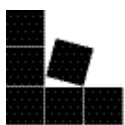


REFERENCE TO CHANGES

for

ICD-10-AM/ACHI/ACS ELEVENTH EDITION

2019



Australian Consortium for Classification Development

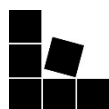


IHPA



Reference to Changes for ICD-10-AM/ACHI/ACS Eleventh Edition

2019



Australian Consortium for Classification Development

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Reference to Changes for ICD-10-AM/ACHI/ACS Eleventh Edition

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Table of Contents

ACS 0002 Additional diagnoses.....	1
ACS 0011 & 0019 review - Abandoned Procedures & Interventions not performed	30
ACS 0303 - Abnormal coagulation profile due to anticoagulants – minor amendments	38
ADA schedule dental updates.....	41
Allied health codes.....	66
Anaphylaxis and Anaphylactic Shock	68
Arthritis of spine and ACS 1334	84
Artificial sphincters indexing	87
Chronic kidney disease - ACS 1438.....	88
Clinical documentation, abstraction and and the entire clinical record	99
Complications of oesophagostomy - index.....	119
Decreased consciousness	122
Double balloon enteroscopy.....	125
Endoscopic injection of tattoo markers into gastrointestinal lesions.....	132
ENT review	138
Epileptic psychosis	169
History of stroke	178
Implanted hearing devices	188
Labour without delivery & Delivery outside hospital.....	207
Liver procurement procedures for transplantation.....	222
Lymph node interventions	226
MBS item review including Appendix A amendments.....	246
Mental health ACS review	275
Minor addenda	286
Neoplasms (ICD-10-AM).....	358
Neoplasms (ACHI)	377
Neoplasms (ACS)	387
Nontraumatic haematoma	409
Obstetrics and gynaecology review (ACHI).....	411
Obstetrics review (ACS).....	432
Obstetrics review (ICD-10-AM)	467
Ophthalmology updates	566
Repetitive transcranial magnetic stimulation (rTMS).....	611

Respiratory distress syndrome	613
Removal of braces () ICD-10-AM	622
Removal of braces () ACHI	732
Review of ICD-10-AM and ACS Conventions.....	793
Review of ACHI Conventions and terminology issues	826
See Alphabetic Index.....	849
Stereo electroencephalography (SEEG).....	867
Stretta procedure	878
Syndromes.....	880
Tarlov cyst	886
TransPyloric shuttle (TPS®).....	887
Umbilectomy	891
WHO Updates Manchester 2015 & Tokyo 2016 – Part 1	894
WHO Updates (Chapter 19 & 20) Manchester 2015 & Tokyo 2016 Part 2	932
Wound Management (debridement and management of wounds and burns)	948



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

ACS 0002 *Additional diagnoses*

Introduction/Rationale:

Australian Coding Standard (ACS) 0002 *Additional diagnoses* provides guidance for the clinical classification of significant comorbidities with the principal diagnosis and/or conditions arising during the episode of admitted care. The main objective of ACS 0002 is to ensure that the classification of these conditions is consistent nationally.

The introduction of Activity Based Funding (ABF) in the public hospital system promoted the improvement of diagnosis and intervention coding for clinical data reporting for use in funding hospital activity. Coding practices around additional diagnoses changed resulting in an increase of coding and reporting of additional diagnoses; inconsistent with the intent of ACS 0002 *Additional diagnoses* (i.e. consistently coding those conditions which are *significant* in the episode of admitted care). Consequently, this increase in coding of additional diagnoses has in certain circumstances, led to the grouping of episodes of care into a higher complexity level within the Australian Refined Diagnosis Related Groups (AR-DRG) classification.

The ACS are nationally mandated for use with the International Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM). However, it is common for some States and Territories to have extensions and clarifications to the ACS as long as they are not in contradiction to the ACS (i.e. it is not acceptable that an extension to the ACS facilitates a change in coding practice resulting in national inconsistency). Victoria published an extension to ACS 0002 *Additional diagnosis* in July 2017 which has generated much discussion nationally and during ICD Technical Group (ITG) meetings. The Victorian extension has informed the Eleventh Edition work on this ACS already commenced by the Australian Consortium for Classification Development.

The ACS 0002 *Additional diagnoses* review for Eleventh Edition has been undertaken to address the abovementioned concerns around the interpretation of ACS 0002 when determining whether a condition should be coded as a comorbidity and what type of care and monitoring of a condition should be considered as meeting the criteria of increased clinical care and/or monitoring.

ACCD agrees that the current three criteria for meeting ACS 0002 *Additional diagnosis*, especially 'increased clinical care and/or monitoring' is broad and potentially covers many conditions that were monitored only with no significant impact on the episode of admitted care. This may include coding of new conditions/pre-existing conditions (including chronic conditions), for which:

- routine swabs or diagnostic tests have been performed during the episode of care
- routine care has been provided during the episode of care
- ongoing medications have been continued during the episode of care
- routine services have been provided by clinicians during the episode of care

Anecdotal evidence suggests that the term 'increased monitoring' in the third criterion '*increased clinical care and/or monitoring*' has caused some confusion for classification users in the

interpretation and application of ACS 0002 *Additional diagnoses*. In some instances, clinical coders incorrectly interpret that additional diagnoses can be assigned for pre-existing/chronic conditions when they have been monitored during the episode of care. In other instances, this has been used to justify the assignment of higher complexity DRGs, which is one of reasons for this review. Removing the term 'monitoring' from this criterion reinforces that pre-existing/chronic conditions should only be assigned as additional diagnoses when they significantly affect patient management and therefore correctly reflect the complexity of care provided and overall resources used in the episode of care.

Bear in mind that ACS 0003 *Supplementary codes for chronic conditions* instructs clinical coders to assign supplementary U codes for certain chronic conditions, which are present on admission but have no impact on the current episode of care.

ACCD also believes that the decision as to whether a condition is clinically 'significant' should be determined by the treating clinicians, by way of documentation in the current episode of admitted care. Significance of a condition is very difficult to define within the context of classification. However, it is clear that there are situations where, conditions or symptoms are minor or trivial; and that these conditions are not significant in the episode of admitted care and not justified in meeting the intent of the criteria for coding of additional diagnoses.

In order to provide clarity and to facilitate greater national consistency when determining the assignment of additional diagnoses, ACCD proposes the following amendments to the Australian Coding Standards (ACS):

- Revise the 'Introduction' in the ACS with respect to the term 'clinician' and the clinician's 'scope of practice'
- Add the definition of 'clinical consultation' in ACS 0002 for coding purposes
- Remove the term 'monitoring' from the third criteria 'increased clinical care and/or monitoring'
- Expand the three criteria in ACS 0002 to include examples to help clarify the difference between "significant" and "insignificant" conditions in clinical context
- Add a new coding instruction in ACS 0002 with regards to classifying personal/family history of diseases and disorders, health status (eg organ transplantation status) classifiable to categories Z80-Z99 *Personal and family history and certain conditions influencing health status*
- Delete sections on Assessments and Multiple Coding from ACS 0002
- Delete the list of Additional diagnosis reporting referred to in other standards
- Add a new section cross referencing to ACS 0003 *Supplementary codes for chronic conditions*, to reinforce the assignment of supplementary U codes.

As a result of ACS 0002 *Additional diagnoses* review, the following speciality standards are considered redundant and therefore have been deleted:

- ACS 1336 *Hypertonia*
- ACS 1342 *Hyperreflexia*
- ACS 1808 *Incontinence*
- ACS 2112 *Personal history*

The following ACS have been updated for consistency with changes made to ACS 0002:

- ACS 0003 *Supplementary codes for chronic conditions*
- ACS 0052 *Same-day endoscopy - surveillance*
- ACS 0104 *Viral hepatitis*
- ACS 0036 *Neoplasm coding and sequencing*
- ACS 0303 *Abnormal coagulation profile due to anticoagulants*
- ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia*
- ACS 0936 *Cardiac pacemakers and implanted defibrillators*
- ACS 0940 *Ischaemic heart disease*
- ACS 2114 *Prophylactic surgery*

In developing this proposal, the following documents/information have been taken into account:

- Vic ACS 0002 *Additional diagnoses*
- WA Coders guide to use of nursing, midwifery & allied health documentation
- Feedback from ICD Technical Group (ITG) members including CCAG clinicians
- Feedback from 'code breakers' from a range of jurisdictions who undertook code breaking exercise utilising the proposed amendments to ACS 0002 (draft version).

This task should be read in conjunction with the task TN1313 Guidance on documentation.

ACCD PROPOSAL

TABULAR LIST OF DISEASES

...

R15	Faecal incontinence
------------	----------------------------

~~▽ 1808~~

Encopresis NOS

Excludes: that of nonorganic origin (F98.1)

R25.2

Cramp and spasm

~~▽ 1336~~

Excludes: carpopedal spasm (R29.0)
infantile spasms (G40.4-)

R29.2

Abnormal reflex

~~▽ 1342~~

Excludes: abnormal pupillary reflex (H57.0)
hyperactive gag reflex (J39.2)
vasovagal reaction or syncope (R55)

R32	Unspecified urinary incontinence
------------	---

~~▽ 1808~~

Enuresis NOS

Excludes: nonorganic enuresis (F98.0)
stress incontinence and other specified urinary incontinence (N39.3–N39.4)

PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO FAMILY AND PERSONAL HISTORY AND CERTAIN CONDITIONS INFLUENCING HEALTH STATUS

(Z80–Z99)

Z80	Family history of malignant neoplasm
------------	---

~~▽ 0050~~

...

Z85 Personal history of malignant neoplasm

▽ 0050,2442

Note: [Assign codes from this category as additional diagnoses only where the condition is completely resolved, but the history is relevant to the condition being managed or intervention being performed in the current episode of care.](#)

Excludes: follow-up examination after treatment of malignant neoplasm (Z08.-)
follow-up medical care and convalescence (Z42–Z51, Z54.-)

....

Z86 Personal history of certain other diseases

▽ 0050,2442

Note: [Assign codes from this category as additional diagnoses only where the condition is completely resolved, but the history is relevant to the condition being managed or intervention being performed in the current episode of care.](#)

Excludes: follow-up medical care and convalescence (Z42–Z51, Z54.-)

...

Z87 Personal history of other diseases and conditions

▽ 0050,2442

Note: [Assign codes from this category as additional diagnoses only where the condition is completely resolved, but the history is relevant to the condition being managed or intervention being performed in the current episode of care.](#)

Excludes: follow-up medical care and convalescence (Z42–Z51, Z54.-)

...

Australian Coding Standards

TABLE OF CONTENTS

13. Musculoskeletal system and connective tissue

- 1307 Disc disorders with myelopathy
- 1308 Disc lesion
- 1309 Dislocation or complication of hip prosthesis
- 1311 Exostosis
- 1316 Cement spacer/beads
- 1319 Meniscus/ligament tear of knee, NOS
- 1329 Silastic button arthroplasty
- 1330 Slipped disc
- 1334 Spondylosis/spondylolisthesis/retrolisthesis
- ~~1336 Hypertonia~~
- ~~1342 Hyperreflexia~~
- 1343 Erosion of knee

18. Symptoms, signs and abnormal clinical and laboratory findings, NEC

- 1805 Acopia
- 1807 Acute and chronic pain
- ~~1808 Incontinence~~
- 1809 Febrile convulsions
- 1810 Skin tear and frail skin

21. Factors influencing health status and contact with health services

- 2103 Admission for post acute care
- 2104 Rehabilitation

2105	Long term/nursing home type inpatients
2108	Assessment
2112	Personal history
2114	Prophylactic surgery
2115	Admission for allergen challenge
2116	Palliative care
2117	Non-acute care
2118	Exposure to tobacco smoke

INTRODUCTION

...

ICD-10-AM, ACHI AND THE AUSTRALIAN CODING STANDARDS

Morbidity data on all admitted patients are required to be submitted under the Australian Health Care Agreements (AHCAs). All states and territories must provide data as specified in the Admitted Patient Care National Minimum Data Set (APC NMDS) (~~METeOR: 535047~~) (Australian Institute of Health and Welfare 2018⁴). Diagnoses, interventions and external causes of injury are recorded using ICD-10-AM and ACHI. The ACS are designed to be used in conjunction with ICD-10-AM and ACHI.

ICD-10-AM, ACHI and ACS are regularly updated and released in tandem in Australia – historically biennially except for Eighth Edition which had a triennial release.

The ICD-10-AM and ACHI Tabular Lists include an annotation of ∇ next to certain codes indicating that an ACS exists which will assist in the application of the code.

HOW TO USE THIS DOCUMENT

~~Standards in this document~~ The ACS are categorised by site and/or system according to the specialty to which the diagnosis or ~~procedure~~ intervention relates.

~~Operations and procedures are also categorised by site.~~ For example, ~~'tonsillitis'~~ 'Functional endoscopic sinus surgery' (FESS) is discussed in Chapter 8 *Ear, Nose, Mouth and Throat (ENMT)*. Guidelines regarding Any procedures-interventions which can be performed on many-multiple sites are included in the 'General standards for interventions' section. Refer first to the Standards Index.

~~Where a procedure involves multiple sites, which may be categorised into more than one chapter, reference the index in the first instance.~~

The term 'clinician' is used throughout the ~~document~~ ACS and refers to the treating medical officer but may refer to other clinicians such as allied health professionals, midwives, and nurses ~~and allied health professionals~~. Generally, medical officer documentation is the primary source for clinical coders to use for classification purposes. The following example indicates that clinical coders can also use documentation from other clinicians if the documented information is appropriate to the clinician's ~~In order to assign a code associated with a particular clinician's documentation, the documented information must be appropriate to the clinician's discipline~~ scope of practice.

EXAMPLE 1:

- malnutrition documented by a dietitian
- pressure injuries documented by a wound specialist (Clinical Nurse Specialist) or a registered nurse
- postpartum haemorrhage documented by a midwife
- dysphagia documented by a speech pathologist

GENERAL STANDARDS FOR DISEASES

0001 PRINCIPAL DIAGNOSIS

The principal diagnosis is defined as:

“The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential care or an attendance at the health care establishment, as represented by a code” (METeOR: 514273) (Australian Institute of Health and Welfare 20184).

...

ACUTE **AND** ON CHRONIC CONDITIONS

If a condition is described as both acute (subacute) and chronic **and separate subterms exist in the Alphabetic Index at the same indentation level**, code both and sequence the acute (subacute) code first.

EXAMPLE 5:

Admission for acute on chronic pancreatitis.

Principal diagnosis: ~~K85.9~~ — *Acute pancreatitis, unspecified*

Additional diagnosis: ~~K86.1~~ — *Other chronic pancreatitis*

...

0002 ADDITIONAL DIAGNOSES

An additional diagnosis is defined as:

“A condition or complaint either coexisting with the principal diagnosis or arising during the episode of admitted patient care, episode of residential care or attendance at a health care establishment, as represented by a code” (METeOR: 514271) (Australian Institute of Health and Welfare, 20184).

Codes assigned for additional diagnoses are a substantial component of the Admitted Patient Care National Minimum Data Set (APC NMDS). “The purpose of the APC NMDS is to collect information about care provided to admitted patients in Australian hospitals” (METeOR: 535047) (Australian Institute of Health and Welfare, 20184).

The national morbidity data collection is not intended to describe the current disease status of the inpatient population, but rather the conditions that are significant in terms of treatment required, investigations needed and resources used in each episode of care.

For coding classification purposes, additional diagnoses should be interpreted as conditions that significantly affect patient management in terms of requiring any of the following:

- commencement, alteration or adjustment of therapeutic treatment
- diagnostic procedures
- increased clinical care **and/or monitoring**

Many of the above activities are performed by clinicians in the form of clinical consultation. For the purposes of classification, a clinical consultation refers to documentation provided by the:

- treating clinician/team who is primarily responsible for managing a patient’s condition during the episode of care

- specialist who provides advice/opinion, to the referring clinician/team, regarding a patient's management
- nurses, midwives and allied health professionals who are engaged in a patient's management within their scope of practice.

Documentation of a consultation does not have to be a formal consultation report. Documentation of assessment of a condition in the progress notes or elsewhere (eg a care plan) is sufficient. Telephone or electronic consultation with clear documentation of the information exchange is also regarded as a clinical consultation.

Note that a condition may be documented by the treating clinician/team due to its 'clinical significance', however, for classification purposes some conditions are normally not coded as additional diagnoses in certain circumstances.

COMMENCEMENT, ALTERATION OR ADJUSTMENT OF THERAPEUTIC TREATMENT

- Do not assign an additional diagnosis code for a condition that is transient and can be treated successfully with administration of medication **without the need for further consultation, investigation or a plan of care** (eg Mylanta for heartburn; paracetamol for headache; Sominex for insomnia) (see Examples 1, 2 & 3).

An additional diagnosis code can be assigned if a condition requires **further** assessment (ie the condition is no longer considered transient) by a clinician **and**

- a diagnostic or therapeutic intervention is undertaken, **or**
- a care plan is prescribed following clinical consultation

For example, CT scan of the brain performed to investigate the cause of the headache; altered medication dosage for heartburn; neurological observations ordered following fall; strict fluid balance for fluid overload (see Examples 4 & 15)

- Do not assign an additional diagnosis code for a pre-existing condition requiring administration of ongoing medication. This includes where the ongoing medication is adjusted due to the management of another condition (eg reducing dosage of diuretics due to acute kidney injury (AKI) in patients with congestive heart failure (CCF); adjustment of the dose of antihypertensive medication due to hypotension) (see Examples 5 & 6).

An additional diagnosis code can be assigned for a pre-existing condition if a change in the pre-existing condition requires an amendment to its treatment plan (eg increase in diuretics dosage due to exacerbation of congestive heart failure (CCF)) (see Examples 7 & 9)

- Do not assign an additional diagnosis code for a pre-existing condition that results in minor adjustment to the diagnostic work-up or the care plan (eg ordering a non-contrast CT scan instead of a contrast CT scan; a V/Q scan instead of a CTPA for a suspected pulmonary embolism in patients with chronic kidney disease; selection of non-hepatotoxic agents in patients with chronic liver disease) (see Example 8).

An additional diagnosis code can be assigned for a pre-existing condition if it results in a major variation to the care plan for another condition (eg a procedure is delayed/cancelled due to a pre-existing condition; patient needs admission to the Intensive Care Unit following surgery that would normally be managed in the surgical ward postoperatively). See also ACS 0011 *Intervention not performed or cancelled* (see Example 10)

- Do not assign an additional diagnosis code for a condition that is treated with nurse-initiated medications, or nurse-initiated interventions **alone** (eg applying zinc oxide cream for nappy rash; applying Sudocream for groin excoriation; providing a heat pack for neck pain; giving juice or fruit for hypoglycaemia) (see Examples 11, 17 & 19).

An additional diagnosis code can be assigned for the above scenario if a condition is subsequently assessed by a clinician/team, and diagnostic or therapeutic intervention (s) performed, or a care plan is commenced for a condition (see Example 12).

EXAMPLE 1:

Patient was admitted for induction of labour due to reduced fetal movements. In the progress notes, the midwife noted “patient complained of having headaches which resolved with paracetamol. Blood pressure was 135/90 and later 130/80. CTG has been performed awaiting review by clinician. No other concerns voiced”. No investigations were performed for the headache. The patient progressed to delivery later that day.

Principal diagnosis: Delivery

Additional diagnosis: Maternal care for decreased fetal movements

In this example, the headache is a transient condition in this episode of care and was treated successfully with administration of medication without the need for further investigations or a care plan; therefore, it does not meet the criteria in ACS 0002.

EXAMPLE 2:

Patient was admitted with acute alcohol intoxication. Patient was assessed by a drug and alcohol clinician and alcohol dependence was diagnosed. In the progress notes: “Phenergan 25 mg was given for insomnia”. The medication chart noted ‘Phenergan 25 mg PRN nocte’. No further investigations were undertaken for insomnia during the episode of care.

Principal diagnosis: Acute alcohol intoxication

Additional diagnosis: Alcohol dependence syndrome

In this example, the insomnia is a transient condition in this episode of care and was treated successfully with administration of medication without the need for further investigations or a care plan; therefore, it does not meet the criteria in ACS 0002.

EXAMPLE 3:

Patient was admitted for pneumonia. In the progress notes: “patient had PRN gastrogel for reflux with good effect”. No other documentation to indicate that a diagnostic procedure was ordered or a change of treatment was commenced for reflux.

Principal diagnosis: Pneumonia

In this example, the reflux is a transient condition in this episode of care and was treated successfully with administration of medication without the need for further investigations or a care plan; therefore, it does not meet the criteria in ACS 0002.

EXAMPLE 4:

Patient was admitted for low back pain. During the hospital stay, patient reported worsening epigastric discomfort and reflux after eating meals. Patient was on regular pantoprazole 20mg prior to admission for ongoing gastro-oesophageal reflux disease (GORD). After clinical review, the dosage of pantoprazole was increased to 40mg daily. Patient’s symptom had improved by discharge.

Principal diagnosis: Low back pain

Additional diagnosis: Gastro-oesophageal reflux disease

In this example, the reflux meets the criteria in ACS 0002 as the dosage of their regular medication (pantoprazole) was increased for the pre-existing GORD after clinical review.

EXAMPLE 5:

Patient with a past history of atrial fibrillation (AF) on aspirin therapy, was admitted with aspirin induced duodenal ulcers. Aspirin was withheld during the episode of care, and the patient was commenced on medication to treat the ulcers.

Principal diagnosis: Duodenal ulcer

Additional diagnosis: Adverse effect from aspirin

In this example, the pre-existing AF does not meet the criteria in ACS 0002 as withholding the aspirin was part of the treatment plan for the duodenal ulcer, not for management of the AF.

EXAMPLE 6:

An elderly patient with hypertension was admitted with postural hypotension, in the context of poor oral intake and dehydration. Patient received rehydration with IV fluids, and his regular antihypertensive medication (perindopril) was withheld due to the postural hypotension.

Principal diagnosis: Postural hypotension

Additional diagnosis: Dehydration

In this example, the pre-existing hypertension does not meet the criteria in ACS 0002, as withholding the perindopril is part of the treatment plan for postural hypotension; the change is not for management of the hypertension. Assign U82.3 *Hypertension* for the hypertension (see ACS 0003 *Supplementary codes for chronic conditions*).

EXAMPLE 7:

A 64-year-old man was admitted with a two day history of central chest pain on a background of advanced pulmonary fibrosis and hypertension. On arrival in the Emergency Department, he had a GCS of 15/15, oxygen saturation of 80% and blood pressure of 185/90. Metoprolol and amlodipine were administered for hypertension. He underwent a coronary angiogram and a diagnosis of angina secondary to coronary artery disease was made. During the admission, the patient's low oxygen saturation (documented as due to the pre-existing pulmonary fibrosis) required increased oxygen supplement and Ordine was commenced for shortness of breath. Home oxygen extension was arranged and a Hudson mask was provided on discharge.

Principal diagnosis: Angina pectoris, unspecified

Additional diagnosis: Coronary artery disease

Pulmonary fibrosis

Hypertension

In this example, the pre-existing pulmonary fibrosis and hypertension both meet the criteria in ACS 0002 as therapeutic treatment was given for the hypertension and a care plan (commenced Ordine, home oxygen extension with Hudson mask) commenced for the pulmonary fibrosis.

EXAMPLE 8:

Patient with a known chronic kidney disease (CKD) stage 3 was admitted for observation of a head injury after falling down a flight of stairs and suffering a minor laceration to the forehead and a contusion to the abdominal wall. Documentation in the admission notes stated “CKD 10 years, for non-contrast CT scan of head, neck, chest and abdomen to avoid acute kidney injury”. Head/neck CT scan showed no fracture of skull, and no swelling or haemorrhage of the brain. Chest/abdominal CT scan was negative for free fluid and organ injuries. Patient was discharged home the next day. No other documentation to indicate that the clinician considered the CKD as an issue during the admission.

Principal diagnosis: Head injury

Additional diagnosis: Laceration of forehead

Contusion of abdominal wall

External cause of injury

Place of occurrence

Activity

In this example, the pre-existing CKD is not a significant condition in the episode of care, as it only resulted in a minor adjustment to the diagnostic work-up for the injuries (non-contrast CT scan instead of contrast CT scan). No clinical consultation or care plan was undertaken for the CKD; therefore, it does not meet the criteria in ACS 0002. Assign U87.1 *Chronic kidney disease, stage 3-5* for the CKD (see ACS 0003 *Supplementary codes for chronic conditions*).

EXAMPLE 9:

A 61-year-old man with a history of hypertension and chronic kidney disease (CKD) was admitted with a non-ST elevation myocardial infarction (NSTEMI) and acute pulmonary oedema. Patient was treated with BiPAP, GTN infusion and underwent preparation for a coronary angiogram. Prior to the intervention, a renal physician was consulted regarding the patient’s kidney function and noted that “Creatinine 140 and eGFR 45. Risk of contrast nephropathy is relatively low given eGFR is more than 30. Patient needs to be monitored for fluid status and UEC, suggest pre and post intervention hydration”.

Principal diagnosis: Non-ST elevation myocardial infarction

Additional diagnosis: Left ventricular failure

Chronic kidney disease, stage 3

In this example, the pre-existing CKD meets the criteria in ACS 0002 in the episode of care, as clinical consultation was undertaken resulting in a care plan for the CKD. Assign U82.3 *Hypertension* for the hypertension (see ACS 0003 *Supplementary codes for chronic conditions*).

EXAMPLE 10:

A patient was admitted for elective left total hip replacement for osteoarthritis. Prior to the operation, the anaesthetic team requested an Intensivist to assess the patient. Consultation noted “known to have severe OSA, on CPAP for four months. CCF with left ventricle ejection fraction (LVEF) of 40%. Risk of developing cardiac or respiratory complications is very high, needs ICU admission post-operation and troponin test. Postoperative hypotension is very likely given biventricular failure”. Patient was transferred to ICU after surgery and extubated on the second day. She was treated with BiPAP, Lasix for fluid overload, and chest physiotherapy in addition to other routine post-operative management.

Principal diagnosis: Osteoarthritis

Additional diagnosis: Congestive heart failure

Obstructive sleep apnoea

In this example, the pre-existing congestive heart failure and obstructive sleep apnoea both meet the criteria in ACS 0002 in the episode of care, as these conditions resulted in a major variation to the care plan following the Intensivist consultation (“needs ICU admission after hip replacement”).

EXAMPLE 11:

Patient was admitted for febrile neutropenia and reduced oral intake secondary to chemotherapy for left breast cancer. Patient was advised by a nurse to drink more fluids as slightly hypotensive.

Principal diagnosis: Neutropenia

Additional diagnosis: Drug-induced fever

Adverse effect from chemotherapy

Breast cancer

Morphology code for breast cancer

In this example, the hypotension was not a significant condition in the episode of care, as the patient was only advised to drink more fluids; therefore, it does not meet the criteria in ACS 0002. Assign codes for the breast cancer as per the guidelines in ACS 0236 *Neoplasm coding and sequencing*.

EXAMPLE 12:

An 84-year-old female was admitted after a fall. CT scan of head, neck and chest revealed multiple fracture of ribs (4-7) on the left side of chest, which were treated conservatively. Her past medical history included ischaemic heart disease, hypertension, chronic obstructive pulmonary diseases (COPD) and falls. On arrival, the patient was examined by the ward nurse, who diagnosed and documented a stage I pressure injury (PI) on the left heel. A wound care treatment plan was commenced.

Principal diagnosis: Fractures of multiple ribs

Additional diagnosis: External cause of injury

Place of occurrence

Activity

Pressure injury, stage I, heel

In this example, the pressure injury meets the criteria in ACS 0002 in the episode of care, as the PI was assessed and diagnosed by a nurse (which is within the scope of nursing practice).

Assign U82.3 *Hypertension* for the hypertension, U82.1 *Ischaemic heart disease* for the ischaemic heart disease and U83.2 *Chronic obstructive pulmonary disease* for the COPD (see ACS 0003 *Supplementary codes for chronic conditions*).

DIAGNOSTIC PROCEDURES

For classification purposes, do not assign an additional diagnosis code based on the performance of routine tests alone, such as (see Example 13):

- routine ARO (Antibiotic Resistant Organisms) screening
- full blood count (FBC)
- functional tests (eg liver or kidney function)

An additional diagnosis code can be assigned for a condition if a diagnostic test(s) was ordered specifically to establish a diagnosis or provide greater specificity to an established diagnosis (see Examples 14, 15 & 16).

EXAMPLE 13:

Patient with chronic kidney disease (CKD), stage 3 was admitted for a hip hemiarthroplasty for treatment of a femoral neck fracture. Routine day 1 and day 2 postoperative blood tests revealed the patient's haemoglobin (Hb) levels were slightly below the normal range and kidney function tests (KFTs) were stable. No further investigations or interventions were undertaken during the episode, but on discharge the patient was referred to his general practitioner to follow-up the Hb level and CKD.

Principal diagnosis: Femoral neck fracture

Additional diagnosis: External cause of injury

Place of occurrence

Activity

In this example, the slightly decreased Hb levels and KFTs were obtained from routine post-operative monitoring and there were no further investigations or interventions undertaken during the episode of care for these conditions; therefore, they do not meet the criteria in ACS 0002. Assign U87.1 *Chronic kidney disease, stage 3-5* for the CKD (see ACS 0003 *Supplementary codes for chronic conditions*).

EXAMPLE 14:

An elderly patient was admitted with per rectal bleeding. A diagnostic sigmoidoscopy was performed, which confirmed rectal cancer. On admission, routine blood tests showed that the patient's haemoglobin (Hb) level was 79 g/L. Day 2 progress notes stated "Hb 79, anaemia is likely due to low gastrointestinal bleeding, repeat FBC, EUC for next two days".

Principal diagnosis: Rectal cancer

Additional diagnosis: Anaemia secondary to blood loss

In this example, the repeat FBC (including Hb) was specifically ordered by a clinician to confirm the diagnosis of anaemia. Therefore, the anaemia meets the criteria in ACS 0002 in this episode of care.

EXAMPLE 15:

A 36-year-old obese woman was admitted for a laparoscopic sleeve gastrectomy. During the admission, the patient reported a dull headache accompanied by numbness in the left side of her face. She described the headache as different from her usual migraine attacks and not responding to sumatriptan (self medication). A CT scan of brain was ordered, which did not reveal any abnormality.

Principal diagnosis: Obesity

Additional diagnosis: Headache

In this example, the headache meets the criteria in ACS 0002, as a CT scan of the brain was specifically ordered to investigate the cause of headache (ie the condition required further investigation).

EXAMPLE 16:

An 88-year-old woman presented to hospital with increasing shortness of breath secondary to an exacerbation of congestive heart failure (CCF) and asthma. Routine admission screening for ARO (Antibiotic Resistant Organisms) identified that she was MRSA (Methicillin Resistant Staphylococcus Aureus) positive. The infection control team ordered implementation of contact precautions and she remained in single room isolation. Her CCF and asthma responded well to treatment with nebulised salbutamol and diuresis.

Principal diagnosis: Congestive heart failure

Additional diagnosis: Asthma

Carrier of other specified bacterial diseases

Resistance to methicillin

In this example, although ARO screening was routine, the positive MRSA status meets the criteria in ACS 0002 in the episode of care, as there was an infection control protocol implemented for the patient.

INCREASED CLINICAL CARE

Conditions are not significant in an episode of care when clinical care provided for a condition is **routine** in nature. Examples of routine clinical care include:

- general nursing care, such as administration of medications, dietary check, recording of fluid balance (intake and output), management of incontinence (eg urinary and bowel), pressure area prevention and skin care, assisting with activities of daily living and mobilisation (see Example 17)
- assessment of vital signs (including pulse, blood pressure, temperature and oxygen saturation), blood glucose levels (BGLs), electrolyte balance, haemoglobin levels and routine functional tests (eg liver and kidney function) (see Examples 13)
- assessment of pre-existing conditions without a documented care plan specifically for these conditions (eg routine preoperative anaesthetist assessment, routine allied health assessment such as physiotherapy assessment of Parkinson's disease, with no documented care plan or treatment commenced)
- pre and postoperative management, such as withholding medications prior to an intervention, checking drain/catheters, monitoring and management of pain levels and bowel function, deep venous thrombosis and pressure injury prophylaxis (see Example 19)

Conditions are significant in an episode of care when clinical care provided for a condition is beyond routine (ie **increased clinical care**). Examples of increased clinical care include:

- providing care for a condition that is in excess of the routine care that would normally be provided by medical officer/nursing/allied health for that condition (eg documented evidence that the patient with dementia requires increased observation due to fluctuation in behaviour, cognition and physical condition)
- receiving clinical consultation for a condition with documentation of a clinical assessment, a diagnostic statement, or a care plan for the condition (eg patient referral to an oncologist for cancer assessment with documentation of advice received; wound specialist/nurse assessment of pressure injury with documentation of staging of pressure injury and care plan). Note that a care plan may include an adjustment to, or continuation of, the current treatment plan, or transfer to another facility with documentation of the reason(s) for transfer (see Examples 12, 21 & 22)
- performance of a therapeutic intervention for a condition (eg dialysis for end-stage renal failure, pharmacotherapy for multiple sclerosis) (see Examples 4, 5, 6 & 7)
- pre and postoperative management in excess of routine care (see also ACS 1904 *Procedural complications*) (see Examples 18 & 20)

EXAMPLE 17:

An 86-year-old man was admitted with community acquired pneumonia. Patient had a long history of urinary incontinence. During the admission, his incontinence pads were changed regularly and zinc oxide cream applied daily to his skin, by the nurse.

Principal diagnosis: Pneumonia

In this example, the management of the patient's urinary incontinence and skin is routine care; therefore, it does not meet the criteria in ACS 0002.

EXAMPLE 18:

Patient admitted for laparoscopic hysterectomy for a thickened endometrium. Postoperatively the patient reported repeated incidences of involuntary passage of urine since the removal of an indwelling catheter. The clinical team assessed the patient and noted in the progress notes, "Developed urinary incontinence 2 days post hysterectomy. Patient denied dysuria, haematuria, faecal incontinence or history of urinary incontinence. Risk factors: overweight, menopause and post-hysterectomy. Physical examinations including neurological screening were unremarkable. Plan: blood and urinalysis to rule out urinary tract infection; bladder ultrasound scan to measure post-void residual urine; strict input/output record and continence chart; nurse to assist with toileting; urological referral if problem persists". Urinalysis was negative for urinary tract infection. Ultrasound estimation of post-void residual urine was negligible. Patient's symptoms were largely resolved at discharge.

Principal diagnosis: Thickened endometrium

Additional diagnosis: Urinary incontinence

In this example, the urinary incontinence meets the criteria in ACS 0002 in the episode of care, as clinical consultation was undertaken and diagnostic procedures were performed.

EXAMPLE 19:

A 77-year-old man was admitted for a repair of an inguinal hernia. Day 2 postoperative progress notes: "constipation – aperients given". Day 3 postoperative nursing notes: "diarrhoea due to aperients overload and aperients withheld". No further investigations undertaken during the episode.

Principal diagnosis: Inguinal hernia

In this example, the monitoring and management of bowel function during the postoperative period is routine care and withholding aperients is a nurse-initiated intervention; therefore, neither constipation nor diarrhoea meet the criteria in ACS 0002 in the episode of care.

EXAMPLE 20:

An elderly patient was admitted for cholecystectomy for chronic cholecystitis. Day 3 post cholecystectomy progress notes: "patient reported ongoing abdominal pain and no bowel motions for the previous three days, despite administration of laxatives". Physical examinations revealed a distended abdomen with a firm, large bloated appearance. Abdominal x-ray confirmed no bowel obstruction, but a large amount of faecal material was seen in the large bowel. Fleet enemas were charted to relieve the constipation.

Principal diagnosis: Chronic cholecystitis

Additional diagnosis: Constipation

In this example, the constipation is a significant condition during the episode of care, as it required investigation (ie abdominal x-ray) and an intervention was undertaken; therefore, it meets the criteria in ACS 0002.

EXAMPLE 21:

Patient with metastatic endometrial cancer was admitted for unstable angina. During the hospital stay, the patient developed per-vaginal (PV) bleeding, secondary to her endometrial cancer. A radiation oncologist was consulted over the phone for advice on whether urgent radiation therapy was required. Documentation indicated that the radiation oncologist advised that the patient had been assessed as unsuitable for radiation therapy.

Principal diagnosis: Unstable angina

Additional diagnosis: Endometrial cancer

Morphology code for endometrial cancer

In this example, the endometrial cancer meets the criteria in ACS 0002 in the episode of care, as clinical consultation was undertaken specifically for the condition (Note: telephone consultation with clear documentation of the information exchange is regarded as clinical consultation).

EXAMPLE 22:

A 55-year-old man presented with lower respiratory infection on background of chronic obstructive pulmonary disease. He was commenced on Bactrim BD and physiotherapy performed. On the second day of the admission, the patient complained of having chest tightness since arrival to the hospital. He described the pain as constant, but not radiating. Nurse consulted the treating clinician over the phone and documented “team doctor advised over the phone to administer PRN GTN 300mcg. ECG was performed. Patient states that pain was not relieved with PRN oral GTN, so was given further GTN 300mcg as per team instruction. Patient remains saturating well and telemetry is in situ”. Patient responded well to the treatment and was discharged home.

Principal diagnosis: Chronic obstructive pulmonary disease with acute lower respiratory infection

Additional diagnosis: Chest pain

In this example, the chest pain meets the criteria in ACS 0002 in the episode of care, as clinical consultation was undertaken specifically for the condition (Note: telephone consultation with clear documentation of the information exchange is regarded as clinical consultation).

SYMPTOMS, SIGNS AND ILL-DEFINED CONDITIONS

Care should be taken when assigning codes for symptoms, signs and ill-defined conditions from Chapter 18 *Symptoms, signs and abnormal clinical and laboratory findings* as additional diagnoses. Clinical coders should ensure they meet the criteria in ACS 0002 (see also *Note* at the beginning of Chapter 18 *Symptoms, signs and abnormal clinical findings, not elsewhere classified*).

PROBLEMS AND UNDERLYING CONDITIONS

If a problem with a known underlying cause is being treated, then both conditions should be coded (see also ACS 0001 *Principal diagnosis/Problems and underlying conditions*).

EXAMPLE 23:

Patient is admitted for a fractured hip and during the episode of care develops ascites due to known underlying liver disease. The ascites is drained.

Principal diagnosis: Fractured hip

Additional diagnoses: Ascites

Liver disease

Procedure: Drainage of ascites

ASSESSMENTS

Conditions documented during a clinical assessment (eg preoperative assessment by an anaesthetist) should only be coded when they meet the above criteria or where the condition changes the standard treatment protocol for a particular procedure/condition.

MULTIPLE CODING

There are situations which require the assignment of additional codes to reflect the various components of a disease, which may themselves not meet the above criteria of an additional diagnosis (see also ICD-10-AM Tabular List: *Conventions used in the Tabular List of Diseases/Instructional notes/terms*).

Examples of common areas where multiple coding is used in ICD-10-AM include:

- aetiology and manifestations (see also ACS 0001 *Principal diagnosis*)
- local infections to identify the organism
- functional activity of neoplasms
- neoplasm morphology (see also ACS 0233 *Morphology*)
- underlying disease
- toxic agents
- nature of injury or cause of poisoning or adverse effect
- diabetes mellitus with complications
- postprocedural complications

ADDITIONAL DIAGNOSIS REPORTING REFERRED TO IN OTHER STANDARDS

The standards listed below include guidance that, in some cases, may indicate that certain conditions that would not normally meet the criteria ACS 0002 should be assigned as additional diagnoses. Examples of these sorts of cases are 'status' codes such as HIV, smoking, carrier, conditions found at endoscopy and 'flag' codes such as duration of pregnancy, or outcome of delivery.

For classification purposes, a number of conditions have been identified as mandatory for coding. Examples of conditions requiring mandatory code assignment include:

- HIV/AIDS (see ACS 0102 *HIV/AIDS (human immunodeficiency virus/acquired immune deficiency syndrome)*)
- viral hepatitis (see ACS 0104 *Viral hepatitis*)
- diabetes mellitus and intermediate hyperglycaemia (see ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia*)
- tobacco use disorders (see ACS 0503 *Drug, alcohol and tobacco use disorders*)

A number of speciality standards direct coders to assign additional diagnosis codes for certain conditions or statuses that do not normally meet the criteria in ACS 0002. Examples of these conditions or statuses include multiple injuries, carrier status, and 'flag' codes such as duration of pregnancy and outcome of delivery.

SUPPLEMENTARY CODES FOR CHRONIC CONDITIONS

Assign a code from U78-U88 *Supplementary codes for chronic conditions* for certain chronic conditions that are present on admission but do not meet the criteria for coding as outlined in this standard, or other speciality standards. See also ACS 0003 *Supplementary codes for chronic conditions*.

See also ACS 0049 *Disease codes that must never be assigned*.

Note that this list may not always be exhaustive as standards are changed over time.

- ~~ACS 0005~~ ~~Syndromes~~
- ~~ACS 0011~~ ~~Admission for surgery not performed~~
- ~~ACS 0012~~ ~~Suspected conditions~~
- ~~ACS 0051~~ ~~Same day endoscopy diagnostic~~
- ~~ACS 0102~~ ~~HIV/AIDS (Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome)~~
- ~~ACS 0104~~ ~~Viral hepatitis~~
- ~~ACS 0401~~ ~~Diabetes mellitus and intermediate hyperglycaemia~~
- ~~ACS 0503~~ ~~Drug, alcohol and tobacco use disorders~~
- ~~ACS 0936~~ ~~Cardiac pacemakers and implanted defibrillators~~
- ~~ACS 1404~~ ~~Admission for kidney dialysis~~
- ~~ACS 1500~~ ~~Diagnosis sequencing in delivery episodes of care~~
- ~~ACS 1511~~ ~~Termination of pregnancy~~
- ~~ACS 1521~~ ~~Conditions and injuries in pregnancy~~
- ~~ACS 1544~~ ~~Complications following abortion and ectopic and molar pregnancy~~
- ~~ACS 1548~~ ~~Puerperal/postpartum condition or complication~~
- ~~ACS 1549~~ ~~Streptococcal group B infection/carrier in pregnancy~~
- ~~ACS 1607~~ ~~Newborn/neonate~~
- ~~ACS 1807~~ ~~Acute and chronic pain~~
- ~~ACS 2118~~ ~~Exposure to tobacco smoke~~

ACUTE ON CHRONIC CONDITIONS

See guidelines in ACS 0001 *Principal diagnosis/Acute on chronic conditions*.

INCIDENTAL FINDINGS AND CONDITIONS

An abnormal finding or condition (such as noted on clinical assessment, laboratory, x-ray, pathologic, and other diagnostic result) may be identified and/or documented during an episode of care. Each case should be assessed on its own merits to determine if the documentation sufficiently describes a condition that meets the criteria in ACS 0002 *Additional diagnoses* in order to be coded (see also ACS 0010 *Clinical documentation and General abstraction guidelines/Test results and medication charts*).

However, where these findings or conditions are incidental to the episode of care and are only flagged for follow-up or referral post discharge they do not qualify for code assignment under ACS 0002 *Additional diagnoses*.

EXAMPLE 24:

Patient was admitted for acute cholecystitis. Upon abdominal x-ray, a lesion on the liver was incidentally noted. No further investigations were undertaken during the episode but on discharge, the patient was referred to their general practitioner to follow-up the liver lesion.

Principal diagnosis: Acute cholecystitis

In this example, As the liver lesion ~~does~~ not meet the criteria in ACS 0002 in ~~the~~is episode of care, ~~therefore~~, it is not coded.

EXAMPLE 25:

An elderly patient was admitted with a scaphoid fracture following a fall. Prior to discharge, a skin lesion is noticed on the forearm. The patient is referred to a specialist for follow-up of the skin lesion after discharge.

Principal diagnosis: Fractured scaphoid

In this example, As the skin lesion ~~did~~does not meet the criteria in ACS 0002 in ~~the~~is episode of care, ~~therefore~~, it is not coded.

EXAMPLE 264:

Patient was admitted for laparoscopy for fibroid uterus. During the laparoscopy, a tumour was noted on the sigmoid colon. Clinicians attempt to remove the [colonic](#) tumour, however it was considered too difficult to resect in this episode. The patient is referred to a specialist for follow-up of the colon ~~lesion-tumour~~ after discharge.

Principal diagnosis: Fibroid uterus

Additional diagnosis: Colon ~~lesion~~[tumour](#)

In this example, the colon ~~tumour~~[lesion](#) ~~has~~ met the criteria in ACS 0002 in the ~~is~~ episode of care [due to the attempt to remove the tumour intraoperatively; therefore, ~~and~~ it](#) is coded.

ABNORMALITIES NOTED ON EXAMINATION OF THE NEWBORN

~~A code should be assigned for these conditions only when they meet the criteria outlined in this standard or another standard indicates they should be coded.~~ [Assign codes for abnormalities noted during a newborn examination only when they meet the criteria in ACS 0002, or another ACS \(see also ACS Chapter 16 *Certain conditions originating in the perinatal period*\).](#)

EXAMPLE 275:

Neonatologist notes strawberry naevus, jaundice and sacral dimple on examination of a newborn. Baby receives 24 hours of phototherapy but no intervention is required for the naevus or sacral dimple so these are not coded.

EXAMPLE 286:

Singleton born at 38 weeks (2840g). Newborn examination noted talipes of the left foot. No additional care was required during the admitted episode of care for the talipes and the patient was discharged after one day. Patient was referred to a physiotherapist for follow-up of the talipes after discharge.

No intervention was required for the talipes so it is not coded.

EXAMPLE 297:

Singleton born at 38 weeks (2840g). Newborn examination noted talipes of the left foot. During the episode, the newborn was seen by the physiotherapist for management of the talipes. A post discharge referral was made for follow-up with the specialist.

Intervention is provided for the talipes and so it is coded.

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

For general guidelines regarding assignment of additional diagnoses in delivery episodes of care, see ACS 1500 *Diagnosis sequencing in ~~delivery~~[obstetric](#) episodes of care*.

See also ACS 1521 *Conditions and injuries in pregnancy* and ACS 1548 *Puerperal/postpartum condition or complication*.

RISK FACTORS

Risk factors should only be coded if they meet the additional diagnosis criteria above or another standard indicates they should be coded.

FAMILY AND PERSONAL HISTORY AND CERTAIN CONDITIONS INFLUENCING HEALTH STATUS (Z80-Z99)

Assign additional diagnosis codes for a personal or family history of diseases and disorders, or statuses (eg artificial opening, organ transplantation, presence of functional implants, graft or other device, dependence on enabling machines or devices) classified to categories Z80-Z99, when they are relevant to a condition being managed or an intervention being performed in the current episode of care.

EXAMPLE 30:

Patient admitted with right knee pain and reduced mobility post trauma 2 weeks ago. He had a right total knee replacement 3 years ago. Knee, femur and pelvis X-rays and CT of the knee demonstrated no concerning features and no periprosthetic fracture. During the admission, he was reviewed by the physiotherapist and the acute pain service, who prescribed Celecoxib 100mg BD for pain management.

Principal diagnosis: Knee pain

Additional diagnosis: Presence of knee implant

In this example, a code for presence of a knee implant is assigned, as it is relevant to the condition (right knee pain) being managed in the current this episode of care.

EXAMPLE 31:

A young woman was referred by her GP for deinfibulation of her vulva due to female genital mutilation (FGM) at 5 years old.

Principal diagnosis: Other specified noninflammatory disorders of vulva and perineum

Additional diagnosis: Personal history of female genital mutilation

In this example, a code for the personal history of FGM is assigned, as it is relevant to the intervention (deinfibulation of vulva) being performed in the current episode of care.

Note: This example is provided to support the reporting of female genital mutilation (FGM) within the National Plan to Reduce Violence against Women and their Children 2010-2022.

0003 SUPPLEMENTARY CODES FOR CHRONIC CONDITIONS

Codes from U78.- to U88.- are to be assigned for chronic conditions that are present on admission, however the condition does not meet the criteria for coding (as instructed in ACS 0002 *Additional diagnoses* and other general and specialty coding standards, coding conventions, and coding rules). These codes are for **temporary** use in Australia to generate data, which will be utilised to review the coding of additional diagnoses. **The codes are mapped so as not to be included in the grouping for Diagnosis Related Group (DRG) allocation.**

There is a discrete list of chronic conditions represented in the code range U78.- to U88.-. Therefore, not all chronic conditions will be assigned a supplementary code. The supplementary codes for chronic conditions are listed in the ICD-10-AM Alphabetic Index under the pathway *Supplementary/codes for chronic conditions*.

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0016 GENERAL PROCEDURE GUIDELINES

DEFINITION

A procedure is defined as “a clinical intervention represented by a code that:

- is surgical in nature, and/or
- carries a procedural risk, and/or
- carries an anaesthetic risk, and/or
- requires specialised training, and/or
- requires special facilities or equipment only available in an acute care setting” (~~METSOR-514040~~) (Australian Institute of Health and Welfare 20164).

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0052 SAME-DAY ENDOSCOPY – SURVEILLANCE

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CLASSIFICATION

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Assign as additional diagnosis:

- any condition found at endoscopy that meets the criteria in ACS 0002 *Additional diagnoses* (see Example 12 and 13)
- an appropriate code from block Z80–Z99 *Persons with potential health hazards related to family and personal history and certain conditions influencing health status* for any personal or family history as appropriate (see Examples 1, 2, 3 and 6). See also ACS ~~2112 Personal history-0002~~ [Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#).
- codes from Z08 or Z09 *Follow-up examination after treatment for...* or Z11, Z12 and Z13 *Special screening examination for...* as appropriate. That is, these codes may be assigned to reflect where a patient undergoes multiple endoscopies for different purposes within the same episode of care, and no condition is detected for one of the endoscopies (see Example 14).

EXAMPLE 1:

Patient with history of laryngeal cancer treated by radiotherapy two years ago admitted for follow-up microlaryngoscopy. No recurrence of the malignancy was found.

Codes: Z08.1 *Follow-up examination after radiotherapy for malignant neoplasm*
 Z85.2 *Personal history of malignant neoplasm of other respiratory and intrathoracic organs*

EXAMPLE 2:

Patient admitted following treatment of a gastric ulcer with a proton pump inhibitor (PPI). Endoscopy revealed a healed ulcer with no evidence of active ulceration.

Codes: Z09.2 *Follow-up examination after pharmacotherapy for other conditions*
 Z87.11 *Personal history of peptic ulcer disease*

EXAMPLE 3:

Patient admitted for colonoscopy due to family history of colon cancer. Diverticulosis and haemorrhoids seen, however no neoplasm identified.

Codes: Z12.1 *Special screening examination for neoplasm of intestinal tract*
 Z80.0 *Family history of malignant neoplasm of digestive organs*

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0104 VIRAL HEPATITIS

CLASSIFICATION

Viral hepatitis should always be coded when documented except when hepatitis C is documented with terms such as 'cured', 'cleared' or 'with SVR', see 4. *Cured/cleared hepatitis C* below.

When documentation is unclear or ambiguous terms such as 'hepatitis B', 'hepatitis C', 'hepatitis D', 'hepatitis B positive', 'hepatitis C positive' or 'hepatitis D positive' are documented, verify with the clinician if the disease is at the acute or chronic stage.

Where consultation is not possible, assign the following code for:

- hepatitis B: B18.1 *Chronic viral hepatitis B without delta-agent*
- hepatitis C: B18.2 *Chronic viral hepatitis C*
- hepatitis D: B18.0 *Chronic viral hepatitis B with delta-agent*

1. Past history of hepatitis

- A past history code may be assigned for hepatitis A or hepatitis E when [hepatitis A or hepatitis E is cured but the personal history is relevant to the current episode of care \(see also ~~meets~~ ACS 0002 *Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)*\)](#) ~~2112 Personal history~~.

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The following table summarises general classification guidelines for hepatitis A, B, C, D and E (see also 3. *Manifestations of hepatitis* and 4. *Cured/cleared hepatitis C* below):

CLASSIFICATION

Viral Hepatitis/type	Code/description	General guidelines
Hepatitis A	B15.0 <i>Hepatitis A with hepatic coma</i>	<ul style="list-style-type: none"> Assign Z86.18 past history of hepatitis A may be assigned when hepatitis A is cured but the history is relevant to the current episode of care. meets ACS 2112 Personal history. Where hepatitis A complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code of B15.0 or B15.9.
	B15.9 <i>Hepatitis A without hepatic coma</i>	
	O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i>	
	Z86.18 <i>Personal history of other infectious and parasitic disease</i>	

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Hepatitis E	B17.2 <i>Acute hepatitis E</i>	<ul style="list-style-type: none"> Assign Z86.18 past history of hepatitis E may be assigned when hepatitis E is cured but the history is relevant to the current episode of care. meets ACS 2112 Personal history. Where hepatitis E complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code of B17.2 or B18.8.
	B18.8 <i>Other chronic viral hepatitis</i>	
	O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i>	
	Z86.18 <i>Personal history of other infectious and parasitic disease</i>	

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4. Cured/cleared hepatitis C

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When terms such as 'cured hepatitis C', 'cleared hepatitis C' or 'hepatitis C with SVR' are documented and the patient has:

- manifestations:** assign code(s) for the manifestation(s) and B94.2 *Sequelae of viral hepatitis* when the manifestation(s) meet criteria for coding as per ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses* (see also 3. *Manifestations of hepatitis* above).
- no manifestations:** assign Z86.18 *Personal history of other infectious and parasitic disease* when the personal history is relevant to the current episode of care ~~meets~~ (see also ACS 0002 *Additional diagnoses/Family and personal history and certain conditions influencing health status (Z80-Z99)*). ~~2112 Personal history.~~

0111 HEALTHCARE ASSOCIATED STAPHYLOCOCCUS AUREUS BACTERAEMIA

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The documentation of healthcare associated *Staphylococcus aureus* bacteraemia in clinical records and subsequent unique code assignment will allow for the collection of an important performance indicator in the National Healthcare Agreement (~~METeOR: 517636~~) (Australian Institute of Health and Welfare 2015⁴).

DEFINITION

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Staphylococcus aureus bacteraemia (SAB) will be considered to be healthcare associated if **EITHER**:

1. the patient's first SAB blood culture was collected more than 48 hours after hospital admission, or less than 48 hours after discharge **OR**
2. the patient's first SAB blood culture was collected less than or equal to 48 hours after hospital admission and one or more of the following key clinical criteria have been met for the patient-episode of SAB.

Clinical criteria:

- SAB is a complication of the presence of an indwelling medical device (eg intravascular line, haemodialysis vascular access, CSF (cerebrospinal fluid) shunt, urinary catheter)
- SAB occurs within 30 days of a surgical procedure where the SAB is related to the surgical site
- An invasive instrumentation or incision related to the SAB was performed within 48 hours
- SAB is associated with neutropenia (neutrophils $<1 \times 10^9/L$) contributed by cytotoxic therapy” (~~METeOR: 517636~~)-(Australian Institute of Health and Welfare 2018⁴).

0236 NEOPLASM CODING AND SEQUENCING

The sequencing of either primary or secondary malignancy code is dependent on the treatment at each episode. Selection of the principal diagnosis should be made in accordance with ACS 0001 *Principal diagnosis*.

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If the episode of care is for follow-up care, the malignancy neoplasm may be coded as current or as a past history, dependent on the circumstances surrounding the episode of care. (~~See also ACS 1204 Plastic surgery, ACS 2112 Personal history and ACS 2114 Prophylactic surgery~~).

- Where there is history of /follow-up for a neoplasm, and a secondary (metastatic) neoplasm is diagnosed, assign:
 - a code for the metastatic site with the appropriate morphology code
 - a code for the primary neoplasm with the appropriate morphology code.
- Assign a code from category Z85 Personal history of malignant neoplasm as an additional diagnosis only if the neoplasm is completely resolved and the history is relevant to the current episode of care.

0303 ABNORMAL COAGULATION PROFILE DUE TO ANTICOAGULANTS

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EXAMPLE 4:

An 80 year old gentleman admitted to hospital due to COPD (chronic obstructive pulmonary disease). The patient was on long term warfarin for atrial fibrillation. During the admission, patient was found to be overwarfarinised (INR=6). Vitamin K 5mg was given and warfarin was reduced to 3 mg daily, to titrate to an INR of 2-3.

Codes:	J44.9	<i>Chronic obstructive pulmonary disease, unspecified</i>
	R79.83	<i>Abnormal coagulation profile</i>
	Y44.2	<i>Anticoagulants causing adverse effects in therapeutic use</i>

Y92.23 *Place of occurrence, health service area, not specified as this facility*

~~I48.9~~ *Atrial fibrillation and atrial flutter, unspecified*

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

CURED OR QUIESCENT DM/DM IN REMISSION

CLASSIFICATION

1. T2DM successfully managed by treatment of obesity, may revert to a lower level of IH or even to normal glucose homeostasis. In such instances assign a code for IH (E09.-) or Z86.3 *Personal history of endocrine, nutritional and metabolic diseases*.
2. DM due to an underlying endocrinopathy, drug or chemical treatment may be resolved or revert to a lower level of IH following successful control or cure of the endocrinopathy or cessation of the medication. In such instances assign the appropriate code for IH (E09.-) or Z86.3 *Personal history of endocrine, nutritional and metabolic diseases*.
3. When T1DM is successfully treated with pancreatic or pancreatic islet cell transplantation, assign the appropriate T1DM complication code(s), if any apply, with Z94.8 *Other transplanted organ and tissue status*.

See also ~~ACS 2112 Personal history~~; [ACS 0002 Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#).

0936 Cardiac Pacemakers and Implanted Defibrillators

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CLASSIFICATION

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Complications of the pacemaker or defibrillator system are assigned codes:

- T82.1 *Mechanical complication of cardiac electronic device*
includes malfunctioning pacemaker, defibrillator, electrodes or leads, lead fracture or electrode or lead dislodgement.
- T82.71 *Infection and inflammatory reaction due to electronic cardiac device*
includes infected pacemaker or defibrillator (pocket) or infection due to lead or electrodes.
- T82.8- *Other specified complications of cardiac and vascular prosthetic devices, implants and grafts*
includes haematoma of the pacemaker or defibrillator pocket or site, wound haematoma or seroma due to pacemaker or defibrillator insertion or replacement, and pacemaker or defibrillator eroded through the pocket site.

Pacemaker or defibrillator status:

- [assign Z95.0 Presence of cardiac device when the status meets the criteria in ACS 0002 Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#)
- [assign Z45.0 Adjustment and management of cardiac device when the pacemaker requires adjustment or management during the episode of care.](#)

~~should be assigned code Z95.0 Presence of cardiac device except when the pacemaker requires adjustment or management during the episode of care (when Z45.0 Adjustment and management of cardiac device or a complication of cardiac device code should be assigned instead of the status code). Patients with a pacemaker or defibrillator in situ require additional care at the time of procedural interventions, and therefore Z95.0 Presence of cardiac device should be coded for all procedural cases.~~

0940 ISCHAEMIC HEART DISEASE

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CLASSIFICATION

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Old myocardial infarction (I25.2)

I25.2 *Old myocardial infarction* is essentially a 'history of' code, even though it is not included in the Z code chapter. ~~It should be assigned~~ [Assign I25.2](#) as an additional [diagnosis](#) code **only** if **all** of the following criteria apply:

- the 'old' myocardial infarction occurred more than four weeks (28 days) ago; [AND](#)
- the patient is currently **not** receiving care (observation, evaluation or treatment) for their 'old' myocardial infarction; ~~and~~ [AND](#)
- the 'old' myocardial infarction meets the criteria in ACS ~~2112 Personal history.~~ [0002 Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#).

Chronic ischaemic heart disease, unspecified (I25.9)

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If there is a history of previous coronary artery bypass surgery or coronary angioplasty, assign codes Z95.1 *Presence of aortocoronary bypass graft* or Z95.5 *Presence of coronary angioplasty implant and graft* only when such a status ~~is significant in the current episode of care.~~ [meets the criteria in ACS 0002 Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#).

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1605 CONDITIONS ORIGINATING IN THE PERINATAL PERIOD

DEFINITION

[In Australia:](#)

[“The perinatal period commences at 20 completed weeks \(140 days\) of gestation and ends 28 completed days after birth”](#) ~~The perinatal period is defined in Australia as:~~

~~“The perinatal period commences at 20 completed weeks (140 days) of gestation and ends 28 completed days after birth” (METeOR: 327314)-(Australian Institute of Health and Welfare 200514).~~

1607 NEWBORN/NEONATE

DEFINITION

A neonate is a liveborn who is less than 28 days old.

The neonatal period is defined in Australia as:

“...exactly four weeks or 28 completed days, commencing on the date of birth (day 0) and ending on the completion of day 27. For example, a baby born on 1 October remains a neonate until completion of the four weeks on 28 October and is no longer a neonate on 29 October” (METeOR: 327284) (Australian Institute of Health and Welfare 2005+2).

1808 INCONTINENCE

~~Incontinence is clinically significant when the incontinence:~~

- ~~• is not clinically considered to be physiologically normal,~~
- ~~• is not clinically considered to be developmentally normal, or~~
- ~~• is persistent in a patient with significant disability or mental retardation.~~

~~Urinary and faecal incontinence codes (R32 Unspecified urinary incontinence, R15 Faecal incontinence) should be assigned only when the incontinence is persistent prior to admission, is present at discharge or persists for at least seven days.~~

1904 PROCEDURAL COMPLICATIONS

...

Place of occurrence

A place of occurrence code is mandatory for procedural complications and **must relate to where the external cause occurred** not where the adverse effect occurred. For example, although a postoperative wound infection may not manifest until after the patient is discharged, an appropriate place of occurrence code (Y92.23 or Y92.24) for *health service area* is assigned as the procedure (external cause) originated in the hospital setting. The place of occurrence code does not relate to where the wound infection manifested (in this case, outside the hospital), but rather to where the external cause of the complication (ie the procedure) originally occurred.

EXAMPLE 18:

A patient is readmitted with a post cholecystectomy wound infection. The procedure was performed five days ago at another hospital.

Codes:	T81.4	<i>Wound infection following a procedure, not elsewhere classified</i>
	Y83.6	<i>Removal of other organ (partial)(total)</i>
	Y92.23	<i>Place of occurrence, health service area, not specified as this facility</i>

A place of occurrence for health service area is classified to:

Y92.23 *Place of occurrence, health service area, not specified as this facility* **OR**

Y92.24 *Place of occurrence, health service area, this facility*

Y92.23 is assigned when the health service is not known/stated (unspecified) or is specified as another facility. Y92.24 is assigned when the health service is specified as/known to be 'this facility'. The term 'this facility' includes satellite units managed and staffed by the same health care provider. These units

may be located on the hospital campus or off the hospital campus and treat movements of patients between sites as ward transfers (~~METeOR 404245~~, Australian Institute of Health and Welfare, 2016).

~~2112 PERSONAL HISTORY~~

~~The codes in categories Z85–Z87 for personal history of malignant neoplasm or other diseases and conditions should never be sequenced as the principal diagnosis. (See also ACS 0236 Neoplasm coding and sequencing.)~~

~~These codes would only be assigned as additional diagnoses where the condition is completely resolved yet the history is directly relevant to the current episode of care.~~

2114 PROPHYLACTIC SURGERY

...

CLASSIFICATION

When prophylactic surgery is performed for risk factors, an appropriate code from category Z40 *Prophylactic surgery* should be assigned as the principal diagnosis. The specific type of risk factor (eg personal history of disease, family history of cancer), should be sequenced as an additional diagnosis.

For prophylactic surgery performed in the absence of disease or risk factor, or when a more definitive diagnosis cannot be abstracted from the clinical record, assign Z40.0- *Prophylactic surgery for risk-factors related to malignant neoplasms* or Z40.8 *Other prophylactic surgery* as the principal diagnosis alone.

Refer to ACS 0236 *Neoplasm coding and sequencing* and ACS [0002 Additional diagnoses/Family and personal history and certain conditions influencing health status \(Z80-Z99\)](#) ~~2112 Personal history~~ for code assignment relating to neoplas~~ms~~[ia](#).

EXAMPLE 1:

Patient has a strong family history of breast cancer and was admitted for prophylactic bilateral total mastectomy.

Codes: Z40.00 *Prophylactic surgery for risk-factors related to malignant neoplasms, breast*
 Z80.3 *Family history of malignant neoplasm of breast*
 31518-01 [1748] *Simple mastectomy, bilateral*

EXAMPLE 2:

Patient admitted for prophylactic laparoscopic bilateral salpingo-oophorectomy after being found to have the BRCA2 gene fault on predictive gene testing. Patient has a past history of breast carcinoma with left mastectomy 28 years ago.

Codes: Z40.01 *Prophylactic surgery for risk-factors related to malignant neoplasms, ovary*
 Z85.3 *Personal history of malignant neoplasm of breast*
 35638-12 [1252] *Laparoscopic salpingo-oophorectomy, bilateral*

~~(See also ACS 2112 Personal history.)~~

1336 HYPERTONIA

~~Hypertonia (R25.2 *Cramp and spasm*) should only be coded if stated by the clinician as **clinically significant**.~~

~~1342 HYPERREFLEXIA~~

~~Hyperreflexia (R29.2 *Abnormal reflex*) should only be coded if stated by the clinician as **clinically significant**.~~

STANDARDS INDEX

Diagnosis (in)

- ...
- principal (for) 0001
- - acute care, with
- - - mental health 0012
- - - nursing home type 2105
- - - rehabilitation 2104
- - angina 0940
- - assessment 2108
- - burns 1911
- - convalescence 2103; 2104
- - - non-acute 2117
- - - post acute 2103
- - delivery
- - - episodes of care 1500
- - - prior to admitted episode of care 1548
- - dialysis 0001; 1404
- - endoscopy, same-day 0051; 0052
- - febrile convulsion 1809
- - history of malignancy [21120002](#)

History

- abuse/maltreatment 1909
- family
- - mental/behavioural disorder 0520
- - screening for 0052
- personal (of) [21120002](#)
- - screening for 0052

~~Hypertonia 1336~~

Hyperlipidaemia

- with diabetes mellitus 0401

~~Hyperreflexia 1342~~

Hypertension 0925

~~Incontinence 1808~~

Neoplasm(s) 0236

- follow-up 0052
- history [21120002](#)
- lip 0241
- metastases 0239

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**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**ACS 0011 & 0019 review
Abandoned Procedures &
Interventions not performed**

Introduction/Rationale:

This addenda proposal is the result of two queries which highlighted that:

- the title of ACS 0011 *Admission for surgery not performed* is inappropriate, as one of the examples is about the cancellation of chemotherapy, which is not a surgical procedure
- the concept of procedures 'abandoned' after surgery has been initiated cannot be clearly classified.

ACCD proposes to create a code to classify the concept of procedures 'abandoned' after surgery has been initiated, and make amendments to ACS 0011 *Admission for surgery not performed* and ACS 0019 *Procedure not completed or interrupted*.

ACCD PROPOSAL

Tabular List

Z53 Persons encountering health services for specific procedures, not carried out

▽ 0011, [0019](#), [0050](#), [1551](#)

Excludes: immunisation not carried out (Z28.-)

Z53.0 Procedure not carried out because of contraindication

Excludes: [procedure abandoned after initiation \(Z53.3\)](#)

Z53.1 Procedure not carried out because of patient's decision for reasons of belief or group pressure

Excludes: [procedure abandoned after initiation \(Z53.3\)](#)

Z53.2 Procedure not carried out because of patient's decision for other and unspecified reasons

Excludes: [procedure abandoned after initiation \(Z53.3\)](#)

★Z53.3 Procedure abandoned after initiation

[Procedure attempted but not completed](#)

Z53.8 Procedure not carried out for other reasons

Excludes: [procedure abandoned after initiation \(Z53.3\)](#)

Z53.9 Procedure not carried out, unspecified reason

Excludes: [procedure abandoned after initiation \(Z53.3\)](#)

Alphabetic Index

Aarskog's syndrome Q87.19

[Abandoned procedure, after initiation Z53.3](#)

Abandonment T74.0

Cancelled procedure (surgical) Z53.9

[- after initiation \(abandoned\) Z53.3](#)

- because of

- - contraindication Z53.0

- - patient's decision NEC Z53.2

- - - for reasons of belief or group pressure Z53.1

- - specified reason NEC Z53.8

- vaccination Z28.9

- - because of

- - - contraindication Z28.0

- - - patient's decision NEC Z28.2

- - - - for reasons of belief or group pressure Z28.1

- - - specified reason NEC Z28.8

Procedure (surgical)

- for purpose other than remedying health state Z41.9

- - specified NEC Z41.89

[- abandoned after initiation Z53.3](#)

- elective (*see also Surgery/elective*) Z41.9

- - ear piercing Z41.3

- - specified NEC Z41.89

- maternal (unrelated to current delivery), affecting fetus or newborn P00.6

- - nonsurgical (medical) P00.7

- not done Z53.9

[- - abandoned after initiation Z53.3](#)

- - because of

- - - administrative reasons Z53.8

- - - contraindication Z53.0

- - - patient's decision NEC Z53.2

- - - - for reasons of belief or group pressure Z53.1

- - - specified reason NEC Z53.8

Australian Coding Standards

0001 PRINCIPAL DIAGNOSIS

...

ORIGINAL TREATMENT PLAN NOT CARRIED OUT

Sequence as the principal diagnosis the condition which after study occasioned the admission to the hospital, even though treatment may not have been carried out due to unforeseen circumstances (see ACS 0011 ~~Admission for surgery~~ Intervention not performed or cancelled).

...

0011 ~~ADMISSION FOR SURGERY~~ INTERVENTION NOT PERFORMED OR CANCELLED

~~If a patient is admitted to hospital for surgery which for some reason has not been performed and the patient is discharged, code as follows:~~

Note: If an intervention was initiated but abandoned after initiation, see ACS 0019 *Intervention abandoned, interrupted or not completed.*

1. If a patient was admitted to a facility for an intervention that was not undertaken (or initiated) and the patient was discharged, classify as follows:

- A. If ~~surgery~~ the intervention (for a specific documented condition) was not carried out due to an administrative problem, assign:
- a code for the condition requiring the intervention, as principal diagnosis
 - Z53.8 Procedure not carried out for other reasons, as an additional diagnosis

EXAMPLE 1:

Patient admitted for insertion of grommets for glue ear. Surgery postponed due to unavailability of surgeon.

Codes: H65.3 *Chronic mucoid otitis media*
Z53.8 *Procedure not carried out for other reasons*

B. If the intervention (for a specific documented condition) was not carried out due to another condition or complication, assign:

- a code for the condition requiring the intervention, as principal diagnosis
- Z53.0 Procedure not carried out because of contraindication, as an additional diagnosis
- a code for the condition responsible for the cancellation of the intervention, as an additional diagnosis

EXAMPLE 2:

Patient admitted with tonsillitis for a tonsillectomy. Surgery postponed as the patient had an upper respiratory tract infection (URTI) which was present on admission.

Codes: J35.0 *Chronic tonsillitis*
Z53.0 *Procedure not carried out because of contraindication*
J06.9 *Acute upper respiratory infection, unspecified*

B.C. Where a Z code would normally be assigned as principal diagnosis to ~~capture-identify~~ the reason for ~~hospitalisation~~ admission, and due to another condition or complication the ~~surgery-intervention is~~ was cancelled, assign:

- an appropriate Z code for the reason for admission as principal diagnosis
- Z53.0 Procedure not carried out because of contraindication, as an additional diagnosis
- a code for the condition responsible for the cancellation of the intervention, as an additional diagnosis.

EXAMPLE 23:

Patient admitted for same-day ~~pharmaco~~chemotherapy for neoplasm, ~~p~~ Patient ~~was dehydrated~~ had a cold and the procedure was cancelled.

Codes: Z51.1 *Pharmacotherapy session for neoplasm*
Appropriate neoplasm codes
Z53.0 *Procedure not carried out because of contraindication*
~~E86~~ *Volume depletion*
J00 *Acute nasopharyngitis [common cold]*

See also ACS 0044 Pharmacotherapy

EXAMPLE 3:

~~Admission for creation of arteriovenous fistula, procedure cancelled due to unavailability of surgeon.~~

~~Codes: Z49.0 Preparatory care for dialysis~~
~~Z53.8 Procedure not carried out for other reasons~~

~~C. If surgery was not carried out due to another condition or complication being present on admission:~~

EXAMPLE 4:

~~Patient admitted with tonsillitis for a tonsillectomy. Surgery postponed due to an upper respiratory tract infection (URTI) which was present on admission.~~

~~Codes: J35.0 Chronic tonsillitis~~
~~Z53.0 Procedure not carried out because of contraindication~~
~~J06.9 Acute upper respiratory infection, unspecified~~

~~If a patient is admitted to hospital for surgery which is not carried out due to a condition present on admission which requires ongoing inpatient care, sequence this condition as the principal diagnosis. A code for the condition for which the procedure was originally intended should also be assigned, followed by Z53 Persons encountering health services for specific procedures, not carried out.~~

2. If a patient is admitted to a facility for an intervention that was not undertaken (or initiated) due to another condition or complication, and the patient requires ongoing inpatient care for that other condition assign:

- a code for the condition responsible for the cancellation of the intervention, as principal diagnosis
- a code for the condition that required the cancelled intervention, or appropriate Z code for the reason for admission, as an additional diagnosis
- Z53.0 Procedure not carried out because of contraindication, as an additional diagnosis.

EXAMPLE 54:

Patient admitted for dilation and curettage (D&C) ~~due to~~ for investigation of postmenopausal bleeding. On admission, the patient was diagnosed with pneumonia and the D&C was cancelled. Patient remained in hospital for six days for intravenous (IV) antibiotics to treat the pneumonia.

Codes: J18.9 *Pneumonia, unspecified*
 N95.0 *Postmenopausal bleeding*
 Z53.0 *Procedure not carried out because of contraindication*

EXAMPLE 5:

Patient with breast cancer was admitted for same-day chemotherapy. The chemotherapy session was cancelled as the patient was anaemic. The patient was transfused with two units of packed cells and discharged home that afternoon.

Codes: D64.9 *Anaemia, unspecified*
 Z51.1 *Pharmacotherapy session for neoplasm*
 C50.9 *Breast, unspecified*
 M8000/3 *Neoplasm, malignant*
 Z53.0 *Procedure not carried out because of contraindication*

13706-02 [1893] Administration of packed cells

EXAMPLE 6:

Patient with osteoarthritis admitted for arthroscopy of the knee. The procedure is cancelled when the patient complained of chest pain on admission. The patient was seen by a cardiologist, blood tests and an ECG were performed, but no cause was found for the chest pain. The patient was discharged the following day and the arthroscopy was rescheduled.

Codes: R07.4 *Chest pain, unspecified*
 M17.1 *Other primary gonarthrosis*
 Z53.0 *Procedure not carried out because of contraindication*

3. If a patient was admitted to a facility for an intervention that was delayed, but was later undertaken during the same episode of care, do not assign a code from category Z53 *Persons encountering health services for specific procedures, not carried out.*

0019 ~~PROCEDURE NOT COMPLETED OR INTERRUPTED~~ INTERVENTION ABANDONED, INTERRUPTED OR NOT COMPLETED

If a surgical procedure was interrupted or not completed for any reason, code to the extent of the procedure performed.

EXAMPLE 1:

If a laparotomy had been done in order to perform an appendectomy, but the appendectomy was not done due to the patient having a cardiac arrest, code only laparotomy.

Code: ~~30373-00 [985]~~ *Exploratory laparotomy*

Clinical coders should be cautious when a procedure is recorded as 'failed' (eg 'failed CDE' can mean that the common bile duct was explored but that the dye could not be inserted). In such circumstances, the procedure should be coded.

Note: ACHI provides a code for failed forceps delivery, 90468-05 [1337] *Failed forceps* which mean that the expected outcome was not achieved (ie delivery of the baby was not achieved using forceps).

~~MINIMALLY INVASIVE (KEYHOLE) PROCEDURE PROCEEDING TO~~ **OPEN PROCEDURE**

When an intended minimally invasive procedure proceeds to an open procedure, assign first a code for the open procedure followed by the appropriate code below:

- ~~90343-00 [1011]~~ *Endoscopic procedure proceeding to open procedure*
- ~~90343-01 [1011]~~ *Laparoscopic procedure proceeding to open procedure, or*
- ~~90613-00 [1579]~~ *Arthroscopic procedure proceeding to open procedure.*

Note: While codes 90343-00 and 90343-01 are located in Chapter 10 *Procedures on digestive system* they can be used with other codes not located in this chapter to identify endoscopic or laparoscopic procedures which proceed to open procedures.

Note: These codes should not be used for diagnostic endoscopy/laparoscopy/arthroscopy.

If the conversion was the result of a procedural complication, code also the complication as per the guidelines in ACS 1904 *Procedural complications*.

EXAMPLE 2:

Attempted endoscopic release of carpal tunnel, converted to open procedure.

Codes: ~~39331-01 [76]~~ *Release of carpal tunnel*
~~90343-00 [1011]~~ *Endoscopic procedure proceeding to open procedure*

EXAMPLE 3:

A laparoscopically assisted vaginal hysterectomy proceeding to total abdominal hysterectomy.

Codes: ~~35653-01 [1268]~~ *Total abdominal hysterectomy*
~~90343-01 [1011]~~ *Laparoscopic procedure proceeding to open procedure*

EXAMPLE 4:

Laparoscopic removal of the gallbladder. Extensive adhesions were encountered and the procedure proceeded to an open cholecystectomy.

Codes: ~~30443-00 [965]~~ *Cholecystectomy*
~~90343-01 [1011]~~ *Laparoscopic procedure proceeding to open procedure*

An intervention may be abandoned, interrupted or not completed due to unanticipated circumstances. This means the intervention may not progress beyond administration of anaesthesia, initial incision or inspection/exploration.

If an intervention was abandoned, interrupted or not completed assign:

- a code for the condition requiring the intervention (principal diagnosis)
- Z53.3 Procedure abandoned after initiation, as an additional diagnosis
- a code for the condition or complication responsible for the abandonment of the intervention, as an additional diagnosis, if applicable
- ACHI codes as applicable, coded to the extent of the intervention performed

Note: the appropriate COF code is listed before the codes in each example.

EXAMPLE 1:

Patient admitted for a laparoscopic appendectomy under general anaesthesia (GA), for acute appendicitis. The surgeon performed a laparoscopy, but the appendectomy was not performed due to the patient having a cardiac arrest on the operating table. CPR was performed successfully.

Codes: (2) K35.8 Acute appendicitis, other and unspecified
(1) Z53.3 Procedure abandoned after initiation
(1) I46.0 Cardiac arrest with successful resuscitation
30390-00 [984] Laparoscopy
92514-99 [1910] General anaesthesia ASA 99

EXAMPLE 2:

Patient admitted with an adenocarcinoma of the descending colon for a left hemicolectomy (under GA, ASA 3). An exploratory laparotomy was performed, but the abdomen was closed without resection, due to extensive metastases in the peritoneal cavity.

Codes: (2) C18.6 Malignant neoplasm of descending colon
(2) M8140/3 Adenocarcinoma NOS
(2) C78.6 Secondary malignant neoplasm of retroperitoneum and peritoneum
(2) M8140/6 Adenocarcinoma, metastatic NOS
(1) Z53.3 Procedure abandoned after initiation
30373-00 [985] Exploratory laparotomy
92514-39 [1910] General anaesthesia ASA 39

FAILED INTERVENTIONS

Clinical coders should be cautious when an intervention is documented as 'failed'. It could mean that certain components of the intervention may not be carried out successfully but the expected outcome may have been achieved. In these circumstances, do not assign Z53.3 Procedure abandoned after initiation, but assign an ACHI code for the intervention performed.

Note: ACHI codes for failed obstetric interventions (eg 90468-05 [1337] Failed forceps delivery or 90469-01 [1338] Failed vacuum assisted delivery), are assigned when the expected outcome was not achieved (ie delivery by forceps or vacuum assistance was attempted but not achieved). In these cases, do not assign Z53.3 Procedure abandoned after initiation. See also ACS 1505 Delivery and assisted delivery codes.

EXAMPLE 3:

A patient admitted with known CAD (coronary artery disease) for a coronary angiogram (under sedation). The initial approach via the right femoral artery failed, but the surgeon proceeded via the right radial artery, and the coronary angiogram was performed successfully.

Codes: (2) I25.11 *Atherosclerotic heart disease of native coronary artery*
 38215-00 [668] *Coronary angiography*
 92515-99 [1910] *Sedation ASA 99*

MINIMALLY INVASIVE (KEYHOLE) INTERVENTION PROCEEDING TO OPEN INTERVENTION

When an intended minimally invasive intervention proceeds to an open intervention, assign first a code for the open intervention followed by an appropriate code below:

- 90343-00 [1011] *Endoscopic procedure proceeding to open procedure*
- 90343-01 [1011] *Laparoscopic procedure proceeding to open procedure*
- 90613-00 [1579] *Arthroscopic procedure proceeding to open procedure.*

Note: While codes 90343-00 and 90343-01 are located in Chapter 10 *Procedures on digestive system* they are assigned with codes from any chapter to identify an endoscopic or laparoscopic intervention proceeding to an open intervention.

EXAMPLE 4:

Patient admitted with carpal tunnel syndrome for endoscopic release of carpal tunnel under GA. During the intervention, the surgeon decided to convert to an open procedure.

Codes: (2) G56.0 *Carpal tunnel syndrome*
 39331-01 [76] *Release of carpal tunnel*
 90343-00 [1011] *Endoscopic procedure proceeding to open procedure*
 92514-99 [1910] *General anaesthesia ASA 99*

EXAMPLE 5:

Patient admitted with menorrhagia for a laparoscopically assisted vaginal hysterectomy under GA. During the intervention, the surgeon decided to proceed to an open total abdominal hysterectomy.

Codes: (2) N92.0 *Excessive and frequent menstruation with regular cycle*
 35653-01 [1268] *Total abdominal hysterectomy*
 90343-01 [1011] *Laparoscopic procedure proceeding to open procedure*
 92514-99 [1910] *General anaesthesia ASA 99*

EXAMPLE 6:

Patient with a bucket handle tear of the posterior horn of the right medial meniscus was admitted for an arthroscopic meniscectomy under GA. After arthroscopic examination, the procedure proceeded to an open meniscectomy due to anatomical difficulties.

Codes: (2) M23.22 *Derangement of posterior horn of medial meniscus due to old tear or injury*
 49503-00 [1505] *Meniscectomy of knee*
 90613-00 [1579] *Arthroscopic procedure proceeding to open procedure*
 92514-99 [1910] *General anaesthesia ASA 99*



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

ACS 0303 *Abnormal coagulation profile due to anticoagulants* – minor amendments

Introduction/Rationale:

This task was created to address minor issues with ACS 0303 *Abnormal coagulation profile due to anticoagulants* identified in another Eleventh Edition addenda proposal.

ACCD PROPOSAL

Australian Coding Standards

0303 ABNORMAL COAGULATION PROFILE DUE TO ANTICOAGULANTS

...

CLASSIFICATION

- ~~• If patients on long term anticoagulants require anticoagulant level monitoring during an episode of care and the INR level is within the target therapeutic range (ie no suprathapeutic or subtherapeutic INR is documented), assign Z92.1 Personal history of long term (current) use of anticoagulants as an additional diagnosis~~
- Z92.1 Personal history of long term (current) use of anticoagulants is assigned as an additional diagnosis if a patient is on long term anticoagulants and:
 - bridging anticoagulant therapy is administered prior to or following a planned procedure, or
 - anticoagulant therapy is withheld because the patient has a medical condition that contraindicates the continued use of anticoagulants, or
 - anticoagulant level monitoring is undertaken during an episode of care and the INR level is within the target therapeutic range (ie no suprathapeutic or subtherapeutic INR is documented)
- R79.83 Abnormal coagulation profile is assigned If the INR value is outside the patient's normal/usual therapeutic range (eg suprathapeutic (↑INR) or subtherapeutic (↓INR) INR is documented) but no bleeding occurs, ~~assign R79.83 Abnormal coagulation profile together with~~ Also assign appropriate external cause codes to indicate that the abnormal coagulation profile is related to the administration of an anticoagulant.

- [D68.3 Haemorrhagic disorder due to circulating anticoagulants is assigned](#) If bleeding occurs ~~as the result of~~ [due to](#) anticoagulant use, ~~assign D68.3 Haemorrhagic disorder due to circulating anticoagulants~~. The causal relationship between the bleeding and the use of [an](#) anticoagulant must be documented in the clinical record before D68.3 is assigned.

EXAMPLE 1:

Patient on long term anticoagulants, admitted one day prior to TURP (transurethral resection of prostate) [for benign prostatic hypertrophy \(general anaesthesia\)](#), for heparinisation (bridging anticoagulant therapy).

Code: [N40](#) [Hyperplasia of prostate](#)
 Z92.1 Personal history of long term (current) use of anticoagulants (~~as an additional code~~)
 [37224-03 \[1166\]](#) [Endoscopic resection of prostate](#)
 [92514-99 \[1910\]](#) [General anaesthesia, ASA 99](#)

EXAMPLE 2:

Patient on long term warfarin ~~had an unwitnessed fall. Patient~~ was admitted for management of ~~his~~ [their](#) traumatic subarachnoid haemorrhage [following a fall](#). Warfarin was withheld during the admission to prevent exacerbation of the subarachnoid haemorrhage.

Codes: [S06.6](#) [Traumatic subarachnoid haemorrhage](#)
 [W19](#) [Unspecified fall](#)
 [Y92.9](#) [Unspecified place of occurrence](#)
 [U73.9](#) [Unspecified activity](#)
 Z92.1 Personal history of long term (current) use of anticoagulants (~~as an additional code~~)

In this example, D68.3 *Haemorrhagic disorder due to circulating anticoagulants* is not assigned as the documentation does not state that the subarachnoid haemorrhage was the result of the anticoagulation use.

EXAMPLE 3:

Patient was admitted for bridging Clexane and INR monitoring after presenting to his GP with subtherapeutic INR. The patient was on long term warfarin therapy post mechanical heart valve replacement.

Codes: R79.83 Abnormal coagulation profile
 Y44.2 Anticoagulants causing adverse effects in therapeutic use
 Y92.23 Place of occurrence, health service area, not specified as this facility
 Z95.2 Presence of prosthetic heart valve

EXAMPLE 4:

An 80 year old gentleman admitted to hospital due to COPD (chronic obstructive pulmonary disease). The patient was on long term warfarin for atrial fibrillation. During the admission, patient

was found to be overwarfarinised (INR=6). Vitamin K 5mg was given and warfarin was reduced to 3 mg daily, to titrate to an INR of 2-3.

Codes: J44.9 *Chronic obstructive pulmonary disease, unspecified*
R79.83 *Abnormal coagulation profile*
Y44.2 *Anticoagulants causing adverse effects in therapeutic use*
Y92.23 *Place of occurrence, health service area, not specified as this facility*
~~I48.9 *Atrial fibrillation and atrial flutter, unspecified*~~

EXAMPLE 5:

Patient admitted with epistaxis due to long term warfarin use.

Codes: R04.0 *Epistaxis*
D68.3 *Haemorrhagic disorder due to circulating anticoagulants*
Y44.2 *Anticoagulants causing adverse effects in therapeutic use*
Y92.23 *Place of occurrence, health service area, not specified as this facility*

~~(See also ACS 1902 Adverse effects)~~

In this example, D68.3 *Haemorrhagic disorder due to circulating anticoagulants* is assigned as there is a clearly documented causal relationship between the bleeding and the use of warfarin ([see also ACS 1902 Adverse effects](#)).



