45, 00.46, 00.47, or 00.48 to show the number of vascular stents <u>inserted</u>. by atherectomy 39.50 *Note:* Also use 00.40, 00.41, 00.42, or 00.43 to show the Add note total number of vessels treated. In addition, use

00.45, 00.46, 00.47, or 00.48 to show the number of

vascular stents inserted.

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Revise code heart 37.4 37.49

Revise code

Revise code pericardium 37.4 37.49

Replacement

cardiac resynchronization device

Revise subterm defibrillator (CRT-D) (device and one or more leads) (total system)

00.51

Revise subterm pacemaker (CRT-P) (<u>device and one or more leads</u>) (total system)

00.50

Revise subterm CRT-D (cardiac resynchronization defibrillator) (device

and one or more leads) 00.51

Revise subterm CRT-P (cardiac resynchronization pacemaker) (device

and one or more leads) 00.50

Revision

Revise subterm hip replacement (acetabulum) (femoral head) (partial) (total)

NOS 81.53

Add subterm acetabular and femoral components (total) 00.70

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm <u>femoral component only 00.72</u>

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm <u>partial</u>

Add subterm acetabular component only 00.71

Add subterm <u>acetabular liner and/or femoral head only 00.73</u>

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73
Add subterm total (acetabular and femoral components) 00.70

joint replacement

Delete subterm acetabulum 81.53

Add subterm <u>acetabular and femoral components (total)</u> 00.70

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Revise subterm femoral head 81.53 only and/or acetabular liner 00.73

Revise subterm hip (partial) (total) 81.53

Add subterm acetabular and femoral components (total) 00.70

Add subterm acetabular component only 00.71

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73 Add subterm partial Add subterm acetabular component only 00.71 Add subterm acetabular liner and/or femoral head only 00.73 Add subterm femoral component only 00.72 femoral head only and/or acetabular liner 00.73 Add subterm Add subterm total (acetabular and femoral components) 00.70 Revise subterm knee replacement NOS 81.55 femoral component 00.82 Add subterm partial Add subterm Add subterm femoral component 00.82 Add subterm patellar component 00.83 Add subterm tibial component 00.81 tibial insert 00.84 Add subterm Add subterm patellar component 00.83 tibial component 00.81 Add subterm Add subterm tibial insert 00.84 total (all components) 00.80 Add subterm Revise subterm knee replacement (prosthesis) NOS 81.55 femoral component 00.82 Add subterm Add subterm partial Add subterm femoral component 00.82 Add subterm patellar component 00.83 Add subterm tibial component 00.81 Add subterm tibial insert 00.84 patellar component 00.83 Add subterm tibial component 00.81 Add subterm tibial insert 00.84 Add subterm Add subterm total (all components) 00.80 pocket Revise subterm cardiac device (defibrillator) (pacemaker) with initial insertion of pacemaker-cardiac device – omit code Revise subterm Revise subterm new site (cardiac device pocket) (skin) (subcutaneous) 37.79 prosthesis Delete subterm acetabulum Delete subterm hip 81.53 Add subterm acetabular and femoral components (total) 00.70 acetabular component only 00.71 Add subterm Add subterm acetabular liner and/or femoral head only 00.73 Add subterm femoral component only 00.72 Revise subterm femoral head 81.53 only and/or acetabular liner 00.73 Revise subterm hip (partial) (total) 81.53 acetabular and femoral components (total) 00.70 Add subterm

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm <u>femoral component only 00.72</u>

Add subterm femoral head only and/or acetabular liner 00.73

Add subterm <u>partial</u>

Add subterm <u>acetabular component only 00.71</u>

Add subterm acetabular liner and/or femoral head only 00.73

Add subterm femoral component only 00.72

Add subterm femoral head only and/or acetabular liner 00.73
Add subterm total (acetabular and femoral components) 00.70

Revise subterm knee NOS 81.55

Add subterm femoral component 00.82

Add subterm <u>partial</u>

Add subterm

Add subterm total (all components) 00.80

Add term <u>STARR (stapled transanal rectal resection)</u> 70.52

Suture (laceration)

Revise code heart 37.4 37.49

Revise code pericardium 37.4 37.49

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Revise code nonstress (fetal activity acceleration determinations) 75.35 75.34

Effective October 1, 2005

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tuberculous (see also Tuberculosis) 015.0 [730.88]

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nontuberculous 728.89

tuberculous (see also Tuberculosis) 015.0 [730.88]

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antifungals 760.74

antimetabolics 760.78

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through placenta or breast milk (fetus or newborn) 760.70

anticonvulsants 760.77

antifungals 760.74

antimetabolics 760.78

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ICD-9-CM Index Addenda (FY06)

Key: Underline – Add

1

Strikeout – Delete

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               pneumonia 770.16
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       28.0-28.9 V85.24
       29.0-29.9 V85.25
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       33.0-33.9 V85.33
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           30.0-30.9 V85.30
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           32.0-32.9 V85.32
           33.0-33.9 V85.33
           34.0-34.9 V85.34
           35.0-35.9 V85.35
           36.0-36.9 V85.36
           37.0-37.9 V85.37
           38.0-38.9 V85.38
           39.0-39.9 V85.39
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    esophagostomy 530.87
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           following (elective) fetal reduction 651.7
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        edema 250.5 [362.07]
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Key: Underline – Add Strikeout – Delete

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     with
       <u>chronic kidney disease ------403.01 -----403.11 ---- 403.91</u>
<u>and heart failure ------404.03 -----404.13 ---- 404.93</u>
       heart failure -----404.01 ---- 404.11 ---- 404.91
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   alcohol induced 291.82
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   drug induced 292.85
   due to
       medical condition classified elsewhere 327.01
       mental disorder 327.02
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Key:

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   idiopathic 307.42
   organic 327.00
       other 327.09
   paradoxical 307.42
   primary 307.42
   psychophysiological 307.42
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       acute 593.9
       chronic 585.9
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Key:

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Mitchell's disease (erythromelalgia) 443.82
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       mesentery <u>567.82</u>
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       fat 567.82
   omentum 557.0
       fat 567.82
   peritoneum 557.0
       fat 567.82
Neoplasm, neoplastic
                                                   Malig-
                                                               Malig-
                                                                                 Uncer-
                                        Malig-
                                                   nant
                                                               nant
                                                                                 tain
                                        nant
                                                   Second-
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                                                                                 Behav- Unspeci-
                                        Primary
                                                   ary
                                                               situ
                                                                       Benign
                                                                                 ior
                                                                                          fied
   posterior fossa (cranial)
                                        191.9
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           (epithelial) (familial) (focal) (granulomatous) (hemorrhagic) (infantile) (nonsuppurative,
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       antiandrogens 760.79
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       divalproex sodium 760.77
       endocrine disrupting chemicals 760.79
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       lithium 760.79
       Iovastatin 760.78
       methotrexate 760.78
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       simvastatin 760.78
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           due to
               benign prostatic hypertrophy (BPH) - see category 600
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Pathologic, pathological - see also condition
   asphyxia 799.01
PBA (pseudobulbar affect) 310.8
Pelviperitonitis
   male (see also Peritonitis) 567.21
Pericarditis (granular) (with decompensation) (with effusion) 423.9
   uremic 585.9 [420.0]
Periodic - see also condition
   limb movement disorder 327.51
Peritonitis (acute) (adhesive) (fibrinous) (hemorrhagic) (idiopathic) (localized) (perforative) (primary)
            (with adhesions) (with effusion) 567.9
   with or following
        abscess 567.21
   bacterial 567.29
        spontaneous 567.23
   bile, biliary 567.81
   chronic proliferative 567.89
   diaphragmatic 567.22
   diffuse NEC 567.29
   disseminated NEC 567.29
   due to
        bile 567.81
        urine 567.89
   fibrinopurulent 567.29
   fibrinous 567.29
   fibropurulent 567.29
   general, generalized (acute) 567.21
   pelvic
       male (acute) 567.21
   phlegmonous 567.29
```

Key: Underline – Add Strikeout – Delete

Underline italic - Revise

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```
Peritonitis, continued
   proliferative, chronic 567.89
   purulent 567.29
   septic 567.29
   spontaneous bacterial 567.23
   staphylococcal 567.29
   streptococcal 567.29
   subdiaphragmatic 567.29
   subphrenic 567.29
   suppurative 567.29
   urine 567.89
Persistence, persistent (congenital) 759.89
   Gartner's duct 752.41
Pneumonia (acute) (Alpenstich) (benign) (bilateral) (brain) (cerebral) (circumscribed) (congestive)
           (creeping) (delayed resolution) (double) (epidemic) (fever) (flash) (fulminant) (fungoid)
           (granulomatous) (hemorrhagic) (incipient) (infantile) (infectious) (infiltration) (insular)
           (intermittent) (latent) (lobe) (migratory) (newborn) (organized) (overwhelming) (primary)
           (progressive) (pseudolobar) (purulent) (resolved) (secondary) (senile) (septic)
           (suppurative) (terminal) (true) (unresolved) (vesicular) 486
   aspiration 507.0
       fetal 770.18
           due to
               blood 770.16
               clear amniotic fluid 770.14
               meconium 770.12
               postnatal stomach contents 770.86
       newborn 770.18
           due to
               blood 770.16
               clear amniotic fluid 770.14
               meconium 770.12
               postnatal stomach contents 770.86
   congenital (infective) 770.0
       aspiration <u>770.18</u>
   intrauterine (infective) 770.0
       aspiration 770.18
           blood 770.16
           clear amniotic fluid 770.14
           meconium 770.12
           postnatal stomach contents 770.86
   meconium aspiration 770.12
Pneumonitis (acute) (primary) (see also Pneumonia) 486
   aspiration 507.0
       fetal 770.18
           due to
               blood 770.16
               clear amniotic fluid 770.14
               meconium 770.12
               postnatal stomach contents 770.86
       newborn 770.18
           due to
               blood 770.16
               clear amniotic fluid 770.14
               meconium 770.12
               postnatal stomach contents 770.86
```

```
Pneumonitis, continued
   fetal aspiration 770.18
       due to
           blood 770.16
           clear amniotic fluid 770.14
           meconium 770.12
           postnatal stomach contents 770.86
   meconium aspiration 770.12
Polyneuropathy (peripheral) 356.9
       uremia 585.9 [357.4]
Pregnancy (single) (uterine) (without sickness) V22.2
   complicated (by) 646.9
       current disease or condition (nonobstetric)
           female genital mutilation 648.9
       female genital mutilation 648.9
       fetal
           reduction of multiple fetuses reduced to single fetus 651.7
   examination, pregnancy
       positive result V72.42
   multiple NEC 651.9
       following (elective) fetal reduction 651.7
       specified type NEC 651.8
           following (elective) fetal reduction 651.7
   quadruplet NEC 651.2
       following (elective) fetal reduction 651.7
   quintuplet NEC 651.8
       following (elective) fetal reduction 651.7
   sextuplet NEC 651.8
       following (elective) fetal reduction 651.7
   superfecundation NEC 651.9
       following (elective) fetal reduction 651.7
   superfetation NEC 651.9
       following (elective) fetal reduction 651.7
   triplet NEC 651.1
       following (elective) fetal reduction 651.7
   twin NEC 651.0
       following (elective) fetal reduction 651.7
Problem (with) V49.9
   feeding (elderly) (infant) 783.3
       nonorganic 307.59
   marital V61.10
       relationship V61.10
   parent-child V61.20
       relationship V61.20
   partner V61.10
       relationship V61.10
   sibling relational V61.8
       relational V61.8
       relationship V61.8
Prolonged, prolongation
   QT interval 794.31
       syndrome 426.82
Pseudobulbar affect (PBA) 310.8
```

```
Pseudohermaphroditism 752.7
   male (without gonadal disorder) 752.7
       with
           feminizing testis 259.5
Pseudomeningocele (cerebral) (infective) (surgical) 349.2
   postprocedural 997.01
Psychosis 298.9
   organic NEC 294.9
       due to or associated with
           disease
               Jakob-Creutzfeldt (new variant)
           Jakob-Creutzfeldt disease (syndrome) (new variant)
Purpura 287.2
   hemorrhagic (see also Purpura, thrombocytopenic) 287.39
       thrombocytopenic 287.39
   idiopathic 287.31
       thrombocytopenic 287.31
   immune thrombocytopenic 287.31
    thrombocytopenic (congenital) (essential) (hereditary) (idiopathic) (primary) (see also
           Thrombocytopenia) 287.30
       congenital 287.33
       essential 287.30
       hereditary 287.31
       idiopathic 287.31
       immune 287.31
       primary 287.30
   thrombopenic (congenital) (essential) (see also Thrombocytopenia) 287.30
       congenital 287.33
       essential 287.30
   Werlhof's (see also Purpura, thrombocytopenic) 287.39
Pyopneumothorax (infectional) 510.9
   subdiaphragmatic (see also Peritonitis) 567.29
    subphrenic (see also Peritonitis) 567.29
Quadriparesis - see Quadriplegia
    meaning muscle weakness 728.87
Quadruplet
   pregnancy (complicating delivery) NEC 651.8
       following (elective) fetal reduction 651.7
Quintuplet
   pregnancy (complicating delivery) NEC 651.2
       following (elective) fetal reduction 651.7
Rape- see Injury, by site 959.9
   adult 995.83
   child 995.53
Rapid
   time-zone change syndrome 327.35
   obsessive (-compulsive)-compulsive 300.3
Reifenstein's syndrome (hereditary familial hypogonadism, male) 259.5
Respiration
   periodic 786.09
       high altitude 327.22
```

Underline – Add

Key:

```
Retention, retained
   urine NEC 788.20
       bladder, incomplete emptying 788.21
           due to
               benign prostatic hypertrophy (BPH) - see category 600
       due to
           benign prostatic hypertrophy (BPH) - see category 600
Retinitis (see also Chorioretinitis) 363.20
   albuminurica <u>585.9</u> [363.10]
    renal 585.9 [363.13]
Retinopathy (background) 362.10
   diabetic 250.5 [362.01]
        nonproliferative 250.5 [362.03]
           mild 250.5 [362.04]
           moderate 250.5 [362.05]
           severe 250.5 [362.06]
   nonproliferative
       diabetic 250.5 [362.03]
           mild 250.5 [362.04]
           moderate 250.5 [362.05]
           severe 250.5 [362.06]
Rhoads and Bomford anemia (refractory) 238.7
Rhythm
   sleep, inversion 327.39
Risk
   falling V15.88
Romano-Ward syndrome (prolonged QT interval syndrome) 426.82
Saponification, mesenteric <u>567.89</u>
Schloffer's tumor (see also Peritonitis) 567.29
Schoffer's tumor (see also Peritonitis) 567.29
Sciatica (infectional) 724.3
   wallet 724.3
Seizure 780.39
   febrile 780.31
       with status epilepticus 345.3
   pregnancy (complicating delivery) NEC 651.8
       following (elective) fetal reduction 651.7
Sexual
   impotence (psychogenic) 607.84
       psychogenic 302.72
Shifting
   sleep-work schedule (affecting sleep) 327.36
Sleep
   disorder 780.50
       movement, unspecified 780.58
   movement disorder, unspecified 780.58
    related movement disorder, unspecified 780.58
   rhythm inversion 327.39
Stain, staining
   meconium 779.84
Status (post)
   bed confinement V49.84
   dialysis (hemo) (peritoneal) V45.1
   hemodialysis V45.1
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Underline italic – Revise

