



ICD-10-CM Expert for Physicians

The complete official code set

Codes valid from October 1, 2020 through September 30, 2021



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Table of Drugs and Chemicals

The Table of Drugs and Chemicals is arranged in alphabetic order by the specific drug or chemical name. Codes are listed in individual columns based upon the associated intent (poisoning, adverse effect, or underdosing).

External Causes Index

The External Causes Index is arranged in alphabetic order by main terms that describe the cause, the intent, the place of occurrence, the activity, and the status of the patient at the time the injury occurred or health condition arose.

Index Notations

With

The word "with" or "in" should be interpreted to mean "associated with" or "due to." The classification presumes a causal relationship between the two conditions linked by these terms in the index. These conditions should be coded as related even in the absence of provider documentation explicitly linking them unless the documentation clearly states the conditions are unrelated or when another guideline specifically requires a documented linkage between two conditions (e.g., the sepsis guideline for "acute organ dysfunction that is not clearly associated with the sepsis"). For conditions not specifically linked by these relational terms in the classification or when a guideline requires explicit documentation of a linkage between two conditions, provider documentation must link the conditions to code them as related.

The word "with" in the index is sequenced immediately following the main term, not in alphabetical order.

Dermatopolymyositis M33.90

with myopathy M33.92 respiratory involvement M33.91 specified organ involvement NEC M33.99 in neoplastic disease — *see also* Neoplasm D49.9 [*M36.0*]

See

When the instruction "see" follows a term in the index, it indicates that another term must be referenced to locate the correct code.

Hematoperitoneum — see Hemoperitoneum

See Also

The instructional note "see also" simply provides alternative terms the coder may reference that may be useful in determining the correct code but are not necessary to follow if the main term supplies the appropriate code.

-lematinuria — see also	Hemaglobinuria
malarial B5Ø.8	-

Default Codes

In the index, the default code is the code listed next to the main term and represents the condition most commonly associated with that main term. This code may be assigned when documentation does not support reporting a more specific code. Alternatively, it may provide an unspecified code for the condition.

Headache R51

allergic NEC G44.89 associated with sexual activity G44.82 chronic daily R51 How to Use ICD-10-CM Expert for Physicians 2021

Parentheses

Parentheses in the indexes enclose nonessential modifiers, supplementary words that may be present or absent in the statement of a disease without affecting the code.

> Pseudomeningocele (cerebral) (infective) (post-traumatic) G96.19 postprocedural (spinal) G97.82

Brackets

ICD-10-CM has a coding convention addressing code assignment for manifestations that occur as a result of an underlying condition. This convention requires the underlying condition to be sequenced first, followed by the code or codes for the associated manifestation. In the index, italicized codes in brackets identify manifestation codes.

Polyneuropathy (peripheral) G62.9

- alcoholic G62.1
- amyloid (Portuguese) E85.1 [G63]
 - transthyretin-related (ATTR) familial E85.1[G63]

Shaded Guides

Exclusive vertical shaded guides in the Index to Diseases and Injuries and External Causes Index help the user easily follow the indent levels for the subentries under a main term. Sequencing rules may apply depending on the level of indent for separate subentries.

Hemicrania

congenital malformation Q00.0 continua G44.51 meaning migraine — see also Migraine G43.909 paroxysmal G44.039 chronic G44.049 intractable G44.041 not intractable G44.049 episodic G44.039 intractable G44.031 not intractable G44.031 not intractable G44.039 intractable G44.039

Following References

The Index to Diseases and Injuries includes following references to assist in locating out-of-sequence codes in the tabular list. Out-of-sequence codes contain an alphabetic character (letter) in the third- or 4th-character position. These codes are placed according to the classification rules — according to condition — not according to alphabetic or numeric sequencing rules.

Carcinoma (malignant) — *see also* Neoplasm, by site, malignant neuroendocrine — *see also* Tumor, neuroendocrine high grade, any site C7A.1 (*following* C75) poorly differentiated, any site C7A.1 (*following* C75)

Additional Character Required

The Index to Diseases and Injuries, Neoplasm Table, and External Causes Index provide an icon after certain codes to signify to the user that additional characters are required to make the code valid. The tabular list should be consulted for appropriate character selection.

> Fall, falling (accidental) W19 ☑ building W2Ø.1 ☑

Tabular List of Diseases

ICD-10-CM codes and descriptions are arranged numerically within the tabular list of diseases with 19 separate chapters providing codes associated with a particular body system or nature of injury or disease. There is also a chapter providing codes for external causes of an injury or health conditions and finally a chapter for codes that address encounters with healthcare facilities for circumstances other than a disease or injury.

Code and Code Descriptions

ICD-10-CM is an alphanumeric classification system that contains categories, subcategories, and valid codes. The first character is always a letter with any additional characters represented by either a letter or number. A three-character category without further subclassification is equivalent to a valid three-character code. Valid codes may be three, four, five, six, or seven characters in length, with each level of subdivision after a three-character category representing a subcategory. The final level of subdivision is a valid code.

Boldface

Boldface type is used for all codes and descriptions in the tabular list.

Italics

Italicized type is used to identify manifestation codes, those codes that should not be reported as first-listed diagnoses.

Deleted Text

Strikethrough on a code and code description indicates a deletion from the classification for the current year.

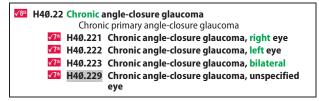
Key Word

Green font is used throughout the Tabular List of Diseases to differentiate the key words that appear in similar code descriptions in a given category or subcategory. The key word convention is used only in those categories in which there are multiple codes with very similar descriptions with only a few words that differentiate them.

For example, refer to the list of codes below from category H55:

√4 th		<mark>gmus a</mark> r Nystagn	n d other irregular eye movements nus
		H55.ØØ	Unspecified nystagmus
		H55.Ø1	Congenital nystagmus
		H55.Ø2	Latent nystagmus
		H55.Ø3	Visual deprivation nystagmus
		H55.Ø4	Dissociated nystagmus
		H55.Ø9	Other forms of nystagmus
		_	

The portion of the code description that appears in **green font** in the tabular list helps the coder quickly identify the key terms and the correct code. This convention is especially useful when the codes describe laterality, such as the following codes from subcategory H40.22:



Tabular Notations

Official parenthetical notes as well as Optum360's supplementary notations are provided at the chapter, code block, category, subcategory, and individual code level to help the user assign proper codes. The information in the notation can apply to one or more codes depending on where the citation is placed.

Official Notations

Includes Notes

The word **INCLUDES** appears immediately under certain categories to further define, clarify, or give examples of the content of a code category.

Inclusion Terms

Lists of inclusion terms are included under certain codes. These terms indicate some of the conditions for which that code number may be used. Inclusion terms may be synonyms with the code title, or, in the case of "other specified" codes, the terms may also provide a list of various conditions included within a classification code. The inclusion terms are not exhaustive. The index may provide additional terms that may also be assigned to a given code.

Excludes Notes

ICD-10-CM has two types of excludes notes. Each note has a different definition for use. However, they are similar in that they both indicate that codes excluded from each other are independent of each other.

Excludes 1

An EXCLUDEST note is a "pure" excludes. It means "NOT CODED HERE!" An Excludes 1 note indicates mutually exclusive codes: two conditions that cannot be reported together. An Excludes1 note indicates that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.

An exception to the Excludes 1 definition is when the two conditions are unrelated to each other. If it is not clear whether the two conditions involving an Excludes 1 note are related or not, query the provider. For example, code F45.8 Other somatoform disorders, has an Excludes 1 note for "sleep related teeth grinding (G47.63)" because "teeth grinding" is an inclusion term under F45.8. Only one of these two codes should be assigned for teeth grinding. However psychogenic dysmenorrhea is also an inclusion term under F45.8, and a patient could have both this condition and sleep-related teeth grinding. In this case, the two conditions are clearly unrelated to each other, so it would be appropriate to report F45.8 and G47.63 together.

Excludes 2

An **EXAMPLESS** note means "NOT INCLUDED HERE." An Excludes 2 note indicates that although the excluded condition is not part of the condition it is excluded from, a patient may have both conditions at the same time. Therefore, when an Excludes 2 note appears under a code, it may be acceptable to use both the code and the excluded code together if supported by the medical documentation.