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Chapter 6 Dental services updates

Introduction/Rationale:

In ACHI Ninth Edition, Chapter 6 *Dental Services* was updated in accordance with the Australian Schedule of Dental Services and Glossary Tenth Edition. However, due to time constraints within the Tenth Edition work cycle, the amendments in the Australian Schedule of Dental Services and Glossary Eleventh Edition were not included in ACHI Tenth Edition.

ACCD proposes to update ACHI Eleventh Edition Chapter 6 *Dental Services* with the amendments in The Australian Schedule of Dental Services and Glossary Eleventh and Twelfth Edition that became effective from 1 April 2017.

25/02/2018 – Amendment resulting from Q3230 Debridement in the oral cavity:

- addition of an *Excludes* note “that with extraction of teeth” at 97222-02 *Periodontal debridement of tooth* in the Tabular List

19/07/2018 – Amendment resulting from Q3313 Dental filling not otherwise specified:

- addition of default code for dental restoration in the Alphabetic Index

3/09/2018 – The Example with amendments in **CONVENTIONS USED IN THE ALPHABETIC INDEX OF INTERVENTIONS** will be removed in the Conventions task.

ACCD PROPOSAL

Tabular List

CHAPTER 6

DENTAL SERVICES (BLOCKS 450–490)

Note: The Australian Classification of Health Interventions (ACHI) Dental Services chapter is based on the Australian Dental Association's (ADA) publication 'The Australian Schedule of Dental Services and Glossary, ~~10th~~ [Twelfth](#) Edition'.

The third, fourth and fifth characters of the ~~Australian Classification of Health Interventions~~ [Australian Classification of Health Interventions](#) dental codes (97011-00 to 97986-00) directly relate to the item number

in the ADA's schedule.
For example:

97171-00 Odontoplasty, per tooth

ADA item number 171 **Odontoplasty – per tooth**

A stand-alone procedure to modify the contour of the crown of a tooth or the anatomy of the fissure of a tooth to provide an improved contour.

Some code descriptions vary slightly from the ADA's item number descriptions. Reference should be made to the ADA's schedule where further definition of code descriptions is required. The publication also contains diagrams which may be useful, especially in regard to defining the terminology used by dentists. An example of a variation in code description follows.

97774-00 Provision of obturator

ADA item number 774 **Obturator**

Some services within the ADA's schedule are not incorporated into ~~Australian Classification of Health Interventions~~ [the Australian Classification of Health Interventions](#) for the following reasons:

1. Duplication of a service classified within the Medicare Benefits Schedule.

Certain procedures performed by Oral and Maxillofacial surgeons and Plastic and Reconstructive surgeons can also be performed by Dentists. An example is the procedures relating to osseointegration (see Chapter 5 Nose, Mouth and Pharynx, block [400]). Wherever a duplication occurred, the ADA's item number ~~was~~ mapped to the relevant ~~Australian Classification of Health Interventions~~ [Australian Classification of Health Interventions](#) code.

2. [ADA item numbers for provision of services with similar concepts.](#)

[For example: item numbers 087, 088, 089, 090 and 091 relating to cone beam volumetric tomography are all classified to 97091-00 \[452\] Cone beam volumetric tomography \[CBVT\] for orofacial structures.](#)

23. Other ADA item numbers not incorporated into ~~the Australian Classification of Health Interventions~~ [Australian Classification of Health Interventions](#).

Certain ADA item numbers contain concepts which are not applicable to the ~~Australian Classification of Health Interventions~~ [Australian Classification of Health Interventions](#). For example: 412 Incomplete endodontic therapy (inoperable or fractured tooth).

...

452 **Other dental diagnostic services**

...

97061-00 Pulp testing

97071-00 Preparation of diagnostic model, per model

Includes: waxing up

Excludes: that for:

- mouthguards (97151-00 [455])
- prosthodontic services (see blocks [474] to [477])
- trays (97926-00 [485])

97075-00 Diagnostic modelling

[The use of diagnostic images for simulation of treatment for dental implant placement, crown and bridge work, orthognathic surgery and orthodontic tooth movement](#)

- 97072-00 Photographic records, intraoral
- 97073-00 Photographic records, extraoral
- 97081-00 Cephalometric analysis and interpretation
Code also when performed:
 - cephalometric radiography (57930-00 [1967])
- 97082-00 Tooth-jaw size prediction analysis
- 97083-00 Tomographic analysis
- 97086-00 Electromyographic analysis

[97091-00 Cone beam volumetric tomography \[CBVT\] for orofacial structures](#)
[Cone beam volumetric tomography for analysis and/or interpretation](#)

453 Dental prophylaxis and bleaching

- 97111-00 Removal of plaque or stain of teeth

Excludes: that with:

- [periodontal debridement \(97222-02, 97223-00 \[456\]\)](#)
- removal of calculus:
 - subgingival (97114-00 [453])
 - supragingival (97114-00 [453])
- ~~root planing (97222-00 [456])~~

- 97113-00 Recontouring of pre-existing restoration(s)

Includes: polishing

- 97114-00 Removal of calculus from surfaces of teeth

Excludes: that with [periodontal debridement](#) ~~root planing (97222-00, 97222-02, 97223-00 [456])~~

- 97116-00 Enamel micro-abrasion, per tooth

...

456 Periodontic interventions

...

~~97222-00 Root planing with subgingival curettage ≤ 8 teeth~~

~~*Includes:* removal of:~~

- ~~• calculus~~
- ~~• plaque~~

~~97222-01 Root planing with subgingival curettage > 8 teeth~~

~~*Includes:* removal of:~~

- ~~• calculus~~
- ~~• plaque~~

[97222-02 Periodontal debridement of tooth](#)

Includes: removal of:

- [calculus](#)
- [plaque](#)

Excludes: that with:

- [osseous graft](#)

- [NOS \(97243-00 \[456\]\)](#)
- [using block of bone \(97244-00 \[456\]\)](#)
- [osseous procedure \(97242 \[456\]\)](#)
- [gingivectomy \(97231 \[456\]\)](#)
- [periodontal flap procedure \(97232 \[456\]\)](#)
- [tooth extraction \(see blocks \[457\] and \[458\]\)](#)

[97223-00 Periodontal debridement of implant or abutment](#)

[Includes:](#) [administration of local agent \(medicament\)](#)

97231-00 Gingivectomy ≤ 8 teeth

Includes: ~~planing of root~~
[debridement of tooth](#)
removal of calculus

97231-01 Gingivectomy > 8 teeth

Includes: ~~planing of root~~
[debridement of tooth](#)
removal of calculus

97232-00 Periodontal flap procedure ≤ 8 teeth

Incision and raising of flap of gingival tissue, eight teeth or less

Includes: ~~planing of root~~
[debridement of tooth](#)
removal of calculus

Excludes: that:

- for crown lengthening (97238-00 [456])
- with reshaping of bone defect or deformity (~~97233-00~~[97242-00 \[456\]](#))

97232-01 Periodontal flap procedure > 8 teeth

Incision and raising of flap of gingival tissue, nine or more teeth

Includes: ~~planing of root~~
[debridement of tooth](#)
removal of calculus

Excludes: that:

- for crown lengthening (97238-00 [456])
- with reshaping of bone defect or deformity (~~97233-01~~[97242-00 \[456\]](#))

97238-00 Periodontal flap procedure for crown lengthening, per tooth

Includes: reshaping of alveolar bone

~~97233-00 Alveolar osseous procedure ≤ 8 teeth~~

~~***Includes:*** incision and detachment of gingival flap
planing of root
removal of calculus
reshaping of bone defect or deformity~~

~~***Excludes:*** oral osseous graft (97234-00 [456])
oral osseous graft, block (97244-00 [456])
that for crown lengthening (97238-00 [456])~~

~~97233-01 Alveolar osseous procedure > 8 teeth~~

~~***Includes:*** incision and detachment of gingival flap
planing of root
removal of calculus
reshaping of bone defect or deformity~~

~~***Excludes:*** oral osseous graft (97234-00 [456])~~

~~oral osseous graft, block (97244-00 [456])
that for crown lengthening (97238-00 [456])~~

~~97234-00 Alveolar osseous graft, per tooth or implant
Particulate bone, or a synthetic substitute or other matrix used to replace alveolar bone~~

~~**Includes:** planing of root
removal of calculus
repair
replacement of alveolar bone~~

97235-00 Gingival graft, per tooth ~~or,~~ implant or extraction socket

...

97242-00 Osseous procedure

Includes: debridement of tooth
incision and raising of gingival flap
removal of calculus
reshaping of bone defect or deformity

Excludes: osseous graft;
• NOS (97243-00 [456])
• using block of bone (97244-00 [456])
that for crown lengthening (97238-00 [456])

97243-00 Osseous graft, not elsewhere classified
Particulate bone, or a synthetic substitute or other matrix used to replace alveolar bone

Includes: debridement of tooth
removal of calculus
repair of alveolar bone
replacement of alveolar bone

97244-00 ~~Alveolar e~~Osseous graft, using block of bone
Block of bone used for augmentation of a bony ridge

Includes: debridement of tooth
insertion of screws or similar devices
removal of calculus

Excludes: particulate bone, synthetic substitute or other matrix used for graft (~~97234-00~~97243-00 [456])

97245-00 Surgical periodontal procedure, not elsewhere classified, per tooth or implant
Cautery for endodontic access
Gingivoplasty
Pericision

Includes: flap elevation of peri-implant tissue
removal of inflammatory tissue

97246-01 Maxillary sinus augmentation

Includes: placement of dental implants

97250-00 Nonsurgical periodontal treatment, not elsewhere classified

Excludes: that with any other periodontal procedure – omit code

~~97281-00 Nonsurgical periodontal treatment, not elsewhere classified~~

~~**Includes:** application of medicaments
debridement
lavage~~

~~*Excludes:* removal of gingival calculus and plaque (97114-00 [453])
that with any other periodontal procedure —omit code~~

461 Other dental surgical procedure

...

97384-00 Repositioning of displaced tooth, ~~per tooth~~
Repositioning of displaced tooth by manipulation

Code also when performed:

- stabilising procedures:
 - replantation and splinting (97387-00 [461])
 - splinting (97386-01 [461])

Excludes: surgical repositioning of unerupted tooth (97385-00 [461])

97385-00 Surgical repositioning of unerupted tooth
Surgical exposure and manipulation of unerupted tooth

97386-01 Splinting of displaced tooth, ~~per tooth~~
Stabilisation by splinting of displaced tooth

Code also when performed:

- repositioning (manipulation) of tooth (97384-00 [461])

97387-00 Replantation and splinting of tooth

Code also when performed:

- provision of splint:
 - metal (97773-00 [477])
 - resin (97772-00 [477])

...

466 Tooth-coloured restoration

...

97524-00 Adhesive restoration of anterior tooth, 4 surfaces, direct
Direct restoration, using an adhesive technique and a tooth-coloured material, involving 4 surfaces of an anterior tooth

97525-00 Adhesive restoration of anterior tooth, 5 surfaces, direct
Direct restoration, using an adhesive technique and a tooth-coloured material, involving 5 surfaces of an anterior tooth

[97526-00 Adhesive restoration, veneer, anterior tooth, direct](#)
[Direct bonding of veneer to surface of anterior tooth, using adhesive tooth-coloured material](#)

97531-00 Adhesive restoration of posterior tooth, 1 surface, direct
Direct restoration, using an adhesive technique and a tooth-coloured material, involving 1 surface of a posterior tooth

...

97535-00 Adhesive restoration of posterior tooth,
5 surfaces, direct
Direct restoration, using an adhesive technique and a tooth-coloured material, involving 5 surfaces of a posterior tooth

[97536-00 Adhesive restoration, veneer, posterior tooth, direct](#)
[Direct bonding of veneer to surface of posterior tooth, using adhesive tooth-coloured material](#)

97551-01 Tooth-coloured restoration, 1 surface, indirect

...

97554-01 Tooth-coloured restoration, 4 surfaces, indirect

97555-01 Tooth-coloured restoration, 5 surfaces, indirect

[97556-01 Tooth-coloured restoration, veneer, indirect](#)
[Attachment of tooth-coloured veneer to the surface of tooth where veneer is constructed indirectly](#)

469 Other restorative dental services

[97571-01 Adaptation of new restoration to existing removable prosthesis](#)

97572-01 Provisional restoration of tooth, per tooth
Temporary (intermediate) restoration of a tooth

Excludes: that with any other dental procedure – omit code

97574-01 Cementation of metal band to tooth
Cementation of metal band for diagnostic, protective purposes or placement of provisional restoration

Code also when performed:

- provisional restoration of tooth (97572-01 [469])

...

97575-00 Insertion of dental pin, per pin
Insertion of dental pin to aid retention and support of direct or indirect restorations of tooth

~~97576-00 Metallic crown~~
~~Coronal restoration using stainless steel crown~~

[97586-00 Placement of preformed metallic crown](#)
[Coronal restoration using preformed metallic crown](#)

[97588-00 Placement of preformed tooth-coloured crown](#)
[Coronal restoration using preformed tooth-coloured crown](#)

97577-00 Cusp capping, per cusp
Restoration of anatomical or functional height of cusp

Code also when performed:

- restoration of posterior tooth:
 - direct (see blocks [465] and [466])
 - indirect (see blocks [465] and [466])

97578-00 Restoration of incisal corner of anterior tooth, per corner
Restoration of anatomical and functional shape of incisal corner

Code also when performed:

- restoration of anterior tooth:
 - direct (see blocks [465] and [466])
 - indirect (see blocks [465] and [466])

97579-01 Bonding of tooth fragment
Restoration by direct bonding of a tooth fragment

~~97582-01 Bonding of veneer to surface of tooth, direct~~
~~Direct bonding of veneer of adhesive tooth-coloured material to surface of tooth~~

~~97583-01 Attachment of veneer to surface of tooth, indirect~~
~~Attachment of tooth-coloured veneer to surface of tooth where veneer is constructed indirectly~~

...

473 Implant prosthesis

...

- 97689-00 Insertion of provisional implant
Special purpose implant designed with the intention of it being removed at a later stage
- 97690-00 Insertion of provisional retention [or anchorage](#) device
Special purpose provisional retention [or anchorage](#) device, ~~intended for later removal~~ attached to the jaws by screws or to implants, [intended for later removal](#)

474 Denture or denture component

Includes: adjustment following insertion of prosthesis

- 97711-00 Provision of complete maxillary denture
- Code also when performed:*
- immediate tooth replacement (97736-00 [474])
 - overlay (97734-00 [474])
 - provision of metal palate or plate (97716-00 [474])
 - resilient lining in addition to new denture (97737-00 [474])

Excludes: that with mandibular denture (97719-00 [474])

- 97712-00 Provision of complete mandibular denture
- Code also when performed:*
- immediate tooth replacement (97736-00 [474])
 - overlay (97734-00 [474])
 - provision of metal palate or plate (97716-00 [474])
 - resilient lining in addition to new denture (97737-00 [474])

Excludes: that with maxillary denture (97719-00 [474])

[97713-00 Provision of temporary complete maxillary denture](#)

Excludes: [that with mandibular denture \(97715-00 \[474\]\)](#)

[97714-00 Provision of temporary complete mandibular denture](#)

Excludes: [that with maxillary denture \(97715-00 \[474\]\)](#)

[97715-00 Provision of temporary complete mandibular and maxillary dentures](#)

- 97716-00 Provision of metal palate or plate
- Code also when performed:*
- provision of complete denture:
 - ~~mandibular (97712-00, 97719-00 [474])~~
 - ~~maxillary (97711-00, 97719-00 [474])~~
 - [mandibular:](#)
 - [NOS \(97712-00 \[474\]\)](#)
 - [temporary:](#)
 - [NOS \(97714-00 \[474\]\)](#)
 - [with maxillary \(97715-00 \[474\]\)](#)
 - [with maxillary \(97719-00 \[474\]\)](#)
 - [maxillary:](#)
 - [NOS \(97711-00 \[474\]\)](#)
 - [temporary:](#)
 - [NOS \(97713-00 \[474\]\)](#)
 - [with mandibular \(97715-00 \[474\]\)](#)
 - [with mandibular \(97719-00 \[474\]\)](#)

97719-00 Provision of complete mandibular and maxillary dentures

Code also when performed:

- immediate tooth replacement (97736-00 [474])
- overlay (97734-00 [474])
- provision of metal palate or plate (97716-00 [474])
- resilient lining in addition to new denture (97737-00 [474])

97721-00 Provision of partial maxillary denture, resin base

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])
 - retainer (97731-00 [474])
 - tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])
- provision of connecting bar of wrought metal (97738-00 [474])

97722-00 Provision of partial mandibular denture, resin base

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])
 - retainer (97731-00 [474])
 - tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])
- provision of connecting bar of wrought metal (97738-00 [474])

97727-00 Provision of partial maxillary denture, cast metal framework

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])
 - retainer (97731-00 [474])
 - tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])

97728-00 Provision of partial mandibular denture, cast metal framework

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])
 - retainer (97731-00 [474])
 - tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])

97723-00 Provision of temporary partial maxillary denture

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])
 - retainer (97731-00 [474])
 - tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])

Excludes: that with temporary complete maxillary denture (97713-00 [474])

97724-00 Provision of temporary partial mandibular denture

Code also when performed:

- attachment of:
 - occlusal rests (97732-00 [474])

- [retainer \(97731-00 \[474\]\)](#)
- [tooth to partial denture \(97733-00 \[474\]\)](#)
- [immediate replacement of tooth \(97736-00 \[474\]\)](#)
- [overlay \(97734-00 \[474\]\)](#)

Excludes: [that with temporary complete mandibular denture \(97714-00 \[474\]\)](#)

97731-00 Provision of retainer to partial denture

Code also when performed:

- provision of partial resin base denture:
 - [mandibular \(97722-00 \[474\]\)](#)
 - [maxillary \(97721-00 \[474\]\)](#)

...

480 Fixed orthodontic appliance

97829-00 Partial banding, per arch

97831-00 Full arch banding, per arch

[97833-00 Removal of banding, per arch](#)

97841-00 Insertion of fixed palatal or lingual arch appliance

97842-00 Partial banding for intermaxillary elastics

[Application of bands and brackets to teeth in maxillary and mandibular arches](#)

Includes: [vertical and/or](#) cross elastics

~~97843-00 Provision of maxillary expansion appliance~~

[97843-01 Insertion of fixed maxillary or mandibular expansion appliance](#)

...

483 Other orthodontic service

97871-00 Adjustment of fixed or removable orthodontic appliance

[97872-00 Reattachment of passive fixed orthodontic appliance](#)

Includes: [cleaning and polishing of appliance and/or teeth](#)

[97873-00 Repair of passive fixed orthodontic appliance](#)

Code also when performed:

- [impression for denture repair \(97776-00 \[477\]\)](#)

[97874-00 Removal of passive fixed orthodontic appliance](#)

97875-00 Repair of removable appliance, resin base

Code also when performed:

- [impression for denture repair \(97776-00 \[477\]\)](#)

97876-00 Repair of clasp, spring or tooth on removable appliance

Replace clasp, spring or tooth on removable appliance

Code also when performed:

- [impression for denture repair \(97776-00 \[477\]\)](#)

97877-01 Addition of clasp, spring or tooth to removable appliance

Code also when performed:

- impression for denture repair (97776-00 [477])

97878-00 Relining of removable appliance, processed

490 Miscellaneous dental services

97981-00 Splinting and stabilisation of tooth, direct

Excludes: that for displaced tooth (97386-01 [461])

97982-00 Enamel stripping of tooth

[97945-01 Low level laser therapy for dental applications](#)

[Biostimulation](#)

[Photobiomodulation](#)

~~97985-00 Provision of oral appliance for diagnosed snoring and obstructive sleep apnoea~~

~~*Includes:* bi-maxillary oral appliance
single arch oral appliance~~

[97983-01 Provision of oral appliance for snoring and obstructive sleep apnoea](#)

Includes: oral appliance:

• [bi-maxillary](#)

• [single arch](#)

Excludes: [adjustment, repair or replacement of oral appliance \(97985-01 \[490\]\)](#)

[97985-01 Replacement of oral appliance for snoring and obstructive sleep apnoea](#)

[Adjustment of oral appliance for snoring and obstructive sleep apnoea](#)

[Repair of oral appliance for snoring and obstructive sleep apnoea](#)

97986-00 Postoperative dental care, not elsewhere classified

Alphabetic Index

CONVENTIONS USED IN THE ALPHABETIC INDEX OF INTERVENTIONS

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, they always take precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

EXAMPLE 3:

Flap (repair)

~~-gingival (≤ 8 teeth) 97232-00 [456]~~

~~— for crown lengthening 97238-00 [456]~~

~~— with alveolar osseous procedure (≤ 8 teeth) 97233-00 [456]~~

~~— > 8 teeth 97233-01 [456]~~

~~— > 8 teeth 97232-01 [456]~~

[-gingival \(≤ 8 teeth\) 97232-00 \[456\]](#)

-- for crown lengthening 97238-00 [456]
-- with osseous procedure 97242-00 [456]
--> 8 teeth 97232-01 [456]

...

Acupuncture 93173-00 [1908]

[Adaptation, new tooth restoration to existing removable prosthesis 97571-01 \[469\]](#)

Adaptometry, dark 11211-00 [1831]

Addition (of)

...

Adjustment

...

- anal sphincter, artificial 32221-00 [940]

- [appliance oral, for snoring and obstructive sleep apnoea \(bi-maxillary\) \(single arch\) 97985-01 \[490\]](#)

- artificial sphincter

- - bowel 32221-00 [940]

...

Analysis

- for tooth-jaw size prediction 97082-00 [452]

- cephalometric

- - orthodontic (dental) 97081-00 [452]

- [cone beam volumetric tomography, dental 97091-00 \[452\]](#)

- electromyographic, dental 97086-00 [452]

- periodontal, clinical, with recording 97221-00 [456]

- tomographic, dental 97083-00 [452]

Anastomosis

...

Application

...

- dental

- - banding

- - - full arch (per arch) 97831-00 [480]

- - - partial arch (per arch) 97829-00 [480]

- - - - for intermaxillary elastics (cross elastics) ([vertical elastics](#)) 97842-00 [480]

- - [brackets to teeth in maxillary and mandibular arches 97842-00 \[480\]](#)

- - crown — see *Crown, dental*

- - desensitising agents 97165-01 [455]

- - diagnostic model 97071-00 [452]

- - fixed appliance, passive (space maintainer) 97845-00 [480]

- - obturator 97774-00 [477]

- - occlusal splint 97965-00 [489]

- - orthopaedic device ([custom fabrication](#)) ([prefabricated](#)) 97823-00 [479]

- - removable appliance

- - - active (maxillary arch) 97821-00 [479]

- - - - mandibular arch 97822-01 [479]

- - - passive (maxillary arch) 97811-00 [479]

- - - - mandibular arch 97812-01 [479]

- - splint

- - - metal 97773-00 [477]

- - - occlusal 97965-00 [489]

- - - resin 97772-00 [477]

- - ~~stainless steel crown 97576-00 [469]~~

-- stress-breaker, intracoronal (keyway) 97644-00 [471]

...

- medicament

-- dental 97927-00 [485]

~~--- for nonsurgical periodontal treatment 97281-00 [456]~~

-- - using individually made tray for self application 97926-00 [485]

- neck support (moulded) 96092-00 [1870]

...

- orthodontic appliance

-- extraoral 97851-00 [481]

-- fixed (expansion) ~~palatal or lingual arch 97841-00 [480]~~

~~--- mandibular 97843-01 [480]~~

~~--- maxillary 97843-01 [480]~~

~~--- palatal or lingual arch 97841-00 [480]~~

-- full arch banding (per arch) 97831-00 [480]

-- functional (custom fabrication) (prefabricated) 97823-00 [479]

~~--- maxillary expansion 97843-00 [480]~~

-- partial arch banding (per arch) 97829-00 [480]

-- - for intermaxillary elastics (cross elastics) (vertical elastics) 97842-00 [480]

-- passive, fixed (space maintainer) 97845-00 [480]

...

Attachment

...

- tooth

-- to partial denture 97733-00 [474]

- veneer, dental

-- with recementing 97651-00 [472]

~~--- direct 97582-01 [469]~~

-- indirect [tooth-coloured restoration](#) ~~97583-01 [469]~~ [97556-01 \[466\]](#)

Atticotomy 41533-00 [310]

...

Augmentation

...

- mammoplasty — see *Mammoplasty/augmentation*

~~- maxillary sinus for dental implants (lateral wall approach) (trans-alveolar technique) 97246-01 [456]~~

- muscle, with implant 45051-01 [1682]

...

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

...

- vitreous (by aspiration) (by paracentesis) (eye) (humour) 42740-01 [204]

- vulva 35615-00 [1291]

-- with destruction of lesion by laser 35539-00 [1289]

[Biostimulation for dental applications](#) 97945-01 [490]

BiPAP (bilevel positive airway pressure) (nonintubated) — see *block* [570]

- combined with continuous ventilatory support, for neonates — see *block* [571]

...

Bonding

- orthodontic attachment

-- for application of orthodontic force 97862-00 [482]

- tooth fragment 97579-01 [469]

~~- veneer, to surface of tooth, direct (adhesive tooth-coloured material) 97582-01 [469]~~

~~- veneer, to surface of tooth, direct, adhesive tooth-coloured material~~

~~--- anterior 97526-00 [466]~~

~~--- posterior 97536-00 [466]~~

BPD (biliopancreatic diversion) — see *Biliopancreatic diversion (BPD), for obesity*

Cauterisation — *see also Destruction*

- angioma 45027-00 [743]

...

- vascular

-- anomaly 45027-00 [743]

-- malformation 45027-00 [743]

- wart — *see Removal/wart*

[CBVT \(cone beam volumetric tomography\) analysis and interpretation 97091-00 \[452\]](#)

CCPD (continuous cycling peritoneal dialysis) 13100-08 [1061]

CDCR (conjunctivodacryocystorhinostomy) 42629-00 [247]

...

Condylotomy

- temporomandible 45863-00 [1362]

-- with

--- flap or graft (allograft) (cartilage) (tissue) 45873-00 [1362]

--- procedures involving

---- capsule 45871-00 [1362]

---- meniscus 45871-00 [1362]

[Cone beam volumetric tomography \(CBVT\) for orofacial structures 97091-00 \[452\]](#)

Conjunctivodacryocystorhinostomy (CDCR) 42629-00 [247]

...

Crown, dental

- core, including post, indirect 97625-00 [470]

- full — *see also Restoration/tooth*

-- acrylic resin, indirect 97611-01 [470]

-- attached to osseointegrated implant, indirect

--- metallic 97673-00 [473]

--- nonmetallic 97671-00 [473]

--- veneered 97672-00 [473]

-- metallic, indirect 97618-00 [470]

--- attached to osseointegrated implant 97673-00 [473]

-- nonmetallic, indirect 97613-00 [470]

--- attached to osseointegrated implant 97671-00 [473]

-- veneered, indirect 97615-00 [470]

--- attached to osseointegrated implant 97672-00 [473]

- metallic ~~97576-00~~ [97586-00 \[469\]](#)

- post and root cap, indirect 97629-00 [470]

- provisional 97631-00 [470]

- with any other dental procedure — *omit code*

- recementing 97651-00 [472]

- recontouring of existing crown (polishing) (reshaping) 97113-00 [453]

- repair of (direct) 97659-00 [472]

-- indirect 97658-00 [472]

- restoration, direct 97627-00 [470]

~~- stainless steel 97576-00 [469]~~

- temporary 97631-00 [470]

- with any other dental procedure — *omit code*

- three quarter, indirect

-- metallic — *see Restoration/tooth/metallic/indirect*

-- nonmetallic — *see Restoration/tooth/tooth-coloured material/indirect*

[- tooth-coloured 97588-00 \[469\]](#)

- VMK (Vita-Matall-Keramik) 97615-00 [470]

...

Debridement ([autolytic](#)) ([biosurgery](#)) ([chemical](#)) ([electrosurgery](#)) ([enzymes](#)) ([hydrosurgery](#)) ([laser](#)) ([plasma scalpel](#)) ([thermal](#)) ([ultrasonic](#)) ([water jet or scalpel](#)) ([whirlpool](#))

- [abutment, periodontal 97223-00 \[456\]](#)

- amputation stump

-- skin — *see Debridement/skin*

.....

- fracture site, open 90580-00 **[1566]**

-- with open reduction of fracture — *omit code*

-- skull, compound 39609-00 **[25]**

- [implant, periodontal 97223-00 \[456\]](#)

- irrigation and dressing, root canal system 97455-00 **[464]**

- joint

-- interphalangeal

...

- tendon — *see Debridement/soft tissue*

- toenail (bed) (fold) 47906-00 **[1632]**

- [tooth \(periodontal\) 97222-02 \[456\]](#)

-- with

--- [gingivectomy \(≤ 8 teeth\) 97231-00 \[456\]](#)

---- [> 8 teeth 97231-01 \[456\]](#)

--- osseous

---- [graft 97243-00 \[456\]](#)

----- [using block of bone 97244-00 \[456\]](#)

---- [procedure 97242-00 \[456\]](#)

--- [periodontal flap \(≤ 8 teeth\) 97232-00 \[456\]](#)

---- [> 8 teeth 97232-01 \[456\]](#)

--- [root canal \(1 canal\) \(1st canal\) 97415-00 \[462\]](#)

---- [as emergency or palliative dental procedure 97419-00 \[462\]](#)

---- [with filling of apical end 97434-00 \[463\]](#)

---- [each additional canal \(≥ 2 canals\) 97416-00 \[462\]](#)

---- [irrigation and dressing 97455-00 \[464\]](#)

- ulcer

-- skin (subcutaneous tissue) — *see Debridement/skin*

...

Denture

- bar for overlay 97664-00 **[473]**

- characterisation 97775-00 **[477]**

~~- complete~~

~~--- [mandibular 97712-00 \[474\]](#)~~

~~--- [and maxillary 97719-00 \[474\]](#)~~

~~--- [maxillary 97711-00 \[474\]](#)~~

~~--- [and mandibular 97719-00 \[474\]](#)~~

- immediate tooth replacement 97736-00 **[474]**

- [mandibular](#)

-- [complete 97712-00 \[474\]](#)

--- [and maxillary 97719-00 \[474\]](#)

--- [temporary 97714-00 \[474\]](#)

---- [and maxillary 97715-00 \[474\]](#)

-- [partial \(resin base\) 97722-00 \[474\]](#)

--- [cast metal framework 97728-00 \[474\]](#)

--- [temporary 97724-00 \[474\]](#)

- [maxillary](#)

-- [complete 97711-00 \[474\]](#)

--- [and mandibular 97719-00 \[474\]](#)

--- [temporary 97713-00 \[474\]](#)

---- [and mandibular 97715-00 \[474\]](#)

- - [partial \(resin base\) 97721-00 \[474\]](#)
- - - [cast metal framework 97727-00 \[474\]](#)
- - - [temporary 97723-00 \[474\]](#)
- metal
- - inlay (indirect restoration) 97778-00 [477]
- - palate or plate 97716-00 [474]
- partial
- - mandibular (resin base) 97722-00 [474]
- - - [cast metal framework 97728-00 \[474\]](#)
- - - [temporary 97724-00 \[474\]](#)
- - maxillary (resin base) 97721-00 [474]
- - - [cast metal framework 97727-00 \[474\]](#)
- - - [temporary 97723-00 \[474\]](#)
- - provision of
- - - occlusal rest 97732-00 [474]
- - - overlay (1 tooth) 97734-00 [474]
- - - precision or magnetic attachment 97735-00 [474]
- - - retainer 97731-00 [474]
- - - tooth 97733-00 [474]
- - - wrought bar 97738-00 [474]

Dermabrasion — see *Abrasion/skin*

...

Diabetes education 95550-14 [1916]

[Diagnostic modelling 97075-00 \[452\]](#)

Dialysis

- haemodiafiltration

...

Extraction

- calculus (stone)

...

- - supragingival 97114-00 [453]

- - - with

- - - - ~~alveolar~~ osseous procedure (\leq 8 teeth) ~~97233-00~~ [97242-00 \[456\]](#)

~~-----~~ $>$ 8 teeth [97233-01 \[456\]](#)

- - - - periodontal flap (\leq 8 teeth) 97232-00 [456]

- - - - - $>$ 8 teeth [97232-01 \[456\]](#)

- - - and subgingival 97114-00 [453]

- - tooth surface 97114-00 [453]

...

Facetectomy, spinal (complete) (medial) (partial) 40330-00 [49]

Facings

~~-bonded (direct) 97582-01 [469]~~

~~-indirect 97583-01 [469]~~

~~-recementing 97651-00 [472]~~

Fallopscopy (diagnostic) (therapeutic) 35710-00 [1248]

...

Fitting

...

- prosthesis

- - dental

- - - with

- - - - metal frame attached to implants (fixed) 97666-00 [473]

- - - - - removable 97667-00 [473]

- - - - resin base attached to implants, removable 97665-00 [473]

- - - implant abutment (crown) (final) 97661-00 [473]

- - - - provisional (temporary) 97633-00 [471]

- provisional
- [anchorage device 97690-00 \[473\]](#)
- bridge pontic 97632-00 [471]
- with any other dental procedure — *omit code*
- crown 97631-00 [470]
- with any other dental procedure — *omit code*
- implant abutment 97633-00 [471]
- final 97661-00 [473]
- retention device 97690-00 [473]
- ...

Flap (repair)

- ...
- gingival (≤ 8 teeth) 97232-00 [456]
- for crown lengthening 97238-00 [456]
- with ~~alveolar~~ osseous procedure (~~≤ 8 teeth~~) ~~97233-00~~ [97242-00 \[456\]](#)
- ~~→ 8 teeth 97233-01 [456]~~
- > 8 teeth 97232-01 [456]
- Gunderson (conjunctival flap over cornea) 42638-00 [174]
- ...

- periodontal (≤ 8 teeth) 97232-00 [456]
- for crown lengthening 97238-00 [456]
- with ~~alveolar~~ osseous procedure (~~≤ 8 teeth~~) ~~97233-00~~ [97242-00 \[456\]](#)
- ~~→ 8 teeth 97233-01 [456]~~
- > 8 teeth 97232-01 [456]
- pharyngeal (for velopharyngeal incompetence) 45716-01 [1681]
- ...

Graft (repair)

- ...
- alveolar ~~cleft~~ osseous, ~~per implant~~ ~~97234-00 [456]~~ [52337-00 \[1690\]](#)
- ~~for repair of cleft 52337-00 [1690]~~
- ~~block 97244-00 [456]~~
- anophthalmic socket or orbit (mucous membrane) with reconstruction 42527-00 [164]
- areola (breast) — *see Graft/breast/areola*
- ...
- bone 48239-00 [1569]
- ...
- allograft — *see Allograft/bone*
- alveolar, ~~per implant (dental procedure)~~ ~~cleft~~ [97234-00 \[456\]](#) [52337-00 \[1690\]](#)
- ~~for repair of cleft 52337-00 [1690]~~
- ~~block 97244-00 [456]~~
- anatomic specific
- with en bloc resection of lesion (tumour) of bone
- allograft 50227-00 [1570]
- ...
- orbital cavity (floor) (wall)
- for reconstruction — *see Reconstruction/orbital cavity/with/graft/bone*
- [osseous 97243-00 \[456\]](#)
- [using block of bone 97244-00 \[456\]](#)
- pelvis 50393-00 [1488]
- ...
- nose
- for rhinoplasty — *see Rhinoplasty/with graft*
- bone — *see Rhinoplasty/with graft/bone*
- cartilage — *see Rhinoplasty/with graft/cartilage*
- composite 45656-00 [1669]
- skin — *see Graft/skin/nose*
- [osseous 97243-00 \[456\]](#)
- [using block of bone 97244-00 \[456\]](#)

- osteochondral
- - with arthroscopic repair of meniscus of knee 49563-00 [1520]
- patch — see also *Graft/by site/patch*
- ...

Insertion

- ...
- appliance
- - orthodontic — see also *Attachment/appliance/orthodontic*
- - - fixed ([expansion](#)) ~~palatal or lingual arch 97841-00 [480]~~
- - - - [mandibular 97843-01 \[480\]](#)
- - - - [maxillary 97843-01 \[480\]](#)
- - - - [palatal or lingual arch 97841-00 \[480\]](#)
- ~~- - - - rapid maxillary expansion 97843-00 [480]~~
- applicator for brachytherapy (catheters) (needles)
-
- dental
- - pin (for retention) 97575-00 [469]
- - prosthesis
- - - with
- - - - metal frame attached to implants (fixed) 97666-00 [473]
- - - - - removable 97667-00 [473]
- - - - resin base attached to implants, removable 97665-00 [473]
- - - implant abutment (crown) (final) 97661-00 [473]
- - - - provisional (temporary) 97633-00 [471]
- - - provisional
- - - - [anchorage device 97690-00 \[473\]](#)
- - - - bridge pontic 97632-00 [471]
- - - - - with any other dental procedure — *omit code*
- - - - crown 97631-00 [470]
- - - - - with any other dental procedure — *omit code*
- - - - implant abutment 97633-00 [471]
- - - - - final 97661-00 [473]
- - - - retention device 97690-00 [473]
- ...

Intermittent positive pressure ventilation (IPPV) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]
- [Interpretation of cone beam volumetric tomography, dental 97091-00 \[452\]](#)

Interrogation

- defibrillator (automatic) (cardioverter) (with pacemaker functionality) — see *Test, testing/defibrillator*
- ...

Laser therapy — see also *Destruction/by site*

- ...
- cornea (lesion) 42797-03 [168]
- - blood vessels 42797-03 [168]
- - pterygium 42686-00 [172]
- corneovitreal synechiae 42761-00 [186]
- [dental applications, low level 97945-01 \[490\]](#)
- duodenum, endoscopic 30478-03 [1007]
- endometrium (endoscopic) 35622-00 [1263]
- ...
- lesion (tissue) — see also *Laser therapy/by site*
- - ureter (closed) (endoscopic) 36809-01 [1074]
- [low level, for dental applications 97945-01 \[490\]](#)
- macules, cafe-au-lait
- - continuous (individual blood vessels) 14100-00 [744]
- ...

Modify

~~-bone defect~~

~~--alveolar (≤ 8 teeth) 97233-00 [456]~~

~~---> 8 teeth 97233-01 [456]~~

- crown of tooth, contour, per tooth 97171-00 [455]

- denture base 97754-00 [47]

...

Phonoangiography

- carotid vessels — see *Recording/wave forms/carotid vessels*

- vertebral vessels — see *Recording/wave forms/vertebral vessels*

[Photobiomodulation for dental applications 97945-01 \[490\]](#)

Photochemotherapy — see *Therapy/ultraviolet/A, with psoralens*

...

Placement (of) — see also *Insertion*

- bridge, dental

-- provisional 97632-00 [471]

--- with any other dental procedure — *omit code*

-- temporary 97632-00 [471]

--- with any other dental procedure — *omit code*

- electrode(s), temporary, transcutaneous 90202-01 [649]

- titanium fixture (screw)

-- for osseointegration

--- extraoral — see *Osseointegration/extraoral/implantation of titanium fixture*

--- intraoral — see *Osseointegration/intraoral/implantation of titanium fixture*

Planing

~~-tooth root~~

~~—with~~

~~—alveolar osseous procedure (≤ 8 teeth) 97233-00 [456]~~

~~---> 8 teeth 97233-01 [456]~~

~~---graft, per implant 97234-00 [456]~~

~~---block 97244-00 [456]~~

~~---curettage, subgingival, per segment of (≤ 8 teeth) 97222-00 [456]~~

~~---> 8 teeth 97222-01 [456]~~

~~---gingivectomy (≤ 8 teeth) 97231-00 [456]~~

~~---> 8 teeth 97231-01 [456]~~

~~---periodontal flap (≤ 8 teeth) 97232-00 [456]~~

~~---> 8 teeth 97232-01 [456]~~

Planning (of)

- assisted reproductive technologies 13209-00 [1297]

...

Procedure

...

- dental

...

-- ~~alveolar osseous (≤ 8 teeth) 97233-00~~ [97242-00 \[456\]](#)

~~---> 8 teeth 97233-01 [456]~~

--- graft, per implant ~~97234-00~~ [97243-00 \[456\]](#)

---- for alveolar cleft 52337-00 [1690]

---- [using](#) block [of bone](#) 97244-00 [456]

...

Provision

- aligners, sequential plastic (orthodontic) 97825-00 [479]

- appliance

-- dental

--- diagnostic template 97678-00 [473]

--- for surgical implant guide 97679-00 [473]

- - - guide, for immediate denture (surgical) 97779-01 [477]
- - - minor tooth guidance, fixed 97846-01 [480]
- - - passive, fixed 97845-00 [480]
- - oral, for snoring and obstructive sleep apnoea (bi-maxillary) (single arch) ~~97985-00~~ [97983-01](#) [490]
- - orthodontic — see also *Attachment/appliance/orthodontic*
- - - extraoral 97851-00 [481]
- - - functional orthopaedic ([custom fabrication](#)) ([prefabricated](#)) 97823-00 [479]
- - - removable
- - - - active (maxillary arch) 97821-00 [479]
- - - - - mandibular arch 97822-01 [479]
- - - - functional orthopaedic ([custom fabrication](#)) ([prefabricated](#)) 97823-00 [479]
- - - - passive (maxillary arch) 97811-00 [479]
- - - - - mandibular arch 97812-01 [479]
- - - - sequential plastic aligners 97825-00 [479]

...

- denture

- ~~--- mandibular (complete) 97712-00 [474]~~
- ~~--- and maxillary 97719-00 [474]~~
- ~~--- partial (resin base) 97722-00 [474]~~
- ~~--- cast metal framework 97728-00 [474]~~
- ~~--- maxillary (complete) 97711-00 [474]~~
- ~~--- and mandibular 97719-00 [474]~~
- ~~--- partial (resin base) 97721-00 [474]~~
- ~~--- cast metal framework 97727-00 [474]~~
- ~~--- metal palate (plate) 97716-00 [474]~~
- - complete
- - - mandibular 97712-00 [474]
- - - - and maxillary 97719-00 [474]
- - - - - temporary 97715-00 [474]
- - - - temporary 97714-00 [474]
- - - maxillary 97711-00 [474]
- - - - and mandibular 97719-00 [474]
- - - - - temporary 97715-00 [474]
- - - - temporary 97713-00 [474]
- - metal palate (plate) 97716-00 [474]
- - partial
- - - mandibular (resin base) 97722-00 [474]
- - - - cast metal framework 97728-00 [474]
- - - - temporary 97724-00 [474]
- - - maxillary (resin base) 97721-00 [474]
- - - - cast metal framework 97727-00 [474]
- - - - temporary 97723-00 [474]
- fixed space maintainer, dental 97845-00 [480]
- lingual bar, wrought 97738-00 [474]

...

Reattachment

...

- muscle NEC 90585-00 [1573]
- nose (amputated) 90132-00 [380]
- - by graft
- - - composite 45656-00 [1669]
- - - skin, full thickness 45451-01 [1649]
- - orthodontic passive fixed appliance 97872-00 [483]
- penis (amputated) 90404-00 [1200]

...

Removal — see also *Excision*

...

- arch ~~bars (mandible) (maxilla) 45823-00 [1360]~~
- - bands (brackets) (orthodontic appliance) 97833-00 [480]
- - bars (mandible) (maxilla) 45823-00 [1360]
- arteriovenous

...

- orbital
- - contents — see *Exenteration/orbit*
- - implant — see *Removal/implant/orbital*
- orthodontic appliance
- - arch bands 97833-00 [480]
- - passive fixed 97874-00 [483]
- pacemaker (generator)

...

Repair

...

- appliance
- - oral, for snoring and obstructive sleep apnoea (bi-maxillary) (single arch) 97985-01 [490]
- - orthodontic
- - - ~~orthodontic, removable 97875-00 [483]~~
- - - ~~clasp, spring or tooth 97876-00 [483]~~
- - - passive, fixed 97873-00 [483]
- - - removable
- - - - clasp, spring or tooth 97876-00 [483]
- - - - resin base 97875-00 [483]
- arteriovenous

...

- orbit NEC 90082-00 [228]
- - dystopia (extracranial) (subcranial) 45779-00 [1711]
- - - intracranial 45776-00 [1711]
- - wound 42530-02 [228]
- orthodontic appliance, ~~removable 97875-00 [483]~~
- ~~clasp, spring or tooth 97876-00 [483]~~
- - passive fixed 97873-00 [483]
- - removable
- - - clasp, spring or tooth 97876-00 [483]
- - - resin base 97875-00 [483]
- ovary

...

Replacement

...

- aorta, aortic
- - aneurysm — see *Replacement/aneurysm, with graft/aorta*
- - arch
- - - with ascending thoracic aorta replacement
- - - - see *block [688]*
- - thoracic
- - - ascending — see *block [687]*
- - - - with aortic arch replacement — see *block [688]*
- - - descending 38568-01 [689]
- - - - with shunt 38571-01 [689]
- - valve
- - with
- - - aortic arch
- - - - repair — see *block [685]*
- - - - replacement — see *block [688]*
- - - ascending thoracic aorta
- - - - repair — see *block [684] and [685]*
- - - - replacement — see *block [687] and [688]*

- bioprosthesis 38488-01 [623]
- percutaneous 38488-08 [623]
- heterograft, unstented 38489-01 [623]
- homograft 38489-00 [623]
- mechanical prosthesis 38488-00 [623]
- [appliance, oral for snoring and obstructive sleep apnoea \(bi-maxillary\) \(single arch\) 97985-01 \[490\]](#)
- artificial
- heart 96229-02 [608]
- sphincter
- bowel 32221-00 [940]
- urinary 37390-01 [1113]
- ...
- oesophagus
- using intestine, paediatric 43903-00 [866]
- [oral appliance for snoring and obstructive sleep apnoea \(bi-maxillary\) \(single arch\) 97985-01 \[490\]](#)
- pacemaker
- cardiac (generator) 38353-01 [655]
- ...

Reshaping

- alveolar bone (~~≤ 8 tooth~~) ~~97233-00~~ [97242-00 \[456\]](#)
- ~~8 tooth~~ [97233-01 \[456\]](#)
- cranial vault (for craniostenosis) (for craniosynostosis) (total) 45785-03 [1717]
- ...

Restoration

- ...
- tooth (~~using~~) [\(1 surface\) \(adhesive technique\) \(anterior tooth\) \(direct\) \(tooth-coloured material\) 97521-01 \[466\]](#)
- [2 surfaces 97522-01 \[466\]](#)
- [3 surfaces 97523-01 \[466\]](#)
- [4 surfaces 97524-00 \[466\]](#)
- [5 surfaces 97525-00 \[466\]](#)
- [adaptation to existing removable prosthesis 97571-01 \[469\]](#)
- ~~-- adhesive technique (tooth-coloured material)~~
- ~~-- anterior tooth, direct (1 surface) 97521-01 [466]~~
- ~~-- 2 surfaces 97522-01 [466]~~
- ~~-- 3 surfaces 97523-01 [466]~~
- ~~-- 4 surfaces 97524-00 [466]~~
- ~~-- 5 surfaces 97525-00 [466]~~
- ~~-- posterior tooth, direct (1 surface) 97531-00 [466]~~
- ~~-- 2 surfaces 97532-00 [466]~~
- ~~-- 3 surfaces 97533-00 [466]~~
- ~~-- 4 surfaces 97534-00 [466]~~
- ~~-- 5 surfaces 97535-00 [466]~~
- coronal (full)
- with [metallic preformed crown](#) (~~stainless steel~~) ~~97576-00~~ [97588-00 \[469\]](#)
- [metallic 97586-00 \[469\]](#)
- ~~-- metallic — see Restoration/tooth/metallic~~
- ~~-- tooth-coloured adhesive restorative, anterior direct — see Restoration/tooth/tooth-coloured material/direct/anterior tooth~~
- cusp 97577-00 [469]
- incisal corner (~~anterior tooth~~) 97578-00 [469]
- [indirect 97551-01 \[466\]](#)
- [2 surfaces 97552-01 \[466\]](#)
- [3 surfaces 97553-01 \[466\]](#)
- [4 surfaces 97554-01 \[466\]](#)
- [5 surfaces 97555-01 \[466\]](#)
- [veneer 97556-01 \[466\]](#)
- inlay — see Restoration/tooth/metallic/indirect OR Restoration/tooth/~~tooth-coloured material~~/indirect

- metallic
- direct (~~1 surface~~) (amalgam) 97511-01 [465]
- 2 surfaces 97512-01 [465]
- 3 surfaces 97513-01 [465]
- 4 surfaces 97514-02 [465]
- 5 surfaces 97515-02 [465]
- indirect (~~1 surface~~) 97541-01 [465]
- 2 surfaces 97542-01 [465]
- 3 surfaces 97543-01 [465]
- 4 surfaces 97544-00 [465]
- 5 surfaces 97545-00 [465]
- onlay — see *Restoration/tooth/metallic/indirect OR Restoration/tooth/~~tooth-coloured material~~/indirect*
- posterior 97531-00 [466]
- 2 surfaces 97532-00 [466]
- 3 surfaces 97533-00 [466]
- 4 surfaces 97534-00 [466]
- 5 surfaces 97535-00 [466]
- veneer 97536-00 [466]
- provisional 97572-01 [469]
- with any other dental procedure — *omit code*
- crown 97631-00 [470]
- with any other dental procedure — *omit code*
- implant 97634-01 [471]
- with any other dental procedure — *omit code*
- temporary (cavity) 97572-01 [469]
- with any other dental procedure — *omit code*
- crown 97631-00 [470]
- with any other dental procedure — *omit code*
- implant 97634-01 [471]
- with any other dental procedure — *omit code*
- ~~--- tooth-coloured material~~
- ~~--- direct (adhesive technique)~~
- ~~--- anterior tooth (1 surface) 97521-01 [466]~~
- ~~--- 2 surfaces 97522-01 [466]~~
- ~~--- 3 surfaces 97523-01 [466]~~
- ~~--- 4 surfaces 97524-00 [466]~~
- ~~--- 5 surfaces 97525-00 [466]~~
- ~~--- posterior tooth (1 surface) 97531-00 [466]~~
- ~~--- 2 surfaces 97532-00 [466]~~
- ~~--- 3 surfaces 97533-00 [466]~~
- ~~--- 4 surfaces 97534-00 [466]~~
- ~~--- 5 surfaces 97535-00 [466]~~
- ~~--- indirect (1 surface) 97551-01 [466]~~
- ~~--- 2 surfaces 97552-01 [466]~~
- ~~--- 3 surfaces 97553-01 [466]~~
- ~~--- 4 surfaces 97554-01 [466]~~
- ~~--- 5 surfaces 97555-01 [466]~~
- veneer 97526-00 [466]
- vascular continuity — see *Anastomosis/vein*

Resurfacing

Treatment

- dental
- acute periodontal infection 97213-00 [456]
- external root resorption 97437-00 [463]
- palliative, emergency 97911-00 [484]
- periodontal, nonsurgical ~~97281-00~~97250-00 [456]
- with any other periodontal procedure — *omit code*

- endoscopic pilonidal sinus (EPSiT) (prosthesis) (sealant) 30676-02 [**1659**]
- fracture
 - - by reduction — see *Reduction/fracture/by site*
 - - nonsurgical (by cast) — see *Immobilisation*
- molecular adsorbent recirculating system (MARS) 13750-06 [**1892**]
- palliative
 - - dental, emergency 97911-00 [**484**]
 - - periodontal, nonsurgical ~~97281-00~~ 97250-00 [**456**]
 - - with any other periodontal procedure — omit code
- radiation — see *Radiotherapy*
- ...

Australian Coding Standards

0020 BILATERAL/MULTIPLE PROCEDURES

BILATERAL PROCEDURES

...

MULTIPLE PROCEDURES

...

Classification

...

5. Skin or subcutaneous lesion removal, excision or biopsy

For multiple excisions or biopsies or removals performed on:

- separate skin lesions: assign relevant code(s) as many times as it is performed
- same lesion: assign relevant code once.

...

6. Dental procedures

Apply the following guidelines to codes listed in Chapter 6 *Dental services (BLOCKS 450–490)*:

- Codes that include reference to a number of teeth are assigned once.

For example, 97311-03 [457] *Removal of 3 teeth or part(s) thereof* specifies the removal of 3 teeth, therefore this code is assigned once for each visit to theatre.

- Codes that specify 'per tooth', 'per root' or 'per cusp' (etc) are assigned as many times as they are performed.

For example, 97171-00 [455] *Odontoplasty, per tooth* performed on six teeth is assigned six times.

- Codes that do not specify the number of teeth are assigned as many times as performed.

For example, 97414-00 [462] *Pulpotomy* performed on four teeth is assigned four times.



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Allied Health Codes

Introduction/Rationale:

This addenda proposal combines two tasks TN54 *Lactation consultant* and TN186 *Review of allied health procedure codes in ACHI*, which were based on public submissions requesting additional allied health codes for 'lactation consultant' and 'exercise physiologist'.

Note: this topic was discussed previously at ITG in 2011, from which information (ie a list of other allied health professions to be included) was to be provided to NCCH. To date this information has not been forthcoming, and no further public submissions have been received regarding other allied health professional bodies seeking an individual ACHI code.

As such, ACCD proposes to move forward with the addition of ACHI codes for 'lactation consultant' and 'exercise physiologist'.

Further allied health professions will be considered for inclusion in ACHI if a public submission is received at a future date.

ACCD PROPOSAL

Tabular List

1916 Generalised allied health interventions

▼ 0032

- 95550-00 Allied health intervention, dietetics
- 95550-01 Allied health intervention, social work
- 95550-02 Allied health intervention, occupational therapy
- 95550-03 Allied health intervention, physiotherapy
- 95550-04 Allied health intervention, podiatry
- 95550-05 Allied health intervention, speech pathology
- 95550-06 Allied health intervention, audiology
- 95550-07 Allied health intervention, orthoptics
- 95550-08 Allied health intervention, prosthetics and orthotics

- 95550-09 Allied health intervention, pharmacy
- 95550-10 Allied health intervention, psychology
- 95550-12 Allied health intervention, spiritual care
- 95550-14 Allied health intervention, diabetes education
▼ 0401

[95550-15 Allied health intervention, exercise physiologist](#)

[95550-16 Allied health intervention, lactation consultant](#)

- 95550-11 Allied health intervention, other

Alphabetic Index

Allied health intervention — *see also specific interventions*

- general
- - audiology 95550-06 [1916]
- - diabetes education 95550-14 [1916]
- - dietetics 95550-00 [1916]
- - [exercise physiologist 95550-15 \[1916\]](#)
- - [lactation consultant 95550-16 \[1916\]](#)
- - occupational therapy 95550-02 [1916]
- - orthoptics 95550-07 [1916]
- - orthotics 95550-08 [1916]
- - pharmacy 95550-09 [1916]
- - physiotherapy 95550-03 [1916]
- - podiatry 95550-04 [1916]
- - prosthetics 95550-08 [1916]
- - psychology 95550-10 [1916]
- - social work 95550-01 [1916]
- - specified NEC 95550-11 [1916]
- - speech pathology 95550-05 [1916]
- - spiritual care 95550-12 [1916]

Intervention

- allied health — *see also specific interventions*
- - general
- - - audiology 95550-06 [1916]
- - - diabetes education 95550-14 [1916]
- - - dietetics 95550-00 [1916]
- - - [exercise physiologist 95550-15 \[1916\]](#)
- - - [lactation consultant 95550-16 \[1916\]](#)
- - - occupational therapy 95550-02 [1916]
- - - orthoptics 95550-07 [1916]
- - - orthotics 95550-08 [1916]
- - - pharmacy 95550-09 [1916]
- - - physiotherapy 95550-03 [1916]
- - - podiatry 95550-04 [1916]
- - - prosthetics 95550-08 [1916]
- - - psychology 95550-10 [1916]
- - - social work 95550-01 [1916]
- - - specified NEC 95550-11 [1916]
- - - speech pathology 95550-05 [1916]
- - - spiritual care 95550-12 [1916]

Australian Coding Standards

ACS 0032 – no changes



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

Anaphylaxis and Anaphylactic Shock

Introduction/Rationale:

This addenda proposal is the result of a public submission (PS 9/08) regarding anaphylaxis and anaphylactic shock as distinct clinical entities. The public submission was specifically regarding T88.6 *Anaphylactic shock due to adverse effect of correct drug or medicament properly administered*, however it was identified that anaphylaxis codes across ICD-10-AM also required reviewing.

The terms *anaphylaxis* and *anaphylactic shock* are often used interchangeably in research and documentation, contributing to the difficulty in classifying these conditions.

Research indicates that anaphylaxis and anaphylactic shock are part of a continuum. Anaphylaxis is a serious and potentially life-threatening reaction to a trigger such as an allergy. The clinical manifestations of mild anaphylaxis may rapidly progress to a more severe anaphylaxis and lead to upper airway obstruction, respiratory failure, and circulatory shock (that is, anaphylactic shock).

Symptoms of anaphylaxis (before progression to anaphylactic shock) include:

- skin reactions such as hives, flushed skin, or pale skin
- suddenly feeling too warm
- difficulty swallowing
- nausea, vomiting, or diarrhoea
- abdominal pain
- a weak and rapid pulse
- runny nose and sneezing
- swollen tongue or lips
- wheezing or difficulty breathing
- tingling hands, feet, mouth, or scalp

Symptoms of anaphylactic shock include:

- struggling to breathe
- dizziness
- confusion
- sudden feeling of weakness
- loss of consciousness

Chapter 19 Injury, poisoning and certain other consequences of external causes (S00–T98)

Currently, ICD-10-AM classifies anaphylaxis (NOS) as *anaphylactic shock*. Since not all patients with an anaphylactic reaction progress to anaphylactic shock, ACCD proposes amendments to differentiate these clinical entities.

Chapter 20 External causes of morbidity and mortality (U50–U73, U90, V00–Y98)

Some of the more common allergens causing anaphylaxis include:

- foods – including nuts, milk, fish, shellfish, eggs and some fruits
- medicament or drugs – including anaesthesia and contrast agent
- insect stings – particularly wasp and bee stings
- latex

In some cases, there's no obvious trigger. This is known as idiopathic anaphylaxis.

Due to the limited external cause codes for allergens causing reactions including anaphylaxis, ACCD proposes the addition of a new category Y37 *Exposure to or contact with allergens* to better classify allergic reactions.

After the December 2017 meeting feedback the proposal has been revised in line with CCAG comments, to amend the code title, but do not expand the codes.

ACCD PROPOSAL

Tabular List

LIST OF THREE-CHARACTER CATEGORIES

...

EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, U90, V00–Y98)

...

Legal intervention and operations of war (Y35–Y36)

Y35 Legal intervention
Y36 Operations of war

[Exposure to or contact with allergens \(Y37\)](#)

[Y37](#) [Exposure to or contact with allergens](#)

Complications of medical and surgical care (Y40–Y84)

Drugs, medicaments and biological substances causing adverse effects in therapeutic use (Y40–Y59)

Y40 Systemic antibiotics

...

J30 Vasomotor and allergic rhinitis

...

J30.1 Allergic rhinitis due to pollen
Allergy NOS due to pollen
Hay fever
Pollinosis

[Use additional external cause code \(Y37.11\) to identify allergen.](#)

J30.2 Other seasonal allergic rhinitis

[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

J30.3 Other allergic rhinitis
Perennial allergic rhinitis
[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

J30.4 Allergic rhinitis, unspecified
[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

...

J45 Asthma

▼ 1002

Excludes acute severe asthma (J46)
chronic asthmatic (obstructive) bronchitis (J44.-)
chronic obstructive asthma (J44.-)
eosinophilic asthma (J82)
lung diseases due to external agents
(J60–J70)
status asthmaticus (J46)

J45.0 Predominantly allergic asthma
Allergic:
• bronchitis NOS
• rhinitis with asthma
Atopic asthma
Extrinsic allergic asthma
Hay fever with asthma
[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

...

L23 Allergic contact dermatitis

Includes: allergic contact eczema

Excludes: allergy NOS (T78.4)
dermatitis (of):
• contact NOS (L25.9)
• diaper [napkin] (L22)
• due to substances taken internally (L27.-)
• eyelid (H01.1)
• irritant contact (L24.-)
• NOS (L30.9)
• perioral (L71.0)
eczema of external ear (H60.5)
radiation-related disorders of the skin and subcutaneous tissue (L55–L59)

[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

...

L50 Urticaria

Excludes: allergic contact dermatitis (L23.-)
angioneurotic oedema (T78.3)
hereditary angio-oedema (D84.1)
Quincke's oedema (T78.3)
urticaria:
• giant (T78.3)
• neonatorum (P83.8)
• papulosa (L28.2)
• pigmentosa (Q82.2)
• serum (T80.6)
• solar (L56.3)

L50.0 Allergic urticaria
[Use additional external cause code \(Y37.-\) to identify allergen, if known.](#)

...

R57 Shock, not elsewhere classified

Excludes: shock (due to):

- anaesthesia (T88.2)
- anaphylactic (due to):
 - adverse: [food reaction \(T78.0\)](#)
 - [effect of correct drug or medicament properly administered \(T88.6\)](#)
 - [food reaction \(T78.0\)](#)
- NOS (T78.2)
- serum (T80.5)
- complicating or following abortion or ectopic or molar pregnancy (O00–O07, O08.3)
- electric (T75.4)
- lightning (T75.0)
- obstetric (O75.1)
- postprocedural (T81.1)
- psychic (F43.0)
- traumatic (T79.4)
- toxic shock syndrome (A48.3)

R57.0 Cardiogenic shock

...

T61 Toxic effect of noxious substances eaten as seafood

Excludes: allergic reaction to food, such as:

- [anaphylaxis and](#) anaphylactic shock due to adverse food reaction (T78.0)
- dermatitis (L23.6, L25.4, L27.2)
- gastroenteritis (noninfective) (K52.-)
- bacterial food-borne intoxications (A05.-)
- toxic effect of food contaminants, such as:
 - aflatoxin and other mycotoxins (T64)
 - cyanides (T65.0)
 - hydrogen cyanide (T57.3)
 - mercury (T56.1)

T62 Toxic effect of other noxious substances eaten as food

Excludes: allergic reaction to food, such as:

- [anaphylaxis and](#) anaphylactic shock due to adverse food reaction (T78.0)
- dermatitis (L23.6, L25.4, L27.2)
- gastroenteritis (noninfective) (K52.-)
- bacterial food-borne intoxications (A05.-)
- toxic effect of food contaminants, such as:
 - aflatoxin and other mycotoxins (T64)
 - cyanides (T65.0)
 - hydrogen cyanide (T57.3)
 - mercury (T56.1)

...

T63 Toxic effect of contact with venomous animals

▼ 1923

Use additional code if applicable, to identify reaction such as:

- allergic reaction NOS (T78.4)
- anaphylaxis [and anaphylactic shock](#) (T78.2)
- urticaria (L50.0, T78.3)

...

T78**Adverse effects, not elsewhere classified**

Excludes: complications of surgical and medical care NEC (T80–T88)

T78.0
▽ 2115

Anaphylaxis and anaphylactic shock due to adverse food reaction

Use additional external cause code (Y37.1-Y37.5, Y37.8, Y37.9) to identify allergen, if known.

T78.1
▽ 2115

Other adverse food reactions, not elsewhere classified

Excludes: bacterial food-borne intoxications (A05.-)
dermatitis due to food:
• in contact with the skin (L23.6, L24.6, L25.4)
• NOS (L27.2)

T78.2

Anaphylaxis and anaphylactic shock, unspecified

~~Allergic shock~~

~~Anaphylactic reaction~~

NOS

~~Anaphylaxis~~

Excludes: anaphylaxis and anaphylactic shock due to:

- ~~adverse effect of correct medicinal substance properly administered (T88.6)~~
- ~~adverse food reaction (T78.0)~~
- ~~serum (T80.5)~~

• adverse:

- effect of correct medicinal substance properly administered (T88.6)
- food reaction (T78.0)
- serum reaction (T80.5)

Use additional external cause code (Y37.-) to identify allergen, if known.

T78.3

Angioneurotic oedema

Giant urticaria

Quincke's oedema

Excludes: urticaria:
• NOS (L50.9)
• serum (T80.6)

T78.4
▽ 2004

Allergy, unspecified

Allergic reaction NOS

Hypersensitivity NOS

Idiosyncrasy NOS

Excludes: allergic reaction NOS to correct medicinal substance properly administered (T88.7)
specified types of allergic reaction such as:
• allergic gastroenteritis and colitis (K52.2)
• dermatitis (L23–L25, L27.-)
• hay fever (J30.1)

T78.8

Other adverse effects, not elsewhere classified

...

T80**Complications following infusion, transfusion and therapeutic injection**

...

T80.5

Anaphylaxis and anaphylactic shock due to serum

Antivenom

Excludes: ~~shock:~~

- ~~allergic reaction NOS (T78.2)~~
- ~~anaphylaxis and anaphylactic shock:~~
 - ~~due to adverse: effect of correct medicinal substance properly administered (T88.6)~~
 - effect of correct medicinal substance properly administered (T88.6)

- [food reaction \(T78.0\)](#)
- [serum reaction \(T80.5\)](#)
- NOS (T78.2)

....

T88 Other complications of surgical and medical care, not elsewhere classified

...

T88.1 Other complications following immunisation, not elsewhere classified
Rash following immunisation

Excludes: [anaphylaxis and](#) anaphylactic shock due to serum (T80.5)
other serum reactions (T80.6)
postimmunisation:
• arthropathy (M02.2-)
• encephalitis (G04.0)

T88.6 [Anaphylaxis and](#) anaphylactic shock due to adverse effect of correct drug or medicament properly administered

▽ 2115 **Excludes:** [anaphylaxis and](#) anaphylactic shock due to serum (T80.5)
[Use additional external cause code \(Chapter 20\) to identify drug or medicament, if known.](#)

T88.7 Unspecified adverse effect of drug or medicament

~~Adverse effect~~

~~Allergic reaction~~

~~Hypersensitivity~~

~~Idiosyncrasy~~

Drug:

- [allergic reaction NOS](#)
- hypersensitivity NOS
- [idiosyncratic reaction NOS](#)
- reaction NOS

~~(of)(to) correct drug or
medicament properly
administered~~

Excludes: specified adverse effects of drugs and medicaments (A00–R99, T80–T88.6-, T88.8)

EXPOSURE TO ANIMATE MECHANICAL FORCES

(W50–W64)

Excludes: [allergen, allergic reaction \(Y37.6\)](#)
bites, venomous (X20–X29)
stings (venomous) (X20–X29)

...

CONTACT WITH VENOMOUS ANIMALS AND PLANTS

(X20–X29)

▽ 1923

Includes: chemical released by:

- animal
- insect

release of venom through fangs, hairs, spines, tentacles and other venom apparatus
venomous bites and stings

Excludes: [allergen, allergic reaction \(Y37.6\)](#)
ingestion of poisonous animals or plants (X49)

...

ACCIDENTAL POISONING BY AND EXPOSURE TO NOXIOUS SUBSTANCES

(X40–X49)

▽ 1901, 1903

Includes: accidental overdose of drug, wrong drug given or taken in error, and drug taken inadvertently
accidents in the use of drugs, medicaments and biological substances in medical and surgical procedures

Note: For list of specific drugs and other substances classified under the three character categories, see Table of drugs and chemicals in Alphabetic Index. Evidence of alcohol involvement in combination with substances specified below may be identified by using the supplementary codes Y90–Y91.

Excludes: administration with suicidal or homicidal intent, or intent to harm, or in other circumstances classifiable to X60–X69, X85–X90, Y10–Y19
[allergen, allergic reaction \(Y37.-\)](#)
correct drug properly administered in therapeutic or prophylactic dosage as the cause of any adverse effect (Y40–Y59)

CHAPTER 20

EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, U90, V00–Y98)

...

Y35–Y36 Legal intervention and operations of war
[Y37](#) [Exposure to or contact with allergens](#)
Y40–Y84 Complications of medical and surgical care

...

LEGAL INTERVENTION AND OPERATIONS OF WAR (Y35–Y36)

...

[EXPOSURE TO OR CONTACT WITH ALLERGENS \(Y37\)](#)

★ [Y37](#) [Exposure to or contact with allergens](#)

★ [Y37.0](#) [Allergy to fruit, grains, nuts, seeds and vegetables](#)

★ [Y37.00](#) [Allergy to fruit and vegetables, unspecified](#)

★ [Y37.01](#) [Allergy to tree nuts](#)

★ [Y37.02](#) [Allergy to legumes \[ground nuts\]](#)

★ [Y37.03](#) [Allergy to nuts, not elsewhere classified](#)

★ [Y37.04](#) [Allergy to sesame seed \(oil\)](#)

★ [Y37.05](#) [Allergy to seeds, not elsewhere classified](#)

★ [Y37.06](#) [Allergy to berries](#)

- ✧ [Y37.07](#) [Allergy to grains containing gluten](#)
- ✧ [Y37.08](#) [Allergy to grains, not elsewhere classified](#)
- ✧ [Y37.09](#) [Allergy to other fruits and vegetables](#)
- ✧ **[Y37.1](#)** **[Allergy to natural flora, not elsewhere classified](#)**
Excludes: [fruit, grains, nuts, seeds and vegetables \(Y37.0-\)](#)
- ✧ [Y37.10](#) [Allergy to natural flora, unspecified](#)
- ✧ [Y37.11](#) [Allergy to pollen](#)
- ✧ [Y37.12](#) [Allergy to moulds](#)
- ✧ [Y37.19](#) [Allergy to other natural flora](#)
- ✧ **[Y37.2](#)** **[Allergy to seafood](#)**
- ✧ [Y37.20](#) [Allergy to seafood, unspecified](#)
- ✧ [Y37.21](#) [Allergy to shellfish, crustaceans](#)
- ✧ [Y37.22](#) [Allergy to shellfish, mollusks](#)
- ✧ [Y37.23](#) [Allergy to fish](#)
- ✧ [Y37.29](#) [Allergy to other seafood](#)
[Shellfish NOS](#)
- ✧ **[Y37.3](#)** **[Allergy to dairy products](#)**
- ✧ [Y37.30](#) [Allergy to dairy products, unspecified](#)
[Allergy to cow's milk and products](#)
- ✧ [Y37.31](#) [Allergy to goat's milk and products](#)
- ✧ [Y37.32](#) [Allergy to sheep's milk and products](#)
- ✧ [Y37.39](#) [Allergy to other dairy products](#)
- ✧ [Y37.4](#) [Allergy to eggs](#)
- ✧ [Y37.5](#) [Allergy to food additives](#)
- ✧ **[Y37.6](#)** **[Allergy to animals](#)**
Includes: [animal:](#)
 - [dander](#)
 - [hair or fur](#)
 - [saliva](#)

- [★Y37.60 Allergy to animal, unspecified](#)
- [★Y37.61 Allergy to bees](#)
- [★Y37.62 Allergy to birds](#)
- [★Y37.63 Allergy to cats](#)
- [★Y37.64 Allergy to dogs](#)
- [★Y37.69 Allergy to other animal](#)
- [★Y37.7 Allergy to latex](#)
[Rubber](#)
- [★Y37.8 Allergy to other specified allergen](#)
[Food allergy NOS](#)
[Multiple food allergies NOS](#)
- [★Y37.9 Allergy to unspecified allergen](#)

Section I Alphabetic Index

Allergy, allergic (reaction) T78.4

- with

- - asthma J45.0

- - contact dermatitis (*see also Dermatitis/due to*) L23.-

- - rhinitis (*see also Rhinitis/allergic*) J30.-

- - urticaria L50.0

~~- airborne substance (rhinitis) NEC J30.3~~

~~- animal (dander) (epidermal) (hair) (rhinitis) J30.3~~

- biological — *see Allergy/drug, medicament and biological*

- colitis K52.2

~~- dander (animal) (rhinitis) J30.3~~

~~- dandruff (rhinitis) J30.3~~

- dermatitis (*see also Dermatitis/due to*) L23.9

- desensitisation (to) NEC Z51.60

- - animal Z51.64

- - dust mite Z51.63

- - pollen Z51.62

- - specified allergen Z51.69

- - stinging insect Z51.61

- drug, medicament and biological (any) (correct medicinal substance properly administered) (external) (internal) T88.7

- - wrong substance given or taken NEC T50.9

- - - specified drug or substance — *see Table of drugs and chemicals*

~~- dust (house) (rhinitis) (stock) J30.3~~

~~- - with asthma J45.0~~

- eczema (*see also Dermatitis/due to*) L23.9

~~- epidermal (animal) (rhinitis) J30.3~~

~~- feathers (rhinitis) J30.3~~

- food (any) (ingested) NEC T78.1

- - [anaphylaxis and](#) anaphylactic shock T78.0

- - dietary counselling and surveillance Z71.3

- - in contact with skin L23.6

- gastrointestinal K52.2

~~- grass (hay fever) (pollen) J30.4~~

~~- - asthma J45.0~~

~~- hair (animal) (rhinitis) J30.3~~

- horse serum — *see Allergy/serum*

- ~~-inhalant (rhinitis) J30.3~~
- ~~-kapok (rhinitis) J30.3~~
- medicine — see *Allergy/drug, medicament and biological*
- nasal, seasonal due to pollen J30.1
- ~~-pollen (any) (hay fever) J30.4~~
- ~~-asthma J45.0~~
- ~~-ragweed (hay fever) (pollen) J30.4~~
- ~~-asthma J45.0~~
- ~~-rose (pollen) J30.4~~
- ~~-Senecio jacobae (pollen) J30.4~~
- serum (prophylactic) (therapeutic) T80.6
- - [anaphylaxis and](#) anaphylactic shock T80.5
- shock (anaphylactic) T78.2
- - due to
- - - adverse effect of correct medicinal substance properly administered T88.6
- - - serum or immunisation T80.5
- ~~-tree (any) (hay fever) (pollen) J30.4~~
- ~~-asthma J45.0~~
- upper respiratory J30.4
- vaccine — see *Allergy/serum*
- ...

Anaphylactic shock or reaction [T78.2](#) — see ~~Shock/anaphylactic~~

- due to
- - drug or medicament (adverse effect) T88.6
- - food reaction T78.0
- - serum T80.5

Anaphylactoid

- shock or reaction — see ~~Shock/anaphylactic~~ [Anaphylaxis](#)
- syndrome of pregnancy O88.1

Anaphylaxis T78.2

- due to
- - drug or medicament (adverse effect) T88.6
- - food reaction T78.0
- - serum T80.5

...

Complication(s) (from) (of)

- ...
- transfusion (blood) (lymphocytes) (plasma) T80.9
- - embolism T80.1
- - - air T80.0
- - haemolysis T80.8
- - incompatibility reaction (ABO) (blood group) T80.3
- - - Rh (factor) T80.4
- - infection T80.2
- - reaction NEC T80.8
- - sepsis T80.2
- - serum (reaction) T80.6
- ~~- - shock, anaphylactic T80.5~~
- - - [anaphylaxis and anaphylactic shock](#) T80.5
- - shock T80.8
- - thromboembolism, thrombus T80.1
- ...
- vaccination T88.1
- - anaphylaxis [and anaphylactic shock](#) T80.5
- - arthropathy M02.2-
- - cellulitis T88.0
- - encephalitis or encephalomyelitis G04.0
- - infection (general) (local) NEC T88.0
- - meningitis G03.8
- - myelitis G04.0
- - protein sickness T80.6
- - rash T88.1
- - reaction (allergic) T88.1
- - - Herxheimer's [\(anaphylaxis\) \(anaphylactic shock\)](#) T78.2
- - - serum T80.6
- - sepsis, septicaemia T88.0
- - serum intoxication, sickness, rash, or reaction NEC T80.6
- - vaccinia (generalised) (localised) B08.0

Herter-Gee syndrome K90.0
Herxheimer's reaction ([anaphylaxis](#)) ([anaphylactic shock](#)) T78.2
Hesitancy of micturition R39.1

Reaction — see also *Disorder*

- adaption (see also *Reaction/adjustment*) F43.2
- adjustment (anxiety) (conduct disorder) (depressiveness) (distress) (emotional disturbance) F43.2
- - with mutism, elective (adolescent) (child) F94.0
- affective (see also *Disorder/affective*) F39
- allergic (see also *Allergy*) T78.4
- - drug, medicament or biological — see *Allergy/drug*
- - food (any) (ingested) NEC T78.1
- - - dermatitis L27.2
- - serum T80.6
- anaesthesia — see *Anaesthesia/complication or reaction*
- anaphylactic — see ~~Shock/anaphylactic~~ [Anaphylaxis](#)
- antitoxin (prophylactic) (therapeutic) — see *Complication(s)/vaccination*
- ...
- grief F43.2
- Herxheimer's ([anaphylaxis](#)) ([anaphylactic shock](#)) T78.2
- hyperkinetic — see *Hyperkinesia*
- ...
- serological for syphilis — see *Serology for syphilis*
- serum (prophylactic) (therapeutic) T80.6
- ~~— immediate T80.5~~
- - [anaphylaxis and anaphylactic shock T80.5](#)
- situational (see also *Reaction/adjustment*) F43.2

Serum

- allergy, allergic reaction T80.6
- ~~— shock T80.5~~
- - [anaphylaxis and anaphylactic shock T80.5](#)
- complication or reaction NEC T80.6

...
Shock R57.9

- ...
- anaesthetic
- - correct substance properly administered T88.2
- - - [anaphylactic T88.6](#)
- - overdose or wrong substance given T41.1
- - - specified anaesthetic — see *Table of drugs and chemicals*
- anaphylactic T78.2
- - chemical — see *Table of drugs and chemicals*
- - correct medicinal substance properly administered T88.6
- - drug or medicinal substance
- - - correct substance properly administered T88.6
- - - overdose or wrong substance given or taken T50.9
- - - - specified drug — see *Table of drugs and chemicals*
- - following sting(s) T63.9
- - - arthropod NEC T63.4
- - - bee T63.4
- - - hornet T63.4
- - - insect NEC T63.4
- - - jelly-fish T63.6
- - - marine animal NEC T63.6
- - - scorpion T63.2
- - - sea-anemone T63.6
- - - shellfish T63.6
- - - starfish T63.6
- - - wasp T63.4
- - food (any) (ingested) T78.0
- - immunisation T80.5
- - serum T80.5
- ~~— anaphylactoid — see Shock/anaphylactic~~
- birth, fetus or newborn NEC P96.89
- ...
- toxic, syndrome A48.3
- transfusion [T80.5](#) — see *Complication(s)/transfusion*

- traumatic (delayed) (immediate) T79.4

...

Section II External Causes of Injury

Alcohol

...

Allergen, allergic reaction (to) Y37.9

- almonds Y37.01
- animals NEC Y37.60
- - bees Y37.61
- - birds Y37.62
- - cats Y37.63
- - dogs Y37.64
- - specified NEC Y37.69
- avocado Y37.09
- banana Y37.09
- barley Y37.07
- bees Y37.61
- berries Y37.06
- birds (excreta) (feather) Y37.62
- brazil nut Y37.01
- cashew nut Y37.01
- cats (dander) (fur) (hair) (saliva) Y37.63
- chestnut Y37.01
- chickpea Y37.02
- clam Y37.22
- coconut Y37.05
- cows NEC Y37.69
- - milk (and products) Y37.30
- crab Y37.21
- dairy (products) NEC Y37.30
- - cow's milk Y37.30
- - goat's milk Y37.31
- - sheep's milk Y37.32
- - specified NEC Y37.39
- dogs (dander) (fur) (hair) (saliva) Y37.64
- dust Y37.8
- - mites Y37.69
- eggs Y37.4
- fish Y37.23
- flowers Y37.19
- food NEC Y37.8
- - additive(s) (colour) (flavour) (preservative) Y37.5
- fruit NEC Y37.00
- - berries Y37.06
- - specified NEC Y37.09
- gluten Y37.07
- goat NEC Y37.69
- - milk (and products) Y37.31
- grain NEC Y37.08
- - containing gluten Y37.07
- grass (seeds) Y37.19
- ground nuts Y37.02
- hazelnut Y37.01
- horse Y37.69
- kiwi fruit Y37.09
- latex Y37.7
- legumes Y37.02
- lentils Y37.02
- lobster Y37.21
- macadamia Y37.01
- milk (products) (cow) Y37.30
- - goat Y37.31
- - sheep Y37.32
- - specified NEC Y37.39
- monosodium glutamate Y37.5
- mould(s) Y37.12
- mussels Y37.22
- natural flora NEC Y37.10
- - mould(s) Y37.12

- - [pollen Y37.11](#)
- - [specified NEC Y37.19](#)
- [nuts NEC Y37.03](#)
- - [ground \(legumes\) Y37.02](#)
- - [tree Y37.01](#)
- [oats Y37.07](#)
- [oysters Y37.22](#)
- [peanut Y37.02](#)
- [peas Y37.02](#)
- [pecan Y37.01](#)
- [pine nut Y37.01](#)
- [pistachio Y37.01](#)
- [pollen Y37.11](#)
- [prawn Y37.21](#)
- [rubber Y37.7](#)
- [rye Y37.07](#)
- [scallop Y37.22](#)
- [seafood NEC Y37.20](#)
- - [fish Y37.23](#)
- - [shellfish Y37.29](#)
- - - [crustaceans Y37.21](#)
- - - [mollusks Y37.22](#)
- - [specified NEC Y37.29](#)
- [seed NEC Y37.05](#)
- - [sesame \(oil\) Y37.04](#)
- [sesame seed \(oil\) Y37.04](#)
- [sheep NEC Y37.69](#)
- - [milk \(and products\) Y37.32](#)
- [shellfish NEC Y37.29](#)
- - [crustacean\(s\) Y37.21](#)
- - [mollusk\(s\) Y37.22](#)
- [shrimp Y37.21](#)
- [specified NEC Y37.8](#)
- [spelt Y37.07](#)
- [sulphides Y37.5](#)
- [tomato Y37.09](#)
- [tree nuts Y37.01](#)
- [vegetables NEC Y37.00](#)
- - [specified NEC Y37.09](#)
- [walnut Y37.01](#)
- [wheat Y37.07](#)

Alpine sickness W94

Altitude sickness W94

Anaphylactic shock, ~~anaphylaxis (due to ingestion of food)~~ (see also [Table of drugs and chemicals](#)) ~~Y57.9~~ — see also [Allergen, allergic reaction](#)

- due to drug and chemicals — see [Table of drugs and chemicals](#)

Anaphylaxis — see also [Allergen, allergic reaction](#)

- due to drug and chemicals — see [Table of drugs and chemicals](#)

Andes disease W94

...

Effect(s) (adverse) (of)

- air pressure (any) W94

- - due to hyperbaric oxygen therapy Y84.8

- cold, excessive (exposure to) (see also [Exposure/cold](#)) X31

- food ingestion ([allergic reaction](#)) (anaphylactic shock) (anaphylaxis) ~~Y57.9~~ — see [Allergen, allergic reaction](#)

...

Exposure (to)

- [allergen](#) — see [Allergen, allergic reaction](#)

- cold (accidental) (excessive) (extreme) (natural) (place) X31

...

- flames (see also [Exposure/fire](#)) X09

- food

- - ingested ([allergic reaction](#)) (anaphylactic shock) (anaphylaxis) — see [Allergen, allergic reaction](#) ~~Y57.9~~

...

Food (any type)

- in

- - air passage (with asphyxia, obstruction or suffocation) W79

- - alimentary tract causing asphyxia (due to compression of trachea) W79

- ingestion, causing adverse effect ([allergic reaction](#)) (anaphylactic shock) (anaphylaxis) — see [Allergen, allergic reaction](#) ~~Y57.9~~

...

Reaction

- abnormal, to medical procedure (*see also Complication(s)/by type of procedure*) Y84.9
- - with unintentional event (*see also Unintentional event(s)*) Y69
- - biologicals — *see Table of drugs and chemicals*
- - drugs — *see Table of drugs and chemicals*
- - vaccine — *see Table of drugs and chemicals*
- allergic, to ingestion of food (anaphylactic shock) (anaphylaxis) — *see Allergen, allergic reaction* Y57.9

Australian Coding Standards

TABLE OF CONTENTS

...

20. External causes of morbidity

- 2001 External cause code use and sequencing
- ~~2004 Allergic reaction NOS~~
- 2005 Poisonings and injuries – indication of intent
- 2008 Perpetrator of assault, abuse and neglect
- 2009 Mode of pedestrian conveyance

...

1923 CONTACT WITH VENOMOUS/NONVENOMOUS CREATURES

...

Adverse effects from antivenom

Clinical coders should confer with the clinician to clarify any evidence of adverse reaction to antivenom.

Indicators suggesting adverse effects from antivenom include:

- Signs and symptoms of acute allergic reactions such as the occurrence of a rash, shortness of breath/wheeze, urticaria, abdominal pain, vomiting and/or diarrhoea, hypotension and cardiac arrest
- Evidence of the treatment of acute allergic reactions by the injection of adrenaline, antihistamines, corticosteroids, fluids and/or colloids/crystalloids
- The use of multiple ampoules of antivenom
- Pre-existing history of venom and or antivenom allergy
- Documentation of the use of adrenaline, antihistamines and/or corticosteroids for treatment of acute allergic reactions after the administration of antivenom.

Note: *Coders should be aware that documentation of the use of these drugs as treatment for acute allergic reactions should be distinguished from their premedicant use prior to administration of antivenom. Premedication with subcutaneous adrenaline is currently recommended prior to the intravenous administration of Australian snake antivenoms. Coders should check with the clinician whether evidence of adrenaline injection was prophylactic prior to antivenom injection or as a treatment for an adverse reaction.*

Anaphylaxis [and anaphylactic shock](#)

[Where Anaphylaxis and anaphylactic shock is](#), ~~when~~ documented as an adverse reaction to administration of antivenom, ~~should be~~ assigned a code from category T80.5 [Anaphylaxis and anaphylactic shock due to serum](#).

...

2004 ~~ALLERGIC REACTION NOS~~

~~Allergic reaction NOS is coded to T78.4 *Allergy, unspecified*. If the causative agent is unknown, the external cause code for Allergic reaction NOS should be X59 *Exposure to unspecified factor*.~~

...

2115 ADMISSION FOR ALLERGEN CHALLENGE

Allergen challenges are performed to monitor the response of a patient to a particular drug, food or other allergen to test for any clinical allergic response. During the challenge the patient is given doses of an allergen and closely observed for a response after each dose.

Drug challenges are necessary when:

- a patient discloses a history of allergy to a particular drug **and**
- treatment with that specific drug is essential **and**
- there is no effective alternative drug.

Allergen challenges are conducted in facilities where resuscitation equipment is available due to the risk of triggering a severe allergic reaction.

Classification

- Assign the appropriate code from Z41.8- *Other procedures for purposes other than remedying health state* as the principal diagnosis where the reason for admission is allergen challenge.
- In addition, assign codes for any allergic manifestation(s) arising from the challenge, following the lead term *Allergy, allergic* in the Alphabetic Index.
- Additional chapter codes can also be assigned where they are required to classify the clinical concept.
- It is not necessary to assign a procedure code for the challenge.

EXAMPLE 1: DRUG CHALLENGE

A patient with a history of severe allergy to penicillin is admitted for a drug challenge with cephalosporin. The challenge results in an urticarial reaction.

Codes:	Z41.81	<i>Drug challenge</i>
	L50.0	<i>Allergic urticaria</i>
	Y40.1	<i>Cephalosporins and other beta-lactam antibiotics</i>
	Y92.24	<i>Place of occurrence, health service area, this facility</i>

EXAMPLE 2: FOOD CHALLENGE

A patient with a sibling with a severe peanut allergy is admitted for a food challenge following a positive peanut allergy skin prick test. An anaphylactic reaction occurs during the challenge.