```
Status (post), continued
   peritoneal dialysis V45.1
    respirator [ventilator]V46.11
       encounter-during power failure V46.12
               mechanical failure V46.14
               power failure V46.12
           for weaning V46.13
   ventilator [respirator] V46.11
       encounter-during power failure V46.12
           durina
               mechanical failure V46.14
               power failure V46.12
           for weaning V46.13
Stickler syndrome 759.89
Strangulation, strangulated 994.7
    mucus (see also Asphyxia, mucus) 933.1
       newborn 770.18
Stroke 434.91
    hemorrhagic - see Hemorrhage, brain
Suffocation (see also Asphyxia) 799.01
Suicide, suicidal (attempted)
    ideation V62.84
Superfecundation 651.9
    following (elective) fetal reduction 651.7
Superfetation 651.9
   following (elective) fetal reduction 651.7
Suppuration, suppurative - see also condition
   pelvis, pelvic
       male (see also Peritonitis) 567.21
Syndrome - see also Disease
    Alagille 759.89
    androgen insensitivity 259.5
   apical ballooning 429.89
    aspiration, of newborn (massive) (meconium) 770.18
       meconium 770.12
    Barth 759.89
   carbohydrate-deficient glycoprotein (CDGS) 271.8
   congenital
       congenital central alveolar hypoventilation 327.25
   Creutzfeldt-Jakob (new variant) 046.1
    Evans' (thrombocytopenic purpura) 287.32
    Gianotti Crosti 057.8
       due to known virus- see Infection, virus
       due to unknown virus 057.8
    Goldberg (-Maxwell) (-Morris) (testicular feminization) 259.5
    insufficient sleep 307.44
    Jakob-Creutzfeldt (new variant) 046.1
    Jervell-Lange-Nielsen 426.82
   jet lag 327.35
    Kasabach-Merritt (capillary hemangioma associated with thrombocytopenic purpura) 287.39
   Kleine-Levin 327.13
    Luetscher's (dehydration) 276.51
   massive aspiration of newborn 770.18
```

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Syndrome, continued
   meconium
       aspiration 770.12
   Morris (testicular feminization) 259.5
    Mounier-Kuhn 748.3
       with acute exacerbation 494.1
           acute exacerbation 494.1
           bronchiectasis 494.0
               with (acute) exacerbation 494.1
       acquired 519.1
           with bronchiectasis 494.0
               with (acute) exacerbation 494.1
    QT interval prolongation 426.82
    rapid time-zone change 327.35
    Reifenstein's (hereditary familial hypogonadism, male) 259.5
    Romano-Ward (prolonged QT interval syndrome) 426.82
   Stickler 759.89
   testicular feminization 259.5
   thrombopenia-hemangioma 287.39
    time-zone (rapid) 327.35
    uremia, chronic 585.9
   Werlhof-Wichmann (see also Purpura, thrombocytopenic) 287.39
Tachycardia 785.0
    AV nodal re-entry (re-entrant) 427.89
Talc granuloma 728.82
   in operation wound 998.7
Test(s)
   blood typing V72.86
   genetic V26.32
       for genetic disease carrier status V26.31
    pregnancy
       positive result V72.42
           first pregnancy V72.42
Testicle, testicular, testis - see also condition
   feminization (syndrome) 259.5
Therapy V57.9
   chemotherapy, antineoplastic V58.11
   immunotherapy antineoplastic V58.12
Thrombocytopenia, thrombocytopenic 287.5
   with giant hemangioma 287.3
       absent radii (TAR) syndrome 287.33
       giant hemangioma 287.39
   amegakaryocytic, congenital 287.33
    congenital 287.33
   cyclic 287.39
   essential 287.30
   hereditary 287.33
   Kasabach-Merritt 287.39
   primary 287.30
   purpura (see also Purpura, thrombocytopenic) 287.30
   sex-linked 287.39
```