Note

The term "NOTE" appears as an icon and precedes the instructional information. These notes function as alerts to highlight coding instructions within the text.

Code First/Use additional code

These instructional notes provide sequencing instruction. They may appear independently of each other or to designate certain etiology/manifestation paired codes. These instructions signal the coder that an additional code should be reported to provide a more complete picture of that diagnosis.

In etiology/manifestation coding, ICD-10-CM requires the underlying condition to be sequenced first, followed by the manifestation. In these situations, codes with "In diseases classified elsewhere" in the code description are never permitted as a first-listed or principal diagnosis code and must be sequenced following the underlying condition code.

10 Steps to Correct Coding

Follow the 10 steps below to correctly code encounters for health care services.

Step 1: Identify the reason for the visit or encounter (i.e., a sign, symptom, diagnosis and/or condition).

The medical record documentation should accurately reflect the patient's condition, using terminology that includes specific diagnoses and symptoms or clearly states the reasons for the encounter.

Choosing the main term that best describes the reason chiefly responsible for the service provided is the most important step in coding. If symptoms are present and documented but a definitive diagnosis has not yet been determined, code the symptoms. *For outpatient cases, do not code conditions that are referred to as "rule out," "suspected," "probable," or "questionable."* Diagnoses often are not established at the time of the initial encounter/visit and may require two or more visits to be established. Code only what is documented in the available outpatient records and only to the highest degree of certainty known at the time of the patient's visit. For inpatient medical records, uncertain diagnoses may be reported if documented at the time of discharge.

Step 2: After selecting the reason for the encounter, consult the alphabetic index.

The most critical rule is to begin code selection in the alphabetic index. Never turn first to the tabular list. The index provides cross-references, essential and nonessential modifiers, and other instructional notations that may not be found in the tabular list.

Step 3: Locate the main term entry.

The alphabetic index lists conditions, which may be expressed as nouns or eponyms, with critical use of adjectives. Some conditions known by several names have multiple main entries. Reasons for encounters may be located under general terms such as admission, encounter, and examination. Other general terms such as history, status (post), or presence (of) can be used to locate other factors influencing health.

Step 4: Scan subterm entries.

Scan the subterm entries, as appropriate, being sure to review continued lines and additional subterms that may appear in the next column or on the next page. Shaded vertical guidelines in the index indicate the indentation level for each subterm in relation to the main terms.

Step 5: Pay close attention to index instructions.

- Parentheses () enclose nonessential modifiers, terms that are supplementary words or explanatory information that may or may not appear in the diagnostic statement and do not affect code selection.
- Brackets [] enclose manifestation codes that can be used only as secondary codes to the underlying condition code immediately preceding it. If used, manifestation codes must be reported with the appropriate etiology codes.
- Default codes are listed next to the main term and represent the condition most commonly associated with the main term or the unspecified code for the main term.
- "See" cross-references, identified by italicized type and "code by" cross-references indicate that another term *must be referenced* to locate the correct code.
- "See also" cross-references, identified by italicized type, provide alternative terms that may be useful to look up but are not mandatory.
- "Omit code" cross-references identify instances when a code is not applicable depending on the condition being coded.
- "With" subterms are listed out of alphabetic order and identify a presumed causal relationship between the two conditions they link.

- "Due to" subterms identify a relationship between the two conditions they link.
- "NEC," abbreviation for "not elsewhere classified," follows some main terms or subterms and indicates that there is no specific code for the condition even though the medical documentation may be very specific.
- "NOS," abbreviation for "not otherwise specified," follows some main terms or subterms and is the equivalent of unspecified; NOS signifies that the information in the medical record is insufficient for assigning a more specific code.
- *Following* references help coders locate alphanumeric codes that are out of sequence in the tabular section.
- Check-additional-character symbols flag codes that require additional characters to make the code valid; the characters available to complete the code should be verified in the tabular section.

Step 6: Choose a potential code and locate it in the tabular list.

To prevent coding errors, always use both the alphabetic index (to identify a code) and the tabular list (to verify a code), as the index does not include the important instructional notes found in the tabular list. An added benefit of using the tabular list, which groups like things together, is that while looking at one code in the list, a coder might see a more specific one that would have been missed had the coder relied solely on the alphabetic index. Additionally, many of the codes require a fourth, fifth, sixth, or seventh character to be valid, and many of these characters can be found only in the tabular list.

Step 7: Read all instructional material in the tabular section.

The coder must follow any Includes, Excludes 1 and Excludes 2 notes, and other instructional notes, such as "Code first" and "Use additional code," listed in the tabular list for the chapter, category, subcategory, and subclassification levels of code selection that direct the coder to use a different or additional code. Any codes in the tabular range AØØ.Ø-through T88.9- may be used to identify the diagnostic reason for the encounter. The tabular list encompasses many codes describing disease and injury classifications (e.g., infectious and parasitic diseases, neoplasms, symptoms, nervous and circulatory system etc.).

Codes that describe symptoms and signs, as opposed to definitive diagnoses, should be reported when an established diagnosis has not been made (confirmed) by the physician. Chapter 18 of the ICD-10-CM code book, "Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified" (codes RØØ.--R99), contains many, but not all, codes for symptoms.

ICD-10-CM classifies encounters with health care providers for circumstances other than a disease or injury in chapter 21, "Factors Influencing Health Status and Contact with Health Services" (codes ZØØ–Z99). Circumstances other than a disease or injury often are recorded as chiefly responsible for the encounter.

A code is invalid if it does not include the full number of characters (greatest level of specificity) required. Codes in ICD-10-CM can contain from three to seven alphanumeric characters. A three-character code is to be used only if the category is not further subdivided into four-, five-, six-, or seven-character codes. Placeholder character X is used as part of an alphanumeric code to allow for future expansion and as a placeholder for empty characters in a code that requires a seventh character but has no fourth, fifth, or sixth character. Note that certain categories require seventh characters that apply to all codes in that category. Always check the category level for applicable seventh characters for that category. Admission — continued fitting — continued device - continued prosthetic — continued dental Z46.3 eye Z44.2 🔽 substitution auditory Z46.2 implanted — see Admission, adjustment, device, implanted, hearing device nervous system Z46.2 implanted — see Admission, adjustment, device, implanted, nervous system visual Z46.2 implanted Z45.31 hearing aid Z46.1 ileostomy device Z46.89 intestinal appliance or device NEC Z46.89 neuropacemaker (brain) (peripheral nerve) (spinal cord) Z46.2 implanted Z45.42 orthodontic device Z46.4 orthopedic device (brace) (cast) (shoes) Z46.89 prosthesis Z44.9 arm — see Admission, adjustment, artificial, arm breast Z44.3 🗹 dental Z46.3 eye Z44.2 🗹 leg — see Admission, adjustment, artificial, leg specified type NEC Z44.8 spectacles Z46.0 follow-up examination ZØ9 intrauterine device management Z30.431 initial prescription Z30.014 mental health evaluation Z00.8 requested by authority ZØ4.6 observation — see Observation Papanicolaou smear, cervix Z12.4 for suspected malignant neoplasm Z12.4 plastic and reconstructive surgery following medical procedure or healed injury NEC Z42.8 plastic surgery, cosmetic NEĆ Z41.1 postpartum observation immediately after delivery Z39.0 routine follow-up Z39.2 poststerilization (for restoration) Z31.0 aftercare Z31.42 procreative management Z31.9 prophylactic (measure) — see also Encounter, prophylactic measures organ removal Z4Ø.ØØ breast Z40.01 fallopian tube(s) Z4Ø.Ø3 with ovary(s) Z4Ø.Ø2 ovary(s) Z40.02 specified organ NEC Z40.09 testes Z40.09 vaccination Z23 psychiatric examination (general) ZØØ.8 requested by authority ZØ4.6 radiation therapy (antineoplastic) Z51.0 reconstructive surgery following medical procedure or healed injury NEC Z42.8 removal of cystostomy catheter Z43.5 drains Z48.03 dressing (nonsurgical) Z48.ØØ implantable subdermal contraceptive Z30.46 intrauterine contraceptive device Z30.432 neuropacemaker (brain) (peripheral nerve) (spinal . cord) Z46.2 implanted Z45.42 staples Z48.02 surgical dressing Z48.01 sutures Z48.02 ureteral stent Z46.6 respirator [ventilator] use during power failure Z99.12 restoration of organ continuity (poststerilization) Z31.Ø aftercare Z31.42 sensitivity test — *see also* Test, skin allergy NEC ZØ1.82 Mantoux Z11.1 tuboplasty following previous sterilization Z31.Ø aftercare Z31.42 vasoplasty following previous sterilization Z31.Ø aftercare Z31.42 vision examination ZØ1.ØØ with abnormal findings ZØ1.Ø1