Codes:	Z41.82	<i>Food challenge</i>
	T78.0	<i>Anaphylaxis and anaphylactic shock due to adverse food reaction</i>
	Y57.9	<i>Drug or medicament, unspecified</i> Y37.02 Allergy to legumes [ground nuts]
	Y92.24	<i>Place of occurrence, health service area, this facility</i>
	Z84.8	<i>Family history of other specified conditions</i>

EXAMPLE 3: FOOD CHALLENGE

A patient with a previously diagnosed severe allergy to fish is admitted for a food challenge following five years avoidance of the allergen in their diet. The challenge results in abdominal pain.

Codes: Z41.82 *Food challenge*
T78.1 *Other adverse food reactions, not elsewhere classified*
R10.4 *Other and unspecified abdominal pain*
~~Y57.9 *Drug or medication, unspecified*~~ [Y37.23 Allergy to fish](#)
Y92.24 *Place of occurrence, health service area, this facility*

Note: Allergen desensitisation (immunotherapy) is different to allergen challenge as it involves the ongoing administration of gradually increasing doses of allergen extracts in order to reduce sensitivity. Allergen desensitisation is assigned a code from Z51.6- *Desensitisation to allergens*.

STANDARDS INDEX

Alcohol

- and medication
- - adverse reaction 1903
- detoxification and rehabilitation 0525
- harmful use 0503
- social/heavy drinker 0503
- use disorder 0503

Allergic reaction ~~2004~~

- antivenom 1923
- snake venom 1923

Allied health interventions 0032

...

Reaction

- adjustment/depressive 0506
- ~~allergic 2004~~
- drug combination 1903
- hypoglycaemic 0401
- insulin 0401

...

Severity of stroke 0604

Shock, ~~septic 0110~~

- [anaphylactic, due to antivenom 1923](#)
- [septic 0110](#)

Shuddering attacks, benign 0631



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Arthritis of spine and ACS 1334

Introduction/Rationale:

This addenda proposal is a result of a public submission (P218), which identified confusion surrounding the information listed under ACS 1334 *Spondylosis/ Spondylolisthesis/ Retrolisthesis*, versus the Alphabetic Index terms. The public submission also highlighted the need for an index entry for ‘facet joint arthritis’.

Research confirms that arthritis of the spine is also known as spondylopathy. ICD-10-AM classifies arthritis of the spine to M46.9- *Inflammatory spondylopathy, unspecified*. Arthrosis or osteoarthritis of the spine is also known as spondylosis. ICD-10-AM correctly classifies both arthrosis and osteoarthritis of spine to M47.9- *Spondylosis, unspecified*. The standard incorrectly states that spondylosis is ‘arthritis of the spine’.

Facet joint arthritis is a degenerative disorder where the thin layer of cartilage covering the joints breaks down, causing inflammation and pain. Clinical advice confirms that facet joint arthritis should be classified as ‘spondylosis’.

ACCD proposes to delete ACS 1334 *Spondylosis/Spondylolisthesis/Retrolisthesis*, as the standard does not provide much guidance, with all information located in the Alphabetic Index and Tabular List.

Alphabetic Index entries will also be added for facet joint arthritis, and retrolisthesis of spine.

ACCD PROPOSAL

Tabular List

M43.1 Spondylolisthesis

~~▽ 1334~~

[0-9]

- M43.10 Spondylolisthesis, multiple sites in spine
- M43.11 Spondylolisthesis, occipito-atlanto-axial region
- M43.12 Spondylolisthesis, cervical region
- ...

M43.2 Other fusion of spine

~~▽ 1334~~

[0-9]

Ankylosis of spinal joint

Excludes: ankylosing spondylitis (M45.0-)
arthrodesis status (Z98.1)
pseudoarthrosis after fusion or arthrodesis (M96.0)

M43.20 Other fusion of spine, multiple sites in spine

...

M47 Spondylosis

~~1334~~

See site code

Includes: arthrosis or osteoarthritis of spine
degeneration of facet joints

...

Alphabetic Index

Arthritis, arthritic (acute) (chronic) (subacute) M13.9-

...

- epidemic erythema A25.1

- [facet joint \(vertebra\)](#) — *see Spondylosis*

- febrile — *see Fever/rheumatic*

...

Retrograde menstruation N92.5

[Retrolisthesis \(vertebra\)](#) M43.2-

Retroperineal — *see condition*

...

Slipped, slipping

- epiphysis M93.9

- - traumatic (old) M93.9

- - - current — *see Fracture/by site*

- - upper femoral (nontraumatic) M93.0

- - - traumatic S72.02

- intervertebral disc — *see Displacement/intervertebral disc*

- ligature, umbilical P51.8

- patella M22.3

- rib M89.88

- sacroiliac joint M53.28

- ulnar nerve, nontraumatic G56.2

- vertebra [\(forward\) \(spondylolisthesis\)](#) NEC ~~(see also Spondylolisthesis)~~ M43.1-

- - [backward \(retrolisthesis\)](#) NEC M43.2-

Australian Coding Standards

TABLE OF CONTENTS

...

13. Musculoskeletal system and connective tissue

...

1330 Slipped disc

~~1334 Spondylosis/spondylolisthesis/retrolisthesis~~

1336 Hypertonia

...

1334 ~~SPONDYLOSIS/SPONDYLOLISTHESIS/RETROLISTHESIS~~

Spondylosis is arthritis of the spine, whereas spondylolisthesis is forward slipping of one vertebral body on another. Retrolisthesis is backward slipping.

Assign:

~~Spondylosis — M47. — Spondylosis~~

~~Spondylolisthesis — M43.1 — Spondylolisthesis~~

~~Retrolisthesis — M43.2 — Other fusion of spine~~

STANDARDS INDEX

...

R

...

Retraining

- bladder 1433

~~Retrolisthesis 1334~~

Revision

- cardiac/vascular procedure 0934

- cerebrospinal fluid drain or shunt 0634

...

S

...

Spinal

- anaesthesia 0031

- cord

- - injury 1915

- - lesion (functional level) 0625; 1915

- fusion 1348

~~Spondylolisthesis 1334~~

~~Spondylosis 1334~~

Spontaneous

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Indexing of artificial sphincters

Introduction/Rationale:

This addenda proposal is the result of an ACCD initiated review of the indexing of artificial bowel and urinary sphincters.

After review, it was found that indexing of insertion of artificial urinary sphincters was inconsistent and amendments are hereby proposed as follows:

ACCD PROPOSAL

Alphabetic Index

Insertion

- ...
- artificial
- - heart, total 96229-00 [608]
- - sphincter
- - - bowel 32220-00 [940]
- - - urinary ~~(see also Insertion/urinary sphincter, artificial) 37387-00 [1113]~~
- ...
- bone
- - conduction hearing 41557-02 [321]
- - growth stimulator 47920-00 [1554]
- bowel sphincter, artificial 32220-00 [940]
- brain wafer, chemotherapy 96201-00 [1920]
- ...
- sphincter, artificial
- - bowel 32220-00 [940]
- - urinary ~~(see also Insertion/urinary sphincter, artificial) 37387-00 [1113]~~
- ...
- urinary sphincter, artificial 37387-00 [1113]
- - cuff
- - - abdominal approach 37384-00 [1113]
- - - perineal approach 37381-00 [1113]
- ...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

ACS 1438 Chronic kidney disease

Introduction/Rationale:

This addenda proposal is a result of a coding query (Q3205) which identified a need to amend ACS 1438 *Chronic kidney disease* regarding assignment of chapter versus supplementary codes for chronic conditions (ie 'U' codes).

Minor amendments are also proposed in line with changes in ACS 0002 *Additional diagnoses*.

ACCD PROPOSAL

Australian Coding Standards

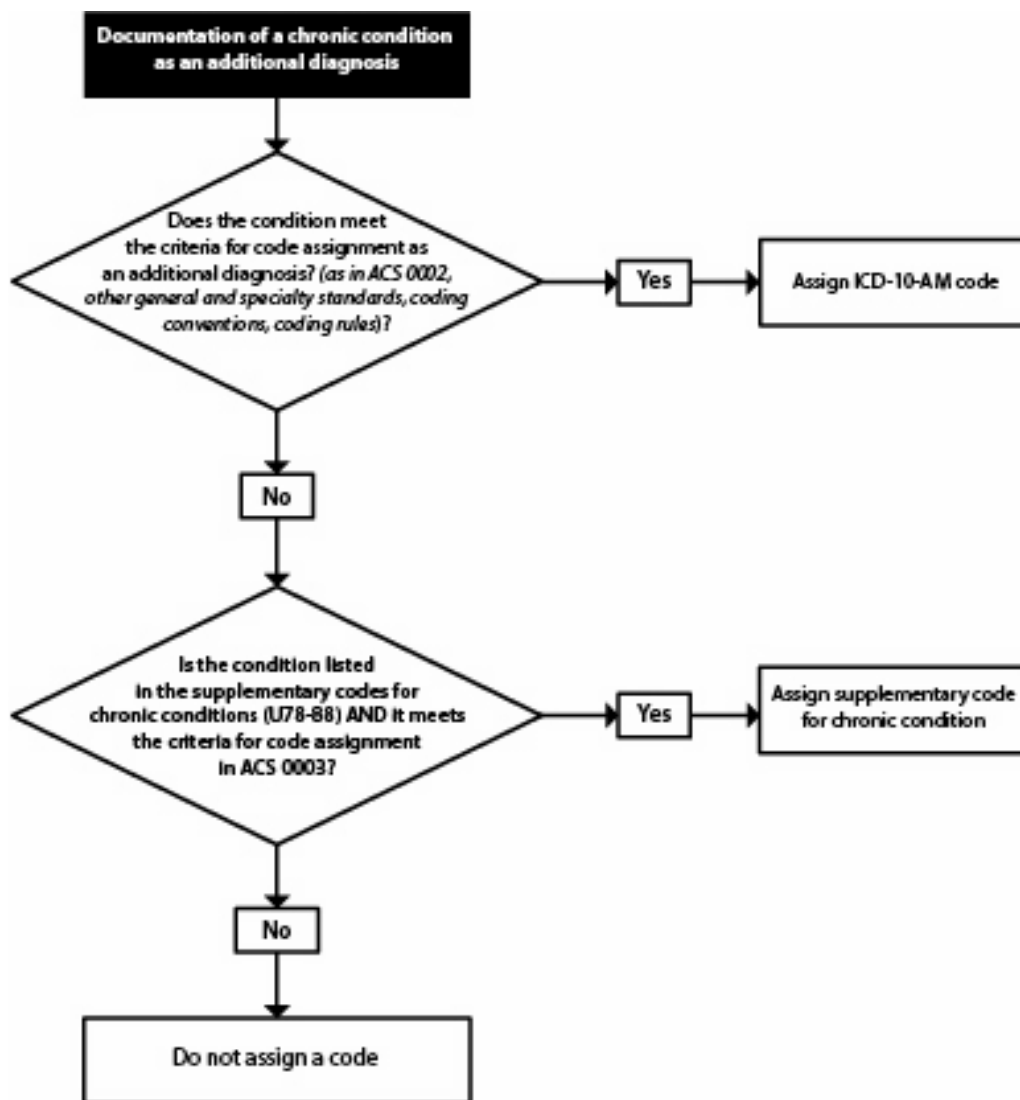
0003 SUPPLEMENTARY CODES FOR CHRONIC CONDITIONS

Codes from U78.- to U88.- are to be assigned for chronic conditions that are present on admission, however the condition does not meet the criteria for coding (as instructed in ACS 0002 *Additional diagnoses* and other general and specialty coding standards, coding conventions, and coding rules). These codes are for temporary use in Australia to generate data which will be utilised to review the coding of additional diagnoses. **The codes are mapped so as not to be included in the grouping for Diagnosis Related Group (DRG) allocation.**

There is a discrete list of chronic conditions represented in the code range U78.- to U88.-. Therefore, not all chronic conditions will be assigned a supplementary code. The supplementary codes for chronic conditions are listed in the ICD-10-AM Alphabetic Index under the pathway *Supplementary/codes for chronic conditions*.

The assignment of codes from U78.- to U88.- does not impact on the other codes that are assigned. Rather, these codes represent conditions that would normally not be included in the coded data (see Figure 1). Codes from U78.- to U88.- should be sequenced after all other ICD-10-AM codes, giving priority to the reporting of the other codes where the number of fields is limited.

Figure 1 – Flowchart of criteria for assignment of U78 to U88 *Supplementary codes for chronic conditions*



CLASSIFICATION

The supplementary codes for chronic conditions are **only to be assigned** where the condition is part of the **current health status** of the patient (see Example 1 and 2). The U codes represent chronic conditions that may be assumed to be current unless there is documentation that indicates otherwise.

The supplementary codes are **not to be assigned**:

- in addition to another chapter code for the same condition (see Example 45)
- for a past history of a condition (see Example 56)
- for an acute condition.

~~Where it is unclear whether a code from U78. to U88. should be assigned, do not assign the code.~~

Note: The specific terms listed in the Alphabetic Index must be followed to inform code assignment. Except where otherwise indicated, only assign codes from this section for

unspecified/NEC/NOS conditions
(eg hypertension NOS) – see Alphabetic Index *Supplementary/codes for chronic conditions*.

Note: ACHI codes are not included in the following examples.

EXAMPLE 1:

A 14 year old patient with cerebral palsy (CP) is admitted for correction of bat ear. ~~The CP does not meet the criteria for coding in the episode of care (as in ACS 0002 Additional diagnoses and other general and specialty coding standards, coding conventions, and coding rules). Assign the supplementary chronic condition code U80.4 Cerebral palsy.~~

Codes: Q17.5 Prominent ear
 U80.4 Cerebral palsy

In this example, the cerebral palsy does not meet the criteria for coding in ACS 0002 Additional diagnoses or other general and specialty coding standards, coding conventions, and coding rules.

EXAMPLE 2:

An 80 year old patient with ischaemic heart disease (IHD), a past history of coronary artery bypass graft (CABG) performed five years previously, hypertension (HT), and rheumatoid arthritis (RA) of the fingers, is admitted for removal of ~~multiple skin lesions~~ a basal cell carcinoma (BCC) of the forearm under local anaesthetic. ~~The IHD, HT and RA do not meet the criteria for coding in the episode of care (as in ACS 0002 Additional diagnoses and other general and specialty coding standards, coding conventions, and coding rules). Assign the supplementary chronic condition codes U82.1 Ischaemic heart disease, U82.3 Hypertension and U86.1 Rheumatoid arthritis.~~

Codes: C44.6 Other malignant neoplasms of skin, skin of upper limb, including shoulder
 M8090/3 Basal cell carcinoma NOS
 U82.1 Ischaemic heart disease
 U82.3 Hypertension
 U86.1 Rheumatoid arthritis

In this example, the IHD, HT and RA do not meet the criteria for coding in ACS 0002 Additional diagnoses or other general and specialty coding standards, coding conventions, and coding rules.

EXAMPLE 3:

A 68 year old patient with Parkinson's disease that is currently controlled by medication is admitted with chest pain for a coronary angiogram. The angiogram demonstrated normal coronary arteries. ~~The Parkinson's disease does not meet the criteria for coding in the episode of care (as in ACS 0002 Additional diagnoses and other general and specialty coding standards, coding conventions, and coding rules). Assign the supplementary chronic condition code U80.1 Parkinson's disease.~~

Codes: R07.4 Chest pain, unspecified
 U80.1 Parkinson's disease

In this example, the Parkinson's disease does not meet the criteria for coding in ACS 0002 Additional diagnoses or other general and specialty coding standards, coding conventions, and coding rules.

EXAMPLE 4:

Patient was admitted with ESRF (end-stage renal failure) for the creation of an AV fistula (using a Gore-Tex prosthesis) of the forearm for haemodialysis, under general anaesthesia. The intervention was uneventful and the patient was discharged on the same day.

Codes: Z49.0 *Preparatory care for dialysis*
 U87.1 *Chronic kidney disease, stage 3–5*

In this example, the CKD does not meet the criteria for coding in ACS 0002 *Additional diagnoses* or other general and specialty coding standards, coding conventions, and coding rules. The creation of the AV fistula is to obtain vascular access for haemodialysis, and is not a therapeutic treatment for CKD, and thus cannot be used as a criterion for assignment of a code from category N18 *Chronic kidney disease*.

EXAMPLE 4~~5~~:

A 49 year old patient with multiple sclerosis (MS) is admitted for an open reduction of a fractured tibia and fibula following a fall. The patient required additional clinical care and allied health intervention due to the MS. ~~Therefore the MS meets the criteria for coding in the episode of care (as in ACS 0002 *Additional diagnoses* and other general and specialty coding standards, coding conventions, and coding rules) and G35 *Multiple sclerosis* is assigned. Do not assign a supplementary chronic condition code for the MS.~~

Codes: S82.21 *Fracture of shaft of tibia with fracture of fibula (any part)*
 W19 *Unspecified fall*
 Y92.9 *Unspecified place of occurrence*
 U73.9 *Unspecified activity*
 G35 *Multiple sclerosis*

In this example, the MS meets the criteria for coding in ACS 0002 *Additional diagnoses* and other general and specialty coding standards, coding conventions, and coding rules, and G35 *Multiple sclerosis* is assigned. **Do not assign** a supplementary chronic condition code for the MS.

EXAMPLE 5~~6~~:

A 45 year old patient with a past history of asthma as a child is admitted for a laparoscopic cholecystectomy for chronic cholecystitis. ~~The asthma does not meet the criteria for coding in the episode of care (as in ACS 0002 *Additional diagnoses* and other general and specialty coding standards, coding conventions, and coding rules). The asthma also does not meet the criteria for supplementary coding for chronic conditions. Do not assign a supplementary chronic condition code for the asthma.~~

Code: K81.1 *Chronic cholecystitis*

In this example, the asthma does not meet the criteria for coding in ACS 0002 *Additional diagnoses* or other general and specialty coding standards, coding conventions, and coding rules. The asthma also does not meet the criteria for supplementary coding for chronic conditions.

Do not assign a supplementary chronic condition code for the asthma.

Note: Supplementary codes for chronic condition are not included in any of the examples provided throughout ~~ICD-10-AM/ACHI/~~the ACS.

1438 CHRONIC KIDNEY DISEASE

DEFINITION

Chronic kidney disease (CKD) is the term used to describe underlying kidney damage and/or reduced kidney function [that is present for three months or more](#), resulting from a variety of conditions.

Common causes of chronic kidney disease include:

- glomerulonephritis
- diabetes
- hypertension
- renovascular disease – eg atherosclerosis, vasculitis
- drugs/toxins eg lithium, analgesics, lead
- malignancy/myeloma
- genetic kidney disease eg polycystic kidney disease
- obstructive uropathy – eg [renal](#) calculi.

In a clinical setting, a patient is diagnosed with CKD if they meet either of the following criteria:

- Kidney damage for 3 months or more, as defined by structural or functional abnormalities of the kidney, with or without decreased [estimated or measured](#) glomerular filtration rate ([eGFR/GFR](#)), manifest by **either**:
 - ~~micro~~albuminuria or proteinuria
 - ~~glomerular~~ haematuria ([after exclusion of other urological causes](#))
 - [structural abnormalities \(eg abnormal kidney ultrasound result\)](#)
 - pathological abnormalities (eg abnormal kidney biopsy)
 - ~~transplanted kidney markers of kidney damage, including abnormalities in the composition of the blood or urine, or abnormalities in imaging tests such as size disparities and scarring, or cysts.~~
 - ~~Glomerular filtration rate (GFR) < 60 mL/min/1.73m² for 3 months or more, with or without kidney damage.~~

[or](#)

- [an estimated or measured glomerular filtration rate \(eGFR/GFR\) < 60 mL/min/1.73m² that is present for 3 months or more with or without evidence of kidney damage.](#)

[\(Kidney Health Australia 2018\)](#)

STAGES OF [CHRONIC KIDNEY FUNCTION REDUCTION DISEASE \(CKD\)](#)

STAGE	DESCRIPTION	GFR (ML/MIN/1.73M ²)
1	Kidney damage with normal or increased GFR kidney function	≥ 90
2	Kidney damage with mild decreased GFR loss of kidney function	60–89
3 (3a/3b)	Moderate decreased GFR loss of kidney function	30–59

4	Severe decreased GFR <u>loss of kidney function</u>	15–29
5	Kidney failure	< 15

(National Kidney Foundation ~~2002~~2017)

Note: ~~Prior to the defining of chronic kidney disease, the term 'chronic renal failure' described both 'failing' and 'failed' kidneys and no further description was required when classifying.~~ Under the ~~new~~ definition of chronic kidney disease, 'kidney failure' in a chronic context, is not described until the kidneys have ceased to function, that is, failed. This is CKD stage 5, as measured by the estimated or measured glomerular filtration rate (eGFR/GFR) or the requirement for ongoing kidney replacement therapy, or by documentation of 'end-stage' kidney failure. Therefore, 'failure' status must be validated by documentation and/or eGFR/GFR (eGFR)-level before assigning codes qualified by 'with kidney failure', for example, I12.0 *Hypertensive kidney disease with kidney failure*.

ESTIMATED GLOMERULAR FILTRATION RATE ESTIMATE – (EeGFR)

The glomerular filtration rate measures how well the kidneys filter wastes from blood and is the best overall measure of kidney function. The Modification of Diet in Renal Disease (MDRD) formula and the CKD-EPI Creatinine Equation (CKD-EPI) are recognised formulas that are used to calculate an estimate for the glomerular filtration rate based on the serum creatinine level, age and sex of the patient.

The eGFR result; ~~calculated by MDRD formula~~, is ~~now~~ reported ~~automatically~~ by Australian laboratories when a serum creatinine is ordered. However, the eGFR result will not be reported for patients under the age of 18 years, if the patient is known to be pregnant, or if there are other reasons for the result being invalid (eg patients on dialysis treatment).

(Kidney Health Australia 2018; National Kidney Foundation 2017).

~~**Note:**—The eGFR is not reported for patients under the age of 18 years, if the patient is known to be pregnant, or if there are other reasons for the result being invalid such as, for patients on dialysis treatment.~~

CLASSIFICATION

- A code from category N18 Chronic kidney disease (N18.-) must be is assigned in all episodes of care when a diagnosis of chronic kidney disease (or chronic renal failure) is documented and meets the criteria for ~~an additional diagnosis~~ code assignment (see ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses);
- Where CKD is documented, assign a code for the stage based on:
 1. documentation of a stage by a clinician;

OR

2. documentation of eGFR/GFR (or eGFR) by a clinician;

OR

3. ~~GFR (eGFR/GFR)~~ from pathology result.

~~In cases where there is a range of values reported across the admission, assign the stage for the lowest GFR (eGFR) that is, the highest stage of disease, except where superimposed acute deterioration in kidney function has necessitated the admission, or occurs during the admission. In these instances assign a code for the chronic component of the disease according to the GFR (eGFR) result closest to the discharge date, reflecting the underlying level of kidney function.~~

~~In cases where a patient is admitted with acute on chronic kidney disease and is then transferred to another hospital still in the acute phase, assign N18.9 *Chronic kidney disease, unspecified* for the chronic component of the disease as the eGFR will not be a true indicator of the underlying level of kidney function. However, if 'end stage' is documented or the patient is on ongoing haemodialysis or peritoneal dialysis, assign N18.5 *Chronic kidney disease, stage 5* except where CKD is inherent (eg I12.0 *Hypertensive kidney disease with kidney failure*).~~

~~Assign N18.9 *Chronic kidney disease, unspecified*, when documentation is not available to establish a stage.~~

~~Assign a code for the underlying cause of the chronic kidney disease (eg IgA nephropathy) when documented~~

- ~~• In cases where there is a range of values reported across the admission, seek clinical clarification to confirm the CKD stage. If clinical advice is unavailable:~~
 - ~~• assign the stage for the lowest eGFR/GFR, (ie the highest stage of disease)~~

~~**OR**~~

- ~~• where the patient has acute on chronic kidney disease, assign a code for the chronic component of the disease according to the eGFR/GFR result closest to the discharge date, reflecting the underlying level of kidney function.~~
- ~~• Where a patient has acute on chronic kidney disease, assign codes for both conditions (see also ACS 0001 *Principal diagnosis/Acute and chronic conditions*).~~
 - ~~• Where a patient is transferred to another hospital still in the acute phase:~~
 - ~~• assign N18.9 *Chronic kidney disease, unspecified* for the chronic component of the disease as the eGFR/GFR will not be a true indicator of the underlying level of kidney function~~

~~**OR**~~

- ~~• if 'end-stage' is documented or the patient is on ongoing haemodialysis or peritoneal dialysis, assign N18.5 *Chronic kidney disease, stage 5* except where CKD is inherent (eg I12.0 *Hypertensive kidney disease with kidney failure*).~~
- ~~• Where a patient has a documented underlying cause of the chronic kidney disease (eg IgA nephropathy), assign an additional code for the underlying cause~~
- ~~• Assign N18.9 *Chronic kidney disease, unspecified*, when documentation is not available to establish a stage~~
- ~~• Where a patient with CKD is admitted for creation of an AV fistula for haemodialysis, assign Z49.0 *Preparatory care for dialysis* as the principal diagnosis. Assign U87.1 *Chronic kidney disease, stage 3-5* if the CKD does not meet the criteria in ACS 0002 *Additional diagnoses* (see also ACS 0003 *Supplementary codes for chronic conditions, Example 4*).~~

EXAMPLE 1:

A 63 year old woman with known polycystic kidney disease was referred for investigation of persistent haematuria, tiredness and loss of appetite. Blood chemistry with an eGFR result of 42 mL/min and electrolyte imbalance confirmed suspected deteriorating kidney function. Her medications were reviewed and adjusted, and she was discharged with a final diagnosis of chronic kidney disease due to polycystic kidney disease.

Codes: N18.3 *Chronic kidney disease, stage 3*
Q61.3 *Polycystic kidney, NOS*

[In this example, Q61.3 Polycystic kidney, NOS is assigned as per guidelines in ACS 0001 Principal diagnosis/Problems and underlying conditions.](#)

KIDNEY REPLACEMENT THERAPY

Patients who have had their end-stage kidney disease treated with kidney replacement therapy, either in the form of dialysis or transplant, are still considered to have CKD. Patients receiving kidney replacement therapy in the form of ongoing maintenance dialysis are considered to be at stage 5, while transplanted patients are considered to be stage 3, unless otherwise documented.

CLASSIFICATION

- ~~Assign a code from N18.3–N18.5 (CKD stage 3–5) for Cases of~~ chronic kidney disease with ongoing kidney replacement therapy (~~ie, whether by dialysis or by transplant~~), ~~which comply with ACS 0002 Additional diagnoses, require a code from N18.3–N18.5 (CKD stage 3–5) where CKD meets the criteria for code assignment (see ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses), to describe the current stage of disease, except in routine dialysis only admissions or where CKD is inherent (eg I12.0 Hypertensive kidney disease with kidney failure).~~
- ~~2~~For routine ~~same-day~~ dialysis ~~only~~-admissions it ~~can be~~ assumed from the assignment of Z49.1 *Extracorporeal dialysis* or Z49.2 *Other dialysis* that the patient has CKD ~~—stage 5~~ (see also ACS 1404 *Admission for kidney dialysis*). ~~Therefore, do not assign a code from category N18 Chronic kidney disease as an additional diagnosis.~~
- ~~3~~For patients who have received a kidney transplant ~~and documentation pertaining to this status satisfies criteria for coding under ACS 0002 Additional diagnoses~~, assign Z94.0 *Kidney transplant status* ~~together~~ with N18.3 *Chronic kidney disease, stage 3* or higher, as indicated by an eGFR/GFR level ~~where CKD meets the criteria for code assignment (see ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses).~~
- ~~4~~For patients dependent on haemodialysis or peritoneal dialysis for ~~end-stage chronic~~ kidney disease, but not receiving dialysis treatment during the current admission, ~~and where documentation pertaining to this status satisfies criteria for coding under ACS 0002 Additional diagnoses~~, assign Z99.2 *Dependence on kidney dialysis* ~~with N18.3 Chronic kidney disease, stage 3 or higher, as indicated by an eGFR/GFR level where CKD meets the criteria for code assignment (see ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses).~~

EXAMPLE 2:

A 76 year old man was admitted through emergency with a fractured neck of femur, following a fall down steps in his garden. Comorbidities included **chronic** kidney failure due to IgA nephropathy, on home dialysis. X-ray confirmed subcapital fracture of the ~~L~~-left femur. The fracture was treated by hemiarthroplasty to the left hip, under GA (general anaesthesia), ASA 2.

~~He~~The patient underwent haemodialysis three times during his stay, ~~and was transferred to a private facility for rehabilitation 5 days after operation.~~

Codes:	S72.03	Fracture of subcapital section of femur
	W10.9	Fall on and from other and unspecified stairs and steps
	Y92.01	Place of occurrence, Outdoor areas
	U73.9	Unspecified activity
	N18.5	Chronic kidney disease, stage 5
	N02.8	Recurrent and persistent haematuria, other
	47522-00 [1489]	Hemiarthroplasty of femur
	92514-29 [1910]	General anaesthesia, ASA 2, nonemergency
	13100-00 [1060]	Haemodialysis

EXAMPLE 3:

A 68 year old woman was admitted with left sided chest pain developing while at the dentist. Her ~~background~~ history included end-stage kidney disease due to chronic membranous glomerulonephritis, (on haemodialysis) and hypertension. ~~ECG (electrocardiogram) did not indicate any ST wave elevation. Diagnosis of~~ The patient was diagnosed with unstable angina, ~~was made.~~ Because of her end-stage chronic kidney disease, a consultation was undertaken by her renal physician to evaluate her kidney function ~~was monitored daily, and she was transferred within 3 days for dialysis to correct increasing fluid overload.~~

Codes:	I20.0	Unstable angina
	N18.5	Chronic kidney disease, stage 5
	N03.2	Chronic nephritic syndrome, diffuse membranous glomerulonephritis
	Z99.2	Dependence on kidney dialysis

In this example, Z99.2 Dependence on kidney dialysis is assigned as per fourth Classification dot point. The patient is dependent on haemodialysis for end-stage kidney disease, but did not receive dialysis treatment during this admission.

EXAMPLE 4:

A 76 year old man admitted with a small bowel obstruction due to adhesions. Relevant medical history included kidney transplantation for CKD 12 years previously. Preoperatively his eGFR was 32 mL/min. Because of ~~the age of~~ his kidney transplant status, the patient's renal physician ordered additional fluid and electrolyte balance reviews in the postoperative period. ~~graft clinical pre-op assessment ordered fluid balance charting postoperatively with BP (blood pressure) checks bd to monitor kidney function.~~ Excision of the obstructed portion of the small intestine with anastomosis was performed under general anaesthesia, ASA 2.

Codes:	K56.5	Intestinal adhesions [bands] with obstruction
	N18.3	Chronic kidney disease, stage 3
	Z94.0	Kidney transplant status
	30566-00 [895]	Resection of small intestine with anastomosis
	92514-29 [1910]	General anaesthesia, ASA 2, nonemergency

KIDNEY TRANSPLANT FAILURE

Transplanted kidneys may fail in the short or long term due to rejection. Hyperacute rejections of a transplanted kidney are immediate and acute rejection is ~~highest~~ more common in the first three

months after transplantation. However, acute rejection can also occur months to years after transplantation. ~~Chronic transplant rejection is irreversible and cannot be treated effectively~~ [Chronic transplant rejection occurs slowly over a variable period of time, is irreversible and is difficult to treat.](#)

An acute rejection will likely be the focus of the admission with the objective being the treatment of the rejection. For chronic irreversible kidney transplant rejection, the patient ~~may is likely to~~ be on maintenance dialysis to treat CKD stage 5.

CLASSIFICATION

- 1. For acute kidney transplant rejection, assign T86.1 *Kidney transplant failure and rejection* with appropriate external cause codes.
- 2. For chronic (irreversible) kidney ~~failure~~ [transplant rejection, following a previous kidney transplant which is now requiring maintenance dialysis in the current admission](#), assign [a code from category N18.5 Chronic kidney disease, stage 5](#) and Z94.0 *Kidney transplant status*. ~~(See also [Kidney replacement therapy/Classification](#)).~~

Sequencing of codes ~~should be guided by~~ [as per the guidelines in ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses](#).

EXAMPLE 5:

A 70 year old woman was admitted for treatment of community acquired pneumonia. She had received a kidney transplant 10 years previously, which lost its function three years later, and she has been dependent on kidney dialysis since. She received haemodialysis every second day during the admission.

Codes:	J18.9	<i>Pneumonia, unspecified</i>
	N18.5	<i>Chronic kidney disease, stage 5</i>
	Z94.0	<i>Kidney transplant status</i>
	13100-00 [1060]	<i>Haemodialysis</i>

DIABETIC NEPHROPATHY

~~Diabetic nephropathy is also known as diabetic glomerulosclerosis. It is a common underlying condition for CKD. In this condition, the glomeruli of the kidney thicken and slowly become scarred over time. The kidneys begin to leak and protein (albumin) passes into the urine (U.S. National Library of Medicine 2012). This is termed microalbuminuria and is one of the earliest markers of CKD (see also ACS 0401 Diabetes mellitus and intermediate hyperglycaemia).~~

[Diabetic nephropathy or diabetic kidney disease is defined by structural and functional changes. Structural changes such as thickening of the glomeruli of the kidneys, referred to as glomerulosclerosis, slowly create scarring within the kidneys. Functional characteristics include hyperfiltration, microalbuminuria, and macroalbuminuria with incipient progressive proteinuria. Glomerular filtration rate \(eGFR/GFR\) progressively decreases until the final stage of chronic kidney failure, or end-stage renal disease \(ESRD\) requiring renal replacement therapy \(Onuigbo & Agbasi 2015\).](#)

CLASSIFICATION

Assign a code from [category N18](#) ~~Chronic kidney disease~~ ~~in conjunction~~ with the diabetic nephropathy code, to indicate the severity of the kidney disease, if CKD meets the criteria in ACS 0002 *Additional diagnoses* [\(see also ACS 0401 Diabetes mellitus and intermediate hyperglycaemia\)](#).

EXAMPLE 6:

A 74 year old man with chronic kidney disease and diabetic nephropathy (Type 2 diabetes) was admitted for review of his kidney function. Biochemistry results included a decreased eGFR = 41 mL/min, down from 47 mL/min one month previously.

Codes: N18.3 *Chronic kidney disease, stage 3*
 E11.22 *Type 2 diabetes mellitus with established diabetic nephropathy*



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Clinical documentation, abstraction and the entire clinical record

Introduction/Rationale:

A number of public submissions (P166, P309, P313) have been received by ACCD in relation to changing clinical practice and therefore documentation trends. This proposal has been developed to address the following:

- emerging issues with documentation contained within an electronic health record (EHR);
- the definition of the '*entire clinical record*' in an electronic health environment; and
- the emergence of the role of the Clinical Documentation Improvement Specialist (CDIS).

These public submissions, and the issues identified during the development of the *Standards for ethical conduct in clinical coding*, and the ensuing *Clarification on the implementation of the Standards for ethical conduct in clinical coding* in 2016 and 2017 have informed proposed amendments and additions within introductory sections of the International Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM), the Australian Classification of Health Interventions (ACHI) and the Australian Coding Standards (ACS).

ACCD proposes to revise the following sections within ICD-10-AM/ACHI/ACS:

- Guidance in the use of ICD-10-AM
- Guidance in the use of ACHI
- Introduction to the ACS
- How to use this document (within the ACS)

ACCD also proposes further amendments to ACS 0010 *General abstraction guidelines*.

ACCD PROPOSAL

ICD-10-AM Diseases Tabular

INTRODUCTION

...

GUIDANCE IN THE USE OF ICD-10-AM

The main aim of [clinical coding \(clinical classification\)](#) is:

To classify clinical concepts into code.

[Clinical concepts in ICD-10-AM include:](#)

- [diseases](#)
- [symptoms \(that represent important problems in medical care in their own right\)](#)
- [injuries, poisonings, and/or adverse effects](#)
- [procedural complications](#)

[Note:](#) ICD-10-AM also classifies external causes of morbidity and mortality (see Chapter 20), and factors influencing health status and contact with health services (see Chapter 21).

Originally designed to provide access to information contained in ~~clinical records~~ [the health care record](#) for research, education, and administration, ~~clinical codes~~ [coded data](#) are now also utilised to facilitate payment of health services, determine utilisation patterns and evaluate the appropriateness of health care costs. Coded data also provide the basis for epidemiological studies and research into the quality of health care [and patient safety](#).

The classification of clinical concepts and/or entities (~~ie a disease, complication or injury~~) into code is a complex activity. Because coded data are used in so many areas, it is essential that classification is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of health care ~~needs~~ [services](#).

In order to classify accurately, it is essential to have a working knowledge of medical science and to understand the characteristics, terminology and conventions of ICD-10-AM. The [ICD-10-AM](#) Alphabetic Index contains many terms not included in the [ICD-10-AM](#) Tabular List, and clinical [classification coding](#) requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are [all](#) consulted before a code is assigned.

There are several steps in classifying ~~diseases~~ [clinical concepts](#) and the following is a simple guide intended to assist the occasional user of ICD-10-AM.

1. ~~1.~~ Identify [in the current episode of admitted care](#), the clinical concept ~~to be classified~~ [requiring classification \(see also ACS 0001 Principal diagnosis and ACS 0002 Additional diagnoses\)](#), ~~and refer to the appropriate section of the Alphabetic Index.~~

~~Note:~~ Avoid indiscriminate coding of irrelevant information, such as symptoms or signs characteristic of the diagnosis ([see also General standards for diseases](#)).

[Note:](#) Certain symptoms represent important problems in medical care in their own right and may at times require code assignment (see also the *Instructional note at the beginning of Chapter 18 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified*).

2. Locate the lead term [in the appropriate section of the ICD-10-AM Alphabetic Index](#). ~~For disease and injuries, this is usually a noun for the pathological condition. However, some conditions expressed as~~

~~adjectives or eponyms are included in the Alphabetic Index as lead terms. The lead term is usually a noun, but may be an adjective or eponym, identifying the pathological condition or injury.~~

- Follow any *Instructional* note(s) that appear under the lead term
 - Note any terms enclosed in parentheses (ie nonessential modifiers; they do not affect code assignment), as well as any terms indented under the lead term (ie subterms; these essential modifiers may affect code assignment), until the clinical concept has been accounted for
 - Follow carefully any cross references (*see* and *see also*).

Note: A code in the ICD-10-AM Alphabetic Index with a dash in the fourth or fifth position identifies that a fourth or fifth character is required for a valid code. The additional characters are located in the ICD-10-AM Tabular List.

- ~~3. Read and be guided by any *Instructional* note(s) that appears under the lead term.~~
- ~~4. Read any terms enclosed in parentheses after the lead term (these nonessential modifiers do not affect the code), as well as any terms indented under the lead term (these essential modifiers may affect the code), until the clinical concept has been accounted for.~~
- ~~5. Follow carefully any cross references (*see* and *see also*) found in the Alphabetic Index.~~
- ~~6. Refer to the ICD-10-AM Tabular List to verify the suitability of the code selected. For disease classification note that a three-character code in the Alphabetic Index with a dash in the fourth or fifth position means that there is a fourth or fifth character to be found in the Tabular List. Further subdivisions to be used in a supplementary character position may not be indexed and therefore must be located in the Tabular List.~~
 - Be guided by any *Instructional* notes (eg ‘*Inclusion*’ terms, *Includes* and ‘*Excludes*’ notes, ‘*Code also*’, ‘*Use additional code*’) at the selected code, or at the chapter, block or category.
- ~~7. Be guided by any *Inclusion* terms and *Instructional* notes under the selected code or under the chapter, block or category heading.~~
- ~~8. Refer to the General standards for diseases in the Australian Coding Standards, and specialty standards, as indicated by an ACS symbol in the Tabular List~~
 - First, refer to the *General standards for diseases*
 - Refer to any specialty standards, as indicated by an ACS symbol (∇) in the ICD-10-AM Tabular List
5. Refer to national Coding Rules, as appropriate
6. Assign the code.

ACHI Tabular

INTRODUCTION

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GUIDANCE IN THE USE OF ACHI

The main aim of clinical coding (clinical classification) is:

To classify clinical concepts into code.

Clinical concepts in ACHI are interventions.

Originally designed to provide access to information contained in ~~clinical~~ [the health care records](#) for research, education and administration, ~~clinical codes~~ [coded data](#) are now also utilised to facilitate payment of health services, determine utilisation patterns and evaluate the appropriateness of health care costs. Coded data also provide the basis for epidemiological studies and research into the quality of health care [and patient safety](#).

The classification of clinical concepts and/or entities (~~ie an intervention or procedure~~) into code is a complex activity. Because coded data are used in so many areas, it is essential that classification is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of health care ~~needs~~ [services](#).

In order to classify accurately, it is essential to have a working knowledge of medical science and to understand the characteristics, terminology and conventions of ACHI. The [ACHI](#) Alphabetic Index contains many terms not included in the [ACHI](#) Tabular List, and clinical ~~classification~~ [coding](#) requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are [all](#) consulted before a code is assigned.

There are several steps in classifying interventions and the following is a simple guide intended to assist the occasional user of ACHI.

1. Identify [in the current episode of admitted care](#) ~~patient's record~~, the clinical concept ~~to be classified~~ [requiring classification](#), ~~and refer to the appropriate section of the Alphabetic Index.~~

~~Note:~~ Avoid indiscriminate coding of irrelevant information, such as operative approach or procedural components ([see also General standards for interventions](#)).

2. Locate the lead term [in the appropriate section of the ACHI Alphabetic Index](#). [The lead term is usually a noun, but may be an adjective or eponym, identifying the type of intervention performed.](#)

~~For interventions, this is usually a noun identifying the type of intervention performed. However, some interventions expressed as adjectives or eponyms are included in the Alphabetic Index as lead terms.~~

- [Follow any Instructional note\(s\) that appear under the lead term](#)

- [Note any terms enclosed in parentheses \(ie nonessential modifiers; they do not affect code assignment\), as well as any terms indented under the lead term \(ie subterms; these essential modifiers may affect code assignment\), until the clinical concept has been accounted for](#)

- [Follow carefully any cross references \(see and see also\).](#)

~~Note:~~ [A code in the ACHI Alphabetic Index with five digits and a block number in parentheses \(eg 92514 \[1910\]\), requires the addition of a further two digits for a valid code. The additional digits are located in the ACHI Tabular List, at the appropriate block.](#)

- ~~3. Read and be guided by any Instructional note(s) that appears under the lead term.~~

- ~~4. Read any terms enclosed in parentheses after the lead term (these nonessential modifiers do not affect the code), as well as any terms indented under the lead term (these essential modifiers may affect the code), until the clinical concept has been accounted for.~~

- ~~5. Follow carefully any cross references (see and see also) found in the Alphabetic Index.~~

- ~~36. Refer to the ACHI Tabular List to verify the suitability of the code selected. In the ACHI Alphabetic Index, a code with five digits and a block number in parentheses (eg 92514 [1910]), requires the addition of a further two digits located in the Tabular List at the appropriate block.~~

- [Be guided by any Instructional notes \(eg 'Inclusion' terms, Includes and 'Excludes' notes, 'Code also', 'Use additional code'\)](#) at the selected code, or at the chapter, block or category heading.

- ~~7. Be guided by any Inclusion terms and Instructional notes under the selected code or under the chapter, block or category heading.~~

- ~~48. Refer to the General standards for interventions in the Australian Coding Standards; and specialty standards as indicated by an ACS symbol in the Tabular List.~~

- [First, refer to the General standards for interventions](#)

[• Refer to any specialty standards, as indicated by an ACS symbol \(∇\) in the ACHI Tabular List](#)

[5. Refer to national Coding Rules as appropriate](#)

[6.9. Assign the code.](#)

Australian Coding Standards

ABBREVIATIONS

The following is a non-exhaustive list of abbreviations found in the *Australian Coding Standards*:

ACHI	Australian Classification of Health Interventions
ACS	Australian Coding Standard(s)
ADA	Australian Dental Association
AHCAs	Australian Health Care Agreements
AHSRI	Australian Health Services Research Institute
AIHW	Australian Institute of Health and Welfare
AR-DRG	Australian Refined Diagnosis Related Groups
ASA	American Society of Anesthesiologists
BPEG	British Pacing and Electrophysiology Group
CCCG	Clinical Classification and Coding Group
CDIS	Clinical Documentation Improvement Specialist
COF	Condition onset flag
DTG	Diagnosis Related Group Technical Group
ICD	International Statistical Classification of Diseases
ICD-O	International Classification of Diseases for Oncology
ICD-9-CM	International Classification of Diseases – Ninth Revision – Clinical Modification
ICD-10	International Statistical Classification of Diseases and Related Health Problems – Tenth Revision
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems – Tenth Revision – Australian Modification
ITG	International Statistical Classification of Diseases Technical Group
NASPE	North American Society of Pacing and Electrophysiology
NCCC	National Casemix and Classification Centre
NCCH	National Centre for Classification in Health
NEC	Not elsewhere classified
NMDS	National Minimum Data Set
NOS	Not otherwise specified
The Commission	Australian Commission on Safety and Quality in Health Care
WHO	World Health Organization

INTRODUCTION

The *Australian Coding Standards (ACS) for the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) and the Australian Classification of Health Interventions (ACHI)* apply to all public and private hospitals in Australia. It is anticipated that revisions will be made on a regular basis and that further editions will follow. The ongoing revision of the ACS will ensure that they reflect changes in clinical practice, clinical classification amendments and various user requirements of inpatient data collections.

The ~~se clinical coding standards~~ ACS have been ~~written-developed~~ with the ~~basic~~ objective of ~~providing~~ ~~satisfying~~ sound ~~coding~~ classification convention ~~guidelines in~~ accordance with ~~ing to~~ ICD-10-AM and ACHI. Consideration of ~~alternate~~ ~~the various~~ uses of inpatient data collections was secondary. ~~Issues-Other uses~~ such as Diagnosis Related Group allocation ~~for funding purposes~~, ~~health care~~ research and planning ~~aims~~ were considered only after the requirement for ~~nationally~~ accurate ~~and consistent~~ ICD-10-AM and ACHI ~~classification data~~ coding was satisfied.

The level of detail in the ~~standards-ACS~~ reflects the assumption that users of the document will have had training in abstracting relevant information from ~~clinical~~ ~~health care~~ records and in the use of ICD-10-AM and ACHI. It is assumed that clinical coders are aware of, and follow, ICD-10-AM and ACHI ~~rules~~ ~~conventions in~~ ~~the first instance~~.

DOCUMENTATION WITHIN THE HEALTH CARE RECORD

~~The~~ ~~Documentation within the current~~ ~~clinical record~~ ~~episode of admitted care~~ ~~should be~~ the primary source ~~of~~ ~~information~~ for the ~~classification~~ ~~coding~~ of inpatient morbidity data. Accurate ~~classification~~ ~~coding~~ is possible only after access to consistent and complete clinical information. Without good documentation, ~~classification~~ ~~coding~~ guidelines are difficult, if not impossible, to apply. ~~It is assumed that coding~~ ~~Classification~~ decisions are not made solely based on information ~~provided~~ ~~documented on in~~ the ~~clinical record~~ ~~episode of~~ ~~admitted care~~ front sheet and/or ~~the~~ discharge summary (or ~~copy of same~~ equivalent). ~~Similarly, in an electronic health record environment, do not make classification decisions based solely on admission and/or discharge data, but that analysis~~ ~~Analysis~~ of the ~~entire~~ ~~complete~~ (current) episode of admitted care is required ~~clinical record is performed before code assignment, to qualify any ambiguous documentation, or to identify specificity for documented diseases/conditions.~~

~~In certain circumstances, it may be necessary for clinical coders to use other sources of information outside the current episode of admitted care. For example, past episodes of admitted care, referral letters and other correspondence and emergency and outpatient notes may clarify documentation contained within the current episode of admitted care; provide further specificity on documentation contained within the current episode of admitted care or may assist in determining the reason for admission.~~

~~If, after following the above process, the documentation within the clinical health care record is inadequate for complete, and accurate classification coding, the clinical coder should seek more further information from the clinician. When a diagnosis is recorded for which there is no supporting documentation in the body of the clinical record, it may be necessary to consult with the clinician before assigning a code.~~

Sometimes reference to the appropriate section of ICD-10-AM ~~or~~ ~~and~~ ACHI will be enough to explain to a clinician what is required for both diagnosis and ~~procedure~~ ~~intervention~~ descriptions (~~see ACS 0010 Clinical documentation and general abstraction guidelines~~).

If this action is unsuccessful, ~~the hospital~~ ~~inform the health care facility~~ management ~~should be informed~~ of the inadequacy of ~~clinical~~ ~~the health care~~ record documentation and the resultant effect on the ~~quality of the~~ ~~hospital~~ ~~facility's~~ inpatient data.

The responsibility for ~~recording the documentation of~~ accurate diagnoses (~~ie principal diagnosis and additional diagnoses~~) and ~~procedures~~ ~~interventions, in particular principal diagnosis,~~ lies with the clinician, not the clinical coder ~~or clinical documentation improvement specialist (CDIS)~~. ~~Some clinical coders and CDIS may possess a medical, nursing or allied health degree, but cannot diagnose patient conditions, as they are not a designated member of the clinical team treating the patient.~~

A ~~joint~~ combined effort between the clinician and the clinical coder (and the CDIS) is essential to achieve complete and accurate documentation, ~~and~~ code assignment, using ICD-10-AM and ACHI classification conventions and the ACS. This will ensure national consistency in the ~~and~~ reporting of diagnoses and procedures; interventions.

Those involved in the clinical coding process should uphold the Clinical Coding Practice Framework. This framework was developed by a collaboration of the Health Information Management Association of Australia (HIMAA) and the Clinical Coders Society of Australia (CCSA) to ensure consistency in coding practice by defining and providing guidance that promotes good practice for those involved in the clinical coding process. The framework can be accessed from the websites of HIMAA, CCSA, the Independent Hospital Pricing Authority (IHPA) and other stakeholders who participate in the clinical coding process.

...

HOW TO USE THIS DOCUMENT

~~Standards in this document~~ The ACS are categorised by site and/or system according to the specialty to which the diagnosis or ~~procedure~~ intervention relates.

~~Operations and procedures are also categorised by site.~~ For example, 'Functional endoscopic sinus surgery (FESS)' ~~tonsillitis~~ is discussed in Chapter 8 *Ear, Nose, Mouth and Throat (ENMT)*. Guidelines regarding Any procedures-interventions which can be performed on many-multiple sites are included in the 'General standards for I interventions' section. Refer first to the Standards Index.

~~Where a procedure involves multiple sites, which may be categorised into more than one chapter, reference the index in the first instance.~~

The term 'clinician' is used throughout the ~~document~~ ACS and refers to the treating medical officer but may refer to other clinicians such as allied health professionals, midwives, and nurses ~~and allied health professionals~~. Generally, medical officer documentation is the primary source for clinical coders to use for classification purposes. The following example indicates that clinical coders can also use documentation from other clinicians if the documented information is appropriate to the clinician's ~~In order to assign a code associated with a particular clinician's documentation, the documented information must be appropriate to the clinician's discipline~~ scope of practice.

EXAMPLE 1:

- Malnutrition documented by a dietitian
- Pressure injuries documented by a wound specialist (Clinical Nurse Specialist) or a registered nurse
- Post-partum haemorrhage documented by a midwife
- Dysphagia documented by a speech pathologist

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TABLE OF CONTENTS

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GENERAL STANDARDS FOR DISEASES

- 0001 Principal diagnosis
- 0002 Additional diagnoses
- 0003 Supplementary codes for chronic conditions
- 0005 Syndromes
- 0008 Sequelae
- 0010 [Clinical documentation and general abstraction guidelines](#)
- 0011 Admission for surgery not performed
- 0012 Suspected conditions

ACS 0002 ADDITIONAL DIAGNOSES

Changes made in TN592

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0010 [CLINICAL DOCUMENTATION AND GENERAL ABSTRACTION GUIDELINES](#)

Note: [Guidelines in this ACS relate to ICD-10-AM and ACHI and are applicable to those personnel in the health care facility responsible for the clinical coding function and generating documentation queries to clinicians \(eg health information managers, clinical coders, clinical documentation improvement specialists and clinical coding auditors\).](#)

[The term 'episode of care' used throughout this ACS refers to an episode of **admitted** care.](#)

['Front sheet and/or discharge summary' referred to in this ACS also includes 'admission and discharge data' within an electronic health record of an episode of admitted care.](#)

[DEFINITION OF A HEALTH CARE RECORD](#)

[The main purpose of a health care record is to provide a means of communication to facilitate patient safety and quality health care. A health care record is the primary repository of information including diseases/conditions of the patient; and medical and therapeutic treatment and interventions performed on the patient during an episode of care. The health care record informs continuity in patient care during an episode and in future episodes.](#)

[The following definition refers to a health care record within an inpatient setting for clinical classification purposes.](#)

[The current episode of care contains a documented account of a patient's inpatient journey from admission to discharge and includes, but is not limited to, their physical examination, history of present illness, past history, health care plan\(s\), consultations, observations, investigations and evaluation, diagnoses, treatment \(including medications\), intervention\(s\), progress and health outcome for the episode of care.](#)

[The health care record \(as a whole or in part\) may also be used for communication with external health care providers to ensure the continuity of patient care outside of the inpatient setting. The health care record is a legal document, which may be used by other external bodies for the investigation of complaints, planning of health care services, audit activities, research, education, financial reimbursement and public health.](#)

A health care record that exists in both paper and electronic form is referred to as a hybrid record. Where health care organisations maintain hybrid records, clinicians and clinical coders must at all times have access to information that is included in each part.

For classification purposes, the primary source of information within the health care record is the **current episode of care**.

ROLES AND RESPONSIBILITIES IN THE DOCUMENTATION AND ABSTRACTION PROCESS

It is not the role of a clinical coder (or clinical documentation improvement specialist (CDIS)) to diagnose. Clinical documentation of accurate diagnoses is the responsibility of the clinician. Clear and accurate clinical documentation is critical to the continuity and quality of patient care and patient safety, and is the legal record of a patient's episode of care.

The listing of ~~diagnoses~~ clinical concepts (eg diseases and interventions) on the front sheet and/or the discharge summary ~~(or equivalent) of for an the episode of care clinical record~~ is the responsibility of the clinician. These responsibilities include identifying and documenting the principal diagnosis, and listing all additional diagnoses and interventions performed during the episode of care. Each diagnostic statement and intervention must be as informative as possible in order for the clinical coder to classify the clinical concept ~~/intervention~~ to the most specific ICD-10-AM orACHI code.

Before ~~classifying coding~~ any ~~documented diagnosis clinical~~ concept ~~/procedure recorded~~, the clinical coder must verify information ~~recorded~~ on the front sheet and/or the discharge summary ~~(or equivalent)~~ by reviewing pertinent documents/data ~~within~~ the body of the ~~current episode of care clinical record~~.

Information from the health care record outside of that directly relating to the current episode of care can help to inform code assignment. For example:

- Past episodes of care (at current or other health facility)
- Referral letters and other correspondence
- Emergency notes
- Outpatient notes

Such sources can be used to:

- clarify documentation contained within the current episode of care
- gain further specificity on documentation contained within the current episode of care
- determine the reason for admission (eg reviewing outpatient notes and referral letters).

Reviewing the entire health care record other than for these reasons is not acceptable classification practice. In addition, information incidentally identified while seeking further clarification and/or specificity for information documented in the current episode of care, or for determining the reason for admission should not be used in code assignment. For example, documentation of ex-smoker in a previous episode or mention of hepatitis C in outpatient notes.

If, after following the above guidelines, the documentation within the health care record is inadequate for complete and accurate classification, the clinical coder should seek information from the clinician.

GUIDELINES FOR GENERATING APPROPRIATE QUERIES TO CLINICIANS

A query to a clinician is appropriate when the documentation within an episode of care:

- is ambiguous, conflicting, illegible or incomplete
- describes or is associated with clinical findings (eg *Escherichia coli* blood culture) without a definitive relationship to an underlying diagnosis (eg sepsis)
- includes clinical findings, diagnostic evaluation and/or treatment not related to a specific documented condition or intervention
- is unclear for condition onset flag (COF) assignment.

If the documentation within the current episode of care is inadequate for complete and accurate classification, the clinical coder can access other systems (eg laboratory, medical imaging, theatre) and/or use the entire health record to clarify or gain specificity. This process of review must be undertaken before seeking clarifying information from the clinician.

When a diagnosis or test result is recorded on the front sheet and/or discharge summary (or equivalent) for which there is no supporting documentation in the body of the current episode of care (including documentation/information contained within other systems pertaining to the current episode of care), it may be necessary to consult with the clinician before assigning a code.

For example, documentation of the administration of a drug from the medication chart, or a microbiology test result, which is not qualified within the current episode of care, is not sufficient for clinical coders to perform the classification function. In these instances, documentation issues must be clarified with the clinician.

Queries to clinicians regarding documentation issues

Document the outcome of the query to the clinician on the query form and include:

- an appropriately worded query (see Examples 1-9)
 - the process undertaken to obtain the answer (eg email, verbal and telephone)
 - the date the answer was obtained
 - the name, designation and signature of the clinician consulted
 - the name, designation and signature of the personnel who consulted with the clinician.
- The completed query form is part of the documentation for the episode of care being classified.

Queries to clinicians regarding documentation issues can be undertaken:

- manually (with the clinician answering the query on the form provided)
- electronically via a portal as part of the electronic health record
- verbally/conversation with a clinician
- via email/facsimile
- via telephone/telehealth conversation.

Apply the following guidelines and use the example query formats as a guide to assist with the development of appropriate queries to clinicians (see also the Clinical Coding Practice Framework which can be accessed from the websites of HIMAA, CCSA, the Independent Hospital Pricing Authority (IHPA) and other stakeholders who participate in the clinical coding process).

Appropriately formulated queries to clinicians

Queries to clinicians should be written so that they:

- include information about the patient, with direct reference to the documentation that has prompted the query
- enhance the clinical truth of the documentation, to complete the clinical picture of the current admitted episode of care, and support continuity and quality of patient care
- allow clinicians to elaborate on (add context to) their response, regarding the significance and cause of the diagnosis/condition/event or intervention
- do not include leading questions that instruct, or indicate to a clinician how to respond
- do not indicate potential financial impact.

It is not permitted to use a 'yes/no' query for determining new (undocumented) diagnoses. Open ended queries are preferred. Multiple choice and 'yes/no' queries are acceptable when generated appropriately. For example, a 'yes/no' query format should include additional options as in multiple choice formats (eg 'other', 'clinically undetermined', 'not clinically significant'). In addition to COF determinations, yes/no queries may be used in the following circumstances:

- obtaining further specificity for a diagnosis that is already documented within the current episode of care (ie pathology, radiology and other diagnostic reports) with interpretation by a clinician

- establishing a causal relationship between documented conditions such as manifestation/aetiology, complications, and conditions/diagnostic findings (ie hypertension and congestive heart failure, diabetes mellitus and chronic kidney disease)
- resolving conflicting documentation from multiple clinicians.

Example 1 below demonstrates the difference between a leading query and an appropriate query format.

EXAMPLE 1:

In this example, the clinician query has been initiated because there are numerous clinical findings that may suggest a particular diagnosis which has not been documented within the current episode of care

Query background

This patient was admitted via the emergency department due to pneumonia on 22/10/17 and discharged on 31/10/17. The admitting examination reveals WBC of 14,000, *Pseudomonas* cultured from the blood, respiratory rate of 24, temperature of 39 degrees Celsius, heart rate of 120, hypotension and altered mental status. The patient is administered an IV antibiotic and IV fluid resuscitation.

Leading Query – not appropriate

The patient has elevated WBCs, tachycardia and hypotension and is given an IV antibiotic for *Pseudomonas* cultured from the blood. Was the patient treated for sepsis?

Name of clinician:

Designation:

Signature:

Date query was answered:

Appropriate Query format

Based on your clinical judgement, can you provide a diagnosis or diagnoses that represents the below listed clinical findings?

This patient was admitted via the emergency department due to pneumonia on 22/10/17 and discharged on 31/10/17. The admitting examination, and progress notes and treatment interventions undertaken on 23/10/17 revealed the following:

- WBC 14,000
- *Pseudomonas* cultured from the blood
- Respiratory rate 24
- Temperature 39 degrees Celsius
- Heart rate 120
- Hypotension
- Altered mental status
- IV antibiotic administration
- IV fluid resuscitation

Please document the condition or conditions and the causative organism (if known).

Examples 2 and 3 below provide formats for developing appropriate queries to clinicians when seeking clinical advice where documentation has been inadequate for code assignment.

EXAMPLE 2:

In this example, the clinician query has been initiated because treatment was commenced for which a diagnosis was not documented. Reference to decreased air entry in the background to the query allows the clinician to have all pertinent information at hand when responding. The query also allows the clinician to elaborate as to the cause of the condition/event (if any).

Query background

Patient underwent total knee replacement on 11/8/2016.

Patient noted to have decreased air entry (AE) to both bases by doctor (progress note 15/08/2016 at 2145hrs). There is documentation of ↓ AE by physiotherapist on 16/08/2016 at 0850hrs with cough/breathing exercises and TriFlo (spirometry) commenced. Chest X-ray on 16/08/2016 at 1530 hours revealed left lower lobe consolidation. Sputum culture was positive for *Staphylococcus* and IV antibiotics were commenced on 16/08/2016 at 1815 hours.

Example of query format to the doctor

What condition, if any, caused the decreased air entry and left lower lobe consolidation, which was being treated with cough/breathing exercises and TriFlo by the physiotherapist and IV antibiotics?

EXAMPLE 3:

In this example, the clinician query below demonstrates that in some instances, it makes sense for the coder to use a 'yes/no' or multiple choice format, but this must include the provision for the clinician to elaborate or add context around the response. This will preclude the coding of conditions incorrectly or inappropriately. For example, classifying a condition as a post procedural complication when it is clearly a condition that commonly occurs during or following an intervention.

Query background

Patient underwent an appendectomy under general anaesthetic (GA) on 20/9/2016.

During the intervention, the anaesthetist adjusted the anaesthetic in response to the patient's blood pressure dropping. Apart from the documentation on the anaesthetic report, there was no other mention of the drop in blood pressure within the episode of care.

Possible query formats

Was the patient's drop in blood pressure an unexpected occurrence?

Yes

No

Other

Clinically undetermined

If yes, is this:

- a diagnosis of hypotension
- a low blood pressure reading
- a complication of the anaesthetic

Please tick as applicable.

In the event that an **investigation result varies from the clinical documentation**, such as a clinical diagnosis of gastric ulcer with 'no evidence of ulcer' reported on histopathology, the case should be referred to the clinician. Although investigation results are critical in the **classification coding** process, there are some diseases which are not always confirmed on investigation.

For example, Crohn's disease is not always confirmed on biopsy.

It is important to seek clinical advice where necessary for:

- verification of diagnoses recorded on the front sheet and/or the discharge summary which are not supported in the **clinical health care** record, **and**
- clarification of discrepancies between investigation results and clinical documentation.

EXAMPLE 4:

The clinician has recorded on the discharge summary a principal diagnosis of fractured neck of femur. Additional diagnoses recorded are pneumonia and duodenal ulcer. Examination of the **clinical** progress notes **within the current episode of care** revealed that the patient had been hospitalised six months previously for pneumonia and has a healed duodenal ulcer. Only the fractured neck of femur is **coded-classified** with an appropriate external cause code assigned, because neither the pneumonia nor duodenal ulcer meet the additional diagnosis criteria (see ACS 0002 *Additional diagnoses*).

EXAMPLE 5:

In this example, the clinician query demonstrates another circumstance where it is appropriate for the coder to use a 'yes/no' or multiple choice format. This query seeks to clarify ambiguous documentation in the discharge summary (ovarian cyst) and the histopathology report (epithelial ovarian cancer).

Query background

The histopathology report states that the patient has epithelial ovarian cancer. However, ovarian cyst is documented on the discharge summary by the attending clinician.

Possible query formats

The principal diagnosis documented on the discharge summary is 'ovarian cyst', however the histopathology report indicates 'epithelial ovarian cancer'. The definition of the principal diagnosis is: 'The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care...'. In light of this definition would you like to:

- keep the diagnosis of 'ovarian cyst'
- update the principal diagnosis to 'epithelial ovarian cancer'
- update the principal diagnosis to another condition? If yes, please specify.

TEST RESULTS AND MEDICATION CHARTS

In an electronic health care record (EHR), the **copy and paste function** or shorthand is common practice. Shorthand may be used by clinicians as a shortcut for documenting abnormal test results on the discharge summary, discharge data, or elsewhere within the episode of care (eg progress notes). Do not use this shorthand in isolation for code assignment. Qualify all shorthand (eg copy and pasted test results) with documentation within the body of the current episode of care. Note that these test results may be used by the clinical coder to provide greater specificity to an already documented condition/diagnosis.

Do not use test result values, descriptions, medication charts, symbols and abbreviations in isolation to inform code assignment. For example:

- a test result that is not within the normal range does not necessarily mean that the patient has an abnormal condition. That test result may be normal for that particular patient.
- a documented description (eg low blood sugar level) does not necessarily mean that the patient has a particular condition (eg hypoglycaemia).
- drugs may be administered for a variety of indications, including as prophylaxis.
- documentation of the indication for a drug on the medication chart must be qualified within the body of the current episode of care.

Where shorthand has been used to document/describe a condition, each instance must be assessed on its merits before seeking clarification from a clinician. If the documentation does not sufficiently describe a disease/condition, clinical coders should clarify the significance of the documented shorthand (test result, values, abbreviations and symbols) with the clinician to inform accurate code assignment.

Where this is not possible, assign a code for the condition represented in shorthand (as described above) only if:

- test results (pathology report) verify that a result is abnormal **AND**
- there is appropriate ICD-10-AM indexing **AND**
- it meets the criteria in ACS 0001 *Principal diagnosis* or ACS 0002 *Additional diagnoses*.

The following two examples include excerpts from the ICD-10-AM Alphabetic Index that may be used for code assignment where an abnormal test result is documented.

EXAMPLE 6:

Where ↓Hb or a haemoglobin level (eg Hb 98) is documented as the indication for a transfusion and the test results (pathology report) and/or the clinician verifies the patient's haemoglobin is below the normal range, follow the Alphabetic Index:

Low

- haemoglobin D64.9

Assign D64.9 *Anaemia, unspecified*.

EXAMPLE 7:

Where ↓K or a potassium level (eg K 2.9) is documented as the indication for commencement of medication and the test results and/or clinician verifies the patient's potassium is below the normal range, follow the Alphabetic Index:

Deficiency

- potassium (K) E87.6

OR

Depletion

- potassium E87.6

Assign E87.6 *Hypokalaemia*.

If the ICD-10-AM Alphabetic Index does not provide appropriate indexing, or there is uncertainty or ambiguity in relation to abbreviated forms or descriptions in the documentation, confirm with the clinician prior to code assignment.

The following examples provide formats for developing appropriate queries to clinicians when seeking clinical advice in relation to test results and medications.

EXAMPLE 8:

[In this example, the query was initiated because of commencement of a new medication for which no indication was documented. Reference to the pathology results in the background to the query allows the clinician to have all pertinent information at hand when responding.](#)

Query background

[Patient was admitted for laparoscopic appendectomy for acute appendicitis. The patient commenced new medication of Slow K on 3 April, as documented on the medication chart by the clinician. Pathology results from April 1-4 show K+3.1, K+3.1, K+3.4 and K+3.5 respectively.](#)

Possible query format

[Was the patient commenced on Slow K:](#)

- [to maintain a normal potassium level](#)
- [to treat hypokalaemia](#)
- [other, please specify](#)
- [unable to determine](#)

EXAMPLE 9:

[In this example, the query was initiated because a blood transfusion was given for which no indication was documented. Reference to the pathology result in the background to the query assists the clinician to provide an informed response](#)

Query background

[Pathology result indicates Hb of 98 prior to a transfusion being given but neither the progress notes or blood transfusion form indicates a reason for the transfusion.](#)

Possible query format

[What was the indication/condition for the blood transfusion?](#)

Findings that provide more specificity about a diagnosis

Laboratory, x-ray, pathological and other diagnostic results should be coded where they clearly add specificity to already documented conditions that meet the criteria for a principal diagnosis (see ACS 0001 *Principal diagnosis*) or an additional diagnosis (see ACS 0002 *Additional diagnoses*).

EXAMPLE 102:

Code the following:

- [S72.03 Fracture of subcapital section of femur](#) where documentation shows fracture neck of femur and x-ray result shows subcapital fracture.
- [J21.0 Acute bronchiolitis due to respiratory syncytial virus](#) where documentation shows bronchiolitis and cytology confirms respiratory syncytial virus (RSV) as causative agent.
- [K80.10 Calculus of gallbladder with other cholecystitis, without mention of obstruction](#) where documentation shows cholecystitis and ultrasound confirms the presence of gallstones.

Findings with an unclear, or no associated condition documented

Unless a clinician can indicate that a test result is significant and/or indicates the relationship between an unclear test result and a condition, such test results should not be coded.

EXAMPLE 113:

Do not code the following:

- N39.0 *Urinary tract infection, site not specified* where only microbiology result shows organism(s) have been cultured.
- J98.1 *Pulmonary collapse* where x-ray result shows basal atelectasis.
- K66.0 *Peritoneal adhesions* where shown on computerised tomography (CT) report in a case of a principal diagnosis of abdominal pain.
- D25.- *Leiomyoma of uterus* included on histopathology when the reason for hysterectomy is documented as menorrhagia.

IMPENDING OR THREATENED CONDITION

~~If a threatened/impending condition is documented but did not occur during the episode of care, then the clinical coder should refer to the index to determine if the condition is indexed as impending or threatened under the lead term or subterm. If such an index entry exists, then assign the appropriate code. If such an entry does not exist, then the condition described as impending or threatened should not be coded.~~

If a threatened/impending condition is documented but did not occur during the current admitted episode of care, refer to the Alphabetic Index to determine if the condition is indexed as a subterm under the lead terms *Impending* or *Threatened*. If a subterm is listed, assign the appropriate code. If a subterm is not listed, do not code the condition described as impending or threatened.

Conditions indexed as 'threatened' include abortion and labour/delivery – see Alphabetic Index: *Threatened*.

EXAMPLE 412:

~~Impending gangrene of the leg which does not eventuate within the episode of care due to prompt treatment. There is no index entry such as 'gangrene, impending' and consequently this case should be coded to the precursor condition, such as arteriosclerosis with ulceration. Patient admitted with impending gangrene of the leg, which does not eventuate within the episode of care. As there is no index entry listed for '*Impending/gangrene*' do not code the gangrene.~~

~~Conditions indexed as 'threatened':~~

- ~~————— O20.0 ——— *Threatened abortion*~~
- ~~————— O47. ——— *False labour*~~

GENERAL STANDARDS FOR INTERVENTIONS

0016 GENERAL PROCEDURE GUIDELINES

DEFINITION

A procedure is defined as “a clinical intervention represented by a code that:

- is surgical in nature, and/or
- carries a procedural risk, and/or
- carries an anaesthetic risk, and/or
- requires specialised training, and/or
- requires special facilities or equipment only available in an acute care setting” (METeOR: 514040) (Australian Institute of Health and Welfare 2014).

The order of codes should be determined using the following hierarchy:

- procedure performed for treatment of the principal diagnosis
- procedure performed for treatment of an additional diagnosis

- diagnostic/exploratory procedure related to the principal diagnosis
- diagnostic/exploratory procedure related to an additional diagnosis for the episode of care.

EXAMPLE 1:

Principal diagnosis:	Chronic cervicitis
Additional diagnoses:	Human papillomavirus (HPV) Menorrhagia
Procedures:	Dilation and curettage, diathermy and biopsy cervix
Procedure sequenced first:	Diathermy of cervix (35608-00 [1275]) because it is the procedure which treated the chronic cervicitis.

Many procedures may meet the above AIHW definition of a clinical intervention but if they are routine in the treatment of the diagnosis being coded, it may not be necessary to code them. For example, many nursing procedures may require “specialised training” but these procedures are not coded. Likewise, many radiological procedures may carry a “procedural risk” and require “special facilities or equipment” but many of these procedures are an expected or inherent part of the diagnostic or therapeutic treatment plan, and are not coded. It is also recognised that more accurate or complete data regarding the use of some procedures is more appropriately obtained from other data collections (eg pathology, radiology).

Clinical coders should [refer to ACS 0010 Clinical documentation and general abstraction guidelines and](#) follow the instructions provided in ACS 0042 *Procedures normally not coded* and directions on the use of specific procedures provided in other *Australian Coding Standards* indexed in this document.

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0111 HEALTHCARE ASSOCIATED STAPHYLOCOCCUS AUREUS BACTERAEMIA

...

...

CLASSIFICATION

The presence of healthcare associated *Staphylococcus aureus* bacteraemia (HA SAB) must be documented by clinical staff, and meet the criteria in ACS 0001 *Principal diagnosis* or ACS 0002 *Additional diagnoses* in order to assign ~~U90.0~~[U92](#) *Healthcare associated Staphylococcus aureus bacteraemia*.

~~Synonyms for 'healthcare associated' include 'hospital acquired', 'healthcare associated infection (HAI)' and 'nosocomial'. Where the specific type of healthcare associated bacteraemia is not documented in the clinical notes, coders may refer to pathology results to confirm *Staphylococcus aureus* bacteraemia (see ACS 0010 *General abstraction guidelines/Test results*).~~

[U92 Healthcare associated Staphylococcus aureus bacteraemia is a supplementary code. The manifestation of the bacteraemia, such as endocarditis or sepsis, or the bacteraemia if no site is specified, together with any appropriate external cause codes should be coded and sequenced before U92 Healthcare associated Staphylococcus aureus bacteraemia. See also ACS 0110 *SIRS, sepsis, severe sepsis and septic shock* and ACS 1904 *Procedural complications*.](#)

...

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

...

3. DM AND IH WITH FEATURES OF INSULIN RESISTANCE

Insulin resistance syndrome (metabolic syndrome or syndrome X) refers to a cluster of disorders which are often present together and may include DM or IH. The features of insulin resistance are most commonly associated with T2DM and are not characteristic of T1DM.

CLASSIFICATION

Assign E11.72, E13.72, E14.72 **Diabetes mellitus with features of insulin resistance* or E09.72 *Intermediate hyperglycaemia with features of insulin resistance*, as appropriate, when DM or IH is documented with one or more of the following also documented:

- acanthosis nigricans
- dyslipidaemia¹ characterised by:
- elevated fasting triglycerides (≥ 1.7 mmol/L), or
- depressed high-density lipoprotein (HDL)-cholesterol (male ≤ 1.03 , female ≤ 1.29)
- hyperinsulinism
- increased intra-abdominal visceral fat deposition
- 'insulin resistance'
- fatty liver (nonalcoholic fatty (change of) liver disease (NAFLD))
- obesity, morbid obesity, overweight
- nonalcoholic steatohepatitis (NASH)

Note: Hypertension is a common disorder with a variety of causes and its attribution to insulin resistance is only accepted if accompanied with at least one of the features listed above. Therefore, documentation of DM with hypertension alone does not meet the criteria for assignment of E11.72, E13.72, E14.72 **Diabetes mellitus with features of insulin resistance* or E09.72 *Intermediate hyperglycaemia with features of insulin resistance*.

Additional codes for complications of DM or IH should be assigned in accordance with *Rule 4a* and *Rule 4b*.

¹ The terms 'hypercholesterolaemia', 'high cholesterol', 'hyperlipidaemia' or '? chol' are often used in the clinical record rather than the term 'dyslipidaemia'. When any of these terms are documented, the following guidelines should be followed to determine whether to assign E1-.72 ** Diabetes mellitus with features of insulin resistance* or E09.72 *Intermediate hyperglycaemia with features of insulin resistance*:

- If increased cholesterol is documented in the clinical record with documentation of either increased fasting triglycerides **or** decreased HDL this can be considered as 'dyslipidaemia' – **code to** E1-.72 or E09.72
- If there is no documentation of increased cholesterol but **both** increased fasting triglycerides and decreased HDL are documented in the clinical record – **code to** E1-.72 or E09.72
- If increased cholesterol only is documented with no documentation of increased fasting triglycerides or decreased HDL – **do not code to** E1-.72 or E09.72

Test results can be used to confirm an already documented condition as per ACS 0010 [Clinical documentation and gGeneral abstraction guidelines/Test results and medication charts](#).

...

* Hypertension is a common disorder with a variety of causes and its attribution to insulin resistance is only accepted if accompanied with at least one of the listed features of insulin resistance.

** Test results can be used to confirm an already documented condition as per ACS 0010 [Clinical documentation and gGeneral abstraction guidelines/Test results and medication charts](#).

...

STANDARDS INDEX

Standard numbers appear immediately after each entry.

A

Abnormal

- coagulation profile 0303
- findings 0002
- - and abstraction guidelines 0010
- presentation (fetal) 1506

Abortion (for) 1511

- incomplete 1544
- induced 1511
- medical 1511
- missed 1544
- threatened 0010
- with
- - complication 1544
- - liveborn infant 1511

Abrasions 1916

Abstraction [and clinical documentation guidelines](#) 0010

Abuse

- perpetrator of 2008

....

Chronic — *see also condition*

- condition
- - codes, supplementary 0003
- - with acute condition 0001
- phase, paraplegia/quadriplegia 0625

Cingulotomy, stereotactic 0633

Circumcision 1607

Clearance

- dental, prior to radiotherapy 0236

[Clinical documentation and abstraction guidelines](#) 0010

Codes

- aetiology and manifestation 0001
- combination 0015
- dagger and asterisk 0001
- external cause 2001
- ill-defined 0001
- symptoms/signs 0001
- unacceptable principal diagnosis 0050

....

G

Gangrene

- diabetic 0401
- impending 0010

Gastroenteritis

- with dehydration 1120

Gastrointestinal haemorrhage 1103

Gastroscopy 0024

Gavage

- gastric, neonate 1615

Generator, pulse 0936

Gestational age 1618

Gestational diabetes 0401

Glaucoma

- with cataracts 0701

Graft

- bone, for facial surgery 1216
- burns 1911
- coronary artery bypass (CABG) 0909
- mammary artery 0909

Grazes, obstetric 1551

Grommet(s) (tympanostomy tube(s))

~~-removal 0803~~

[Guidelines for generating appropriate queries to clinicians 0010](#)



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Index for complications of oesophagostomy

Introduction/Rationale:

A deficiency in the ICD-10-AM Alphabetic Index for complications of oesophagostomy was identified by a public submission (P307). Index entries are provided for other complications of gastrointestinal stomas (such as gastrostomy and tracheostomy) in ICD-10-AM Tenth Edition but not specifically for oesophagostomy.

ACCD proposes the following index amendments to ICD-10-AM Eleventh Edition to facilitate the code assignment for complications of oesophagostomy.

ACCD PROPOSAL

Tabular List

K91.4 Malfunction of stoma of the digestive system

Includes: colostomy
enterostomy
gastrostomy
ileostomy
jejunostomy
[oesophagostomy](#)

Excludes parastomal hernia (K43.-)

⊕K91.41 Haemorrhage from stoma of the digestive system

N99.5 Malfunction of stoma of urinary tract

Includes: cystostomy
nephrostomy
[ureterostomy](#)
[urethrostomy](#)

⊕N99.51 Haemorrhage from stoma of urinary tract

Alphabetic Index

Complication(s) (from) (of)

...

- oesophageal antireflux device T85.9

- - infection or inflammation T85.73
- - mechanical T85.5
- - specified NEC T85.82
- [oesophagostomy \(stoma\) NEC K91.49](#)
- [haemorrhage \(bleeding\) K91.41](#)
- [infection K91.42](#)
- [leak K91.43](#)
- [obstruction \(mechanical\) K91.49](#)
- [stenosis K91.49](#)
- organ or tissue transplant (partial) (total) NEC (*see also Complication(s)/by site*) T86.89
- ...

Dysfunction

- ...
- gastrostomy (stoma) — *see Complication(s)/gastrostomy*
- ...
- liver K76.8
- [oesophagostomy \(stoma\) — see Complication\(s\)/oesophagostomy](#)
- organic F52.3
- ovary E28.9
- - specified NEC E28.8
- papillary muscle I51.8
- ...

Haemorrhage, haemorrhagic R58

- ...
- spinal cord G95.1
- - fetus or newborn (birth trauma) P11.5
- spleen D73.5
- [stoma](#)
- [digestive system \(colostomy\) \(enterostomy\) \(gastrostomy\) \(ileostomy\) \(jejunostomy\) \(oesophagostomy\) K91.41](#)
- [trachea \(tracheostomy\) J95.01](#)
- [urinary system \(cystostomy\) \(nephrostomy\) \(ureterostomy\) \(urethrostomy\) N99.51](#)
- stomach K92.2
- ...

Infection, infected (opportunistic) (*see also Infestation*) B99

- ...
- *Stellantchasmus falcatus* B66.8
- [stoma](#)
- [digestive system \(colostomy\) \(enterostomy\) \(gastrostomy\) \(ileostomy\) \(jejunostomy\) \(oesophagostomy\) K91.42](#)
- [trachea \(tracheostomy\) J95.02](#)
- [urinary system \(cystostomy\) \(nephrostomy\) \(ureterostomy\) \(urethrostomy\) N99.52](#)
- *Streptococcus, streptococcal* NEC A49.1
- - as cause of disease classified elsewhere B95.5
- - *agalactiae* B95.1
- ...

Leak, leakage

- amniotic fluid (*see also Rupture/membranes/premature*) O42.9
- hindwater (*see also Rupture/membranes/premature*) O42.9
- stoma — *see [Dysfunction/stoma-Complication\(s\)/stoma/by type](#)*
- tracheostomy — *see [Complication\(s\)/tracheostomy](#)*
- ...

Malfunction — *see also Dysfunction*

- ...
- colostomy — *see [Complication\(s\)/colostomy](#)*
- cystostomy (~~stoma~~) — *see [Complication\(s\)/cystostomy](#)*
- enterostomy — *see [Complication\(s\)/enterostomy](#)*
- gastrostomy — *see [Complication\(s\)/gastrostomy](#)*
- ileostomy — *see [Complication\(s\)/ileostomy](#)*
- jejunostomy — *see [Complication\(s\)/jejunostomy](#)*
- [oesophagostomy — see \[Complication\\(s\\)/oesophagostomy\]\(#\)](#)
- pacemaker, cardiac T82.1
- prosthetic device, internal — *see [Complication\(s\)/prosthetic device/by site/mechanical](#)*
- tracheostomy NEC J95.09
- - fistula, tracheo-oesophageal J95.04
- - haemorrhage (bleeding) J95.01
- - infection J95.02
- - leak J95.03

- - tracheo-oesophageal fistula J95.04
- urinary device NEC T83.1
- - stoma (cystostomy) (nephrostomy) (ureterostomy) ([urethroscopy](#)) NEC N99.59
- - - haemorrhage (bleeding) N99.51
- - - infection N99.52
- - - leak N99.53
- vascular graft or shunt NEC T82.3
- ...

Obstruction, obstructed, obstructive

- ...
- stoma
- - digestive system (colostomy) (enterostomy) ([gastroscopy](#)) (ileostomy) (jejunostomy) ([oesophagostomy](#)) K91.49
- - trachea (tracheostomy) J95.09
- - urinary system (cystostomy) (nephrostomy) (ureterostomy) ([urethroscopy](#)) N99.59
- stomach NEC K31.88
- ...

Stenosis (cicatrical) — *see also Stricture*

- ...
- stoma
- - digestive system (colostomy) (enterostomy) ([gastroscopy](#)) (ileostomy) (jejunostomy) ([oesophagostomy](#)) K91.49
- - trachea (tracheostomy) J95.09
- - urinary system (cystostomy) (nephrostomy) (ureterostomy) ([urethroscopy](#)) N99.59
- stomach, hourglass K31.2
- ...

Stricture (*see also Stenosis*) R68.8

- stoma
- - digestive system (colostomy) (enterostomy) ([gastroscopy](#)) (ileostomy) (jejunostomy) ([oesophagostomy](#)) K91.49
- - trachea (tracheostomy) J95.09
- - urinary system (cystostomy) (nephrostomy) (ureterostomy) ([urethroscopy](#)) N99.59
- stomach K31.88

Australian Coding Standards

N/A



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Decreased consciousness

Introduction/Rationale:

Following receipt of a public submission (PS26/08) this addenda proposal was created to add the term 'decreased consciousness' to ICD-10-AM Tabular List and Alphabetic Index, classifiable to R40.0 *Somnolence*.

By definition, stupor is a condition marked by absence of spontaneous movement, greatly diminished responsiveness to stimulation, and usually impaired consciousness (Merriam-Webster, Incorporated 2017).

Glasgow Coma Scale (GCS) information has been provided by the CCAG representative and ranges are included (as per the ITG Meeting December 2017 decision).

ACCD PROPOSAL

Tabular List

R40

Somnolence, stupor and coma

▽ 1905

Excludes:—coma:

- ~~diabetic (E10–E14)~~
- ~~hepatic (K72.–)~~
- ~~hypoglycaemic (nondiabetic) (E15)~~
- ~~neonatal (P91.5)~~
- ~~that with any head injury classifiable to Chapter 19 (S06.01–S06.05)~~
- ~~uraemic (N19)~~

R40.0

Somnolence

[Decreased \(level of\) consciousness \(nontraumatic\)](#)

Drowsiness

[GCS score 13–15](#)

R40.1

Stupor

[GCS score 9–12](#)

Semicoma

Excludes: stupor:

- catatonic (F20.2)
- depressive (F31–F33)
- dissociative (F44.2)
- manic (F30.2)

[that with any head injury classifiable to Chapter 19 \(S06.01–S06.05\)](#)

R40.2 Coma, ~~unspecified~~
[GCS score < 8](#)
[Loss of consciousness \(nontraumatic\) NOS](#)
 Unconsciousness NOS

Excludes: coma:

- [diabetic \(E10–E14\)](#)
- [hepatic \(K72.-\)](#)
- [hypoglycaemic \(nondiabetic\) \(E15\)](#)
- [neonatal \(P91.5\)](#)
- [that with any head injury classifiable to Chapter 19 \(S06.01–S06.05\)](#)
- [uraemic \(N19\)](#)
- [syncope \(R55\)](#)

Alphabetic Index

Attack

...
 - transient ischaemic (TIA) G45.9
 - - specified NEC G45.8
 - unconsciousness ~~R55~~[R40.2](#)
 - - hysterical F44.88
 - vasomotor R55
 ...

Decrease(d)

- blood
 - - platelets (*see also Thrombocytopenia*) D69.6
 - - pressure, due to shock following injury T79.4
[- consciousness \(cause unknown\) \(level\) \(nontraumatic\) NEC R40.0](#)
[- - GCS score](#)
[- - - ≤ 8 R40.2](#)
[- - - 9–12 R40.1](#)
[- - - 13–15 R40.0](#)
[- - underlying cause identified — *see condition*](#)
 - fetal movements (no underlying cause) NEC O36.8
 - - underlying cause identified — *see condition*

Loss (of)

- appetite R63.0
 - - hysterical F50.8
 - - nonorganic origin F50.8
 - - psychogenic F50.8
 - blood — *see Haemorrhage*
 - consciousness ~~S06.01~~
~~— brief [< 30 minutes] S06.02~~
~~— moderate [30 mins to 24 hrs] S06.03~~
~~— prolonged [> 24 hours] S06.04~~
~~— with return to previous conscious level S06.04~~
~~— without return to previous conscious level S06.05~~
[- - nontraumatic NEC R40.2](#)
[- - - GCS score](#)
[- - - - ≤ 8 R40.2](#)
[- - - - 9–12 R40.1](#)
[- - - - 13–15 R40.0](#)
[- - traumatic NEC S06.01](#)
[- - - brief \(< 30 minutes\) S06.02](#)
[- - - moderate \(30 mins to 24 hrs\) S06.03](#)
[- - - prolonged \(> 24 hours\) S06.04](#)
[- - - - with return to previous conscious level S06.04](#)
[- - - - without return to previous conscious level S06.05](#)
 - control, sphincter, rectum R15

...