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Underline – Add

Key:

```
Thrombosis, thrombotic (marantic) (multiple) (progressive) (septic) (vein) (vessel) 453.9
   tumor - see Neoplasm, by site
    vas deferens 608.83
       vein
   vein
        deep 453.40
Tracheobronchomegaly (congenital) 748.3
   with bronchiectasis 494.0
       with (acute) exacerbation 494.1
    acquired 519.1
       with bronchiectasis 494.0
           with (acute) exacerbation 494.1
Transmission of chemical substances through the placenta (affecting fetus or newborn) 760.70
    anticonvulsants 760.77
    antifungals 760.74
   antimetabolics 760.78
Tremor 781.0
   medication-induced postural 333.1
Triplet
   pregnancy (complicating delivery) NEC 651.1
       following (elective) fetal reduction 651.7
Tumor (M8000/1) - see also Neoplasm, by site, unspecified nature
    Schloffer's (see also Peritonitis) 567.29
Twin
   pregnancy (complicating delivery) NEC 651.0
        following (elective) fetal reduction 651.7
Ulcer, ulcerated, ulcerating, ulceration, ulcerative 707.9
   stasis (leg) (venous) 454.0
        with varicose veins 454.0
Uremia, uremic (absorption) (amaurosis) (amblyopia) (aphasia) (apoplexy) (coma) (delirium)
           (dementia) (dropsy) (dyspnea) (fever) (intoxication) (mania) (paralysis) (poisoning)
           (toxemia) (vomiting) 586
   chronic 585.9
   neuropathy 585.9 [357.4]
   pericarditis 585.9 [420.0]
Uropathy 599.9
   obstructive 599.60
Vaccination
   not carried out (contraindicated) V64.00
       because of patient's decision V64.2
           acute illness V64.01
           allergy to vaccine or component V64.04
           caregiver refusal V64.05
           chronic illness V64.02
           immune compromised state V64.03
           patient had disease being vaccinated against V64.08
           patient refusal V64.06
           reason NEC V64.09
           religious reasons V64.07
Weak, weakness (generalized) 780.79
    muscle (generalized) 728.87
Weir Mitchell's disease (erythromelalgia) 443.82
Werlhof's disease (see also Purpura, thrombocytopenic) 287.39
Werlhof-Wichmann syndrome (see also Purpura, thrombocytopenic) 287.39
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Underline – Add

Key:

ICD-9-CM Tabular Addenda (FY06) Effective October 1, 2005

Add	238	Neoplasm of uncertain behavior of other and unspecified sites and tissues 238.7 Other lymphatic and hematopoietic tissues Refractory anemia
	250	Diabetes mellitus
		250.4 Diabetes with renal manifestations
Add		Use additional code to identify manifestation, as: chronic kidney disease (585.1-585.9)
		250.5 Diabetes with ophthalmic manifestations
Add Revise Revise		Use additional code to identify manifestation, as: diabetic macular edema (362.07) diabetic retinal edema (362.07) diabetic retinopathy (362.01-362.07)
	257	Testicular dysfunction
Delete		257.8 Other testicular dysfunction Goldberg Maxwell syndrome Male pseudohermaphroditism with testicular feminization Testicular feminization
Add	Ex	cludes: androgen insensitivity syndrome (259.5)
	259	Other endocrine disorders
New code		259.5 Androgen insensitivity syndrome Partial androgen insensitivity Reifenstein syndrome

276 Disorders of fluid, electrolyte, and acid-base balance

276.5 Volume depletion

Delete Dehydration

Depletion of volume of plasma or extracellular fluid

Hypovolemia

New code 276.50 Volume depletion, unspecified

New code 276.51 Dehydration

New code 276.52 Hypovolemia

Depletion of volume of plasma

Revise 278 Overweight, obesity and other hyperalimentation

Revise 278.0 Overweight and obesity

Add Use additional code to identify Body Mass Index (BMI), if

known (V85.21- V85.4)

New code 278.02 Overweight

282 Hereditary hemolytic anemias

282.4 Thalassemias

282.49 Other thalassemia

Add Hb-Bart's disease

282.7 Other hemoglobinopathies

Disease:

Delete Hb-Bart's

283 Acquired hemolytic anemias

283.0 Autoimmune hemolytic anemias

Revise Excludes: Evans' syndrome (287.32)

284 Aplastic anemia

284.9 Aplastic anemia, unspecified

Delete Anemia, refractory

Add Excludes: refractory anemia (238.7)

285 Other and unspecified anemias

285.0 Sideroblastic anemia

Anemia:

sideroblastic:

Delete refractory

Add Excludes: refractory sideroblastic anemia (238.7)

285.2 Anemia in chronic illness

Revise 285.21 Anemia in end-stage renal disease chronic

kidney disease

Add Anemia in end stage renal disease

287 Purpura and other hemorrhagic conditions

287.0 Allergic purpura

Revise Excludes: hemorrhagic purpura (287.39)

287.3 Primary thrombocytopenia

Delete Evan's syndrome

Megakaryocytic hypoplasia Purpura, thrombocytopenic

congenital
hereditary
idiopathic
Thrombocytopenia:

congenital
hereditary
primary

Tidal platelet dysgenesis

New code 287.30 Primary thrombocytopenia, unspecified

Megakaryocytic hypoplasia

New code	287.31	Immune thrombocytopenic purpura Idiopathic thrombocytopenic purpura Tidal platelet dysgenesis
New code	287.32	Evans' syndrome
New code	287.33	Congenital and hereditary thrombocytopenic
		purpura
		Congenital and hereditary
		thrombocytopenia
		Thrombocytopenia with absent radii
		(TAR) syndrome
	Excludes:	Wiskott-Aldrich syndrome (279.12)
New code	287.39	Other primary thrombocytopenia

Chapter 5- Mental Disorders (290-319)

Delete the following:

In the International Classification of Diseases, 9th Revision (ICD-9), the corresponding Chapter V, "Mental Disorders," includes a glossary which defines the contents of each category. The introduction to Chapter V in ICD-9 indicates that the glossary is intended so that psychiatrists can make the diagnosis based on the descriptions provided rather than from the category titles. Lay coders are instructed to code whatever diagnosis the physician records.

Chapter 5, "Mental Disorders," in ICD-9 CM uses the standard classification format with inclusion and exclusion terms, omitting the glossary as part of the main text. The mental disorders section of ICD-9 CM has been expanded to incorporate additional psychiatric disorders not listed in ICD-9. The glossary from ICD-9 does not contain all these terms. It now appears in Appendix B, which also contains descriptions and definitions for the terms added in ICD-9 CM. Some of these were provided by the American Psychiatric Association's Task Force on Nomenclature and Statistics who are preparing the Diagnostic and Statistical Manual, Third Edition (DSM-III), and others from A Psychiatric Glossary.

The American Psychiatric Association provided invaluable assistance in modifying Chapter 5 of ICD 9 CM to incorporate detail useful to American clinicians and gave permission to use material from the aforementioned sources.

- 1. Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death, 9th Revision, World Health Organization, Geneva, Switzerland, 1975.
- 2. American Psychiatric Association, Task Force on Nomenclature and Statistics, Robert L. Spitzer, M.D., Chairman.
- 3. A Psychiatric Glossary, Fourth Edition, American Psychiatric Association, Washington, D.C., 1975.

291 Alcohol induced mental disorders

291.8 Other specified alcohol induced mental disorders

New code 291.82 Alcohol induced sleep disorders

Alcohol induced circadian rhythm sleep

disorders

Alcohol induced hypersomnia Alcohol induced insomnia Alcohol induced parasomnia

291.89 Other

Delete Alcohol induced sleep disorder

292 Drug induced mental disorders

292.8 Other specified drug induced mental disorders

New code 292.85 Drug induced sleep disorders

Drug induced circadian rhythm sleep

disorder

Drug induced hypersomnia Drug induced insomnia Drug induced parasomnia

292.89 Other

Delete Drug-induced sleep disorder

307 Special symptoms or syndromes, not elsewhere classified

307.4 Specific disorders of sleep of nonorganic origin

Add Excludes: organic hypersomnia (327.10-327.19)

organic insomnia (327.00-327.09)

307.41 Transient disorder of initiating or maintaining

sleep

Add Adjustment insomnia