Admission — continued vision examination — *continued* following failed vision screening ZØ1.Ø2Ø with abnormal findings ZØ1.Ø21 infant or child (over 28 days old) ZØØ.129 with abnormal findings ZØØ.121 waiting period for admission to other facility Z75.1 Adnexitis (suppurative) — *see* Salpingo-oophoritis Adolescent X-linked adrenoleukodystrophy E71.521 Adrenal (gland) — see condition Adrenalism, tuberculous A18.7 Adrenalitis, adrenitis E27.8 autoimmune E27.1 meningococcal, hemorrhagic A39.1 Adrenarche, premature E27.Ø Adrenocortical syndrome — see Cushing's, syndrome Adrenogenital syndrome E25.9 acquired E25.8 congenital E25.Ø salt loss E25.Ø Adrenogenitalism, congenital E25.Ø Adrenoleukodystrophy E71.529 neonatal E71.511 X-linked E71.529 Addison only phenotype E71.528 Addison-Schilder E71.528 adolescent E71.521 adrenomyeloneuropathy E71.522 childhood cerebral E71.520 other specified E71.528 Adrenomyeloneuropathy E71.522 Adventitious bursa — see Bursopathy, specified type NFC Adverse effect — see Table of Drugs and Chemicals, categories T36-T5Ø, with 6th character 5 Advice — see Counseling Adynamia (episodica) (hereditary) (periodic) G72.3 Aeration lung imperfect, newborn — see Atelectasis Aerobullosis T7Ø.3 🗹 Aerocele — see Embolism, air Aerodermectasia subcutaneous (traumatic) T79.7 Aerodontalgia T70.29 Aeroembolism T7Ø.3 🗹 Aerogenes capsulatus infection A48.Ø Aero-otitis media T7Ø.Ø 🗹 Aerophagy, aerophagia (psychogenic) F45.8 Aerophobia F40.228 Aerosinusitis T70.1 Aerotitis T70.0 Affection — see Disease Afibrinogenemia — see also Defect, coagulation D68.8 acquired D65 congenital D68.2 following ectopic or molar pregnancy OØ8.1 in abortion — see Abortion, by type, complicated by, afibrinogenemia puerperal 072.3 African sleeping sickness B56.9 tick fever A68.1 trypanosomiasis B56.9 . gambian B56.Ø rhodesian B56.1 – see also Care Z51.89 Aftercare following surgery (for) (on) amputation Z47.81 attention to drains Z48.03 dressings (nonsurgical) Z48.00 surgical Z48.01 sutures Z48.02 circulatory system Z48.812 delayed (planned) wound closure Z48.1 digestive system Z48.815 explantation of joint prosthesis (staged procedure) hip Z47.32 . knee Z47.33 shoulder Z47.31 genitourinary system Z48.816 joint replacement Z47.1 neoplasm Z48.3 nervous system Z48.811 oral cavity Z48.814 organ transplant bone marrow Z48.290 heart Z48.21 heart-lung Z48.28Ø

Aftercare — continued

following surgery — continued organ transplant — continued kidney Z48.22 liver Ź48.23 lung Z48.24 multiple organs NEC Z48.288 specified NEC Z48.298 orthopedic NEC Z47.89 planned wound closure Z48.1 removal of internal fixation device Z47.2 respiratory system Z48.813 scoliosis Z47.82 sense organs Z48.81Ø skin and subcutaneous tissue Z48.817 specified body system circulatory Z48.812 digestive Z48.815 genitourinary Z48.816 nervous Z48.811 oral cavity Z48.814 respiratory Z48.813 sense organs Z48.81Ø skin and subcutaneous tissue Z48.817 teeth Z48.814 specified NEC Z48.89 spinal Z47.89 teeth Z48.814 fracture — code to fracture with seventh character D involving removal of drains Z48.Ø3 dressings (nonsurgical) Z48.00 staples Z48.02 surgical dressings Z48.01 sutures Z48.Ø2 neuropacemaker (brain) (peripheral nerve) (spinal cord) Z46.2 implanted Z45.42 orthopedic NEC Z47.89 postprocedural — see Aftercare, following surgery After-cataract — see Cataract, secondary Agalactia (primary) 092.3 elective, secondary or therapeutic 092.5 Agammaglobulinemia (acquired (secondary) (nonfamilial) D8Ø.1 with immunoglobulin-bearing B-lymphocytes D8Ø.1 lymphopenia D81.9 autósomal recessive (Swiss type) D8Ø.Ø Bruton's X-linked D80.0 common variable (CVAgamma) D8Ø.1 congenital sex-linked D8Ø.Ø hereditary D80.0 lymphopenic D81.9 Świss type (autosomal recessive) D8Ø.Ø X-linked (with growth hormone deficiency) (Bruton) D8Ø Ø Aganglionosis (bowel) (colon) Q43.1 Age (old) - see Senility Agenesis adrenal (gland) Q89.1 alimentary tract (complete) (partial) NEC Q45.8 upper Q4Ø.8 anus, anal (canal) Q42.3 with fistula Q42.2 aorta Q25.41 appendix Q42.8 arm (complete) Q71.Ø- 🗹 with hand present Q71.1artery (peripheral) Q27.9 brain Q28.3 coronary Q24.5 pulmonary Q25.79 specified NEC Q27.8 umbilical Q27.Ø auditory (canal) (external) Q16.1 auricle (ear) Q16.0 bile duct or passage Q44.5 bladder Q64.5 bone Q79.9 brain QØØ.Ø part of QØ4.3 breast (with nipple present) Q83.8 with absent nipple Q83.0 bronchus Q32.4 canaliculus lacrimalis Q10.4 carpus — see Agenesis, hand