State (of)

...

- crisis F43.0

- [decreased consciousness \(see also Decrease\(d\)/consciousness\) R40.0](#)

- - GCS score

- - - ≤ 8 R40.2

- - - 9–12 R40.1

- - - 13–15 R40.0

- - underlying cause identified — [see condition](#)

- depressive NEC F32.9-

...

Unconscious(ness) R40.2

- [collapse R55](#)

Under observation (see also Observation) Z03.9

- newborn Z03.7-

...

Australian Coding Standards

1905 CLOSED HEAD INJURY/LOSS OF CONSCIOUSNESS/CONCUSSION

...

Coma unrelated to head injury

Use the following symptom codes where **no head injury** is documented:

R40.0 *Somnolence*

R40.1 *Stupor*

R40.2 *Coma, ~~unspecified~~*

EXAMPLE 5:

Patient admitted to hospital following a motor vehicle accident (MVA) with abdominal pain but no reported head injury. The patient's state of consciousness deteriorated over the following 24 hours. However, a CT scan of the head showed no abnormalities. The patient was subsequently diagnosed with a fat embolus and remained in a coma for three days.

Codes: T79.1 *Fat embolism (traumatic)*

R40.2 *Coma, ~~unspecified~~*

The code S06.9 *Intracranial injury, unspecified* should be used rarely and only where a more specific diagnosis cannot be abstracted from the record.

...



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

Double balloon enteroscopy

Introduction/Rationale:

A public submission (P264) was received highlighting inconsistencies in the ACHI Alphabetic Index for double balloon enteroscopy (DBE) when performed via retrograde approach, through the lower digestive tract.

Double balloon enteroscopy (DBE) is an endoscopic technique that allows examination of the small intestine beyond the reach of other endoscopes. The system consists of an endoscope with balloons attached and an overtube. The scope is advanced through the length of small intestine by alternately inflating and deflating a single or double balloons, gripping the walls of the small intestine and pleating the bowel over a tube creating an effect similar to pulling a curtain over a rod. It may be performed via per oral (antegrade) or per rectal (retrograde) route for both diagnostic and therapeutic purposes. While the approaches of DBE are similar to upper endoscopy (EGD) and colonoscopy, DBE may require several hours and is often performed with general anaesthesia (American Society for Gastrointestinal Endoscopy 2014).

Procedures on the small intestine such as biopsies, endoscopic haemostasis using injection and argon plasma coagulation (APC), balloon dilatation, polypectomy, stent placement, removal of foreign body, endoscopic mucosal resection and destruction of lesions can be performed through double balloon enteroscopy (Aetna 2017).

DBE is also used to evaluate the intestine, stomach and bile duct in patients with surgically altered bowel anatomy such as gastric bypass, Billroth II gastrectomy and Roux-en-Y anastomosis during liver transplantation. DBE assisted endoscopic retrograde cholangiopancreatography (ERCP) is performed for bile duct stones in patients with altered bowel anatomy as the standard ERCP endoscope usually is unable to negotiate the sharp turns of the altered intestine (Mayo clinic 2017).

There are four MBS items, 30680, 30682, 30884 and 30686 for DBE which are currently mapped to panendoscopy codes 30473-xx and 30478-xx in ACHI Appendix A.

In ACHI, ileoscopic DBE when performed via retrograde approach is classified to 32090-00 **[905]** *Fibreoptic colonoscopy to caecum* (per Alphabetic Index *Ileoscopy/via/colonoscopy* — see *Colonoscopy*).

Following the Alphabetic Index *Colonoscopy/with/destruction of lesion* or *Colonoscopy/with/excision of/lesion*, an ileoscopic DBE with destruction or excision of lesion of small intestine is incorrectly classified to a procedure of the large intestine such as 90308-00 **[908]** *Endoscopic destruction of lesion or tissue of large intestine* or 90959-00 **[914]** *Excision of other lesion of large intestine*.

It was also noted that double balloon enteroscopy appears as an *Includes* note at panendoscopy blocks **[1005]** – **[1008]** resulting in inconsistencies in the classification of DBE.

ACCD proposes creation of 30680-00 *Balloon enteroscopy* at block **[1005]** *Panendoscopy*, for assignment in conjunction with interventions classified to blocks **[892]**, **[957]**, **[1006]**, **[1007]** and **[1008]** when performed with double balloon enteroscopy.

ACCD PROPOSAL

Tabular List

892 Application, insertion or removal procedures on small intestine

Includes: ~~double balloon enteroscopy~~

Code also when performed:

• [balloon enteroscopy \(30680-00 \[1005\]\)](#)

30487-00 Intubation of small intestine

Includes: biopsy

30478-05 Percutaneous endoscopic jejunostomy [PEJ]

90306-00 Laparoscopic insertion of feeding jejunostomy tube

31462-00 Insertion of feeding jejunostomy tube

92068-00 Endoscopic insertion of duodenal prosthesis

Endoscopic insertion of duodenal stent:

- metal (Wallstent)
- plastic

Includes: dilation of duodenum

957 Examination of gallbladder or biliary tract

...

30484-01 Endoscopic retrograde cholangiography [ERC]

Includes: biopsy

Code also when performed:

• [balloon enteroscopy \(30680-00 \[1005\]\)](#)

30484-00 Endoscopic retrograde cholangiopancreatography [ERCP]

Includes: biopsy

Code also when performed:

• [balloon enteroscopy \(30680-00 \[1005\]\)](#)

Excludes: endoscopic retrograde pancreatography [ERP] (30484-02 [974])

EXAMINATION

1005 Panendoscopy

▽ 0024

Includes: ~~double balloon enteroscopy~~

11820-00 Panendoscopy via camera capsule

~~Camera pill~~

~~Capsule~~

~~Gastrointestinal
camera capsule~~

endoscopy

[Camera pill endoscopy](#)

[Capsule endoscopy](#)

[Gastrointestinal camera capsule endoscopy](#)

30473-00 Panendoscopy to duodenum

Duodenoscopy

Gastroscopy

Oesophagogastroduodenoscopy [EGD]

30473-02 Panendoscopy through artificial stoma

Gastroscopy through artificial stoma

Oesophagogastroduodenoscopy [EGD] through artificial stoma

Excludes: duodenoscopy through artificial stoma (32095-00 [891])
endoscopic examination of small bowel through artificial stoma (32095-00 [891])

30473-07 Panendoscopy to duodenum with administration of tattooing agent

Chromoendoscopy to duodenum

30473-05 Panendoscopy to ileum

Ileoscopy

Jejunoscopy

Excludes: that with balloon enteroscopy (30680-00 [1005])

30473-08 Panendoscopy to ileum with administration of tattooing agent

Chromoendoscopy to ileum

Code also when performed:

• [balloon enteroscopy \(30680-00 \[1005\]\)](#)

[30680-00 Balloon enteroscopy](#)

[Double balloon enteroscopy](#)

[Single balloon enteroscopy](#)

Includes: that via:

• [antegrade approach](#)

• [retrograde approach](#)

Code also when performed:

• [endoscopic examination of gallbladder and biliary tract \(30484-00, 30484-01 \[957\]\)](#)

• [endoscopic procedure\(s\) performed on duodenum, jejunum and ileum \(see blocks \[892\], \[1005\] to \[1008\]\)](#)

APPLICATION, INSERTION, REMOVAL

1006 Panendoscopy with removal of foreign body

▽ 0024

~~**Includes:** double balloon enteroscopy~~

Code also when performed:

• [balloon enteroscopy \(30680-00 \[1005\]\)](#)

30478-00 Panendoscopy to duodenum with removal of foreign body

[Removal of foreign body via:](#)

• [duodenoscopy](#)

• [gastroscopy](#)

• [oesophagogastroduodenoscopy \[EGD\]](#)

~~Duodenoscopy~~
~~Gastroscopy~~
~~Oesophagogastroduodenoscopy [EGD]~~ | with removal of foreign body

Excludes: that with rigid oesophagoscope (41825-00 [852])

- 30478-14 Panendoscopy to ileum with removal of foreign body
Removal of foreign body via:
- ileoscopy
 - jejunoscopy

DESTRUCTION

1007 Panendoscopy with destruction

▽ 0024

Destruction via:

- [duodenoscopy](#)
- [gastroscopy](#)
- [oesophagogastroduodenoscopy \[EGD\]](#)

~~Duodenoscopy~~
~~Gastroscopy~~
~~Oesophagogastroduodenoscopy [EGD]~~ | with destruction

Includes: ~~double balloon enteroscopy~~

Code also when performed:

- [balloon enteroscopy \(30680-00 \[1005\]\)](#)

- 30478-01 Panendoscopy to duodenum with diathermy
- 30478-02 Panendoscopy to duodenum with heater probe coagulation
- 30478-03 Panendoscopy to duodenum with laser coagulation
- 30478-20 Panendoscopy to duodenum with other coagulation
Panendoscopy to duodenum with Argon plasma coagulation
- 30478-15 Panendoscopy to ileum with diathermy
- 30478-16 Panendoscopy to ileum with heater probe coagulation
- 30478-17 Panendoscopy to ileum with laser coagulation
- 30478-21 Panendoscopy to ileum with other coagulation
Panendoscopy to ileum with Argon plasma coagulation

EXCISION

1008 Panendoscopy with excision

▽ 0024

Excision via:

- [duodenoscopy](#)
- [gastroscopy](#)
- [oesophagogastroduodenoscopy \[EGD\]](#)

<p>Duodenoscopy</p> <p>Gastroscopy</p> <p>Oesophagogastroduodenoscopy [EGD]</p>		<p>with excision</p>
---	--	----------------------

Includes: ~~double balloon enteroscopy~~

Code also when performed:

• balloon enteroscopy (30680-00 [1005])

- 30473-01 Panendoscopy to duodenum with biopsy
- 30478-04 Panendoscopy to duodenum with excision of lesion
Panendoscopy to duodenum with excision of polyp
- 30473-06 Panendoscopy to ileum with biopsy
- 30478-18 Panendoscopy to ileum with excision of lesion
Panendoscopy to ileum with excision of polyp

Alphabetic Index

Balloon

- ablation, uterine, thermal (endoscopic) 35622-00 [1263]
- angioplasty — see *Angioplasty/transluminal balloon*
- catheter, for induction of labour 90465-04 [1334]
- [enteroscopy \(antegrade approach\) \(double\) \(retrograde approach\) \(single\) 30680-00 \[1005\]](#)
- occlusion of aorta (rapid) (resuscitative) 35321-11 [768]

Darrach procedure (osteotomy of ulna) 48406-04 [1424]

- with internal fixation 48409-04 [1424]

[DBE \(double balloon enteroscopy\) \(antegrade approach\) \(retrograde approach\) 30680-00 \[1005\]](#)

DCR (dacryocystorhinostomy) 42623-00 [247]

- with fashioning of conjunctival flaps 42629-00 [247]
- redo procedure (reoperation) 42626-00 [248]

Debanding

Dosimetry

- radiation
- - by
- - - computerised tomography (CT) interfacing computer
- - - - for
- - - - - intensity modulated radiation therapy (IMRT) 15524-01 [1799]
- - - - - three dimensional conformal radiation therapy (3DCRT) 15556-00 [1799]
- - - - complex 15524-00 [1799]
- - - - intermediate 15521-00 [1799]
- - - - simple 15518-00 [1799]
- - - non-computerised tomography (non-CT) interfacing computer
- - - - for three dimensional conformal radiation therapy (3DCRT) 15556-01 [1799]
- - - - complex 15533-00 [1799]
- - - - intermediate 15530-00 [1799]
- - - - simple 15527-00 [1799]
- - brachytherapy, computerised
- - - complex 15536-02 [1799]
- - - prostate 15539-00 [1799]
- - - intermediate 15536-01 [1799]
- - - intravascular 15541-00 [1799]
- - - prostate 15539-00 [1799]
- - - simple 15536-00 [1799]

[Double balloon enteroscopy \(DBE\) \(antegrade approach\) \(retrograde approach\) 30680-00 \[1005\]](#)

Douche, vaginal 92103-00 [1901]

Drainage

Duodenoscopy (~~double balloon~~) 30473-00 [1005]

- with
 - - administration (of)
 - - - agent (sclerosing) (to)
 - - - - lesion (varices) 30478-07 [870]
 - - - - tattooing 30473-07 [1005]
 - - biopsy 30473-01 [1008]
 - - - via
 - - - - artificial stoma 32095-00 [891]
 - - - - laparotomy 30569-00 [894]
 - - coagulation
 - - - Argon plasma 30478-20 [1007]
 - - - heater probe 30478-02 [1007]
 - - - laser 30478-03 [1007]
 - - diathermy 30478-01 [1007]
 - - excision
 - - - lesion 30478-04 [1008]
 - - - polyp 30478-04 [1008]
 - - injection of agent to lesion (sclerosing) (sclerotherapy) (varices) 30478-07 [870]
 - - insertion of jejunal tube 30478-05 [892]
 - - removal of foreign body 30478-00 [1006]
 - - repair of Mallory-Weiss laceration 90296-00 [887]
 - - resection of mucosa of stomach 90297-01 [880]
 - via
 - - artificial stoma (with biopsy) 32095-00 [891]
 - - [balloon enteroscopy 30680-00 \[1005\]](#)
 - - intraoperative enterotomy 30568-00 [893]
 - - laparotomy (with biopsy) 30569-00 [894]
- Duodenostomy** 30375-01 [897]

Endoscopy, endoscopic (~~double balloon~~) — see also *Panendoscopy*

[- balloon \(antegrade approach\) \(double\) \(retrograde approach\) \(single\) 30680-00 \[1005\]](#)

- bladder — see *Cystoscopy*
- brain (intraventricular) 40903-00 [1]
- - with biopsy 40903-01 [12]
- camera capsule, gastrointestinal 11820-00 [1005]
- ear 90119-00 [300]

Enteroscopy (double balloon) — see *Panendoscopy* ([single balloon](#)) 30680-00 [1005]

Enterostomy NEC 30375-01 [897]

- caecum — see *Colostomy*
- colon — see *Colostomy*

Ileoscopy (~~double balloon~~) (via panendoscopy) 30473-05 [1005]

- with
- - administration of tattooing agent 30473-08 [1005]
- - biopsy 30473-06 [1008]
- - - via
- - - - artificial stoma 32095-00 [891]
- - - - laparotomy 30569-00 [894]
- - coagulation
- - - Argon plasma 30478-21 [1007]
- - - heater probe 30478-16 [1007]
- - - laser 30478-17 [1007]
- - diathermy 30478-15 [1007]
- - excision of lesion (polyp) 30478-18 [1008]
- - removal of foreign body 30478-14 [1006]
- - repair of Mallory-Weiss laceration 90296-00 [887]
- - resection of mucosa of stomach 90297-01 [880]
- via
- - artificial stoma (with biopsy) 32095-00 [891]
- - [balloon enteroscopy 30680-00 \[1005\]](#)
- ~~colonoscopy~~ — see *Colonoscopy*

- - intraoperative enterotomy 30568-00 [893]
- - laparotomy (with biopsy) 30569-00 [894]
- Ileostomy** (permanent) 30375-01 [897]

- Jejunectomy** (with anastomosis) 30566-00 [895]
- with formation of
- - reservoir — see *Formation/reservoir*
- - stoma 30565-00 [895]

Jejunoscopy (~~double balloon~~) — see *Panendoscopy/to ileum* (via panendoscopy) 30473-05 [1005]
 - via balloon enteroscopy 30680-00 [1005]

- Jejunostomy** (feeding) (open) 31462-00 [892]
- percutaneous (endoscopic) (PEJ) 30478-05 [892]
- via laparoscopy 90306-00 [892]

Panendoscopy (~~double balloon~~) (to duodenum) 30473-00 [1005]

- by ~~camera capsule 11820-00 [1005]~~
- - balloon enteroscopy 30680-00 [1005]
- - camera capsule 11820-00 [1005]
- with
- - administration (of)
- - - agent (sclerosing) (to)

- ...
- to ileum (beyond duodenum) (*jejunum*) 30473-05 [1005]
- - with
- - - administration of tattooing agent 30473-08 [1005]
- - - biopsy 30473-06 [1008]
- - - coagulation
- - - Argon plasma 30478-21 [1007]
- - - heater probe 30478-16 [1007]
- - - laser 30478-17 [1007]
- - - diathermy 30478-15 [1007]
- - - excision of lesion (polyp) 30478-18 [1008]
- - - removal of foreign body 30478-14 [1006]
- - - repair of Mallory-Weiss laceration 90296-00 [887]
- - - resection of mucosa of stomach 90297-01 [880]

- - via
- - - balloon enteroscopy 30680-00 [1005]
- - - camera capsule 11820-00 [1005]

Papanicolaou smear (pap smear) 92130-00 [1862]

...

Australian Coding Standards

Not applicable

Appendix A Mapping Table

30675	30676
30680	30473
30682	30478 30680
30684	30478 30680
30686	30478 30680
30687	30478



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**Endoscopic injection of tattoo markers into
gastrointestinal lesions**

Introduction/Rationale:

This addenda proposal is the result of a query Q2855 *Lipoidal or histoacryl markers in the oesophagus* and Coding Rule *Injection of markers into lesions of the gastrointestinal tract* published on December 2015 and updated on July 2017.

Tattooing agents are used to mark a small lesion in the gastrointestinal tract to facilitate identification of the lesion’s location for subsequent surgery or follow up. Research has indicated that the radiopaque Lipiodol marker is used as a fiducial marker in image guided radiation therapy (IGRT) for tumours of the bladder, lung, prostate, etc. (Australian New Zealand Clinical Trials Registry (ANZCTR) 2013; Wilder 2014). For classification purposes, injection of Lipiodol for localisation of tumour prior to radiotherapy is classified to 37217-01 **[1800]** *Implantation of fiducial markers*.

ACCD proposes to improve the classification of endoscopic injection of tattooing agents in the Tabular List and the Alphabetic Index, and removing ACS 0023 symbol at 37217-01 **[1800]** *Implantation of fiducial markers* as there is no relationship between this code and the ACS. The term ‘radio-opaque’ in the *Inclusion* term at 97678-00 **[473]** *Provision of diagnostic template* will be amended for consistency.

ACCD PROPOSAL

Tabular List

473 Implant prosthesis

97661-00 Fitting of implant abutment, per abutment
Fitting of final implant abutment or replacement of an existing abutment

Excludes: fitting of provisional implant:
• abutment (97633-00 **[471]**)
• restoration (97634-01 **[471]**)

97663-00 Surgical removal of dental implant and/or retention device

...

97678-00 Provision of diagnostic template
Template incorporating ~~radio-opaque~~ radiopaque markers as reference marks for preferred implant and restoration placement

Excludes: template used as a surgical implant guide (97679-00 **[473]**)

97679-00 Provision of surgical implant guide
Provision of an appliance which indicates the ideal location and angulation for insertion of implants

905 Fiberoptic colonoscopy

Colonoscopy via artificial stoma

32084-00 Fiberoptic colonoscopy to hepatic flexure
Flexible sigmoidoscopy
Short colonoscopy

Excludes: that beyond hepatic flexure (32090 [905] and [911], 32093-00 [911])
that with:
• biopsy (32084-01 [911])
• polypectomy (32087-00 [911])

32084-02 Fiberoptic colonoscopy to hepatic flexure with administration of tattooing agent
Chromoendoscopy to hepatic flexure
[Fiberoptic colonoscopy to hepatic flexure with administration of \(radiolucent\) markers](#)

Includes: that with:
• [carbon particles \(SPOT\)](#)
• [India ink](#)

Excludes: implantation of fiducial (radiopaque) markers (37217-01 [1800])

32090-00 Fiberoptic colonoscopy to caecum
Long colonoscopy

Includes: viewing of ileum

Excludes: that with:
• biopsy (32090-01 [911])
• polypectomy (32093-00 [911])

32090-02 Fiberoptic colonoscopy to caecum with administration of tattooing agent
Chromoendoscopy to caecum
[Fiberoptic colonoscopy to caecum with administration of \(radiolucent\) markers](#)

Includes: that with:
• [carbon particles \(SPOT\)](#)
• [India ink](#)

Excludes: implantation of fiducial (radiopaque) markers (37217-01 [1800])

...

1005 Panendoscopy

▽ 0024

Includes: double balloon enteroscopy

11820-00 Panendoscopy via camera capsule

~~Camera pill~~
~~Capsule~~
~~Gastrointestinal camera capsule~~ | endoscopy

[Camera pill endoscopy](#)
[Capsule endoscopy](#)
[Gastrointestinal camera capsule endoscopy](#)

30473-00 Panendoscopy to duodenum
Duodenoscopy
Gastroscopy
Oesophagogastrroduodenoscopy [EGD]

30473-02 Panendoscopy through artificial stoma
 Gastroscopy through artificial stoma
 Oesophagogastroduodenoscopy [EGD] through artificial stoma
Excludes: duodenoscopy through artificial stoma (32095-00 [891])
 endoscopic examination of small bowel through artificial stoma (32095-00 [891])

30473-07 Panendoscopy to duodenum with administration of tattooing agent
 Chromoendoscopy to duodenum
[Panendoscopy to duodenum with administration of \(radiolucent\) markers](#)
Includes: that with:
 • [carbon particles \(SPOT\)](#)
 • [India ink](#)
Excludes: [implantation of fiducial \(radiopaque\) markers \(37217-01 \[1800\]\)](#)

30473-05 Panendoscopy to ileum
 Ileoscopy
 Jejunoscopy

30473-08 Panendoscopy to ileum with administration of tattooing agent
 Chromoendoscopy to ileum
[Panendoscopy to ileum with administration of \(radiolucent\) markers](#)
Includes: that with:
 • [carbon particles \(SPOT\)](#)
 • [India ink](#)
Excludes: [implantation of fiducial \(radiopaque\) markers \(37217-01 \[1800\]\)](#)

...

1800 Implantation of device for radiotherapy guidance

37217-01 Implantation of fiducial markers
~~▽-0023~~

Alphabetic Index

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*

...

- type of agent
- - Macroplastique
- - - paraurethra, for stress incontinence (female) 37339-00 [1110]
- - - - male 37339-01 [1109]
- - [marker\(s\)](#)
- - - [fiducial \(Lipiodol\) \(radiopaque\) 37217-01 \[1800\]](#)
- - - [tattoo — see Administration/type of agent/tattoo, tattooing](#)
- - Methotrexate, intramuscular 96197-19 [1920]
- - - for ectopic pregnancy 35677-03 [1256]
- ...
- - serum NEC 92062-00 [1893]
- - sperm, intracytoplasmic (for reproductive medicine procedure) 13251-00 [1177]
- - SPOT — *see Administration/type of agent/tattoo, tattooing*
- - stem cells, adipose-derived 14203-01 [1906]
- - steroid NEC — *code to block [1920] with extension -03 (see also Administration/specified site)*
- ...
- - [tattoo, tattooing \(India ink\) \(radiolucent\) \(SPOT\)](#)
- - - ~~by~~ [via](#)
- - - - colonoscopy (to caecum) 32090-02 [905]

- to hepatic flexure 32084-02 [905]
- panendoscopy (to duodenum) 30473-07 [1005]
- to ileum 30473-08 [1005]
- thrombocytes 13706-03 [1893]

Colonoscopy (beyond hepatic flexure) (fiberoptic) (long) (to caecum) 32090-00 [905]

- by computerised tomography, colon (following incomplete colonoscopy) 56549-01 [1962]
- with
 - administration of tattooing agent ([India ink](#)) ([markers](#)) ([radiolucent](#)) ([SPOT](#)) 32090-02 [905]
 - biopsy (multiple) 32090-01 [911]
 - destruction of lesion 90308-00 [908]
 - excision of
 - lesion 90959-00 [914]
 - anal 90315-00 [933]
 - skin tag, anal (multiple) 32093-00 [911]
 - insertion of prosthesis (stent)
 - colon 32023-00 [906]
 - rectum 32023-03 [929]
 - polypectomy (by bipolar cautery) (mucosal resection) (multiple) (using hot biopsy forceps) (using snare technique) 32093-00 [911]
 - removal of prosthesis (stent)
 - colon 32023-02 [906]
 - with replacement 32023-01 [906]
 - rectum 32023-05 [929]
 - with replacement 32023-04 [929]
 - replacement of prosthesis (stent)
 - colon 32023-01 [906]
 - rectum 32023-04 [929]
 - resection of mucosa of large intestine 90297-02 [914]
 - through artificial stoma 32090-00 [905]
 - to hepatic flexure (short) 32084-00 [905]
 - with
 - administration of tattooing agent ([India ink](#)) ([markers](#)) ([radiolucent](#)) ([SPOT](#)) 32084-02 [905]
 - biopsy (multiple) 32084-01 [911]
 - destruction of lesion 90308-00 [908]
 - excision of

Duodenoscopy (double balloon) 30473-00 [1005]

- with
 - administration (of)
 - agent (sclerosing) (to)
 - lesion (varices) 30478-07 [870]
 - tattooing ([India ink](#)) ([markers](#)) ([radiolucent](#)) ([SPOT](#)) 30473-07 [1005]
 - biopsy 30473-01 [1008]

Gastrosocopy 30473-00 [1005]

- with
 - administration (of)
 - agent (sclerosing) (to)
 - lesion (varices) 30478-07 [870]
 - tattooing ([India ink](#)) ([markers](#)) ([radiolucent](#)) ([SPOT](#)) 30473-07 [1005]
 - banding of gastric varices 30476-03 [874]
 - biopsy (Campylobacter like organism test) (urease test) 30473-01 [1008]

Ileoscopy (double balloon) (via panendoscopy) 30473-05 [1005]

- with
 - administration of tattooing agent ([India ink](#)) ([markers](#)) ([radiolucent](#)) ([SPOT](#)) 30473-08 [1005]
 - biopsy 30473-06 [1008]

- - - via
- - - - artificial stoma 32095-00 **[891]**

Implant, implantation — *see also Insertion*

- ...
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) — *see Insertion/tissue expander*
- fiducial marker(s) (fiducial seed) (fiduciary marker) (gold fiducial marker) [\(Lipiodol\) \(radiopaque\)](#) 37217-01 **[1800]**
- generator
- - defibrillator, cardiac (automatic) (with pacemaker functionality) 38393-00 **[653]**

Insertion

- ...
- device — *see also Insertion/by type of device*
- ...
- - fiducial marker(s) (fiducial seed) (fiduciary marker) (gold fiducial marker) [\(Lipiodol\) \(radiopaque\)](#) 37217-01 **[1800]**
- - fixation, internal
- - - bone — *see also Fixation/bone*
- ...
- fiducial marker(s) (fiducial seed) (fiduciary marker) (gold fiducial marker) [\(Lipiodol\) \(radiopaque\)](#) 37217-01 **[1800]**
- filter
- - inferior vena cava (open) 35330-01 **[723]**
- - - percutaneous 35330-00 **[723]**
- fixation device
- ...

Oesophagoscopy (flexible) 30473-03 **[850]**

- with
- - ablation of lesion (tissue) 30478-22 **[856]**
- - administration of tattooing agent [\(India ink\) \(markers\) \(radiolucent\) \(SPOT\)](#) 30473-07 **[1005]**
- - biopsy 30473-04 **[861]**
- - - rigid 41822-00 **[861]**
- - - through artificial stoma 41822-00 **[861]**
- - coagulation (Argon plasma) (heater probe) 30478-22 **[856]**

Panendoscopy (double balloon) (to duodenum) 30473-00 **[1005]**

- by camera capsule 11820-00 **[1005]**
- with
- - administration (of)
- - - agent (sclerosing) (to)
- - - - lesion (varices) 30478-07 **[870]**
- - - - tattooing [\(India ink\) \(markers\) \(radiolucent\) \(SPOT\)](#) 30473-07 **[1005]**
- - biopsy (campylobacter like organism test) (urease test) 30473-01 **[1008]**
- - coagulation
- - - Argon plasma 30478-20 **[1007]**
- - - heater probe 30478-02 **[1007]**
- - - laser 30478-03 **[1007]**
- - diathermy 30478-01 **[1007]**
- - excision of lesion (polyp) 30478-04 **[1008]**
- - injection of agent ~~(to) lesion (sclerosing) (sclerotherapy) (varices) 30478-07 [870]~~
- - - [lesion \(sclerosing\) \(varices\) 30478-07 \[870\]](#)
- - - [tattooing \(India ink\) \(markers\) \(radiolucent\) \(SPOT\) 30473-07 \[1005\]](#)
- - removal of foreign body 30478-00 **[1006]**

- - repair of Mallory-Weiss laceration 90296-00 [887]
- - resection of mucosa of stomach 90297-01 [880]
- oesophagus — see *Oesophagoscopy*
- through artificial stoma 30473-02 [1005]
- - duodenum 32095-00 [891]
- to ileum (beyond duodenum) 30473-05 [1005]
- - with
- - - administration of tattooing agent [\(India ink\) \(markers\) \(radiolucent\) \(SPOT\)](#) 30473-08 [1005]
- - - biopsy 30473-06 [1008]
- - - coagulation
- - - Argon plasma 30478-21 [1007]

[Tattoo, Tattooing \(India ink\) \(markers\) \(radiolucent\) \(SPOT\)](#)

- by
- ~~— colonoscopy (to caecum) 32090-02 [905]~~
- ~~— to hepatic flexure 32084-02 [905]~~
- ~~— panendoscopy (to duodenum) 30473-07 [1005]~~
- ~~— to ileum 30473-08 [1005]~~
- cornea 90067-00 [176]
- skin 30207-00 [1602]
- - for creation of facsimile of nipple or areola 45546-00 [1741]
- via
- - colonoscopy (to caecum) 32090-02 [905]
- - - to hepatic flexure 32084-02 [905]
- - panendoscopy (to duodenum) 30473-07 [1005]
- - - to ileum 30473-08 [1005]

Telemetry (cardiac) 92057-00 [1857]

Australian Coding Standards

N/A



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

ENT Review

Introduction/Rationale:

This addenda proposal was initiated following the receipt of a number of coding queries (Q2685, Q2911, Q3030, Q3035, Q3068 & Q3178) and public submissions (P332, P334, P335 & P337), which identified that a review of ACHI across Chapter 4 *Procedures on ear and mastoid process* and Chapter 5 *Procedures on nose, mouth and pharynx* was required, with associated changes to the ACS and ICD-10-AM as appropriate.

This addenda proposal also incorporates some smaller tasks (TN431, TN479, TN801, TN1078, TN1122, TN1216 and TN1358).

In line with previous amendments across ACHI, this review across Chapters 4 and 5 has incorporated the following core principles:

- Individual techniques for destruction have been removed and destruction procedures classified to a singular code for a site.
- Diagnostic concepts have been removed from intervention category and code titles where possible.
- Codes with similar procedural concepts have been combined into a single code.
- In accordance with ACCD protocol for ACHI chapter reviews; the ACHI frequency data was evaluated, and where intervention codes demonstrated low or nil usage ACCD proposes to delete the code and merge the clinical concept elsewhere in ACHI as appropriate.

A review of diagnosis and procedure coding for the insertion and removal of myringotomy tubes identified that due to the high frequency of use, and specific nature of these procedures, that dedicated insertion and removal codes within the same ACHI block were required. Similarly, a review of ACS 0803 *Admission for removal of grommets* identified that admissions to remove myringotomy tubes required a revision with regard to the principal diagnosis selection. These changes to myringotomy tube classification are consistent with other international classifications including ICD-11.

ACCD also proposes the creation of a single code to classify Functional Endoscopic Sinus Surgery (FESS) (in a similar format as the single event multilevel surgery (SEMLS) interventions in block [1580]) to assist in the classification of this complex operative intervention. The proposed FESS code would significantly reduce coder burden, would maintain the correct DRG allocation where documentation also indicated specific interventions, and it would improve DRG allocation in those situations where documentation only states 'FESS' with no or ambiguous specific intervention detail.

These advantages need to be considered in light of the overall inevitable data loss of discrete procedural detail within the single operative FESS episodes.

ACCD PROPOSAL

ICD-10-AM Tabular List

H72 Perforation of tympanic membrane

Includes: perforation of ear drum
• persistent post traumatic
• postinflammatory

Excludes traumatic rupture of ear drum (S09.2)

H72.0 Central perforation of tympanic membrane

H72.1 Attic perforation of tympanic membrane
Perforation of pars flaccida

H72.2 Other marginal perforations of tympanic membrane

H72.8 Other perforations of tympanic membrane

[Tympanic membrane](#) Pperforation(s):

• [multiple](#)

• [total](#)

• ~~multiple~~ | ~~of tympanic membrane~~

• ~~total~~

H72.9 Perforation of tympanic membrane, unspecified

~~▽-0803~~

Excludes: [that requiring adjustment and management of myringotomy tube \(Z45.83\)](#)

...

Z45.8 Adjustment and management of other implanted devices

...

✳Z45.82 Adjustment and management of peritoneal access device
Adjustment and management of implanted peritoneal port-catheter

Excludes: that for:
• dialysis (Z49.0)
• pharmacotherapy for neoplasm (Z51.1)

✳Z45.83 [Adjustment and management of myringotomy tube](#)

✳Z45.89 Adjustment and management of other implanted devices

Excludes: that for pharmacotherapy for neoplasm (Z51.1)

Z45.9 Adjustment and management of unspecified implanted device

...

ICD-10-AM Alphabetic Index

Adjustment

...

- device (related to) NEC Z46.9

...

- - infusion or pump (external) (implantable spinal) Z45.1

- - [myringotomy tube \(grommet\) Z45.83](#)

- - nervous system Z46.2

...

- - substitution

- - - auditory Z46.2

- - - visual Z46.2

- - [tympanostomy tube \(grommet\) Z45.83](#)

- - urinary Z46.6

- - vascular access (infusion port) (Port-A-Cath) (reservoir) Z45.2

- disorder F43.2

- drug delivery device or pump (CADD) (external) (implantable spinal) Z45.1
- implanted hearing device Z45.3
- infusion device or pump (external) (implantable spinal) Z45.1
- intestinal appliance NEC Z46.5
- [myringotomy tube \(grommet\) Z45.83](#)
- pacemaker
- - cardiac Z45.0
- - carotid sinus Z45.0
- peritoneal access device Z45.82
- reaction F43.2
- subdermal hormone implant Z30.5
- [tyimpanostomy tube \(grommet\) Z45.83](#)
- ureteral stent Z46.6
- ...
- Removal** (from) (of)
- ...
- device
- - contraceptive (intrauterine) (IUCD) Z30.5
- - drug delivery or pump (CADD) (external) (implantable spinal) Z45.1
- - fixation (internal) Z47.0
- - - external Z47.8
- - infusion or pump (external) (implantable spinal) Z45.1
- - [myringotomy tube \(grommet\) Z45.83](#)
- - traction Z47.8
- - [tyimpanostomy tube \(grommet\) Z45.83](#)
- - vascular access (infusion port) (Port-A-Cath) (reservoir) Z45.2
- dialysis catheter Z49.0
- ...
- Kirschner wire Z47.0
- [myringotomy tube \(grommet\) Z45.83](#)
- nasolacrimal tube Z48.8
- ...
- traction device, external Z47.8
- [tyimpanostomy tube \(grommet\) Z45.83](#)
- ureteral stent Z46.6
- urinary catheter (indwelling) Z46.6
- vascular access device (infusion port) (Port-A-Cath) (reservoir) Z45.2
- ...

ACHI Tabular List

25

Procedures for skull fracture

Cranioplasty for skull fracture

...

- 39609-00 Debridement of compound skull fracture
- 39609-01 Elevation of compound skull fracture
Reduction of compound depressed skull fracture
Includes: [that for compound \(open\) frontal sinus fracture](#)
- 39612-00 Elevation of compound skull fracture with repair of dura and brain
Reduction of compound depressed skull fracture with repair of dura and brain
Includes: [that for compound \(open\) frontal sinus fracture](#)
Excludes: delayed repair of dura following fractured skull (39615 [20])
- 39609-02 Reduction of compound skull fracture
Repair of compound comminuted skull fracture
Includes: internal fixation
[that for compound \(open\) frontal sinus fracture](#)
- 39612-01 Reduction of compound skull fracture with repair of dura and brain
Repair of compound comminuted skull fracture and dura and brain
Includes: internal fixation

[that for compound \(open\) frontal sinus fracture](#)

Excludes: delayed repair of dura following fractured skull (39615 [20])

73 Division of intracranial nerve

39106-00 Division of intracranial trigeminal nerve

Gasserian ganglionectomy

Intracranial:

- neurectomy for trigeminal neuralgia
- trigeminal neurotomy

Section of intracranial trigeminal nerve

39500-00 Intracranial section of vestibular nerve

Intracranial division of vestibular nerve

Includes: that via posterior cranial fossa

Excludes: that via: [retrolabyrinthine or translabyrinthine approach \(41596-03 \[331\]\)](#)

~~• retrolabyrinthine approach (41596-00, 41596-02 [331])~~

~~• translabyrinthine approach (41593-00 [331])~~

301 Application, insertion or removal procedures on external ear

41500-00 Removal of foreign body from auditory canal without incision

Excludes: removal of [myringotomy tympanostomy tube \(41632-04, 41632-05 \[308\]\)](#) ~~(41644-00 [312])~~

...

302 Incision procedures on auditory canal

41503-00 Removal of foreign body from auditory canal by incision

Excludes: removal of [myringotomy tympanostomy tube \(41632-04, 41632-05 \[308\]\)](#) ~~(41644-00 [312])~~

...

305 Reconstruction procedures on external ear

41512-00 Reconstruction of external auditory canal

Meatoplasty

Includes: removal of:

- bone
- cartilage

Code also when performed:

- radical (modified) mastoidectomy (41557 [323], 41560 [325], 41563 [326])

Excludes: that for correction of auditory canal stenosis (41521 [304])

~~45662-00 Reconstruction of external auditory canal for congenital atresia~~

~~*Excludes:* that for correction of auditory canal stenosis (41521-00, 41521-01 [304])~~

...

308 Application, insertion or removal procedures on eardrum or middle ear

41755-00 Catheterisation of eustachian tube

41647-00 Ear toilet, unilateral

Removal of wax (cerumen) from ear, unilateral

Excludes: that with any other procedure on the ear – omit code

41647-01 Ear toilet, bilateral
Removal of wax (cerumen) from ear, bilateral

Excludes: that with any other procedure on the ear – omit code

41632-02 Insertion of myringotomy tube, unilateral

41632-03 Insertion of myringotomy tube, bilateral

41632-04 Removal of myringotomy tube, unilateral

Code also when performed:

• myringoplasty (see block [313])

41632-05 Removal of myringotomy tube, bilateral

Code also when performed:

• myringoplasty (see block [313])

309

Myringotomy

Myringotomy with:

- aspiration of middle ear
- drainage of abscess

Excludes: that with insertion of tube (41632-02, 41632-03 [308])

41626-00 Myringotomy, unilateral

41626-01 Myringotomy, bilateral

~~41632-00 Myringotomy with insertion of tube, unilateral~~

~~41632-01 Myringotomy with insertion of tube, bilateral~~

312

Excision procedures on eardrum or middle ear

30075-29 Biopsy of middle ear

41635-00 Excision of lesion of middle ear

Clearance of:

• ~~cholesteatoma~~

• ~~granuloma~~

• ~~polyp~~

of middle ear

Includes: transmastoid approach with mastoidectomy
transtympanic approach

Excludes: removal of lesion of glomus (41620-00, 41623-00 [312])

that with:

• myringoplasty (41635-01 [313], 41638-01 [315])

• ossicular chain reconstruction (41638-00, 41638-01 [315])

41644-00 Excision of rim of perforated tympanic membrane

~~▽-0803~~

Includes: removal of tympanostomy tube

Excludes: cauterisation of perforated tympanic membrane (41641-00 [311])

~~that with myringoplasty – omit code~~

that with:

• myringoplasty – omit code

• removal of myringotomy tube (41632-04, 41632-05 [308])

~~41620-00 Removal of lesion of glomus, transtympanic approach~~

~~41623-00 Removal of lesion of glomus, transmastoid approach, with mastoidectomy~~

41644-01 Other excision of middle ear

313 Myringoplasty

41635-01 Excision of lesion of middle ear with myringoplasty

Clearance of:

•cholesteatoma	of middle ear with myringoplasty
•granuloma	
•polyp	

Excludes: ~~removal of lesion of glomus (41620-00, 41623-00 [312])~~
that with ossicular chain reconstruction (41638-01 [315])

41527-00 Myringoplasty, transcanal approach

Includes: that by Rosen incision

Excludes: that with ossicular chain reconstruction (41542-00, [41638-01](#) [315])

...

315 Reconstruction procedures on eardrum or middle ear

...

41638-00 Excision of lesion of middle ear with ossicular chain reconstruction

Clearance of:

•cholesteatoma	of middle ear with ossicular chain reconstruction
•granuloma	
•polyp	

Includes: graft
prosthesis

Excludes: ~~removal of lesion of glomus (41620-00, 41623-00 [312])~~
that with myringoplasty (41638-01 [315])

41638-01 Excision of lesion of middle ear with myringoplasty and ossicular chain reconstruction

Clearance of:

•cholesteatoma	of middle ear with myringoplasty and ossicular chain reconstruction
•granuloma	
•polyp	

Includes: graft
prosthesis

Excludes: ~~removal of lesion of glomus (41620-00, 41623-00 [312])~~

316 Other procedures on eardrum or middle ear

Includes: internal auditory meatus
tympanic membrane

[90114-01 Administration of agent into middle ear
Intratympanic injection](#)

90113-00 Other procedures on eustachian tube

90114-00 Other procedures on eardrum or middle ear

...

323 Mastoidectomy

Excludes: that with:

- decompression of endolymphatic sac (41590-00 [330])
- implantation of cochlear prosthetic device ([41617-02, 41617-05 \[334\]](#))~~(41617-00 [329])~~
- myringoplasty (41551-00, 41560 [325], 41554-00, 41563 [326])
- ossicular chain reconstruction (41554-00, 41563 [326])
- partial resection of temporal bone (41584 [324])
- ~~removal of glomus lesion (41623-00 [312])~~

41545-00 Mastoidectomy
Cortical mastoidectomy

41557-00 Modified radical mastoidectomy

41557-01 Radical mastoidectomy

41548-00 Obliteration of mastoid cavity

Code also when performed:

- meatoplasty (41512-00 [305])

41564-00 Modified radical mastoidectomy with obliteration of mastoid cavity and eustachian tube and closure of external auditory canal

Includes: [blind-sac closure](#)

41564-01 Radical mastoidectomy with obliteration of mastoid cavity and eustachian tube and closure of external auditory canal

Includes: [blind-sac closure](#)

325 Repair procedures on mastoid or temporal bone

Code also when performed:

- meatoplasty (41512-00 [305])

Excludes: revision of mastoidectomy (41566-01, 41566-02 [327])

that with:

- implantation of cochlear prosthetic device ([41617-02, 41617-05 \[334\]](#))~~(41617-00 [329])~~
- ossicular chain reconstruction (41554-00, 41563 [326])
- partial resection of temporal bone (41584 [324])
- ~~removal of glomus lesion (41623-00 [312])~~

41551-00 Mastoidectomy by intact canal wall technique with myringoplasty

Includes: that with atticotomy

41560-00 Modified radical mastoidectomy with myringoplasty

41560-01 Radical mastoidectomy with myringoplasty

...

330 Incision procedures on inner ear

41572-00 Labyrinthotomy
Destruction of labyrinth
Incision of inner ear

41590-00 Decompression of endolymphatic sac

Includes: mastoidectomy
[with shunt](#)

~~41590-01 Decompression of endolymphatic sac with shunt~~

~~Includes: mastoidectomy~~

331 **Excision procedures on inner ear**

30075-30 Biopsy of inner ear

~~41593-00 Vestibular nerve section, translabyrinthine approach~~

~~41596-00 Vestibular nerve section, retrolabyrinthine approach~~

~~Excludes: that with cochlear nerve section (41596-02 [331])~~

~~41596-01 Cochlear nerve section, retrolabyrinthine approach~~

~~Excludes: that with vestibular nerve section (41596-02 [331])~~

~~41596-02 Vestibular and cochlear nerve section, retrolabyrinthine approach~~

41596-03 Vestibular and/or cochlear nerve section

Includes: that via:

- retrolabyrinthine approach
- translabyrinthine approach

332 **Repair procedures on inner ear**

~~41614-00 Closure of round window fistula~~

~~41614-01 Closure of oval window fistula
 Closure of perilymph fistula~~

~~41614-02 Repair of round window~~

~~Excludes: that for closure of round window fistula (41614-00 [332])~~

~~41615-00 Repair of oval window~~

~~Excludes: that for closure of oval window fistula (41614-01 [332])~~

~~that with any other procedure on the ear
 —omit code~~

41615-01 Repair of round or oval window
 Closure of oval or round window fistula

90117-00 Other repair of inner ear
 Fenestration of inner ear (including skin graft)

~~Repair of:~~

~~• cochlear~~

~~• labyrinth~~

 Venous graft to fenestration cavity

NOS

333 **Other procedures on inner ear**

Includes: cochlear
 internal auditory canal
 labyrinth

90118-01 Administration of agent into inner ear

90118-00 Other procedures on inner ear
~~Injection into inner ear~~

...

370 **Examination procedures on nose**

41653-00 Examination of nasal cavity and/or postnasal space

Drainage of haematoma in nasal cavity

Excludes: that with any other procedure on nose, mouth and pharynx – omit code that with biopsy (41761-00 [375])

41764-00 Nasendoscopy
Rhinoscopy

Code also when performed:

- biopsy of nasopharynx (41761-00 [375])

41764-01 Sinoscopy

▽ 0807

Excludes: that with functional endoscopic sinus surgery (FESS) – omit code

41653-01 Other diagnostic procedures on nose

Note: For nonsurgical diagnostic interventions see Chapter 19

...

374 Other destruction procedures on nose

~~41695-00 Turbinectomy by cryotherapy~~

~~41674-00 Cauterisation or diathermy of nasal turbinates~~

~~*Excludes:* that for arrest of nasal haemorrhage (see block [373])~~

41674-03 Destruction procedures on nasal turbinates

Excludes: that for arrest of nasal haemorrhage (see block [373])

41674-01 Destruction procedures on ~~Cauterisation or diathermy of~~ nasal septum
Cauterisation or diathermy Little's area

Excludes: that for arrest of nasal haemorrhage (see block [373])

90130-00 Local destruction of intranasal lesion

...

376 Excision procedures on nasal turbinates

Code also when performed:

- rhinoplasty (see block [1679])
- septoplasty (41671-02, 41671-03 [379])

41689-00 Partial turbinectomy, unilateral

41689-01 Partial turbinectomy, bilateral

41689-02 Total turbinectomy, unilateral

41689-03 Total turbinectomy, bilateral

41689-04 Turbinoplasty, unilateral

41689-05 Turbinoplasty, bilateral

41692-00 Submucous resection of turbinate, unilateral

41692-01 Submucous resection of turbinate, bilateral

377 Removal of intranasal lesion

Excludes: that for lesion of nares or nasopharynx (31400-00 [421])

41668-00 Removal of nasal polyp

Excludes: intranasal removal of polyp from:
• ethmoid sinus (41737-06 [385])
• frontal sinus (41737-05 [385])
• maxillary sinus (41716-03 [385])
• sphenoid sinus (41752-03 [385])

41729-00 Excision of dermoid cyst of nose with intranasal extension

41728-00 Lateral rhinotomy with removal of intranasal lesion

90131-00 Local excision of other intranasal lesion

378 **Other excision procedures on nose**

41671-00 Submucous resection of nasal septum

Excludes: that with septoplasty (41671-03 [379])

[90131-01 Rhinectomy](#)

379 **Repair of nasal septum**

41671-01 Closure of perforation of nasal septum

41671-02 Septoplasty

Includes: ~~turbineotomy~~

Code also when performed:

- rhinoplasty (see block [1679])
- [turbineotomy \(see block \[376\]\)](#)
- [turbino-plasty \(see block \[376\]\)](#)

41671-03 Septoplasty with submucous resection of nasal septum

Includes: ~~turbineotomy~~

Code also when performed:

- rhinoplasty (see block [1679])
- [turbineotomy \(see block \[376\]\)](#)
- [turbino-plasty \(see block \[376\]\)](#)

...

382 **Application, insertion or removal procedures on nasal sinuses**

[V 0807](#)

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41704-00 Aspiration and lavage of nasal sinus through natural ostium

41701-00 Aspiration and lavage of nasal sinus by puncture

41740-00 Catheterisation of frontal sinus

383 **Incision procedures on nasal sinuses**

[V 0807](#)

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41719-00 Drainage of maxillary antrum through tooth socket
Drainage of nasal sinus through tooth socket

41716-00 Intranasal removal of foreign body from maxillary antrum

~~V 0807~~ *Includes:* incision of mucosa

41752-02 Sphenoidotomy

41737-04 Ethmoidotomy

41743-00 Trephining frontal sinus
Sinusotomy of frontal sinus

384

▽ 0807

Biopsy of nasal sinuses

Excludes: [that with functional endoscopic sinus surgery \[FESS\] – omit code](#)

41716-05 Biopsy of maxillary antrum

41752-04 Biopsy of sphenoidal sinus

41737-07 Biopsy of frontal sinus

41737-08 Biopsy of ethmoidal sinus

385

▽ 0807

Intranasal removal of polyp from nasal sinuses

Excludes: [that with functional endoscopic sinus surgery \[FESS\] – omit code](#)

41716-03 Intranasal removal of polyp from maxillary antrum

41752-03 Intranasal removal of polyp from sphenoidal sinus

41737-05 Intranasal removal of polyp from frontal sinus

41737-06 Intranasal removal of polyp from ethmoidal sinus

386

▽ 0807

Other excision procedures on nasal sinuses

Excludes: intranasal removal of polyp [from of nasal sinus:](#)

• ~~antrum (41716-03 [385])~~

• ethmoid [sinus](#) (41737-06 [385])

• frontal [sinus](#) (41737-05 [385])

• [maxillary sinus \(41716-03 \[385\]\)](#)

• sphenoid [sinus](#) (41752-03 [385])

radical ethmoidectomy (41734-00 [388])

[that with functional endoscopic sinus surgery \[FESS\] – omit code](#)

41716-06 Excision of lesion of maxillary antrum
External maxillary antrectomy

Includes: that by Caldwell-Luc approach

Excludes: excision of polyp (41716-03 [385])

maxillary antrectomy:

• intranasal (41716 [387])

• radical (41710, 41713 [387])

• simple (41716 [387])

41752-01 Sphenoidectomy

▽ 0807

Excision of lesion of sphenoid sinus

Excludes: that with ethmoidectomy (41731-01 [386])

41737-02 Ethmoidectomy, unilateral

▽ 0807

Includes: uncinectomy

41737-03 Ethmoidectomy, bilateral

▽ 0807

Includes: uncinectomy

41731-00 Ethmoidectomy, frontonasal approach
▽-0807

Includes: uncinectomy

41731-01 Ethmoidectomy with sphenoidectomy, frontonasal approach
▽-0807

Includes: uncinectomy

41737-09 Frontal sinusectomy
▽-0807

Excision of lesion of frontal sinus

41746-00 Radical obliteration of frontal sinus
▽-0807

387 Maxillary antrostomy

41716-01 Intranasal maxillary antrostomy, unilateral
▽ 0807

Middle meatal antrostomy, unilateral

Includes: uncinectomy

Excludes: [that with functional endoscopic sinus surgery \[FESS\] – omit code](#)

41716-02 Intranasal maxillary antrostomy, bilateral
▽ 0807

Middle meatal antrostomy, bilateral

Includes: uncinectomy

Excludes: [that with functional endoscopic sinus surgery \[FESS\] – omit code](#)

41710-00 Radical maxillary antrostomy, unilateral
Caldwell-Luc antrostomy, unilateral
Radical maxillary antrectomy, unilateral

Excludes: that with transantral:
• ethmoidectomy (41713-00 [387])
• vidian neurectomy (41713-01 [387])

41710-01 Radical maxillary antrostomy, bilateral
Caldwell-Luc antrostomy, bilateral
Radical maxillary antrectomy, bilateral

Excludes: that with transantral:
• ethmoidectomy (41713-00 [387])
• vidian neurectomy (41713-01 [387])

41713-00 Radical maxillary antrostomy with transantral ethmoidectomy
Caldwell-Luc antrostomy
Radical maxillary antrectomy

	with transantral ethmoidectomy
--	--------------------------------

41713-01 Radical maxillary antrostomy with transantral vidian neurectomy
Caldwell-Luc antrostomy
Radical maxillary antrectomy

	with transantral vidian neurectomy
--	------------------------------------

388 Other repair procedures on nasal sinuses

41722-00 Closure of oro-antral fistula
Plastic closure of oro-antral fistula

45849-00 Bone graft to maxillary sinus

Sinus lift procedure

41734-00 Radical ethmoidectomy with osteoplastic flap

389 Other procedures on nasal sinuses

[V 0807](#)

41716-04 Other intranasal procedures on maxillary antrum

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41752-00 Other intranasal procedure on sphenoidal sinus

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41737-00 Other intranasal procedures on frontal sinus

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41737-01 Other intranasal procedures on ethmoidal sinus

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

41749-00 External procedure on ethmoidal sinus

Excludes: that with functional endoscopic sinus surgery [FESS] – omit code

[96257-01](#) Functional endoscopic sinus surgery [FESS]

Note: FESS is performed to improve the ventilation and drainage of the sinuses, and to remove disease from the sinuses. FESS may include (but is not limited to) the following endoscopic sinus procedures in any combination in a single operative episode:

- biopsy of sinus (any sinus) (bilateral) (unilateral)
- ethmoidectomy (bilateral) (unilateral)
- incision procedures of sinus (any sinus) (bilateral) (sinusotomy) (unilateral)
- intranasal antrostomy (bilateral) (unilateral)
- removal of foreign body from sinus (antrum)
- removal of polyp from sinus (any sinus)
- sinuscopy
- sinusectomy (any sinus) (bilateral) (unilateral)

Code also when performed:

- nasal procedure(s) (see blocks [371] to [381])

...

396 Destruction procedures on salivary gland or duct

30262-01 [Destruction](#) ~~Diathermy~~ of salivary gland or duct

[Diathermy](#) ~~Destruction~~ of salivary gland or duct lesion ~~by diathermy~~

...

EXCISION

Excludes: excision of skin, subcutaneous and soft tissue of lip (see block [1664])

402 Biopsy of oral cavity or soft palate

30075-23 Biopsy of oral cavity

Biopsy of:

- bony palate
- lip
- mouth

Excludes: that of:

- soft palate (30075-24 [402])
- uvula (30075-24 [402])

30075-24 Biopsy of soft palate
Biopsy of uvula

45799-00 Aspiration biopsy of jaw cyst

403 **Excision or destruction of lesion of mouth or palate**

~~90141-00 Local excision or destruction of lesion of bony palate
Local excision or destruction of tissue of bony palate~~

~~*Excludes:* removal of papillary hyperplasia (45831-00 [403])~~

~~45831-00 Excision of papillary hyperplasia of palate~~

[90141-02 Excision or destruction of lesion of palate](#)
[Excision of papillary hyperplasia of palate](#)

30283-00 Excision of cyst of mouth
Excision of:
• mucocele
• ranula

30275-00 Radical excision of intraoral lesion

Includes: resection of:
• lymph node(s)
• mandible

90141-01 Excision of other lesion of mouth

Excludes: excision of lesion of upper aerodigestive tract (31400-00 [421])

...

406 **Other repair procedures on mouth, palate or uvula**

...

45676-00 Other repair of mouth

~~45837-00 Submucosal vestibuloplasty
Submucosal lowering of floor of mouth by Obwegeser technique~~

~~*Includes:* excision of muscle
mucosal graft
skin graft~~

~~45837-01 Open vestibuloplasty
Lowering of floor of mouth by Obwegeser technique~~

~~*Includes:* excision of muscle
mucosal graft
skin graft~~

[45837-02 Vestibuloplasty](#)
[Lowering of floor of mouth by Obwegeser technique](#)
[Open vestibuloplasty](#)
[Submucosal vestibuloplasty](#)

[Includes:](#) [excision of muscle](#)
[mucosal graft](#)
[skin graft](#)

90142-01 Other repair of palate

90142-02 Other repair of uvula

...

418 Incision procedures on pharynx

- 41758-00 Division of pharyngeal adhesions
- 41776-00 Cricopharyngeal myotomy
- 41776-01 Cricopharyngeal myotomy with inversion of pharyngeal pouch
- 41770-01 Cricopharyngeal myotomy with removal of pharyngeal pouch
- 41779-00 Pharyngotomy

41779-02 Incision and drainage of pharyngeal abscess

Includes: that for:

- [parapharyngeal abscess](#)
- [retropharyngeal abscess](#)

Excludes: excision of parapharyngeal lesion by cervical approach (31409-00 [421])
incision and drainage of peritonsillar abscess (41807-00 [409])

419 Destruction procedures on pharynx

~~41674-02 Cauterisation or diathermy of pharynx~~

~~*Includes:* nasopharynx~~

~~*Excludes:* that for arrest of nasal haemorrhage (see block [373])~~

- 52035-00 Endoscopic laser therapy of upper aerodigestive tract

Note: Performed generally for neoplasia, benign vascular lesions or strictures of the nares, nasopharynx, oral cavity, oropharynx, laryngopharynx and larynx

41674-04 Destruction procedures on pharynx, not elsewhere classified

Includes: [nasopharynx](#)

that by:

- [cauterisation](#)
- [diathermy](#)

Excludes: [that for arrest of nasal haemorrhage \(see block \[373\]\)](#)

421 Other excision procedures on pharynx

- 30075-26 Pharyngeal biopsy
Biopsy of supraglottic mass
- 30286-00 Excision of branchial cyst
- 30289-00 Excision of branchial fistula
- 31400-00 Excision of lesion of upper aerodigestive tract

Note: Performed generally for squamous cell carcinomas involving overlapping sites of the nares, [sinonasal tract](#), nasopharynx, oral cavity, oropharynx, laryngopharynx or larynx (where the lesion is confined to one of these specific sites, the excision code for the specific site should be assigned instead)

Code also when performed:

- tracheostomy (41880-00, 41881 [536])

Excludes: radical excision of intraoral lesion with resection of mandible and lymph nodes of neck (30275-00 [403])

- 31409-00 Excision of parapharyngeal lesion by cervical approach

~~31412-00 Excision of recurrent or persistent parapharyngeal lesion by cervical approach~~

- 41767-00 [Excision](#)~~Removal~~ of lesion of nasopharynx

~~Includes: transnasal~~
~~transpalatal~~ | approach

[41767-01](#) [Excision of lesion of oropharynx](#)

41770-00 Removal of pharyngeal pouch
Pharyngeal diverticulectomy

Excludes: that by endoscopy (41773-00 [421])
that with cricopharyngotomy (41770-01 [418])

41773-00 Endoscopic resection of pharyngeal pouch
Dohlman's procedure

~~41804-01~~ ~~Removal of lateral pharyngeal bands~~

41813-01 Removal of pharyngeal cyst

90149-00 Excision of other lesion of pharynx
[Removal of lateral pharyngeal bands](#)

...

1365 **Reduction of fracture of nasal bone**

~~Includes: frontal sinus~~
~~nasoethmoid~~

47738-00 Closed reduction of fracture of nasal bone

Includes: internal fixation

47741-00 Open reduction of fracture of nasal bone

Includes: osteotomy

...

1678 **Repair of ear**

Excludes: reconstruction of ear (45660-00, 45661-00 [1684])

45659-00 Correction of bat ear
Correction of prominent or protruding ear
Ear pinning or setback

45659-01 Other correction of external ear deformity
Correction of:
• constricted ear
• lop ear
Repair of external ear deformity NOS

Excludes: reconstruction of external auditory canal (41521 [304], [41512-00 \[305\]](#), ~~45662-00 [305]~~)

1679 **Rhinoplasty**

~~Includes: turbinectomy~~

Code also when performed:

- septoplasty (41671-02, 41671-03 [379])
- [turbinectomy \(see block \[376\]\)](#)
- [turbino-plasty \(see block \[376\]\)](#)

Excludes: augmentation rhinoplasty with implant only (45051-00 [1682])

- composite graft of nose (45656-00 [1669])
- revision of rhinoplasty (45650-00 [1687])
- skin:
 - flap of nose (45206-01 [1651], 45221-01, 45224-01 [1653], 45230 [1653] and [1654], 45227-00, 45233, 45236-00 [1654])
 - graft of nose (45400-01 [1641], 45400-00 [1642], 45448-01 [1645], 45445-00 [1647], 45451-01 [1649])

Appendix A Mapping Table MBS Items

...		
	45821	47920
	45833	45834 90141
	45835	45834 90141
	45839	45837
...		
	52606	45829
	52609	45834 90141
	52612	45834 90141
	52615	45834 90141
	52618	45837
...		
...		

ACHI Index

...
Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*
Note: Terms listed under the lead term 'Administration' are split by three main subterms; Administration/indication, Administration/specified site and Administration/type of agent.

- ...
- specified site
- ...
- - dorsal root ganglion (single level) 18274-00 [63]
- - - multiple levels 18276-00 [63]
- - ear, ~~inner 90118-00 [333]~~
- - - inner 90118-01 [333]
- - - intratympanic 90114-01 [316]
- - - middle 90114-01 [316]
- - epidural (space) (with catheterisation)
- ...
- - ganglion (nerve) — *see Administration/specified site/nerve*
- - inner ear 90118-01 [333]
- - interplural 18228-00 [548]
- - intervertebral
- - - foramen — *see Administration/specified site/nerve/paravertebral*
- - - space for herniated disc (chemonucleolytic agent) (Chymopapain) 40336-00 [31]
- - intra-amniotic 90461-00 [1330]
- - intradiscal (chemonucleolytic agent) (Chymopapain) 40336-00 [31]
- - intramuscular — *see also Administration/specified site/muscle*
- - - systemic effect 96197 [1920]
- - intrathecal (space) — *see Administration/specified site/spinal/intrathecal*
- - intratympanic 90114-01 [316]
- - intravesical, endoscopic 36851-00 [1092]
- - joint NEC 50124-01 [1552]
- - - costotransverse (corticosteroid) (local anaesthetic) 39013-01 [31]
- - - facet (articular processes) (corticosteroid) (local anaesthetic) 39013-00 [31]
- - - zygo-apophyseal (articular processes) (corticosteroid) (local anaesthetic) 39013-00 [31]
- - kidney 90354-00 [1064]
- - larynx (collagen) (fat) (Gelfoam) (Teflon) 41870-01 [521]
- - ligament NEC 18360-01 [1552]
- - liver 90347-00 [951]

- - middle ear 90114-01 [316]
- - muscle NEC 18360-01 [1552]
- - - extraocular, for strabismus 18366-01 [216]
- - - orbicularis oculi 18370-03 [230]
- - - systemic effect 96197 [1920]

Aspiration

- abscess — see also *Aspiration/by site*
- - Bartholin's gland 35520-00 [1290]
- - extraperitoneal 30224-02 [987]
- - iliac fossa 30224-01 [987]
- - intra-abdominal NEC 30224-01 [987]
- - - retroperitoneal 30224-02 [987]
- - liver 30224-01 [987]
- - nail (bed) 30216-01 [1604]
- - orbit 42572-00 [223]

- - parapharyngeal 41779-02 [418]

- - paravertebral 30224-02 [987]
- - pelvic cavity 30224-01 [987]
- - peritonsillar 41807-00 [409]
- - pharyngeal 41779-02 [418]
- - retroperitoneal 30224-02 [987]
- - retropharyngeal 41779-02 [418]
- - skin (subcutaneous tissue) 30216-01 [1604]

- ...
- ear, middle (unilateral) 41626-00 [309]
- - with intubation ([grommet](#)) 41632-02 [308]41632-00 [309]
- - bilateral 41626-01 [309]
- - - with intubation ([grommet](#)) 41632-03 [308]41632-01 [309]

...

Blepharotomy 90084-00 [231]

- lid margin 90084-00 [231]

Blind-sac closure — see *Closure/auditory canal, external*

Block

...

Cauterisation — see also *Destruction*

- ...
- nasopharynx 41674-042 [419]
- nose, nasal
 - - for arrest of nasal haemorrhage 41677-00 [373]
 - - - anterior (Little's area) (with diathermy) (with packing) 41677-00 [373]
 - - - posterior (with diathermy) (with packing) 41656-00 [373]
- - nasopharynx 41674-042 [419]
- - septum (Little's area) 41674-01 [374]
- - turbinates 41674-0300 [374]
- pharynx 41674-042 [419]
- septum (nasal) 41674-01 [374]
- soft tissue
 - - for endodontic access 97245-00 [456]
- tarsal plate
 - - for repair of
 - - - ectropion 42581-00 [239]
 - - - entropion 42581-01 [239]
- turbinates (~~nasal~~) 41674-0300 [374]
- tympanic membrane, perforated 41641-00 [311]

...

Change (of) — see also *Replacement*

- ...
- pacemaker — see *Replacement/pacemaker*
- plaster (cast) 96092-00 [1870]

Channelling, tongue (coblation) 45675-01 [1665]

Characterisation (of)

- denture base 97775-00 [477]

...

Closure (of)

- ...
- auditory canal, external
 - - with obliteration of mastoid cavity and eustachian tube
 - - - with mastoidectomy (radical) 41564-01 [323]
 - - - - modified radical 41564-00 [323]

- bladder
- - exstrophy 37050-00 [1106]
- - - secondary 37842-02 [1106]
- - - - with ureteric implantation 37842-03 [1106]
- [blind-sac](#) — see [Closure auditory canal, external](#)
- caesarean wound dehiscence
- ...
- fistula
- ...
- - ear, inner
- - - oval window [41615-0141614-01](#) [332]
- - - perilymph [41615-0141614-01](#) [332]
- - - round window [41615-0141614-00](#) [332]
- ...
- - oval window (inner ear) [41615-0141614-01](#) [332]
- - perilymph [41615-0141614-01](#) [332]
- - perirectal 90341-00 [933]
- - rectourethral 37336-00 [1119]
- - rectovaginal 35596-00 [1284]
- - - with biological sealant (fibrin sealant) (glue) 90447-00 [1284]
- - rectum NEC 90340-01 [917]
- - - with biological sealant (fibrin sealant) (glue) (plug) 90344-02 [929]
- - round window (inner ear) [41615-0141614-00](#) [332]

...
Coagulation, electrocoagulation (lesion) (tissue) — see also *Destruction/by site*

- blood vessels
- - cornea (laser) 42797-03 [168]

- ...
- stomach
- - by
- - - diathermy 30478-01 [1007]
- - - heater probe 30478-02 [1007]
- - - laser 30478-03 [1007]

[Coblation](#) — see [Destruction](#)

Coccygectomy (partial) (total) 30672-00 [1385]

Coiling

...
Cryotherapy — see also *Destruction/by site*

- ...
- nose, nasal
- - to arrest haemorrhage 41680-00 [373]
- - turbinates [41674-0341695-00](#) [374]
- rectum 90312-01 [931]
- - mucosa prolapse 32135-03 [931]
- retina 42809-00 [211]
- - for repair of retinal detachment
- - - with
- - - - photocoagulation 42809-01 [212]
- - - - pneumatic retinopexy 42773-01 [212]
- - - - scleral buckling 42776-00 [212]
- - - - vitrectomy (with internal probe) 42725-00 [207]
- turbinates (nasal) [41674-0341695-00](#) [374]

...
Decompression

- ...
- ear
- - inner
- - - endolymphatic sac ([with shunt](#)) (~~without shunt~~) 41590-00 [330]
- ~~with shunt 41590-01 [330]~~
- endolymphatic sac ([with shunt](#)) (~~without shunt~~) 41590-00 [330]
- ~~with shunt 41590-01 [330]~~
- fascia — see *Fasciotomy*

...
Deepening

- sulcus (buccolabial) (lingual) (open) ([submucosal](#)) [45837-0245837-04](#) [406]
- ~~submucosal 45837-00 [406]~~

Destruction (ablation) (cauterisation) (coagulation) (cryotherapy) (diathermy) (HIFUS) (irreversible electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)

...

- lesion (tissue) (tumour) — *see also Destruction/by site*

...

-- nares 90130-00 [374]

-- - by endoscopic laser 52035-00 [419]

-- - nasal

-- - septum 41674-01 [374]

-- - turbinates (submucous) 41674-03 [374]

-- - nasopharynx, by endoscopic laser 52035-00 [419]

-- - nose (skin) — *see also Destruction/lesion/skin*

-- - intranasal — *see Destruction/lesion/intranasal*

-- - oesophagus, endoscopic (Argon plasma) (heater probe) 30478-22 [856]

-- - oral cavity, by endoscopic laser 52035-00 [419]

-- - oral mucosa, by cryotherapy (*see also Destruction/lesion/oral cavity*) 52034-00 [1612]

-- - oropharynx, by endoscopic laser 52035-00 [419]

-- - ovary

-- - by drilling

-- - - laparoscopic 35637-08 [1241]

-- - - via laparotomy 35713-03 [1241]

-- - palate (bony) (hard) (soft) 90141-0200 [403]

-- - pelvic cavity (laparoscopic) 35637-02 [1299]

-- - via laparotomy 35713-01 [1299]

-- - penis

-- - wart 30189-01 [1619]

-- - - endoscopic 36815-00 [1195]

-- - periprostatic tissue — *see Destruction/prostate*

-- - pharynx (by cauterisation) (by diathermy) 41674-042 [419]

-- - rectum

-- - by

-- - - cryotherapy 90312-01 [931]

-- - - electrocoagulation (radical) 90312-00 [931]

-- - - laser 30479-01 [931]

-- - retina (photodynamic therapy) 42809-00 [211]

-- - salivary gland or duct, by diathermy 30262-01 [396]

...

- palate (bony) (hard) (soft) 90141-0200 [403]

- pharynx (by cauterisation) (by diathermy) 41674-04 [419]

- prostate

- - endoscopic (transurethral) 37224-00 [1162]

- - open 90408-00 [1162]

- - percutaneous (transperineal) 90408-02 [1162]

- rectum

- - by

- - - cryosurgery 90312-01 [931]

- - - electrocoagulation 90312-00 [931]

- - mucosal prolapse 32135-03 [931]

- retina (photodynamic therapy) 42809-00 [211]

- salivary gland or duct 30262-01 [396]

- scar, by laser — *see Resurfacing/skin/by site*

- sclera 90068-00 [179]

- skin

- - abrasive — *see Abrasion/skin*

- - carbon dioxide laser resurfacing — *see Resurfacing/skin/by site*

- - surface — *see Resurfacing/skin/by site*

- - wart — *see Destruction/wart*

...

- trichoepithelioma, face or neck

- - by laser 30190-00 [1612]

- tumour — *see also Destruction/lesion*

Diathermy — *see also Destruction/by site*

...

- nasopharynx 41674-042 [419]

- nose, nasal

- - for arrest of nasal haemorrhage 41677-00 [373]

- - - anterior (Little's area) (with cauterisation) (with packing) 41677-00 [373]

- - - posterior (with cauterisation) (with packing)

41656-00 [373]

- - nasopharynx 41674-042 [419]
- - septum (Little's area) 41674-01 [374]
- - turbinates ([submucous](#)) 41674-030 [374]
- oesophagus, endoscopic 30478-22 [856]
- pharynx 41674-042 [419]
- ...
- stomach, endoscopic 30478-01 [1007]
- ~~- submucous (nasal turbinates) 41674-00 [374]~~
- telangiectasis
- - head 30213-00 [743]
- - neck 30213-00 [743]
- tumour — *see also Diathermy/lesion*
- - ureter (closed) (endoscopic) 36809-01 [1074]
- ~~- turbinates (nasal) 41674-00 [374]~~
- tympanic membrane, perforated 41641-00 [311]

...

Division (freeing)

- ...
- nerve — *see also Sympathectomy*
 - - for facet joint denervation (percutaneous)
 - - - by
 - - - - cryoprobe 39118-01 [72]
 - - - - radiofrequency 39118-00 [72]
 - - with release of hip contracture (adductor) (psoas)
 - - - bilateral 50378-01 [1480]
 - - - unilateral 50375-01 [1480]
 - - cochlear
 - - - retrolabyrinthine approach [41596-0341596-01](#) [331]
 - - - - with vestibular nerve division [41596-0341596-02](#) [331]
 - ...
 - - vestibular (via posterior cranial fossa) 39500-00 [73]
 - - - retrolabyrinthine approach [41596-0341596-00](#) [331]
 - - - - with cochlear nerve division [41596-0341596-02](#) [331]
 - - - transabyrinthine approach [41596-0341593-00](#) [331]
 - patent ductus arteriosus (open) 38700-01 [690]

...

Drainage

- abdomen, percutaneous 30406-00 [983]
- abscess — *see also Drainage/by site*
- ...
- - peritonsillar 41807-00 [409]
- - pharyngeal [41779-02](#) [418]
- - pilonidal 30676-00 [1659]
- ...
- ear
- - inner
- - - endolymphatic sac ([with shunt](#)) (~~without shunt~~) 41590-00 [330]
- ~~----- with shunt 41590-01 [330]~~
- - middle (unilateral) 41626-00 [309]
- - - with intubation ([grommet](#)) [41632-02](#) [308]~~41632-00 [309]~~
- - - bilateral 41626-01 [309]
- - - - with intubation ([grommet](#)) [41632-03](#) [308]~~41632-01 [309]~~
- endolymphatic sac ([with shunt](#)) (~~without shunt~~) 41590-00 [330]
- ~~----- with shunt 41590-01 [330]~~
- ...
- middle ear (unilateral) 41626-00 [309]
- - with intubation ([grommet](#)) [41632-02](#) [308]~~41632-00 [309]~~
- - bilateral 41626-01 [309]
- - - with intubation ([grommet](#)) [41632-03](#) [308]~~41632-01 [309]~~
- ...

Elevation

- bone fragments (fractured)
- sinus (nasal)
- - - frontal ([intranasal](#)) (*see also Reduction/fracture/skull*) 41737-00 [389]
- - - - open (compound) — *see Reduction/fracture/skull/open*
- - - maxillary ([intranasal](#)) (*see also Reduction/fracture/maxilla*) 41716-04 [389]
- ...

- fracture
- - sinus (nasal)
- - - frontal ([intranasal](#)) ([see also Reduction/fracture/skull](#)) 41737-00 [389]
- - - - open (compound) — [see Reduction/fracture/skull/open](#)
- - - maxillary ([intranasal](#)) ([see also Reduction/fracture/maxilla](#)) 41716-04 [389]
- - skull
- - - closed 39606-00 [25]
- - - compound (open) 39609-01 [25]
- - - - with repair of dura and brain 39612-00 [25]

Excision — [see also Removal](#)

- ...
- glomus lesion (tumour)
- - transmastoid approach, with mastoidectomy [41635-00 \[312\]](#)~~41623-00 [312]~~
- - transtympanic approach [41635-00 \[312\]](#)~~41620-00 [312]~~
- ...
- lesion(s) — [see also Excision/tumour AND Excision/cyst AND Excision/polyp](#)
- ...
- - ear
- ...
- - - middle 41635-00 [312]
- - - - with
- - - - - myringoplasty 41635-01 [313]
- - - - - and ossicular chain reconstruction (graft) (prosthesis) 41638-01 [315]
- - - - - ossicular chain reconstruction (graft) (prosthesis) 41638-00 [315]
- - - - - and myringoplasty 41638-01 [315]
- - - - glomus lesion (tumour)
- - - - - transmastoid approach, with mastoidectomy [41635-00 \[312\]](#)~~41623-00 [312]~~
- - - - - transtympanic approach [41635-00 \[312\]](#)~~41620-00 [312]~~
- ...
- - intranasal NEC 90131-00 [377]
- - - by [rhinectomy \(partial\) \(total\) 90131-01 \[378\]](#)
- - - - [overlapping other sites of upper aerodigestive tract 31400-00 \[421\]](#)
- - - via lateral rhinotomy 41728-00 [377]
- - intraoral
- - - overlapping other sites of upper aerodigestive tract 31400-00 [421]
- ...
- - nasal sinus
- - - ethmoid — [see also Ethmoidectomy](#)
- - - - polyp 41737-06 [385]
- - - frontal 41737-09 [386]
- - - - polyp 41737-05 [385]
- - - maxillary antrum 41716-06 [386]
- - - - polyp 41716-03 [385]
- - - sphenoid 41752-01 [386]
- - - - polyp 41752-03 [385]
- - nasopharynx (transpalatal) 41767-00 [421]
- - nerve
- - - cranial 39327-04 [82]
- - - neuroblastoma NEC 43987-02 [80]
- - - - intra-abdominal 43987-01 [989]
- - - - intrathoracic 43987-00 [563]
- - - peripheral
- - - - deep 39327-02 [80]
- - - - superficial 39324-02 [80]
- - - nose NEC 90131-00 [377]
- - - by [rhinectomy \(partial\) \(total\) 90131-01 \[378\]](#)
- - - - [overlapping other sites of upper aerodigestive tract 31400-00 \[421\]](#)
- - - - skin 31230-01 [1620]
- - - via lateral rhinotomy 41728-00 [377]
- - oesophagus (endoscopic) 30478-13 [861]
- - - open (local) 30559-00 [861]
- - omentum (open) 96189-00 [989]
- - - congenital 90327-00 [989]
- - - radical (debulking) (with omentectomy) 30392-00 [989]
- - - via laparoscopy 96189-01 [989]
- - orbit
- - - dermoid cyst (tumour) 42574-00 [226]

- - - via orbitotomy (anterior aspect) 42542-00 [224]
- - - - with removal of bone (with replacement) 42539-00 [227]
- - - - retrobulbar aspect 42543-00 [224]
- - [oropharynx 41767-01 \[421\]](#)
- - - [overlapping other sites of upper aerodigestive tract 31400-00 \[421\]](#)
- - ovary
- - - laparoscopic 35638-01 [1243]
- - - via laparotomy 35713-06 [1243]
- - palate (bony) (hard) [\(soft\) 90141-0200 \[403\]](#)
- ~~--- for papillary hyperplasia 45831-00 [403]~~
- - pancreas (pancreatic duct) 30578-00 [979]
- - - endoscopic 90294-01 [979]
- - parapharyngeal, by cervical approach [\(persistent\) \(recurrent\) 31409-00 \[421\]](#)
- ~~--- recurrent or persistent 31412-00 [421]~~
- - parathyroid 30315-00 [113]
- ...
- muscle (extensive) (limited) NEC 30229-00 [1565]
- - for lesion of skin 31340-00 [1566]
- - with vestibuloplasty (open) (oral) [\(submucosal\) 45837-02 45837-04 \[406\]](#)
- ~~--- submucosal 45837-00 [406]~~
- - anorectal 90315-01 [933]
- ...
- palate
- - bony (hard) [\(soft\) 90141-020 \[403\]](#)
- ...
- pharynx, pharyngeal
- - with
- - - glossectomy (partial) 41785-00 [420]
- - - - total 41785-01 [420]
- - - pharyngotomy 41782-00 [420]
- - - - and glossectomy (partial) 41785-00 [420]
- - - - - total 41785-01 [420]
- - bands (lateral) [90149-00 41804-04 \[421\]](#)
- - pouch 41770-00 [421]
- ...
- tumour — see also *Excision/lesion(s)*
- ...
- - glomus (middle ear)
- - - transmastoid approach, with mastoidectomy [41635-00 \[312\] 41623-00 \[312\]](#)
- - - transtympanic approach [41635-00 \[312\] 41620-00 \[312\]](#)
- - granuloma
- ...
- - pancreas (pancreatic duct) 30578-00 [979]
- - - endoscopic 90294-01 [979]
- - parapharyngeal, by cervical approach [\(persistent\) \(recurrent\) 31409-00 \[421\]](#)
- ~~--- recurrent or persistent 31412-00 [421]~~
- - periampullary 30458-02 [968]
- ...
- turbinates, nasal — see *Turbinectomy*
- tympanic membrane, tympanum [rim \(perforated\) 41644-00 \[312\]](#)
- - with
- - - [myringoplasty — see Myringoplasty](#)
- - - [removal of tympanostomy tube \(unilateral\) 41632-04 \[308\]](#)
- - - [bilateral 41632-05 \[308\]](#)
- ~~--- rim (perforated) (with removal of tympanostomy tube) 41644-00 [312]~~
- ~~--- with myringoplasty — see Myringoplasty~~
- ulcer (skin) (subcutaneous tissue) 31205-01 [1630]
- ...
- Extension**
- sulcus (buccolabial) (lingual) (open) [\(submucosal\) 45837-02 45837-04 \[406\]](#)
- ~~--- submucosal 45837-00 [406]~~
- Exteriorisation**
- maxillary antrum (nasal sinus) 41716-04 [389]
- oesophageal pouch 30293-00 [867]
- ...
- Fertilisation, In vitro (IVF) 13215-03 [1297]**
- collection of sperm — see *Aspiration/seminal/fluid*

- retrieval oocyte (transvaginal) 13212-00 [1297]
- - transabdominal 13212-01 [1297]
- transfer (of)
 - - embryo (to) (uterus) 13215-01 [1297]
 - - - fallopian tube (TEST) 13215-02 [1297]
 - - gamete intrafallopian (GIFT) 13215-00 [1297]
 - - oocyte with sperm (fallopian tube) 13215-00 [1297]
 - - zygote intrafallopian (ZIFT) 13215-02 [1297]

FESS (functional endoscopic sinus surgery) [96257-01 \[389\]](#) — ~~code specific procedure(s) performed~~
Fetal reduction (percutaneous) 90463-00 [1330]

Fistulectomy

- ...
- ear, inner
 - - oval window [41615-0144614-01 \[332\]](#)
 - - perilymph [41615-0144614-01 \[332\]](#)
 - - round window [41615-0144614-00 \[332\]](#)
- ...
- oval window (inner ear) [41615-0144614-01 \[332\]](#)
- perilymph [41615-0144614-01 \[332\]](#)
- perirectal 90341-00 [933]
- rectourethral 37336-00 [1119]
- rectovaginal 35596-00 [1284]
- rectum 90340-01 [917]
- round window (inner ear) [41615-0144614-00 \[332\]](#)

Freshen, freshening

- tympanic membrane perforation (~~with removal of tympanostomy tube~~) 41644-00 [312]
- - with myringoplasty — ~~see Myringoplasty~~
- - - myringoplasty — ~~see Myringoplasty~~
- - - - removal of tympanostomy tube (unilateral) [41632-04 \[308\]](#)
- - - - bilateral [41632-05 \[308\]](#)

Frické flap — *see Flap/eyelid/for reconstruction*

Function

- study — *see Study*
- test — *see Test, testing*
- [Functional endoscopic sinus surgery \(FESS\) 96257-01 \[389\]](#)

Fundoplasty

- with cardiopexy 30530-00 [886]

Graft (repair)

- ...
- mucous membrane — *see also Graft/skin*
- - with
 - - - reconstruction of anophthalmic socket 42527-00 [164]
 - - - vestibuloplasty (open) (oral) ([submucosal](#)) [45837-0245837-01 \[406\]](#)
 - ~~submucosal 45837-00 [406]~~
 - - to conjunctiva 42641-00 [255]
 - - muscle NEC 90583-01 [1569]

- ...
- skin (autogenous) (free) (mucous membrane)
- ...
- - with
 - - - canaloplasty of external auditory meatus 41521-01 [304]
 - - - correction of auditory canal stenosis 41521-01 [304]
 - - - exenteration of orbit [42536-0142536-00 \[225\]](#)
 - ~~and muscle transplant (temporalis) 42536-03 [225]~~
 - - - with removal of adjacent structures [42536-04 \[225\]](#)
 - - - vestibuloplasty (open) (oral) ([submucosal](#)) [45837-0245837-01 \[406\]](#)
 - ~~submucosal 45837-00 [406]~~
 - - allograft (split thickness) 90670-00 [1640]

Incision

- ...
- ear

- - drum (unilateral) 41626-00 [309]
- - - with
- - - - drainage of abscess 41626-00 [309]
- - - - insertion of tube (grommet) 41632-02 [308]41632-00 [309]
- - - bilateral 41626-01 [309]
- - - - with
- - - - - drainage of abscess 41626-01 [309]
- - - - - insertion of tube (grommet) (Shepherd's) 41632-03 [308]41632-01 [309]
- ...
- tympanic membrane
- - bilateral 41626-01 [309]
- - - with
- - - - drainage of abscess 41626-01 [309]
- - - - insertion of tube (grommet) 41632-03 [308]41632-01 [309]
- - unilateral 41626-00 [309]
- - - with
- - - - drainage of abscess 41626-00 [309]
- - - - insertion of tube (grommet) 41632-02 [308]41632-00 [309]

Insertion

- ...
- tube
- - biliary tract (open) NEC 90337-00 [958]
- - - with examination of common bile duct 30454-00 [963]
- - - endoscopic (with dilation) 30491-00 [958]
- - bladder
- - - via cystostomy — omit code
- - - ear, middle (button) (grommet) (Shepherd's) (unilateral) (with myringotomy) 41632-02 [308]
- - - bilateral 41632-03 [308]41632-01 [309]
- ~~unilateral 41632-00 [309]~~
- - endolymphatic sac 41590-00 [330]

Intubation — see also Catheterisation AND Insertion/tube

- ...
- ear, middle (bilateral) (button) (grommet) (Shepherd's) (unilateral) (with myringotomy) 41632-02 [308]41632-01 [309]
- - unilateral 41632-03 [308]41632-00 [309]
- endolymphatic sac 41590-00 [330]

Lowering

- floor of mouth
- - by vestibuloplasty (Obwegeser technique) (open) (oral) (submucosal) 45837-02 45837-01 [406]
- ~~submucosal 45837-00 [406]~~

LSG (laparoscopic sleeve gastrectomy), for obesity 30511-09 [889]

Mastoidectomy (cortical) (simple) 41545-00 [323]

- with
- - decompression of endolymphatic sac (without shunt) 41590-00 [330]
- ~~with shunt 41590-01 [330]~~
- - insertion of cochlear prosthetic device (multiple channel) (single channel) 41617-00 [329]
- - partial resection of temporal bone 41584-00 [324]
- - - and decompression of facial nerve 41584-01 [324]
- - removal of glomus lesion (tumour) 41635-00 [312]41623-00 [312]
- - tympanoplasty — see Mastoidectomy/by type/with myringoplasty

Meatoplasty

- ear (external auditory canal) 41512-00 [305]
- - for correction of auditory canal stenosis 41521-00 [304]
- - - with skin graft 41521-01 [304]
- ~~congenital atresia 45662-00 [305]~~
- ~~correction of auditory canal stenosis 41521-00 [304]~~
- ~~with skin graft 41521-01 [304]~~
- urethra — see Urethroplasty

Myectomy (extensive) (limited) NEC 30229-00 [1565]

- for lesion of skin 31340-00 [1566]
- with vestibuloplasty (open) (oral) (submucosal) 45837-02 45837-01 [406]
- ~~submucosal 45837-00 [406]~~

- anorectal 90315-01 [933]

...