Add Add Add Add			307.42	Persistent disorder of initiating or maintaining sleep Idiopathic insomnia Paradoxical insomnia Primary insomnia Psychophysiological insomnia	
Add Add			307.44	Persistent disorder of initiating or maintaining wakefulness Insufficient sleep syndrome Primary hypersomnia	
Add			Excludes:	sleep deprivation (V69.4)	
Revise			307.45	Circadian rhythm sleep disorder of nonorganic origin	
Delete				Irregular sleep-wake rhythm, nonorganic origin	
Delete				Jet lag syndrome	
Delete Delete				Rapid time-zone change Shifting sleep work schedule	
		307.5	Other and 307.59	unspecified disorders of eating Other	
Revise			307.37	Feeding disorder of infancy or early childhood of nonorganic origin	
	323	Encepl	nalitis, mye	litis, and encephalomyelitis	
Add		323.6	6 Postinfectious encephalitis Infectious acute disseminated encephalomyelitis (ADEM)		
Add		323.8	Nonin	ses of encephalitis fectious acute disseminated encephalomyelitis DEM)	

New category	327	Organic sleep disorders			
New sub- category		327.0 Organic disorders of initiating and maintaining sleep [Organic insomnia]			
		ir	som ph	nia NOS (780.52) nia not due to a substance or known ysiological condition (307.41-307.42) nia with sleep apnea NOS (780.51)	
New code New code		327.0 327.0)1	Organic insomnia, unspecified Insomnia due to medical condition classified elsewhere	
New code		Exclu 327.0 Code	ides:)2 first	underlying condition insomnia due to mental disorder (327.02) Insomnia due to mental disorder mental disorder alcohol induced insomnia (291.82)	
New code		327.0)9	drug induced insomnia (292.85) Other organic insomnia	
New sub- category		327.1 Organ		isorder of excessive somnolence [Organic nia]	
		h	ypers ph	somnia NOS (780.54) somnia not due to a substance or known ysiological condition (307.43-307.44) somnia with sleep apnea NOS (780.53)	
New code		327.1	0	Organic hypersomnia, unspecified	
New code		327.1		Idiopathic hypersomnia with long sleep time	
New code		327.1		Idiopathic hypersomnia without long sleep	
New code		327.1	.3	time Recurrent hypersomnia Kleine-Levin syndrome	
New code		327.1	4	Menstrual related hypersomnia Hypersomnia due to medical condition classified elsewhere	
New code		Exclu 327.1 Code	ides: 5 first	underlying condition hypersomnia due to mental disorder (327.15) Hypersomnia due to mental disorder mental disorder alcohol induced hypersomnia (291.82)	
New code		327.1	9	drug induced hypersomnia (292.85) Other organic hypersomnia	

New sub- category	327.2 Organic s	Organic sleep apnea			
category	hyper insom sleep	ne-Stokes breathing (786.04) somnia with sleep apnea NOS (780.53) nnia with sleep apnea NOS (780.51) apnea in newborn (770.81-770.82) apnea NOS (780.57)			
New code	327.20	Organic sleep apnea, unspecified			
New code	327.20	Primary central sleep apnea			
New code	327.21	High altitude periodic breathing			
New code	327.23	Obstructive sleep apnea (adult) (pediatric)			
New code	327.24	Idiopathic sleep related nonobstructive alveolar hypoventilation			
		Sleep related hypoxia			
New code	327.25	Congenital central alveolar hypoventilation syndrome			
New code	327.26	Sleep related hypoventilation/hypoxemia in conditions classifiable elsewhere			
	Code first	t underlying condition			
New code	327.27	Central sleep apnea in conditions classified elsewhere			
	Code first	t underlying condition			
New code	327.29	Other organic sleep apnea			
New sub-		rhythm sleep disorder			
category	•	nic disorder of sleep wake cycle			
	Organ	nic disorder of sleep wake schedule			
		ol induced circadian rhythm sleep disorder 91.82)			
	circad	lian rhythm sleep disorder of nonorganic origin 07.45)			
	disrup	otion of 24 hour sleep wake cycle NOS (780.55) induced circadian rhythm sleep disorder (292.85)			
New code	327.30	Circadian rhythm sleep disorder, unspecified			
New code	327.31	Circadian rhythm sleep disorder, delayed sleep			
New code	327.32	phase type Circadian rhythm sleep disorder, advanced sleep phase type			
New code	327.33	Circadian rhythm sleep disorder, irregular sleep-wake type			
New code	327.34	Circadian rhythm sleep disorder, free-running type			
New code	327.35	Circadian rhythm sleep disorder, jet lag type			

New code New code		327 Cod	le first	Circadian rhythm sleep disorder, shift work type Circadian rhythm sleep disorder in conditions classified elsewhere underlying condition
New code		327	.39	Other circadian rhythm sleep disorder
New sub- category		327.4 Org	anic pa	arasomnia
-magazy			drug ir paraso	ol induced parasomnia (291.82) induced parasomnia (292.85) imnia not due to a known physiological inditions (307.47)
New code		327	.40	Organic parasomnia, unspecified
New code		327		Confusional arousals
New code		327		REM sleep behavior disorder
New code		327		Recurrent isolated sleep paralysis
New code		327		Parasomnia in conditions classified elsewhere
N T 1				underlying condition
New code		327	.49	Other organic parasomnia
New sub- category		Excludes:	restles	s leg syndrome (333.99) related movement disorder NOS (780.58)
New code		327	.51	Periodic limb movement disorder Periodic limb movement sleep disorder
New code		327	52	Sleep related leg cramps
New code		327		Sleep related bruxism
New code		327		Other organic sleep related movement disorders
New code		327.8 Oth	er orga	anic sleep disorders
	332	Parkinson's	s diseas	se
Add				Parkinsonism leptic-induced Parkinsonism
	333	Other extra	pyram	idal disease and abnormal movement disorders
Add		Excludes:	sleep r	related movement disorders (327.51-327.59)

Add		333.1	Essential and other specified forms of tremor Medication-induced postural tremor			
Add		333.7	Symptomatic torsion dystonia Neuroleptic-induced acute dystonia			
		333.8	Fragments	s of torsion dystonia		
Add			333.82	Orofacial dyskinesia Neuroleptic-induced tardive dyskinesia		
		333.9		unspecified extrapyramidal diseases and movement disorders		
Add			333.90	Unspecified extrapyramidal disease and abnormal movement disorder Medication-induced movement disorders NOS		
Add			Use additi	onal E code to identify drug, if drug-induced		
Add			333.99	Other Neuroleptic-induced acute akathisia		
Add			Use additi	onal E code to identify drug, if drug-induced		
	357	Inflam	matory and	l toxic neuropathy		
		357.4	Polyneuro	pathy in other diseases classified elsewhere		
Revise			first underly emia (<u>585.9</u>	ying disease, as:		
	362	Other	retinal diso	rders		
		362.0	Diabetic r	etinopathy		
Delete Delete			362.01	Background diabetic retinopathy Diabetic macular edema Diabetic retinal edema		
New code New code New code			362.03 362.04 362.05	Nonproliferative diabetic retinopathy NOS Mild nonproliferative diabetic retinopathy Moderate nonproliferative diabetic retinopathy		

New code New code	362.06 Severe nonproliferative diabetic retinopathy 362.07 Diabetic macular edema Diabetic retinal edema						
	Note: Code 362.07 must be used with a code for diabetic retinopathy (362.01-362.06)						
	402 Hypertensive heart disease						
Revise	Use additional code to specify type of heart failure (428.0, 428.20 428.23, 428.30 428.33, 428.40 428.43) (428.0-428.43), if known						
Revise	403 Hypertensive renal kidney disease						
Add	Use additional code to identify the stage of chronic kidney disease (585.1-585.6), if known						
Revise Revise	The following fifth-digit subclassification is for use with category 403: 0 without mention of renal failure-without chronic kidney disease 1 with renal failure with chronic kidney disease						
Revise	404 Hypertensive heart and renal kidney disease						
Revise	Use additional code to specify type of heart failure (428.0, 428.20-428.23, 428.30-428.33, 428.40-428.43) (428.0-428.43), if known						
Add	Use additional code to identify the stage of chronic kidney disease (585.1-585.6), if known						
Revise	The following fifth-digit subclassification is for use with category 404: 0 without mention of heart failure or renal failure without heart failure or chronic kidney disease						