Admission — Agenesis

Sodium

Table of Drugs and Chemicals

	Poisoning, Accidental (unintentional)	Poisoning, Intentional Self-harm	Poisoning, Assault	Poisoning, Undetermined	Adverse Effect	Under- dosing	
Substance	Poi Acc (un	Poi Int Sel	Poi Ass	Poi	Aď	un O	Substan
Sodium — continued salt NEC	TE0 2V1	TER 2V2	TER 2V2	TEROVA	TEROVE	TEROVE	Sporostacin Spray (aerosol)
selenate	T5Ø.3X1 T6Ø.2X1	T5Ø.3X2 T6Ø.2X2	T5Ø.3X3 T6Ø.2X3	T5Ø.3X4 T6Ø.2X4	T5Ø.3X5	T5Ø.3X6	cosmetic
stibogluconate	T37.3X1	T37.3X2	T37.3X3		T37.3X5	T37.3X6	medicinal NEC
sulfate	T47.4X1		T47.4X3			T47.4X6	pesticides — see
sulfoxone	T37.1X1		T37.1X3		T37.1X5	T37.1X6	specified content
tetradecyl sulfate	T46.8X1	T46.8X2	T46.8X3		T46.8X5	T46.8X6	substance
thiopental	T41.1X1		T41.1X3			T41.1X6	Spurge flax
thiosalicylate thiosulfate	T39.Ø91 T5Ø.6X1	T50.6X2	T39.Ø93 T5Ø.6X3	T39.Ø94 T5Ø.6X4	T39.Ø95 T5Ø.6X5	T39.Ø96 T5Ø.6X6	Spurges Sputum viscosity-
tolbutamide	T38.3X1	T38.3X2				T38.3X6	drug
(L)-triiodothyronine	T38.1X1	T38.1X2	T38.1X3	T38.1X4	T38.1X5	T38.1X6	Squill
tyropanoate	T5Ø.8X1	T5Ø.8X2	T5Ø.8X3	T5Ø.8X4	T5Ø.8X5	T5Ø.8X6	rat poison
valproate	T42.6X1	T42.6X2			T42.6X5	T42.6X6	Squirting cucumb
versenate Sodium-free salt	T5Ø.6X1 T5Ø.9Ø1	T50.6X2	T5Ø.6X3 T5Ø.9Ø3	T5Ø.6X4 T5Ø.9Ø4	T5Ø.6X5 T5Ø.9Ø5	T5Ø.6X6 T5Ø.9Ø6	(cathartic) Stains
odium-removing resin	T50.3X1	T50.302		T50.3X4	T50.3X5	T50.3X6	Stannous fluoride
Soft soap	T55.ØX1		T55.ØX3		_	_	Stanolone
Solanine	T62.2X1	T62.2X2	T62.2X3	T62.2X4	_	—	Stanozolol
berries	T62.1X1	T62.1X2			—	—	Staphisagria or st
Solanum dulcamara	T62.2X1		T62.2X3		—	-	(pediculicide)
berries Solapsone	T62.1X1 T37.1X1	T62.1X2 T37.1X2	T62.1X3 T37.1X3	T62.1X4 T37.1X4	— T37.1X5	— T37.1X6	Starch Stelazine
olar lotion	T49.3X1		T49.3X3		T49.3X5	T49.3X6	Stemetil
olasulfone	T37.1X1	T37.1X2	T37.1X3	T37.1X4	T37.1X5	T37.1X6	Stepronin
oldering fluid	T65.891	T65.892	T65.893	T65.894			Sterculia
olid substance	T65.91	T65.92	T65.93	T65.94	—	—	Sternutator gas
specified NEC	T65.891 T52.91	T65.892 T52.92	T65.893 T52.93	T65.894	_	_	Steroid
Solvent, industrial NEC naphtha	T52.91	T52.92		T52.94 T52.ØX4	_		anabolic androgenic
petroleum	T52.0X1	T52.ØX2	T52.ØX3	T52.ØX4	_		antineoplastic, ho
specified NEC	T52.8X1	T52.8X2		T52.8X4	_	_	estrogen
ioma	T42.8X1	T42.8X2	T42.8X3	T42.8X4	T42.8X5	T42.8X6	ENT agent
Somatorelin	T38.891	T38.892	T38.893	T38.894	T38.895	T38.896	ophthalmic prepa
omatostatin	T38.991	T38.992		T38.994	T38.995	T38.996	topical NEC
omatotropin omatrem	T38.811 T38.811	T38.812	T38.813 T38.813	T38.814 T38.814	T38.815 T38.815	T38.816 T38.816	Stibine Stibogluconate
Somatropin	T38.811	T38.812		T38.814	T38.815	T38.816	Stibophen
Sominex	T45.ØX1		T45.ØX3		T45.ØX5	T45.ØX6	Stilbamidine (iseti
Somnos	T42.6X1	T42.6X2	T42.6X3	T42.6X4	T42.6X5	T42.6X6	Stilbestrol
Somonal	T42.3X1	T42.3X2		T42.3X4		T42.3X6	Stilboestrol
oneryl	T42.3X1	T42.3X2			T42.3X5	T42.3X6	Stimulant
Soothing syrup	T50.901	T50.902	T50.903	T5Ø.9Ø4 T42.6X4	T5Ø.9Ø5 T42.6X5	T50.906	central nervous sy
opor oporific	T42.6X1 T42.71	T42.6X2 T42.72	T42.6X3 T42.73	T42.6X4	T42.675	T42.6X6 T42.76	also Psychosti analeptics
Soporific drug	T42.71	T42.72	T42.73	T42.74	T42.75	T42.76	opiate antagon
specified type NEC	T42.6X1	T42.6X2	T42.6X3		T42.6X5	T42.6X6	psychotherapeu
Sorbide nitrate	T46.3X1	T46.3X2	T46.3X3	T46.3X4	T46.3X5	T46.3X6	also Psycho
Sorbitol	T47.4X1	T47.4X2	T47.4X3	T47.4X4	T47.4X5	T47.4X6	drug
Sotalol Sotrada and	T44.7X1	T44.7X2					specified NEC
Sotradecol Soysterol	T46.8X1 T46.6X1	T46.8X2	T46.8X3 T46.6X3			T46.8X6 T46.6X6	respiratory Stone-dissolving (
Spacoline	T44.3X1		T44.3X3			T40.070 T44.3X6	Storage battery (c
Spanish fly		T49.8X2				T49.8X6	(acid)
parine	T43.3X1	T43.3X2	T43.3X3	T43.3X4	T43.3X5	T43.3X6	Stovaine
Sparteine	T48.ØX1	T48.ØX2	T48.ØX3	T48.ØX4	T48.ØX5	T48.ØX6	infiltration (subcu
Spasmolytic	T44 2V4	T44 2V2	TAADYO	T44 3Y4	T44 2VE	TAADVC	nerve block (perij
anticholinergics autonomic	T44.3X1 T44.3X1	T44.3X2	T44.3X3 T44.3X3			T44.3X6 T44.3X6	(plexus) spinal
bronchial NEC	T48.6X1		T48.6X3			T44.3X0	topical (surface)
quaternary ammonium	T44.3X1	T44.3X2	T44.3X3			T44.3X6	Stovarsal
skeletal muscle NEC	T48.1X1	T48.1X2	T48.1X3	T48.1X4	T48.1X5	T48.1X6	Stove gas — see G
Spectinomycin	T36.5X1		T36.5X3			T36.5X6	Stoxil
Speed	T43.621	T43.622	T43.623		T43.625	T43.626	Stramonium
Spermicide Spider (bite) (venom)	T49.8X1 T63.391		T49.8X3 T63.393		T49.8X5	T49.8X6	natural state Streptodornase
antivenin	T5Ø.Z11	T50.Z12	T5Ø.Z13				Streptodornase
Spigelia (root)	T37.4X1		T37.4X3			T37.4X6	Streptokinase
Spindle inactivator	T5Ø.4X1	T5Ø.4X2	T5Ø.4X3	T5Ø.4X4	T5Ø.4X5	T5Ø.4X6	Streptomycin (der
Spiperone	T43.4X1	T43.4X2				T43.4X6	Streptonivicin
Spiramycin Gwine wil	T36.3X1		T36.3X3			T36.3X6	Streptovarycin
Spirapril Spirilene	T46.4X1 T43.591	T46.4X2 T43.592	T46.4X3 T43.593		T46.4X5	T46.4X6	Streptozocin Streptozotocin
Spiritene Spirit(s) (neutral) NEC	T51.ØX1		T43.593 T51.ØX3		T43.595	T43.596	Streptozotocin Stripper (paint) (sc
beverage	T51.ØX1		T51.ØX3		_		Strobane
industrial	T51.ØX1	T51.ØX2	T51.ØX3		_	_	Strofantina
mineral	T52.ØX1	T52.ØX2			—	—	Strophanthin (g) (
of salt — see Hydrochloric acid							Strophanthus
	T51.ØX1	T51.ØX2	T51.ØX3		TEG OVE	— T5Ø.ØX6	Strophantin
surgical Spiropolactopo	TEG GV1						
Spironolactone	T50.0X1						Strophantin-g Strychnine (nonmo
surgical Spironolactone Spiroperidol Sponge, absorbable	T50.0X1 T43.4X1 T45.7X1		T50.0X3 T43.4X3 T45.7X3	T43.4X4	T43.4X5 T45.7X5	T43.4X6 T45.7X6	Strychnine (nonme (pesticide) (salts