Myringotomy (unilateral) 41626-00 [309]

- with

- - aspiration 41626-00 [309]

- - - and intubation (grommet) 41632-02 [308]

- - drainage of abscess 41626-00 [309]

- - - and intubation (grommet) 41632-02 [308]

- - insertion of tube (grommet) 41632-02 [308]

- bilateral 41626-01 [309]

- - with

- - - aspiration 41626-01 [309]

- - - - and intubation (grommet) 41632-03 [308] 41632-04 [309]

- - - drainage of abscess 41626-01 [309]

- - - - and intubation (grommet) 41632-03 [308] 41632-04 [309]

- - - insertion of tube (grommet) (Shepherd's) 41632-03 [308] 41632-04 [309]

~~- unilateral 41626-00 [309]~~

~~- with~~

~~- - aspiration 41626-00 [309]~~

~~- - - and intubation 41632-00 [309]~~

~~- - drainage of abscess 41626-00 [309]~~

~~- - - and intubation 41632-00 [309]~~

~~- - insertion of tube (grommet) (Shepherd's) 41632-00 [309]~~

...

Neurotomy

- cochlear

- - retrolabyrinthine approach 41596-03 41596-04 [331]

- - - with vestibular nerve division 41596-03 41596-02 [331]

- cranial 39327-03 [73]

...

- vestibular (via posterior cranial fossa) 39500-00 [73]

- - retrolabyrinthine approach 41596-03 41596-00 [331]

- - - with cochlear nerve division 41596-03 41596-02 [331]

- - translabyrinthine approach 41596-03 41593-00 [331]

...

Obwegeser procedure

- for reconstruction of glenoid fossa, zygomatic arch and temporal bone 45788-00 [1717]

- vestibuloplasty (open) (oral) (submucosal) 45837-02 45837-04 [406]

~~- submucosal 45837-00 [406]~~

Occlusion

...

Orchiopexy — see also *Fixation/testis*

- revision — see *Refixation/testis*

Oropharyngectomy — see *Excision/lesion/oropharynx*

Orthopantomography 57960-00 [1967]

...

Procedure

...

- Obwegeser

- - for reconstruction of glenoid fossa, zygomatic arch and temporal bone 45788-00 [1717]

- - vestibuloplasty (open) (oral) (submucosal) 45837-02 45837-04 [406]

~~- submucosal 45837-00 [406]~~

- oesophagus NEC 90301-00 [869]

...

Reconstruction

- by

...

- auditory canal (external) 41512-00 [305]

~~- for congenital atresia 45662-00 [305]~~

- bladder neck 37375-00 [1123]

...

- ear (external) (total) 45660-00 [1684]

- - 1st stage 45660-00 [1684]

- - 2nd stage 45661-00 [1684]

- - auditory canal (external) 41512-00 [305]
- ~~--- for congenital atresia 45662-00 [305]~~
- extremity — see *Reconstruction/limb*
- ...

Reduction

- ...
- fracture (bone) (with cast) (with splint)
- ...
- - nasal (closed) 47738-00 [1365]
- - - open (internal fixation) (osteotomy) 47741-00 [1365]
- ~~--- sinus — see *Reduction/fracture/sinus*~~
- - olecranon (closed) 47396-00 [1428]
- ...
- - scapula (open) 47468-00 [1401]
- - - with internal fixation 47468-01 [1401]
- ~~--- sinus~~
- ~~--- frontal — see *Reduction/fracture/skull*~~
- ~~--- via intranasal approach 41737-00 [389]~~
- ~~--- maxillary — see *Reduction/fracture/maxilla*~~
- - skull (closed) (comminuted) 39606-01 [25]
- - - with internal fixation 39606-01 [25]
- - - compound — see *Reduction/fracture/skull/open*
- - - depressed 39606-00 [25]
- - - open (comminuted) (compound) 39609-02 [25]
- - - - with
- - - - - internal fixation 39609-02 [25]
- - - - - and repair of dura and brain 39612-01 [25]
- - - - - repair of dura and brain (with internal fixation) 39612-01 [25]
- - - - - depressed 39609-01 [25]
- - - - - with repair of dura and brain 39612-00 [25]
- ...

Removal — see also *Excision*

- ...
- band
- - from detached retina (encircling) (silicone) 42812-00 [209]
- - gastric, for obesity — see *Removal/gastric/band*
- - pharyngeal (lateral) ~~90149-00 41804-01 [421]~~
- bladder stimulator, electronic 90359-01 [1091]
- ...
- button
- - ear ~~tube~~ (grommet) ~~41632-04 [308] 41644-00 [312]~~
- ~~--- bilateral 41632-05 [308]~~
- - gastrostomy, nonendoscopic 30478-08 [870]
- ...
- glomus lesion (tumour)
- - transmastoid approach, ~~with mastoidectomy 41623-00 [312]~~ with mastoidectomy 41635-00 [312]
- - transtympanic approach ~~41635-00 [312] 41620-00 [312]~~
- gracilis neosphincter pacemaker 32210-02 [940]
- ...
- granuloma
- - eye (conjunctiva) 42689-00 [181]
- - middle ear — see *Clearance/granuloma/middle ear*
- - umbilical 43948-00 [989]
- grommet tube ~~41632-04 [308] 41644-00 [312]~~
- ~~--- bilateral 41632-05 [308]~~
- haematoma — see *Drainage/haematoma OR Evacuation/haematoma*
- ...
- pessary, vaginal NEC 92114-00 [1900]
- - with replacement 92109-00 [1900]
- pharyngeal
- - bands (lateral) ~~90149-00 41804-01 [421]~~
- - pouch (open) 41770-00 [421]
- ...
- tube
- - appendix 92084-00 [1896]
- - - with replacement 92080-00 [1896]
- - bile duct 92097-00 [1896]

- - - stent (endoscopic) 30451-03 [960]
- - - - with replacement 30451-02 [960]
- - - - open 30451-01 [960]
- - - - - with replacement 30451-00 [960]
- - cholecystostomy 92098-00 [1896]
- - cystostomy 92121-00 [1902]
- - - with replacement 36800-02 [1092]
- - ear (button)_(grommet) [41632-04 \[308\]](#) ~~41644-00 [312]~~
- - - bilateral [41632-05 \[308\]](#)
- - enterostomy
- - - large intestine 92084-00 [1896]
- - - - with replacement 92080-00 [1896]
- - - small intestine 92083-00 [1896]
- - - - with replacement 92079-00 [1896]
- ...
- - pyelostomy 36650-00 [1902]
- - - with replacement 36649-00 [1042]
- - silastic, ear [41632-04 \[308\]](#) ~~41644-00 [312]~~
- - - bilateral [41632-05 \[308\]](#)
- - T tube 92097-00 [1896]
- - thoracotomy 92049-00 [1908]
- - tracheostomy 92047-00 [568]
- - - with replacement 92046-00 [568]
- - tympanostomy [41632-04 \[308\]](#) ~~41644-00 [312]~~
- - - bilateral [41632-05 \[308\]](#)
- - ureterostomy 92118-00 [1902]
- - - with replacement 90367-00 [1069]

Repair

- ...
- ear
- - by reconstruction (total) 45660-00 [1684]
- - - 1st stage 45660-00 [1684]
- - - 2nd stage 45661-00 [1684]
- - auditory canal or meatus
- - - external NEC 90110-00 [304]
- - - - by reconstruction (meatoplasty) 41512-00 [305]
- - - - - for
- - - - - congenital atresia ~~45662-00 [305]~~
- - - - - correction of auditory canal stenosis 41521-00 [304]
- - - - - with skin graft 41521-01 [304]
- - - - - for correction of auditory canal stenosis 41521-00 [304]
- - - - - with skin graft 41521-01 [304]
- - - - - congenital atresia ~~45662-00 [305]~~
- - - - - correction of auditory canal stenosis 41521-00 [304]
- - - - - with skin graft 41521-01 [304]
- - - internal NEC 90112-00 [314]
- ...
- - inner NEC 90117-00 [332]
- - - cochlear NEC 90117-00 [332]
- - - labyrinth NEC 90117-00 [332]
- - - oval window [41615-01](#)~~41615-00~~ [332]
- - - - fistula (perilymph) ~~41614-01 [332]~~
- - - - round window [41615-01](#)~~41614-02~~ [332]
- - - - fistula ~~41614-00 [332]~~
- - internal auditory meatus NEC 90112-00 [314]
- - labyrinth NEC 90117-00 [332]
- - middle NEC 90112-00 [314]
- - tympanic membrane NEC 90112-00 [314]
- - wound (full thickness) 30052-00 [304]
- ...
- window (inner ear)
- - oval [41615-01](#)~~41615-00~~ [332]
- - - fistula (perilymph) ~~41614-01 [332]~~
- - - round [41615-01](#)~~41614-02~~ [332]
- - - fistula ~~41614-00 [332]~~
- wound — see also *Repair/laceration*

Rewiring

- sternum (for dehiscence or infection) 90596-00 [1378]
- - involving reopening of mediastinum 38466-00 [1379]
- [Rhinectomy \(partial\) \(total\) 90131-01 \[378\]](#)
- Rhinomanometry** 92026-00 [1846]
- Rhinoplasty** (~~with turbinectomy~~) 45638-00 [1679]
- with graft
- - bone (nasal) 45641-01 [1679]
- - - and cartilage (nasal) (septal) 45641-02 [1679]
- - - - from distant donor site 45644-02 [1679]
- - - from distant donor site 45644-01 [1679]

...

Section — *see also Division*

- ...
- nerve
- - cochlear
- - - retrolabyrinthine approach [41596-0341596-01 \[331\]](#)
- - - - with vestibular nerve section [41596-0341596-02 \[331\]](#)
- - trigeminal (intracranial) 39106-00 [73]
- - vestibular (via posterior cranial fossa) 39500-00 [73]
- - - retrolabyrinthine approach [41596-0341596-00 \[331\]](#)
- - - - with cochlear nerve section [41596-0341596-02 \[331\]](#)
- - - translabyrinthine approach [41596-0341593-00 \[331\]](#)

- ...
- Septoplasty** (~~with turbinectomy~~)
- nasal 41671-02 [379]
- - for closure of perforation 41671-01 [379]
- - with
- - - rhinoplasty — *see Septoplasty/nasal AND Rhinoplasty*
- - - submucous resection of septum 41671-03 [379]
- pancreatic duct 30458-06 [981]

...

Shunt

- ...
- endolymphatic sac 41590-004 [330]

- ...
- Sulcoplasty** (open) (oral) ([submucosal](#)) [45837-0245837-01 \[406\]](#)
- ~~submucosal 45837-00 [406]~~

Superficialisation of arteriovenous fistula 34518-00 [765]

...

Tunnelling

- electrode(s)
- - epidural
- - - percutaneous 39130-00 [43]

Turbinectomy ([unilateral](#)) 41689-02 [376]

- by
- - cauterisation [41674-0341674-00 \[374\]](#)
- - cryotherapy [41674-0341695-00 \[374\]](#)
- - diathermy [41674-0341674-00 \[374\]](#)
- - submucous resection (~~unilateral~~) 41692-00 [376]
- - - bilateral 41692-01 [376]

~~with~~

~~rhinoplasty — see Rhinoplasty~~

~~septoplasty — see Septoplasty~~

- bilateral [41689-03 \[376\]](#)

- partial (~~unilateral~~) 41689-00 [376]

- - bilateral 41689-01 [376]

- total (~~unilateral~~) 41689-02 [376]

- - bilateral 41689-03 [376]

[Turbinoplasty](#) ([unilateral](#)) [41689-04 \[376\]](#)

- bilateral [41689-05 \[376\]](#)

- TURP (transurethral resection of prostate) (with cystoscopy) (*see also Prostatectomy*) 37224-03 [1166]

- ...
- Vestibuloplasty** (Obwegeser technique) (open) (oral) ([submucosal](#)) [45837-0245837-01 \[406\]](#)
- ~~submucosal 45837-00 [406]~~

...

Window procedure

- oval ~~41615-01~~41615-00 [332]
- ~~— for closure of fistula (perilymph) 41614-01 [332]~~
- round ~~41615-01~~41614-02 [332]
- ~~— for closure of fistula 41614-00 [332]~~

Australian Coding Standards

TABLE OF CONTENTS

8. Ear, nose, mouth and throat (ENMT)

~~0803 Admission for removal of grommets~~

0804 Tonsillitis

~~0803 ADMISSION FOR REMOVAL OF GROMMETS~~

~~Tympanostomy tubes (grommets) are used for recurrent middle ear infections such as glue ear and for chronic infections, blockages or scarring of the eustachian tube. The purpose of the tube is to create a drainage path and as such, perforation of the tympanic membrane persists because of the presence of the tube.~~

~~Most tympanostomy tubes are designed to fall out of the ear naturally, allowing the tympanic membrane to heal without further assistance. However, some tympanostomy tubes are designed to be retained, usually for a period of two years. When a tympanostomy tube is retained, it may have to be surgically removed. The procedure involves freshening the edges of the perforation and removal of the tube and is coded to 41644 00 [312] *Excision of rim of perforated tympanic membrane. Assign H72.9 Perforation of tympanic membrane, unspecified* as the principal diagnosis in patients who are admitted for removal of a retained tympanostomy tube.~~

0807 FUNCTIONAL ENDOSCOPIC SINUS SURGERY (FESS)

Functional endoscopic sinus surgery (FESS) is a term describing a range of procedures performed [in any combination](#) for the surgical treatment of sinus disease.

~~FESS may include a variety of procedures performed in any combination. Therefore, clinical coders should check the operation report and assign only the appropriate codes.~~

~~These procedures may include:~~

~~[For example:](#)~~

- ~~• [biopsy of sinus](#)~~
- ~~• [ethmoidectomy](#)~~
- ~~• [incision procedures on sinus \(sinusotomy\)](#)~~
- ~~• [intranasal antrostomy](#)~~
- ~~• [intranasal removal of foreign body from sinus](#)~~
- ~~• [removal of nasal sinus polyps](#)~~
- ~~• [sinoscopy](#)~~
- ~~• [sinusectomy](#)~~

~~41716 01 [387] *Intranasal maxillary antrostomy, unilateral*
(includes formation of an antral meatal window)~~

~~41716 02 [387] *Intranasal maxillary antrostomy, bilateral*
(includes formation of an antral meatal window)~~

~~41716 00 [383] *Intranasal removal of foreign body from maxillary antrum*~~

~~41737 02 [386] *Ethmoidectomy, unilateral*~~

~~41737 03 [386] *Ethmoidectomy, bilateral*~~

~~41731 00 [386] *Ethmoidectomy, frontonasal approach*~~

~~41731 01 [386] *Ethmoidectomy with sphenoidectomy, frontonasal approach*~~

~~41737 09 [386] *Frontal sinusectomy*~~

~~41746-00 [386]—Radical obliteration of frontal sinus~~
~~41752-01 [386]—Sphenoidectomy~~
~~41716-05 [384]—Biopsy of maxillary antrum~~
~~41752-04 [384]—Biopsy of sphenoidal sinus~~
~~41737-07 [384]—Biopsy of frontal sinus~~
~~41737-08 [384]—Biopsy of ethmoidal sinus~~

Where FESS is documented, ~~also~~ assign only 96257-01 [389] Functional Endoscopic Sinus Surgery [FESS]. 41764-01 [370] Sinoscopy to indicate the endoscopic nature of the surgery. Do not assign additional codes for the individual sinus procedures performed during the FESS operative episode.

ENDOSCOPIC SINUS SURGERY WITHOUT DOCUMENTATION OF FESS

Where functional endoscopy sinus surgery or FESS is **not** documented, assign codes for the individual sinus procedures documented as performed within the operative episode. If a procedure is performed endoscopically, assign 41764-01 [370] Sinoscopy (see also ACS 0023 Laparoscopic/Arthroscopic/Endoscopic Surgery).

STANDARDS INDEX

...

Admission (admitted episode of care)(for)

...

- radiotherapy 0229
~~- removal of grommet(s)(tyimpanostomy tube(s)) 0803~~
- renal dialysis 1404

...

Grazes, obstetric 1551

Grommet(s) (tyimpanostomy tube(s))
~~-removal 0803~~

H

Haematuria syndrome 1429

...

Removal

- breast implant(s) 1204
- cement spacer 1316
- cerebrospinal fluid drain or shunt 0634
- gentamicin beads 1316
~~-grommet(s) (tyimpanostomy tubes) 0803~~

Reopening

...

Retained products of conception 1544

~~-grommet(s) (tyimpanostomy tube(s)) 0803~~
~~-products of conception 1544~~

...

TTN (transient (transitory) tachypnoea of newborn) 1613

Tympanostomy tube(s) (grommet(s))
~~-admission for removal 0803~~

Ulcer

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Epileptic Psychosis

Introduction/Rationale:

A public submission and a query (22/09, Q2691) were received highlighting Alphabetic Index inconsistencies in regards to *epilepsy* and *psychosis* and the clinical concept of 'epileptic psychosis'. It is apparent that the index pathways for this clinical concept are precoordinated, primarily for mortality case purposes with the use of *due to* and *associated with* in lead terms and subterms.

ICD-10-AM *Conventions used in the tabular list of diseases/Multiple condition coding state:*

In classifying a condition with an underlying cause, if the Alphabetic Index ... or *Excludes* note ... results in a code for one of the clinical concepts not being assigned, follow the guidelines in ACS 0001 *Principal diagnosis/Problems and underlying conditions* and assign codes for both the condition and the underlying cause.

There is also a *Use additional code* instruction at F00-F09 *Organic, including symptomatic, mental disorders* which states:

Use additional code to identify the underlying disease

Therefore, to classify epileptic psychosis, codes for both epilepsy and psychosis are required to be assigned.

Thus, ACCD proposes amendments to improve the Tabular List and Alphabetic Index for the acute, chronic and NOS forms of epileptic psychosis and postictal state.

ACCD PROPOSAL

Tabular List

LIST OF THREE-CHARACTER CATEGORIES

Organic, including symptomatic, mental disorders (F00–F09)

F00*	Dementia in Alzheimer's disease (G30.-†)
F01	Vascular dementia
F02*	Dementia in other diseases classified elsewhere
F03	Unspecified dementia
F04	Organic amnesic syndrome, not induced by alcohol and other psychoactive substances
F05	Delirium, not induced by alcohol and other psychoactive substances
F06	Other mental disorders due to brain damage and dysfunction and to physical disease or condition
F07	Personality and behavioural disorders due to brain disease, damage and dysfunction

F09 Unspecified organic or symptomatic mental disorder

...

ORGANIC, INCLUDING SYMPTOMATIC, MENTAL DISORDERS (F00–F09)

This block comprises a range of mental disorders grouped together on the basis of their having in common a demonstrable aetiology in cerebral disease, brain injury, or other insult leading to cerebral dysfunction. The dysfunction may be primary, as in diseases, injuries, and insults that affect the brain directly and selectively; or secondary, as in systemic diseases and disorders that attack the brain only as one of the multiple organs or systems of the body that are involved.

Dementia (F00–F03) is a syndrome due to disease of the brain, usually of a chronic or progressive nature, in which there is disturbance of multiple higher cortical functions, including memory, thinking, orientation, comprehension, calculation, learning capacity, language and judgement. Consciousness is not clouded. The impairments of cognitive function are commonly accompanied, and occasionally preceded, by deterioration in emotional control, social behaviour or motivation. This syndrome occurs in Alzheimer's disease, in cerebrovascular disease and in other conditions primarily or secondarily affecting the brain.

Use additional code to identify the underlying disease.

F01 Vascular dementia

Vascular dementia is the result of infarction of the brain due to vascular disease, including hypertensive cerebrovascular disease. The infarcts are usually small but cumulative in their effect. Onset is usually in later life.

Includes: arteriosclerotic dementia

Use additional code to identify underlying disease.

F01.0 Vascular dementia of acute onset

Usually develops rapidly after a succession of strokes from cerebrovascular thrombosis, embolism or haemorrhage. In rare cases, a single large infarction may be the cause.

...

F03 Unspecified dementia

Presenile:

- dementia NOS
- psychosis NOS

Primary degenerative dementia NOS

Senile:

- dementia:
 - depressed or paranoid type
 - NOS
- psychosis NOS

Use additional code to identify underlying disease.

Excludes senile dementia with delirium or acute confusional state (F05.1)
senility NOS (R54)

F04 Organic amnesic syndrome, not induced by alcohol and other psychoactive substances

A syndrome of prominent impairment of recent and remote memory while immediate recall is preserved, with reduced ability to learn new material and disorientation in time. Confabulation may be a marked feature, but perception and other cognitive functions, including the intellect, are usually intact. The prognosis depends on the course of the underlying lesion.

Use additional code to identify underlying disease.

Excludes amnesia:

- anterograde (R41.1)
- dissociative (F44.0)
- NOS (R41.3)
- retrograde (R41.2)

Korsakov's syndrome:

- alcohol-induced or unspecified (F10.6)
- induced by other psychoactive substances (F11–F19 with common fourth character .6)

★F04.0 Post traumatic amnesia

...

F05 Delirium, not induced by alcohol and other psychoactive substances

An aetiologically nonspecific organic cerebral syndrome characterised by concurrent disturbances of consciousness and attention, perception, thinking, memory, psychomotor behaviour, emotion, and the sleep-wake schedule. The duration is variable and the degree of severity ranges from mild to very severe.

Includes: acute or subacute:

- brain syndrome
- confusional state (nonalcoholic)
- infective psychosis
- organic reaction
- psycho-organic syndrome

Use additional code to identify underlying disease.

Excludes: delirium tremens, alcohol-induced or unspecified (F10.4)

F05.0 Delirium not superimposed on dementia, so described

F05.1 Delirium superimposed on dementia
Conditions meeting the above criteria but developing in the course of a dementia (F00–F03).

F05.8 Other delirium
[Acute psychosis due to or associated with physical disease or condition](#)
Delirium of mixed origin

F05.9 Delirium, unspecified

F06 Other mental disorders due to brain damage and dysfunction and to physical disease [or condition](#)

Includes: miscellaneous conditions causally related to brain disorder due to primary cerebral disease, to systemic disease affecting the brain secondarily, to exogenous toxic substances or hormones, to endocrine disorders, or to other somatic illnesses.

Use additional code to identify underlying disease.

Excludes: associated with [dementia — see Alphabetic Index](#):
~~• delirium (F05.-)~~
~~• dementia as classified in F00–F03~~
resulting from use of alcohol and other psychoactive substances (F10–F19)

F06.0 Organic hallucinosis
A disorder of persistent or recurrent hallucinations, usually visual or auditory, that occur in clear consciousness and may or may not be recognised by the subject as such. Delusional elaboration of the hallucinations may occur, but delusions do not dominate the clinical picture; insight may be preserved.
Organic hallucinatory state (nonalcoholic)

Excludes: alcoholic hallucinosis (F10.5)
schizophrenia (F20.-)

F06.1 Organic catatonic disorder
A disorder of diminished (stupor) or increased (excitement) psychomotor activity associated with catatonic symptoms. The extremes of psychomotor disturbance may alternate.

Excludes: catatonic schizophrenia (F20.2)
stupor:
• dissociative (F44.2)
• NOS (R40.1)

F06.2 Organic delusional [schizophrenia-like] disorder
A disorder in which persistent or recurrent delusions dominate the clinical picture. The delusions may be accompanied by hallucinations. Some features suggestive of schizophrenia, such as bizarre hallucinations or thought disorder, may be present.

Paranoid and paranoid-hallucinatory organic states
Schizophrenia-like psychosis ~~in epilepsy~~

Excludes: disorder:

- acute and transient psychotic (F23.-)
- persistent delusional (F22.-)
- psychotic drug-induced (F11–F19 with common fourth character .5) schizophrenia (F20.-)

F06.3 Organic mood [affective] disorders

....

F06.8 Other specified mental disorders due to brain damage and dysfunction and to physical disease [or condition](#)
~~Epileptic psychosis NOS~~
[Psychosis \(chronic\) \(NOS\) due to physical disease or condition](#)

F06.9 Unspecified mental disorder due to brain damage and dysfunction and to physical disease [or condition](#)
 Organic:
 • brain syndrome NOS
 • mental disorder NOS

F23 Acute and transient psychotic disorders

A heterogeneous group of disorders characterised by the acute onset of psychotic symptoms such as delusions, hallucinations, and perceptual disturbances, and by the severe disruption of ordinary behaviour. Acute onset is defined as a crescendo development of a clearly abnormal clinical picture in about two weeks or less. For these disorders there is no evidence of organic causation. Perplexity and puzzlement are often present but disorientation for time, place and person is not persistent or severe enough to justify a diagnosis of organically caused delirium (F05.-). Complete recovery usually occurs within a few months, often within a few weeks or even days. If the disorder persists, a change in classification will be necessary. The disorder may or may not be associated with acute stress, defined as usually stressful events preceding the onset by one to two weeks.

Excludes: [psychosis \(chronic\) \(NOS\) due to:](#)
 • [brain damage or dysfunction \(F06.8\)](#)
 • [physical disease or condition \(F06.8\)](#)

The following fifth character subdivisions are for use with subcategories F23.0 – F23.9:

- ⊛ 0 without mention of associated acute stress
- ⊛ 1 with mention of associated acute stress

...

F23.2 Acute schizophrenia-like psychotic disorder

See subdivisions

An acute psychotic disorder in which the psychotic symptoms are comparatively stable and justify a diagnosis of schizophrenia, but have lasted for less than about one month; the polymorphic unstable features, as described in F23.0-, are absent. If the schizophrenic symptoms persist the diagnosis should be changed to schizophrenia (F20.-).

Acute (undifferentiated) schizophrenia

Brief schizophreniform:

- disorder
- psychosis

Oneirophrenia

Schizophrenic reaction

Excludes organic delusional [schizophrenia-like] disorder [\(chronic\) \(NOS\)](#) (F06.2)
 schizophreniform disorders NOS (F20.8)

...

Alphabetic Index

...

Amnesia R41.3

- anterograde R41.1
- auditory R48.8
- dissociative F44.0
- hysterical F44.0
- post traumatic F04.00
- - duration
- - - < 24 hours F04.01
- - - ≥ 24 hours and < 14 days F04.02
- - - ≥ 14 days F04.03
- ~~postictal in epilepsy G40.9~~
- psychogenic F44.0
- retrograde R41.2
- transient global G45.4

...

Confusion, confused R41.0

- ~~epileptic F05.8~~
- mental state (psychogenic) F44.88
- psychogenic F44.88
- reactive (from emotional stress, psychological trauma) F44.88

...

Delirium, delirious (acute or subacute) (not alcohol- or drug-induced) F05.9

...

- puerperal F05.8
- [specified NEC F05.8](#)
- superimposed on dementia F05.1

...

Deterioration

- ~~epileptic F06.8~~
- general physical R53
- heart, cardiac (see also *Degeneration/myocardial*) I51.5
- mental (see also *Psychosis*) F29
- myocardial, myocardium (see also *Degeneration/myocardial*) I51.5
- senile (simple) R54

...

Disorder (of) — see also *Disease*

...

- acute
- - psychotic ~~— (see also *Psychosis/acute*) F23.9~~
- ~~— with schizophrenia-like features F23.2~~
- ~~— specified NEC F23.8~~
- adjustment F43.2
- ...
- psychotic (due to) ~~— (see also *Psychosis*) F29~~
- ~~— acute F23.9~~
- ~~— specified NEC F23.8~~
- ~~— alcohol(-induced), alcoholic intoxication (acute) (immediate) F10.5~~
- ~~— residual and late onset F10.7~~
- ~~— amphetamine (intoxication) (or related substance) F15.59~~
- ~~— anxiolytic (intoxication) F13.5~~
- ~~— brief~~
- ~~— with schizophrenia-like features F23.2~~
- ~~— without schizophrenia-like features F23.3~~
- ~~— cannabis F12.5~~
- ~~— cocaine (intoxication) F14.5~~
- ~~— delusional F22.0~~
- ~~— acute F23.3~~
- ~~— drug-induced (immediate) (see also *F11–F19 with fourth character .5*) F19.5~~
- ~~— residual and late onset (see also *F11–F19 with fourth character .7*) F19.7~~
- ~~— ecstasy F15.52~~
- ~~— intoxication (acute) F15.02~~
- ~~— withdrawal F15.42~~
- ~~— gamma hydroxybutyrate (GHB) F13.51~~
- ~~— intoxication (acute) F13.01~~

- ~~--- withdrawal F13.41~~
- ~~--- general medical condition (secondary) with~~
- ~~--- delusions F06.2~~
- ~~--- hallucinations F06.0~~
- ~~--- hallucinogens F16.5-~~
- ~~--- intoxication (acute) F16.0-~~
- ~~--- withdrawal F16.4-~~
- ~~--- hypnotic (intoxication) F13.5-~~
- ~~--- induced F24~~
- ~~--- inhalant (intoxication) F18.5~~
- ~~--- ketamine F16.51~~
- ~~--- intoxication (acute) F16.01~~
- ~~--- withdrawal F16.44~~
- ~~--- metamphetamine (intoxication) F15.51~~
- ~~--- methamphetamine (intoxication) F15.51~~
- ~~--- methylamphetamine (intoxication) F15.51~~
- ~~--- methylenedioxy methamphetamine (MDMA) F15.52~~
- ~~--- intoxication (acute) F15.02~~
- ~~--- withdrawal F15.42~~
- ~~--- opioid intoxication (acute) F11.5~~
- ~~--- phencyclidine (or related substance) (PCP) F19.5~~
- ~~--- acute intoxication F19.0~~
- ~~--- polymorphic, acute (without symptoms of schizophrenia) F23.0-~~
- ~~--- with symptoms of schizophrenia F23.1-~~
- ~~--- psychoactive substance NEC~~
- ~~--- intoxication F19.5~~
- ~~--- withdrawal F19.3~~
- ~~--- residual and late onset~~
- ~~--- alcohol-induced F10.7~~
- ~~--- drug-induced — code to F11–F19 with fourth character .7~~
- ~~--- sedative (intoxication) F13.5-~~
- ~~--- transient (acute) F23.9-~~
- ~~--- specified NEC F23.8-~~
- puberty E30.9
- ...
- schizoid, of childhood F84.5
- [schizophrenia-like \(chronic\) F06.2](#)
- ~~acute F23.2-~~
- schizophreniform F20.8
- - brief F23.2-
- ...

Epilepsy, epileptic, epilepsia G40.9-

- ...
- psychomotor G40.2-
- psychosensory G40.2-
- [psychosis NEC \(see also Psychosis\) F06.8](#)
- - [with delirium \(acute\) F05.8](#)
- - [schizophrenia-like \(chronic\) F06.2](#)
- - - ~~acute F23.2-~~
- reflex G40.8-
-
- traumatic (injury unspecified) T90.5
- - injury specified — code to Sequelae/by specific injury
- ~~twilight F05.8~~
- uncinata (gyrus) G40.2-
- ...

Episode

- affective, mixed F38.0
- brain (apoplectic) I64
- cerebral (apoplectic) I64
- depressive — ~~(see also Disorder/depressive) F32.9-~~
- hypomanic F30.0
- manic F30.9
- - recurrent F31.8
- psychotic — ~~(see also Psychosis) F23.9-~~
- ~~organic F06.8~~
- ~~schizophrenic (acute) brief NEC F23.2-~~
- [schizophrenia-like \(chronic\) F06.2](#)
- - [acute F23.2-](#)

...

Fugue R68.8

- dissociative F44.1
- hysterical F44.1
- ~~- postictal in epilepsy G40.9~~
- reaction to exceptional stress (transient) F43.0

...

Posthitis N48.1

Postictal (state) — see *Epilepsy*

Postimmunisation complication or reaction — see *Complication(s)/vaccination*

Postinfectious — see *condition*

...

Psychosexual identity disorder of childhood F64.2

Psychosis, psychotic F29

- acute (transient) F23.9-
- ~~- - delusional F23.3-~~
- ~~- - due to or associated with physical disease or condition F06.8~~
- - hysterical F44.9
- ~~- - polymorphic (without symptoms of schizophrenia) F23.0-~~
- ~~- - - with symptoms of schizophrenia F23.1-~~
- ~~- - schizophrenia-like F23.2-~~
- - specified NEC F23.8-
- affective (see also *Disorder/affective*) F39
- ...
- drug-induced — code to F11–F19 with fourth character .5
- - late onset — code to F11–F19 with fourth character .7
- - paranoid and hallucinatory states — code to F11–F19 with fourth character .5
- due to or associated with
- - addiction, drug (see also *Psychosis/drug-induced*) F1-.5
- - dementia (see also *Dementia*) F03
- - dependence
- - - alcohol (see also *Psychosis/alcoholic*) F10.5
- - - drug — code to F11–F19 with fourth character .5
- ~~- - epilepsy F06.8~~
- ~~- - Huntington's chorea F06.8~~
- ~~- - ischaemia, cerebrovascular (generalised) F06.8~~
- ~~- - multiple sclerosis F06.8~~
- - physical disease or condition F06.8
- - presenile dementia F03
- - senile dementia F03
- - vascular disease (arteriosclerotic) (cerebral) F01.9
- epileptic F06.8
- ~~- - with delirium (acute) F05.8~~
- ~~- - schizophrenia-like (chronic) F06.2~~
- ~~- - - acute F23.2-~~
- episode F23.9-
- - due to or associated with physical disease or condition F06.8
- ~~- - - with delirium (acute) F05.8~~
- ~~- - - schizophrenia-like (chronic) F06.2~~
- ~~- - - - acute F23.2-~~
- exhaustive F43.0
- ...
- nonorganic F29
- - specified NEC F28
- organic F09
- - due to or associated with
- - - Creutzfeldt-Jakob disease or syndrome A81.0† F02.1*
- - - disease or physical condition NEC F06.8
- ~~- - - - with delirium (acute) F05.8~~
- ~~- - - - cerebrovascular F01.9~~
- ~~- - - - Creutzfeldt-Jakob A81.0† F02.1*~~
- ~~- - - - endocrine or metabolic F06.8~~
- ~~- - - - acute or subacute F05.8~~
- - - - liver, alcoholic (see also *Psychosis/alcoholic*) F10.5
- ~~- - - - epilepsy, transient (acute) F05.8~~
- ~~- - - - infection~~
- ~~- - - - brain (intracranial) F06.8~~
- ~~- - - - acute or subacute F05.8~~

- - - intoxication
- - - - alcoholic (acute) F10.5
- - - - drug (see also *Psychosis/drug-induced*) F1-.5
- - - puerperium — see *Psychosis/puerperal*
- - - ~~trauma, brain (birth) (from electric current) (surgical) F06.8~~
- - - ~~acute or subacute F05.8~~
- - in pregnancy or childbirth O99.31
- - ~~infective F06.8~~
- - ~~acute or subacute F05.9~~
- - post traumatic F06.8
- - ~~acute or subacute F05.9~~
- - [schizophrenia-like \(chronic\) F06.2](#)
- - - [acute F23.2-](#)
- - paranoiac F22.0
- ...
- schizophrenia, schizophrenic (see also *Schizophrenia*) F20.9
- schizophrenia-like, ~~in epilepsy~~ [\(chronic\) F06.2](#)
- - - [acute F23.2-](#)
- schizophreniform F20.8
- ...
- symptomatic F09
- [transient \(acute\) F23.9-](#)
- - [polymorphic \(without symptoms of schizophrenia\) F23.0-](#)
- - - [with symptoms of schizophrenia F23.1-](#)
- - [schizophrenia-like F23.2-](#)
- - [specified NEC F23.8-](#)
- Psychosomatic** — see *Disorder/psychosomatic*
- ...
- Reaction** — see also *Disorder*
- ...
- psychotic — see *Psychosis* [F23.9-](#)
- ~~due to or associated with physical condition F06.8~~
- radiation NEC T66
- scarlet fever toxin — see *Complication(s)/vaccination*
- [schizophrenia-like \(chronic\) F06.2](#)
- - [acute F23.2-](#)
- schizophrenic F23.2-
- ~~acute (brief) (undifferentiated) F23.2-~~
- - latent F21
- - undifferentiated, ~~(acute)~~ (brief) F23.2-
- ...
- State** (of)
- affective and paranoid, mixed, organic psychotic F06.8
- agitated R45.1
- - acute reaction to stress F43.0
- anxiety (neurotic) F41.1
- apprehension F41.1
- burnout Z73.0
- climacteric, female N95.1
- clouded epileptic or paroxysmal G40.8-
- compulsive F42.1
- - mixed with obsessional thoughts F42.2
- confusional (psychogenic) F44.88
- - acute or subacute (see also *Delirium*) F05.9
- - - with senility or dementia F05.1
- ~~epileptic F05.8~~
- - reactive (from emotional stress, psychological trauma) F44.88
- convulsive (see also *Convulsions*) R56.8
- ...
- phobic F40.9
- [postictal](#) — see *Epilepsy*
- postleukotomy F07.0
- ...
- tension (mental) F48.9
- - specified NEC F48.8
- twilight, [psychogenic F44.88](#)
- ~~epileptic F05.8~~

~~— psychogenic F44.88~~

- vital exhaustion Z73.0

- withdrawal — see *Withdrawal/state*

...

Tussis convulsiva (see also Whooping cough) A37.9

Twilight state, [psychogenic F44.88](#)

~~— epileptic F05.8~~

~~— psychogenic F44.88~~

Twin

- conjoined NEC Q89.40

...



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda proposal

Personal history of stroke

Introduction/Rationale:

This addenda proposal is the result of a query and subsequent public submission.

ACCD reviewed the identified issue and the cited scenario: patient admitted to hospital, with a history of stroke (no residuals) and is investigated for symptoms (such as confusion or transitory muscle weakness) that may be related to another (new) stroke.

In this scenario the personal history of stroke is a risk factor and is coded as per ACS 0002 *Additional diagnoses*:

Risk factors should only be coded if they meet the additional diagnosis criteria ... or another standard indicates they should be coded.

ACS 0604 *Stroke/Point 3 Old CVA (Cerebrovascular Accident)* states:

Old CVA – care should be taken when coding this inappropriate and misleading diagnostic statement which might mean either:

1. the patient has a history of stroke with no neurological deficits now present, or
2. a history of stroke with neurological deficits still present.

In point 2 above, the neurological deficit is coded as well as I69.- *Sequelae of cerebrovascular disease* where the deficits meet the criteria for additional diagnoses (see ACS 0002 *Additional diagnoses*).

Do not assign an I69.- code alone, ie it should always be preceded by a code indicating a late effect manifestation (eg hemiparesis, aphasia).

Note: there is no classification instruction for point 1, thus ACS 0002 *Additional diagnoses* is applied.

ACCD proposes the expansion of Z86.6 *Personal history of diseases of the nervous system and sense organs* and Z86.7 *Personal history of diseases of the circulatory system* for 'personal history of stroke' and other circulatory disorders when they meet the criteria in ACS 0002 *Additional diagnoses* and ACS 2112 *Personal history*.

In the development of this proposal, two additional related areas were highlighted. These are:

- history of thrombosis and embolism which (from anecdotal evidence) often affects patient management (particularly in a surgical setting)
- Other variants of cerebrovascular disease (such as prolonged reversible ischaemic neurological deficit (PRIND), reversible ischaemic neurological deficit (RIND), posterior reversible encephalopathy syndrome (PRES), reversible posterior leukoencephalopathy syndrome (RPLS), and reversible cerebral vasoconstriction syndrome (RCVS)), some of which have existing coding rules which can be retired.

ACCD proposes the addition of these conditions to the classification.

ACCD PROPOSAL

Tabular List

...

I69 Sequelae of cerebrovascular disease

▽ 0008, 0050, 0604

Note: Category I69 is to be used to indicate previous episodes of conditions in I60–I67.1 and I67.4–I67.9 as the cause of sequelae, themselves classified elsewhere. The sequelae include conditions specified as such or as late effects, or those present one year or more after onset of the causal condition.

[Code first the neurological deficit](#)

Excludes: chronic cerebrovascular disease (I60–I67)
[history of cerebrovascular disease with no sequelae \(residual deficits\) \(Z86.71\)](#)

- I69.0 Sequelae of subarachnoid haemorrhage
- I69.1 Sequelae of intracerebral haemorrhage
- I69.2 Sequelae of other nontraumatic intracranial haemorrhage
- I69.3 Sequelae of cerebral infarction
- I69.4 Sequelae of stroke, not specified as haemorrhage or infarction
- I69.8 Sequelae of other and unspecified cerebrovascular diseases

...

Z86 Personal history of certain other diseases

▽ 0050, 2112

Excludes: follow-up medical care and convalescence (Z42–Z51, Z54.-)

...

Z86.6 Personal history of diseases of the nervous system and sense organs
Conditions classifiable to G00–G99, H00–H95

[Z86.61](#) [Personal history of transient ischaemic attack \[TIA\]](#)

[Z86.69](#) [Personal history of diseases of the nervous system and sense organs, not elsewhere classified](#)

Z86.7 Personal history of diseases of the circulatory system
Conditions classifiable to I00–I99

Excludes: old myocardial infarction (I25.2)
postmyocardial infarction syndrome (I24.1)
~~sequelae of cerebrovascular disease (I69.-)~~

[Z86.71](#) [Personal history of cerebrovascular disease](#)

[0604](#) [Personal history of stroke NOS without residual deficits](#)

Excludes: [sequelae \(residual deficits\) of cerebrovascular disease \(I69.-\)](#)

[Z86.72](#) [Personal history of thrombosis and embolism](#)

[Personal history of thrombosis or embolism:](#)

- [pulmonary](#)
- [venous](#)

Excludes: [personal history of cerebrovascular thrombosis and embolism \(Z86.71\) that with current:](#)

- [abnormal coagulation profile \(R79.83\)](#)
- [haemorrhagic disorder due to circulating anticoagulants \(D68.3\)](#)
- [long term use of anticoagulants without haemorrhagic disorder \(Z92.1\)](#)

[Z86.79](#) [Personal history of diseases of the circulatory system, not elsewhere classified](#)

Alphabetic Index

Accident

- ...
- cerebral ~~I64~~ — [see Accident/cerebrovascular](#)
- cerebrovascular I64
- - haemorrhagic I61.9
- - ischaemic (stroke) (*see also Infarction/cerebral*) I63.9
- - old I69.4-
- - - without residuals [Z86.71](#)
- coronary (*see also Infarct/myocardium*) I21.9
- ...

Apoplexia, apoplexy, apoplectic I64

- ...
- haemorrhagic (stroke) (*see also Haemorrhage/intracerebral*) I61.9
- ~~- healed or old — see I69~~
- ~~- without residuals Z86.7~~
- heart (auricle) (ventricle) (*see also Infarct/myocardium*) I21.9
- ...
- meninges, haemorrhagic (*see also Haemorrhage/subarachnoid*) I60.9
- old I69.-
- - without residual deficits [Z86.71](#)
- progressive I64

Attack

- ...
- cataleptic — *see Catalepsy*
- cerebral I64
- - old I69.-
- - - without residual deficits [Z86.71](#)
- coronary — *see Infarct/myocardium*
- ...
- toxic, cerebral R56.8
- transient ischaemic (TIA) G45.9
- - history [Z86.61](#)
- - specified NEC G45.8
- unconsciousness R55

Chorea (gravis) (spasmodic) G25.5

- with
- - heart involvement I02.0
- - - active or acute (conditions in I01.-) I02.0
- - rheumatic heart disease (chronic) (inactive) (quiescent) — *code to rheumatic heart condition involved*
- apoplectic I64
- - [old I69.-](#)
- - - [without residual deficits Z86.71](#)
- chronic G25.5

...

Deficient perineum (female) N81.8

Deficit — *see also Deficiency*

- attention — *see Attention/deficit disorder or syndrome*
- neurologic
- - reversible ischaemic ([prolonged \(PRIND\)\) \(RIND\) NEC G45.9](#)
- - - [history Z86.61](#)

...

Episode

- affective, mixed F38.0
- ~~brain (apoplectic) I64~~
- ~~cerebral (apoplectic) I64~~
- depressive (*see also Disorder/depressive*) F32.9-

...

History (of) (personal)

...

- contraception Z92.0
- [deep venous thrombosis \(DVT\) Z86.72](#)
- disease or disorder (of) Z87.8
- - blood and blood-forming organs Z86.2
- - [cerebrovascular \(without residual deficits\) Z86.71](#)
- - circulatory system [NEC Z86.79](#)
- - - [cerebrovascular disease \(without residual deficits\) Z86.71](#)
- - - [embolism \(pulmonary\) \(venous\) Z86.72](#)
- - - - [cerebrovascular Z86.71](#)
- - - [thrombosis \(pulmonary\) \(venous\) Z86.72](#)
- - - - [cerebrovascular Z86.71](#)
- - digestive system Z87.10
- - ear [Z86.69](#)
- - endocrine Z86.3
- - eye [Z86.69](#)
- - genital system Z87.4
- - haematological Z86.2
- - immune mechanism Z86.2
- - infectious Z86.10
- - - malaria Z86.13
- - - poliomyelitis Z86.12
- - - specified disease or disorder NEC Z86.18
- - - tuberculosis Z86.11
- - mental NEC Z86.5
- - metabolic Z86.3
- - musculoskeletal Z87.3
- - nervous system [NEC Z86.69](#)
- - nutritional Z86.3
- - obstetric Z87.5
- - parasitic Z86.10
- - - specified disease or disorder NEC Z86.18
- - respiratory system Z87.0
- - sense organs [NEC Z86.69](#)
- - skin Z87.2

...

- elevated blood sugar levels Z86.3
- [embolism \(pulmonary\) \(venous\) Z86.72](#)
- [cerebrovascular Z86.71](#)
- family, of

....

- hyperthermia, malignant Z88.4

- in situ neoplasm Z86.0
- [infarction, cerebral \(brain\) \(without residual deficits\) Z86.71](#)
- injury NEC Z91.6
- ...
- specified disease NEC Z86.18
- [stroke \(without residual deficits\) Z86.71](#)
- suicide attempt Z91.5
- surgery (major) NEC Z92.4
- - transplant — see *Transplant(ed)*
- [thrombosis \(pulmonary\) \(venous\) Z86.72](#)
- - [cerebrovascular Z86.71](#)
- tobacco use disorder Z86.43
- [transient ischaemic attack \(TIA\) Z86.61](#)
- trauma NEC Z91.6
- ...

Infarct, infarction (of)

- ...
- brain (see ~~also~~ *Infarct/cerebral*) ~~I63.9~~
- ~~embolic I63.4~~
- ~~in pregnancy, childbirth or puerperium O99.4~~
- breast N64.8
- cardiac (see ~~also~~ *Infarct/myocardium*) ~~I21.9~~
- cerebellar (see ~~also~~ *Infarct/cerebral*) ~~I63.9~~
- ~~embolic I63.4~~
- cerebral I63.9
- - due to
- - - cerebral venous thrombosis, nonpyogenic I63.6
- - - embolism
- - - - cerebral arteries I63.4
- - - - precerebral arteries I63.1
- - - occlusion NEC
- - - - cerebral arteries I63.5
- - - - precerebral arteries I63.2
- - - stenosis NEC
- - - - cerebral arteries I63.5
- - - - precerebral arteries I63.2
- - - thrombosis
- - - - cerebral arteries I63.3
- - - - precerebral arteries I63.0
- - [in pregnancy, childbirth or puerperium O99.4](#)
- - [old I69.3](#)
- - [without residual deficits Z86.71](#)
- - specified NEC I63.8
- colon K55.0
- ...

Ischaemia, ischaemic I99

- brain — (see ~~also~~ *Ischaemia/cerebral*) ~~I67.8~~
- cardiac — see *Disease/heart/ischaemic*
- cardiomyopathy I25.5
- cerebral (chronic) (generalised) I67.8
- - arteriosclerotic I67.2
- - in pregnancy, childbirth or puerperium O99.4
- - intermittent G45.9
- - newborn P91.0
- - ~~old I69.-~~
- - [without residual deficits Z86.71](#)
- - recurrent focal G45.8
- - transient G45.9
- - [history Z86.61](#)
- coronary (see also *Ischaemia/heart*) I25.9
- ...

Seizure(s) (see also *Convulsions*) R56.8

- akinetic G40.3-
- ~~apoplexy, apoplectic I64~~
- atonic G40.3-
- autonomic (hysterical) F44.5
- ~~brain or cerebral I64~~
- convulsive (see also *Convulsions*) R56.8

- ...
- newborn P90
- ~~paralysis I64~~
- petit mal — see *Petit mal*
- ...

Stroke (apoplectic) (brain) (paralytic) I64

- ...
- in pregnancy, childbirth or puerperium O99.4
- ischaemic (see also *Infarction/cerebral*) I63.9
- lightning T75.0
- ~~old I69.-~~
- - ~~without residual deficits Z86.71~~
- ...

Syndrome NEC — (see also *Disease*) U91

- ...
- ~~cerebral artery~~
- ~~anterior I66.1† G46.1*~~
- ~~with infarction (due to) I63.5~~
- ~~embolism I63.4~~
- ~~thrombosis I63.3~~
- ~~middle I66.0† G46.0*~~
- ~~with infarction (due to) I63.5~~
- ~~embolism I63.4~~
- ~~thrombosis I63.3~~
- ~~posterior I66.2† G46.2*~~
- ~~with infarction (due to) I63.5~~
- ~~embolism I63.4~~
- ~~thrombosis I63.3~~
- cerebral
- - artery
- - - anterior I66.1† G46.1*
- - - with infarction (due to) I63.5
- - - - embolism I63.4
- - - - thrombosis I63.3
- - - history Z86.71
- - - middle I66.0† G46.0*
- - - with infarction (due to) I63.5
- - - - embolism I63.4
- - - - thrombosis I63.3
- - - posterior I66.2† G46.2*
- - - with infarction (due to) I63.5
- - - - embolism I63.4
- - - - thrombosis I63.3
- - vasoconstriction, reversible (RCVS) I67.8
- cerebrohepatorenal Q87.89
- ...
- empty nest Z60.0
- encephalopathy, posterior reversible (leukoencephalopathy) (PRES) (RPLS) I67.8
- history Z86.71
- Engelmann(-Camurati) Q78.3
- ...
- posterior
- - cervical sympathetic M53.0
- - cord S14.13
- - reversible encephalopathy (PRES) I67.8
- - history Z86.71
- postgastrectomy (dumping) K91.1
- ...
- Rett's F84.2
- reversible
- - cerebral vasoconstriction (RCVS) I67.8
- - history Z86.71
- - posterior leukoencephalopathy (RPLS) I67.8
- - history Z86.71
- Reye's G93.7
- ...

Australian Coding Standards

0604 ~~STROKE~~-CEREBROVASCULAR ACCIDENT (CVA)

Cerebrovascular accident (CVA) and stroke are nonspecific terms. Before assigning I64 *Stroke, not specified as haemorrhage or infarction*, attempt to obtain a more specific diagnosis (eg subarachnoid haemorrhage, intracerebral haemorrhage, or cerebral infarction).

~~1. CURRENT~~CVA WITH RESIDUAL DEFICITS

~~Stroke is a nonspecific term. Before assigning a code, attempt to obtain a more specific diagnosis (eg subarachnoid haemorrhage (I60), intracerebral haemorrhage (I61), cerebral infarction (I63)).~~

~~Sequelae (late effect)~~

The usual ~~presentation~~application of residual deficits (also known as sequelae) is where a deficit arises as a result of a condition and often occurs later than the initial condition (eg scoliosis following rickets). ~~Stroke-CVA~~ differs, in that the deficits may be an~~manifest~~ immediately result of the stroke.

~~While the patient is receiving continuing treatment, regardless of the period of time elapsed since the stroke, assign a code from categories I60–I64 (cerebrovascular diseases) with any applicable deficit codes (eg hemiplegia).~~

CLASSIFICATION

• Assign a code from categories I60–I64 (cerebrovascular diseases) with codes for any deficit(s) (eg hemiplegia) regardless of the period of time elapsed since the CVA occurred, or care type changes that occur, during the initial episode(s) of care.

For the purposes of classification, the initial episode(s) of care is defined as complete at the time of discharge of the patient (ie to their residence (home or residential care facility), or upon their death) following acute and/or rehabilitation care. Note: If rehabilitation is undertaken at a second facility immediately following an acute episode of care at another facility for the CVA as a continuum of care, facility two is considered part of the initial episode(s) of care.

EXAMPLE 1:

A patient is admitted following ~~suffers~~ a cerebral infarction on 1 January and is transferred to a rehabilitation facility on 7 January for rehabilitation for residual hemiparesis and aphasia.

FACILITY 1:

Codes: I63.- Cerebral infarction
G81.9 Hemiplegia, unspecified
R47.0 Dysphasia and aphasia

FACILITY 2:

Codes: I63.- Cerebral infarction
G81.9 Hemiplegia, unspecified
R47.0 Dysphasia and aphasia

Z50.9 Care involving use of rehabilitation procedure, unspecified

(See also ACS 2104 Rehabilitation)

• ~~Assign codes from category I69- Sequelae of cerebrovascular disease codes should only be used~~ when the initial treatment period is complete but the patient is later admitted with a residual deficit(s) are still manifest and meet which meeting the criteria for an additional diagnosis in ACS 0001 Principal diagnosis or ACS 0002 Additional diagnoses (see also ACS 0008 Sequelae and ACS 1912 Sequelae of injuries, poisoning, toxic effects and other external causes).

EXAMPLE 2:

A patient admitted for a right hemicolectomy (under GA) for severe diverticulitis of the large colon. The patient also had a residual hemiparesis from a stroke ten years previously. ~~The y were patient was~~ slow to mobilise post-surgery due to the residual impairment, and intervention was provided by the physiotherapist.

Codes:	<u>K57.32</u>	<u>Diverticulitis of large intestine without perforation, abscess or mention of haemorrhage</u>
	G81.9	<u>Hemiplegia, unspecified</u>
	I69.-	<u>Sequelae of cerebrovascular disease</u>
	<u>32003-01 [913]</u>	<u>Right hemicolectomy with anastomosis</u>
	<u>92514-99 [1910]</u>	<u>General anaesthesia, ASA 99</u>
	<u>95550-03 [1916]</u>	<u>Allied health intervention, physiotherapy</u>

2. SEVERITY

The severity of a CVA is indicated by certain associated conditions present during the episode of care. Each condition must meet the criteria for an additional diagnosis as per ACS 0002 Additional diagnoses and/or is assigned as per classification guidelines in another Australian Coding Standard.

Examples of conditions associated with CVA include (but are not limited to):

- aspiration pneumonitis
- pressure injury (ulcer)
- dysphagia
- incontinence
- urinary retention

~~The Neurosciences CCGG has produced a list of additional diagnosis codes which give some indication of the severity of a stroke episode. It is interesting to note that it is not necessarily the deficits, such as hemiplegia, which indicate that a stroke is 'severe'. This table is provided here primarily for interest, as the conditions listed here would be coded routinely during the abstraction process. However, **note that for a stroke case, dysphagia, urinary incontinence and faecal incontinence, should only be coded when certain criteria are met.**~~

STROKE—ADDITIONAL DIAGNOSES

Additional Diagnosis	ICD-10 AM Code(s)
Urinary tract infection, site not specified	N39.0
Aspiration pneumonitis	J69.0
Pneumonia	J12.0, J12.1, J12.2, J12.8, J12.9, J13, J14, J15.0, J15.1, J15.2, J15.3, J15.4, J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17.0, J17.1, J17.2, J17.3, J17.8, J18.0, J18.1, J18.2, J18.8, J18.9
Pressure injury (ulcer) and lower limb ulcer	L89.—, L97.—
Pulmonary embolism and venous thrombosis	I26.0, I26.9, I80.2
Dysphagia—should be assigned only when requiring nasogastric tube/enteral feeding, or when the dysphagia is present at discharge or still requiring treatment more than 7 days after the stroke occurred	R13
Urinary incontinence—should be assigned only when the incontinence is present at discharge or persists for at least 7 days	R32, N39.3, N39.4
Faecal incontinence—should be assigned only when the incontinence is present at discharge or persists for at least 7 days	R15
Urinary retention	R33
Aphasia/dysphasia	R47.0
Septicaemia/sepsis	A40.0, A40.1, A40.2, A40.3, A40.8, A40.9, A41.0, A41.1, A41.2, A41.3, A41.4, A41.50, A41.51, A41.52, A41.58, A41.8, A41.9
Other bacterial diseases (eg gangrene)	A30.0, A30.1, A30.2, A30.3, A30.4, A30.5, A30.8, A30.9, A31.0, A31.1, A31.8, A31.9, A32.0, A32.1, A32.7, A32.8, A32.9, A33, A34, A35, A36.0, A36.1, A36.2, A36.3, A36.8, A36.9, A37.0, A37.1, A37.8, A37.9, A38, A39.0, A39.1, A39.2, A39.3, A39.4, A39.5, A39.8, A40.0, A40.1, A40.2, A40.3, A40.8, A40.9, A41.1, A41.2, A41.3, A41.4, A41.50, A41.51, A41.52, A41.58, A41.8, A41.9, A42.0, A42.1, A42.2, A42.7, A42.8, A42.9, A43.0, A43.1, A43.8, A43.9, A44.0, A44.1, A44.8, A44.9, A46, A48.0, A48.1, A48.2, A48.3, A48.4, A48.8, A49.00, A49.01, A49.1, A49.2, A49.3, A49.8, A49.9, B96.88, R02

3. OLD CVA (GEREBROVASCULAR ACCIDENT)

Old CVA—care should be taken when coding this inappropriate and misleading diagnostic statement which might may mean either:

- 1.—the patient has a history of stroke with no neurological deficits now present, **or**
- 2.—a history of stroke **with** neurological deficits still present.

In point 2 above, the neurological deficit is coded as well as I69.—*Sequelae of cerebrovascular disease where the deficits meet the criteria for additional diagnoses (see ACS-0002 Additional diagnoses).*

Do not assign an I69.— code alone, ie it should always be preceded by a code indicating a late effect manifestation (eg hemiparesis, aphasia).

1. a history of stroke **without** residual deficit(s) present

or

2. a history of stroke **with** residual deficit(s) present.

- Where history of stroke with residual deficit(s) present, assign first a code for the residual deficit(s), with a code from category I69 *Sequela* of cerebrovascular disease where the deficit(s) meet the criteria for additional diagnoses (see ACS 0002 *Additional diagnoses*).
- Where the deficit(s) does not meet the criteria for additional diagnoses (see ACS 0002 *Additional diagnoses*) but the history of stroke does meet the criteria in ACS 0002, assign Z86.71 *Personal history of cerebrovascular disease*.
- Where there is no deficit(s) but history of stroke is relevant to the episode of care, assign Z86.71 *Personal history of cerebrovascular disease* (see ACS 0002 *Additional diagnoses/Family and personal history and certain conditions influencing health status (Z80-Z99)*).

2104 REHABILITATION

...

For further information on the assignment of codes in cases of stroke, particularly in relation to residual deficits, please refer to ACS 0604 ~~Stroke~~ *Cerebrovascular accident (CVA)*.



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Implanted Hearing Devices

Introduction/Rationale:

This addenda proposal was initiated following receipt of several coding queries (Q2999, Q3118, Q3193) and a public submission (P336) which identified that a revision of ACHI across the full range of implanted hearing devices was required. This addenda proposal also incorporates TN1326 *Replacement of cochlear implant magnet* and TN1391 *Cochlear Implants - Bilateral*.

The interventions for audiometric hearing loss continue to develop rapidly in response to technology developments and the more accurate diagnosis of specific hearing loss mechanisms in individuals. Many of the implanted hearing device technologies can also be used in various combinations during initial implantation or in subsequent revisions, in order to provide optimal solutions for an individual.

ACHI currently does not facilitate classification of the implantation, revision and removal of the variety of hearing devices currently in use, along with the positioning of the relevant codes across different categories and chapters of ACHI, and identified issues within the Alphabetic Index; there is difficulty in correctly classifying implanted hearing device interventions.

Note: the issue of bilateral/unilateral cochlear implants was discussed via TN1391 *Cochlear Implants - Bilateral*, and post ITG approval, the concepts from TN1391 were merged into this task.

ACCD PROPOSAL

Tabular List

LIST OF ACHI BLOCK NUMBERS

Block No.	Block Name
320	Other procedures on ossicles of ear
321	Application, insertion or removal procedures on mastoid or temporal bone
322	Incision procedures on mastoid or temporal bone
...	
328	Other procedures on mastoid or temporal bone
329	Application, insertion or removal procedures on inner ear
330	Incision procedures on inner ear
331	Excision procedures on inner ear
332	Repair procedures on inner ear
333	Other procedures on inner ear
334	Implanted hearing prostheses
370	Examination procedures on nose

...

MASTOID AND TEMPORAL BONE

~~APPLICATION, INSERTION, REMOVAL~~

321 — ~~Application, insertion or removal procedures on mastoid or temporal bone~~

~~41557-02 Implantation of electromagnetic hearing device
Bone conduction hearing device~~

~~*Excludes:* cochlear prosthetic device (41617-00 [329])~~

...

322 Incision procedures on mastoid or temporal bone

41557-03 Incision of mastoid

...

323 Mastoidectomy

Excludes: that with:

- decompression of endolymphatic sac (41590 [330])
- implantation of cochlear prosthetic device ([41617-02, 41617-05 \[334\]](#))~~(41617-00 [329])~~
- myringoplasty (41551-00, 41560 [325], 41554-00, 41563 [326])
- ossicular chain reconstruction (41554-00, 41563 [326])
- partial resection of temporal bone (41584 [324])
- removal of glomus lesion (41623-00 [312])

41545-00 Mastoidectomy
Cortical mastoidectomy

41557-00 Modified radical mastoidectomy

...

325 Repair procedures on mastoid or temporal bone

Code also when performed:

- meatoplasty (41512-00 [305])

Excludes: revision of mastoidectomy (41566-01, 41566-02 [327])

that with:

- implantation of cochlear prosthetic device ([41617-02, 41617-05 \[334\]](#))~~(41617-00 [329])~~
- ossicular chain reconstruction (41554-00, 41563 [326])
- partial resection of temporal bone (41584 [324])
- removal of glomus lesion (41623-00 [312])

41551-00 Mastoidectomy by intact canal wall technique with myringoplasty

Includes: that with atticotomy

...

328 Other procedures on mastoid or temporal bone

90116-00 Other procedures on mastoid or temporal bone

...

~~APPLICATION, INSERTION, REMOVAL~~

~~329~~ ~~Application, insertion or removal procedures on inner ear~~

~~41617-00~~ ~~Implantation of cochlear prosthetic device~~

~~*Includes:* mastoidectomy~~

~~41617-01~~ ~~Removal of cochlear prosthetic device~~

...

330 **Incision procedures on inner ear**

41572-00 Labyrinthotomy
Destruction of labyrinth
Incision of inner ear

41590-00 Decompression of endolymphatic sac

Includes: mastoidectomy

41590-01 Decompression of endolymphatic sac with shunt

Includes: mastoidectomy

...

333 **Other procedures on inner ear**

Includes: cochlear
internal auditory canal
labyrinth

90118-00 Other procedures on inner ear
Injection into inner ear

OTHER AND MULTIPLE SITES OF EAR

OTHER PROCEDURES

334 Implanted hearing prostheses

41617-02 Implantation of cochlear prosthetic device, unilateral

Includes: mastoidectomy

41617-05 Implantation of cochlear prosthetic device, bilateral

Includes: mastoidectomy

45794-08 Osseointegration procedure, implantation of titanium fixture for attachment of bone anchored hearing aid [BAHA]

First stage of two stage osseointegration procedure involving insertion of titanium implant into bone, for attachment of bone anchored hearing aid (BAHA)

Implantation of titanium screw for osseointegration
One stage procedure for bone anchored hearing implant
Placement of titanium fixture for osseointegration

Includes: insertion and securing of magnetic implant

Code also when performed:

- bone graft — see Alphabetic Index: *Graft/bone*
- fixation of transcutaneous abutment (45797-07 [334])

- flap repair — see [Alphabetic Index: Flap/by site](#)
- reconstruction — see [Alphabetic Index: Reconstruction/by site](#)

[45797-07 Osseointegration procedure, fixation of transcutaneous abutment for attachment of bone anchored hearing aid \[BAHA\]](#)

Includes: [exposure of titanium fixation skin graft to fixation site](#)
[thinning of skin flap over fixation site](#)

Note: [This procedure is the second stage of the osseointegration procedure, and involves attachment of the abutment for the bone anchored hearing aid \(BAHA\) to the titanium implant that was previously implanted into the patient's bone](#)

[41557-04 Implantation of other hearing device](#)

Implantation of:
 • [auditory brain stem implant](#)
 • [bone conduction hearing device](#)
 • [electromagnetic hearing device](#)
 • [middle ear hearing device](#)

Excludes: [bone anchored hearing aid \[BAHA\] \(45794-08, 45797-07 \[334\]\)](#)
[cochlear prosthetic device \(41617-02, 41617-05 \[334\]\)](#)

[41617-03 Adjustment of cochlear prosthetic device](#)

Partial:
 • [replacement of cochlear prosthetic device component\(s\)](#)
 • [revision of device component\(s\)](#)

Includes: [implanted magnets](#)

[45794-09 Adjustment of bone anchored hearing aid \[BAHA\] components](#)

[Replacement of titanium fixation or transcutaneous abutment \[BAHA\] component\(s\)](#)
[Revision of titanium fixation or transcutaneous abutment \[BAHA\] component\(s\)](#)

[41557-05 Adjustment of other implanted hearing device](#)

Partial:
 • [replacement of implanted hearing device component\(s\)](#)
 • [revision of implanted hearing device component\(s\)](#)

Includes: [implanted magnets](#)

[41617-04 Removal of cochlear prosthetic device, unilateral](#)

[Removal of all components of cochlear prosthetic device](#)

Excludes: [partial removal of device component\(s\) with replacement \(41617-03 \[334\]\)](#)

[41617-06 Removal of cochlear prosthetic device, bilateral](#)

[Removal of all components of cochlear prosthetic device](#)

Excludes: [partial removal of device component\(s\) with replacement \(41617-03 \[334\]\)](#)

[45794-10 Removal of bone anchored hearing aid \[BAHA\] device](#)

[Removal of all components of bone anchored hearing aid device \[BAHA\]](#)

Excludes: [partial removal of device component\(s\) with replacement \(45794-09 \[334\]\)](#)

[41557-06 Removal of other implanted hearing device](#)

Excludes: [partial removal of device component\(s\) with replacement \(41557-05 \[334\]\)](#)

...

1697 **Fixation of transcutaneous abutment (osseointegration procedure)**

▽ 4220

...
 Attachment of framework to titanium fixture for osseointegration
 Connection of percutaneous abutment for osseointegration

Includes: exposure of titanium fixture
skin graft of fixture site
thinning of skin flap over fixture site

Note: [Procedures in this block are performed as the second stage of an osseointegration procedure, and involve attachment of an abutment through the skin to the titanium implant that was previously implanted into the patient's bone](#)

Excludes: [bone anchored hearing aid \[BAHA\] \(45797-07 \[334\]\)](#)
~~intraoral osseointegration procedure (45845-00 [400])~~

~~45797-00 Osseointegration procedure, fixation of transcutaneous abutment for attachment of bone anchored hearing aid [BAHA]~~

45797-01 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic ear

45797-02 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic orbit

Includes: prosthetic replacement of:
• eye
• orbital contents

45797-03 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic nose, partial

45797-04 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic nose, total

Includes: surrounding facial tissue

45797-05 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic limb

Excludes: that for attachment of prosthetic digit (45797-06 [1697])

45797-06 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic digit

1698
~~▽ 1220~~

Implantation of titanium fixture (osseointegration procedure)

Implantation of titanium screw for osseointegration
Osseointegration for attachment of prosthetic replacement, first stage
Placement of titanium fixture for osseointegration

Note: [Procedures in this block are performed as the first stage of the osseointegration procedure, and involve insertion of a titanium implant into the patient's bone, in preparation for second stage, which is attachment of the transcutaneous abutment](#)

Code also when performed:

- bone graft (see Alphabetic Index: Graft/bone)
- fixation of transcutaneous abutment (45797 [1697])
- flap repair (see Alphabetic Index: Flap/by site)
- reconstruction (see Alphabetic Index: Reconstruction/by site)

Excludes: [bone anchored hearing aid \[BAHA\] \(45794-08 \[334\]\)](#)
~~intraoral osseointegration procedure (45845-00 [400])~~

~~45794-00 Osseointegration procedure, implantation of titanium fixture for attachment of bone anchored hearing aid [BAHA]~~

- 45794-01 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic ear
- 45794-02 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic orbit
- Includes:* prosthetic replacement of:
- eye
 - orbital contents
- 45794-03 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic nose, partial
- 45794-04 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic nose, total
- Includes:* surrounding facial tissue
- 45794-05 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic limb
- Excludes:* that for attachment of prosthetic digit (45794-06 [1698])
- 45794-06 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic digit
- 45794-07 Osseointegration procedure, implantation of titanium fixture for replacement of joint of digit
- Includes:* insertion of hinge
- Code also when performed:*
- excision of metacarpal head (44325-00 [1448], 46396-03 [1449])
 - synovectomy (46336-01 [1445])
 - tendon transfer (46417-00 [1466])

...

1870 Interventions involving assistive or adaptive device, aid or equipment

- Includes:* adhesive padding
 artificial [prosthetic] limb(s)
 assistive or adaptive devices, aids or equipment for:
- play/leisure
 - productivity
 - self care/self maintenance
- auditory aid ~~cochlear implant~~ [hearing aid]
 bandage
 brace
 calipers
 cast (fibreglass) (plaster) (plastic)
 communication systems (emergency response, call systems, telephones)
 corset
 crutches
 dressings (Velveau)
 elastic stocking(s)
 electronic gaiter
 electro tactile/vibrotactile aid
 footwear manufactured for a specific purpose, such as gait assistance, postural adaptation or to facilitate the use of an orthosis
 intermittent pressure device
 medication delivery systems
 neck support [cervical collar]
 orthosis NOS
 parallel bars
 pressure dressing [Gibney bandage] [Robert Jones bandage] [Shanz dressing]
 pressure trousers [anti-shock trousers] [MAST trousers] [vasopneumatic device]

prosthesis NOS
rails
rib belt
seating
spinal support
splint (acrylic) (cap) (cast metal) (felt) (silicone) (thermoplastic)
strapping
support frame
thermoplastic splint (dynamic) (static)
visual aid [contact lenses] [glasses] [prisms] [spectacles]
walking stick
wheelchair

Note: This block classifies external fixation devices that are generally noninvasive in nature. External fixation devices that are invasive (ie applied to bone) are classified elsewhere. Refer to the Alphabetic Index for guidance.

Excludes: application of:...

...

1878
▽ 0534

Skills training for personal care and other activities of daily/independent living

Skills training is characterised by a formal rehabilitative process that involves a schedule of instruction, active supervised practice by the client and evaluation of progress. It may be applied to a variety of functional areas ('skills') including physical and psychological skills. Examples include communication, socialisation and vocational skills, and self-care skills such as dressing and personal hygiene behaviours. The training may be aimed at improving the skills of the client, their carer and other treating health professionals.

Skills training attempts to build/refine functional skill deficits. In this way, skills training can be contrasted with cognitive and/or behavioural therapy, which attempts to modify a mental health client's thoughts and/or behaviours that are perceived as negative or maladjusted, but are not necessarily related to a need to develop new or refine existing functional skills.

Includes: evaluation of progression

...

96142-00 Skills training in use of assistive or adaptive device, aid or equipment

Skills training in medication delivery systems includes skills training and management in the use of medication delivery systems such as metered dose inhalers, breath actuated devices, nebulisers, transdermal delivery systems and continuous parenteral infusions

Ambulation and gait training in conjunction with the use of assistive or adaptive device, aid or equipment

Habilitative or rehabilitative training in the use of assistive or adaptive device, aid or equipment

Mobility training with aids

Skills training in:

- application of dressings or bandages
- medication delivery systems

Includes: use of compliance aids

Note: For the list of assistive or adaptive devices, aids or equipment see block **[1870]**

Excludes: ~~implantation of cochlear prosthetic device (41617-00 [329])~~
~~removal of cochlear prosthetic device (41617-01 [329])~~

96143-00 Skills training in activities related to home management

Skills training in:

- cleaning
- energy conservation
- gardening
- housekeeping/maintenance
- laundering
- meal preparation
- safety procedures around the home
- shopping

...

Alphabetic Index

Adjustment

...

- assistive or adaptive device, aid or equipment NEC 96092-00 [1870]
- [auditory brain stem implant \(partial\) 41557-05 \[334\]](#)
- balloon (bubble) gastric, for obesity (endoscopic) 90950-04 [889]
- [bone](#)
- [- anchored hearing aid \(BAHA\) \(partial\) 45794-09 \[334\]](#)
- [- conduction hearing device \(partial\) 41557-05 \[334\]](#)
- bowel sphincter, artificial 32221-00 [940]
- cannula
- - for
- - - cardiopulmonary bypass 38627-01 [642]
- - - extracorporeal membrane oxygenation 38627-03 [572]
- - - ventricular assist device 38627-00 [608]
- [- cochlear prosthetic device \(multiple channel\) \(partial\) \(single channel\) 41617-03 \[334\]](#)
- defibrillator, generator (automatic) (cardioverter) (see also *Test, testing/defibrillator*) 90203-06 [656]
- denture (pre-existing) 97741-00 [475]
- - new denture — *omit code*
- device
- [- cochlear prosthetic \(multiple channel\) \(partial\) \(single channel\) 41617-03 \[334\]](#)
- - gastric, for obesity (endoscopic) 90950-04 [889]
- [- hearing, implanted \(partial\) NEC 41557-05 \[334\]](#)
- - neurostimulator — see *Adjustment/neurostimulator*
- - ring fixator (or similar device) 50309-00 [1554]
- - - with
- - - - insertion of pin (fixation) 50309-00 [1554]
- - - - removal of pin (fixation) 50309-00 [1554]
- - stomach, for obesity (endoscopic) 90950-04 [889]
- electrode(s) (for)
- - anal stimulator, electrical 32210-01 [940]
- - automatic defibrillator — see *Adjustment/electrode(s)/cardiac/defibrillator*
- - cardiac
- - - defibrillator
- - - - epicardial 38456-28 [654]
- - - - transvenous 90203-08 [654]
- - - - ventricle, left, via sternotomy or thoracotomy 90203-09 [654]
- - - pacemaker
- - - - epicardial 38456-21 [654]
- - - - transvenous 90203-00 [654]
- - - - ventricle, left, via sternotomy or thoracotomy 90203-02 [654]
- - epidural 39131-00 [43]
- - - by laminectomy 39139-00 [43]
- - gracilis neosphincter pacemaker 32210-01 [940]
- - intracranial via
- - - burr holes 40709-02 [6]
- - - craniotomy 40712-02 [6]
- - peripheral nerve NEC 39131-01 [67]
- - sacral nerve 36665-00 [67]
- - spinal — see *Adjustment/electrode(s)/epidural*
- - vagus nerve (for obesity) 39131-01 [67]
- [- electromagnetic hearing device, implanted \(partial\) 41557-05 \[334\]](#)
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) (valve) 45566-03 [1661]
- - breast 45548-02 [1758]
- gastric
- - balloon (bubble), for obesity (endoscopic) 90950-04 [889]
- - band (deflation) (inflation) (see also *Revision/gastric/band*) 31587-00 [1895]
- generator
- - defibrillator, cardiac (automatic) (see also *Test, testing/defibrillator*) 90203-06 [656]
- - pacemaker, cardiac (see also *Test, testing/pacemaker*) 90203-05 [655]
- - pulse (subcutaneous)
- - - anal, gracilis neosphincter 32210-01 [940]
- - gracilis neosphincter pacemaker 32210-01 [940]
- [- hearing device, implanted \(partial\) NEC 41557-05 \[334\]](#)
- [- ICD \(implantable cardioverter defibrillator\) \(see also *Test, testing/defibrillator*\) 90203-06 \[656\]](#)
- lead(s) — see *Adjustment/electrode(s)*
- [- middle ear hearing device, implanted \(partial\) 41557-05 \[334\]](#)
- neosphincter, gracilis pacemaker 32210-01 [940]

...

Implant, implantation — *see also Insertion*

...

- artery
- - coronary
- - - with ascending thoracic aorta
- - - - repair — *see block [684] and [685]*
- - - - replacement — *see block [687] and [688]*
- artificial heart, total 96229-00 **[608]**
- [auditory brain stem 41557-04 \[334\]](#)
- baffle
- - atrial (inter-atrial) 38745-00 **[603]**
- - intraventricular 38754-00 **[613]**
- bone ~~conduction hearing device 41557-02 [321]~~
- - [anchored hearing aid \(BAHA\) — *see Osseointegration/extraoral*](#)
- - [conduction hearing device 41557-04 \[334\]](#)
- brain wafer, chemotherapy 96201-00 **[1920]**
- cardioverter, generator (automatic) (with pacemaker functionality) 38393-00 **[653]**
- - with replacement 38393-01 **[656]**
- cartilage (autologous) (chondrocytes) (matrix-induced) 14203-01 **[1906]**
- - by cannula 14206-01 **[1906]**
- - directly 14203-01 **[1906]**
- chondrocytes (autologous) (matrix-induced) — *see Implant, implantation/cartilage*
- [cochlear prosthetic device \(multiple channel\) \(single channel\) \(unilateral\) 41617-02 \[334\]](#)
- - [bilateral 41617-05 \[334\]](#)
- defibrillator, generator (automatic) (cardioverter) (with pacemaker functionality) 38393-00 **[653]**
- - with replacement 38393-01 **[656]**
- device
- - cardiac
- - - event monitor (ECG) (looping memory) (patient activated) 38285-00 **[1604]**
- - - resynchronisation — *see Insertion/pacemaker/cardiac*
- - [cochlear prosthetic \(multiple channel\) \(single channel\) \(unilateral\) 41617-02 \[334\]](#)
- - - [bilateral 41617-05 \[334\]](#)
- - hearing [NEC 41557-04 \[334\]](#)
- ~~bone conduction 41557-02 [321]~~
- ~~electromagnetic 41557-02 [321]~~
- - monitoring, subcutaneously implanted 38285-00 **[1604]**

...

- electrode(s) — *see Insertion/electrode(s) lead(s)*
- electromagnetic hearing device [41557-04 \[334\]](#) ~~41557-02 [321]~~
- endoluminal sleeve, for obesity 90943-02 **[889]**
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) — *see Insertion/tissue expander*
- fiducial marker(s) (fiducial seed) (fiduciary marker) (gold fiducial marker) 37217-01 **[1800]**
- generator
- - defibrillator, cardiac (automatic) (with pacemaker functionality) 38393-00 **[653]**
- - - with replacement 38393-01 **[656]**
- - pacemaker, cardiac 38353-00 **[650]**
- - - with
- - - - defibrillator functionality 38393-00 **[653]**
- - - - with replacement 38393-01 **[656]**
- - - replacement 38353-01 **[655]**
- hearing device [NEC 41557-04 \[334\]](#)
- ~~bone conduction 41557-02 [321]~~
- ~~electromagnetic 41557-02 [321]~~
- heart
- - artificial 96229-00 **[608]**

...

- living tissue
- - by
- - - cannula 14206-01 **[1906]**
- - - direct implantation 14203-01 **[1906]**
- [middle ear hearing device 41557-04 \[334\]](#)
- monitoring device, subcutaneously implanted 38285-00 **[1604]**
- multiple planes, removable

...

- prosthesis, prosthetic device

...

- - cochlear (multiple channel) (single channel) [\(unilateral\)](#) (with mastoidectomy) [41617-02 \[334\]](#) ~~41617-00 [329]~~
- - - [bilateral 41617-05 \[334\]](#)
- - dental — see *Fitting/prosthesis/dental*

...

Insertion

...

- artificial
- - heart, total 96229-00 **[608]**
- - sphincter
- - - bowel 32220-00 **[940]**
- - - urinary (see also *Insertion/urinary sphincter, artificial*) 37387-00 **[1113]**
- [auditory brain stem implant 41557-04 \[334\]](#)
- baffle (switch)
- - heart
- - - intra-atrial (for congenital heart disease) 38745-00 **[603]**
- - - intraventricular (for congenital heart disease) 38754-00 **[613]**
- balloon (catheter)
- - for arrest or control of haemorrhage
- - - cervix 96226-00 **[1274]**
- - - gastro-oesophageal (Minnesota) (Sengstaken-Blakemore) 13506-00 **[1899]**
- - - nasal 41677-00 **[373]**
- - - - anterior (Little's area) (with cauterisation) (with diathermy) 41677-00 **[373]**
- - - - posterior (with cauterisation) (with diathermy) 41656-00 **[373]**
- - - oesophageal (Minnesota) (Sengstaken-Blakemore) 13506-00 **[1899]**
- - - oesophagogastric junction (Minnesota) (Sengstaken-Blakemore) 13506-00 **[1899]**
- - gastric, for obesity (endoscopic) 90950-02 **[889]**
- - intragastric, for obesity (endoscopic) 90950-02 **[889]**
- - pump, intra-aortic (IABP) 38362-00 **[682]**
- - - by arteriotomy (open) 38609-00 **[682]**
- - - percutaneous (closed) (for counterpulsation) 38362-00 **[682]**
- bladder stimulator, electronic 90359-00 **[1091]**
- bone
- [anchored hearing aid \(BAHA\) — see *Osseointegration/extraoral*](#)
- - conduction hearing [device, implanted 41557-04 \[334\]](#) ~~41557-02 [321]~~
- - growth stimulator 47920-00 **[1554]**
- bowel sphincter, artificial 32220-00 **[940]**
- ...
- clasp on denture
- - new 97762-00 **[476]**
- - pre-existing 97761-00 **[476]**
- [cochlear prosthetic device \(multiple channel\) \(single channel\) \(unilateral\) 41617-02 \[334\]](#)
- [bilateral 41617-05 \[334\]](#)
- coil
- - prostatic 37223-00 **[1160]**
- conduit — see *Formation/conduit*
- ...
- device — see also *Insertion/by type of device*
- ...
- - bladder stimulator, electronic 90359-00 **[1091]**
- - bone
- - - conduction hearing [41557-04 \[334\]](#) ~~41557-02 [321]~~
- - - growth stimulator 47920-00 **[1554]**
- - bronchus (endoscopic) 41905-06 **[546]**
- - - with replacement 41905-07 **[546]**
- - cardiac
- - - event monitor, subcutaneously implanted (ECG) (looping memory) (patient activated) 38285-00 **[1604]**
- - - resynchronisation — see *Insertion/pacemaker/cardiac*
- [cochlear prosthetic \(multiple channel\) \(single channel\) \(unilateral\) 41617-02 \[334\]](#)
- [bilateral 41617-05 \[334\]](#)
- - contraceptive
- - - intrauterine (IUCD) 35503-00 **[1260]**
- - - - with replacement 35506-00 **[1260]**
- - - subdermal hormone implant 14203-00 **[1906]**
- ...
- - drainage for glaucoma (Molteno) 42752-00 **[191]**
- - electromagnetic hearing [implanted 41557-04 \[334\]](#) ~~41557-02 [321]~~
- - endobronchial (endoscopic) 41905-06 **[546]**
- ...

- - fixation, internal
 - - - bone — see *also* *Fixation/bone*
 - - - - orthopaedic (pin) (plate) (wire) 47921-00 [1554]
 - - - - - with
 - - - - - - adjustment of ring fixator (or similar device) 50309-00 [1554]
 - - - - - - - reduction of
 - - - - - - - - dislocation — see *Reduction/dislocation/by site/with internal fixation*
 - - - - - - - - fracture — see *Reduction/fracture/by site/with internal fixation*
 - - - - - - - mandible 52096-00 [1360]
 - - - - - - - maxilla 52096-00 [1360]
 - - - - - - - zygoma 52096-00 [1360]
 - - - - tooth (dental pin) 97575-00 [469]
 - - hearing, [implanted NEC 41557-04 \[334\]](#)
 - - - ~~bone conduction 41557-02 [321]~~
 - - - ~~electromagnetic 41557-02 [321]~~
 - - intracranial pressure (ICP) monitoring 39015-02 [3]
 - - microcoil
 - - - fallopian tube (bilateral) (hysteroscopic) (unilateral) 35688-01 [1257]
 - - - [middle ear hearing, implanted 41557-04 \[334\]](#)
 - - - neurostimulator — see *Insertion/neurostimulator*
 - - - peritoneal access (port-catheter) 90376-00 [983]
 - - - - with replacement 90376-01 [983]
 - ...
 - electrode(s) lead(s)
 - ...
 - - vagus nerve (for obesity) 39138-00 [67]
 - electromagnetic hearing device, [implanted 41557-04 \[334\]](#) ~~41557-02 [321]~~
 - endosseous implant (intraoral)
 - ...
 - hearing device, [implanted NEC 41557-04 \[334\]](#)
 - - ~~bone conduction 41557-02 [321]~~
 - - ~~electromagnetic 41557-02 [321]~~
 - ...
 - lens, intraocular 42701-00 [193]
 - - into posterior chamber and suture to iris or sclera 42703-00 [193]
 - loop recorder, subcutaneously implanted (ECG) (patient activated) 38285-00 [1604]
 - microcoil
 - - fallopian tube (bilateral) (hysteroscopic) (unilateral) 35688-01 [1257]
 - - [middle ear hearing device, implanted 41557-04 \[334\]](#)
 - Molteno drainage device, for glaucoma 42752-00 [191]
 - ...
 - prosthesis, prosthetic device
 - ...
 - - cochlear (multiple channel) (single channel) ([unilateral](#)) (with mastoidectomy) [41617-02 \[334\]](#) ~~41617-00 [329]~~
 - - - [bilateral 41617-05 \[334\]](#)
 - - colonic (endoscopic) (metal) (plastic) (Wallstent) 32023-00 [906]
 - ...
 - - osseointegrated
 - - - extraoral — see *Osseointegration/extraoral/implantation of titanium fixture*
 - - - intraoral — see *Osseointegration/intraoral/implantation of titanium fixture*
 - - - pancreatic duct (endoscopic) (with dilation) 30491-02 [975]
 - ...
- Mastoidectomy** (cortical) (simple) 41545-00 [323]
 - with
 - - decompression of endolymphatic sac (without shunt) 41590-00 [330]
 - - - with shunt 41590-01 [330]
 - - insertion of cochlear prosthetic device (multiple channel) (single channel) ([unilateral](#)) [41617-02 \[334\]](#) ~~41617-00 [329]~~
 - - - [bilateral 41617-05 \[334\]](#)
 - - partial resection of temporal bone 41584-00 [324]
 - - - and decompression of facial nerve 41584-01 [324]
 - - removal of glomus lesion (tumour) 41623-00 [312]
 - - tympanoplasty — see *Mastoidectomy/by type/with myringoplasty*
 - ...
- Osseointegration** (for attachment of prosthetic replacement) (procedure)
 - extraoral
 - - 1st stage — see *Osseointegration/extraoral/implantation of titanium fixture*

- - 2nd stage — see *Osseointegration/extraoral/fixation of transcutaneous abutment*
 - - fixation of transcutaneous abutment (2nd stage)
 - - - for attachment of
 - - - - bone anchored hearing aid (BAHA) [45797-07 \[334\]](#)~~45797-00 [1697]~~
 - ...
 - - implantation of titanium fixture ([1 stage](#)) (1st stage) ([screw](#))
 - - - for
 - - - - attachment of
 - - - - - bone anchored hearing aid (BAHA) 45794-~~0800~~ [\[334\]](#)~~[1698]~~
 - - - - - prosthetic
 - - - - - digit 45794-06 **[1698]**
 - - - - - ear 45794-01 **[1698]**
 - - - - - limb 45794-05 **[1698]**
 - - - - - nose
 - - - - - partial 45794-03 **[1698]**
 - - - - - total (with surrounding tissue) 45794-04 **[1698]**
 - - - - - orbit 45794-02 **[1698]**
 - - - - replacement of joint of digit 45794-07 **[1698]**
 - intraoral (dental)
 - - 1st stage (1 stage) 45845-00 **[400]**
 - - 2nd stage 45847-00 **[400]**
 - - fixation of transcutaneous abutment (2nd stage) 45847-00 **[400]**
 - - implantation of titanium fixture (1 stage) 45845-00 **[400]**
- Ossiculoplasty** — see *Reconstruction/ossicular chain*

...