Revise Revise	2 with renal failure with chronic kidney disease 3 with heart failure and renal failure chronic kidney disease						
Add	410 Acute myocardial infarction ST elevation (STEMI) and non-ST elevation (NSTEMI) myocardial infarction						
Add	410.0 Of anterolateral wall ST elevation myocardial infarction (STEMI) of anterolateral wall						

Add		410.1	Of other anterior wall ST elevation myocardial infarction (STEMI) of other anterior wall
Add		410.2	Of inferolateral wall ST elevation myocardial infarction (STEMI) of inferolateral wall
Add		410.3	Of inferoposterior wall ST elevation myocardial infarction (STEMI) of inferoposterior wall
Add		410.4	Of other inferior wall ST elevation myocardial infarction (STEMI) of other inferior wall
Add		410.5	Of other lateral wall ST elevation myocardial infarction (STEMI) of other lateral wall
Add		410.6	True posterior wall infarction ST elevation myocardial infarction (STEMI) of true posterior wall
Add		410.7	Subendocardial infarction Non-ST elevation myocardial infarction (NSTEMI)
Add		410.8	Other specified sites ST elevation myocardial infarction (STEMI) of other specified sites
Add		410.9	Unspecified site Myocardial infarction NOS
	420	Acute	pericarditis
Revise		Code f	Acute pericarditis in diseases classified elsewhere irst underlying disease, as: emia (585.9)

426 Conduction disorders

426.8 Other specified conduction disorders

New code 426.82 Long QT syndrome

443 Other peripheral vascular disease

443.8 Other specified peripheral vascular diseases

New code 443.82 Erythromelalgia

443.89 Other

Delete <u>Erythromelalgia</u>

PNEUMONIA AND INFLUENZA (480-487)

Excludes: pneumonia: aspiration:

Revise newborn (770.18)

487 Influenza

Excludes: Hemophilus influenzae [H. influenzae]:

Delete pneumonia (482.2)

487.0 With pneumonia

Add Use additional code to identify the type of pneumonia (480.0 -

480.9, 481, 482.0-482.9, 483.0-483.8, 485)

507 Pneumonitis due to solids and liquids

Revise Excludes: fetal aspiration pneumonitis (770.18)

524 Dentofacial anomalies, including malocclusion

524.5 Dentofacial functional abnormalities

524.51 Abnormal jaw closure

Delete <u>Dyskinesia</u>

525	Other diseases and conditions of the teeth and supporting structures				
	525.1	Loss of teeth due to trauma, extraction, or periodontal disease			
Add	Code f	irst class of	f edentulism (525.40-525.44, 525.50-525.54)		
Delete		525.10	Acquired absence of teeth, unspecified Edentulism		
New subcategory	525.4	Complete	edentulism		
		lditional co 5.19)	de to identify cause of edentulism (525.10-		
New code		525.40	Complete edentulism, unspecified Edentulism NOS		
New code		525.41	Complete edentulism, class I		
New code		525.42	Complete edentulism, class II		
New code		525.43	Complete edentulism, class III		
New code		525.44	Complete edentulism, class IV		
New subcategory	525.5	5.5 Partial edentulism			
	Use additional code to identify cause of edentulism (525.10-525.19)				
New code		525.50	Partial edentulism, unspecified		
New code		525.51	Partial edentulism, class I		
New code		525.52	Partial edentulism, class II		
New code		525.53	Partial edentulism, class III		
New code		525.54	Partial edentulism, class IV		

Other hernia of abdominal cavity, with obstruction, but without mention of gangrene

552.8	Hernia	of other	r specified	sites.	with	obstruction
222.0	HICHHIU	or our	Бресптец	DICCD,	** 1 (11	obbit action

Add Excludes: hernia due to adhesion with obstruction (560.81)

Revise 567 Peritonitis and retroperitoneal infections

Dala4a

567.2 Other suppurative peritonitis

Delete	Abscess (ot):
	abdominopelvic
	omentum
	peritoneum
	retrocecal
	retroperitoneal
	subdiaphragmatic
	subhepatic
-	subphrenic subphrenic
-	Peritonitis (acute):
	general
	pelvic, male
	subphrenic
	11

New code 567.21 Peritonitis (acute) generalized

Pelvic peritonitis, male

New code 567.22 Peritoneal abscess

Abscess (of):

abdominopelvic mesenteric omentum peritoneum retrocecal

subdiaphragmatic

subhepatic subphrenic

New code 567.23 Spontaneous bacterial peritonitis

New code 567.29 Other suppurative peritonitis

Subphrenic peritonitis

New subcategory 567.3 Retroperitoneal infections

New code 567.31 Psoas muscle abscess

New code		567.38	Other retroperitoneal abscess
New code		567.39	Other retroperitoneal infections
Delete	567.8	Chron Fat ne Meser Perito	cified peritonitis nic proliferative peritonitis perosis of peritoneum nteric saponification nitis due to bile nitis due to urine
New code		567.81	Choleperitonitis Peritonitis due to bile
New code		567.82	Sclerosing mesenteritis Fat necrosis of peritoneum (Idiopathic) sclerosing mesenteric fibrosis Mesenteric lipodystrophy Mesenteric panniculitis Retractile mesenteritis
New code		567.89	Other specified peritonitis Chronic proliferative peritonitis Mesenteric saponification Peritonitis due to urine
Revise	585 Chron	ic renal fail	lure Chronic kidney disease (CKD)
Add	Use additional (V42.0)	l code to id	lentify kidney transplant status, if applicable
New code	585.1	Chronic k	ridney disease, Stage I
New code	585.2	Chronic k	cidney disease, Stage II (mild)
New code	585.3	Chronic k	cidney disease, Stage III (moderate)
New code	585.4	Chronic k	ridney disease, Stage IV (severe)
New code	585.5	Chronic k	ridney disease, Stage V
New code	585.6	End stage	renal disease
New code	585.9	Chron Chron	cidney disease, unspecified hic renal disease hic renal failure NOS hic renal insufficiency

593 Other disorders of kidney and ureter

593.9 Unspecified disorder of kidney and ureter

Add Acute renal disease

Revise <u>Acute renal insufficiency (acute) (chronic)</u>

Revise Renal disease (chronic) NOS

Add Excludes: chronic renal insufficiency (585.9)

renal disease:

Delete acute (580.0-580.9)
Delete chronic (582.0-582.9)

599 Other disorders of urethra and urinary tract

Revise 599.6 Urinary obstruction, unspecified
Delete Obstructive uropathy NOS
Urinary (tract) obstruction NOS

Add Excludes: urinary obstruction due to hyperplasia of prostate

(600.0-600.9 with fifth-digit 1)

New code 599.60 Urinary obstruction, unspecified

Obstructive uropathy NOS Urinary (tract) obstruction NOS

New code 599.69 Urinary obstruction, not elsewhere classified

Disorders of penis

607.8 Other specified disorders of penis

607.84 Impotence of organic origin

Revise Excludes: nonorganic or unspecified (302.72)

Other current conditions in the mother classifiable elsewhere, but

complicating pregnancy, childbirth, or the puerperium

648.8 Abnormal glucose tolerance

Revise Conditions classifiable to <u>790.21-790.29</u>

Add Use additional code, if applicable, for associated long-term

(current) insulin use (V58.67)

651 Multiple gestation New code 651.7 Multiple gestation following (elective) fetal reduction [0,1,3]Fetal reduction of multiple fetuses reduced to single fetus 660 Obstructed labor 660.8 Other causes of obstructed labor Add Use additional code to identify condition 728 Disorders of muscle, ligament, and fascia 728.8 Other disorders of muscle, ligament, and fascia Revise 728.87 Muscle weakness (generalized) 742 Other congenital anomalies of nervous system Add Excludes: congenital central alveolar hypoventilation syndrome (327.25) 748 Congenital anomalies of respiratory system Add Excludes: congenital central alveolar hypoventilation syndrome (327.25) 752 Congenital anomalies of genital organs Revise Excludes: testicular feminization syndrome (259.5) 752.1 Anomalies of fallopian tubes and broad ligaments 752.11 Embryonic cyst of fallopian tubes and broad ligaments Cyst: Delete Gartner's duct

752.4 Anomalies of cervix, vagina, and external female genitalia

752.41 Embryonic cyst of cervix, vagina, and external female genitalia

Cyst:

Add Gartner's duct

752.7 Indeterminate sex and pseudohermaphroditism

Excludes: pseudohermaphroditism:

Revise testicular feminization syndrome (259.5)

CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (760-779)