	Poisoning, Accidental (unintentional)	Poisoning, Intentional Self-harm	Poisoning, Assault	Poisoning, Undetermined	Adverse Effect	Under- dosing
Substance	Poi Acc (uni	Poi Inte Self	Poi Ass	Poi	Adver. Effect	Uno
oorostacin	T49.ØX1	T49.ØX2	T49.ØX3	T49.ØX4	T49.ØX5	T49.ØX6
oray (aerosol)	T65.91	T65.92	T65.93	T65.94	—	—
cosmetic medicinal NEC	T65.891 T5Ø.9Ø1	T65.892 T5Ø.9Ø2	T65.893 T5Ø.9Ø3	T65.894 T5Ø.9Ø4	 T5Ø.9Ø5	— T5Ø.9Ø6
pesticides — see Pesticides	196.901	130.902	כשל.שכו	130.904	כשל.שכו	1,20,900
specified content — <i>see</i> specific						
substance						
ourge flax	T62.2X1 T62.2X1	T62.2X2	T62.2X3 T62.2X3	T62.2X4 T62.2X4	_	_
ourges outum viscosity-lowering	T48.4X1	T62.2X2 T48.4X2	T48.4X3	T48.4X4		
drug		1 101 1/12			1 101 1/13	1 101 1/10
quill	T46.ØX1	T46.ØX2	T46.ØX3	T46.ØX4	T46.ØX5	T46.ØX6
rat poison	T6Ø.4X1	T6Ø.4X2	T6Ø.4X3	T6Ø.4X4		— T47.2X6
quirting cucumber (cathartic)	T47.2X1	T47.2X2	T47.2X3	T47.2X4	T47.2X5	147.280
ains	T65.6X1	T65.6X2	T65.6X3	T65.6X4	_	_
annous fluoride	T49.7X1	T49.7X2	T49.7X3	T49.7X4	T49.7X5	T49.7X6
anolone	T38.7X1	T38.7X2	T38.7X3	T38.7X4	T38.7X5	T38.7X6
anozolol aphisagria or stavesacre	T38.7X1 T49.ØX1	T38.7X2 T49.ØX2	T38.7X3 T49.ØX3	T38.7X4 T49.ØX4	T38.7X5 T49.ØX5	T38.7X6 T49.ØX6
(pediculicide)	149.071	149.072	149.075	149.074	149.075	149.0/10
arch	T5Ø.9Ø1	T5Ø.9Ø2	T5Ø.9Ø3	T5Ø.9Ø4	T5Ø.9Ø5	T5Ø.9Ø6
elazine	T43.3X1	T43.3X2		T43.3X4	T43.3X5	T43.3X6
emetil	T43.3X1	T43.3X2	T43.3X3	T43.3X4	T43.3X5	T43.3X6
epronin erculia	T48.4X1 T47.4X1	T48.4X2 T47.4X2	T48.4X3 T47.4X3	T48.4X4 T47.4X4	T48.4X5 T47.4X5	T48.4X6 T47.4X6
ernutator gas	T59.891	T59.892		T59.894	—	—
eroid	T38.ØX1	T38.ØX2	T38.ØX3	T38.ØX4	T38.ØX5	T38.ØX6
anabolic	T38.7X1	T38.7X2	T38.7X3	T38.7X4	T38.7X5	T38.7X6
androgenic	T38.7X1	T38.7X2	T38.7X3	T38.7X4	T38.7X5	T38.7X6
antineoplastic, hormone estrogen	T38.7X1 T38.5X1	T38.7X2 T38.5X2	T38.7X3 T38.5X3	T38.7X4 T38.5X4	T38.7X5 T38.5X5	T38.7X6 T38.5X6
ENT agent	T49.6X1	T49.6X2	T49.6X3	T49.6X4	T49.6X5	T49.6X6
ophthalmic preparation	T49.5X1	T49.5X2	T49.5X3	T49.5X4	T49.5X5	T49.5X6
topical NEC	T49.ØX1	T49.ØX2	T49.ØX3	T49.ØX4	T49.ØX5	T49.ØX6
ibine iborlucenate	T56.891	T56.892	T56.893	T56.894	— T27 2V5	
ibogluconate ibophen	T37.3X1 T37.4X1	T37.3X2 T37.4X2	T37.3X3 T37.4X3	T37.3X4 T37.4X4	T37.3X5 T37.4X5	T37.3X6 T37.4X6
ilbamidine (isetionate)	T37.3X1	T37.3X2	T37.3X3	T37.3X4	T37.3X5	T37.3X6
ilbestrol	T38.5X1	T38.5X2	T38.5X3	T38.5X4	T38.5X5	T38.5X6
ilboestrol	T38.5X1	T38.5X2	T38.5X3	T38.5X4	T38.5X5	T38.5X6
imulant central nervous system — see	T43.6Ø1	T43.6Ø2	T43.6Ø3	T43.6Ø4	T43.6Ø5	T43.6Ø6
also Psychostimulant	143.001	145.002	145.005	1-13.00-	145.005	143.000
analeptics	T5Ø.7X1	T5Ø.7X2	T5Ø.7X3	T5Ø.7X4	T5Ø.7X5	T5Ø.7X6
opiate antagonist	T5Ø.7X1	T50.7X2	T5Ø.7X3	T5Ø.7X4	T5Ø.7X5	T5Ø.7X6
psychotherapeutic NEC — see also Psychotherapeutic	T43.6Ø1	T43.6Ø2	T43.6Ø3	T43.6Ø4	T43.6Ø5	T43.6Ø6
drug						
specified NEC	T43.691	T43.692	T43.693	T43.694	T43.695	T43.696
respiratory	T48.9Ø1	T48.9Ø2			T48.9Ø5	T48.9Ø6
cone-dissolving drug	T5Ø.9Ø1 T54.2X1	T5Ø.9Ø2 T54.2X2	T5Ø.9Ø3 T54.2X3	T5Ø.9Ø4 T54.2X4	T5Ø.9Ø5	T5Ø.9Ø6
corage battery (cells) (acid)	134.271	154.272	134.283	104.274	_	_
ovaine	T41.3X1	T41.3X2	T41.3X3	T41.3X4	T41.3X5	T41.3X6
infiltration (subcutaneous)	T41.3X1	T41.3X2	T41.3X3	T41.3X4	T41.3X5	T41.3X6
nerve block (peripheral)	T41.3X1	T41.3X2	T41.3X3	T41.3X4	T41.3X5	T41.3X6
(plexus) spinal	T41.3X1	T41.3X2	T41.3X3	T41.3X4	T41.3X5	T41.3X6
topical (surface)	T41.3X1	T41.3X2	T41.3X3	T41.3X4	T41.3X5	T41.3X6
ovarsal	T37.8X1	T37.8X2	T37.8X3	T37.8X4	T37.8X5	T37.8X6
tove gas — see Gas, stove	T 10 514	T 40 EV0	T 10 510	T 10 511 1	T 10 51/5	T 10 51/6
coxil tramonium	T49.5X1 T48.6X1	T49.5X2 T48.6X2	T49.5X3 T48.6X3	T49.5X4 T48.6X4	T49.5X5 T48.6X5	T49.5X6 T48.6X6
natural state	T62.2X1	T62.2X2		T62.2X4	—	
reptodornase	T45.3X1	T45.3X2		T45.3X4	T45.3X5	T45.3X6
reptoduocin	T36.5X1	T36.5X2	T36.5X3	T36.5X4	T36.5X5	T36.5X6
r eptokinase r eptomycin (derivative)	T45.611 T36.5X1	T45.612 T36.5X2		T45.614 T36.5X4	T45.615 T36.5X5	T45.616 T36.5X6
reptonivicin	T36.5X1	T36.5X2			T36.5X5	T36.5X6
reptovarycin	T36.5X1	T36.5X2			T36.5X5	T36.5X6
reptozocin	T45.1X1	T45.1X2		T45.1X4	T45.1X5	T45.1X6
reptozotocin	T45.1X1	T45.1X2	T45.1X3	T45.1X4	T45.1X5	T45.1X6
r ipper (paint) (solvent) r obane	T52.8X1 T6Ø.1X1	T52.8X2 T6Ø.1X2		T52.8X4 T6Ø.1X4	_	_
robane rofantina	T46.ØX1	T46.ØX2	T46.ØX3	T46.ØX4		 T46.ØX6
rophanthin (g) (k)	T46.ØX1	T46.ØX2		T46.ØX4	T46.ØX5	T46.ØX6
rophanthus	T46.ØX1	T46.ØX2	T46.ØX3	T46.ØX4	T46.ØX5	T46.ØX6
rophantin	T46.ØX1	T46.ØX2	T46.ØX3	T46.ØX4	T46.ØX5	T46.ØX6
r rophantin-g r rychnine (nonmedicinal)	T46.ØX1 T65.1X1	T46.ØX2 T65.1X2	T46.ØX3 T65.1X3	T46.ØX4 T65.1X4	T46.ØX5	T46.ØX6
(pesticide) (salts)	100.171	105.172	105.175	105.174		_
medicinal	T48.291	T48.292	T48.293	T48.294	T48.295	T48.296

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Chapter 4. Endocrine, Nutritional, and Metabolic Diseases (EØØ–E89)

Chapter-specific Guidelines with Coding Examples

The chapter-specific guidelines from the ICD-10-CM Official Guidelines for Coding and Reporting have been provided below. Along with these guidelines are coding examples, contained in the shaded boxes, that have been developed to help illustrate the coding and/or sequencing guidance found in these guidelines.

a. Diabetes mellitus

The diabetes mellitus codes are combination codes that include the type of diabetes mellitus, the body system affected, and the complications affecting that body system. As many codes within a particular category as are necessary to describe all of the complications of the disease may be used. They should be sequenced based on the reason for a particular encounter. Assign as many codes from categories EØ8–E13 as needed to identify all of the associated conditions that the patient has.