Removal — see also *Excision*

- ...
- assistive or adaptive device, aid or equipment 96094-00 **[1870]**
- [auditory brain stem implant \(total\) 41557-06 \[334\]](#)
- [partial for adjustment 41557-05 \[334\]](#)
- balloon
 - - gastric, for obesity (endoscopic) 90950-03 **[889]**
 - - intragastric, for obesity (endoscopic) 90950-03 **[889]**
 - - pump, intra-aortic 38612-00 **[682]**
 - - - with closure of artery by patch graft 38613-00 **[693]**
- band
 - - from detached retina (encircling) (silicone) 42812-00 **[209]**
 - - gastric, for obesity — see *Removal/gastric/band*
 - - pharyngeal (lateral) 41804-01 **[421]**
- bladder stimulator, electronic 90359-01 **[1091]**
- bone
 - - with open repair of choanal atresia (nasopharyngeal) 45646-00 **[1681]**
 - - [anchored hearing aid \(BAHA\) \(total\) 45794-10 \[334\]](#)
 - - [partial for adjustment 45794-09 \[334\]](#)
 - - [conduction hearing device, implanted \(total\) 41557-06 \[334\]](#)
 - - [partial for adjustment 41557-05 \[334\]](#)
- fragments (fractured) (spicules)
 - - - spine
 - - - - with
 - - - - - decompressive laminectomy of lumbar spine (anterior) (posterior)
 - - - - - - 1 level 90024-00 **[48]**
 - - - - - - ≥ 2 levels 90024-01 **[48]**
 - - - - - reduction of
 - - - - - - dislocation — see *Reduction/dislocation/spine/open*
 - - - - - - fracture — see *Reduction/fracture/spine/open*
- ...
- cerumen, ear (wax)
 - - bilateral 41647-01 **[308]**
 - - unilateral 41647-00 **[308]**
- cervical ligature (cerclage material) (suture) 16512-00 **[1274]**
- cholesteatoma — see *Clearance/cholesteatoma*
- [cochlear prosthetic device \(multiple channel\) \(single channel\) \(total\) \(unilateral\) 41617-04 \[334\]](#)
- [bilateral 41617-06 \[334\]](#)
- [partial, for adjustment 41617-03 \[334\]](#)
- concha bullosa (bulla ethmoidalis) — see *Ethmoidectomy*
- conduit
- - heart, with replacement
- ...

- device — *see also Removal/by type of device*
- - abdomen 92141-00 **[1896]**
- - - prosthetic mesh 90952-00 **[987]**
- - anal stimulator, electrical 32210-02 **[940]**
- - assistive or adaptive (aid) (equipment) NEC 96094-00 **[1870]**
- - bladder stimulator, electronic 90359-01 **[1091]**
- - bronchus 41905-08 **[546]**
- - - with replacement 41905-07 **[546]**
- - cardiac event monitor, subcutaneously implanted (ECG) (looping memory) (patient activated) 38286-00 **[1604]**
- - [cochlear prosthetic \(multiple channel\) \(single channel\) \(total\) \(unilateral\) 41617-04 **\[334\]**](#)
- - - [bilateral 41617-06 **\[334\]**](#)
- - - [partial, for adjustment 41617-03 **\[334\]**](#)
- - contraceptive
- - - intrauterine (IUCD) 35506-02 **[1260]**
- - - - with replacement 35506-00 **[1260]**
- - - subdermal hormone implant 30062-00 **[1908]**
- - endobronchial 41905-08 **[546]**
- - - with replacement 41905-07 **[546]**
- - erection, artificial (component) 37432-02 **[1191]**
- - - with replacement of components
- - - - complete 37432-01 **[1201]**
- - - - partial 37432-00 **[1201]**
- - fixation — *see Removal/fixation device*
- - gastrointestinal tract NEC 92086-00 **[1896]**
- - genitourinary tract NEC 92116-00 **[1900]**
- - [hearing, implanted \(total\) NEC 41557-06 **\[334\]**](#)
- - - [partial, for adjustment 41557-05 **\[334\]**](#)
- - inferior vena cava — *see also Removal/foreign body/inferior vena cava*
- - - filter
- ...
- electrode(s) lead(s)
- - cardiac (for)
- - - defibrillator (automatic)
- - - - with replacement at same site — *see Replacement/electrode(s) lead(s)/cardiac*
- ...
- - peripheral nerve NEC 39136-02 **[67]**
- - sacral nerve 36667-00 **[67]**
- - spinal — *see Removal/electrode(s) lead(s)/epidural*
- - vagus nerve (for obesity) 39136-02 **[67]**
- [electromagnetic hearing device, implanted \(total\) 41557-06 **\[334\]**](#)
- - [partial, for adjustment 41557-05 **\[334\]**](#)
- encephalocele (with closure) 40109-00 **[22]**
- encircling tube, eye (episcleral) 42812-00 **[209]**
- ...
- granuloma
- - eye (conjunctiva) 42689-00 **[181]**
- - middle ear — *see Clearance/granuloma/middle ear*
- - umbilical 43948-00 **[989]**
- grommet tube 41644-00 **[312]**
- haematoma — *see Drainage/haematoma OR Evacuation/haematoma*
- [hearing device, implanted \(total\) NEC 41557-06 **\[334\]**](#)
- - [partial, for adjustment 41557-05 **\[334\]**](#)
- heart
- - artificial 96229-01 **[608]**
- - donor
- - - for transplant 90204-00 **[659]**
- - - - with removal of lung 90204-01 **[659]**
- ...
- meningoencephalocele (with closure) 40109-00 **[22]**
- mesh implant (abdominal wall) 90952-00 **[987]**
- metallic restoration, tooth, indirect 97595-00 **[469]**
- [middle ear hearing device, implanted \(total\) 41557-06 **\[334\]**](#)
- - [partial, for adjustment 41557-05 **\[334\]**](#)
- molluscum contagiosum 30189-00 **[1619]**
- monitoring device, subcutaneously implanted 38286-00 **[1604]**
- myelomeningocele (with closure) 40103-00 **[55]**
- nail
- - finger (thumb) 46516-01 **[1631]**
- - - germinal matrix (nail bed)
- - - - by radical excision 46534-00 **[1631]**
- - - ingrown

- - - - by resection 46528-00 [1631]
- - - - partial (phenolisation) 46531-00 [1631]
- - - - wedge (nail bed) (ungual fold) 46528-00 [1631]
- ...
- prosthesis, prosthetic device
- ...
- - ear
- - - cochlear (multiple channel) (single channel) ([unilateral](#)) 41617-04 [334] ~~41617-01 [329]~~
- - - - [bilateral](#) 41617-06 [334]
- - - - [partial, for adjustment](#) 41617-03 [334]
- - eye — *see* [Removal/implant/eye](#)

Replacement

- ...
- assistive or adaptive device, aid or equipment NEC 96092-00 [1870]
- [auditory brain stem implant](#)
- - [partial, for adjustment](#) 41557-05 [334]
- - total — *see* [Insertion/auditory brain stem implant AND Removal/auditory brain stem implant](#)
- balloon (bubble) gastric, for obesity (endoscopic) 90950-04 [889]
- blood, complete (adult) 92206-00 [1893]
- - in infant 13306-00 [1893]
- [bone](#)
- - [anchored hearing aid \(BAHA\)](#)
- - - [partial, for adjustment](#) 45794-09 [334]
- - total — *see* [Osseointegration/extraoral AND Removal/bone/anchored hearing aid](#)
- - [conduction hearing device](#)
- - - [partial, for adjustment](#) 41557-05 [334]
- - total — *see* [Insertion/bone/conduction hearing device, implanted AND Removal/bone/conduction hearing device, implanted](#)
- ...
- ceramic head, femur (prosthesis)
- - with revision of joint replacement (arthroplasty) (partial) 49346-00 [1492]
- clasp on removable orthodontic appliance 97876-00 [483]
- [cochlear prosthetic device \(bilateral\) \(multiple channel\) \(single channel\) \(unilateral\)](#)
- - [partial, for adjustment](#) 41617-03 [334]
- - total — *see* [Insertion/cochlear prosthetic device AND Removal/cochlear prosthetic device](#)
- conduit
- - heart
- - - extracardiac (for congenital heart disease)
- - - - left ventricle and aorta 38760-01 [613]
- - - - right atrium and pulmonary artery 38760-02 [603]
- - - - - in repair of tricuspid valve atresia 38760-02 [603]
- - - - right ventricle and pulmonary (distal) artery 38760-00 [613]
- ...
- device — *see also* [Replacement/by type of device](#)
- - bladder stimulator, electronic 90359-00 [1091]
- - bronchus 41905-07 [546]
- - [cochlear prosthetic \(bilateral\) \(multiple channel\) \(single channel\) \(unilateral\)](#)
- - - [partial, for adjustment](#) 41617-03 [334]
- - total — *see* [Insertion/cochlear prosthetic device AND Removal/cochlear prosthetic device](#)
- - endobronchial 41905-07 [546]
- - enterostomy
- - - large intestine 92080-00 [1896]
- - - small intestine 92079-00 [1896]
- - erection, artificial
- - - components
- - - - complete 37432-01 [1201]
- - - - partial 37432-00 [1201]
- - gastric, for obesity (endoscopic) 90950-04 [889]
- - [hearing, implanted NEC](#)
- - - [partial, for adjustment](#) 41557-05 [334]
- - total — *see* [Insertion/hearing device, implanted AND Removal/hearing device, implanted](#)
- - intracranial pressure monitoring (ICP) 39015-02 [3]
- - intrauterine (contraceptive) (IUD) 35506-00 [1260]
- ...
- electrode(s) lead(s)
- - cardiac (for)

- - - defibrillator (automatic)
- ...
- - epidural 39137-00 **[43]**
- - - by laminectomy 39139-00 **[43]**
- - heart — see *Replacement/electrode(s) lead(s)/cardiac*
- - intracranial
- - - via
- - - - burr holes 40709-03 **[6]**
- - - - craniotomy 40712-03 **[6]**
- - peripheral nerve NEC 39137-01 **[67]**
- - sacral nerve 36664-00 **[67]**
- - vagus nerve (for obesity) 39137-01 **[67]**
- [electromagnetic hearing device, implanted](#)
- - [partial, for adjustment 41557-05 \[334\]](#)
- - [total — see Insertion/electromagnetic hearing device, implanted AND Removal/electromagnetic hearing device, implanted](#)
- external fixation device NEC 96092-00 **[1870]**
- ...
- lead(s) electrode(s) — see *Replacement/electrode(s) lead(s)*
- lens, intraocular 42707-00 **[194]**
- - posterior chamber with suture to iris or sclera 42710-00 **[194]**
- lining, removable orthodontic appliance, processed 97878-00 **[483]**
- [middle ear hearing device, implanted](#)
- - [partial for adjustment 41557-05 \[334\]](#)
- - [total — see Insertion/middle ear hearing device, implanted AND Removal/middle ear hearing device, implanted](#)
- neurostimulator — see *Insertion/neurostimulator AND Removal/neurostimulator*
- oesophagus
- - using intestine, paediatric 43903-00 **[866]**
- pacemaker
- - cardiac (generator) 38353-01 **[655]**
- - gracilis neosphincter (electrical anal stimulator) 32210-00 **[940]**
- packing
- ...

Revision (partial) (total)

- ...
- artificial
- - heart 96229-02 **[608]**
- - sphincter
- - - bowel 32221-00 **[940]**
- - - urinary 37390-00 **[1124]**
- [auditory brain stem implant](#)
- - [partial, for adjustment 41557-05 \[334\]](#)
- - [total — see Insertion/auditory brain stem implant AND Removal/auditory brain stem implant](#)
- balloon (bubble) gastric, for obesity (endoscopic) 90950-04 **[889]**
- blepharoptosis repair by levator sutures adjustment 45625-00 **[1687]**
- [bone](#)
- - [anchored hearing aid \(BAHA\)](#)
- - - [partial, for adjustment 45794-09 \[334\]](#)
- - - [total — see Osseointegration/extraoral AND Removal/bone/anchored hearing aid](#)
- - [conduction hearing device](#)
- - - [partial, for adjustment 41557-05 \[334\]](#)
- - - [total — see Insertion/bone/conduction hearing device, implanted AND Removal/bone/conduction hearing device, implanted](#)
- bowel sphincter, artificial 32221-00 **[940]**
- cannula
- - for
- - - cardiopulmonary bypass 38627-01 **[642]**
- - - extracorporeal membrane oxygenation 38627-03 **[572]**
- - - ventricular assist device 38627-00 **[608]**
- ...
- cleft
- - lip (repair) (total) 45695-00 **[1689]**
- - - partial 45692-00 **[1689]**
- - palate (repair)
- - - by
- - - - closure of oronasal fistula using local flap 45710-00 **[1690]**
- - - - lengthening procedure 45713-00 **[1690]**

- cochlear prosthetic device (bilateral) (multiple channel) (single channel) (unilateral)
- - partial, for adjustment 41617-03 [334]
- - total — see [Insertion/cochlear prosthetic device AND Removal/cochlear prosthetic device](#)
- colostomy 30563-01 [918]
- conduit
- - intestinal urinary (colon) (ileal) 36609-00 [1087]
- defibrillator, generator (automatic) (cardioverter) 90203-06 [656]
- - skin pocket alone 90219-00 [663]
- deformity
- - whistle
- - - major, with total revision of cleft lip 45695-00 [1689]
- - - minor, with partial revision of cleft lip 45692-00 [1689]
- device — see also *Revision/by type of device*
- - arteriovenous — see also *Revision/arteriovenous/access device*
- - - shunt, external 34500-01 [764]
- - cardiac event monitor, subcutaneously implanted (ECG) (looping memory) (patient activated) 38285-01 [1604]
- - cochlear prosthetic (bilateral) (multiple channel) (single channel) (unilateral)
- - - partial, for adjustment 41617-03 [334]
- - - total — see [Insertion/cochlear prosthetic device AND Removal/cochlear prosthetic device](#)
- - erection, artificial
- - - complete 37432-01 [1201]
- - - partial 37432-00 [1201]
- - gastric, for obesity (endoscopic) 90950-04 [889]
- - hearing, implanted NEC
- - - partial, for adjustment 41557-05 [334]
- - - total — see [Insertion/hearing device, implanted AND Removal/hearing device, implanted](#)
- - infusion, implantable spinal 39126-00 [56]
- - intracranial pressure monitoring (ICP) 39015-02 [3]
- - neurostimulator — see *Insertion/neurostimulator AND Removal/neurostimulator*
- - peritoneal access (port-catheter) 90376-01 [983]
- - stomach, for obesity (endoscopic) 90950-04 [889]
- - vascular access (infusion port) (Port-A-Cath) (subcutaneous reservoir) 34530-06 [766]
- drain
- - cerebrospinal fluid
- - - lumbar (external) 40018-00 [41]
- - - ventricular (external) 39015-00 [3]
- - lumbar (cerebrospinal fluid) (external) 40018-00 [41]
- - ventricular (cerebrospinal fluid) (external) 39015-00 [3]
- electrode(s) (for)
- - cardiac
- - - defibrillator (automatic)
- - - - epicardial 38456-28 [654]
- - - - transvenous 90203-08 [654]
- - - - ventricle, left via sternotomy, subxyphoid approach or thoracotomy 90203-09 [654]
- - - pacemaker
- - - - epicardial 38456-21 [654]
- - - - transvenous 90203-00 [654]
- - - - ventricle, left via sternotomy, subxyphoid approach or thoracotomy
- - epidural 39131-00 [43]
- - - by laminectomy 39139-00 [43]
- - heart — see *Revision/electrode(s)/cardiac*
- - intracranial via
- - - burr holes 40709-02 [6]
- - - craniotomy 40712-02 [6]
- - peripheral nerve NEC 39131-01 [67]
- - sacral nerve 36665-00 [67]
- - spinal — see *Revision/electrode(s)/epidural*
- - vagus nerve (for obesity) 39131-01 [67]
- electromagnetic hearing device, implanted
- - partial, for adjustment 41557-05 [334]
- - total — see [Insertion/electromagnetic hearing device, implanted AND Removal/electromagnetic hearing device, implanted](#)
- erection device, artificial (complete) 37432-01 [1201]
- - partial 37432-00 [1201]
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) (valve) 45566-03 [1661]
- ...
- graft
- - coronary artery (occluded) 38637-00 [680]
- - monitor (flap) (free jejunal) 90659-00 [1686]
- hearing, implanted NEC
- - partial, for adjustment 41557-05 [334]

- - total — see [Insertion/hearing device, implanted AND Removal/hearing device, implanted](#)
- heart surgery NEC 38640-00 [664]
- - artificial heart 96229-02 [608]
- - coronary artery graft (occluded) 38637-00 [680]
- ...
- loop recorder, subcutaneously implanted (ECG) (patient activated) 38285-01 [1604]
- mastoidectomy
- - intact canal wall technique (with myringoplasty) 41566-00 [327]
- - modified radical (with myringoplasty) 41566-01 [327]
- - radical (with myringoplasty) 41566-02 [327]
- meatoplasty — see *Meatoplasty*
- [middle ear hearing device, implanted](#)
- - partial, for adjustment 41557-05 [334]
- - total — see [Insertion/middle ear hearing device, implanted AND Removal/middle ear hearing device, implanted](#)
- monitoring device, subcutaneously implanted 38285-01 [1604]
- myringoplasty — see *Myringoplasty*

...

Australian Coding Standards

TABLE OF CONTENTS

...

GENERAL STANDARDS FOR DISEASES

- 12. Skin and subcutaneous tissue**
- 1203 Debridement
- 1204 Plastic surgery
- 1216 Craniofacial surgery
- 1217 Repair of wound of skin and subcutaneous tissue
- ~~1220 — Extraoral osseointegrated implants~~
- 1221 Pressure injury

...

~~ACS-1220 — EXTRAORAL OSSEOINTEGRATED IMPLANTS~~

~~Osseointegration is the process of bone bonding with a titanium screw implant.~~

~~Procedures using osseointegrated implants are being applied to many areas of reconstruction of the body. The term can be applied to the insertion of dental implants, known as intraoral osseointegrated implants~~

~~(see ACS 0809 Intraoral osseointegrated implants).~~

~~Extraorally, they can be used for the attachment of bone anchored hearing aids (BAHA), the prosthetic replacement of ears, eyes, nose and finger joints (metacarpophalangeal), and other difficult reconstruction problems, such as the attachment of limb prostheses.~~

~~Indications for the procedure include conductive hearing loss, rheumatoid arthritis and loss of body parts due to cancer or trauma.~~

~~The procedure is normally carried out in two stages:~~

~~FIRST STAGE — IMPLANTATION OF TITANIUM FIXTURE~~

~~[1698] Implantation of titanium fixture (osseointegration procedure)~~

~~This stage involves the insertion of a titanium implant into the patient's bone. A three-month healing period is then allowed, during which time the implant will have securely bonded with the bone.~~

Assign additional codes where reconstruction, bone grafting and flap repair are performed in conjunction with the first stage of an osseointegration procedure.

In the case of osseointegration for the replacement of joint of a digit (45794-07 ~~[1698]~~ *Osseointegration procedure, implantation of titanium fixture for replacement of joint of digit*), it is necessary to assign additional codes if excision of metacarpal head, synovectomy or tendon transfer is performed.

~~SECOND STAGE – FIXATION OF TRANSCUTANEOUS ABUTMENT~~

~~[1697] – Fixation of transcutaneous abutment (osseointegration procedure)~~

This stage involves the fixation of an abutment through the skin to the titanium implant. This serves as a framework for the later attachment of the prosthetic device, which is simply clipped into place at a visit to the doctor. Block ~~[1697]~~ includes exposure of the titanium fixture, skin graft of the fixture site and thinning of a skin flap over the fixture site.

These two stages are normally done at two separate admissions, although, on occasion, the procedure may be performed in one operative episode. This is often the case in the procedure performed for a bone anchored hearing aid. If so, assign both codes for that operative episode:

~~45794-00 [1698] – Osseointegration procedure, implantation of titanium fixture for attachment of bone anchored hearing aid [BAHA] and~~

~~45797-00 [1697] – Osseointegration procedure, fixation of transcutaneous abutment for attachment of bone anchored hearing aid [BAHA]~~

(See also ACS 1204 Plastic surgery, for admissions requiring reconstructive plastic surgery.)

STANDARDS INDEX

...

External

- cause code 2001
- - adult and child abuse 1909
- - - perpetrator 2008
- - procedural complication 1904
- - - postprocedural 1904
- - - sequelae 1904
- - - unintentional event 1904

~~Extraoral osseointegrated implants 1220~~

F

...

Implant(s)

- breast (removal) 1204
- osseointegrated, [intraoral 0809](#)
- ~~— extraoral 1220~~
- ~~— intraoral 0809~~

IMV (intermittent mandatory ventilation) 1006

...

Osseointegrated implants, [intraoral 0809](#)

- extraoral 1220
- intraoral 0809



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Labour without delivery & Delivery outside hospital

Introduction/Rationale:

Following amendments to ICD-10-AM Chapter 15 *Pregnancy, childbirth and the puerperium*, ACHI *Obstetric procedures* (blocks 1330-1347) and ACS Chapter 15 *Pregnancy, childbirth and the puerperium* in Tenth Edition, a number of FAQs and queries were received regarding labour without delivery and delivery outside hospital. Due to their complexity, this addenda proposal was created in addition to TN1223 ICD-10-AM Obstetrics review, TN1224 ACHI Obstetrics review and TN1225 Obstetrics ACS review.

Labour without delivery (discharge/transfer in labour)

ACS 1550 *Discharge/transfer in labour* provides guidelines for administrative transfer/discharge home in labour that differentiates between gestation before and after 37 completed weeks:

- Before 37 completed weeks, assign O60.0 *Preterm labour without delivery*
- At and after 37 completed weeks, assign as principal diagnosis a code from Z34 *Supervision of normal pregnancy*.

ACCD proposes creation of a code to classify 'term labour without delivery', for consistency with O60.0. The proposed code will classify episodes of care where a patient in labour is discharged home (to await more established labour), or transferred to another facility for administrative reasons. The creation of this code will allow category Z34 to be restricted to supervision of 'uncomplicated' pregnancies (mutually exclusive from Chapter 15).

Transfer in third stage of labour

Following receipt of a coding query (Q3302), ACCD proposes the addition of guidelines in ACS 1550 *Discharge/transfer in labour* for 'transfer in third stage of labour'. That is, patients who deliver their baby at one facility, and are transferred to another facility to deliver the placenta.

Delivery outside hospital

The purpose of the proposed addenda are to identify infants born outside hospital, with delivery of the placenta performed after admission. For example, a patient delivers a baby in the ambulance on the way to hospital, and the placenta is delivered in hospital. As the delivery is not complete until the placenta is delivered, this scenario is classified to O80-O84 *Delivery*, and the infant's delivery outside of hospital is not identified. In Tenth Edition, the place of birth is identified on the newborn's record only (Z38 *Liveborn infants according to place of birth*). ACCD proposes the creation of an ACHI code for 'spontaneous delivery of placenta'. The new code will be located in renamed block [1336] *Spontaneous delivery*, which will also list a code for 'spontaneous breech delivery' (relocated from block [1339], which will be renamed '*Assisted breech delivery and extraction*').

ACCD PROPOSAL

ICD-10-AM Tabular List

LIST OF THREE-CHARACTER CATEGORIES

...

Maternal care related to the fetus and amniotic cavity and possible delivery problems (O30–O48)

O30 Multiple gestation

...

O47 False labour [or labour without delivery](#)

O48 Prolonged pregnancy

...

O31 Complications specific to multiple gestation

Excludes: conjoined twins causing disproportion (O33.7)
delayed delivery of second ~~twin, triplet, etc~~ [or subsequent fetus in multiple delivery](#) (O63.2)
the listed conditions affecting labour and delivery (O64–O66)

...

O47 False labour [or labour without delivery](#)

▽ 1550

~~Contractions:~~

~~• Braxton Hicks~~

~~• irregular uterine tightenings~~

~~• irritable uterus~~

~~False rupture of membranes~~

O47.0 False labour before 37 completed weeks of gestation

Use additional code from category O09.- to identify duration of pregnancy.

O47.1 False labour at or after 37 completed weeks of gestation

★ [O47.2](#) [Labour without delivery](#)

[Labour at ≥ 37 completed weeks of gestation, without delivery](#)

Excludes: [delivery \(O80–O84\)](#)

[false labour:](#)

• [≥ 37 completed weeks of gestation \(O47.1\)](#)

• [NOS \(O47.9\)](#)

[preterm labour without delivery \(O60.0\)](#)

O47.9 False labour, unspecified

[Braxton Hicks contractions NOS](#)

[False rupture of membranes NOS](#)

O63 Long labour

- O63.0 Prolonged first stage (of labour)
- O63.1 Prolonged second stage (of labour)
- O63.2 Delayed delivery of second ~~twin, triplet, etc.~~ [or subsequent fetus in multiple delivery](#)
[Delayed delivery of second twin, triplet etcetera](#)
- [★O63.3](#) [Prolonged third stage \(of labour\)](#)
[▽ 1550](#)
- O63.9 Long labour, unspecified
Prolonged labour NOS

Z34 Supervision of normal pregnancy

▽ 1521, 1550

Excludes: false labour ([O47.-O47.0](#), [O47.1](#), [O47.9](#))
incidental pregnant state (Z33)
[labour without delivery \(O47.2\)](#)
preterm contractions without delivery (O60.0)
with any condition classified to Chapter 15 — see Alphabetic Index

Z37 Outcome of delivery

▽ 0050

Note: ~~This A code from this category is intended for use assigned as an additional code on the patient's (ie mother's) record to identify the outcome of delivery on the mother's record.~~

Code first the delivery (O80–O84).

ICD-10-AM Alphabetic Index

Contraction(s), contracture, contracted

- ...
- preterm without delivery ([before 37 completed weeks of gestation](#)) O60.0
- ...
- uterus N85.8
- - abnormal, [during labour \(complicating delivery\)](#) NEC O62.9
- - - affecting fetus or newborn P03.6
- - - [atonic O62.2](#)
- - - clonic O62.4
- - - [due to uterine inertia — see Inertia/uterus](#)
- - - dyscoordinate O62.4
- - - hourglass O62.4
- - - hypertonic O62.4
- - - hypotonic NEC O62.2
- - - inadequate
- - - - primary O62.0
- - - - secondary O62.1
- - - incoordinate O62.4
- - - poor O62.2
- - - [specified type NEC O62.8](#)
- - - tetanic O62.4
- - [in pregnancy \(false\) O47.9](#)
- - [with labour — see Labour](#)
- - [at or after 37 completed weeks of gestation O47.1](#)
- - [before 37 completed weeks of gestation O47.0](#)
- - [irregular — see Labour/false](#)
- vagina (outlet) N89.5

Delay, delayed

- ~~- birth or delivery NEC O63.9~~
- ~~- affecting fetus or newborn P03.8~~
- closure, ductus arteriosus (Botalli) P29.3
- coagulation (see also *Defect/coagulation*) D68.9
- conduction (cardiac) (ventricular) I45.8
- ~~- delivery, 2nd twin, triplet, etc. O63.2~~
- delivery (see also *Labour/prolonged or protracted*) NEC O63.9
- - affecting fetus or newborn P03.8
- - second or subsequent fetus in multiple delivery O63.2
- development R62.9

Delivery (single) (spontaneous) (vertex) NEC O80

- ...
- early onset (before 37 completed weeks of gestation) (with spontaneous labour) NEC O60.1
- - without spontaneous labour O60.3
- forceps NEC O81
- ...
- premature ~~or preterm (with spontaneous labour) NEC O60.1~~ — see *Delivery/preterm*
- ~~- without spontaneous labour O60.3~~
- ~~— previous, affecting management of pregnancy Z35.2~~
- preterm (before 37 completed weeks of gestation) (with spontaneous labour) NEC O60.1
- - without spontaneous labour O60.3
- - history, affecting management of pregnancy (supervision) Z35.2
- threatened ~~premature (before 37 weeks of gestation) O47.0~~ — see *Labour/false*

False — see also *condition*

- joint M84.1-
- labour (~~Braxton-Hicks (irregular uterine tightenings) (irritable uterus)~~) (pains) O47.9
- - at or after 37 completed weeks of gestation O47.1
- - before 37 completed weeks of gestation O47.0
- passage, urethra (prostatic) N36.0
- positive serological test for syphilis (Wassermann reaction) R76.2
- pregnancy F45.8
- rupture of membranes ~~O47.-~~ — see *False/labour*

Labour — see also *Delivery*

- without delivery (at or after 37 completed weeks of gestation) ~~NEC Z34.-O47.2~~
- - before 37 completed weeks of gestation O60.0
- abnormal NEC O75.8
- ...
- early onset (before 37 completed weeks of gestation) — see *Labour/preterm, spontaneous*
- ~~— spontaneous~~
- ~~— with delivery~~
- ~~— preterm O60.1~~
- ~~— term O60.2~~
- ~~— without delivery O60.0~~
- false (~~Braxton-Hicks (irregular uterine tightenings) (irritable uterus)~~) O47.9
- - at or after 37 completed weeks of gestation O47.1
- - before 37 completed weeks of gestation O47.0
- ...
- premature ~~or preterm~~ — see *Labour/preterm, spontaneous*
- ~~— spontaneous~~
- ~~— with delivery~~
- ~~— preterm O60.1~~
- ~~— term O60.2~~
- ~~— without delivery O60.0~~
- preterm, spontaneous
- - with delivery
- - - at or after 37 completed weeks of gestation O60.2
- - - before 37 completed weeks of gestation O60.1
- - without delivery O60.0
- prolonged or protracted O63.9
- - 1st stage O63.0
- - 2nd stage O63.1
- - 3rd stage O63.3
- - affecting fetus or newborn P03.8
- threatened (see also *Labour/false*) O47.9

Laboured breathing (see also *Hyperventilation*) R06.4

Long

- labour O63.9
- - 1st stage O63.0
- - 2nd stage O63.1
- - [3rd stage O63.3](#)
- - affecting fetus or newborn P03.8

Pregnancy (single) (uterine) — see also *condition/in pregnancy*

...

- complicated by

...

- - bone and joint disorders of back, pelvis and lower limbs O99.8

- - [Braxton Hicks contractions](#) — see [Labour/false](#)

- - breech presentation O32.1

...

- - early delivery ([before 37 completed weeks of gestation](#)) (with spontaneous labour) NEC O60.1

- - - without spontaneous labour O60.3

...

- - false labour (~~Braxton Hicks~~) (~~irregular uterine tightenings~~) (~~irritable uterus~~) (~~pains~~) (see also [Labour/false](#)) O47.9 — see [Labour/false](#)

...

- - intrauterine death (≥ 20 completed weeks (140 days) gestation and/or fetal weight ≥ 400 g) (after fetal viability) O36.4

- - - before fetal viability, with retention (< 20 completed weeks (140 days) gestation and/or fetal weight < 400 g) O02.1

- - [irregular](#)

- - - [contractions](#) — see [Labour/false](#)

- - - [uterine tightenings](#) — see [Labour/false](#)

- - [irritable uterus](#) — see [Labour/false](#)

- - isoimmunisation (ABO) O36.1

...

- - threatened

- - - abortion O20.0

- - - delivery O47.9 — see [Labour/false](#)

- - - ~~at or after 37 completed weeks of gestation~~ O47.1

- - - ~~before 37 completed weeks of gestation~~ O47.0

- - thrombophlebitis O22.9

Premature — see also *condition*

...

- delivery (~~with spontaneous labour~~) NEC O60.1 — see [Delivery/preterm](#)

- ~~without spontaneous labour~~ O60.3

- ejaculation F52.4

Prolonged, prolongation

- bleeding time (see also *Defect/coagulation*) R79.83

- - with bleeding due to circulating anticoagulants D68.3

- coagulation or prothrombin time R79.83

- - with bleeding due to circulating anticoagulants D68.3

- labour O63.9

- - 1st stage O63.0

- - 2nd stage O63.1

- - [3rd stage O63.3](#)

- - affecting fetus or newborn P03.8

Rupture, ruptured (see also *Injury/by site*)

...

- membranes (spontaneous)

...

- - false O47.— see [Labour/false](#)

Threatened

- abortion O20.0
- ~~- with subsequent abortion O03-~~
- - affecting fetus P01.8
- job loss, anxiety concerning Z56.2
- labour ~~(see also Labour/false) O47.9~~ — see also [Labour/false](#)
- - affecting fetus [or newborn](#) P01.8

Tic (disorder) F95.9

- breathing F95.8

...

- transient F95.0

Tight fascia (lata) M62.8-

Tightenings, irregular uterine (false labour) — see [Labour/false](#)
- with labour — see [Contraction\(s\)/uterus/abnormal](#)

Tightness

ACHI TABULAR LIST

LIST OF ACHI BLOCK NUMBERS

| Block No. | Block Name |
|-----------|--|
| 1336 | Spontaneous vertex delivery |
| 1339 | Assisted B reech delivery and extraction |

SPONTANEOUS ~~VERTEX~~ DELIVERY

1336 Spontaneous ~~vertex~~ delivery

Code also when performed:

- episiotomy (90472-00 [1343])

Note: Codes for spontaneous delivery are assigned when there is minimal or no assistance provided for the delivery.

Excludes: with delivery (assistance) procedure — see [Alphabetic Index: Delivery/by type](#)

90467-00 Spontaneous vertex delivery

Includes: spontaneous delivery of placenta

[90470-05 Spontaneous breech delivery](#)

Includes: spontaneous delivery of placenta

[90467-01 Spontaneous delivery of placenta, not elsewhere classified](#)

[▽ 1550](#)

Includes: that with:

- [administration of Syntocinon in third stage of labour](#)
- [controlled cord traction \(CCT\)](#)

Note: This code is assigned for those patients who deliver their baby (or babies) prior to the episode of care, but spontaneously deliver the placenta during the episode of care.

Excludes: that with delivery procedure classified to blocks [1336] to [1339] — omit code

FORCEPS DELIVERY

1337 Forceps rotation and delivery

Includes: spontaneous delivery of placenta

Code also when performed:

- episiotomy (90472-00 [1343])

Excludes: that for breech delivery (90470-02, 90470-04 [1339])

...

VACUUM DELIVERY

1338 Vacuum assisted delivery

Includes: rotation of fetal head
[spontaneous delivery of placenta](#)

...

BREECH DELIVERY

Excludes: spontaneous breech delivery (90470-05 [1336])

1339 **Assisted B**reech delivery and extraction

Includes: spontaneous delivery of placenta

~~90470-00—Spontaneous breech delivery~~

90470-01 Assisted breech delivery

ACHI ALPHABETIC INDEX

Delivery (spontaneous) (vertex) 90467-00 [1336]

- assist~~ance~~ procedure (McRobert's manoeuvre) NEC (*see also specific interventions*) 90477-00 [1343]

- - episiotomy 90472-00 [1343]

- - fetal monitoring — *see Monitoring/fetal*

- - incision of cervix 90474-00 [1343]

- - manual rotation of fetal head 90471-06 [1342]

- - replacement of prolapsed umbilical cord 90473-00 [1343]

- - symphysiotomy 90475-00 [1343]

- - version — *see Version, obstetrical*

- assisted 90477-01 [1343]

- breech 90470-05 ~~0~~ [1336 ~~9~~]

- - assisted 90470-01 [1339]

- - - with forceps to after-coming head (FACH) 90470-02 [1339]

- - extraction 90470-03 [1339]

- - - with forceps to after-coming head (FACH) 90470-04 [1339]

- caesarean — *see Caesarean section*

- forceps NEC 90468-06 [1337]

- - for breech presentation — *see Delivery/breech*

- - with rotation of fetal head 90468-04 [1337]

- - at caesarean section — *omit code*

- - failed 90468-05 [1337]

- - high 90468-02 [1337]

- - low (outlet) (Wrigley's) 90468-00 [1337]

- - mid (Keilland's) (Neville-Barnes) 90468-01 [1337]

- placenta NEC 90467-01 [1336]

- - with any other delivery procedure — *omit code*

- - postpartum — *see Removal/placenta*

- vacuum assisted (Kiwi) (Ventouse) 90469-00 [1338]

- - failed 90469-01 [1338]

Australian Coding Standards

1505 DELIVERY AND ASSISTED DELIVERY CODES

...

See also TN1225

[For guidelines regarding transfer in third stage of labour \(ie after delivery of baby at one facility but before delivery of placenta at another facility\), see ACS 1550 Discharge/transfer in labour.](#)

1548 PUERPERAL/POSTPARTUM CONDITION OR COMPLICATION

...

POSTPARTUM CARE AND EXAMINATION IMMEDIATELY AFTER DELIVERY

Z39.0- *Postpartum care and examination immediately after delivery* is only assigned for episodes of care **within the puerperal period**:

- Z39.0- is assigned as **principal diagnosis**:
 - when a patient has delivered (baby and placenta) prior to an episode of care, **and**:
 - no post delivery interventions are performed during the episode of care,
or
 - the ~~mother~~-[patient](#) does not have a puerperal/postpartum condition or complication
 - when a patient is transferred from another facility following delivery to accompany a sick child, and only receives routine postpartum care at the receiving ~~hospital~~[facility](#)
 - when a patient is transferred from another facility for post delivery care, with no condition meeting the definition of principal diagnosis or additional diagnosis. Assign Z48.8 *Other specified surgical follow-up care* as an additional diagnosis when the patient is receiving postcaesarean care.
- Z39.0- is assigned as an **additional diagnosis** when a patient has delivered (baby and placenta) prior to an episode of care **and**:
 - post delivery interventions are performed during the admitted episode of care,
or
 - the ~~mother~~-[patient](#) has a puerperal/postpartum condition or complication
- Z39.0- is **never** assigned in a delivery episode of care.

[For guidelines regarding transfer in third stage of labour \(ie after delivery of baby at one facility but before delivery of placenta at another facility\), see ACS 1550 Discharge/transfer in labour.](#)

Note: ACHI codes are not included in examples

EXAMPLE 1:

Patient who had planned for a hospital delivery, was admitted after ~~she~~-delivered (baby and placenta) at home. ~~She~~-[Patient](#) had no puerperal condition or complication, and was discharged with [their](#) baby two days later.

Codes: Z39.03 *Postpartum care after unplanned, out of hospital delivery*

EXAMPLE 2:

Patient delivered (spontaneous vertex delivery (SVD)) (baby and placenta) at ~~hospital A~~ [facility 1](#), and was transferred to ~~hospital B~~ [facility 2](#) for routine post delivery care only.

Codes: ~~Hospital A~~ [Facility 1](#) – code the delivery

~~Hospital B~~ [Facility 2](#)

Z39.01 *Postpartum care after hospital delivery*

EXAMPLE 3:

Patient delivered (baby and placenta) in the ambulance on the way to hospital. After admission to the Birthing Unit, ~~she had~~ a first degree tear of the perineum ~~was~~ repaired. ~~She~~ [Patient](#) was discharged home with ~~the~~ [ir](#) baby two days later.

Codes: O70.0 *First degree perineal laceration during delivery*

Z39.03 *Postpartum care after unplanned, out of hospital delivery*

[90481-00 \[1344\]](#) *Suture of first or second degree tear of perineum*

EXAMPLE 4:

Patient delivered (baby and placenta) in the ambulance on the way to hospital. ~~She was~~ [Patient was](#) admitted to the obstetric ward and on day two developed a low grade fever. No infection or cause of the fever was identified after extensive investigation. No further complication was identified and ~~she~~ [they were](#) ~~was~~ discharged when ~~she was~~ afebrile for two days.

Codes: O86.4 *Pyrexia of unknown origin following delivery*

Z39.03 *Postpartum care after unplanned, out of hospital delivery*

In this example a puerperal/postpartum code was assigned as the admission was immediately following delivery.

EXAMPLE 5:

Patient admitted with a puerperal pulmonary embolism following planned home delivery two days [prior](#) ~~age~~.

Codes: O88.2 *Obstetric blood clot embolism*

I26.9 *Pulmonary embolism without mention of acute cor pulmonale*

Z39.02 *Postpartum care after planned, out of hospital delivery*

In this example a puerperal/postpartum code was assigned as the pulmonary embolism was described as puerperal, implying a causal relationship.

EXAMPLE 6:

Patient with pre-existing sickle cell anaemia was admitted with acute anaemia five days post hospital delivery. Clinical advice confirmed and documented that the anaemia was exacerbated by ~~her~~ [the patient's](#) recent pregnancy and delivery.

Codes: O99.04 *Anaemia in childbirth and the puerperium, with mention of pre-existing anaemia*

D57.1 *Sickle-cell anaemia without crisis*

Z39.01 *Postpartum care after hospital delivery*

In this example a puerperal/postpartum code was assigned as documentation confirmed that the anaemia was a puerperal complication.

EXAMPLE 7:

Patient delivered a baby in the ambulance on the way to hospital. An adherent placenta was removed manually in the hospital, following admission.

Codes: O83 *Other assisted single delivery*
~~O43.2 *Morbidly adherent placenta*~~
O73.0 *Retained placenta*
Z37.0 *Single live birth*
90482-00 [1345] *Manual removal of placenta*

In this example O83 was assigned as the delivery was not complete prior to admission (ie the placenta was not delivered). Z39.0- was not assigned as it was a delivery episode of care.

EXAMPLE 8:

Term delivery; twin 1 delivered in the ambulance on the way to hospital. Twin 2 delivered in hospital by emergency lower segment caesarean section (LSCS) ([general anaesthesia ASA 1E](#)).

Codes: O84.82 *Multiple delivery by combination of methods*
O30.0 *Twin pregnancy*
Z37.2 *Twins, both liveborn*
16520-03 [1340] *Emergency lower segment caesarean section*
92514-10 [1910] *General anaesthesia, ASA 10*

In this example O84.82 was assigned as the delivery was not complete prior to admission. Z39.0- was not assigned as it was a delivery episode of care.

EXAMPLE 9:

Spontaneous delivery of a single liveborn infant; pulmonary embolism diagnosed and treated post delivery.

Codes: O80 *Single spontaneous delivery*
O88.2 *Obstetric blood clot embolism*
I26.9 *Pulmonary embolism without mention of acute cor pulmonale*
Z37.0 *Single live birth*
90467-00 [1336] *Spontaneous vertex delivery*

In this example a puerperal/postpartum code was assigned, and Z39.0- was not assigned, as it was a delivery episode of care.

EXAMPLE 10:

Patient was admitted three months post delivery with an infected caesarean wound requiring intravenous antibiotics.

Codes: O86.0 *Infection of obstetric surgical wound*

In this example a puerperal/postpartum code was assigned as the infection was a direct consequence of the obstetric wound. Z39.0- was not assigned as the episode of care was not within the puerperal period.

EXAMPLE 11:

Patient ~~was~~ admitted with nausea, vomiting and fever [three weeks after delivery of](#). ~~She delivered~~ a healthy baby boy ~~three weeks previously~~. Patient kept overnight and discharged the next day with a diagnosis of viral gastroenteritis.

Codes: A08.4 *Viral intestinal infection, unspecified*

In this example a puerperal/postpartum code was not assigned as documentation does not indicate that the condition was a puerperal complication.

EXAMPLE 12:

Patient ~~was~~ admitted for treatment of asthma one week post hospital delivery.

Codes: J45.9 *Asthma, unspecified*

In this example a puerperal/postpartum code was not assigned as there was no documentation identifying the condition as a puerperal complication.

EXAMPLE 13:

Patient was admitted one week post delivery with a deep [\(soft tissue\)](#) laceration to [the](#)r right hand, requiring exploration and suturing under [general anaesthesia GA \(ASA 1\)](#). ~~She was~~ [They were](#) discharged home the following day.

Codes: S61.9 *Open wound of wrist and hand, part unspecified*

Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)

[30029-00 \[1635\]](#) [Repair of wound of skin and subcutaneous tissue of other site, involving soft tissue](#)

[92514-19 \[1910\]](#) [General anaesthesia, ASA 19](#)

In this example a puerperal/postpartum code was not assigned as it was a nonobstetric injury. Z39.0- was not assigned as the patient does not have a puerperal/postpartum complication

CONDITIONS RELATING TO LACTATION

...

1550 DISCHARGE/TRANSFER IN LABOUR

Definition of labour

~~True labour~~ is defined as regular, rhythmic contractions of the uterus that result in the progressive dilation and ~~effacement~~ softening of the cervix. At times, it is accompanied by a 'show' of blood and mucous, ~~which indicates~~ that the cervical canal is ~~opening~~ dilating.

Definition of false labour

~~False labour~~, False labour also called ~~Braxton Hicks contractions~~, ~~are~~ is irregular tightenings of the ~~pregnant~~ uterus that begin in the first trimester and increase in frequency, duration and intensity as the pregnancy progresses. There is no dilation and softening of the cervix in false labour.

~~The crucial difference between false and true labour is that the cervix does not actually change in false labour whereas it does dilate and soften during true labour.~~

Synonyms for false labour include:

- Braxton Hicks contractions
- false rupture of membranes
- irregular uterine tightenings/contractions
- irritable uterus
- spurious labour pains
- threatened (preterm) delivery/labour

Transfer in (first stage) labour

~~A woman may begin her labour at one hospital and then be transferred to another hospital for the delivery of the baby~~ A patient may begin their labour at one facility, then transfer to another facility for the delivery of the baby. The reasons for the transfer may be:

- ~~Clinical~~ – a medical condition of the mother or baby or both
- ~~Administrative~~ – lack of obstetric services, lack of obstetric beds, lack of neonatal services, patient choice
- clinical – due to medical condition(s) (patient's and/or baby's)
- administrative – due to lack of obstetric or neonatal services, or beds, or due to patient choice

Transfer in third stage of labour

A patient may require transfer in the third stage of labour (ie following delivery of the baby, but before delivery of the placenta). The reasons for the transfer may be:

- clinical – due to medical condition(s) (eg retained placenta)
- administrative – due to lack of obstetric services (to treat the condition requiring transfer)

Discharge in labour (or false labour)

~~A woman may also be discharged home in labour to await more established labour before being readmitted for the delivery episode.~~ A patient in false labour, or the early stages of labour, may be discharged home to await established labour before readmission for the delivery episode.

Classification

~~For coding the undelivered admission in false labour, assign O47. *False labour.*~~

- ~~Where a patient is discharged home with a documented diagnosis of false labour (or one of the synonymous terms listed above), assign a code from category O47 *False labour or labour without delivery* (with fourth character .0, .1 or .9)~~

~~For coding the undelivered admission in true labour, assign the following codes:~~

- ~~Where a patient in (first stage) labour is discharged/transferred to another facility for **clinical reasons**, assign as principal diagnosis the medical condition that necessitated the patient's transfer to another facility~~
- ~~Where a patient in (first stage) labour is discharged home, or transferred to another facility for **administrative reasons**, assign as principal diagnosis either:~~
 - ~~O60.0 *Preterm labour without delivery* if < 37 completed weeks of gestation **OR**~~
 - ~~O47.2 *Labour without delivery* if ≥ 37 completed weeks of gestation~~
- ~~Where a patient in the **third stage of labour** is transferred to another facility:~~
 - ~~**Facility 1** – Code the delivery as per the guidelines in ACS 1500 *Diagnosis sequencing in obstetric episodes of care* and 1505 *Delivery and assisted delivery codes*~~
 - ~~**Facility 2** – Assign as principal diagnosis:~~
 - ~~a code for the condition that necessitated the patient's transfer **OR**~~
 - ~~O63.3 *Prolonged third stage (of labour)*, if there is no documented indication for the transfer.~~

~~• **Clinical** – the medical (obstetrical) condition that necessitated the patient's transfer.~~

~~• **Administrative/Discharged home:**~~

- ~~for ≥ 37 completed weeks of gestation, assign the appropriate code from category Z34 *Supervision of normal pregnancy* as the principal diagnosis~~
- ~~for < 37 completed weeks of gestation, assign O60.0 *Preterm labour without delivery* as the principal diagnosis.~~

EXAMPLE 1:

Patient (36/40) admitted following six hours of irregular contractions. Internal examination by midwife identified that the patient's cervix was closed. Contractions stopped and did not recommence. Patient remained overnight for observation and was discharged home the following day.

Codes: O47.0 *False labour before 37 completed weeks of gestation*
 O09.5 *Duration of pregnancy, 34-< 37 completed weeks*

EXAMPLE 2:

Patient in labour (39/40) is admitted to facility 1. They are transferred to facility 2 for an emergency lower segment caesarean section (epidural ASA 1) due to breech presentation, and signs of fetal distress (fetal heart rate decelerations with meconium in liquor).

Codes: **Facility 1**
 O64.1 *Labour and delivery affected by breech presentation*
 O68.2 *Labour and delivery complicated by fetal heart rate anomaly with meconium in amniotic fluid*

Facility 2

O82 Single delivery by caesarean section
O64.1 Labour and delivery affected by breech presentation
O68.2 Labour and delivery complicated by fetal heart rate anomaly with meconium
in amniotic fluid
Z37.0 Single live birth
16520-03 [1340] Emergency lower segment caesarean section
92508-19 [1909] Neuraxial block, ASA 19

EXAMPLE 3:

Spontaneous vertex delivery of baby (39/40) at facility 1. Patient transferred to facility 2 for retained placenta requiring manual removal under sedation (no ASA).

Codes: **Facility 1**

O80 Single spontaneous delivery
O73.0 Retained placenta
Z37.0 Single live birth
90467-00 [1336] Spontaneous vertex delivery

Facility 2

O73.0 Retained placenta
Z39.01 Postpartum care after hospital delivery
90482-00 [1345] Manual removal of placenta
92515-99 [1910] Sedation, ASA 99

EXAMPLE 4:

Term delivery of baby (39/40) at facility 1. Patient transferred to facility 2 where they deliver the placenta spontaneously.

Codes: **Facility 1**

O80 Single spontaneous delivery
Z37.0 Single live birth
90467-00 [1336] Spontaneous vertex delivery

Facility 2

O63.3 Prolonged third stage (of labour)
Z39.01 Postpartum care after hospital delivery
90467-01 [1336] Spontaneous delivery of placenta, not elsewhere classified

EXAMPLE 5:

Patient was admitted in the early stages of labour (39/40). After examination, they decide to go home to await more established labour.

Codes: O47.2 Labour without delivery



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Liver procurement procedures for transplantation

Introduction/Rationale:

This addenda proposal was created following a written request received from IHPA in April 2018). IHPA requested that this topic be assessed as part of the ICD-10-AM/ACHI Eleventh Edition development program, and be reviewed by the ICD Technical Group.

IHPA requested that consideration be given to revision of the ACHI codes for liver procurement for transplantation, including both living and cadaver donors.

ACCD proposes to make amendments to block **[953]** *Excision procedures on liver*, including the addition of new codes for procurement interventions performed on 'living' or 'cadaver' donors for transplantation.

ACCD PROPOSAL

Tabular List

| 953 | Excision procedures on liver |
|-------------------------------|---|
| 30409-00 | Percutaneous [closed] liver biopsy
Closed needle biopsy of liver

<i>Excludes:</i> transjugular liver biopsy (90298-00 [953]) |
| 30412-00 | Intraoperative needle biopsy of liver

<i>Excludes:</i> that with grading laparotomy for lymphoma (30384-00 [985]) |
| 30411-00 | Intraoperative biopsy of liver

<i>Includes:</i> wedge excision

<i>Excludes:</i> that with grading laparotomy for lymphoma (30384-00 [985]) |
| 90298-00 | Transjugular liver biopsy |
| 30414-00
▽-0030 | Excision of lesion of liver
Resection of congenital cyst of liver
Subsegmental resection of liver

<i>Includes:</i> procurement of associated artery and/or vein(s) for transplantation

<i>Excludes:</i> hydatid cyst of liver (30434-00, 30436-00, 30438-00 [955]) |

- 30415-00 Segmental resection of liver
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation
Excludes: that for procurement of liver for transplantation (96258 [953])
- 30418-00 Lobectomy of liver
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation
Excludes: extended lobectomy of liver (30421-00 [953])
 that for procurement of liver for transplantation (96258 [953])
- 30421-00 Trisegmental resection of liver
 ▾ 0030 Extended lobectomy of liver
Includes: procurement of associated artery and/or vein(s) for transplantation
Excludes: that for procurement of liver for transplantation (96258 [953])
- ~~90346-00 Total hepatectomy~~
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation
- [96258-01 Laparoscopic procurement of liver for transplantation, living donor](#)
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation
- [96258-02 Procurement of liver for transplantation, living donor](#)
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation
- [96258-03 Procurement of liver for transplantation, cadaver](#)
 ▾ 0030 *Includes:* procurement of associated artery and/or vein(s) for transplantation

Alphabetic Index

Excision — see also *Removal*

- ...
- liver (hemi) (lobe) (partial) (total) ~~90346-00 [953]~~ [30418-00 \[953\]](#)
 - - for transplantation (cadaver) [96258-03 \[953\]](#)
 - - - living donor [96258-02 \[953\]](#)
 - - - - laparoscopic [96258-01 \[953\]](#)
 - - with excision of hydatid cyst of liver (with drainage) [30438-00 \[955\]](#)
 - ~~- - lobe 30418-00 [953]~~
 - ~~- - - extended 30421-00 [953]~~
 - - extended (trisegmental) [30421-00 \[953\]](#)
 - - porta hepatis, radical [30461-00 \[966\]](#)
 - - segmental [30415-00 \[953\]](#)
 - - - with radical resection of hepatic duct (common bile duct) [30464-00 \[966\]](#)
 - - - subsegmental [30414-00 \[953\]](#)
 - - - trisegmental [30421-00 \[953\]](#)
 - lung (total removal of lung) [38438-02 \[553\]](#)
- ...
- ...

...
Hemihepatectomy (*see also Excision/liver*) 30418-00 [953]
Hemilaminectomy — *see Laminectomy*

...
Hepatectomy (*see also Excision/liver*) (hemi) (total) ~~90346-00 [953]~~ 30418-00 [953]
~~-hemi 30418-00 [953]~~
Hepaticocholangiojejunostomy 30460-07 [969]

Lobectomy

- brain (partial) 40703-02 [16]
-- for
-- - tumour 39709-00 [15]
- liver 30418-00 [953]
- - for transplantation (cadaver) 96258-03 [953]
- - - living donor 96258-02 [953]
- - - - laparoscopic 96258-01 [953]
- - extended (trisegmental) 30421-00 [953]
- lung (complete) 38438-01 [552]

Procurement

...
- heart
-- for transplantation 90204-00 [659]
-- - with lung 90204-01 [659]
- kidney
- - for transplantation (cadaver) 36516-06 [1050]
- - - living donor 36516-05 [1050]
- - - - laparoscopic 36516-04 [1050]
- liver (hemi) (lobe) (partial) (total)
- - for transplantation (cadaver) 96258-03 [953]
- - - living donor 96258-02 [953]
- - - - laparoscopic 96258-01 [953]
- lung
-- for transplantation 38438-03 [553]
-- - with heart 90204-01 [659]

Removal — *see also Excision*

...
- lingual tonsil 41804-00 [412]
- liver — *see Excision/liver*
- loop recorder, subcutaneously implanted (ECG) (patient activated) 38286-00 [1604]

Resection — *see also Excision*

...
- liver (hemi) (lobe) (partial) (total) 30418-00 [953]
- - for transplantation (cadaver) 96258-03 [953]
- - - living donor 96258-02 [953]
- - - - laparoscopic 96258-01 [953]
- - with excision of hydatid cyst of liver (with drainage) 30438-00 [955]
~~- - lobe 30418-00 [953]~~
~~- - - extended 30421-00 [953]~~
- - extended (trisegmental) 30421-00 [953]
- - porta hepatis, radical 30461-00 [966]

- segmental 30415-00 [953]
- with radical resection of hepatic duct (common bile duct) 30464-00 [966]
- subsegmental 30414-00 [953]
- trisegmental 30421-00 [953]
- lung (total removal of lung) 38438-02 [553]
- ...

Australian Coding Standards

0023 LAPAROSCOPIC/ARTHROSCOPIC/ENDOSCOPIC SURGERY

If a procedure is performed laparoscopically, arthroscopically or endoscopically, and there is no code provided which encompasses both the endoscopy and the procedure, then both procedures should be coded.

EXAMPLE 1:

Laparoscopic removal of the gallbladder.

Code: 30445-00 [965] *Laparoscopic cholecystectomy*

EXAMPLE 2:

Laparoscopic hepatectomy.

Procedure sequenced first: ~~90346-00 [953] Total hepatectomy~~ [30418-00 \[953\] Lobectomy of liver](#)

Associated procedure: 30390-00 [984] *Laparoscopy*

0053 ROBOTIC-ASSISTED INTERVENTION

Minimally invasive surgery is being performed across a wide range of specialities with the assistance of robotic technology. Robotic-assisted interventions involve use of very small instruments attached to a robotic arm and controlled by a clinician through a computer console.

CLASSIFICATION

Where a procedure is performed with the assistance of robotic technology, code first the procedure(s) performed, followed by 96233-00 [1923] *Robotic-assisted intervention*.

EXAMPLE 1:

Robotic-assisted laparoscopic abdominal hysterectomy.

Codes: 90448-01 [1268] *Total laparoscopic abdominal hysterectomy*

96233-00 [1923] *Robotic-assisted intervention*

EXAMPLE 2:

Robotic-assisted laparoscopic prostatectomy.

Codes: 37209-01 [1166] *Laparoscopic radical prostatectomy*

96233-00 [1923] *Robotic-assisted intervention*

EXAMPLE 3:

Robotic-assisted laparoscopic hepatectomy.

Codes: ~~90346-00 [953] Total hepatectomy~~ [30418-00 \[953\] Lobectomy of liver](#)

30390-00 [984] *Laparoscopy*

96233-00 [1923] *Robotic-assisted intervention*



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Lymph node interventions

Introduction/Rationale:

This addenda proposal incorporates a number of public submissions, tasks and queries relating to lymph node interventions:

- Biopsy/sampling of para-aortic lymph node (P38)
- Abdominal lymph node sampling for staging of gynaecological malignancy (TN718)
- Neck dissections documented by levels (Q3063)
- Dissection/excision of lymph node (P277)

Following a review, ACCD decided to undertake a complete revision of all lymph node interventions (biopsy/sampling/excision).

ACCD proposes to remove the diagnostic components in the ACHI codes for lymph node interventions, and move towards generic codes based on site of the lymph nodes, similar to that of the World Health Organization's (WHO) International Classification of Health Interventions (ICHI).

ACCD also proposes to delete ACS 0028 *Para-aortic lymph node biopsy*, and use the Alphabetic Index and Tabular List to facilitate assignment of ACHI codes for lymph node interventions.

ACCD PROPOSAL

TABLE OF CONTENTS

LIST OF ACHI BLOCK NUMBERS

| Block No. | Block Name |
|----------------|---|
| ... | |
| 804 | Incision procedures on lymphatic structure |
| 805 | Biopsy of lymphatic structure |
| 806 | Excision procedures on lymphatic structure node of neck |
| 807 | Excision of internal mammary lymph node |
| 808 | Excision procedures on lymph node of axilla |
| 809 | Excision procedures on lymph node of groin |
| 810 | Excision procedures on lymph nodes for gynaecological malignancy |
| 811 | Excision procedures on lymph node of other sites |
| 812 | Other procedures on lymphatic structures |
| ... | |

Tabular List

LYMPH NODES

INCISION

804 Incision procedures on lymphatic structure

- 90281-00 Incision of lymphatic structure
Drainage of lymph node
Incision of lymphatic channel, node or vessel
- 30317-00 Re-exploration of lymph node of neck

EXCISION

Note: The codes in block [805] and [806] require a two character extension to indicate the site of the excised lymph node. See below for extension codes for lymph node sites, listed by region.

- 00 Head region
- 01 Neck/cervical
Apical nodes [supraclavicular]
Level I-VI
Scalene
- 02 Axillary
Subscapular
- 03 Intrathoracic
Diaphragmatic
Mediastinal
Para-aortic [located above the diaphragm]
Parasternal [internal mammary]
Tracheobronchial
- 04 Intra-abdominal
Abdominal
Para-aortic [located below the diaphragm]
Mesenteric
Retroperitoneal
- 05 Pelvic
Iliac
Sacral
- 06 Inguinal
Groin
Inguinofemoral
- 07 Extremity
Brachial
Femoral
Popliteal
Tibial
- 08 Other and unspecified lymphatic sites

805 Biopsy of lymphatic structure

Excludes: axillary lymph node (30332-00 [808])

[See extension codes](#)

[96242-XX](#) Biopsy of lymphatic structure

[Biopsy of lymph node](#)

[96243-XX](#) Sentinel lymph node biopsy

[Excision of sentinel lymph node\(s\)](#)

Includes: injection of radioisotope and mapping (lymphoscintigraphy) of nodal basin

Code also when performed:

- excision of lymph nodes (96244 [806])
- radical excision of lymph nodes (96245 [806])

~~30075-00~~ Biopsy of lymph node

~~Biopsy of lymphatic structure~~

~~*Excludes:* scalene node biopsy (30096-00 [805])~~

~~that with laparoscopy/laparotomy for staging of malignancy:~~

- gynaecological (35723 [810])
- lymphoma (30384-00 [985])
- NOS (35726-01 [985])

~~30096-00~~ Biopsy of scalene node

~~30300-04~~ Sentinel lymph node biopsy, not elsewhere classified

~~Excision of sentinel lymph node(s)~~

~~*Includes:* injection of radioisotope and mapping (lymphoscintigraphy) of nodal basin~~

~~*Code also when performed:*~~

- excision of lymph nodes:
 - radical (31435-00 [806], 30330-00 [809], 35551 [810], 37607-00, 37610-00, 90282-02 [811])
 - regional (31423-01 [806], 30329-01 [809], 90282-01 [811])

~~*Excludes:* that of axilla (30300-00 [808])~~

806 Excision procedures on lymphatic structure node of neck

~~Excision of cervical lymph nodes~~

~~[See extension codes](#)~~

~~*Excludes:* that with:~~

- radical lobectomy (38441-00 [552])
- radical nephrectomy (see block [1053])
- radical pneumonectomy (38441-01 [553])

[96244-XX](#) Excision of lymphatic structure

[Total \(simple\) excision of lymph node](#)

[Regional \(limited\) excision of lymph nodes](#)

Code also when performed:

- sentinel lymph node biopsy or excision (96243 [805])

[96245-XX](#) Radical excision of lymphatic structure

[Complete clearance of all nodes](#)

[Radical dissection of lymph nodes](#)

[Resection of lymph nodes down to muscle and fascia](#)

Code also when performed:

- sentinel lymph node biopsy or excision (96243 [805])

Excludes: that with:

- excision of retroperitoneal neuroendocrine lesion (30323-00 [989])
- radical prostatectomy with bladder neck reconstruction (37211-01 [1166], 37211-00 [1167])

~~31423-00~~ ~~Excision of lymph node of neck~~
~~Total (simple) excision of lymph node of neck~~

~~*Excludes:* sentinel lymph node biopsy or excision (30300-01 [805])~~

~~31423-01~~ ~~Regional excision of lymph nodes of neck~~
~~Limited excision of lymph nodes of neck~~
~~Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat~~

~~*Code also when performed:*~~

- ~~• sentinel lymph node biopsy or excision (30300-01 [805])~~

~~31435-00~~ ~~Radical excision of lymph nodes of neck~~
~~Complete clearance of all nodes in neck~~
~~Radical neck dissection~~
~~Resection of cervical lymph nodes down to muscle and fascia~~

~~*Code also when performed:*~~

- ~~• sentinel lymph node biopsy or excision (30300-01 [805])~~

~~*Excludes:* radical excision of intraoral lesion (30275-00 [403])~~

~~**807**~~ — ~~Excision of internal mammary lymph node~~

~~30075-11~~ — ~~Excision of internal mammary lymph node~~

~~**808**~~ — ~~Excision procedures on lymph node of axilla~~

~~*Code also when performed:*~~

- ~~• excision of lesion of breast (31500-00, 31515-00 [1744])~~
- ~~• mastectomy (see blocks [1747] and [1748])~~

~~30332-00~~ — ~~Excision of lymph node of axilla~~
~~Axillary sampling~~

| | | |
|---------------------|--|--|
| Biopsy | | of single axillary lymph node |
| Excision | | |

~~Total (simple) excision of lymph node of axilla~~

~~*Excludes:* sentinel lymph node biopsy or excision of axilla (30300-00 [808])~~

~~30300-00~~ — ~~Sentinel lymph node biopsy of axilla~~
~~Excision of sentinel lymph node(s) of axilla~~

~~*Includes:* injection of radioisotope and mapping (lymphoscintigraphy) of nodal basin~~

~~*Code also when performed:*~~

- ~~• excision of axillary lymph nodes:~~
 - ~~— • radical (30336-00 [808])~~
 - ~~— • regional (30335-00 [808])~~

~~30335-00~~ — ~~Regional excision of lymph nodes of axilla~~

| | | |
|--------------------|--|--|
| Level I | | excision of lymph nodes of axilla |
| Limited | | |

~~Low axillary dissection or excision~~
~~Regional lymph node excision with excision of lymphatic drainage area including fat~~
~~*Note:* — Level I includes nodes of the lower axilla up to the lower border of pectoralis minor~~

Code also when performed:

• sentinel lymph node biopsy or excision (30300-00 [808])

30336-00 Radical excision of lymph nodes of axilla

Complete clearance of all nodes in axilla

Level II or III excision of lymph nodes of axilla

Mid or high axillary dissection or excision

Note: Level II includes axillary contents up to the upper border of pectoralis minor

Level III includes axillary contents extending to the apex of the axilla

Code also when performed:

• sentinel lymph node biopsy or excision (30300-00 [808])

809 ~~Excision procedures on lymph node of groin~~

Excision of inguinal lymph nodes

30329-00 Excision of lymph node of groin

Total (simple) excision of lymph node of groin

Excludes: sentinel lymph node biopsy or excision (30300-01 [805])

30329-01 Regional excision of lymph nodes of groin

Limited excision of lymph nodes of groin

Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

30330-00 Radical excision of lymph nodes of groin

Complete clearance of all nodes in groin

Resection of inguinal lymph nodes down to muscle and fascia

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

810 ~~Excision procedures on lymph nodes for gynaecological malignancy~~

▽-0028

Excludes: staging laparotomy for lymphoma (30384-00 [985])

35723-00 Laparoscopic pelvic or abdominal lymph node sampling for staging of gynaecological malignancy

Includes: sampling of retroperitoneal lymph nodes

35723-01 Pelvic or abdominal lymph node sampling for staging of gynaecological malignancy

Staging laparotomy for gynaecological malignancy involving sampling of pelvic, abdominal or retroperitoneal lymph nodes

Code also when performed:

• hysterectomy (35653, 35667-00 [1268], 35667-01 [1269])

35723-02 Laparoscopic para-aortic lymph node sampling for staging of gynaecological malignancy

35723-03 Para-aortic lymph node sampling for staging of gynaecological malignancy

▽-0028

Staging laparotomy for gynaecological malignancy involving sampling of para-aortic lymph nodes

Code also when performed:

• hysterectomy (35653, 35667-00 [1268], 35667-01 [1269])

35551-00 Radical excision of pelvic lymph nodes via laparoscopy for gynaecological malignancy

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

~~35551-01~~ Radical excision of pelvic lymph nodes for gynaecological malignancy

Code also when performed:

▪ sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that with hysterectomy (35664-00, 35670-00 [1268], 35664-01 [1269])

811 ~~Excision procedures on lymph node of other sites~~

V-0028

Excludes: hysterectomy with excision of pelvic lymph nodes (35664-00 [1268], 35664-01 [1269])

~~90282-00~~ Excision of lymph node of other site

Total (simple) excision of lymph node of other site NOS

Excludes: sentinel lymph node biopsy or excision (30300-01 [805])

that for staging of malignancy:

▪ gynaecological (35723 [810])

▪ lymphoma (30384-00 [985])

▪ NOS (35726-01 [985])

~~90282-01~~ Regional excision of lymph nodes of other site

Limited excision of lymph nodes of other site NOS

Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat

Code also when performed:

▪ sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that for staging of malignancy:

▪ gynaecological (35723 [810])

▪ lymphoma (30384-00 [985])

▪ NOS (35726-01 [985])

~~37607-00~~ Radical excision of retroperitoneal lymph nodes

Radical dissection of retroperitoneal lymph nodes

Code also when performed:

▪ sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that with:

▪ excision of retroperitoneal neuro-endocrine lesion (30323-00 [989])

▪ hysterectomy (35661-00 [1268])

▪ radical nephrectomy (see block [1053])

~~37610-00~~ Radical excision of retroperitoneal lymph nodes, subsequent

Radical dissection of retroperitoneal lymph nodes following previous retroperitoneal:

▪ chemotherapy

▪ dissection

▪ irradiation

Code also when performed:

▪ sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that with:

▪ excision of retroperitoneal neuro-endocrine lesion (30323-00 [989])

▪ hysterectomy (35661-00 [1268])

▪ radical nephrectomy (see block [1053])

~~90282-02~~ Radical excision of lymph nodes of other site

Complete clearance of all nodes of other site NOS

Resection of lymph nodes down to muscle and fascia

Code also when performed:

▪ sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that for staging of malignancy:

- ~~gynaecological (35723 [810])~~
- ~~lymphoma (30384 00 [985])~~
- ~~NOS (35726 01 [985])~~
- that of pelvic lymph nodes for:
- ~~gynaecological malignancy (35551 [810])~~
- ~~hysterectomy (35664 00, 35670 00 [1268], 35664 01 [1269])~~
- ~~radical prostatectomy and bladder neck reconstruction (37211 00 [1167])~~

953 **Excision procedures on liver**

30409-00 Percutaneous [closed] liver biopsy
Closed needle biopsy of liver

Excludes: transjugular liver biopsy (90298-00 [953])

30412-00 Intraoperative needle biopsy of liver

Excludes: that with grading laparotomy for lymphoma (30384 00 [985])

30411-00 Intraoperative biopsy of liver

Includes: wedge excision

Excludes: that with grading laparotomy for lymphoma (30384 00 [985])

90298-00 Transjugular liver biopsy

30414-00 Excision of lesion of liver
Resection of congenital cyst of liver
Subsegmental resection of liver

▽ 0030

Includes: procurement of associated artery and/or vein(s) for transplantation

Excludes: hydatid cyst of liver (30434-00, 30436-00, 30438-00 [955])

...

985 **Laparotomy**

30373-00 Exploratory laparotomy

Includes: biopsy

Excludes: that:

- as operative approach – omit code
- performed with any other open intra-abdominal procedure – omit code

30385-00 Postoperative reopening of laparotomy site

▽ 0039

Note: Performed for control of postoperative haemorrhage

Excludes: staged laparotomy to control haemorrhage, with removal of intra-abdominal packing (90375-01, 90375-02 [983])

~~35726-01 — Staging laparotomy~~

~~Biopsy, excision or sampling of:~~

- ~~lymph node~~
 - ~~omentum~~
 - ~~peritoneal tissue~~
- ~~Tissue sampling to establish spread of malignant disease~~

~~Code also when performed:~~

- ~~hysterectomy (35653, 35667 00 [1268], 35667 01 [1269])~~

~~**Excludes:** staging laparotomy for:~~
~~• gynaecological malignancy (35723 [810])~~
~~• lymphoma (30384-00 [985])~~

~~30384-00 Staging laparotomy for lymphoma~~
~~Grading laparotomy for lymphoma~~

~~**Includes:** biopsy of:~~
~~• liver~~
~~• lymph node~~
~~oophorectomy~~
~~splenectomy~~

989

Other excision procedures on abdomen, peritoneum or omentum

Excludes: hysterectomy with retroperitoneal dissection (35667-00 [1268])

...

96189-01 Laparoscopic omentectomy

Laparoscopic:

- epiploectomy
- removal of omentum:
 - complete
 - greater
 - lesser
 - NOS
 - partial

Excludes: biopsy (30075-37 [988])
debulking of lesion:

- intra-abdominal (30392-00 [989])
- pelvic (35720-00 [1299])

~~in staging laparotomy (35726-01 [985])~~

96189-00 Omentectomy

Epiploectomy

Removal of omentum:

- complete
- greater
- lesser
- NOS
- partial

Excludes: biopsy (30075-37[988])
debulking of tumour:

- intra-abdominal (30392-00 [989])
- pelvic (35720-00 [1299])

~~in staging laparotomy (35726-01 [985])~~
via laparoscopy (96189-01 [989])

...

1102

Cystectomy

37000-00 Laparoscopic partial excision of bladder

37000-01 Partial excision of bladder

37014-00 Total excision of bladder

Code also when performed:

- [excision of pelvic lymph nodes, radical \(96245-05 \[806\]\)](#)
- formation of incontinent intestinal urinary reservoir (ileal or colon conduit) (36600-02 [1129])
- hysterectomy (see block [1268])
- ~~pelvic lymph node dissection, radical (90282-02 [811])~~
- radical prostatectomy (37209-00 [1167])
- transplantation of ureter (see blocks [1080] to [1082])
- ureteric reimplantation (see blocks [1084] and [1085])
- urethrectomy (37330 [1118])

1166 **Closed prostatectomy**

Includes: cystoscopy
suprapubic stab cystotomy
urethroscopy

...

37209-01 Laparoscopic radical prostatectomy
Laparoscopic total prostatectomy

Includes: excision of:
• seminal vesicles
• vas deferens

Code also when performed:
• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)
• ~~pelvic lymphadenectomy (90282-02 [811])~~

37210-01 Laparoscopic radical prostatectomy with bladder neck reconstruction
Laparoscopic total prostatectomy with bladder neck reconstruction

Includes: excision of:
• seminal vesicles
• vas deferens

...

1167 **Open prostatectomy**

Includes: suprapubic stab cystotomy

...

37200-04 Retropubic prostatectomy

37209-00 Radical prostatectomy
Total prostatectomy NOS

Includes: excision of:
• seminal vesicles
• vas deferens

Code also when performed:
• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)
• ~~pelvic lymphadenectomy (90282-02 [811])~~

Excludes: laparoscopic radical prostatectomy (37209-01 [1166])

37210-00 Radical prostatectomy with bladder neck reconstruction
Total prostatectomy with bladder neck reconstruction

Includes: excision of:
• seminal vesicles
• vas deferens

Excludes: laparoscopic radical prostatectomy with bladder neck reconstruction (37210-01 [1166])

...

1276 **Excision procedures on cervix**

...

96235-00 Total excision of cervix, laparoscopic

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-01 Total excision of cervix, laparoscopically assisted vaginal approach

Includes: endoscopy

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-02 Total excision of cervix, vaginal approach

Includes: endoscopy

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-03 Total excision of cervix, abdominal approach

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-04 Radical excision of cervix, laparoscopic

Includes: excision of:

- paracolpos
- parametria
- upper 1–2 centimetres of vagina

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-05 Radical excision of cervix, laparoscopically assisted vaginal approach

Includes: endoscopy

excision of:

- paracolpos
- parametria
- upper 1–2 centimetres of vagina

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-06 Radical excision of cervix, vaginal approach

Includes: endoscopy

excision of:

- paracolpos
- parametria
- upper 1–2 centimetres of vagina

Code also when performed:

• [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)

• ~~pelvic lymphadenectomy (35551 [810])~~

96235-07 Radical excision of cervix, abdominal approach

- Includes:** excision of:
- paracolpos
 - parametria
 - upper 1–2 centimetres of vagina

Code also when performed:

- [excision of pelvic lymph nodes \(96244-05, 96245-05 \[806\]\)](#)
- ~~pelvic lymphadenectomy (35551 [810])~~

1292 Vulvectomy

35536-00 Hemivulvectomy
Wide, local excision of vulva

35536-01 Vulvectomy, unilateral

35536-02 Vulvectomy, bilateral

35548-00 Radical vulvectomy

Code also when performed:

- lymph node dissection = (see Alphabetic Index: *Excision/lymphatic structure/lymph node*)

1299 Other procedures on female genital organs

...

35637-10 Laparoscopic excision of lesion of pelvic cavity
Laparoscopic excision of lesion involving:

- pelvic:
 - ligament (broad) (ovarian) (round) (uterosacral)
 - peritoneum
 - pouch of Douglas

- Excludes:** biopsy (30075-37 [988])
debulking of lesion:
 - intra-abdominal (30392-00 [989])
 - pelvic (35720-00 [1299])excision of lesion:
 - fallopian tube (35638-07, 35638-08 [1251])
 - ovary (35638-01 [1243])
 - uterus (35649-01 [1266])excisional diathermy (35637-02 [1299])
~~in staging laparotomy (35726-01 [985])~~
laparoscopic omentectomy (96189-01 [989])

35713-14 Excision of lesion of pelvic cavity
Excision of lesion involving:

- pelvic:
 - ligament (broad) (ovarian) (round) (uterosacral)
 - peritoneum
 - pouch of Douglas

- Excludes:** biopsy (30075-37 [988])
debulking of lesion:
 - intra-abdominal (30392-00 [989])
 - pelvic (35720-00 [1299])excision of lesion:
 - fallopian tube (35713-08, 35717-02 [1251])
 - ovary (35713-06 [1243])
 - uterus (35649-03, 90452-00 [1266])excisional diathermy (35637-02 [1299])
~~in staging laparotomy (35726-01 [985])~~
omentectomy (96189-00 [989])

...

1744 **Excision of lesion of breast**

Includes: localisation of lesion of breast
with or without frozen section biopsy

Code also when performed:

- ~~excision of axillary lymph nodes (30300-00, 30332-00, 30335-00, 30336-00 [808])~~
- [excision of axillary lymph nodes \(96244-02, 96245-02 \[806\]\)](#)

31500-00 **Excision of lesion of breast**
 Advanced breast biopsy instrumentation [ABBI]
[Complete local excision \[CLE\] of breast lesion](#)
[Excisional biopsy of breast lesion](#)
[Local excision \(wide\) of breast lesion](#)

| | |
|---|------------------|
| Complete local excision [CLE] | |
| Excisional biopsy | of breast lesion |
| Local excision (wide) | |
| Lumpectomy | |
| Partial mastectomy | |
| Quadrantectomy | |
| Segmental resection of breast | |
| Segmental resection | of breast |
| Segmentectomy | |
| Tylectomy | |

Excludes: re-excision of lesion of breast (31515-00 [1744])

31515-00 **Re-excision of lesion of breast**
Note: Performed following previous open biopsy or excision if resection margins are not clear

1747 **Subcutaneous mastectomy**
 Excision of breast tissue with preservation of skin and nipple

Includes: that with or without frozen section biopsy

Code also when performed:

- ~~excision of lymph nodes of axilla (30300-00, 30332-00, 30335-00, 30336-00 [808])~~
- [excision of axillary lymph nodes \(96244-02, 96245-02 \[806\]\)](#)
- implant of prosthesis (45527 [1753])
- [sentinel lymph node biopsy or excision \(96243 \[805\]\)](#)

31524-00 Subcutaneous mastectomy, unilateral

31524-01 Subcutaneous mastectomy, bilateral

1748 **Simple mastectomy**
 Total mastectomy

Includes: that with or without frozen section biopsy

Note: Simple mastectomy – involves excision of entire breast tissue and overlying skin with nipple and areola

Code also when performed:

- ~~excision of lymph nodes of axilla (30300-00, 30332-00, 30335-00, 30336-00 [808])~~
- [excision of axillary lymph nodes \(96244-02, 96245-02 \[806\]\)](#)
- [sentinel lymph node biopsy or excision \(96243 \[805\]\)](#)

- 31518-00 Simple mastectomy, unilateral
- 31518-01 Simple mastectomy, bilateral

Alphabetic Index

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

- ...
- intra-abdominal mass (closed) (percutaneous) 30094-06 **[988]**
- ~~— in conjunction with staging laparotomy 35726-01 **[985]**~~
- intranasal (nasopharynx) 41761-00 **[375]**
- ...
- liver (closed) (needle) (percutaneous) 30409-00 **[953]**
- ~~— with grading laparotomy for lymphoma 30384-00 **[985]**~~
- - intraoperative (closed) (needle) (percutaneous) 30412-00 **[953]**
- - - open (wedge excision) 30411-00 **[953]**
- - transjugular 90298-00 **[953]**
- lung (endoscopic) (needle) 38418-06 **[550]**
- ...
- ~~— lymphatic structure (node) 30075-00 **[805]**~~
- ~~— for staging of malignancy 35726-01 **[985]**~~
- ~~— gynaecological~~
- ~~— intra-abdominal (laparoscopic) 35723-00 **[810]**~~
- ~~— via laparotomy 35723-01 **[810]**~~
- ~~— para-aortic (laparoscopic) 35723-02 **[810]**~~
- ~~— via laparotomy 35723-03 **[810]**~~
- ~~— pelvic cavity (laparoscopic) 35723-00 **[810]**~~
- ~~— via laparotomy 35723-01 **[810]**~~
- ~~— retroperitoneal (laparoscopic) 35723-00 **[810]**~~
- ~~— via laparotomy 35723-01 **[810]**~~
- ~~— lymphoma 30384-00 **[985]**~~
- ~~— axilla 30332-00 **[808]**~~
- ~~— sentinel 30300-00 **[808]**~~
- ~~— scalene 30096-00 **[805]**~~
- ~~— sentinel (gynaecological) (inguinal) (mesenteric) (neck) NEC 30300-01 **[805]**~~
- ~~— axilla 30300-00 **[808]**~~
- lymphatic structure (node) NEC — [code to block **\[805\]** with extension -08](#)
- - abdominal — [code to block **\[805\]** with extension -04](#)
- - apical — [code to block **\[805\]** with extension -01](#)
- - axillary — [code to block **\[805\]** with extension -02](#)
- - brachial — [code to block **\[805\]** with extension -07](#)
- - cervical (level I-VI) — [code to block **\[805\]** with extension -01](#)
- - diaphragmatic — [code to block **\[805\]** with extension -03](#)
- - extremity — [code to block **\[805\]** with extension -07](#)
- - femoral — [code to block **\[805\]** with extension -07](#)
- - groin — [code to block **\[805\]** with extension -06](#)
- - head region — [code to block **\[805\]** with extension -00](#)
- - iliac — [code to block **\[805\]** with extension -05](#)
- - inguinal — [code to block **\[805\]** with extension -06](#)
- - inguinofemoral — [code to block **\[805\]** with extension -06](#)
- - intra-abdominal — [code to block **\[805\]** with extension -04](#)
- - intrathoracic — [code to block **\[805\]** with extension -03](#)
- - limb — [code to block **\[805\]** with extension -07](#)
- - mammary, internal — [code to block **\[805\]** with extension -03](#)
- - mediastinal — [code to block **\[805\]** with extension -03](#)
- - mesenteric — [code to block **\[805\]** with extension -04](#)
- - neck — [code to block **\[805\]** with extension -01](#)
- - para-aortic
- - - above diaphragm — [code to block **\[805\]** with extension -03](#)

- - - below diaphragm — [code to block \[805\] with extension -04](#)
- - pelvic — [code to block \[805\] with extension -05](#)
- - popliteal — [code to block \[805\] with extension -07](#)
- - retroperitoneal — [code to block \[805\] with extension -04](#)
- - sacral — [code to block \[805\] with extension -05](#)
- - scalene — [code to block \[805\] with extension -01](#)
- - sentinel 96243 **[805]**
- - thoracic — [code to block \[805\] with extension -03](#)
- - tibial — [code to block \[805\] with extension -07](#)
- - tracheobronchial — [code to block \[805\] with extension -03](#)
- mediastinum (with exploration)

- ...
- mesentery (open) 30075-37 **[988]**
- ~~— in conjunction with staging laparotomy 35726-01 **[985]**~~
- mouth NEC 30075-23 **[402]**
- ...
- omentum (open) 30075-37 **[988]**
- ~~— in conjunction with staging laparotomy 35726-01 **[985]**~~
- orbit 42533-01 **[224]**
- ...
- peritoneum (open) 30075-37 **[988]**
- ~~— in conjunction with staging laparotomy 35726-01 **[985]**~~
- periurethral (closed) (endoscopic) 37318-04 **[1117]**
- ...

Clearance

- ...
- lymph nodes — see [Excision/lymphatic structure lymph node/by site/radical](#)
- ...

Dissection

- aneurysm — see [Ligation/aneurysm](#)
- artery — see [Ligation/artery](#)
- lymph node — see [Excision/lymphatic structure lymph node/by site](#)
- nerve — see also [Division/nerve](#)
- ...