Revise Includes: conditions which have their origin in the perinatal period, before

birth through the first 28 days after birth, even though death or

morbidity occurs later

760 Fetus or newborn affected by maternal conditions which may be

unrelated to present pregnancy

760.7 Noxious influences affecting fetus or newborn via placenta

or breast milk

760.74 Anti-infectives

Add Antifungals

New code 760.77 Anticonvulsants

Carbamazepine Phenobarbital Phenytoin Valproic acid

New code 760.78 Antimetabolic agents

Methotrexate Retinoic acid

Statins

763 Fetus or newborn affected by other complications of labor and delivery 763.8 Other specified complications of labor and delivery affecting fetus or newborn New code 763.84 Meconium passage during delivery Excludes: meconium aspiration (770.11, 770.12) meconium staining (779.84) 770 Other respiratory conditions of fetus and newborn Revise 770.1 Meconium Fetal and newborn aspiration syndrome Delete Aspiration of contents of birth canal NOS Meconium aspiration below vocal cords **Pneumonitis:** fetal aspiration meconium Add Excludes: aspiration of postnatal stomach contents (770.85, 770.86) meconium passage during delivery (763.84) meconium staining (779.84) Add New code 770.10 Fetal and newborn aspiration, unspecified New code 770.11 Meconium aspiration without respiratory symptoms Meconium aspiration NOS New code 770.12 Meconium aspiration with respiratory symptoms Meconium aspiration pneumonia Meconium aspiration pneumonitis Meconium aspiration syndrome NOS Use additional code to identify any secondary pulmonary hypertension (416.8), if applicable New code 770.13 Aspiration of clear amniotic fluid without respiratory symptoms Aspiration of clear amniotic fluid NOS

New code		770.14	Aspiration of clear amniotic fluid with respiratory symptoms Aspiration of clear amniotic fluid with pneumonia Aspiration of clear amniotic fluid with pneumonitis	
			onal code to identify any secondary pulmonary ension (416.8), if applicable	
New code		770.15	Aspiration of blood without respiratory symptoms Aspiration of blood NOS	
New code		770.16	Aspiration of blood with respiratory symptoms Aspiration of blood with pneumonia Aspiration of blood with pneumonitis	
			onal code to identify any secondary pulmonary ension (416.8), if applicable	
New code		770.17	Other fetal and newborn aspiration without respiratory symptoms	
New code		770.18	Other fetal and newborn aspiration with respiratory symptoms Other aspiration pneumonia Other aspiration pneumonitis	
			onal code to identify any secondary pulmonary ension (416.8), if applicable	
	770.8	Other resp	viratory problems after birth	
New code		770.85	Aspiration of postnatal stomach contents without respiratory symptoms Aspiration of postnatal stomach contents NOS	

New code 770.86 Aspiration of postnatal stomach contents with

respiratory symptoms

Aspiration of postnatal stomach contents

with pneumonia

Aspiration of postnatal stomach contents

with pneumonitis

Use additional code to identify any secondary pulmonary hypertension (416.8), if applicable

771 Infections specific to the perinatal period

Revise Includes: infections acquired before or during birth via the umbilicus or

during the first 28 days after birth

779 Other and ill-defined conditions originating in the perinatal period

779.8 Other specified conditions originating in the perinatal

period

New code 779.84 Meconium staining

Excludes: meconium aspiration (770.11, 770.12)

meconium passage during delivery (763.84)

779.89 Other specified conditions originating in the

perinatal period

Add Use additional code to specify condition

780 General symptoms

780.5 Sleep disturbances

Add Excludes: circadian rhythm sleep disorders (327.30-

327.39)

organic hypersomnia (327.10-327.19) organic insomnia (327.00-327.09) organic sleep apnea (327.20-327.29)

organic sleep related movement disorders (327.51-

327.59)

parasomnias (327.40-327.49)

Revise			780.51	Insomnia with sleep apnea, unspecified
Revise			780.52	Other Insomnia, unspecified
Delete				Insomnia NOS
Revise			780.53	Hypersomnia with sleep apnea, unspecified
Revise			780.54	Other Hypersomnia, unspecified
Delete				Hypersomnia NOS
Revise			780.55	Disruptions of 24 hour sleep wake cycle,
				unspecified
Delete				Inversion of sleep rhythm
Delete				Irregular sleep-wake rhythm NOS
Delete				Non 24 hour sleep wake rhythm
Revise			780.57	Other and uUnspecified sleep apnea
Revise			780.58	Sleep related movement disorder, unspecified
Delete				Periodic limb movement disorder
		780.9	Other gene	eral symptoms
			780.92	Excessive crying of infant (baby)
Add			Excludes:	excessive crying of child, adolescent or adult (780.95)
New code			780.95	Other excessive crying
			Excludes:	excessive crying of infant (baby) (780.92)
	783	Sympt	oms concer	ning nutrition, metabolism, and development
		783.2	Abnormal	loss of weight and underweight
Add			additional code to identify Body Mass Index (BMI), if nown (V85.0)	
		783.9	Other sym develo	aptoms concerning nutrition, metabolism, and appment
Revise		Exclud	les: dehydi	ration (<u>276.51</u>)

785 Symptoms involving cardiovascular system

785.5 Shock without mention of trauma

785.52 Septic shock

Code first:

Revise

systemic inflammatory response syndrome due to noninfectious noninfectious process with organ dysfunction (995.94)

788 Symptoms involving urinary system

788.2 Retention of urine

Add Excludes: urinary retention due to hyperplasia of prostate (600.0-600.9 with fifth-digit 1)

Nonspecific abnormal results of function studies

794.3 Cardiovascular

794.31 Abnormal electrocardiogram [ECG] [EKG]

Add Excludes: long QT syndrome (426.82)

Other and nonspecific abnormal cytological, histological, immunological and DNA test findings

795.0 Abnormal Papanicolaou smear of cervix and cervical HPV

795.09 Other abnormal Papanicolaou smear of cervix

and cervical HPV

Cervical low risk human papillomavirus

(HPV) DNA test positive

Revise

	799	Other ill-defined and unknown causes of morbidity and mortality
Revise		799.0 Asphyxia and hypoxemia
Revise		Excludes: asphyxia and hypoxemia (due to):

Add hypercapnia (786.09)

New code 799.01 Asphyxia

New code 799.02 Hypoxemia

996 Complications peculiar to certain specified procedures

Add Excludes: <u>mechanical complication of respirator (V46.14)</u>

996.4 Mechanical complication of internal orthopedic device, implant, and graft

Add Use additional code to identify prosthetic joint with mechanical complication (V43.60-V43.69)

New Code	996.40	Unspecified mechanical complication of interna	
		orthopedic device, implant, and graft	

New Code 996.41 Mechanical loosening of prosthetic joint Aseptic loosening

New Code 996.42 Dislocation of prosthetic joint
Instability of prosthetic joint
Subluxation of prosthetic joint

New Code 996.43 Prosthetic joint implant failure
Breakage (fracture) of prosthetic joint

New Code 996.44 Peri-prosthetic fracture around prosthetic joint

New code 996.45 Peri-prosthetic osteolysis

New Code 996.46 Articular bearing surface wear of prosthetic

joint

New Code 996.47 Other mechanical complication of prosthetic

joint implant

Mechanical complication of prosthetic joint

NOS

New Code 996.49 Other mechanical complication of other internal orthopedic device, implant, and graft Excludes: mechanical complication of prosthetic joint implant (996.41-996.47) 996.6 Infection and inflammatory reaction due to internal prosthetic device, implant, and graft 996.66 Due to internal joint prosthesis Add Use additional code to identify infected prosthetic joint (V43.60-V43.69) SUPPLEMENTARY CLASSIFICATION OF FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH Revise SERVICES (V01-V85) V03 Need for prophylactic vaccination and inoculation against bacterial diseases Revise Excludes: vaccination not carried out because of contraindication (V64.00-V64.09) V07 Need for isolation and other prophylactic measures V07.3 Other prophylactic chemotherapy V07.39 Other prophylactic chemotherapy Revise Excludes: maintenance chemotherapy following disease (V58.12)V12 Personal history of certain other diseases V12.0 Infectious and parasitic diseases Add Excludes: personal history of infectious diseases specific to a body system