Patient is seen for uncontrolled diabetes, type 2, with hyperglycemia diabetic nephropathy, and diabetic gastroparesis

- E11.65 Type 2 diabetes mellitus with hyperglycemia
- E11.21 Type 2 diabetes mellitus with diabetic nephropathy
- E11.43 Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy

K31.84 Gastroparesis

Explanation: Use as many codes to describe the diabetic complications as needed. Many are combination codes that describe more than one condition. Code first the reason for the encounter. The term "uncontrolled" can refer to either hyperglycemia or hypoglycemia. In this case, "uncontrolled" is described as "with hyperglycemia."

1) Type of diabetes

The age of a patient is not the sole determining factor, though most type 1 diabetics develop the condition before reaching puberty. For this reason type 1 diabetes mellitus is also referred to as juvenile diabetes.

A 45-year-old patient is diagnosed with type 1 diabetes

E10.9 Type 1 diabetes mellitus without complications

Explanation: Although most type 1 diabetics are diagnosed in childhood or adolescence, it can also begin in adults.

2) Type of diabetes mellitus not documented

If the type of diabetes mellitus is not documented in the medical record the default is E11.-, Type 2 diabetes mellitus.

Office visit lists diabetic retinopathy with macular edema and hypertension on patient problem list

E11.311 Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema

110 Essential (primary) hypertension

Explanation: Since the type of diabetes was not documented, default to category E11.

3) Diabetes mellitus and the use of insulin and oral hypoglycemics

If the documentation in a medical record does not indicate the type of diabetes but does indicate that the patient uses insulin, code E11-, Type 2 diabetes mellitus, should be assigned. An additional code should be assigned from category Z79 to identify the long-term (current) use of insulin or oral hypoglycemic drugs. If the patient is treated with both oral medications and insulin, only the code for long-term (current) use of insulin should be assigned. Code Z79.4 should not be assigned i insulin is given temporarily to bring a type 2 patient's blood sugar under control during an encounter.

Office visit lists chronic diabetes with daily insulin use on patient problem list

E11.9 Type 2 diabetes mellitus without complications

Z79.4 Long term (current) use of insulin

Explanation: Do not assume that a patient on insulin must have type 1 diabetes. The default for diabetes without further specification defaults to type 2. Add the code for long term use of insulin.

4) Diabetes mellitus in pregnancy and gestational diabetes See Section I.C.15. Diabetes mellitus in pregnancy.

See Section I.C.15. Gestational (pregnancy induced) diabetes

5) Complications due to insulin pump malfunction (a) Underdose of insulin due to insulin pump failure

An underdose of insulin due to an insulin pump failure should be assigned to a code from subcategory T85.6, Mechanical complication of other specified internal and external prosthetic devices, implants and grafts, that specifies the type of pump malfunction, as the principal or first-listed code, followed by code T38.3X6-, Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs. Additional codes for the type of diabetes mellitus and any associated complications due to the underdosing should also be assigned.

A 24-year-old type 1 diabetic male treated in for hyperglycemia; insulin pump found to be malfunctioning and underdosing

- T85.614A Breakdown (mechanical) of insulin pump, initial encounter
- T38.3X6A Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, initial encounter

E10.65 Type 1 diabetes mellitus with hyperglycemia

Explanation: The complication code for the mechanical breakdown of the pump is sequenced first, followed by the underdosing code and type of diabetes with complication. Code all other diabetic complication codes necessary to describe the patient's condition.

(b) Overdose of insulin due to insulin pump failure

The principal or first-listed code for an encounter due to an insulin pump malfunction resulting in an overdose of insulin, should also be T85.6-, Mechanical complication of other specified internal and external prosthetic devices, implants and grafts, followed by code T38.3X1-, Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional).

A 24-year-old type 1 diabetic male found down with diabetic coma, brought into ED and treated for hypoglycemia; insulin pump found to be malfunctioning and overdosing

- T85.614A Breakdown (mechanical) of insulin pump, initial encounter
- T38.3X1A Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), initial encounter

E10.641 Type 1 diabetes mellitus with hypoglycemia with coma

Explanation: The complication code for the mechanical breakdown of the pump is sequenced first, followed by the poisoning code and type of diabetes with complication. All the characters in the combination code must be used to form a valid code and to fully describe the type of diabetes, the hypoglycemia, and the coma.

6) Secondary diabetes mellitus

Codes under categories EØ8, Diabetes mellitus due to underlying condition, EØ9, Drug or chemical induced diabetes mellitus, and E13, Other specified diabetes mellitus, identify complications/manifestations associated with secondary diabetes mellitus. Secondary diabetes is always caused by another condition or event (e.g., cystic fibrosis, malignant neoplasm of pancreas, pancreatectomy, adverse effect of drug, or poisoning).

(a) Secondary diabetes mellitus and the use of insulin or oral hypoglycemic drugs

For patients with secondary diabetes mellitus who routinely use insulin or oral hypoglycemic drugs, an additional code from category Z79 should be assigned to identify the long-term (current) use of insulin or oral hypoglycemic drugs. If the patient is treated with both oral medications and insulin, only the code for long-term (current) use of insulin should be assigned. Code Z79.4 should not be assigned if insulin is given temporarily to bring a secondary diabetic patient's blood sugar under control during an encounter.