Excision — see also Removal

- ...
- lung (total removal of lung) 38438-02 **[553]**
- ...
- - radical (with dissection of mediastinal nodes) 38441-01 **[553]**
- ~~— lymph node~~
- ~~— axilla (simple) (single) (total) 30332-00 **[808]**~~
- ~~— level I (low) 30335-00 **[808]**~~
- ~~— level II (mid) 30336-00 **[808]**~~
- ~~— level III (high) 30336-00 **[808]**~~
- ~~— radical (complete) 30336-00 **[808]**~~
- ~~— regional (limited) 30335-00 **[808]**~~
- ~~— sentinel 30300-00 **[808]**~~
- ~~— cervical — see [Excision/lymph node/neck](#)~~
- ~~— groin (simple) (total) 30329-00 **[809]**~~
- ~~— radical (complete) 30330-00 **[809]**~~
- ~~— regional (limited) 30329-01 **[809]**~~
- ~~— iliac — see [Excision/lymph node/pelvis](#)~~
- ~~— inguinal — see [Excision/lymph node/groin](#)~~
- ~~— intra-abdominal (simple) (total) NEC 90282-00 **[811]**~~
- ~~— for staging of malignancy 35726-01 **[985]**~~
- ~~— gynaecological (laparoscopic) 35723-00 **[810]**~~
- ~~— via laparotomy 35723-01 **[810]**~~
- ~~— lymphoma 30384-00 **[985]**~~
- ~~— radical (complete) 37607-00 **[811]**~~
- ~~— following (subsequent to)~~
- ~~— chemotherapy 37610-00 **[811]**~~
- ~~— previous retroperitoneal lymph node dissection 37610-00 **[811]**~~
- ~~— retroperitoneal irradiation 37610-00 **[811]**~~
- ~~— regional (limited) 90282-01 **[811]**~~
- ~~— mammary, internal 30075-11 **[807]**~~
- ~~— mediastinal (simple) (total) 90282-00 **[811]**~~
- ~~— with radical~~

~~lobectomy, lung 38441-00 [552]~~
~~pneumonectomy 38441-01 [553]~~
~~radical (complete) 90282-02 [811]~~
~~regional (limited) 90282-01 [811]~~
~~neck (cervical) (simple) (total) 31423-00 [806]~~
~~radical (complete) 31435-00 [806]~~
~~with excision of intraoral tumour (with resection of mandible) 30275-00 [403]~~
~~regional (limited) 31423-01 [806]~~
~~para-aortic (simple) (total) 90282-00 [811]~~
~~for staging of malignancy 35726-01 [985]~~

~~gynaecological (laparoscopic) 35723-02 [810]~~
~~via laparotomy 35723-03 [810]~~
~~lymphoma 30384-00 [985]~~
~~radical (complete) 37607-00 [811]~~
~~following (subsequent to)~~
~~chemotherapy 37610-00 [811]~~
~~previous retroperitoneal lymph node dissection 37610-00 [811]~~
~~retroperitoneal irradiation 37610-00 [811]~~
~~regional (limited) 90282-01 [811]~~
~~pelvic~~
~~for staging of malignancy 35726-01 [985]~~
~~gynaecological (laparoscopic) 35723-00 [810]~~
~~via laparotomy 35723-01 [810]~~
~~lymphoma 30384-00 [985]~~
~~radical (complete) 90282-02 [811]~~
~~for gynaecological malignancy (laparoscopic) 35551-00 [810]~~
~~via laparotomy 35551-01 [810]~~
~~with~~
~~hysterectomy~~
~~abdominal (subtotal) (total) 35670-00 [1268]~~
~~radical 35664-00 [1268]~~
~~vaginal, radical 35664-01 [1269]~~
~~prostatectomy, radical and bladder neck reconstruction 37211-00 [1167]~~
~~regional (limited) 90282-01 [811]~~
~~simple (total) 90282-00 [811]~~
~~peri-aortic — see *Excision/lymph node/retroperitoneal*~~
~~retroperitoneal (simple) (total) NEC 90282-00 [811]~~
~~for staging of malignancy 35726-01 [985]~~
~~gynaecological (laparoscopic) 35723-00 [810]~~
~~via laparotomy 35723-01 [810]~~
~~lymphoma 30384-00 [985]~~
~~radical (complete) 37607-00 [811]~~
~~with~~
~~abdominal hysterectomy (subtotal) (total) 35661-00 [1268]~~
~~excision of retroperitoneal neuro-endocrine lesion (tumour) 30323-00 [989]~~
~~radical nephrectomy (en bloc) (open) 36528-01 [1053]~~
~~complicated by previous surgery on same kidney 36529-00 [1053]~~
~~via laparoscopy 36528-00 [1053]~~
~~following (subsequent to)~~
~~chemotherapy 37610-00 [811]~~
~~previous retroperitoneal lymph node dissection 37610-00 [811]~~
~~retroperitoneal irradiation 37610-00 [811]~~
~~regional (limited) 90282-01 [811]~~

~~sentinel (gynaecological) (inguinal) (mesenteric) (neck) NEC 30300-01 [805]~~
~~axilla 30300-00 [808]~~
~~specified site (simple) (total) NEC 90282-00 [811]~~
~~radical (complete) 90282-02 [811]~~
~~lymphatic structure (node) NEC — code to block [806] with extension -08~~
~~abdominal (limited) (regional) (simple) (total) 96244-04 [806]~~
~~radical (complete) 96245-04 [806]~~
~~apical (limited) (simple) (total) (regional) 96244-02 [806]~~
~~radical (complete) 96245-02 [806]~~
~~axillary (limited) (regional) (simple) (total) 96244-02 [806]~~
~~level I 96244-02 [806]~~
~~level II 96245-02 [806]~~
~~level III 96245-02 [806]~~
~~radical (complete) 96245-02 [806]~~
~~brachial (limited) (regional) (simple) (total) 96244-07 [806]~~
~~radical (complete) 96245-07 [806]~~

- - cervical (limited) (regional) (simple) (total) 96244-01 [806]
- - - radical (complete) 96245-01 [806]
- - diaphragmatic (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- - extremity (limited) (regional) (simple) (total) 96244-07 [806]
- - - radical (complete) 96245-07 [806]
- - femoral (limited) (regional) (simple) (total) 96244-07 [806]
- - - radical (complete) 96245-07 [806]
- - groin (limited) (regional) (simple) (total) 96244-06 [806]
- - - radical (complete) 96245-06 [806]
- - head region (limited) (regional) (simple) (total) 96244-00 [806]
- - - radical (complete) 96245-00 [806]
- - iliac (limited) (regional) (simple) (total) 96244-05 [806]
- - - radical (complete) 96245-05 [806]
- - inguinal (limited) (regional) (simple) (total) 96244-06 [806]
- - - radical (complete) 96245-06 [806]
- - inguinofemoral (limited) (regional) (simple) (total) 96244-06 [806]
- - - radical (complete) 96245-06 [806]
- - intra-abdominal (limited) (regional) (simple) (total) 96244-04 [806]
- - - radical (complete) 96245-04 [806]
- - intrathoracic (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- - mammary, internal (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- - mediastinal (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- - mesenteric (limited) (regional) (simple) (total) 96244-04 [806]
- - - radical (complete) 96245-04 [806]
- - neck (limited) (regional) (simple) (total) 96244-01 [806]
- - - radical (complete) 96245-01 [806]
- - para-aortic
- - - above diaphragm (limited) (regional) (simple) (total) 96244-03 [806]
- - - - radical (complete) 96245-03 [806]
- - - below diaphragm (limited) (regional) (simple) (total) 96244-04 [806]
- - - - radical (complete) 96245-04 [806]
- - pelvic (limited) (regional) (simple) (total) 96244-05 [806]
- - - radical (complete) 96245-05 [806]
- - popliteal (limited) (regional) (simple) (total) 96244-07 [806]
- - - radical (complete) 96245-07 [806]
- - retroperitoneal (limited) (regional) (simple) (total) 96244-04 [806]
- - - radical (complete) 96245-04 [806]
- - sacral (limited) (regional) (simple) (total) 96244-05 [806]
- - - radical (complete) 96245-05 [806]
- - scalene (limited) (simple) (total) (regional) 96244-01 [806]
- - - radical (complete) 96245-01 [806]
- - sentinel 96243 [805]
- - thoracic (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- - tibial (limited) (regional) (simple) (total) 96244-07 [806]
- - - radical (complete) 96245-07 [806]
- - tracheobronchial (limited) (regional) (simple) (total) 96244-03 [806]
- - - radical (complete) 96245-03 [806]
- lymphangiectasis — see *Excision/lymphoedematous tissue*
- lymphangioma — see *Excision/vascular/anomaly*

...

Laparoscopy (diagnostic) (exploratory) 30390-00 [984]

- ~~— for staging of gynaecological malignancy~~
- ~~— with lymph node sampling (biopsy) (excision)~~
- ~~— intra-abdominal 35723-00 [810]~~
- ~~— para-aortic 35723-02 [810]~~
- ~~— pelvic 35723-00 [810]~~
- ~~— retroperitoneal 35723-00 [810]~~
- procedure proceeding to open procedure 90343-01 [1011]

Laparotomy

- as operative approach — *omit code*
- for
- - control of postoperative haemorrhage 30385-00 [985]
- ~~— grading of lymphoma 30384-00 [985]~~

- ~~— staging of malignancy — see Laparotomy/staging, for malignancy~~
- with endoscopic examination of large intestine 30375-23 [907]
- exploratory (with biopsy) 30373-00 [985]
- ~~— performed with any other open intra-abdominal procedure — omit code~~
- grading ~~— see Laparotomy/staging, for malignancy — code specific procedure(s) performed~~
- reopening of recent operative site (for control of haemorrhage) (see also Packing/intra-abdominal) 30385-00 [985]

- staging, for malignancy 35726-01 [985] — code specific procedure(s) performed
- ~~— gynaecological~~
- ~~— with lymph node sampling (biopsy) (excision)~~
- ~~— intra-abdominal NEC 35723-01 [810]~~
- ~~— para-aortic 35723-03 [810]~~
- ~~— pelvic 35723-01 [810]~~
- ~~— retroperitoneal NEC 35723-01 [810]~~
- ~~— lymphoma 30384-00 [985]~~

Laryngectomy

Lymphadenectomy — see Excision/[lymphatic structure](#)~~lymph node~~

Mastectomy

- modified radical — see Mastectomy/simple AND Excision/[lymphatic structure](#)~~lymph node~~/axilla
- partial 31500-00 [1744]
- - following previous open biopsy or excision 31515-00 [1744]
- simple (unilateral) 31518-00 [1748]
- - bilateral 31518-01 [1748]
- - extended — see Mastectomy/simple AND Excision/[lymphatic structure](#)~~lymph node~~/axilla
- subcutaneous (unilateral) 31524-00 [1747]
- - bilateral 31524-01 [1747]
- total — see Mastectomy/simple

Omentectomy (open) 96189-00 [989]

- with debulking of lesion (tumour)
- - intra-abdominal 30392-00 [989]
- - pelvic cavity, female 35720-00 [1299]
- ~~— in staging laparotomy 35726-01 [985]~~
- via laparoscopy 96189-01 [989]

Omentoplasty

Oophoropexy (laparoscopic) 35729-00 [1245]

- with transposition of ovary 35729-00 [1245]
- via laparotomy 35729-01 [1245]
- ~~— with~~
- ~~— grading laparotomy for lymphoma 30384-00 [985]~~
- ~~— transposition of ovary 35729-01 [1245]~~

Oophorotomy (laparoscopic) 35637-07 [1241]

Resection — see also Excision

- ...
- lung (total removal of lung) 38438-02 [553]
- ...
- lymph node — see Excision/[lymphatic structure](#)~~node~~
- mandible — see Resection/bone/mandible
- ...

Sampling

- ...
- fetal blood 16606-00 [1330]
- [lymphatic structure \(node\)](#) — see also Biopsy/[lymphatic structure](#)
- - for staging of malignancy 35726-01 [985] — code specific procedure(s) performed
- ~~— gynaecological~~
- ~~— intra-abdominal (laparoscopic) 35723-00 [810]~~
- ~~— via laparotomy 35723-01 [810]~~
- ~~— para-aortic (laparoscopic) 35723-02 [810]~~
- ~~— via laparotomy 35723-03 [810]~~
- ~~— pelvic cavity (laparoscopic) 35723-00 [810]~~
- ~~— via laparotomy 35723-01 [810]~~
- ~~— retroperitoneal (laparoscopic) 35723-00 [810]~~
- ~~— via laparotomy 35723-01 [810]~~
- ~~— lymphoma 30384-00 [985]~~

~~axillary 30332-00 [808]~~
~~omentum~~
~~in staging laparotomy 35726-01 [985]~~
~~peritoneum~~
~~in staging laparotomy 35726-01 [985]~~
- petrosal sinus 13839-01 [1858]
Scalenotomy 34133-00 [1374]

Splenectomy (by thoracoabdominal incision) (total) 30597-00 [815]
- for accessory spleen 30375-21 [817]
- with
- - gastrectomy
- - - radical 30524-00 [879]
- - - subtotal 30523-00 [879]
- - - total (with anastomosis) 30521-00 [879]
~~grading laparotomy for lymphoma 30384-00 [985]~~
- - pancreatectomy 30593-01 [978]
- laparoscopic 31470-00 [815]
- partial 30596-00 [815]
Splenorrhaphy 30596-01 [816]

Australian Coding Standards

TABLE OF CONTENTS

GENERAL STANDARDS FOR INTERVENTIONS

- 0016 General procedure guidelines
- 0019 Procedure not completed or interrupted
- 0020 Bilateral/multiple procedures
- 0022 Examination under anaesthesia
- 0023 Laparoscopic/arthroscopic/endoscopic surgery
- 0024 Panendoscopy
- ~~0028 Para-aortic lymph node biopsy~~
- 0029 Coding of contracted procedures
- 0030 Organ and tissue procurement and transplantation

...

~~0028~~ ~~PARA-AORTIC LYMPH NODE BIOPSY~~

~~Care should be taken when coding this procedure. If 'para-aortic node biopsy' is documented, check the operation report as this term may describe a more extensive procedure such as:~~

- ~~1. A procedure performed by urologists, following treatment for germ cell tumours of the testis. The posterior parietal peritoneum is opened between the bifurcation of the aorta up~~

to the third part of the duodenum and all the fat tissue above and between the great vessels is removed. In addition, the major vessels are retracted so that nodal tissue is also removed from around the lumbar veins. This procedure can take up to one hour to perform.

~~— This procedure should be coded as 37607-00 [811] *Radical excision of retroperitoneal lymph nodes.*~~

~~2. A less extensive procedure of para-aortic node sampling. This is usually undertaken by gynaecological oncologists for the staging of cervical, endometrial and ovarian cancers. Again, the posterior parietal peritoneum is split from the aortic bifurcation to the duodenum, but usually the fat pad over the vena cava (which includes the lymph nodes) and aorta anteriorly is taken alone, without a retrovessel dissection being undertaken. This procedure does not involve removal of skin and may or may not involve excision of subcutaneous tissue.~~

~~— This procedure should be coded according to the approach:~~

~~— 35723-02 [810] — *Laparoscopic para-aortic lymph node sampling for staging of gynaecological malignancy*~~

~~— 35723-03 [810] — *Para-aortic lymph node sampling for staging of gynaecological malignancy*~~

STANDARDS INDEX

Bilateral/multiple procedures 0020

Biopsy

~~—lymph node~~

~~—para-aortic-0028~~

BiPAP (bi-level positive airway pressure) 1006

...

Lesion(s)

- Bankart 1353

- disc, intervertebral 1308

~~—germ cell, of testis-0028~~

- intracranial, brain 0629

- number of 0038

- skin

- - multiple excisions 0020

- SLAP (superior labrum anterior-posterior) 1354

- spinal cord 0625; 1915

- superior labrum anterior-posterior (SLAP) 1354

...

Lymphangitis

...

Lymph node

~~—para-aortic~~

~~—biopsy-of-0028~~

Lymphoma (extranodal) 0222

...

Panendoscopy 0024

~~Para-aortic lymph node biopsy 0028~~

Paraplegia 0625; 1915

...

Same-day

...

Sampling

~~-para-aortic node 0028~~

Sarcoma

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

MBS Item review including Appendix A Amendments

Introduction/Rationale:

This Addenda proposal is the result of MBS Item number amendments (new, amended or deleted) from August 2015 to December 2017.

Note: It was agreed at the Coding Standards Advisory Committee meeting in September 2006 that NCCH (now as part of the ACCD) will maintain an existing ACHI code when MBS deletes an item number or when item description changes if the change does not alter the ACHI concept.

Whilst progressing this task, inconsistencies within the Alphabetic Index were identified and are now proposed for amendment (in specific regard to *Arrest/haemorrhage* and *Control/haemorrhage*).

ACCD PROPOSAL

Tabular List

603 Repair procedures on atrium

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])

~~96219-00~~[38276-00](#) Percutaneous closure of left atrial appendage

Includes: cardiac catheterisation

- left atrial:
 - filter
 - occlusion device

96220-00 Closure of left atrial appendage

Includes: clipping
excision
ligation
oversewing
plication
stapling

...

702 Arterial embolectomy or thrombectomy

Includes: that with stenting
transcatheter infusion of thrombolytic or other agent

Excludes: embolectomy or thrombectomy of arterial bypass graft:
• extremities (33806-12 [703])
• trunk (33803-02 [703])

~~90235-00~~[35414-00](#) Embolectomy or thrombectomy of intracranial artery
Transcatheter embolectomy or thrombectomy of intracranial artery

33800-00 Embolectomy or thrombectomy of carotid artery

Excludes: intracranial internal carotid artery (~~90235-00~~[35414-00](#) [702])

33803-00 Embolectomy or thrombectomy of subclavian artery

...

729 Venous thrombectomy

Includes: that with stenting
transcatheter infusion of thrombolytic or other agent

~~90235-01~~[35414-01](#) Thrombectomy of intracranial vein
Transcatheter thrombectomy of intracranial vein

33812-03 Thrombectomy of axillary vein

...

917 Other repair of large intestine

...

90340-01 Closure of fistula of large intestine

Includes: rectum

Excludes: enterocutaneous fistula of large intestine (30382 [917])
repair of anorectal fistula with fibrin sealant (~~90344-02~~[44104-00](#) [929])

...

929 Application, insertion or removal procedures on rectum or anus

~~90344-02~~[44104-00](#) Administration of agent into lesion or tissue of anorectal region

Includes: anal/anorectal plug
application of formalin
botulinum toxin
biological (fibrin) sealant
sclerosing agent (sclerotherapy)

Note: Performed for:
• anal fissure
• anal/anorectal fistula (plug)
• faecal incontinence
• radiation proctitis
• rectal ~~mucosal~~ prolapse

Excludes: repair of fistula of:
• anovagina (90447-00 [1284])
• rectovagina (90447-00 [1284])
that for haemorrhoids (32132-00 [941])

32120-00 Insertion of anal suture for anorectal prolapse
Insertion of Thiersch wire for anorectal prolapse

...

934 Rectosigmoidectomy or proctectomy

...

43993-01 Definitive intestinal resection and pull-through anastomosis

~~Duhamel retrorectal~~

~~Soave endorectal~~

[Duhamel retrorectal pull-through procedure](#)

[Soave endorectal pull-through procedure](#)

~~pull-through procedure~~

Includes: closure of existing stoma
formation of stoma (defunctioning) (diverting) (protective) (temporary)
multiple frozen section biopsies
[resiting of existing stoma](#)

Note: Performed for Hirschsprung's disease [colonic aganglionosis] [congenital megacolon]. There are a number of pull-through techniques - the most common are the Duhamel and Soave procedures. The Duhamel procedure (and modifications) is a retrorectal pull-through with a side-to-side anastomosis. The anastomosis forms a rectal vault composed of an aganglionic anterior wall and a normally ganglionated posterior wall.

The Soave procedure (and modifications) involves resection of the aganglionic bowel, with the exception of the most distal rectum where only the mucosa is removed. The mucosa of the rectum is removed through the anus and the ganglionic colon is 'pulled through' the remaining cuff of rectal muscle to a point just above the anus (dentate line) where it is sewn into place. In some cases of total colonic aganglionosis the intestinal resection may extend to the ileum and involve an ileo-anal pull-through procedure with side-to-side ileocolic anastomosis.

This procedure may be performed in one stage. It may also be the second stage of a two stage procedure, where the first stage procedure performed was a colostomy (sometimes termed a 'levelling' colostomy).

Excludes: restorative proctocolectomy with ileal reservoir (32051 [936])

...

956 Other procedures on liver

~~90299-01~~[50950-01](#) Endoscopic destruction procedures on liver
Endoscopic destruction of (lesion) (tissue) liver

~~90299-02~~[50950-02](#) Other closed destruction procedures on liver
Percutaneous destruction procedures on liver

~~90299-00~~[50950-03](#) Destruction procedures on liver

Excludes: destruction of (lesion) (tissue) liver:
• endoscopic ([50950-01](#)~~90299-01~~ [956])
• percutaneous ([50950-02](#)~~90299-02~~ [956])

90319-03 Other endoscopic procedures on liver

90319-04 Other closed procedures on liver
Percutaneous procedures on liver NEC

90319-00 Other open procedures on liver

...

1362 Exploration of temporomandibular joint

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
microsurgical techniques

[removal of loose or foreign body](#)

45861-00 Exploration of temporomandibular joint

...

1395 Incision procedures on shoulder

...

48912-00 Arthrotomy of shoulder

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
removal of loose or foreign body

...

1410 Incision procedures on humerus or elbow

...

49100-00 Arthrotomy of elbow

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)

...

1442 Incision procedures on joint of hand

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
[removal of loose or foreign body](#)

46327-00 Arthrotomy of interphalangeal joint of hand

46327-01 Arthrotomy of metacarpophalangeal joint

...

1443 Incision procedures on wrist

...

49212-00 Arthrotomy of wrist

~~Removal of loose or foreign body of wrist~~

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
[removal of loose or foreign body](#)

...

1481 Other incision of hip

...

49303-00 Arthrotomy of hip

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
removal of loose [or foreign](#) body

Excludes: arthroscopic biopsy (49363-00 [1482])

...

1501 Other incision procedures on knee

...

49500-01 Arthrotomy of knee

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)

...

1529 Other incision procedures on ankle

...

49706-00 Arthrotomy of ankle

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)

...

1555 Incision procedures on joint of other musculoskeletal sites

...

50103-00 Arthrotomy of joint, not elsewhere classified

Includes: [biopsy](#)
[drainage of joint](#)
[lavage](#)
[removal of loose or foreign body](#)

50112-00 Division of joint contracture, not elsewhere classified
Correction of flexion or extension contracture of joint NOS

1666 Liposuction and lipectomy

Reduction of adipose tissue
Size reduction

...

30168-00 Lipectomy, 1 excision

~~Lipectomy, one site~~

Excludes: that of abdominal apron (30165-00, ~~30174-00~~, 30177-00 [1666])

30171-00 Lipectomy, 2 or more excisions

[V.0020](#)

~~Lipectomy:~~
~~• bilateral~~
~~• multiple sites~~

30165-00 Lipectomy of abdominal apron

Abdominal lipectomy-~~NOS~~;
• [NOS](#)
• [subumbilical](#)

Includes: [strengthening of musculo-aponeurotic wall](#)
[undermining of skin edges](#)

Excludes: radical (30177-00 [1666])
[liposuction \(45584-00 \[1666\]\)](#)

~~30174-00~~ ~~Lipectomy of abdominal apron, subumbilical~~

~~*Includes:* strengthening of musculo-aponeurotic wall
undermining of skin edges~~

30177-00 Lipectomy of abdominal apron, radical

Abdominoplasty:

- Pitanguy
- radical

Includes: excision of skin and subcutaneous tissue
repair of musculo-aponeurotic layer
transposition of umbilicus

....

1843 Other audiometry

~~11321-00~~ ~~Measurement of glycerol induced cochlear function changes~~
~~Klockoff's tests~~

11306-00 Other audiometry

...

1849 Other measurement of respiratory function

...

11503-19 Simulated altitude test

Includes: exposure to hypoxic gas mixtures
measurement of:
• heart rate
• oxygen saturation
• ventilation
observation of effect of supplemental oxygen

~~11500-00~~ ~~Bronchspirometry~~

~~*Includes:* gas analysis~~

11506-00 Other measurement of respiratory function

~~Respiratory function test~~

~~Spirometry~~

~~Respiratory function test NOS~~

~~Spirometry NOS~~

...

1859 Digestive system diagnostic tests, measures or investigations

Excludes: gastrointestinal nonimaging nuclear medicine procedures (12506-00, 12509-00 [1863])

11800-00 Oesophageal motility test
Manometric oesophageal motility test

11810-00 Measurement of gastro-oesophageal reflux involving \geq 24 hour pH monitoring

Includes: analysis
interpretation
report

Excludes: that with < 24 hour pH monitoring – omit code

11830-00 Anal manometry

Note: Performed for diagnosis of abnormality of pelvic floor

...

~~30493-00 Biliary manometry~~

...

1865 Epicutaneous patch allergy testing

Note: Performed for investigation of allergic dermatitis

~~12012-00 Epicutaneous patch testing using less than the total number of allergens in a standard patch test battery~~

~~12015-00 Epicutaneous patch testing using all the allergens in standard patch test battery~~

~~*Excludes:* that with additional allergens (12018-00, 12021-00 [1865])~~

~~12018-00 Epicutaneous patch testing using \leq 50 allergens~~

~~*Includes:* all allergens in standard patch test battery and additional allergens to a total of \leq 50~~

~~12021-00 Epicutaneous patch testing using \geq 51 allergens~~

~~*Includes:* all allergens in standard patch test battery and additional allergens to a total of \geq 51~~

[12012-01 Epicutaneous patch testing using < 25 allergens](#)

[12017-00 Epicutaneous patch testing using 25 to < 50 allergens](#)

[12021-01 Epicutaneous patch testing using 50 to < 75 allergens](#)

[12022-00 Epicutaneous patch testing using 75 to < 100 allergens](#)

[12024-00 Epicutaneous patch testing using \$\geq\$ 100 allergens](#)

...

1880 Therapies using agents, not elsewhere classified

...

22065-00 Cold therapy

▼ 1615

Cold therapy involves the application of cold in the therapeutic treatment of disease or injury. Hypothermia may be induced by ice packs or compresses, cooling blankets, immersion in cold water (bath or tub) or by extracorporeal cooling of the blood. Hypothermia may also be induced as a protective measure in certain cardiovascular and neurological surgical procedures or as an adjunct to anaesthesia in surgical procedures involving a limb

Hypothermic therapy (therapeutic hypothermia)
Total body hypothermia

Excludes: cryotherapeutic destruction of tissue (see Alphabetic Index: Cryotherapy/by site)
deep hypothermia (22075-00 [642])
~~gastric hypothermia (13500-00 [1899])~~
hypothermic therapy in conjunction with cardiac or circulatory arrest (22075-00 [642])
that performed in conjunction with surgery – omit code

...

1899 Other therapeutic interventions on digestive system

~~13500-00 Gastric hypothermia
Gastric cooling~~

~~**Includes:** closed circuit circulation of refrigerant
Note: Performed for gastrointestinal haemorrhage~~

13506-00 Gastro-oesophageal balloon tamponade

...

1951 Tomography

60100-00 Tomography

Excludes: computerised tomography
(see blocks [1952] to [1966])
that with: [intravenous pyelography \(58706-00 \[1978\]\)](#)
~~• cholecystography (58924-00 [1976])~~
~~• intravenous pyelography (58706-00 [1978])~~

...

1976 Radiography of biliary tract

Excludes: intraoperative cholangiography (30439-00 [957])
noncontrast radiography of abdomen (58900-00 [1977])

~~58924-00 Cholecystography
Graham's test~~

~~**Includes:** preliminary plain film
tomography~~

58927-00 Direct cholangiography, postoperative
Cholangiography with dye injected directly into a tube left in biliary tract after surgery

58936-00 Drip infusion cholangiography
Cholangiography NOS
Intravenous cholangiography

1977 Radiography of abdomen ~~or peritoneum~~

58900-00 Radiography of abdomen

Includes: biliary tract
lower gastrointestinal region
[peritoneum](#)
retroperitoneum
stomach

Excludes: that of urinary tract (58700-00 [1980])

~~59760-00 Peritoneography
Herniography~~

~~*Includes:* contrast medium~~

...

1981 Radiography of pelvis

...

57715-00 Radiography of pelvis
Radiography of pelvic girdle

Excludes: radiographic pelvimetry (59503-00 [1981])

~~59503-00 Radiographic pelvimetry~~

~~*Excludes:* pelvimetry by computerised tomography (57201-00 [1964])~~

...

Appendix A

MAPPING TABLE FOR MBS ITEMS NOT INCLUDED IN ACHI

~~This appendix is designed to indicate MBS items that have been mapped to ACHI codes.~~

~~Column 1 represents MBS items as at July 2015 (excluding ophthalmology item updates).
Column 2 represents the ACHI code which is the 'best match' for the MBS item in Column 1.~~

~~Note that there are MBS concepts which are not utilised in the ACHI structure, eg consultations, home visits (items 1-10999).~~

~~This is indicated by 'no ACHI map' in Column 2.~~

~~Appendix B lists all ACHI codes some of which contain inactive MBS items.~~

[Appendix A lists MBS items that have been mapped to ACHI codes, including those deleted in MBS.](#)

Note:

- [This is not an exhaustive list of all MBS item numbers](#)
- [Not all MBS items are mapped to ACHI codes](#)
- [MBS concepts that are not classified in ACHI, eg consultations, home visits, pathology and miscellaneous services; are indicated by the notation 'no ACHI map' in Column 2.](#)

In Appendix A:

[Column 1 represents MBS items as at December 2017.](#)

[Column 2 represents the ACHI code, which is the 'best match' for the MBS item in Column 1.](#)

Amendment

11203 inactive '12

11237 no ACHI map

30187 30186

30649 30663 inactive '16

Means

This MBS item was inactivated in 2012

This MBS item has no equivalent concept in ACHI

This MBS item (ie 30187) is mapped to an ACHI code(s) beginning with the MBS Item in Column 2 (ie 30186)

This MBS item (ie 30649) is mapped to a retired MBS item that is still in use in ACHI (ie codes beginning with 30663)

| MBS Item | ACHI Code Map |
|-----------------|--------------------------------------|
| 1 - 10999 | no ACHI map |
| ... | |
| 11318 | 11315 |
| <u>11321</u> | <u>11306</u> |
| 11327 | 11324 |
| 11330 | 11324 |
| <u>11500</u> | <u>11506</u> |
| 11509 | 11506 |
| 11601 | inactive '02 |
| 11627 | 11600 |
| 11701 | 11700 |
| 11702 | 11700 |
| <u>11719</u> | <u>11718</u> |
| <u>11720</u> | <u>11718</u> |
| <u>11725</u> | <u>11727</u> |
| <u>11801</u> | <u>11810</u> |
| 11823 | 11820 |
| <u>12015</u> | <u>inactive '16</u> |
| <u>12018</u> | <u>inactive '16</u> |
| 12200 | no ACHI map |
| ... | |
| 12318 | 42309 <u>inactive '17</u> |
| <u>12320</u> | <u>12306</u> |
| 12321 | 12306 |
| <u>12322</u> | <u>12306</u> |
| 12323 | 42306 <u>inactive '17</u> |
| 12324 | inactive '97 |
| ... | |
| 13318 | 13815 |
| <u>13500</u> | <u>inactive '16</u> |
| 13503 | 43500 <u>inactive '16</u> |
| 13600 | inactive '01 |
| ... | |
| 30006 | 30014 |
| 30009 | 30040 <u>inactive '17</u> |
| 30013 | 30044 <u>inactive '17</u> |
| 30024 | 30023 |
| 30038 | 30026 |
| 30041 | 30029 <u>inactive '17</u> |
| 30045 | 30032 |
| 30048 | 30035 <u>inactive '17</u> |
| 30049 | 30035 |
| 30067 | 30068 <u>inactive '17</u> |
| 30074 | 30075 <u>inactive '17</u> |

| | |
|-----------------------|--|
| 30078 | 30075 |
| 30090 | 38418 |
| 30102 | 30403 inactive '17 |
| 30105 | 30104 |
| 30106 | 30407 inactive '17 |
| 30110 | 30414 inactive '17 |
| 30172 | 30171 |
| 30174 | 30165 inactive '16 |
| 30176 | 30177 |
| 30179 | 30168 |
| 30187 | 30186 |
| ... | |
| 30251 | 30250 |
| 30265 | 30266 inactive '17 |
| 30282 | 30283 inactive '17 |
| 30287 | 30286 |
| 30299 | 30300 |
| 30302 | 30300 |
| 30303 | 30300 |
| 30309 | 30308 |
| 30318 | 38448 |
| 30324 | 36500 |
| 30325 | inactive '98 |
| 30326 | 30314 |
| 30328 | inactive '98 |
| ... | |
| 30488 | 30487 |
| 30493 | inactive '17 |
| 30506 | 30505 |
| ... | |
| 30599 | 30597 |
| 30608 | 30566 |
| 30611 | 31350 |
| 30612 | 30614 inactive '15 |
| 30616 | 30617 inactive '15 |
| 30618 | 31423 |
| 30619 | 31470 |
| 30620 | 30617 inactive '17 |
| 30622 | 30375 |
| 30623 | 30378 |
| 30626 | 30378 |
| 30627 | 30390 |
| 30634 | 30635 inactive '17 |
| 30636 | 30483 |
| 30637 | 30562 |
| 30638 | 30644 inactive '17 |
| 30639 | 30563 |
| 30640 | 30615 |
| 30642 | 30641 |
| 30643 | 30644 |
| 30645 | 30571 |
| 30646 | 30572 |
| 30649 | 30663 inactive '16 |
| 30654 | 30653 |
| 30656 | 30653 inactive '16 |
| 30658 | 30653 |
| 30659 | 30653 inactive '16 |
| 30660 | 30653 inactive '16 |

| | |
|-----------------------|---|
| 30675 | 30676 inactive '17 |
| 30680 | 30473 |
| ... | |
| 31001 | 31000 |
| 31002 | 31000 |
| 31200 | 31205 inactive '16 |
| 31205 | inactive '16 |
| 31206 | 31205 inactive '16 |
| 31210 | 31205 inactive '16 |
| 31211 | 31205 inactive '16 |
| 31215 | 31205 inactive '16 |
| 31216 | 31205 inactive '16 |
| 31220 | 31205 inactive '16 |
| 31221 | 31205 inactive '16 |
| 31225 | 31205 inactive '16 |
| 31230 | inactive '16 |
| 31235 | inactive '16 |
| 31240 | 31235 inactive '16 |
| 31250 | 31205 inactive '16 |
| 31255 | 31230 inactive '16 |
| 31256 | 31230 inactive '16 |
| 31257 | 31230 inactive '16 |
| 31258 | 31230 inactive '16 |
| 31260 | 31230 inactive '16 |
| 31261 | 31230 inactive '16 |
| 31262 | 31230 inactive '16 |
| 31263 | 31230 inactive '16 |
| 31265 | 31235 inactive '16 |
| 31266 | 31235 inactive '16 |
| 31267 | 31235 inactive '16 |
| 31268 | 31235 inactive '16 |
| 31270 | 31235 inactive '16 |
| 31271 | 31235 inactive '16 |
| 31272 | 31235 inactive '16 |
| 31273 | 31235 inactive '16 |
| 31275 | 31235 inactive '16 |
| 31276 | 31235 inactive '16 |
| 31277 | 31235 inactive '16 |
| 31278 | 31235 inactive '16 |
| 31280 | 31205 inactive '16 |
| 31281 | 31205 inactive '16 |
| 31282 | 31205 inactive '16 |
| 31283 | 31205 inactive '16 |
| 31285 | 31205 inactive '16 |
| 31286 | 31205 inactive '16 |
| 31287 | 31205 inactive '16 |
| 31288 | 31205 inactive '16 |
| 31290 | 31205 inactive '16 |
| 31291 | 31205 inactive '16 |
| 31292 | 31205 inactive '16 |
| 31293 | 31205 inactive '16 |
| 31295 | 31235 inactive '16 |
| 31300 | 31230 inactive '16 |
| 31305 | 31230 inactive '16 |
| 31310 | 31235 inactive '16 |
| 31315 | 31235 inactive '16 |
| 31320 | 31235 inactive '16 |
| 31325 | 31205 inactive '16 |

31330 ~~31205~~inactive '16
 31335 ~~31205~~inactive '16
 31345 ~~31230~~inactive '16
 31355 31350
[31356](#) [31230](#) inactive '16
[31357](#) [31230](#) inactive '16
[31358](#) [31230](#) inactive '16
[31359](#) [31230](#) inactive '16
[31360](#) [31230](#) inactive '16
[31361](#) [31235](#) inactive '16
[31362](#) [31235](#) inactive '16
[31363](#) [31235](#) inactive '16
[31364](#) [31235](#) inactive '16
[31365](#) [31205](#) inactive '16
[31366](#) [31205](#) inactive '16
[31367](#) [31205](#) inactive '16
[31368](#) [31205](#) inactive '16
[31369](#) [31205](#) inactive '16
[31370](#) [31205](#) inactive '16
[31371](#) [31230](#) inactive '16
[31372](#) [31235](#) inactive '16
[31373](#) [31235](#) inactive '16
[31374](#) [31205](#) inactive '16
[31375](#) [31205](#) inactive '16
[31376](#) [31205](#) inactive '16
 ...
 31403 31400
 31406 31400
 31420 30075
 31426 inactive '98
 ...
 31512 31500
[31516](#) [31500](#)
 31519 31518
 ...
 31584 30514, inactive '13
[31591](#) [30514](#)
 32018 32015
 ...
 32072 32075
[32078](#) inactive' 16
[32081](#) inactive' 16
[32088](#) [32090](#)
[32089](#) [32090](#)
 32102 32099
 ...
 32212 ~~90344~~[44104](#)
 ...
 34527 34528
[34529](#) [34528](#)
[34534](#) [34528](#)
[34539](#) [34530](#)
[34540](#) [34530](#)
 34815 34812
 ...
 35508 35507
 35512 ~~35513~~ [inactive '17](#)

| | |
|------------------|---|
| 35516 | 35513 inactive '17 |
| 35517 | 35513 |
| 35526 | 35527 inactive '17 |
| 35542 | 35539 |
| ... | |
| 35616 | 35622 |
| 35617 | 35618 inactive '17 |
| 35626 | 35630 |
| 35627 | 35630 |
| 35635 | 35634 |
| 35636 | 35623 |
| 35639 | 35640 inactive '17 |
| 35641 | 35637 |
| 35644 | 35608 |
| 35645 | 35608 |
| 35648 | 35647 |
| 35676 | 35677 inactive '17 |
| 35683 | 35684 inactive '17 |
| 35687 | 35688 inactive '17 |
| 35691 | 35688 |
| 35700 | 35697 |
| 35706 | 35703 |
| 35709 | 35703 |
| 35712 | 35713 inactive '17 |
| 35716 | 35717 inactive '17 |
| 35754 | 35753 |
| ... | |
| 36642 | 36639 |
| 36648 | 36645 |
| 36658 | inactive '17 |
| 36660 | inactive '17 |
| 36662 | inactive '17 |
| 36666 | 39134 |
| 36668 | 39134 |
| 37026 | 37008 |
| 37040 | 37044 |
| 37042 | 35599 |
| 37202 | 37201 |
| 37206 | 37203 |
| 37208 | 37207 |
| 37219 | 37218 |
| 37220 | 15338 |
| 37230 | 37203 |
| 37233 | 37203 |
| 37245 | 37207 |
| 37338 | 37340 |
| 37341 | 37340 |
| 37343 | 37342 |
| 37351 | 37342 |
| 37622 | 37623 inactive '17 |
| 37801 | 37800 |
| 37803 | 37604 |
| 37804 | 37604 |
| 37806 | 37604 |
| 37807 | 37604 |
| 37809 | 37604 |
| 37810 | 37604 |
| 37813 | 37812 |

[37816](#) [37815](#)
[37819](#) [37818](#)
[37822](#) [37821](#)
[37825](#) [37824](#)
[37828](#) [37827](#)
[37834](#) [37833](#)
38220 38215

...

38478 38477
[38495](#) [38488](#)
38496 38500

...

40327 48654
[40701](#) [39134](#)
[40702](#) [39134](#)
[40704](#) [39138](#)
[40705](#) [39136](#)
[40707](#) [39131](#)
[40708](#) [39134](#)
40800 40801

...

41662 41668
41665 ~~41668~~ [inactive '17](#)
[41680](#) [inactive '16](#)
[41695](#) [inactive '16](#)
41698 41701
[41758](#) [inactive '16](#)
[41761](#) [inactive '16](#)
41788 ~~41789~~ [inactive '17](#)
41792 ~~41789~~ [inactive '17](#)
41793 41789
41796 ~~41797~~ [inactive '17](#)
41800 ~~41801~~ [inactive '17](#)
41820 ~~41832~~ [inactive '17](#)
41846 41849
[41849](#) [inactive '16](#)
[41852](#) [inactive '16](#)
41858 41861

...

42566 42569
[42576](#) [42573](#)
42578 [inactive '06](#)

...

43804 32003
[43805](#) [30617](#)
43813 30375
43816 30375
43819 43993
43822 30375
43825 30375
43828 32003
43831 30373
[43832](#) [30289](#)
43834 32003
[43835](#) [30615](#)
[43838](#) [30601](#)
43840 43837
[43841](#) [30614](#)

| | |
|-----------------------|---|
| 43846 | 43843 |
| ... | |
| 43984 | 36528 |
| 43990 | 32030 43993 |
| 43996 | 43993 |
| 43999 | no ACHI map 90338 |
| 44101 | 32078 |
| 44102 | 32078 |
| 44105 | 32132 44104 |
| 44108 | 30609 |
| ... | |
| 45035 | 45033 |
| 45201 | 45009 |
| 45202 | 45009 |
| 45203 | 45206 |
| ... | |
| 45764 | inactive '98 |
| 45801 | 31205 inactive '16 |
| 45803 | 31205 inactive '16 |
| 45805 | 31205 inactive '16 |
| 45807 | 31350 |
| ... | |
| 47015 | 47009 |
| 47300 | inactive '16 |
| 47301 | 47312 inactive '16 |
| 47303 | inactive '16 |
| 47304 | 47336 inactive '16 |
| 47306 | inactive '16 |
| 47307 | 47336 inactive '16 |
| 47309 | inactive '16 |
| 47310 | 47336 inactive '16 |
| 47312 | inactive '16 |
| 47313 | 47339 inactive '16 |
| 47315 | inactive '16 |
| 47316 | 47339 inactive '16 |
| 47318 | inactive '16 |
| 47319 | 47327 inactive '16 |
| 47321 | inactive '16 |
| 47324 | inactive '16 |
| 47327 | inactive '16 |
| 47330 | inactive '16 |
| 47333 | inactive '16 |
| 47336 | inactive '16 |
| 47339 | inactive '16 |
| 47342 | inactive '16 |
| 47345 | inactive '16 |
| 47360 | inactive '16 |
| 47361 | 47360 inactive '16 |
| 47362 | 47363 inactive '16 |
| 47363 | inactive '16 |
| 47364 | 47366 inactive '16 |
| 47366 | inactive '16 |
| 47367 | 47363 inactive '16 |
| 47369 | 47360 inactive '16 |
| 47370 | 47366 inactive '16 |
| 47372 | 47363 inactive '16 |
| 47373 | 47366 inactive '16 |
| 47375 | 47366 inactive '16 |

| | |
|-----------------------|---|
| 47411 | 47426 |
| ... | |
| 52033 | 30103 |
| 52036 | 31205 inactive '16 |
| 52039 | 31205 inactive '16 |
| 52042 | 31205 inactive '16 |
| 52045 | 31350 |
| ... | |
| 56551 | inactive '07 |
| 56552 | 56549, inactive '07 inactive '15 |
| 56553 | 56549, inactive '07 |
| 56554 | 56549, inactive '07 inactive '15 |
| 56555 | 56549, inactive '07 |
| 56659 | 56619 |
| ... | |
| 58923 | 58921 |
| 58924 | inactive '16 |
| 58926 | 58924 inactive '16 |
| 58929 | 58927 |
| ... | |
| 59319 | 59303 |
| 59503 | inactive '16 |
| 59504 | 59503 inactive '16 |
| 59701 | 59700 |
| ... | |
| 59734 | 59733 |
| 59736 | inactive '16 |
| 59737 | 59736 inactive '16 |
| 59740 | 59739 |
| ... | |
| 59745 | inactive '97 |
| 59748 | inactive '97 |
| 59752 | 59751 |
| 59755 | 59754 |
| 59760 | inactive '16 |
| 59761 | 59760 inactive '16 |
| 59764 | 59763 |
| ... | |
| 59925 | 38218 |
| 59971 | 38218 |
| 59972 | 38218 |
| 59973 | 38218 |
| 60101 | 60100 |
| 60500 | 60503 |
| ... | |
| 61462 | no ACHI map |
| 61465 | inactive '16 |
| 61505 | no ACHI map |
| ... | |
| 61613 | inactive '11 |
| 61616 | 61523 inactive '17 |
| 61619 | inactive '11 |
| 61620 | 61523 |
| 61622 | 61523 |
| ... | |
| 61710 | no ACHI map |

61711 ~~61465~~ [inactive '16](#)
61712 61469
...

Alphabetic Index

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*

...

- indication — *see also Administration/specified site OR Administration/type of agent*

- - anal fissure ~~90344-02~~44104-00 [929]

- - aneurysm, false (thrombin) 45027-02 [742]

...

- - [rectal prolapse \(perirectal\) \(submucosal\) 44104-00 \[929\]](#)

...

- specified site

- - anal region (sphincter) ~~44104-00~~90344-02 [929]

- - anorectal region ~~44104-00~~90344-02 [929]

- - anterior chamber (by paracentesis) (eye) 42740-02 [185]

...

- - nerve

...

- - - cranial (anaesthetic agent) NEC 90023-00 [60]

- - - - neurolytic agent 18290-00 [61]

- - - - - trigeminal — *see Administration/specified site/nerve/trigeminal*

- - - - - [dorsal root \(anaesthetic agent\) — see Administration/specified site/nerve/paravertebral](#)

- - - facial (anaesthetic agent) 18238-00 [60]

...

- - prostate 37218-01 [1160]

- - rectal mucosa (perirectal) (submucosal) ~~44104-00~~90344-02 [929]

- - retrobulbar (orbit) 42824-00 [221]

...

- type of agent

...

- - botulinum toxin (Botox) (Botoxin) (onabotulinumtoxinA) (soft tissue) (type A) NEC (*see also Administration/indication OR Administration/specified site*) 18360-01 [1552]

- - - for strabismus 18366-01 [216]

- - - anorectal region ~~90344-02~~44104-00 [929]

- - - bladder wall 36851-00 [1092]

...

- - filling material (filling of defect)

- - - breast, for augmentation (unilateral) 90723-00 [1741]

- - - - bilateral 90723-01 [1741]

- - - skin 90660-00 [1602]

- - [formalin, to anorectal region 44104-00 \[929\]](#)

- - gamma globulin 13706-05 [1893]

...

Application

...

- fluoride, topical (dental) 97121-01 [454]

- - concentrated 97123-01 [454]

- formalin, to anorectal region ~~90344-02~~44104-00 [929]

- halo 47711-00 [1870]

...

Arrest (of)

...

- haemorrhage

- - abdominal — *see also Packing/intra-abdominal*

- - - postoperative 30385-00 [985]

- - adenoids, postoperative 41797-00 [410]

- - aneurysm via surgical peripheral catheterisation (endovascular balloon) — *see Embolisation/blood vessel, transcatheter/by site*

- - anus (postoperative) 90345-00 [931]

- - aorta, transcatheter (endovascular balloon) 35321-11 [768]

- - arteriovenous fistula or malformation, via surgical peripheral catheterisation — *see Embolisation/blood vessel, transcatheter/by site*

- - artery NEC 30058-01 [777]

- - - via surgical peripheral catheterisation — *see Embolisation/blood vessel, transcatheter/by site*

- - bladder (postoperative) 36842-00 [1092]

- - cervix (balloon catheter) (packing) 96226-00 [1274]

- - colon

- - - endoscopic (closed) 90308-00 [908]
- - - - by laser 30479-02 [908]
- - following
- - - circumcision, male 30663-00 [1195]
- - - dental procedure 97399-00 [461]
- - - gynaecological surgery 35759-00 [1299]
- - - intrathoracic surgery 38656-01 [562]
- - - vascular procedure
- - - - carotid artery 33842-00 [698]
- - - - extremity 33848-00 [746]
- - - - - with any other vascular procedure — *omit code*
- - - - - intra-abdominal 33845-00 [746]
- - - - - with any other vascular procedure — *omit code*
- - - - - intrathoracic 38656-01 [562]
- - - - - vertebral artery 33842-00 [698]
- - gastrointestinal
- - - by [transcatheter embolisation 35321-05 \[768\]](#)
- - - ~~hypothermia 13500-00 [1899]~~
- - - ~~transcatheter embolisation 35321-05 [768]~~
- - - from peptic ulcer 30505-00 [874]
- - - - by gastric resection (other than wedge resection) 30509-00 [880]
- - - - - wedge 30505-00 [874]
- - - - - via endoscopy 90296-00 [887]
- - gastro-oesophageal, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- - gynaecological, postoperative 35759-00 [1299]
- - intestine, large
- - - endoscopic (closed) 90308-00 [908]
- - - - by laser 30479-02 [908]
- - - intra-abdominal — see also Packing/intra-abdominal
- - - postoperative 30385-00 [985]
- - - intrathoracic, postoperative 38656-01 [562]
- - - laparotomy site — see also Packing/intra-abdominal
- - - postoperative 30385-00 [985]
- - nose, nasal 41677-00 [373]
- - - by
- - - - cryotherapy 41680-00 [373]
- - - - ligation of artery
- - - - - ethmoidal (transorbital) 41725-00 [697]
- - - - - maxillary (transantral) 41707-00 [697]
- - - anterior (Little's area)
- - - - by
- - - - - cauterisation (with diathermy) (with packing) 41677-00 [373]
- - - - - packing (by balloon) (with cauterisation) (with diathermy) 41677-00 [373]
- - - posterior, by
- - - - cauterisation (with diathermy) (with packing) 41656-00 [373]
- - - - packing (by balloon) (with cauterisation) (with diathermy) 41656-00 [373]
- - oesophageal, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- - oesophagogastric junction, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- - oral cavity, following dental procedure 97399-00 [461]
- - peptic ulcer 30505-00 [874]
- - - by gastric resection (other than wedge resection) 30509-00 [880]
- - - - wedge 30505-00 [874]
- - - - via endoscopy 90296-00 [887]
- - [post abortion \(balloon catheter\) \(packing\) 35759-01 \[1299\]](#)
- - postoperative, site NEC 30058-01 [777]
- - postpartum NEC 16567-00 [1347]
- - - by suture of uterus (B-Lynch) (compression) 96228-00 [1347]
- - prostate, postoperative 90392-00 [1162]
- - rectum (postoperative) 90345-00 [931]
- - thorax, postoperative 38656-01 [562]
- - thyroid (postoperative) 90047-02 [111]
- - tonsils, postoperative 41797-00 [410]
- - vein NEC 30058-01 [777]
- - - via surgical peripheral catheterisation — see *Embolisation/blood vessel, transcatheter/by site*

Arteriography — see *Angiography*

...

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

...

- mouth NEC 30075-23 [402]
- [mucous membrane](#) — see *Biopsy/by site*

- muscle (open) 30075-01 [1560]

...

Bronchoscopy (electromagnetic navigation) (with bronchial lavage) (with fluoroscopic guidance) 41889-05 [543]

...

- through artificial stoma 41889-01 [543]

Bronchspirometry (with gas analysis) ~~41500-00~~ [11506-00](#) [1849]

Browlift (bilateral) 45588-01 [1675]

...

Cholecystogastrostomy 30461-00 [966]

~~Cholecystography~~ (with tomography) ~~58924-00~~ [1976]

Cholecystoileostomy 30460-01 [969]

...

Closure (of)

...

- atrial

- - appendage, left 96220-00 [603]

- - - percutaneous (via right heart catheterisation transseptal puncture) ~~96219-00~~ [38276-00](#) [603]

- - septal defect (open) (with patch graft) 38742-02 [617]

- - - percutaneous (closed) (with prosthesis or device) 38742-00 [617]

...

- fistula

- - with biological sealant (fibrin sealant) (glue) (plug)

- - - anal ~~90344-02~~ [44104-00](#) [929]

- - - anorectal ~~90344-02~~ [44104-00](#) [929]

- - - enterocutaneous

...

- - rectum NEC 90340-01 [917]

- - - with biological sealant (fibrin sealant) (glue) (plug) ~~90344-02~~ [44104-00](#) [929]

- - round window (inner ear) 41614-00 [332]

...

- fistula-in-ano, with biological sealant (fibrin sealant) (glue) (plug) ~~90344-02~~ [44104-00](#) [929]

- gastroenterostomy 90304-00 [887]

...

Control

- atmospheric pressure and composition 92045-00 [1889]

- haemorrhage — see *Arrest/haemorrhage*

~~— abdominal — see also *Packing/intra-abdominal*~~

~~— postoperative 30385-00 [985]~~

~~— adenoids, postoperative 41797-00 [410]~~

~~— aneurysm via surgical peripheral catheterisation — see *Embolisation/blood vessel, transcatheter/by site*~~

~~— anus (postoperative) 90345-00 [931]~~

~~— arteriovenous fistula or malformation via surgical peripheral catheterisation — see *Embolisation/blood vessel, transcatheter/by site*~~

~~— artery NEC 30058-01 [777]~~

~~— via surgical peripheral catheterisation — see *Embolisation/blood vessel, transcatheter/by site*~~

~~— bladder (postoperative) 36842-00 [1092]~~

~~— cervix (balloon catheter) (packing) 96226-00 [1274]~~

~~— colon~~

~~— endoscopic (closed) 90308-00 [908]~~

~~— by laser 30479-02 [908]~~

~~— following~~

~~— circumcision, male 30663-00 [1195]~~

~~— dental procedure 97399-00 [461]~~

~~— gynaecological surgery 35759-00 [1299]~~

~~— intrathoracic surgery 38656-01 [562]~~

~~— vascular procedure~~

~~— carotid artery 33842-00 [698]~~

~~— extremity 33848-00 [746]~~

~~— with any other vascular procedure — omit code~~

~~— intra-abdominal 33845-00 [746]~~

~~— with any other vascular procedure — omit code~~

~~— intrathoracic 38656-01 [562]~~

~~— vertebral artery 33842-00 [698]~~

~~— gastrointestinal~~

- by
- hypothermia 13500-00 [1899]
- transcatheter embolisation 35321-05 [768]
- from peptic ulcer 30505-00 [874]
- by gastric resection (other than wedge resection) 30509-00 [880]
- wedge 30505-00 [874]
- via endoscopy 90296-00 [887]
- gastro-oesophageal, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- gynaecological, postoperative 35759-00 [1299]
- intestine, large
- endoscopic (closed) 90308-00 [908]
- by laser 30479-02 [908]
- intrathoracic, postoperative 38656-01 [562]
- nose, nasal 41677-00 [373]
- by
- cryotherapy 41680-00 [373]
- ligation of artery
- ethmoidal (transorbital) 41725-00 [697]
- maxillary (transantral) 41707-00 [697]
- anterior (Little's area)
- by
- cauterisation (with diathermy) (with packing) 41677-00 [373]
- packing (by balloon) (with cauterisation) (with diathermy) 41677-00 [373]
- posterior, by
- cauterisation (with diathermy) (with packing) 41656-00 [373]
- packing (by balloon) (with cauterisation) (with diathermy) 41656-00 [373]
- oesophageal, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- oesophagogastric junction, by balloon intubation (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
- oral cavity, following dental procedure 97399-00 [461]
- peptic ulcer 30505-00 [874]
- by gastric resection (other than wedge resection) 30509-00 [880]
- wedge 30505-00 [874]
- via endoscopy 90296-00 [887]
- postoperative, site NEC 30058-01 [777]
- postpartum NEC 16567-00 [1347]
- by cuture of uterus (B-Lynch) (compression) 96228-00 [1347]
- prostate, postoperative 90392-00 [1162]
- rectum (postoperative) 90345-00 [931]
- thorax, postoperative 38656-01 [562]
- thyroid (postoperative) 90047-02 [111]
- tonsils, postoperative 41797-00 [410]
- vein NEC 30058-01 [777]
- via surgical peripheral catheterisation — see *Embolisation/blood vessel, transcatheter/by site*

Conversion

...

Destruction (ablation) (cauterisation) (coagulation) (cryotherapy) (diathermy) (HIFUS) (irreversible electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)

...

- leukoplakia, oral mucosa, by cryotherapy (see also *Destruction/lesion/oral cavity*) 52034-00 [1612]
- liver (percutaneous) 90299-02 50950-02 [956]
- - endoscopic 90299-04 50950-01 [956]
- - open 90299-00 50950-03 [956]
- lung (Argon plasma) (endoscopic) (tissue) 90181-01 [558]

...

Dressing (to) NEC 96092-00 [1870]

- and irrigation, root canal system 97455-00 [464]
- - with any other endodontic procedure — *omit code*
- anorectal region, with formalin 90344-02 44104-00 [929]
- biological (temporary)

...

- formalin, to anorectal region 90344-02 44104-00 [929]
- pressure (Gibney) (Robert Jones) (Shanz) 96092-00 [1870]

...

Embolectomy

- artery (with stenting)
- - axillary 33806-00 [702]
- - - bypass 33806-12 [703]
- - basilar ~~35414-00 90235-00~~ [702]
- - brachial 33806-01 [702]
- - - bypass 33806-12 [703]
- - carotid
- - - external 33800-00 [702]
- - - internal
- - - - extracranial 33800-00 [702]
- - - - intracranial ~~35414-00 90235-00~~ [702]
- - cerebral (anterior) (middle) (posterior) ~~35414-00 90235-00~~ [702]
- - coeliac 33806-04 [702]
- - - bypass 33803-02 [703]
- - communicating (anterior) (posterior) ~~35414-00 90235-00~~ [702]
- - femoral 33806-09 [702]
- - - bypass 33806-12 [703]
- - iliac 33806-08 [702]
- - - bypass 33803-02 [703]
- - innominate 33803-01 [702]
- - - bypass 33803-02 [703]
- - intracranial NEC ~~35414-00 90235-00~~ [702]
- - mesenteric 33806-05 [702]
- - - bypass 33803-02 [703]
- - popliteal 33806-10 [702]
- - - bypass 33806-12 [703]
- - radial 33806-02 [702]
- - - bypass 33806-12 [703]
- - renal 33806-06 [702]
- - - bypass 33803-02 [703]
- - specified site NEC 90230-00 [702]
- - splenic 33806-07 [702]
- - - bypass 33803-02 [703]
- - subclavian 33803-00 [702]
- - - bypass 33803-02 [703]
- - tibial 33806-11 [702]
- - - bypass 33806-12 [703]
- - ulnar 33806-03 [702]
- - - bypass 33806-12 [703]
- - vertebral ~~35414-00 90235-00~~ [702]
- fistula
- ...
- vein (with stenting) 33812-04 [729]
- - axillary 33812-03 [729]
- - dural sinus ~~35414-01 90235-01~~ [729]
- - femoral 33812-00 [729]
- - iliac (open) 33811-01 [729]
- - - closed 33810-01 [729]
- - intracranial NEC ~~35414-01 90235-01~~ [729]
- - popliteal 33812-01 [729]
- - sagittal sinus (sigmoid) (transverse) ~~35414-01 90235-01~~ [729]
- - specified site NEC 33812-04 [729]
- - subclavian 33812-02 [729]
- - vena cava, inferior (open) 33811-00 [729]
- - - closed 33810-00 [729]

Embolisation — see also *Control/haemorrhage/by site*

...

Graft (repair)

...

- Wolfe — see *Graft/skin/by site/full thickness AND Graft/skin/for burn/by site/full thickness*

Graham's test (cholecystography) (with tomography) 58924-00 [1976]

Grice procedure (subtalar arthrodesis) (with bone graft) 50118-00 [1543]

....

Hepatocholedochostomy (open) 90337-00 [958]

- endoscopic 30491-00 [958]

Herniography ~~59760-00~~58900-00 [1977]

Hernioplasty — see *Repair/hernia*

...

Hypothermia

- deep 22075-00 [642]

- - with

- - - cardiac arrest, induced 22075-00 [642]

- - - cerebral perfusion (antegrade) (retrograde) 38577-00 [642]

- - - circulatory arrest, induced 22075-00 [642]

~~- gastric 13500-00 [1899]~~

- therapeutic 22065-00 [1880]

- total body 22065-00 [1880]

- - with arrest (cardiac) (circulatory) 22075-00 [642]

Hysterectomy

...

Insertion

- AICD (automatic implantable cardioverter defibrillator) — see *Insertion/defibrillator*

- airway

- - nasopharyngeal (stent) 90179-02 [568]

- - - with

- - - - choanal atresia repair — see *Repair/atresia/choanal*

- - - - continuous ventilatory support — *omit code*

- - oropharyngeal 92035-00 [568]

- anal

- - fistula plug ~~90344-02~~44104-00 [929]

- - sphincter, artificial 32220-00 [940]

- - stimulator, electrical 32206-00 [940]

...

- fibrin sealant (biological) (glue)

- - anorectal region ~~90344-02~~44104-00 [929]

- - enterocutaneous

...

- plug (into)

- - anal fistula ~~90344-02~~44104-00 [929]

- - obex 40339-00 [22]

...

Kimura procedure (use of right colon as a patch for treatment of Hirschsprung's disease) 43993-01 [934]

Klockoff's tests (glycerol induced cochlear function changes) ~~41324-00~~11306-00 [1843]

Kock pouch (continent ileostomy) 32069-00 [897]

...

Lipectomy

- for lipoma — see *Excision/lesion(s)/skin and subcutaneous tissue/specified site*

- abdominal (apron) ([circumferential](#)) ([wedge](#)) 30165-00 [1666]

- - radical 30177-00 [1666]

~~- - subumbilical 30174-00 [1666]~~

- - suction 45584-00 [1666]

- - arm ([circumferential](#)) ([wedge](#))

- - - 1 excision 30168-00 [1666]

- - - 2 excisions 30171-00 [1666]

- - suction 45584-00 [1666]

- - buttock ([circumferential](#)) ([wedge](#))

- - - 1 excision 30168-00 [1666]

- - - 2 excisions 30171-00 [1666]

- - suction 45584-00 [1666]

- - specified site ([circumferential](#)) ([wedge](#)) NEC

- - 1 excision 30168-00 [1666]
 - - 2 excisions 30171-00 [1666]
 - - suction 45584-00 [1666]
 - [subumbilical](#) — *see* [Lipectomy/abdominal](#)
 - thigh ([circumferential](#)) ([wedge](#))
 - - 1 excision 30168-00 [1666]
 - - 2 excisions 30171-00 [1666]
 - - suction 45584-00 [1666]
- Lipolysis** (suction assisted) — *see* *Liposuction*

...

Manometry

- anal 11830-00 [1859]
- ~~biliary 30493-00 [1859]~~
- oesophageal motility 11800-00 [1859]
- urinary (via catheter) (via nephrostomy) (via pyelostomy) (via ureterostomy) 92128-00 [1862]

Manufacture

...

Measurement

...

- cardiac
- - blood flow across valves
- - - by ultrasound — *see* *Ultrasound/heart*
- - dimensions
- - - by ultrasound — *see* *Ultrasound/heart*
- - output (by)
- - - rebreathing method 11503-08 [1849]
- - - right heart balloon catheter (Swan Ganz) 13818-00 [657]
- cochlear function changes (glycerol induced) (Klockoff's test) ~~41321-00~~ [11306-00](#) [1843]
- coronary flow reserve 38241-00 [668]

...

- pelvic capacity and diameter
- - by pelvimetry
- - - computerised tomographic 57201-00 [1964]
- ~~radiographic 59503-00 [1981]~~
- perfusion ratios (multiple inert gas elimination techniques) (ventilation) 11503-15 [1849]

...

Occlusion

...

- atrial appendage, left 96220-00 [603]
- - percutaneous (via right heart catheterisation transseptal puncture) ~~96219-00~~ [38276-00](#) [603]
- blood vessel by embolisation — *see* *Embolisation/blood vessel, transcatheter/by site*

...

Pelvimetry

- computerised tomographic 57201-00 [1964]
 - ~~radiographic 59503-00 [1981]~~
 - ultrasonic 55700-02 [1943]
- Pereyra procedure** (transvaginal needle suspension)

...

Peritonectomy 96211-00 [989]

Peritoneography ~~59760-00~~ [58900-00](#) [1977]

Perturbation — *see* *Insufflation*

...

Procedure

- for
- - prolapse
- - - anorectal
- - - - insertion of anal suture (Thiersch wire) 32120-00 [929]
- - - pelvic floor 35577-00 [1283]
- - - rectal (mucosa) (perirectal) (submucosal)
- - - - Delorme procedure (mucosal excision and plication of rectal muscle) 32111-00 [933]
- - - - destruction (cauterisation) (cryotherapy) (infrared therapy) 32135-03 [931]
- - - - injection of agent (sclerosing) (sclerotherapy) [44104-00](#) ~~90344-02~~ [929]

- - - insertion of anal suture (Thiersch wire) 32120-00 [929]
...

Radiography (diagnostic) 90909-00 [1988]

...
- heart — see *Radiography/chest*
- hernia (with contrast medium) ~~59760-00~~ [58900-00](#) [1977]
- hip joint 57712-00 [1981]
...
- paranasal sinus 57903-00 [1967]
~~- pelvimetry 59503-00 [1981]~~
- pelvis (girdle) 57715-00 [1981]
~~— for measurement of pelvic capacity and diameter~~
~~— by pelvimetry 59503-00 [1981]~~
- peritoneum (with contrast medium) ~~59760-00~~ [58900-00](#) [1977]
- petrous temporal 57909-00 [1967]
...

Recanalisation

- intracranial (with stenting)
- - artery ~~90235-00~~ [35414-00](#) [702]
- - vein [35414-01](#) ~~90235-01~~ [729]
...

Reduction

...
- paraphimosis 30666-00 [1200]
~~- phimosis 30666-00 [1200]~~
- prolapse
...

Repair

...
- fissure, anal 32126-00 [940]
- - by administration of agent (Botox) (Botoxin) (botulinum toxin) ~~90344-02~~ [44104-00](#) [929]
- fistula — see also *Closure/fistula*
...
- prolapse, prolapsed
- - anorectal
...
- - rectum (mucosa) (perirectal) (submucosal)
- - - by
- - - - Delorme procedure (mucosal excision and plication of rectal muscle) 32111-00 [933]
- - - - destruction (cauterisation) (cryotherapy) (infrared therapy) 32135-03 [931]
- - - - injection of agent (sclerosing) (sclerotherapy) [44104-00](#) ~~90344-02~~ [929]
- - - - insertion of anal suture (Thiersch wire) 32120-00 [929]
...
- rectum NEC 90313-00 [940]
- - and anus, via
- - - laparotomy (posterior sagittal approach) 43966-00 [938]
- - - perineal approach (posterior sagittal approach) 43963-00 [938]
- - prolapse (mucosa) (perirectal) (submucosal)
- - - by
- - - - Delorme procedure (mucosal excision and plication of rectal muscle) 32111-00 [933]
- - - - destruction (cauterisation) (cryotherapy) (infrared therapy) 32135-03 [931]
- - - - injection of agent (sclerosing) (sclerotherapy) [44104-00](#) ~~90344-02~~ [929]
- - - - insertion of anal suture (Thiersch wire) 32120-00 [929]
- - - - ligation, rubber band 32135-02 [931]
...

Revascularisation

- intracranial (with stenting)
- - artery ~~90235-00~~ [35414-00](#) [702]
- - vein [35414-01](#) ~~90235-01~~ [729]
- transmyocardial (open) (TMR) 38650-02 [639]
- - thoracoscopic (percutaneous) 38650-03 [639]
...

Sclerotherapy (injection of sclerosing agent)

- for
- ...
- - pilonidal sinus, abscess or cyst 30679-00 [1659]
- - prolapse, rectal ~~mucosa~~ ~~44104-00~~ ~~90344-02~~ [929]
- - telangiectasis 45027-02 [742]
- ...

Spirometry (*see also Test, testing/respiratory system/function*) 11506-00 [1849]

- for inhalation provocation testing 11503-17 [1849]
- with exercise testing for investigation of asthma 11503-05 [1848]
- ~~bronchospirometry 11500-00 [1849]~~
- respiratory NEC 11506-00 [1849]

Splenectomy (by thoracoabdominal incision) (total) 30597-00 [815]

...

Test, testing (for) NEC (*see also Investigation*) 92204-00 [1866]

- ...
- adrenocorticotrophic hormone stimulation 30097-00 [1858]
- allergy
- - skin sensitivity, using
- - - ≤ 20 allergens 12000-00 [1864]
- - - > 20 allergens 12003-00 [1864]
- - - patch (epicutaneous) (< 25 allergens) (using) 12012-01 [1865]
- ~~all the allergens in a standard patch test battery 12015-00 [1865]~~
- ~~and additional allergens to a total of~~
- ~~≤ 50 allergens 12018-00 [1865]~~
- ~~≥ 51 allergens 12021-00 [1865]~~
- ~~less than the number of allergens in a standard patch test battery 12012-00 [1865]~~
- ~~≥ 51 allergens 12021-00 [1865]~~
- ~~25 — < 50 allergens 12017-00 [1865]~~
- ~~50 — < 75 allergens 12021-01 [1865]~~
- ~~75 — < 100 allergens 12022-00 [1865]~~
- ~~≥ 100 allergens 12024-00 [1865]~~
- alternating binaural loudness balance 96056-00 [1842]
- ...
- central nervous system
- - evoked responses — *see Investigation/central nervous system*
- cochlear
- - glycerol induced function changes (Klockoff's tests) ~~41321-00~~ 11306-00 [1843]
- contraction stress, fetal 16514-01 [1341]
- ...
- glaucoma (open angle), provocative 11200-00 [1835]
- - tonographic (bilateral) (unilateral) 92016-00 [1835]
- ~~Graham's (cholecystography) (with tomography) 58924-00 [1976]~~
- haemodialysis adequacy 90353-00 [1063]
- ...
- isokinetic (muscle) (range of movement) 96159-00 [1905]
- Klockoff's (glycerol induced cochlear function changes) ~~41321-00~~ 11306-00 [1843]
- labyrinth (caloric) 11333-00 [1845]
- ...

Thrombectomy

- artery (with stenting) 90230-00 [702]
- - axillary 33806-00 [702]
- - - bypass 33806-12 [703]
- - basilar [35414-00](#) ~~90235-00~~ [702]
- - brachial 33806-01 [702]
- - - bypass 33806-12 [703]
- - carotid
- - - external 33800-00 [702]
- - - internal
- - - - extracranial 33800-00 [702]
- - - - intracranial [35414-00](#) ~~90235-00~~ [702]
- - cerebral (anterior) (middle) (posterior) [35414-00](#) ~~90235-00~~ [702]
- - coeliac 33806-04 [702]
- - - bypass 33803-02 [703]
- - communicating (anterior) (posterior) [35414-00](#) ~~90235-00~~ [702]
- - coronary, percutaneous transluminal (aspiration) (mechanical)
- ...
- - innominate 33803-01 [702]
- - - bypass 33803-02 [703]
- - intracranial NEC [35414-00](#) ~~90235-00~~ [702]
- - mesenteric 33806-05 [702]
- ...
- - ulnar 33806-03 [702]
- - - bypass 33806-12 [703]
- - vertebral [35414-00](#) ~~90235-00~~ [702]
- fistula
- ...
- vein (with stenting) 33812-04 [729]
- - by transcatheter infusion of thrombolytic agent alone (open) (percutaneous) 35317-01 [741]
- - axillary 33812-03 [729]
- - dural sinus [35414-01](#) ~~90235-01~~ [729]
- - femoral 33812-00 [729]
- - iliac (open) 33811-01 [729]
- - - closed 33810-01 [729]
- - intracranial NEC [35414-01](#) ~~90235-01~~ [729]
- - popliteal 33812-01 [729]
- - sagittal sinus [35414-01](#) ~~90235-01~~ [729]
- - specified site NEC 33812-04 [729]
- - subclavian 33812-02 [729]
- - vena cava, inferior (open) 33811-00 [729]
- - - closed 33810-00 [729]
- ...

Tomography NEC 60100-00 [1951]

...

- computerised (axial) (CT) (quantitative)

...

- - thorax — see Tomography/computerised/chest

~~- gallbladder, with cholecystography 58924-00 [1976]~~

- kidney, with intravenous pyelography 58706-00 [1978]

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Mental Health ACS review

Introduction/Rationale:

This task is an ACCD initiated review to identify redundant ACS content in Chapter 5 *Mental and behavioural disorders*. The review included consideration of whether ACS content could be incorporated into the Tabular List and/or Alphabetic Index:

- ACS 0520 *Family history of mental health* was identified as redundant due to presence of the ACS symbol for ACS 0049 *Disease codes that must never be assigned at Z81 Family history of mental and behavioural disorders*.
- The ACS symbol for ACS 0050 *Unacceptable principal diagnosis codes* was identified as redundant at Z81 *Family history of mental and behavioural disorders* as the code should never be assigned, therefore specifying it cannot be principal diagnosis is not required.
- ACS 0525 *Substance rehabilitation and detoxification* was identified as redundant due to presence of the ACS symbol for ACS 0049 *Disease codes that must never be assigned at both Z50.2 Alcohol rehabilitation and Z50.3 Drug rehabilitation*.
- The information contained in ACS 0526 *Munchhausen's by proxy* was identified as redundant with minor amendments to the ICD-10-AM Tabular List and Alphabetic Index.
- The information within ACS 0528 *Alzheimer's disease* was identified as redundant with minor amendments to the ICD-10-AM Alphabetic Index.
- The information within ACS 0532 redundant with minor amendments to the ICD-10-AM Alphabetic Index

The remaining ACS within Chapter 5 were reviewed for redundancy, but have not been removed from the ACS at this point in time.

ACCD PROPOSAL

Tabular List

F00*

Dementia in Alzheimer's disease (G30.-†)

~~F00.028~~

Alzheimer's disease is a primary degenerative cerebral disease of unknown aetiology with characteristic neuropathological and neuro-chemical features. The disorder is usually insidious in onset and develops slowly but steadily over a period of several years.

F00.0* Dementia in Alzheimer's disease with early onset (G30.0†)

Dementia in Alzheimer's disease with onset before the age of 65, with a relatively rapid deteriorating course and with marked multiple disorders of the higher cortical functions.

Alzheimer's disease, type 2

Presenile dementia, Alzheimer's type

Primary degenerative dementia of the Alzheimer's type, presenile onset

F00.1* Dementia in Alzheimer's disease with late onset (G30.1†)

Dementia in Alzheimer's disease with onset after the age of 65, usually in the late 70s or thereafter, with a slow progression, and with memory impairment as the principal feature.

Alzheimer's disease, type 1

Primary degenerative dementia of the Alzheimer's type, senile onset

Senile dementia, Alzheimer's type

F00.2* Dementia in Alzheimer's disease, atypical or mixed type (G30.8†)

Atypical dementia, Alzheimer's type

F00.9* Dementia in Alzheimer's disease, unspecified (G30.9†)

...

F06.7 Mild cognitive disorder

▽-0532

A disorder characterised by impairment of memory, learning difficulties, and reduced ability to concentrate on a task for more than brief periods. There is often a marked feeling of mental fatigue when mental tasks are attempted, and new learning is found to be subjectively difficult even when objectively successful. None of these symptoms is so severe that a diagnosis of either dementia (F00–F03) or delirium (F05.-) can be made.

This diagnosis should be made only in association with a specified physical disorder, and should not be made in the presence of any of the mental or behavioural disorders classified to F10–F99. The disorder may precede, accompany, or follow a wide variety of infections and physical disorders, both cerebral and systemic, but direct evidence of cerebral involvement is not necessarily present. It can be differentiated from postencephalitic syndrome (F07.1) and postconcussional syndrome (F07.2) by its different aetiology, more restricted range of generally milder symptoms, and usually shorter duration.

...

F68.1 Intentional production or feigning of symptoms or disabilities, either physical or psychological [factitious disorder]

The patient feigns symptoms repeatedly for no obvious reason and may even inflict self-harm in order to produce symptoms or signs. The motivation is obscure and presumably internal with the aim of adopting the sick role. The disorder is often combined with marked disorders of personality and relationships.

Hospital hopper syndrome

Münchhausen's syndrome

Peregrinating patient

Excludes: factitial dermatitis (L98.1)

[Munchhausen's \(syndrome\) by proxy \(T74.1\)](#)

person feigning illness (with obvious motivation) (Z76.5)

...

G30

Alzheimer's disease

▽-0528

G30.0 Alzheimer's disease with early onset

Alzheimer's type presenile dementia† (F00.0*)

Note: Onset usually before the age of 65.

G30.1 Alzheimer's disease with late onset

Alzheimer's type senile dementia† (F00.1*)

Note: Onset usually after the age of 65.

Excludes senile:

• degeneration of brain NEC (G31.1)

• dementia NOS (F03)

senility NOS (R54)

G30.8 Other Alzheimer's disease

[Alzheimer's type atypical or mixed dementia† \(F00.2*\)](#)

G30.9 Alzheimer's disease, unspecified

[Alzheimer's type unspecified dementia† \(F00.9*\)](#)

...

R41.8 Other and unspecified symptoms and signs involving cognitive functions and awareness
▽-0532

...

T74.1 Physical abuse

▽-0526

Battered:

- baby or child syndrome NOS
- spouse syndrome NOS

[Münchhausen's \(syndrome\) by proxy](#)

Note: [Münchhausen's \(syndrome\) by proxy](#) is a disorder in which a carer (usually a parent) intentionally produce or fabricates physical or mental symptoms in the patient (usually a child).

Use additional external cause code (Y07.0-) to identify perpetrator.

...

Z50 Care involving use of rehabilitation procedures

▽ 0050

Excludes: counselling (Z70–Z71)

Z50.0 Cardiac rehabilitation

Z50.1 Other physical therapy
Therapeutic and remedial exercises

Z50.2 Alcohol rehabilitation

▽ 0049, 0525

Z50.3 Drug rehabilitation

▽ 0049, 0525

...

Z81 Family history of mental and behavioural disorders

▽ 0049, 0050, 0520

Z81.0 Family history of mental retardation
Conditions classifiable to F70–F79

Z81.1 Family history of alcohol use disorder
Conditions classifiable to F10.-

Z81.2 Family history of tobacco use disorder
Conditions classifiable to F17.-

Z81.3 Family history of other psychoactive substance use disorder
Conditions classifiable to F11–F16, F18–F19

Z81.4 Family history of other substance use disorder
Conditions classifiable to F55

Z81.8 Family history of other mental and behavioural disorders
Conditions classifiable elsewhere in F00–F99

APPENDIX C

UNACCEPTABLE PRINCIPAL DIAGNOSIS CODES

T31.99 Burns involving 90% or more of body surface, with 90% or more of body surface full thickness burns

[T74.1](#) [Physical abuse](#)

T79.3 Post traumatic wound infection, not elsewhere classified

Section I : Alphabetic Index

Alzheimer's disease or sclerosis ([with dementia](#)) [G30.9† F00.9*](#)

~~- dementia in G30.9† F00.9*~~

~~-- atypical or mixed G30.8† F00.2*~~

~~--- early onset (presenile) G30.0† F00.0*~~

~~--- late onset (senile) G30.1† F00.1*~~

- [atypical or mixed G30.8† F00.2*](#)

- early onset (presenile) [G30.0† F00.0*](#)

- late onset (senile) [G30.1† F00.1*](#)

- specified NEC [G30.8† F00.9*](#)

Change(s) (of) — *see also Removal*

...

- circulatory I99

- cognitive (~~mild~~) (~~organic~~) ~~due to or secondary to general medical condition F06.7~~ [NEC R41.8](#)

- - [due to or secondary to](#)

- - - [age \(age-associated\) R41.8](#)

- - - [general medical condition F06.7](#)

- - [mild \(organic\) F06.7](#)

- colour, tooth, teeth

...

Decline (general) (*see also Debility*) R53

- cognitive, ~~age-associated~~ [NEC R41.8](#)

- - [due to or secondary to](#)

- - - [age \(age-associated\) R41.8](#)

- - - [general medical condition F06.7](#)

- - [mild \(organic\) F06.7](#)

Dementia ([depressed or paranoid type](#)) (persisting) ([senile](#)) F03

- with

- - [Alzheimer's disease \(see also Alzheimer's disease or sclerosis\) G30.9† F00.9*](#)

- - [delirium or acute confusional state F05.1](#)

- alcoholic F10.7

~~- Alzheimer's type NEC (see also Dementia/in/Alzheimer's disease) G30.9† F00.9*~~

- arteriosclerotic (*see also Dementia/vascular*) F01.9

...

- in (due to)

- - alcohol F10.7

~~--- Alzheimer's disease G30.9† F00.9*~~

~~--- with onset~~

~~--- early (presenile form) G30.0† F00.0*~~

~~--- late (senile form) G30.1† F00.1*~~

~~--- atypical G30.8† F00.2*~~

~~--- mixed type G30.8† F00.2*~~

...

- presenile F03

~~--- Alzheimer's type G30.0† F00.0*~~

- primary degenerative F03

...

~~--- senile F03~~

~~--- with acute confusional state F05.1~~

~~--- Alzheimer's type G30.1† F00.1*~~

~~--- depressed or paranoid type F03~~

...

Disease, diseased — see also *Syndrome*

...

- alveoli, teeth K08.9

- [Alzheimer's](#) — see [Alzheimer's disease or sclerosis](#)

- amyloid (see also *Amyloidosis*) E85.9

Disorder (of) — see also *Disease*

...

- coccyx NEC M53.3

- cognitive [NEC R41.8](#)

~~--- due to (secondary to) general medical condition F06.9~~

~~--- due to or secondary to~~

~~--- age (age-associated) R41.8~~

~~--- general medical condition F06.7~~

~~--- mixed F06.8~~

- - mild ([organic](#)) F06.7

- colon K63.9

...

- micturition NEC R39.1

- - psychogenic F45.35

~~--- mild cognitive F06.7~~

- mitochondrial NEC E88.8

...

- persisting

- - amnestic

- - - alcoholic F10.6

- - - sedative-induced F13.6-

- - cognitive impairment [NEC R41.8](#)

- - - due to

- - - - alcohol F10.7

- - - - anxiolytic F13.7-

- - - - cannabis F12.7

- - - - gamma hydroxybutyrate (GHB) F13.71

~~--- general medical condition F06.7~~

- - - - hallucinogens F16.7-

- - - - hypnotic F13.7-

- - - - ketamine F16.71

- - - - sedatives F13.7-

- - - - specified substance NEC F19.7

~~--- mild (organic) F06.7~~

- personality (see also *Personality*) F60.9

Impaired, impairment (function)

- auditory discrimination H93.2

- carbohydrate tolerance (glucose) — see *Hyperglycaemia, hyperglycaemic/intermediate*

- cognitive, ~~persisting due to~~ [NEC R41.8](#)
- [persisting \(due to\)](#)
- [age \(age-associated\) R41.8](#)
- alcohol F10.7
- drug NEC F19.7
- gamma hydroxybutyrate (GHB) F13.71
- [general medical condition F06.7](#)
- hallucinogen use F16.7-
- ketamine F16.71
- sedatives F13.7-
- fasting glucose — see *Hyperglycaemia, hyperglycaemic/intermediate*

...

Mumu (see also *Infestation/filarial*) B74.-† N51.8*

Münchhausen's syndrome F68.1

- by proxy T74.1

Münchmeyer's syndrome M61.1-

...

Sclerosis, sclerotic

- adrenal (gland) E27.8
- Alzheimer's [NEC \(see also Alzheimer's disease or sclerosis\) G30.9† F00.9*](#)
- ~~--- dementia in G30.9† F00.9*~~
- amyotrophic (lateral) G12.2

...

- brain G37.9

...

-- presenile (Alzheimer's) G30.0† F00.0*

~~--- dementia in G30.0† F00.0*~~

-- progressive familial E75.2

...

- presenile (Alzheimer's) G30.0† F00.0*

~~--- dementia in G30.0† F00.0*~~

...

Section II : External Causes of Injury Alphabetic Index

...

Mudslide (of cataclysmic nature) X36

[Munchhausen's \(syndrome\) by proxy Y07.0-](#)

Murder (attempt) (see also Assault) Y09.0-

...

Australian Coding Standards

TABLE OF CONTENTS

...

5. Mental and behavioural disorders

- 0503 Drug, alcohol and tobacco use disorders
- 0505 Mental illness in pregnancy, childbirth and the puerperium
- 0506 Adjustment/depressive reaction
- 0512 Personality trait/disorder
- ~~0520 Family history of mental illness~~
- 0521 Admitted patient without sign of mental illness
- ~~0525 Substance rehabilitation and detoxification~~
- ~~0526 Münchhausen's by proxy~~
- ~~0528 Alzheimer's disease~~
- 0530 Drug overdose
- 0531 Intellectual impairment/intellectual disability
- ~~0532 Cognitive impairment~~
- 0533 Electroconvulsive therapy (ECT)
- 0534 Specific interventions related to mental health care services

...

0049 DISEASE CODES THAT MUST NEVER BE ASSIGNED

The following ICD-10-AM codes must never be assigned for inpatient morbidity coding:

- F90.1 *Hyperkinetic conduct disorder*
- G26* *Extrapyramidal and movement disorders in diseases classified elsewhere*
- L14* *Bullous disorders in diseases classified elsewhere*
- L45* *Papulosquamous disorders in diseases classified elsewhere*
- M09.8-* *Juvenile arthritis in other diseases classified elsewhere*
- M15.9 *Polyarthrosis, unspecified*
- M16.9 *Coxarthrosis, unspecified*
- M17.9 *Gonarthrosis, unspecified*
- M18.9 *Arthrosis of first carpometacarpal joint, unspecified*
- M19.9- *Arthrosis, unspecified* – classify *osteoarthritis/arthrosis/osteoarthritis NOS* as primary osteoarthritis
- M99.- *Biomechanical lesions, not elsewhere classified*
- N22.-* *Calculus of urinary tract in diseases classified elsewhere*
- R65.0 *Systemic inflammatory response syndrome [SIRS] of infectious origin without acute organ failure*
- Y90.9 *Presence of alcohol in blood, level not specified* – see also ACS 0503 *Drug, alcohol and tobacco use disorders*
- Y91.- *Evidence of alcohol involvement determined by level of intoxication* – see also ACS 0503 *Drug, alcohol and tobacco use disorders*
- Z50.2 *Alcohol rehabilitation*
- Z50.3 *Drug rehabilitation*
- Z81.- *Family history of mental and behavioural disorders* – see also ACS ~~0520 Family history of mental illness~~

...

0520 ~~FAMILY HISTORY OF MENTAL ILLNESS~~

Z81. Family history of mental and behavioural disorders is never assigned because:

- ~~It is difficult to ascertain whether there is in fact a family history.~~
- ~~The recording of a family history of mental illness as part of a classification of diagnosis is seen as contributing towards the stigma associated with mental illness.~~
- ~~Where a patient has a non-psychiatric disorder, the fact that the family has a history of mental illness is of no relevance.~~
- ~~Where a patient has a psychiatric disorder, there is no reason to record whether or not the family has a history of mental illness.~~
- ~~Where family data is required for mental health research or epidemiological studies, a dedicated sample would be more appropriate as a routine collection of information would be difficult.~~

0525 ~~SUBSTANCE REHABILITATION AND DETOXIFICATION~~

Use the codes listed in block [1872] Alcohol and drug rehabilitation and detoxification for appropriate treatments with a diagnosis code relating to the condition. The codes Z50.2 Alcohol rehabilitation and Z50.3 Drug rehabilitation should not be assigned for inpatient episodes of care.

0526 ~~MÜNCHHAUSEN'S BY PROXY~~

~~Definition~~

Münchhausen's syndrome is a severe and chronic form of factitious disorder and comprises of intentional fabrication or feigning of physical symptoms or signs without an external incentive. Münchhausen's by proxy is a "variant in which caregivers (usually a parent) intentionally produce or feign physical or mental symptoms or signs in a person in their care (usually a child). The caregiver falsifies history and may injure the child with drugs or other agents or add blood or bacterial contaminants to urine specimens to simulate disease" (Phillips 2008).

~~Classification~~

*Assignment of the code for Münchhausen's syndrome (F68.1 *Intentional production or feigning of symptoms or disabilities, either physical or psychological [factitious disorder]*) would be inappropriate in the case of Münchhausen's by proxy as it is the patient's **parent**, not the patient, who has this condition. The correct coding is:*

- T74.1 — Maltreatment syndromes, physical abuse*
- Y07.01 — Other maltreatment syndromes, by parent*

An appropriate place of occurrence code (Y92.) and activity code (U73.).

0528 ~~ALZHEIMER'S DISEASE~~

When only 'Alzheimer's disease' is documented, rather than 'Alzheimer's dementia', the dementia component can be assumed and thus two codes should always be assigned, G30.- Alzheimer's disease and F00.- *Dementia in Alzheimer's disease.**

0532 ~~COGNITIVE IMPAIRMENT~~

If 'cognitive impairment' is recorded, further clarification as to the extent of the impairment (ie mild memory disturbance or loss following organic brain damage, dementia) should be sought from the clinician. If this is not possible, then R41.8 *Other and unspecified symptoms and signs involving cognitive functions and awareness* should be assigned.

~~F06.7 Mild cognitive disorder~~ should be assigned only when terms supporting the diagnosis are documented.