V12.4 Disorders of nervous system and sense organs

New code V12.42 Infections of the central nervous system

Encephalitis Meningitis

V12.6 Diseases of respiratory system

Add Excludes: tuberculosis (V12.01)

New code V12.60 Unspecified disease of respiratory

system

New code V12.61 Pneumonia (recurrent)

New code V12.69 Other diseases of respiratory system

V13 Personal history of other diseases

V13.0 Disorders of urinary system

New code V13.02 Urinary (tract) infection

New code V13.03 Nephrotic syndrome

V15 Other personal history presenting hazards to health

V15.8 Other specified personal history presenting hazards to

health

New code V15.88 History of fall

At risk for falling

V17 Family history of certain chronic disabling diseases

V17.8 Other musculoskeletal diseases

New code V17.81 Osteoporosis

New code V17.89 Other musculoskeletal diseases

V18 Family history of certain other specific conditions

New code V18.9 Genetic disease carrier

V26 Procreative management

V26.2 Investigation and testing

V26.21Fertility testing

Revise Excludes: genetic counseling and testing (V26.31-V26.33)

V26.3 Genetic counseling and testing

New code V26.31 Testing for genetic disease carrier status

New code V26.32 Other genetic testing

New code V26.33 Genetic counseling

V28 Antenatal screening

Revise V28.0 <u>Screening for chromosomal anomalies by amniocentesis</u>

Revise V28.1 <u>Screening for raised alpha-fetoprotein</u> levels in amniotic

fluid

V45 Other postprocedural states

V45.1 Renal dialysis status

Add Hemodialysis status Add Peritoneal dialysis status

V46 Other dependence on machines

Revise V46.1 Respirator [Ventilator]

New code V46.13 Encounter for weaning from respirator

[ventilator]

New code V46.14 Mechanical complication of respirator

[ventilator]

Mechanical failure of respirator [ventilator]

V49 Other conditions influencing health status

V49.8 Other specified conditions influencing health status

New code V49.84 Bed confinement status

V54 Other orthopedic aftercare

Revise Excludes: malfunction of internal orthopedic device (996.40-996.49)

V54.0 Aftercare involving internal fixation device

Revise Excludes: malfunction of internal orthopedic device

(996.40-996.49)

V58 Encounter for other and unspecified procedures and aftercare

Revise V58.1 Encounter for antineoplastic chemotherapy and

immunotherapy

V59.7 Egg (oocyte) (ovum)

Add Excludes: chemotherapy and immunotherapy for nonneoplastic

conditions- code to condition

New code V58.11 Encounter for antineoplastic chemotherapy

New code V58.12 Encounter for antineoplastic immunotherapy

V59 Donors

New subcategory

New code	V59.70	Egg (oocyte) (ovum) donor, unspecified
New code	V59.71	Egg (oocyte) (ovum) donor, under age 35,
		anonymous recipient
		Egg donor, under age 35 NOS
New code	V59.72	Egg (oocyte) (ovum) donor, under age 35,
		designated recipient
New code	V59.73	Egg (oocyte) (ovum) donor, age 35 and over,
		anonymous recipient
		Egg donor, age 35 and over NOS
New code	V59.74	Egg (oocyte) (ovum) donor, age 35 and over,
		designated recipient

Revise	Person	ns Encountering Health Services In Other Circumstances (V60- <u>V69</u>)			
	V61	Other	ther family circumstances		
		V61.1	Counseling for marital and partner problems		
Add Add			V61.10	Counseling for marital and partner problems, unspecified Marital relationship problem Partner relationship problem	
		V61.2	Parent-chi	ld problems	
Add			V61.20	Counseling for parent-child problem, unspecified Parent-child relationship problem	
Add		V61.8		cified family circumstances g relationship problem	
	V62	Other 1	psychosocia	al circumstances	
Add		V62.2		apational circumstances or maladjustment ational problem	
Add		V62.3		al circumstances mic problem	
Add		V62.4		ladjustment curation problem	
		V62.8	Other psyc	chological or physical stress, not elsewhere	
Add			V62.81	Interpersonal problems, not elsewhere classified Relational problem NOS	
New code			V62.84	Suicidal ideation	
			Excludes:	suicidal tendencies (300.9)	
Add Add			V62.89	Other Borderline intellectual functioning Religious or spiritual problem	

V64 Persons encountering health services for specific procedures, not carried out

Revise		V64.0	Vaccination not carried out because of contraindication		
New code			V64.00	Vaccination not carried out, unspecified reason	
New code			V64.01	Vaccination not carried out because of acute illness	
New code			V64.02	Vaccination not carried out because of chronic illness or condition	
New code			V64.03	Vaccination not carried out because of immune compromised state	
New code			V64.04	Vaccination not carried out because of allergy to vaccine or component	
New code			V64.05	Vaccination not carried out because of caregiver refusal	
New code			V64.06	Vaccination not carried out because of patient refusal	
New code			V64.07	Vaccination not carried out for religious reasons	
New code			V64.08	Vaccination not carried out because patient had disease being vaccinated against	
New code			V64.09	Vaccination not carried out for other reason	
	V65	Other	persons see	king consultation	
		V65.4	4 Other counseling, not elsewhere classified		
Revise			des: counseling (for): genetic (V26.31-V26.33)		
	V69	Proble	ems related to lifestyle		
New code		V69.5	Behavioral insomnia of childhood		

PERSONS WITHOUT REPORTED DIAGNOSIS ENCOUNTERED DURING EXAMINATION AND INVESTIGATION OF Revise INDIVIDUALS AND POPULATIONS (V70-V85) V70 General medical examination V70.0 Routine general medical examination at a health care facility Add Excludes: pre-procedural general physical examination (V72.83) V72 Special investigations and examinations V72.4 Pregnancy examination or test Delete Excludes: pregnancy examination with immediate confirmation (V22.0-V22.1) New code V72.42 Pregnancy examination or test, positive result V72.8 Other specified examinations V72.81 Pre-operative cardiovascular examination Add Pre-procedural cardiovascular examination V72.82 Pre-operative respiratory examination Pre-procedural respiratory Add

Add Add	V72.83	Other specified pre-operative examination Other pre-procedural examination Pre-procedural general physical examination
Add	Excludes:	routine general medical examination (V70.0)
Add	V72.84	Pre-operative examination, unspecified Pre-procedural examination, unspecified
New code	V72.86	Encounter for blood typing

examination

New V85 Body Mass Index

category Kilograms per meters squared

Note: BMI adult codes are for use for persons over 20 years old

New code V85.0 Body Mass Index less than 19, adult

New code V85.1 Body Mass Index between 19-24, adult

New sub-category V85.2 Body Mass Index between 25-29, adult

New code	V85.21	Body Mass Index 25.0-25.9, adult
New code	V85.22	Body Mass Index 26.0-26.9, adult
New code	V85.23	Body Mass Index 27.0-27.9, adult
New code	V85.24	Body Mass Index 28.0-28.9, adult
New code	V85.25	Body Mass Index 29.0-29.9, adult

New sub-category V85.3 Body Mass Index between 30-39, adult

New code	V85.30	Body Mass Index 30.0-30.9, adult
New code	V85.31	Body Mass Index 31.0-31.9, adult
New code	V85.32	Body Mass Index 32.0-32.9, adult
New code	V85.33	Body Mass Index 33.0-33.9, adult
New code	V85.34	Body Mass Index 34.0-34.9, adult
New code	V85.35	Body Mass Index 35.0-35.9, adult
New code	V85.36	Body Mass Index 36.0-36.9, adult
New code	V85.37	Body Mass Index 37.0-37.9, adult
New code	V85.38	Body Mass Index 38.0-38.9, adult
New code	V85.39	Body Mass Index 39.0-39.9, adult

New code V85.4 Body Mass Index 40 and over, adult

E904 Hunger, thirst, exposure, and neglect

E904.2 Lack of water

Revise Excludes: dehydration due to acute fluid loss (276.51)