Chapter 9. Diseases of the Circulatory System

Chapter 9. Diseases of the Circulatory System

Chapter 9. Diseases of the Circulatory System (IØØ-I99)	Chronic rheumatic heart diseases (105-109)
EXCLUDES 2 certain conditions originating in the perinatal period (PØ4-P96) certain infectious and parasitic diseases (AØØ-B99)	
certain infectious and parasitic diseases (A00-B99) complications of pregnancy, childbirth and the puerperium (O00-O9A) congenital malformations, deformations, and chromosomal abnormalities (O00-Q99)	IØ5 Rheumatic mitral valve diseases (INCLUDES) conditions classifiable to both IØ5.0 and IØ5.2-IØ5.9, whether specified as rheumatic or not
endocrine, nutritional and metabolic diseases (EØØ-E88) injury, poisoning and certain other consequences of external causes (SØØ-T88)	EXEMUDEST mitral valve disease specified as nonrheumatic (134) mitral valve disease with aortic and/or tricuspid valve involvement (108)
neoplasms (CØØ-D49) symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (RØØ-R94)	105.0 Rheumatic mitral stenosis Mitral (valve) obstruction (rheumatic) DEF: Narrowing of the mitral valve between the left atrium and
systemic connective tissue disorders (M30-M36) transient cerebral ischemic attacks and related syndromes (G45) This chapter contains the following blocks:	left ventricle due to rheumatic fever. Symptoms include shortness of breath during or after exercise, fatigue, palpitations, chest discomfort, and swelling of feet or legs.
100-102 Acute rheumatic fever	105.1 Rheumatic mitral insufficiency
105-109 Chronic rheumatic level	Rheumatic mitral incompetence
110-116 Hypertensive diseases 120-125 Ischemic heart diseases	Rheumatic mitral regurgitation
126-128 Pulmonary heart disease and diseases of pulmonary circulation 130-152 Other forms of heart disease	EXCLUDES 1 mitral insufficiency not specified as rheumatic (134.0) 105.2 Rheumatic mitral stenosis with insufficiency
160-169 Cerebrovascular diseases	Rheumatic mitral stenosis with incompetence or regurgitation IØ5.8 Other rheumatic mitral valve diseases
180-189 Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere	Rheumatic mitral (valve) failure
classified 195-199 Other and unspecified disorders of the circulatory system	105.9 Rheumatic mitral valve disease, unspecified Rheumatic mitral (valve) disorder (chronic) NOS
Acute rheumatic fever (100-102)	V4 IØ6 Rheumatic aortic valve diseases
DEF: Inflammatory disease that can follow a throat infection by group A streptococci. Complications can involve the joints (arthritis), subcutaneous tissue (nodules), skin (erythema marginatum), heart (carditis), or brain (chorea).	EXCLUDES 1 aortic valve disease not specified as rheumatic (135) aortic valve disease with mitral and/or tricuspid valve involvement (108)
IØØ Rheumatic fever without heart involvement	106.0 Rheumatic aortic stenosis
INCLUDES arthritis, rheumatic, acute or subacute EXCLUDEST rheumatic fever with heart involvement (IØ1.Ø-IØ1.9)	Rheumatic aortic (valve) obstruction 106.1 Rheumatic aortic insufficiency
IØ1 Rheumatic fever with heart involvement	Rheumatic aortic incompetence
EXCLUDES 1 chronic diseases of rheumatic origin (105-109) unless rheumatic	Rheumatic aortic regurgitation 106.2 Rheumatic aortic stenosis with insufficiency
fever is also present or there is evidence of reactivation or activity of the rheumatic process	Rheumatic aortic stenosis with incompetence or regurgitation
IØ1.Ø Acute rheumatic pericarditis	106.8 Other rheumatic aortic valve diseases 106.9 Rheumatic aortic valve disease, unspecified
Any condition in IØØ with pericarditis	Rheumatic aortic (valve) disease NOS
Rheumatic pericarditis (acute)	107 Rheumatic tricuspid valve diseases
EXCLUDES 1 acute pericarditis not specified as rheumatic (130)	[INCLUDES] rheumatic tricuspid valve diseases specified as rheumatic
IØ1.1 Acute rheumatic endocarditis Any condition in IØØ with endocarditis or valvulitis	or unspecified
Acute rheumatic valvulitis	EXCLUDES 1 tricuspid valve disease specified as nonrheumatic (I36) tricuspid valve disease with aortic and/or mitral valve
IØ1.2 Acute rheumatic myocarditis Any condition in IØØ with myocarditis	involvement (108)
lØ1.8 Other acute rheumatic heart disease	107.0 Rheumatic tricuspid stenosis Tricuspid (valve) stenosis (rheumatic)
Any condition in IØØ with other or multiple types of heart involvement	107.1 Rheumatic tricuspid insufficiency
Acute rheumatic pancarditis	Tricuspid (valve) insufficiency (rheumatic) IØ7.2 Rheumatic tricuspid stenosis and insufficiency
IØ1.9 Acute rheumatic heart disease, unspecified Any condition in IØØ with unspecified type of heart involvement	107.8 Other rheumatic tricuspid stenosis and insufficiency
Rheumatic carditis, acute Rheumatic heart disease, active or acute	IØ7.9 Rheumatic tricuspid valve disease, unspecified Rheumatic tricuspid valve disorder NOS
V40 IØ2 Rheumatic chorea	IØ8 Multiple valve diseases
[INCLUDES] Sydenham's chorea	[INCLUDES] multiple valve diseases specified as rheumatic or unspecified
EXCLUDEST chorea NOS (G25.5) Huntington's chorea (G1Ø)	endocarditis, valve unspecified (138)
IØ2.Ø Rheumatic chorea with heart involvement	multiple valve disease specified a nonrheumatic (134, 135,
Chorea NOS with heart involvement	136, 137, 138, Q22, Q23, Q24.8-) rheumatic valve disease NOS (109.1)
Rheumatic chorea with heart involvement of any type classifiable under lØ1	108.0 Rheumatic disorders of both mitral and aortic valves
102.9 Rheumatic chorea without heart involvement	Involvement of both mitral and aortic valves specified as
Rheumatic chorea NOS	rheumatic or unspecified AHA: 2019,2Q,5
	IØ8.1 Rheumatic disorders of both mitral and tricuspid valves IØ8.2 Rheumatic disorders of both aortic and tricuspid valves
	108.3 Combined rheumatic disorders of mitral, aortic and tricuspid
	valves IØ8.8 Other rheumatic multiple valve diseases
	108.9 Rheumatic multiple valve disease, unspecified
	IØ9 Other rheumatic heart diseases
	109.0 Rheumatic myocarditis
	EXCLUDES 1 myocarditis not specified as rheumatic (151.4)

Additional Character Required ICD-10-CM 2021

• New Code

ICD-10-C	M 2021 Chapter 12. Diseases of the Si	cin and Subcutaneous Tissue	L86–L89.Ø2Ø
L8	6 Keratoderma in diseases classified elsewhere	L89.ØØ1	Pressure ulcer of unspecified elbow, stage
	Code first underlying disease, such as:		1 Healing pressure ulcer of unspecified
	Reiter's disease (MØ2.3-) EXCLUDES 1 gonococcal keratoderma (A54.89)		elbow, stage 1
	gonococcal keratosis (A54.89)		Pressure pre-ulcer skin changes limited to
	keratoderma due to vitamin A deficiency (E5Ø.8)		persistent focal edema, unspecified
	keratosis due to vitamin A deficiency (E5Ø.8)		elbow
	xeroderma due to vitamin A deficiency (E5Ø.8)	L89.002	Pressure ulcer of unspecified HCC elbow, stage 2
<mark>√4th L8</mark>	7 Transepidermal elimination disorders		Healing pressure ulcer of unspecified
	EXCLUDES 1 granuloma annulare (perforating) (L92.Ø)		elbow, stage 2
	L87.Ø Keratosis follicularis et parafollicularis in cutem penetrans		Pressure ulcer with abrasion, blister, partial
	Hyperkeratosis follicularis penetrans		thickness skin loss involving epidermis and/or dermis, unspecified
	Kyrle disease L87.1 Reactive perforating collagenosis		elbow
	L87.2 Elastosis perforans serpiginosa	L89.ØØ3	Pressure ulcer of unspecified
	L87.8 Other transepidermal elimination disorders		elbow, stage 3
	L87.9 Transepidermal elimination disorder, unspecified		Healing pressure ulcer of unspecified elbow, stage 3
L8	8 Pyoderma gangrenosum		Pressure ulcer with full thickness skin loss
	Phagedenic pyoderma		involving damage or necrosis of
	EXCLUDES 1 dermatitis gangrenosa (LØ8.Ø) DEF: Persistent debilitating skin disease characterized by irregular, boggy,		subcutaneous tissue, unspecified
	blue-red ulcerations, with central healing and undermined edges.	100 664	elbow Pressure ulcer of unspecified
<mark>√4[™] L8</mark>	9 Pressure ulcer	L89.004	Pressure ulcer of unspecified elbow, stage 4
	[INCLUDES] bed sore		Healing pressure ulcer of unspecified
	decubitus ulcer		elbow, stage 4
	plaster ulcer		Pressure ulcer with necrosis of soft tissues through to underlying muscle,
	pressure area		tendon, or bone, unspecified elbow
	pressure sore Code first any associated gangrene (196)	• L89.ØØ6	Pressure-induced deep tissue damage of
	EXCLUDES 2 decubitus (trophic) ulcer of cervix (uteri) (N86)		unspecified elbow
	diabetic ulcers (EØ8.621, EØ8.622, EØ9.621, EØ9.622, E1Ø.621,	L89.009	Pressure ulcer of unspecified elbow, unspecified stage
	E1Ø.622, E11.621, E11.622, E13.621, E13.622)		Healing pressure ulcer of elbow NOS
	non-pressure chronic ulcer of skin (L97)		Healing pressure ulcer of unspecified
	skin infections (LØØ-LØ8) varicose ulcer (183.Ø, 183.2)		elbow, unspecified stage
	AHA: 2018,4Q,69; 2018,3Q,3; 2018,2Q,21; 2017,4Q,109; 2017,1Q,49;		ulcer of right elbow Pressure ulcer of right elbow,
	2016,4Q,143	289.010	Pressure ulcer of right elbow, HCC unstageable
	TIP: The stage of a diagnosed pressure ulcer can be based on documentation from clinicians who are not the patient's provider.	L89.Ø11	Pressure ulcer of right elbow, stage 1
	documentation nom clinicians who are not the patient's provider.		Healing pressure ulcer of right elbow,
	Four Stages of Pressure Ulcer		stage 1 Pressure pre-ulcer skin changes limited to
Epider			persistent focal edema, right elbow
Dermi		L89.Ø12	Pressure ulcer of right elbow, HCC
	Subcutaneous tissue		stage 2 Healing pressure ulcer of right elbow,
			stage 2
	1 02 0 - D. P. P @ 02:		Pressure ulcer with abrasion, blister, partial
	Pland in alor		thickness skin loss involving epidermis and/or dermis, right elbow
	Stage 1 Description for a lodoma	189.013	Pressure ulcer of right elbow,
	Persistent focal edema Stage 2 Abrasion, blister, partial thickness	2071313	stage 3
	skin loss involving epidermis and/or dermis		Healing pressure ulcer of right elbow,
			stage 3 Pressure ulcer with full thickness skin loss
C			involving damage or necrosis of
Super fascia			subcutaneous tissue, right elbow
Musch		L89.Ø14	Pressure ulcer of right elbow, HCC
	Deep		stage 4 Healing pressure ulcer of right elbow,
	Bone Bone		stage 4
	Stage 3 Stage 4		Pressure ulcer with necrosis of soft tissues
	Full thickness skin loss Necrosis of soft tissues involving damage or necrosis through to underlying		through to underlying muscle,
	of subcutaneous tissue muscle, tendon, or bone	189.016	tendon, or bone, right elbow Pressure-induced deep tissue damage of
			right elbow
√5	L89.Ø Pressure ulcer of elbow	L89.Ø19	Pressure ulcer of right elbow, unspecified
	L89.00 Pressure ulcer of unspecified elbow		stage Healing pressure right of elbow NOS
	L89.000 Pressure ulcer of unspecified		Healing pressure ulcer of right elbow,
	elbow, unstageable		unspecified stage
			ulcer of left elbow
		L89.020	Pressure ulcer of left elbow, HCC unstageable
			-

• New Code

L86-L89.020

Appendix A: Valid 3-character ICD-10-CM Codes

AØ9	Infectious gastroenteritis and colitis, unspecified
A33	Tetanus neonatorum
A34	Obstetrical tetanus
A35	Other tetanus
A46	Erysipelas
A55	Chlamydial lymphogranuloma (venereum)
A57 A58	Chancroid Cranulane inquinele
A58 A64	Granuloma inguinale
A64 A65	Unspecified sexually transmitted disease Nonvenereal syphilis
A05 A7Ø	Chlamydia psittaci infections
A78	O fever
A86	Unspecified viral encephalitis
A89	Unspecified viral infection of central nervous system
A9Ø	Dengue fever [classical dengue]
A91	Dengue hemorrhagic fever
A94	Unspecified arthropod-borne viral fever
A99	Unspecified viral hemorrhagic fever
BØ3	Smallpox
BØ4	Monkeypox
BØ9	Unspecified viral infection characterized by skin and mucous membrane lesions
B2Ø	Human immunodeficiency virus [HIV] disease
B49	Unspecified mycosis
B54	Unspecified malaria
B59	Pneumocystosis
B64	Unspecified protozoal disease
B72	Dracunculiasis
B75	Trichinellosis
B79	Trichuriasis
B8Ø	Enterobiasis
B86	Scabies
B89	Unspecified parasitic disease
B91	Sequelae of poliomyelitis
B92	Sequelae of leprosy
CØ1	Malignant neoplasm of base of tongue
CØ7 C12	Malignant neoplasm of parotid gland Malignant neoplasm of pyriform sinus
C12 C19	Malignant neoplasm of rectosigmoid junction
C2Ø	Malignant neoplasm of rectum
C23	Malignant neoplasm of gallbladder
C33	Malignant neoplasm of trachea
C37	Malignant neoplasm of thymus
C52	Malignant neoplasm of vagina
C55	Malignant neoplasm of uterus, part unspecified
C58	Malignant neoplasm of placenta
C61	Malignant neoplasm of prostate
C73	Malignant neoplasm of thyroid gland
D34	Benign neoplasm of thyroid gland
D45	Polycythemia vera
D62	Acute posthemorrhagic anemia
D65	Disseminated intravascular coagulation [defibrination syndrome]
D66	Hereditary factor VIII deficiency
D67	Hereditary factor IX deficiency
D71	Functional disorders of polymorphonuclear neutrophils
D77	Other disorders of blood and blood-forming organs in diseases classified elsewhere
EØ2	Subclinical iodine-deficiency hypothyroidism
E15	Nondiabetic hypoglycemic coma
E35	Disorders of endocrine glands in diseases classified elsewhere
E4Ø	Kwashiorkor
E41	Nutritional marasmus
E42	Marasmic kwashiorkor
E43	Unspecified severe protein-calorie malnutrition
E45	Retarded development following protein-calorie malnutrition

E46	Unspecified protein-calorie malnutrition
E52	Niacin deficiency [pellagra]
E54	Ascorbic acid deficiency
E58	Dietary calcium deficiency
E59	Dietary selenium deficiency
E6Ø	Dietary zinc deficiency
E65	Localized adiposity
E68	Sequelae of hyperalimentation
FØ4	Amnestic disorder due to known physiological condition
FØ5	Delirium due to known physiological condition
FØ9	Unspecified mental disorder due to known physiological condition
F21	Schizotypal disorder
F22	Delusional disorders
F23	Brief psychotic disorder
F24	Shared psychotic disorder
F28	Other psychotic disorder not due to a substance or known physiological condition
F29	Unspecified psychosis not due to a substance or known physiological condition
F39	Unspecified mood [affective] disorder
F54	Psychological and behavioral factors associated with disorders or diseases classified elsewhere
F59	Unspecified behavioral syndromes associated with physiological disturbances and physical factors
F66	Other sexual disorders
F69	Unspecified disorder of adult personality and behavior
F7Ø	Mild intellectual disabilities
F71	Moderate intellectual disabilities
F72 F73	Severe intellectual disabilities Profound intellectual disabilities
F78	Other intellectual disabilities
F70 F79	Unspecified intellectual disabilities
F82	Specific developmental disorder of motor function
F88	Other disorders of psychological development
F89	Unspecified disorder of psychological development
F99	Mental disorder, not otherwise specified
GØ1	Meningitis in bacterial diseases classified elsewhere
GØ2	Meningitis in other infectious and parasitic diseases classified
GØ7	elsewhere Intracranial and intraspinal abscess and granuloma in diseases
GØ8	Intracranial and intraspinal phlebitis and thrombophlebitis
GØ9	Sequelae of inflammatory diseases of central nervous system
G1Ø	Huntington's disease
G14	Postpolio syndrome
G2Ø	Parkinson's disease
G26	Extrapyramidal and movement disorders in diseases classified
020	elsewhere
G35	Multiple sclerosis
G53	Cranial nerve disorders in diseases classified elsewhere
G55	Nerve root and plexus compressions in diseases classified elsewhere
G59	Mononeuropathy in diseases classified elsewhere
G63	Polyneuropathy in diseases classified elsewhere
G64	Other disorders of peripheral nervous system
G92	Toxic encephalopathy
G94	Other disorders of brain in diseases classified elsewhere
H22	Disorders of iris and ciliary body in diseases classified elsewhere
H28	Cataract in diseases classified elsewhere
H32	Chorioretinal disorders in diseases classified elsewhere
H36	Retinal disorders in diseases classified elsewhere
H42	Glaucoma in diseases classified elsewhere
ØØ	Rheumatic fever without heart involvement
1Ø	Essential (primary) hypertension

- 132 Pericarditis in diseases classified elsewhere
- I38 Endocarditis, valve unspecified

Chapter 6. Diseases of the Nervous System (GØØ–G99)