The index pathways for F06.7 are:

- ~~▪ Change/cognitive (mild) (organic) due to or secondary to general medical condition~~
- ~~▪ Disorder/cognitive/mild~~
- ~~▪ Disorder/mild cognitive~~
- ~~▪ Disturbance/memory/mild, following organic brain damage~~
- ~~▪ Lack of/memory/mild, following organic brain damage~~
- ~~▪ Loss/memory/mild, following organic brain damage~~
- ~~▪ Memory disturbance, lack or loss/mild, following organic brain damage.~~

STANDARDS INDEX

Standard numbers appear immediately after each entry.

...

AIDS (acquired immune deficiency syndrome) 0102

Alcohol

- and medication
- - adverse reaction 1903
- ~~- detoxification and rehabilitation 0525~~
- harmful use 0503
- social/heavy drinker 0503
- use disorder 0503

Allergic reaction 2004

- antivenom 1923
- snake venom 1923

Allied health interventions 0032

ALTE (acute life threatening event) 1610

~~**Alzheimer's disease 0528**~~

Anaemia

...

Definition (of)

...

- metastatic lesion 0239
- ~~- Münchhausen's syndrome or by proxy 0526~~
- newborn/neonate 1607

...

Delivery

- assisted 1505
- prior to admitted episode of care 1548
- procedures 1505
- table of delivery and assisted delivery codes 1505

~~**Dementia, Alzheimer's 0528**~~

Dependence

...

Disease

- acute and/on chronic 0001
- ~~Alzheimer's 0528~~
- atherosclerotic heart 0940; 0941

...

Disorder

- disc 1307
- ~~mental~~
- ~~family history 0520~~
- mitochondrial 0627

...

Drug

- adverse effect 1902
- - combination, two or more 1903
- - warfarin 0303
- challenge 2115
- clinical trial 0026
- dependence/use disorder 0503
- ~~detoxification and rehabilitation 0525~~
- harmful use 0503

...

History

- abuse/maltreatment 1909
- family
- ~~mental/behavioural disorder 0520~~
- - screening for 0052
- personal (of) 2112
- - screening for 0052

...

Illness

- mental
- ~~family history of 0520~~
- - in pregnancy, childbirth or the puerperium 0505
- neonate
- - requiring specific interventions 1615

...

Impairment, impaired

- carbohydrate tolerance 0401
- ~~cognitive 0532~~
- fasting glycaemia 0401

...

Multiple

- coding 0002
- injuries 1907
- procedures 0020

~~Munchausen's syndrome or by proxy 0526~~

Music therapy 0032

...

Recurrence of malignancy (neoplasm) 0237

Rehabilitation 2104

~~alcohol 0525~~

~~drug 0525~~

Remission

...

Stroke 0604

- extension 0605

Substance

- ~~rehabilitation and detoxification 0525~~
- use disorder, psychoactive 0503

...

Syndrome 0005

...

~~-Munchhausen's 0526~~

- myoclonus epilepsy ragged red fibre 0627

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Minor addenda

Introduction/Rationale:

This addenda proposal contains minor issues identified in ICD-10-AM, ACHI and the ACS that are not related to any of the major Eleventh Edition addenda proposals.

Summary of main issues and proposed addenda:

- **Boss, bossing** (carpal) (carpometacarpal) (metacarpal) (tarsal)
A carpometacarpal boss is a bony protuberance (osseous formation), at the base of the second or third metacarpals on the dorsal surface, near the capitate and trapezium. Bossing may also occur on the dorsal aspect of the midfoot, at the first, second or third tarsometatarsal joints (known as a tarsal boss). ACCD proposes to add the term *Boss, bossing* to the ICD-10-AM Alphabetic Index, classified to M25.7- *Osteophyte*, as a best fit.
- **Duloxetine**
Duloxetine is a serotonin and noradrenaline reuptake inhibitor (SNRI) antidepressant. ACCD proposes the addition of 'Duloxetine' to the Table of Drugs and Chemicals, classified as per antidepressant NEC.
- **Ectopic tooth**
Ectopic (tooth) eruption occurs when a tooth erupts in an abnormal position (eg the palate). ICD-11 indexes 'ectopic eruption' to a residual category: *Disorders of tooth development or eruption, unspecified*. ACCD proposes classifying this condition to K00.6 *Disturbances in tooth eruption*.
- **Skin sparing mastectomy**
A skin sparing mastectomy involves preservation of breast skin, to minimise scarring and enhance reconstruction. ACHI block [1747] *Subcutaneous mastectomy* lists an *Inclusion* term: 'Excision of breast tissue with preservation of skin and nipple'. ACCD proposes indexing 'skin sparing mastectomy', classified to block [1747].
- **Osteotomy of calcaneus**
ACHI Alphabetic Index does not list a default code for osteotomy of the calcaneus NOS. *Osteotomy/calcaneus/for tarsal coalition* is classified to 50333-00 [1532] *Excision of tarsal coalition*. ACCD proposes the addition of a default code at *Osteotomy/calcaneus*, classified to 48406-15 [1528] *Osteotomy of tarsal bone* and 48409-15 [1528] *Osteotomy of tarsal bone with internal fixation*, as a best fit
- **Nesbit procedure**
Nesbit procedure is an intervention to suture (plicate) the side of a penis to correct curvature (eg for Peyronie's disease). ACCD proposes the addition of this term to ACHI Alphabetic Index, classified to 37417-00 [1197] *Correction of chordee of penis*

ACCD also proposes:

- replacement of the terms 'diagnostic statement(s)' with 'clinical concept(s)', as per the ICD-10-AM Tenth Edition addenda
- addition of *Excludes* notes to E1-.69 **diabetes mellitus with other specified complication*, to clarify that 'pressure injury (ulcer) not meeting the criteria for diabetic foot' is classified to category L89 *Pressure injury*
- relocation of *Excludes* notes from the category level at I51 *Complications and ill-defined descriptions of heart disease*, to the specific codes to which it is applicable (ie I51.4-I51.9)
- addition of index entries for *Administration/type of agent/thrombolytic/systemic effect*, as per the guidelines in ACS 0943 *Thrombolytic therapy*
- addition of references to ACS 0002 *Additional diagnoses* in regards to 'underlying cause'
- amendments to the codes listed in the table in ACS 0104 *Viral hepatitis*

Note: Minor formatting and wording amendments are proposed for some of the ACS, to create consistency. Amendments to the content of the affected standards is outside the scope of this addenda proposal (except where specified above).

Added post March 2018 ITG:

- Amendments to indexing for removal of IDC (Q3285)
- Amendments to indexing of codes in category I83 *Varices veins of lower extremities* (Q3319)
- Amendments to indexing for chemical peritonitis (Q3316)
- Amendments to ACS 0002 *Additional diagnoses* and ACS 0503 *Drug, alcohol and tobacco use disorders* (Q3263)
- Addition of indexing for arm lift/brachioplasty (Q3267)
- Addition to indexing for perinephric haematoma (Q3260)
- Addition of indexing for duodenal gastric heterotopia (Q3232)
- Addition of indexing for postural orthostatic tachycardia syndrome (POTS) (Q3279)
- Deletion of *Inclusion* term 'filling of tooth NOS' at 97511-01 [465] (Q3313)
- Addition of indexing for platelet rich plasma into joint (Q3257)
- Addition of guideline and example to ACS 0052 *Same-day endoscopy – surveillance* (Q3305)
- Addition of indexing for 'debridement of oral cavity' (Q3230)
- Amendments to indexing for Sling procedure (Q3288)

- Other minor issues
 - Amendments to indexing for Polydactylism (cross reference added)
 - Addition of indexing for mucous cyst of digit (*Cyst/digit, hand, Cyst/hand, Cyst/finger, Cyst/thumb*), classified to M67.44 *Ganglion, hand*
 - Addition of ACS (1915 *Spinal (cord) injury*) symbol and amendment of *Excludes* notes at S12.7 *Multiple fractures of cervical spine*, S13.3 *Multiple dislocations of neck*, S22.1 *Multiple fractures of thoracic spine*, and S32.7 *Multiple fractures of lumbar spine with pelvis*
 - Expansion of abbreviation ACTH (adrenocorticotrophic hormone) (numerous in Alphabetic Index and Tabular List)
 - Amendment to *Excludes* note at T15-T19 *Effects of foreign body entering through natural orifice*

- Minor amendments to **formatting** (eg unnecessarily duplicated terms)

ACCD PROPOSAL

ICD-10-AM Tabular List

A50 Congenital syphilis

- A50.0 Early congenital syphilis, symptomatic
Any congenital syphilitic condition specified as early or manifest less than two years after birth.
Early congenital: ~~syphilis:~~
- [syphilis:](#)
 - ~~cutaneous~~
 - ~~mucocutaneous~~
 - ~~visceral~~
 - [cutaneous](#)
 - [mucocutaneous](#)
 - [visceral](#)
 - [syphilitic:](#)
 - [laryngitis](#)
 - [oculopathy](#)
 - [osteochondropathy](#)
 - [pharyngitis](#)
 - [pneumonia](#)
 - [rhinitis](#)
 - ~~Early congenital syphilitic:~~
 - ~~laryngitis~~
 - ~~oculopathy~~
 - ~~osteochondropathy~~
 - ~~pharyngitis~~
 - ~~pneumonia~~
 - ~~rhinitis~~
- A50.1 Early congenital syphilis, latent
Congenital syphilis without clinical manifestations, with positive serological reaction and negative spinal fluid test, less than two years after birth.
- A50.2 Early congenital syphilis, unspecified
Congenital syphilis NOS less than two years after birth.
- A50.3 Late congenital syphilitic oculopathy
Late congenital syphilitic: ~~interstitial keratitis† (H19.2*)~~
- [interstitial keratitis† \(H19.2*\)](#)
 - [oculopathy NEC† \(H58.8*\)](#)
- ~~Late congenital syphilitic oculopathy NEC† (H58.8*)~~
- Excludes** Hutchinson's triad (A50.5)

...

B59† ~~Pneumocystosis (J17.3*)~~

- ~~Pneumonia due to:~~
- ~~Pneumocystis:~~
 - ~~carinii~~
 - ~~jirovecii~~

...

B88 Other infestations

...

- B88.9 Infestation, unspecified
Infestation (skin): ~~NOS~~
- [by mites NOS](#)
 - [NOS](#)
- ~~Infestation by mites NOS~~
- Skin parasites NOS

...

C08 Malignant neoplasm of other and unspecified major salivary glands

Excludes: malignant neoplasms of: ~~minor salivary glands NOS (C06.9)~~
• [minor salivary glands NOS \(C06.9\)](#)
• [parotid gland \(C07\)](#)
• [specified minor salivary glands](#) – see [Alphabetic Index: Neoplasm/by site/malignant](#)
~~malignant neoplasms of specified minor salivary glands which are classified according to their anatomical location~~
~~parotid gland (C07)~~

...

C80 Malignant neoplasm without specification of site

▽ 0218, 0236

Excludes: Kaposi sarcoma, unspecified site (C46.9)
mesothelioma, unspecified site (C45.9)

C80.0 Malignant neoplasm, primary site unknown, so stated

C80.9 Malignant neoplasm, primary site unspecified

[Cancer NOS](#)

[Carcinoma NOS](#)

~~Cancer~~

~~Carcinoma~~

NOS

Malignancy

Malignant neoplasm, not known whether primary or secondary

Multiple cancer NOS

Excludes: multiple secondary cancer NOS (C79.9)
secondary malignant neoplasm, unspecified site (C79.9)

...

D11 Benign neoplasm of major salivary glands

Excludes: benign neoplasms of: ~~minor salivary glands NOS (D10.3)~~
• [minor salivary glands NOS \(D10.3\)](#)
• [specified minor salivary glands](#) – see [Alphabetic Index: Neoplasm/by site/benign](#)
~~benign neoplasms of specified minor salivary glands which are classified according to their anatomical location~~
~~—see [Alphabetic Index](#)~~

...

★E09.4 Intermediate hyperglycaemia with neurological complication

★E09.40 Intermediate hyperglycaemia with unspecified neuropathy

★E09.42 Intermediate hyperglycaemia with polyneuropathy

Intermediate hyperglycaemia with [peripheral neuropathy](#):

• [distal symmetrical](#)

• [NOS](#)

• [selective 'small fibre'](#)

• [sensorimotor](#)

• ~~peripheral neuropathy:~~

—• ~~distal symmetrical~~

—• ~~NOS~~

—• ~~selective 'small fibre'~~

—• ~~sensorimotor~~

...

E10.6 Type 1 diabetes mellitus with other specified complication

...

☛E10.69 Type 1 diabetes mellitus with other specified complication

Type 1 diabetes mellitus with:

- diabetic:
 - fibrous breast disease (mastopathy) (sclerosing lymphocytic lobulitis)
 - muscle infarction (aseptic myonecrosis) (ischaemic myonecrosis)(tumoriform focal muscular degeneration)
- gangrene (acute dermal) (bacterial) (haemolytic):
 - Fournier's
 - Meleney's (progressive bacterial synergistic)
- necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E10.73)
- neuropathy (E10.73)

[pressure ulcer not meeting the criteria for diabetic foot \(L89.-\)](#)

...

E11.6 Type 2 diabetes mellitus with other specified complication

...

☛E11.69 Type 2 diabetes mellitus with other specified complication

Type 2 diabetes mellitus with:

- diabetic:
 - fibrous breast disease (mastopathy) (sclerosing lymphocytic lobulitis)
 - muscle infarction (aseptic myonecrosis) (ischaemic myonecrosis) (tumoriform focal muscular degeneration)
- gangrene (acute dermal) (bacterial)(haemolytic):
 - Fournier's
 - Meleney's (progressive bacterial synergistic)
- necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E11.73)
- neuropathy (E11.73)

[pressure ulcer not meeting the criteria for diabetic foot \(L89.-\)](#)

...

E13.6 Other specified diabetes mellitus with other specified complication

...

☛E13.69 Other specified diabetes mellitus with other specified complication

Diabetes mellitus NEC with:

- diabetic:
 - fibrous breast disease (mastopathy) (sclerosing lymphocytic lobulitis)
 - muscle infarction (aseptic myonecrosis) (ischaemic myonecrosis) (tumoriform focal muscular degeneration)
- gangrene (acute dermal) (bacterial)(haemolytic):
 - Fournier's
 - Meleney's (progressive bacterial synergistic)
- necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E13.73)
- neuropathy (E13.73)

[pressure ulcer not meeting the criteria for diabetic foot \(L89.-\)](#)

...

E14.6 Unspecified diabetes mellitus with other specified complication

...

⊛E14.64 Unspecified diabetes mellitus with hypoglycaemia

Diabetes mellitus NOS with [hypoglycaemia\(ic\)](#):

- [coma](#)
- [NOS](#)
- [seizure \(convulsion\) \(fit\)](#)
- ~~[hypoglycaemia\(ic\)](#)~~
- ~~[coma](#)~~
- ~~[NOS](#)~~
- ~~[seizure \(convulsion\)\(fit\)](#)~~

...

⊛E14.69 Unspecified diabetes mellitus with other specified complication

Diabetes mellitus NOS with:

- diabetic:
 - fibrous breast disease (mastopathy) (sclerosing lymphocytic lobulitis)
 - muscle infarction (aseptic myonecrosis) (ischaemic myonecrosis) (tumoriform focal muscular degeneration)
- gangrene (acute dermal) (bacterial)(haemolytic):
 - Fournier's
 - Meleney's (progressive bacterial synergistic)
- necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E14.73)
- neuropathy (E14.73)
- [pressure ulcer not meeting the criteria for diabetic foot \(L89.-\)](#)

...

E22 Hyperfunction of pituitary gland

Excludes Cushing's syndrome (E24.-)

Nelson's syndrome (E24.1)

overproduction of:

- [adrenocorticotrophic hormone \[ACTH\]](#) not associated with Cushing's disease (E27.0)
- pituitary [adrenocorticotrophic hormone \[ACTH\]](#) (E24.0)
- thyroid-stimulating hormone (E05.8)

...

E24 Cushing's syndrome

E24.0 Pituitary-dependent Cushing's disease

Overproduction of pituitary [adrenocorticotrophic hormone \[ACTH\]](#)

Pituitary-dependent hyperadrenocorticism

E24.1 Nelson's syndrome

E24.2 Drug-induced Cushing's syndrome

Use additional external cause code (Chapter 20) to identify drug.

E24.3 Ectopic ACTH syndrome

[Ectopic adrenocorticotrophic hormone syndrome](#)

E24.4 Alcohol-induced pseudo-Cushing's syndrome

▽ 0503

E24.8 Other Cushing's syndrome

E24.9 Cushing's syndrome, unspecified

...

E27 Other disorders of adrenal gland

E27.0 Other adrenocortical overactivity
Overproduction of [adrenocorticotrophic hormone \[ACTH\]](#), not associated with Cushing's disease
Premature adrenarache
Excludes Cushing's syndrome (E24.-)

...

E66 Obesity and overweight

Note: BMI is not an accurate measure of obesity in childhood/adolescence (those under 18 years of age).

Excludes: adiposogenital dystrophy (E23.6)
lipomatosis:
• dolorosa [Dercum] (E88.2)
• NOS (E88.2)
Prader-Willi syndrome (Q87.14)

The following fifth character subdivisions are for use with subcategories E66.1, E66.2 and E66.9:

Fifth characters 1, 2 and 3 are assigned for patients 18 years of age and above.

For patients under 18 years of age, assign fifth character 0.

- ★ 0 body mass index [BMI] not elsewhere classified
- ★ 1 body mass index [BMI] ≥ 30 kg/m² to ≤ 34.99 kg/m²
Obese class I
- ★ 2 body mass index [BMI] ≥ 35 kg/m² to ≤ 39.99 kg/m²
Obese class II
- ★ 3 body mass index [BMI] ≥ 40 kg/m²
Clinically severe obesity
Extreme obesity
Obese class III

...

E77 Disorders of glycoprotein metabolism

E77.0 Defects in post-translational modification of lysosomal enzymes
Mucopolipidosis: ~~H [H-cell disease]~~
• [II \[I-cell disease\]](#)
• [III \[pseudo-Hurler polydystrophy\]](#)
~~Mucopolipidosis III [pseudo-Hurler polydystrophy]~~

...

E87 Other disorders of fluid, electrolyte and acid-base balance

...

E87.5 Hyperkalaemia
Potassium [K]: ~~excess~~
• [excess](#)
• [overload](#)
~~Potassium [K] overload~~

...

F06 Other mental disorders due to brain damage and dysfunction and to physical disease

[Miscellaneous conditions causally related to brain disorder due to primary cerebral disease, to systemic disease affecting the brain secondarily, to exogenous toxic substances or hormones, to endocrine disorders, or to other somatic illnesses.](#)

~~*Includes:* miscellaneous conditions causally related to brain disorder due to primary cerebral disease, to systemic disease affecting the brain secondarily, to exogenous toxic substances or hormones, to endocrine disorders, or to other somatic illnesses.~~

...

Excludes associated with:
• delirium (F05.-)
• dementia as classified in F00–F03
resulting from use of alcohol and other psychoactive substances (F10–F19)

F90 Hyperkinetic disorders

...

F90.9 Hyperkinetic disorder, unspecified
Hyperkinetic: ~~reaction of childhood or adolescence NOS~~
• [reaction of childhood or adolescence NOS](#)
• [syndrome NOS](#)
~~Hyperkinetic syndrome NOS~~

...

F94 Disorders of social functioning with onset specific to childhood and adolescence

...

F94.1 Reactive attachment disorder of childhood
Starts in the first five years of life and is characterised by persistent abnormalities in the child's pattern of social relationships that are associated with emotional disturbance and are reactive to changes in environmental circumstances (eg fearfulness and hypervigilance, poor social interaction with peers, aggression towards self and others, misery, and growth failure in some cases). The syndrome probably occurs as a direct result of severe parental neglect, abuse, or serious mishandling.
Use additional code to identify any associated failure to thrive or growth retardation.
Excludes: Asperger's syndrome (F84.5)
disinhibited attachment disorder of childhood (F94.2)
maltreatment syndromes (T74.-)
normal variation in pattern of selective attachment – [omit code](#)
sexual or physical abuse in childhood, resulting in psychosocial problems (Z61.4–Z61.6)

...

G71 Primary disorders of muscles

Excludes arthrogryposis multiplex congenita (Q74.3)
metabolic disorders (E70–E89)
myositis (M60.-)

G71.0 Muscular dystrophy
Muscular dystrophy:
• autosomal recessive, childhood type, resembling Duchenne or Becker
• benign: ~~[Becker]~~
• [NOS \[Becker\]](#)
• [scapuloperoneal with early contractures \[Emery-Dreifuss\]](#)
~~• benign scapuloperoneal with early contractures [Emery-Dreifuss]~~
• distal
• facioscapulohumeral
• limb-girdle
• ocular
• oculopharyngeal
• scapuloperoneal
• severe [Duchenne]
Excludes congenital muscular dystrophy:
• NOS (G71.2)
• with specific morphological abnormalities of the muscle fibre (G71.2)

...

H26 Other cataract

Excludes congenital cataract (Q12.0)

...

H26.2 Complicated cataract
Cataract: ~~in chronic iridocyclitis~~
• [in chronic iridocyclitis](#)
• [secondary to ocular disorders](#)
~~Cataract secondary to ocular disorders~~
Glaucomatous flecks (subcapsular)

...

ISCHAEMIC HEART DISEASES

(I20–I25)

Includes: ~~with mention of hypertension (I10–I15)~~

Note: For morbidity, duration as used in categories I21, I22, I24 and I25 refers to the interval elapsing between onset of the ischaemic episode and admission to care. For mortality, duration refers to the interval elapsing between onset and death.

...

I35 Nonrheumatic aortic valve disorders

Excludes: hypertrophic subaortic stenosis (I42.1)
~~when of~~ unspecified cause but with mention of diseases of mitral valve (I08.0)
when specified as:
• congenital (Q23.0–Q23.1, Q23.4–Q23.9)
• rheumatic (I06.-)

...

I36 Nonrheumatic tricuspid valve disorders

Excludes: ~~when of~~ unspecified cause (I07.-)
when specified as:
• congenital (Q22.4-, Q22.8-, Q22.9)
• rheumatic (I07.-)

...

I46 Cardiac arrest

Note: [Assign E-codes](#) from this category ~~should be assigned~~ only if resuscitation intervention is undertaken, regardless of patient outcome.

Excludes: cardiogenic shock (R57.0)
~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
[where resuscitation intervention is not performed – omit code](#)

...

I51 Complications and ill-defined descriptions of heart disease

Excludes: ~~any condition in I51.4–I51.9 due to hypertension (I11.-):~~
~~• with renal disease (I13.-)~~
complications following acute myocardial infarction (I23.-)
when specified as rheumatic (I00–I09)

...

I51.4 Myocarditis, unspecified

Myocardial fibrosis
Myocarditis:
• chronic (interstitial)
• NOS

Excludes: [due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

I51.5 Myocardial degeneration

Degeneration of heart or myocardium:
• fatty
• senile
Myocardial disease

Excludes: [due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

I51.6 Cardiovascular disease, unspecified
Cardiovascular accident NOS
Excludes: atherosclerotic cardiovascular disease, so described (I25.0)
[due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

I51.7 Cardiomegaly
Cardiac:
• dilatation
• hypertrophy
Ventricular dilatation
Excludes: [due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

I51.8 Other ill-defined heart diseases
Carditis (acute)(chronic)
Pancarditis (acute)(chronic)
Excludes: [due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

I51.9 Heart disease, unspecified
Excludes: [due to hypertension:](#)
• [NOS \(I11.9\)](#)
• [with:](#)
• [heart failure \(I11.0\)](#)
• [renal disease \(I13.-\)](#)

...

CEREBROVASCULAR DISEASES

(I60–I69)

Includes: ~~with mention of hypertension (conditions in I10 and I15.-)~~

Excludes transient cerebral ischaemic attacks and related syndromes (G45.-)
traumatic intracranial haemorrhage (S06.-)
vascular dementia (F01.-)

...

J45 Asthma

▽ 1002

Excludes: acute severe asthma (J46)
chronic: ~~asthmatic (obstructive) bronchitis (J44.-)~~
~~chronic obstructive asthma (J44.-)~~
• [asthmatic \(obstructive\) bronchitis \(J44.-\)](#)
• [obstructive asthma \(J44.-\)](#)
eosinophilic asthma (J82)
lung diseases due to external agents
(J60–J70)
status asthmaticus (J46)

...

K00 Disorders of tooth development and eruption

Excludes embedded and impacted teeth (K01.-)
...

K00.2 Abnormalities of size and form of teeth

~~Concrescence~~
~~Fusion of teeth~~
~~Gemination~~
[Concrescence of teeth](#)

Dens:

- evaginatus
- in dente
- invaginatus

Enamel pearls

[Fusion of teeth](#)
[Gemination of teeth](#)

Macrodontia

Microdontia

Peg-shaped [conical] teeth

Taurodontism

Tuberculum paramolare

Excludes: tuberculum Carabelli, ~~which is regarded as a normal variation and should not be coded~~ [omit code](#)

...

K04 Diseases of pulp and periapical tissues

...

K04.5 Chronic apical periodontitis

Apical, ~~or periapical granuloma~~
• [or periapical granuloma](#)
• [periodontitis NOS](#)
~~Apical periodontitis NOS~~

...

K65 Peritonitis

Excludes peritonitis:

- ~~aseptic (T81.6)~~
- benign paroxysmal (E85.0)
- ~~chemical (T81.6)~~
- due to ~~talc or other~~ foreign substance [accidentally left during procedure](#) (T81.6)
- neonatal (P78.0–P78.1)
- pelvic, female (N73.3–N73.5)
- periodic familial (E85.0)
- puerperal (O85)
- with or following:
 - ~~abortion or ectopic or molar pregnancy (O00–O07, O08.0)~~
 - appendicitis (K35.-)
 - diverticular disease of intestine (K57.-)

...

K92 Other diseases of digestive system

▽ 1103

Excludes neonatal gastrointestinal haemorrhage (P54.0–P54.3)

...

K92.2 Gastrointestinal haemorrhage, unspecified

Haemorrhage:

- gastric NOS
- intestinal NOS

Per-rectal bleeding NOS

Excludes: haemorrhage: ~~of anus and rectum (K62.5)~~

• ~~of anus and rectum (K62.5)~~

• with:

• ~~duodenitis (K29.81)~~

• ~~gastritis (K29.0, K29.21, K29.31, K29.41, K29.51, K29.61, K29.71)~~

• ~~gastroduodenitis (K29.91)~~

~~haemorrhage with:~~

• ~~duodenitis (K29.81)~~

• ~~gastritis (K29.0, K29.21, K29.31, K29.41, K29.51, K29.61, K29.71)~~

• ~~gastroduodenitis (K29.91)~~

with peptic ulcer (K25–K28)

...

M66 Spontaneous rupture of synovium and tendon

See site code

Includes: rupture that occurs when a normal force is applied to tissues that ~~are inferred to~~ have less than normal strength

Excludes: rotator cuff syndrome (M75.1)

rupture ~~where and due to~~ abnormal force ~~is~~ applied to normal tissue — see ~~injury of tendon by body region~~ [Alphabetic Index: Injury/muscle](#)

...

GLOMERULAR DISEASES

(N00–N08)

▽ 1438

Use additional code to identify external cause (Chapter 20).

Excludes: hypertensive kidney disease (I12.-)

The following fourth character subdivisions classify morphological changes and are for use with categories N00–N07. Subdivisions .0–.8 should not normally be used unless these have been specifically identified (e.g. by renal biopsy or autopsy). The three character categories relate to clinical syndromes.

.0 minor glomerular abnormality

Minimal change lesion

.1 focal and segmental glomerular lesions

Focal: ~~and segmental:~~

• ~~and segmental:~~

• ~~hyalinosis~~

• ~~sclerosis~~

• ~~glomerulonephritis~~

• ~~hyalinosis~~

• ~~sclerosis~~

Focal glomerulonephritis

.2 diffuse membranous glomerulonephritis

...

N92 Excessive, frequent and irregular menstruation

Excludes: postmenopausal bleeding (N95.0)

- N92.0 Excessive and frequent menstruation with regular cycle
 - Heavy periods NOS
 - Menorrhagia NOS
 - Polymenorrhoea
- N92.1 Excessive and frequent menstruation with irregular cycle
 - Irregular: ~~intermenstrual bleeding~~
 - [intermenstrual bleeding](#)
 - [shortened intervals between menstrual bleeding](#)
 - ~~Irregular, shortened intervals between menstrual bleeding~~
 - Menometrorrhagia
 - Metrorrhagia

...

P05 Slow fetal growth and fetal malnutrition

...

- P05.9 Slow fetal growth, unspecified
 - Fetal growth: ~~restriction NOS~~
 - [restriction NOS](#)
 - [retardation NOS](#)
 - ~~Fetal growth retardation NOS~~
 - Intrauterine growth retardation [IUGR] NOS

...

P23 Congenital pneumonia

Includes: infective pneumonia acquired in utero or during birth

Excludes: neonatal pneumonia resulting from aspiration (P24.-)

...

- P23.6 Congenital pneumonia due to other bacterial agents
 - [Congenital pneumonia due to:](#)
 - [Haemophilus influenzae](#)
 - [Klebsiella pneumoniae](#)
 - [Mycoplasma](#)
 - [Streptococcus, except group B](#)

...

P24 Neonatal aspiration syndromes

▽ 1613

Includes: neonatal pneumonia resulting from aspiration

- P24.0 Neonatal aspiration of meconium
 - Meconium: ~~aspiration syndrome~~
 - [aspiration syndrome](#)
 - [pneumonitis](#)
 - ~~Meconium pneumonitis~~

...

P52 Intracranial nontraumatic haemorrhage of fetus and newborn

Includes: intracranial haemorrhage due to anoxia or hypoxia

Excludes: intracranial haemorrhage due to:

- birth trauma (P10.-)
- maternal injury (P00.5)
- other injury (S06.-)

P52.0 Intraventricular (nontraumatic) haemorrhage, grade 1, of fetus and newborn

Subependymal: ~~germinal matrix haemorrhage~~

• [germinal matrix haemorrhage](#)

• [haemorrhage \(without intraventricular extension\)](#)

~~Subependymal haemorrhage (without intraventricular extension)~~

...

Q23 Congenital malformations of aortic and mitral valves

...

Q23.4 Hypoplastic left heart syndrome

Atresia, or hypoplasia of aortic orifice or valve, with: [hypoplasia of ascending aorta and underdevelopment of left ventricle \(with mitral valve stenosis or atresia\)](#)

• ~~hypoplasia of ascending aorta and underdevelopment of left ventricle with:~~

• ~~mitral valve:~~

• ~~atresia~~

• ~~stenosis~~

...

Q87.0 Congenital malformation syndromes predominantly affecting facial appearance

☛Q87.00 Cyclopia

Cyclopism

Cyclops

Synophthalmia

☛Q87.01 Acrocephalopolysyndactyly

Acrocephalopolysyndactyly: ~~type I, Noack syndrome~~

• [type I, Noack syndrome](#)

• [type II, Carpenter syndrome](#)

~~Acrocephalopolysyndactyly type II, Carpenter syndrome~~

...

R56 Convulsions, not elsewhere classified

Excludes: convulsions and seizures (in):

- diabetes with hypoglycaemia (E1-.64)
- dissociative (F44.5)
- epilepsy (G40–G41)
- newborn (P90)

R56.0 Febrile convulsions

~~▽1809~~

...

S06 Intracranial injury

Localised or limited brain tissue affected

...

S06.8 Other intracranial injuries

Traumatic [intracranial: haemorrhage/haematoma/contusion:](#)

- [contusion NOS](#)
- [haematoma NOS](#)
- [haemorrhage NOS](#)
- ~~intracranial NOS~~

...

S07 Crushing injury of head

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\) — code specific type of injury only — see Alphabetic Index](#)

...

S12 Fracture of neck

...

S12.7 Multiple fractures of cervical spine

[▽ 1915](#)

Excludes: multiple ~~fractures of~~ specified levels of cervical vertebra [— code each level separately](#) (S12.0, S12.1, S12.2-): ~~Code each level separately~~

...

S13 Dislocation, sprain and strain of joints and ligaments at neck level

...

S13.3 Multiple dislocations of neck

[▽ 1915](#)

Excludes: multiple ~~dislocations of~~ specified levels of cervical vertebra [— code each level separately](#) (S13.1-). ~~Code each level separately~~

...

S17 Crushing injury of neck

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\) — code specific type of injury only — see Alphabetic Index](#)

...

S22 Fracture of rib(s), sternum and thoracic spine

...

S22.1 Multiple fractures of thoracic spine

[▽ 1915](#)

Excludes: multiple ~~fractures of~~ specified levels of thoracic vertebra [— code each level separately](#) (S22.0-): ~~Code each level separately~~

S28 **Crushing injury of thorax and traumatic amputation of part of thorax**

S28.0 Crushed chest

Code also crush syndrome (T79.5) if applicable.

Excludes: flail chest (S22.5)

~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only with specific type of injury (eg contusion, fracture, dislocation, internal injury) — code specific type of injury only — see Alphabetic Index~~

...

S32 **Fracture of lumbar spine and pelvis**

...

S32.7 Multiple fractures of lumbar spine with pelvis

[▽ 1915](#)

Excludes: multiple: ~~fractures of specified levels of lumbar vertebra (S32.0-). Code each level separately multiple pelvic fractures (S32.89)~~

• [pelvic fractures \(S32.89\)](#)

• [specified levels of lumbar vertebra — code each level separately \(S32.0-\)](#)

...

S36.5 **Injury of colon**

...

✪S36.59 Injury of other and multiple parts of colon

Injury of: ~~appendix~~

~~Injury of caecum~~

• [appendix](#)

• [caecum](#)

...

S38 **Crushing injury and traumatic amputation of part of abdomen, lower back and pelvis**

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only with specific type of injury (eg contusion, fracture, dislocation, internal injury) — code specific type of injury only — see Alphabetic Index~~

...

S46 **Injury of muscle and tendon at shoulder and upper arm level**

Includes: sprain and strain

Excludes: injury of muscle and tendon at or below elbow (S56.-)

sprains and strains of joint capsule (ligament) (S43.-)

...

S46.8 Injury of other muscles and tendons at shoulder and upper arm level

~~Infraspinatus (muscle)~~

~~Subcapsularis (muscle)~~

~~Supraspinatus (muscle)~~

Includes: [infraspinatus \(muscle\)](#)

[subcapsularis \(muscle\)](#)

[supraspinatus \(muscle\)](#)

...

S47**Crushing injury of shoulder and upper arm**

Code also crush syndrome (T79.5) if applicable.

Excludes: crushing injury of elbow (S57.0)

~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\)](#)
— code specific type of injury only — see Alphabetic Index

...

S57**Crushing injury of forearm**

Code also crush syndrome (T79.5) if applicable.

Excludes: crushing injury of wrist and hand (S67.-)

~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\)](#)
— code specific type of injury only — see Alphabetic Index

...

S61**Open wound of wrist and hand**

▽ 1917

Use additional code T89.0- to indicate open wound with complication of foreign body, infection and delayed healing/treatment.

Excludes: traumatic amputation of wrist and hand (S68.-)

S61.0 Open wound of finger(s) without damage to nail

Open wound of: ~~finger(s) NOS~~

~~Open wound of thumb~~

• [finger\(s\) NOS](#)

• [thumb](#)

Excludes: open wound involving nail (matrix) (S61.1)

...

S67**Crushing injury of wrist and hand**

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\)](#)
— code specific type of injury only — see Alphabetic Index

...

S77**Crushing injury of hip and thigh**

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\)](#)
— code specific type of injury only — see Alphabetic Index

...

S87**Crushing injury of lower leg**

Code also crush syndrome (T79.5) if applicable.

Excludes: crushing injury of ankle and foot (S97.-)

~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ [with specific type of injury \(eg contusion, fracture, dislocation, internal injury\)](#)
— code specific type of injury only — see Alphabetic Index

...

S97 **Crushing injury of ankle and foot**

Code also crush syndrome (T79.5) if applicable.

Excludes: ~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ with specific type of injury (eg contusion, fracture, dislocation, internal injury) — code specific type of injury only — see Alphabetic Index

...

T14 **Injury of unspecified body region**

...

T14.7 **Crushing injury and traumatic amputation of unspecified body region**

Crushing injury NOS
Traumatic amputation NOS

Excludes: multiple:

- crushing injuries NOS (T04.9)
- traumatic amputations NOS (T05.9)

~~where the type of injury is known (eg contusion, fracture, dislocation, internal injury) code to the type of injury only~~ with specific type of injury (eg contusion, fracture, dislocation, internal injury) — code specific type of injury only — see Alphabetic Index

...

EFFECTS OF FOREIGN BODY ENTERING THROUGH NATURAL ORIFICE

(T15–T19)

Excludes: foreign body:

- accidentally left in operation wound (T81.5)
- in puncture wound ~~— see open wound by body region (T89.01)~~
- residual, in soft tissue (M79.5)

splinter, without major open wound — see superficial injury by body region Alphabetic Index: Splinter

...

T81 **Complications of procedures, not elsewhere classified**

Excludes: adverse effect of drug NOS (T88.7)

complication following:

- immunisation (T88.0–T88.1)
 - infusion, transfusion and therapeutic injection (T80.-)
- specified complications classified elsewhere, such as:
- dermatitis due to drugs and medicaments (L23.3, L24.4, L25.1, L27.0–L27.1)
 - failure and rejection of transplanted organs and tissues (T86.-)
 - poisoning and toxic effects of drugs and chemicals (T36–T65)

...

T81.6 **Acute reaction to foreign substance accidentally left during a procedure**

Aseptic Peritonitis: due to foreign substance accidentally left during procedure

- ~~aseptic~~
- ~~chemical~~

Includes: that with prosthetic devices, implants and grafts

...

V79 **Bus occupant injured in other and unspecified transport accidents**

- V79.0 Driver injured in collision with other and unspecified motor vehicles in nontraffic accident
- V79.1 Passenger injured in collision with other and unspecified motor vehicles in nontraffic accident
- V79.2 Unspecified bus occupant injured in collision with other and unspecified motor vehicles in nontraffic accident
Bus collision NOS, nontraffic
- V79.3 Bus occupant [any] injured in unspecified nontraffic accident
Bus: ~~accident NOS, nontraffic~~
• [accident NOS, nontraffic](#)
• [occupant injured in nontraffic accident NOS](#)
~~Bus occupant injured in nontraffic accident NOS~~

...

V91 **Accident to watercraft causing other injury**

See subdivisions

Includes: any injury except drowning and submersion as a result of an accident to watercraft
burned while ship on fire
crushed: ~~between colliding ships~~
• [between colliding ships](#)
• [by lifeboat after abandoning ship](#)
~~crushed by lifeboat after abandoning ship~~
fall due to collision or other accident to watercraft
hit by falling object as a result of accident to watercraft
injured in watercraft accident involving collision of watercraft
struck by boat or part thereof after falling or jumping from damaged boat

Excludes: burns from localised fire or explosion on board ship (V93.-)

V92 **Water-transport-related drowning and submersion without accident to watercraft**

See subdivisions

Includes: drowning and submersion as a result of an accident, such as:
• fall:
• from: ~~gangplank~~
• [gangplank](#)
• [ship](#)
~~• from ship~~
• overboard
• thrown overboard by motion of ship
• washed overboard

Excludes: drowning or submersion of swimmer or diver who voluntarily jumps from boat not involved in an accident (W69, W73)

V93 **Accident on board watercraft without accident to watercraft, not causing drowning and submersion**

See subdivisions

Includes: accidental poisoning by gases or fumes on ship
...
fall: ~~from one level to another in watercraft~~
• [from one level to another in watercraft](#)
• [on stairs or ladders in watercraft](#)
~~fall on stairs or ladders in watercraft~~
injuries in watercraft caused by:

...

W07 **Fall involving chair**

Excludes: fall involving wheelchair: ~~(W05)~~
• [in collision with pedestrian \(V00.-\)](#)
• [NOS \(W05\)](#)
~~fall involving wheelchair in collision with pedestrian (V00.-)~~

W10 **Fall on and from stairs and steps**

Includes: fall ~~(on)(from)~~ [on/from](#) incline

...

EXPOSURE TO ANIMATE MECHANICAL FORCES

(W50–W64)

Excludes: ~~bites, venomous (X20–X29)~~
[allergen, allergic reaction \(Y37.6\)](#)
[stings and venomous bites \(X20–X29\)](#)
~~stings (venomous) (X20–X29)~~

W50 **Hit, struck, kicked, twisted, bitten or scratched by another person**

Excludes: assault (X85–Y09)
struck by objects (W20–W22)

...

W75 **Accidental suffocation and strangulation in bed**

Includes: suffocation and strangulation due to:
• [another person's body \(eg parent's or carer's\)](#)
• bed linen
~~• mother's body~~
• pillow

...

W77 **Threat to breathing due to cave-in, falling earth and other substances**

Includes: cave-in NOS
Excludes: cave-in: ~~caused by cataclysm (X34–X39)~~
• [caused by cataclysm \(X34–X39\)](#)
• [without asphyxiation or suffocation \(W20\)](#)
~~cave-in without asphyxiation or suffocation (W20)~~

...

X44 **Accidental poisoning by and exposure to other and unspecified drugs, medicaments and biological substances**

Includes: agents primarily acting on smooth and skeletal muscles and the respiratory system
anaesthetics (general)(local)
anti-infectives
drugs affecting the:
• cardiovascular system
• gastrointestinal system
hormones and synthetic substitutes
systemic: ~~and haematological agents~~
• [and haematological agents](#)
• [antibiotics and other anti-infectives](#)
~~systemic antibiotics and other anti-infectives~~
therapeutic gases
topical preparations
vaccines
water-balance agents and drugs affecting mineral and uric acid metabolism

...

X64**Intentional self-poisoning by and exposure to other and unspecified drugs, medicaments and biological substances**

Includes: agents primarily acting on smooth and skeletal muscles and the respiratory system
 anaesthetics (general)(local)
 drugs affecting the:
 • cardiovascular system
 • gastrointestinal system
 hormones and synthetic substitutes
 systemic: ~~and haematological agents~~
 • [and haematological agents](#)
 • [antibiotics and other anti-infectives](#)
~~systemic antibiotics and other anti-infectives~~
 therapeutic gases
 topical preparations
 vaccines
 water-balance agents and drugs affecting mineral and uric acid metabolism

...

Y14**Poisoning by and exposure to other and unspecified drugs, medicaments and biological substances, undetermined intent**

Includes: agents primarily acting on smooth and skeletal muscles and the respiratory system
 anaesthetics (general)(local)
 drugs affecting the:
 • cardiovascular system
 • gastrointestinal system
 hormones and synthetic substitutes
 systemic: ~~and haematological agents~~
 • [and haematological agents](#)
 • [antibiotics and other anti-infectives](#)
~~systemic antibiotics and other anti-infectives~~
 therapeutic gases
 topical preparations
 vaccines
 water-balance agents and drugs affecting mineral and uric acid metabolism

...

Y36**Operations of war**

Includes: injuries to military personnel and civilians caused by war and civil insurrection

Note: Injuries due to operations of war occurring after cessation of hostilities are classified to Y36.8.

...

Y36.8 War operations occurring after cessation of hostilities

~~Injuries by explosion of bombs or mines placed in the course of operations of war, if the explosion occurred after cessation of hostilities~~

Injuries due to: ~~operations of war and classifiable to Y36.0–Y36.7 or Y36.9 but occurring after cessation of hostilities~~

• [explosion of bombs or mines placed in the course of operations of war, if the explosion occurred after cessation of hostilities](#)

• [operations of war and classifiable to Y36.0–Y36.7 or Y36.9 but occurring after cessation of hostilities](#)

...

Z45**Adjustment and management of drug delivery or implanted device**

Excludes: malfunction or other complications of device — see Alphabetic Index
presence of prosthetic and other devices (Z95–Z97)

Z45.0

▽ 0936

Adjustment and management of cardiac device

Checking and testing of:

- automatic implantable cardiac defibrillator [AICD]
- cardiac:
 - pacemaker
 - resynchronisation therapy (CRT): ~~pacemaker~~
 - [pacemaker](#)
 - [defibrillator \(CRT-D\)](#)
 - ~~resynchronisation therapy defibrillator (CRT-D)~~
- pulse generator [battery]

...

Z85**Personal history of malignant neoplasm**

▽ 0050, 2112

Excludes: follow-up: ~~examination after treatment of malignant neoplasm (Z08.-)~~
 • [examination after treatment of malignant neoplasm \(Z08.-\)](#)
 • [medical care and convalescence \(Z42–Z51, Z54.-\)](#)
~~follow-up medical care and convalescence (Z42–Z51, Z54.-)~~

...

Z86**Personal history of certain other diseases**

...

Z86.4**Personal history of psychoactive substance use disorder**

~~Conditions classifiable to F10–F19~~

Excludes: problems related to the use of:

- alcohol (Z72.1)
- drug(s) (Z72.2)
- tobacco (Z72.0)

✱Z86.41

▽ 0503

Personal history of alcohol use disorder

[Conditions classifiable to F10](#)

Excludes: current alcohol dependence (F10.2)

✱Z86.42

▽ 0503

Personal history of drug use disorder

[Conditions classifiable to F11–F16 and F18–F19](#)

History of:

- psychoactive substance abuse NOS
- unsanctioned drug use, ever, but excluding the last three months

Excludes: current drug dependence (F11–F16 [and F18–F19](#) with common fourth character .2) ~~and F18–F19 with common fourth character .2)~~

✱Z86.43

▽ 0503

Personal history of tobacco use disorder

[Conditions classifiable to F17](#)

Excludes: harmful use of tobacco (F17.1)
tobacco dependence (F17.2)

...

Z91 Personal history of risk-factors, not elsewhere classified

▽ 0050

Excludes: exposure to pollution and other problems related to physical environment (Z58.-)
occupational exposure to risk-factors (Z57.-)
personal history of psychoactive substance use disorder (Z86.4)

Z91.0 Personal history of allergy, other than to drugs and biological substances

Excludes: personal history of allergy to drugs and biological substances (Z88.-)

Z91.1 Personal history of noncompliance with medical treatment and regimen

Note: ~~This code should only be used where noncompliance is a precipitating factor in an admission. It should not be used as a principal diagnosis.~~

Z91.2 Personal history of poor personal hygiene

...

Z95 Presence of cardiac and vascular implants and grafts

▽ 0050, 0909, 0936, 0940

Excludes: complications of cardiac and vascular devices, implants and grafts (T82.-)

Z95.0 Presence of cardiac device

▽ 0936

Presence of:

- automatic implantable cardiac defibrillator [AICD]
- cardiac:
 - pacemaker
 - resynchronisation therapy (CRT): ~~pacemaker~~
 - [pacemaker](#)
 - [defibrillator \(CRT-D\)](#)
 - ~~resynchronisation therapy defibrillator (CRT-D)~~

Excludes: adjustment or management of cardiac device (Z45.0)
dependence on artificial heart (Z99.4)

ICD-10-AM Alphabetic Index

ICD-10-AM Section I: Alphabetic Index of diseases and nature of injury

Accessory (congenital)

- ...
- digit(s) [NEC Q69.9](#)
- - [finger\(s\) Q69.0](#)
- - [hallux \(halluces\) Q69.21](#)
- - [thumb\(s\) Q69.1](#)
- - [toe\(s\) NEC Q69.29](#)
- - - [hallux \(great toe\) \(halluces\) Q69.21](#)
- ear (lobe) Q17.01

- ...
- [thumb\(s\) Q69.1](#)
- thymus gland Q89.26
- thyroid gland Q89.22
- [toe\(s\) NEC Q69.29](#)
- - [hallux \(great toe\) \(halluces\) Q69.21](#)

...

ACTH ([adrenocorticotrophic hormone](#)) ectopic syndrome E24.3

...

Adenocarcinoma (M8140/3) — see also *Neoplasm/malignant*

- ...
- eccrine ~~NOS~~ [NEC](#) (M8413/3) — see also *Neoplasm/skin/malignant*

...

Adrenocortical syndrome — see *Cushing's/syndrome or disease*

[Adrenocorticotrophic hormone \(ACTH\) ectopic syndrome E24.3](#)

Adrenogenital syndrome E25.9

...

Asthma, asthmatic (bronchial) (catarrh) (spasmodic) J45.9

- with
- - COPD (chronic obstructive pulmonary disease) J44.8
- - - with (acute)
- - - - exacerbation NEC J44.1
- - - - - infective J44.0
- - - - lower respiratory infection J44.0
- - hay fever J45.0
- - rhinitis, allergic J45.0

...

- bronchitis J45.-

- - chronic ~~J44.8~~ — see [Asthma/with/COPD](#)

~~with (acute)~~

- ~~exacerbation NEC J44.1~~

~~infective J44.0~~

- ~~lower respiratory infection J44.0~~

- cardiac (see also *Failure/ventricular/left*) I50.1

- childhood J45.0

- chronic J45.-

- - obstructive ~~J44.8~~ — see [Asthma/with/COPD](#)

~~with (acute)~~

- ~~exacerbation NEC J44.1~~

~~infective J44.0~~

- ~~lower respiratory infection J44.0~~

- collier's J60

...

- nonallergic J45.1

- obstructive, chronic ~~J44.8~~ — see [Asthma/with/COPD](#)

~~with (acute)~~

- ~~exacerbation NEC J44.1~~

~~infective J44.0~~

- ~~lower respiratory infection J44.0~~

- platinum J45.0

...

Atrophy, atrophic

- ...
- seminal vesicle N50.8
- ~~— senile R54~~
- ~~— due to radiation (nonionising) (solar) L57.8~~
- skin (patches) (spots) L90.9
- - degenerative (senile) L90.8
- - due to radiation (nonionising) (solar) L57.8
- - senile L90.8
- ...

Bornholm disease B33.0

[Boss, bossing M25.7-](#)

Boston exanthem A88.0

...

Bronchiolitis (acute) (infective) (subacute) J21.9

- with
- - bronchospasm or obstruction J21.9
- - influenza, flu or grippe (*see also Influenza*) J11.1
- chronic (fibrosing) ~~(obliterative)~~ J44.8

...

- obliterative ~~(chronic)~~ ~~(subacute)~~ J44.8

...

Bronchitis (15 years of age and above) (diffuse) (fibrinous) (hypostatic) (infective) (membranous) (with tracheitis) J40

- with
- - [COPD \(chronic obstructive pulmonary disease\) J44.8](#)
- - - [with \(acute\)](#)
- - - - [exacerbation NEC J44.1](#)
- - - - - [infective J44.0](#)
- - - - - [lower respiratory infection J44.0](#)
- - influenza, flu or grippe (*see also Influenza*) J11.1
- - laryngotracheitis J05.0
- ~~— obstruction (airway) (lung) J44.8~~
- ~~— with (acute)~~
- ~~— exacerbation NEC J44.1~~
- ~~— infective J44.0~~
- ~~— lower respiratory infection J44.0~~
- acute or subacute (with bronchospasm or obstruction) J20.9
- ...
- chronic J42
- - with [airway obstruction — see Bronchitis/with/COPD](#)
- ~~— airways obstruction J44.8~~
- ~~— with (acute)~~
- ~~— exacerbation NEC J44.1~~
- ~~— infective J44.0~~
- ~~— lower respiratory infection J44.0~~
- ~~— tracheitis (chronic) J42~~
- - asthmatic ~~(obstructive) J44.8 — see Bronchitis/with/COPD~~
- ~~— with (acute)~~
- ~~— exacerbation NEC J44.1~~
- ~~— infective J44.0~~
- ~~— lower respiratory infection J44.0~~
- - chemical (due to fumes or vapours) J68.4
- - due to
- - - chemicals, gases, fumes or vapours (inhalation) J68.4
- - - radiation J70.1
- - emphysematous [J44.8 — see Bronchitis/with/COPD](#)
- ~~— with (acute)~~
- ~~— exacerbation NEC J44.1~~
- ~~— infective J44.0~~
- ~~— lower respiratory infection J44.0~~
- - mucopurulent J41.1
- - obliterans [J44.8 — see Bronchitis/with/COPD](#)
- ~~— with (acute)~~
- ~~— exacerbation NEC J44.1~~
- ~~— infective J44.0~~
- ~~— lower respiratory infection J44.0~~
- - obstructive [J44.8 — see Bronchitis/with/COPD](#)

- ~~with (acute)~~
- ~~exacerbation NEC J44.1~~
- ~~infective J44.0~~
- ~~lower respiratory infection J44.0~~
- - purulent J41.1
- - simple J41.0
- croupous (see also *Bronchitis/acute or subacute*) J05.0
- due to gases, fumes or vapours (chemical) J68.0
- emphysematous (~~obstructive~~) J44.8 — see [Bronchitis/with/COPD](#)
- ~~with (acute)~~
- ~~exacerbation J44.1~~
- ~~infective J44.0~~
- ~~lower respiratory infection J44.0~~
- exudative (see also *Bronchitis/acute or subacute*) J20.9
- fetid J41.1
- grippal (see also *Influenza*) J11.1
- in those under 15 years of age (see also *Bronchitis/acute or subacute*) J20.9
- - chronic — see *Bronchitis/chronic*
- influenzal (see also *Influenza*) J11.1
- membranous, acute or subacute (see also *Bronchitis/acute or subacute*) J20.-
- mixed simple and mucopurulent J41.8
- mucopurulent (chronic) (recurrent) J41.1
- - acute or subacute J20.9
- - and simple (mixed) J41.8
- obliterans (~~chronic~~) J44.8 — see [Bronchitis/with/COPD](#)
- ~~with (acute)~~
- ~~exacerbation NEC J44.1~~
- ~~infective J44.0~~
- ~~lower respiratory infection J44.0~~
- obstructive (~~chronic~~) (~~diffuse~~) J44.8 — see [Bronchitis/with/COPD](#)
- ~~with (acute)~~
- ~~exacerbation NEC J44.1~~
- ~~infective J44.0~~
- ~~lower respiratory infection J44.0~~
- pneumococcal, acute or subacute J20.2

...

Chorea (gravis) (spasmodic) G25.5

- with
- - heart involvement I02.0
- - - active or acute (conditions in I01.-) I02.0
- - rheumatic heart disease (chronic) (inactive) (quiescent) — ~~code to rheumatic heart condition involved~~ see [Disease/heart/rheumatic](#)

...

CIN ([cervical intraepithelial neoplasia](#)) — see *Neoplasia/intraepithelial/cervix*

...

Compression

- with injury — ~~code to~~ see [Injury/by type and site](#)

...

Constriction — *see also Stricture*

- asphyxiation or suffocation by T71
- bronchial J98.0
- duodenum K31.5
- external canal, ear H61.3
- gallbladder (*see also Obstruction/gallbladder*) K82.0
- intestine (*see also Obstruction/intestine*) K56.6
- larynx J38.6
 - - congenital Q31.8
 - - - subglottic Q31.1
- oesophagus K22.2
- organ or site, congenital NEC — *see Atresia/by site*
- prepuce (acquired) N47
- ring ~~dystocia (uterus) O62.4~~
 - - ~~affecting fetus or newborn P03.6~~
 - - ~~dystocia (uterus) O62.4~~
 - - - ~~affecting fetus or newborn P03.6~~
 - - ~~syndrome NEC Q73.89~~
 - - - ~~lower limb Q72.9~~
 - - - ~~upper limb Q71.9~~
- spastic — *see Spasm(s)*
- ureter N13.5
 - - with infection N13.6
- urethra (*see also Stricture/urethra*) N35.9
- visual field (functional) (peripheral) H53.4

~~**Constriction ring syndrome NEC Q73.89**~~

- ~~- lower limb Q72.9~~
- ~~- upper limb Q71.9~~

Constrictive — *see condition*

...

Contraction(s), contracture, contracted

...

- limb, congenital ~~NOS~~-[NEC Q74.89](#)

...

Contusion (skin surface intact) (*see also Injury/superficial*) T14.05

...

- lower ~~back S30.0~~
 - - [back S30.0](#)
 - - [leg S80.1](#)
 - - ~~lower leg S80.1~~
- lumbar region S30.0

...

Convulsions (idiopathic) (*see also Seizure(s)*) R56.8

- apoplectiform (cerebral ischaemia) I67.8
- dissociative F44.5
- epileptic (*see also Epilepsy*) G40.9-
- epileptiform, epileptoid (*see also Seizure(s)/epileptiform*) R56.8
- ether (anaesthetic)
 - - correct substance properly administered R56.8
 - - overdose or wrong substance given T41.0
- febrile ([no underlying cause](#)) R56.0
- [underlying cause identified](#) — *see condition*
- generalised R56.8

...

Cyst (colloid) (mucous) (retention) (simple)

...

- developmental K09.1
- - odontogenic (glandular) K09.0
- - oral region (nonodontogenic) K09.1
- - ovary, ovarian Q50.10
- - - multiple Q50.12
- - - single Q50.11

- [digit, hand M67.44](#)

- dura (cerebral) G93.0

...

- fimbrial (twisted) Q50.4

- [finger M67.44](#)

- follicle (graafian) (haemorrhagic) N83.0

...

- haemangiomas (M9120/0) (*see also Haemangioma/by type*) D18.0-

- [hand M67.44](#)

- hydatid (*see also Echinococcus*) B67.9

...

- Thornwaldt's J39.2

- [thumb M67.44](#)

- thymus (gland) E32.8

...

Deformity Q89.9

...

- spinal M43.9-
- - column (acquired) — *see Deformity/spine*
- - congenital Q67.59
- - - postural curvature ~~NOS-NEC~~ Q67.52
- - - scoliosis, postural Q67.51
- - cord (congenital) Q06.9
- - - acquired G95.8
- - nerve root (congenital) Q07.89
- spine (acquired) M43.9-
- - congenital Q67.59
- - - postural curvature ~~NOS-NEC~~ Q67.52

...

Dermatitis L30.9

...

- due to

...

- - varicose veins ([leg](#)) ([lower limb](#)) [NEC](#) I83.1

- - - with ulcer ([venous](#)) I83.2

- - x-rays L58.9

...

- hypostatic, hypostatica ([leg](#)) ([lower limb](#)) [NEC](#) I83.1

- - with ulcer ([venous](#)) I83.2

...

- stasis ([leg](#)) ([lower limb](#)) [NEC](#) I83.1

- - with ulcer ([venous](#)) I83.2

- suppurative L08.0

- traumatic [NEC](#) L30.4

- ultraviolet (chronic exposure) (sun) L57.8

- - acute L56.8

- varicose ([leg](#)) ([lower limb](#)) [NEC](#) I83.1

- - with ulcer ([venous](#)) I83.2

- vegetans L10.1

- verrucosa B43.0

...

Disease, diseased — see also *Syndrome*

...

- intestine K63.9
- - balantidial A07.0
- - cryptosporidial A07.2
- - functional (see also *Disorder/intestine/functional*) K59.9
- - - specified NEC K59.8
- - giardial A07.1
- - isosporial A07.3
- - microsporidial A07.8
- - organic K63.9
- - protozoal ~~NOS-NEC~~ A07.9
- - - specified ~~organism~~-NEC A07.8

...

- lung J98.4

...

- - obstructive (chronic) J44.9
- - - with (acute)
- - - - alveolitis, allergic J67.-
- - - - asthma J44.8
- - - - ~~with (acute)~~
- - - - ~~exacerbation-NEC J44.1~~
- - - - ~~infective J44.0~~
- - - - ~~lower respiratory infection J44.0~~
- - - - bronchitis J44.8
- - - - ~~with (acute)~~
- - - - ~~exacerbation-NEC J44.1~~
- - - - ~~infective J44.0~~
- - - - ~~lower respiratory infection J44.0~~
- - - - emphysematous J44.8
- - - - ~~with (acute)~~
- - - - ~~exacerbation-NEC J44.1~~
- - - - ~~infective J44.0~~
- - - - ~~lower respiratory infection J44.0~~
- - - - emphysema J44.8
- - - - ~~with (acute)~~
- - - - ~~exacerbation-NEC J44.1~~
- - - - ~~infective J44.0~~
- - - - ~~lower respiratory infection J44.0~~
- - - - exacerbation NEC J44.1
- - - - - infective J44.0
- - - - hypersensitivity pneumonitis J67.-
- - - - lower respiratory infection J44.0
- - rheumatoid (diffuse) (interstitial) M05.1-

...

Dysentery, dysenteric (catarrhal) (diarrhoea) (epidemic) (haemorrhagic) (infectious) (sporadic) (tropical) A09.0

...

- bacillary A03.9
- ...
- - Shigella A03.9
- - - boydii A03.2
- - - dysenteriae A03.0
- - - flexneri A03.1
- - - group ~~A-A03.0~~
- - - ~~group B-A03.1~~
- - - ~~group C-A03.2~~
- - - ~~group D-A03.3~~
- - - - A A03.0
- - - - B A03.1
- - - - C A03.2
- - - - D A03.3
- - - sonnei A03.3

...

Ectopic, ectopia (congenital)

- abdominal viscera Q45.85
- - due to defect in anterior abdominal wall Q79.59
- ~~ACTH syndrome E24.3~~
- adrenal (gland) Q89.14
- [adrenocorticotrophic hormone \(ACTH\) syndrome E24.3](#)
- anus Q43.5

...

- endometrium (*see also Endometriosis*) N80.9
- [eruption of tooth K00.6](#)
- gastric mucosa Q40.29

...

- tissue in lung Q33.5
- [tooth eruption K00.6](#)
- ureter

...

Eczema (acute) (chronic) (erythematous) (fissum) (rubrum) (squamous) (*see also Dermatitis*) L30.9

- dyshidrotic L30.1
- external ear H60.5
- flexural NEC L20.8
- gravitational ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
- [- with ulcer \(venous\) I83.2](#)
- herpeticum B00.0
- hypertrophicum L28.0
- hypostatic ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
- [- with ulcer \(venous\) I83.2](#)
- impetiginous L01.1
- infantile (due to any substance) L20.8
- - intertriginous L21.1
- - seborrhoeic L21.1
- intertriginous NEC L30.4
- - infantile L21.1
- intrinsic (allergic) L20.8
- lichenified NEC L28.0
- marginatum (hebrae) B35.6
- pustular L30.3
- stasis ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
- [- with ulcer \(venous\) I83.2](#)
- vaccination, vaccinatum T88.1
- varicose ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
- [- with ulcer \(venous\) I83.2](#)
- venous ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
- [- with ulcer I83.2](#)

...

Epilepsy, epileptic, epilepsia G40.9-

...

- traumatic (injury unspecified) T90.5
- - [specified injury-specified](#) — ~~code to see~~ [Sequelae/by specific injury](#)

...

Fever R50.9

...

- postprocedural (~~due to infection~~) R50.9
- - due to wound infection T81.4

...

- rheumatic (active) (acute) (chronic) (subacute) I00

...

- - inactive or quiescent with

...

- - - heart ~~disease NEC I09.8~~
- - - ~~heart failure (conditions in I50.0, I50.9) (congestive) I09.8~~
- - - - [disease NEC I09.8](#)
- - - - [failure \(conditions in I50.0, I50.9\) \(congestive\) I09.8](#)
- - - left ventricular failure (conditions in I50.1) I09.8

...

Fracture (abduction) (adduction) (avulsion) (closed) (comminuted) (compound) (compression) (depressed) (dislocated) (displaced) (elevated) (fissured) (~~greenstick~~) (~~impacted~~) (infected) (linear) (missile) (oblique) (open) (puncture) (separation) (simple) (slipped epiphysis) (spiral) T14.2-

...

- impaction, impacted — ~~code as see~~ [Fracture/by site](#)

...

Glomerulonephritis (*see also Nephritis*) N05.-

~~Note: Where a term is indexed only at the three character level, eg N01, reference should be made to the list of fourth character subdivisions in the Tabular List of Diseases.~~

- with [oedema \(see also Nephrosis\) N04.-](#)
- ~~oedema (see also Nephrosis) N04.-~~
- acute N00.-

...

Haematoma (skin surface intact) (traumatic) (*see also Contusion*) T14.08

...

- [perinephric S37.01](#)
- - [nontraumatic K66.1](#)
- perirenal S37.01

...

Haemoglobin — *see also condition*

- abnormal (disease) — *see Disease/haemoglobin or Hb*
- AS genotype D57.3
- ~~fetal, hereditary persistence (HPFH) D56.4~~
- [hereditary persistence of fetal \(HPFH\) D56.4](#)
- low NEC D64.9
- S (Hb S), heterozygous D57.3

...

Hernia, hernial (acquired) (recurrent) K46.9

...

- [hiatus](#), hiatal (oesophageal) (sliding) K44.9

...

Heterotopia, heterotopic — *see also Malposition/congenital*

- cerebri Q04.8
- [duodenal gastric](#)
- - [congenital Q43.82](#)
- - [specified NEC K31.88](#)

Heterotropia H50.4

...

- **Hexadactylylism** [NEC \(see also Accessory/digit\(s\)\)](#) Q69.9

...

Human

...

- papillomavirus (as cause of disease classified elsewhere) B97.7
- - with [warts](#)
- - - [anogenital \(see also Wart\(s\)/anogenital region\) A63.00](#)
- - - [specified NEC B07](#)
- ~~----- warts~~
- ~~----- anogenital A63.00~~
- ~~----- specified NEC B07~~

...

Hypersecretion

- ~~----- ACTH (not associated with Cushing's syndrome) E27.0~~
- ~~----- pituitary E24.0~~
- adrenaline E27.5
- [adrenocorticotrophic hormone \(ACTH\) \(not associated with Cushing's syndrome\) E27.0](#)
- - [pituitary E24.0](#)
- adrenomedullary E27.5
- ...
- hormone(s)
- ~~----- ACTH (not associated with Cushing's syndrome) E27.0~~
- ~~----- pituitary E24.0~~
- - [adrenocorticotrophic hormone \(ACTH\) \(not associated with Cushing's syndrome\) E27.0](#)
- - - [pituitary E24.0](#)
- - antidiuretic E22.2

...

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (primary) (systemic) I10

- benign, intracranial G93.2
- cardiorenal (disease) I13.9
- - with
- - - [chronic kidney disease \(CKD\) stage 5 \(kidney failure\) I13.1](#)
- - - - and heart failure (congestive) I13.2
- cardiovascular
- - disease (arteriosclerotic) (sclerotic) (see also Hypertension/heart) I11.9
- - - with heart failure (congestive) (see also Hypertension/heart) I11.0
- - - - with [chronic kidney disease \(CKD\) stage 5 \(kidney failure\) I13.2](#)
- - kidney (disease) (sclerosis) (see also Hypertension/cardiorenal) I13.9
- - - with [chronic kidney disease \(CKD\) stage 5 \(kidney failure\) I13.1](#)
- - - - with heart failure I13.2
- ...
- kidney (condition in N00–N07, N18–N19 or N26 due to hypertension) (disease) I12.9
- - with
- ~~----- CKD stage 1–4 I12.9~~
- ~~----- CKD stage 5 (kidney failure) I12.0~~
- - - [chronic kidney disease \(CKD\) \(stage 1–4\) I12.9](#)
- - - - [stage 5 \(kidney failure\) I12.0](#)
- - - - heart involvement (conditions in I51.4–I51.9 due to Hypertension) (see also Hypertension/cardiorenal) I13.9
- - - - - with heart failure (congestive) I13.0
- - - - - with [chronic kidney disease \(CKD\) stage 5 \(kidney failure\) I13.2](#)
- - - hypertensive heart disease (conditions in I11.-) (see also Hypertension/cardiorenal) I13.9
- - - - with heart failure (congestive) I13.0
- - - - - with [chronic kidney disease \(CKD\) stage 5 \(kidney failure\) I13.2](#)

...

Hyposecretion

- ~~----- ACTH E23.0~~
- [adrenocorticotrophic hormone \(ACTH\) E23.0](#)
- antidiuretic hormone E23.2

...

Infection, infected (opportunistic) (see also Infestation) B99

...

- protozoal NEC B64
- - intestinal ~~NOS~~ NEC A07.9
- - - specified NEC A07.8
- - specified NEC B60.8

...

Leukaemia (M9800/3) C95.9-

...

- myeloid (M9860/3) C92.9-
- - acute NEC (M9861/3) C92.0-
- - - with
- - - - 11q23-abnormality (M9897/3) C92.6-
- - - - abnormal marrow eosinophils (M9871/3) C92.0-
- - - - maturation (M9874/3) C92.0-
- - - - MLL-gene variation (M9897/3) C92.6-
- - - - multilineage dysplasia (M9895/3) C92.8-
- - - - mutated ~~CEBPA (M9861/3) C92.0-~~
- - - - ~~mutated NPM1 (M9861/3) C92.0-~~
- - - - [CEBPA \(M9861/3\) C92.0-](#)
- - - - [NPM1 \(M9861/3\) C92.0-](#)
- - - - myelodysplasia-related changes (M9895/3) C92.8-

...

Limitation, limited

- activities due to disability Z73.6
- airway, chronic ~~NOS-NEC~~ (see also *Disease/lung/obstructive*) J44.9
- cardiac reserve — see *Disease/heart*

...

Lipodermatosclerosis (leg) (lower limb) NEC I83.1

- [with ulcerated \(venous\) I83.2](#)

...

Multiple, multiplex — see also condition

- arteries, renal Q27.29
- birth, affecting fetus or newborn P01.5
- delivery — see *Delivery/multiple*
- digit(s) (congenital) [NEC \(see also Accessory/digit\(s\)\) Q69.9](#)
- diseases NEC, resulting from HIV disease B22

...

Neoplasm, neoplastic

...

- infratentorial ~~NOS-NEC~~.....C71.7 C79.3 - D33.1 D43.1

...

Nephritis, nephritic N05.-

~~Note: Where a term is indexed only at the three character level, eg N00., reference should be made to the list of fourth character subdivisions in the Tabular List of Diseases.~~

- with

...

Nephropathy (see also Nephritis) N28.9

~~Note: Where a term is indexed only at the three character level, eg N07., reference should be made to the list of fourth character subdivisions in the Tabular List of Diseases.~~

- with
- - glomerular lesion — see *Glomerulonephritis*

...

Nephrosis, nephrotic (congenital) (Epstein's) (syndrome) N04.-

~~Note: Where a term is indexed only at the three character level, eg N04., reference should be made to the list of fourth character subdivisions in the Tabular List of Diseases.~~

- with
- - glomerular lesion N04.-

...

Peritonitis (adhesive) (fibrinous) (with effusion) K65.9

- with ~~or following~~
- - abscess K65.0
- - appendicitis (localised) (perforation) (rupture) NEC K35.3
- - - generalised K35.2
- - diverticular disease (intestine) K57.8-
- ~~insertion of prosthetic device, implant or graft NEC T85.78~~
- ~~peritoneal dialysis T85.71~~
- acute K65.0
- aseptic ~~T81.6~~ [NEC K65.8](#)
- - acute [K65.0](#)
- bile, biliary K65.8
- chemical ~~T81.6~~ [NEC K65.8](#)
- - acute [K65.0](#)
- chlamydial A74.8† K67.0*
- congenital NEC P78.1
- diaphragmatic K65.0
- diffuse NEC (~~see also Peritonitis/generalised~~) K65.0
- diphtheritic A36.8† K67.8*
- disseminated NEC (~~see also Peritonitis/generalised~~) K65.0
- due to ~~foreign substance accidentally left during a procedure (chemical) (powder) (talc) T81.6~~
- - ~~foreign substance accidentally left during a procedure (powder) (talc) T81.6~~
- - ~~prosthetic device, implant or graft NEC T85.78~~
- - - ~~peritoneal dialysis T85.71~~
- eosinophilic K65.8
- - acute K65.0
- fibrocaceous (tuberculous) A18.3† K67.3*
- fibropurulent K65.0
- following
 - - abortion (subsequent episode) O08.0
 - - - current episode — *see Abortion*
 - - ectopic or molar pregnancy O08.0
 - - generalised K65.0
- ~~with or following appendicitis (acute) (perforation) (rupture) NEC K35.2~~
- gonococcal A54.8† K67.1*
- - pelvis A54.2
- - - female pelvic inflammatory disease A54.2† N74.3*
- localised K65.0
- ~~with or following appendicitis (acute) (perforation) (rupture) NEC K35.3~~
- meconium (newborn) P78.0
- ...
- septic K65.0
- [specified NEC K65.8](#)
- subdiaphragmatic K65.0
- ...

Phlebitis (infective) (pyaemic) (septic) (suppurative) (ulcerative) NEC I80.9

- ...
- varicose (leg) (lower limb) [NEC I83.1](#)
- - with ulcer ([venous](#)) I83.2
- ...

Polydactylism, polydactyly [NEC \(see also Accessory/digit\(s\)\)](#) Q69.9

...

Polyp, polypus

- ...
- colon ~~NOS~~ [NEC](#) K63.50
- ...
- intestine ~~NOS~~ [NEC](#) K63.8
- ...

Postural — *see also condition*

- [orthostatic tachycardia syndrome G90.8](#)
- talipes equinovarus Q66.02

...

Seizure(s) (see also *Convulsions*) R56.8

- akinetic G40.3-
- apoplexy, apoplectic I64
- atonic G40.3-
- autonomic (hysterical) F44.5
- brain or cerebral I64
- convulsive (see also *Convulsions*) R56.8
- cortical (focal) (motor) G40.1-
- epileptic (see also *Epilepsy*) G40.9-
 - - complex partial G40.2-
 - - localised onset G40.0-
 - - nonspecific (atonic) (clonic) (myoclonic) (tonic) (tonic-clonic) G40.3-
 - - simple partial G40.1-
- epileptiform, epileptoid R56.8
- - focal G40.1-
- febrile ([no underlying cause](#)) R56.0
- - [underlying cause identified — see condition](#)
- grand mal — see *Grand mal*

...

Stasis

- bile (noncalculous) K83.1
- bronchus J98.0
 - - with infection (see also *Bronchitis*) J40
- caecum or colon K59.8
- cardiac (see also *Failure/heart/congestive*) I50.0
- dermatitis ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
 - - [with ulcer \(venous\)](#) I83.2
- duodenal K31.5
- eczema ([leg](#)) ([lower limb](#)) [NEC](#) I83.1
 - - [with ulcer \(venous\)](#) I83.2
- ileum K59.8
- intestinal K59.8
- jejunum K59.8
- liver (cirrhotic) — see *Cirrhosis/cardiac*
- lymphatic I89.8
- pulmonary (see also *Oedema/lung*) J81
- ulcer ([leg](#)) ([lower limb](#)) [NEC](#) I83.0
 - - [inflamed or infected](#) I83.2
- urine R33
- venous [NEC](#) I87.8
 - - [with ulcer \(leg\) \(lower limb\) NEC](#) I83.0
 - - - [inflamed or infected](#) I83.2

...

Supernumerary (congenital)

...

- digit(s) [NEC](#) Q69.9
 - - [finger\(s\)](#) Q69.0
 - - [hallux \(halluces\)](#) Q69.21
 - - [thumb\(s\)](#) Q69.1
 - - [toe\(s\)](#) [NEC](#) Q69.29
 - - - [hallux \(great toe\) \(halluces\)](#) Q69.21
 - ear Q17.01
 - fallopian tube Q50.69
 - finger(s) Q69.0
- ...
- testis Q55.24
 - thumb(s) Q69.1
 - toe(s) [NEC](#) Q69.29
 - - hallux (great toe) (halluces) Q69.21

...

Syndrome NEC — (see also *Disease*) [U91](#)

...
- acquired immunodeficiency — see *Human/immunodeficiency virus (HIV) disease*

~~—ACTH ectopic E24.3~~

- acute abdominal R10.0
- Adams-Stokes(-Morgagni) I45.9
- Adie(-Holmes) H57.0
- adiposogenital E23.6
- adrenal
 - - haemorrhage (meningococcal) A39.1† E35.1*
 - - meningococcal A39.1† E35.1*
- adrenocortical E27.0
 - - with Cushing's syndrome — see *Cushing's*
- [adrenocorticotrophic hormone \(ACTH\) ectopic E24.3](#)
- adrenogenital E25.9
- - congenital, associated with enzyme deficiency E25.0

...
- Claude I66.8† G46.3*

- [Bernard-Horner G90.2](#)

- ~~— traumatic S14.5~~

~~—Claude Bernard Horner G90.2~~

~~—traumatic S14.5~~

- climacteric N95.1

...
- Cushing's E24.-

- - alcohol-induced pseudo E24.4
- - drug-induced E24.2
- - ectopic [adrenocorticotrophic hormone \(ACTH\) E24.3](#)
- ...
- ectopic [adrenocorticotrophic hormone \(ACTH\) E24.3](#)

- post-thrombotic I87.0

- [postural orthostatic tachycardia G90.8](#)

- postvagotomy K91.1

...

Ulcer, ulcerated, ulcerating, ulceration, ulcerative L98.4

...

- due to
 - - infection NEC — see *Ulcer/skin*
 - - radiation NEC L59.8
 - - trophic disturbance (any region) — see *Ulcer/skin*
- ~~—venous insufficiency I87.2~~
- - x-ray L58.1

...

- foot (indolent) L97.0
 - - perforating L97.0
 - - - leprous A30.1
 - - - syphilitic A52.1
 - - varicose [NEC \(see also Ulcer/foot/venous\) I83.0](#)
 - - venous NEC ([see also Ulcer/venous](#)) I83.0
 - ~~—due to venous insufficiency I87.2~~
 - ~~—inflamed or infected I83.2~~
 - ~~—postphlebotic (post thrombotic) I87.0~~

...

- lower limb (atrophic) (chronic) (neurogenic) (perforating) (pyogenic) (trophic) (tropical) L97.9
 - - foot ([see also Ulcer/foot](#)) L97.0
 - - specified site NEC L97.8
 - - varicose [NEC \(see also Ulcer/lower limb/venous\) I83.0](#)
 - - venous NEC ([see also Ulcer/venous](#)) I83.0
 - ~~—due to venous insufficiency I87.2~~
 - ~~—inflamed or infected I83.2~~
 - ~~—postphlebotic (post thrombotic) I87.0~~

...

- varicose [NEC \(see also Ulcer/venous\) I83.0](#)
- - nasal septum I86.8
- - oesophagus I85.9
 - - - bleeding I85.0
- - scrotum I86.1
- - specified site NEC I86.8

- vas deferens N50.8
- venous NEC I83.0
- ~~— due to venous insufficiency I87.2~~
- - inflamed or infected I83.2
- - postphlebitic (post-thrombotic) I87.0
- vulva (acute) (infectious) N76.6

...

Varicose

- aneurysm (ruptured) I77.0
- dermatitis [\(leg\) \(lower limb\) NEC](#) I83.1
- - [with ulcer \(venous\) I83.2](#)
- eczema [\(leg\) \(lower limb\) NEC](#) I83.1
- - [with ulcer \(venous\) I83.2](#)
- phlebitis ~~— see Varicose/vein/inflamed or infected~~ [\(leg\) \(lower limb\) NEC](#) I83.1
- - [with ulcer \(venous\) I83.2](#)
- placental vessel O43.8
- tumour — see *Varicose/vein*
- ulcer [\(leg\) \(lower limb, any part\) \(venous\) NEC](#) I83.0
- - inflamed or infected I83.2
- - nasal septum I86.8
- - oesophagus I85.9
- - - bleeding I85.0
- - scrotum I86.1
- - specified site NEC I86.8
- vein [\(leg\) \(lower limb\) \(ruptured\) NEC](#) I83.9
- - anus (*see also Haemorrhoids*) I86.8
- - congenital (peripheral) Q27.8
- - in pregnancy O22.9
- - inflamed or infected I83.1
- - - with ulcer (venous) I83.2
- - oesophagus (ulcerated) [NEC \(see also Varix/oesophagus\)](#) I85.9
- ~~— bleeding I85.0~~
- - pelvis I86.2
- - puerperal, postpartum O87.9
- - rectum (*see also Haemorrhoids*) I86.8
- - scrotum (ulcerated) I86.1
- - specified site NEC I86.8
- - sublingual I86.0
- - ulcerated [NEC \(see also Varicose/ulcer\)](#) I83.0
- ~~— inflamed or infected I83.2~~
- - umbilical cord, affecting fetus or newborn P02.6
- - vulva I86.3
- vessel [NEC \(see also Varicose/vein\)](#) I83.9
- - placenta O43.8

Varicosis, varicosities, varicosity (*see also Varix*) I83.9

Variola (major) (minor) B03

Varioloid B03

...

Varix (leg) (lower limb) (ruptured) [NEC \(see also Varicose/vein\)](#) I83.9

~~with~~

~~inflammation or infection~~ I83.1

~~with ulcer (venous)~~ I83.2

~~stasis dermatitis~~ I83.1

~~with ulcer~~ I83.2

~~ulcer (venous)~~ I83.0

~~with inflammation or infection~~ I83.2

- aneurysmal I77.0

- anus (*see also Haemorrhoids*) I86.8

- bladder I86.2

- broad ligament I86.2

- congenital (any site) Q27.8

- gastric I86.4

- in pregnancy O22.9

~~inflamed or infected~~ I83.1

~~ulcerated~~ I83.2

- labia (majora) I86.3

- oesophagus (ulcerated) [NEC](#) I85.9

- - bleeding I85.0

- - congenital Q27.8

- - in (due to)

- - - alcoholic liver disease K70.-† I98.2*

- - - - with bleeding K70.-† I98.3*

- - - - cirrhosis of liver K74.-† I98.2*

- - - - with bleeding K74.-† I98.3*

- - - - schistosomiasis B65.-† I98.2*

- - - - with bleeding B65.-† I98.3*

- - - - toxic liver disease K71.-† I98.2*

- - - - with bleeding K71.-† I98.3*

- orbit I86.8

- - congenital Q27.8

- ovary I86.2

- papillary I78.1

- pelvis I86.2

- pharynx I86.8

- placenta O43.8

- puerperal, postpartum O87.9

- rectum (*see also Haemorrhoids*) I86.8

- renal papilla I86.8

- retina H35.0

- scrotum (ulcerated) I86.1

- sigmoid colon I86.8

- specified site NEC I86.8

- spinal (cord) (vessels) I86.8

- spleen, splenic (vein) (with phlebolith) I86.8

- stomach I86.4

- sublingual I86.0

~~ulcerated~~ I83.0

~~inflamed or infected~~ I83.2

- umbilical cord, affecting fetus or newborn P02.6

- uterine ligament I86.2

- vocal cord I86.8

- vulva I86.3

Wound, open (animal bite) (cut) (laceration) (puncture wound) (shot wound) (~~with penetrating foreign body~~)-T14.1

Section II: External Causes of Injury Alphabetic Index

Contact (accidental)

- with
- ...
- snake NEC W59.1
- ...
- venomous ~~NOS-NEC~~ X20.09
- specified NEC X20.08
- ...

Fall, falling (accidental) W19

- ...
- due to
- collision (of)
- pedestrian in transport accident — see *Accident/transport/pedestrian*
- watercraft V91.-
- - [loss of balance W01.2](#)
- - watercraft accident V91.-
- ...
- same level NEC W18.9
- - from
- being crushed, pushed, or stepped on by a crowd or human stampede W52
- collision, pushing, shoving, by or with other person W03
- - - [loss of balance W01.2](#)
- slipping W01.0
- stumbling W01.2
- tripping W01.1

Section III: Table of Drugs and Chemicals

| Substance
Key: Generic Names (Brand Names) | Poisoning | | | | Adverse
effect in
therapeutic
use |
|--|-----------------------|---------------------|--------------------------|------------------------|--|
| | Chapter 19 | Accidental | Intentional
Self-harm | Undetermined
intent | |
| <i>Note: digits are ignored in the alphabetical sequencing of terms in this table.</i> | | | | | |
| Acrylonitrile | | | | | |
| ACTH..... | T38.8 | X44 | X64 | Y14 | Y42.8 |
| Actinomycin (C) (D) | | | | | |
| ... | | | | | |
| Adrenocorticotrophic hormone (ACTH) | T38.8 | X44 | X64 | Y14 | Y42.8 |
| ... | | | | | |
| DTIC | T45.1 | X44 | X64 | Y14 | Y43.3 |
| Duloxetine | T43.2 | X41 | X61 | Y11 | Y49.2 |
| Dyclonine | T41.3 | X44 | X64 | Y14 | Y48.3 |

ACHI TABULAR LIST

465

Metallic restoration

- Includes:* direct restoration using:
- amalgam (mercury based alloy)
 - galloy (gallium based alloy)
 - gold foil
- indirect restoration using:
- chrome cobalt
 - gold
 - non-precious metal

97511-01 Metallic restoration of tooth, 1 surface, direct

~~Filling of tooth-NOS~~

97512-01 Metallic restoration of tooth, 2 surfaces, direct

...

1090

Urinary catheterisation

36800-00 Bladder catheterisation

~~▽ 0042~~

Insertion of indwelling urinary catheter

- Excludes:* ~~that for replacement (36800-01 [1090])~~
that: ~~via:~~
- [via:](#)
 - cystostomy (37008-00 [1093])
 - cystostomy (37011-00 [1093], 37008-02 [1094])
 - [with endoscopic replacement \(36800-01 \[1090\]\)](#)

36800-01 Endoscopic replacement of indwelling urinary catheter

- Excludes:* replacement of:
- cystostomy tube (36800-02 [1092])
 - ureterostomy tube (90367-00 [1069])

36800-03 Endoscopic removal of indwelling urinary catheter

Excludes: that with replacement (36800-01 [1090])

...

1296

Examination procedures on other gynaecological sites

35500-00 Gynaecological examination

~~▽ 1431~~

- Palpation of:
- fallopian tubes
 - ovaries
 - uterus
- Pelvic examination
- Visual and manual examination of:
- cervix
 - vagina
 - vulva

Excludes: that with any other gynaecological procedure – omit code

ACHI ALPHABETIC INDEX

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block* [1920] *with extension -19*

...
- specified site — *see also Administration/indication OR Administration/type of agent*

...
- type of agent — *see also Administration/indication OR Administration/specified site*

...
- - plasma 92062-00 [1893]
- - - platelet rich
- - - - dressing, wound 96255-00 [1601]
- - - - joint 50124-01 [1552]
- - platelets 13706-03 [1893]

...
- - thrombolytic
- - - with
- - - - angioplasty — *see Angioplasty*
- - - - embolectomy — *see Embolectomy*
- - - - thrombectomy — *see Thrombectomy*
- - - systemic effect
- - - - intra-arterial 96196-01 [1920]
- - - - intravenous 96199-01 [1920]
- - - via transcatheter administration of thrombolytic agent (open) (percutaneous) 35317-01 [741]
- - tissue expander (skin) (soft tissue) (subcutaneous tissue) 45566-01 [1661]

...
Assessment (of) 96037-00 [1824]

...
- pelvic floor muscle 35500-00 [1296]
- - with any other gynaecological procedure — *omit code*
- physiological 92001-00 [1820]
...
- - gynaecological 35500-00 [1296]
- - - with any other gynaecological procedure — *omit code*
- - hearing function 96009-00 [1820]

...
Brace — *see Immobilisation*

Brachioplasty — *see Lipectomy/arm*

Brachytherapy

...
Correction — *see also Repair*

...
- pectus deformity (radical)
- - carinatum 38457-00 [564]
- - excavatum 38457-01 [564]
- - - with implantation of prosthesis (subcutaneous) 38458-00 [564]
- - Peyronie's disease (plaque) 37417-00 [1197]
- pseudoarthrosis — *see also Excision/lesion(s)/bone*

...
Debridement

...
- nerve — *see Neurectomy*
- oral cavity NEC 97250-00 [456]
- - with any other periodontal procedure — *omit code*
- peritoneal cavity (with lavage) 30396-00 [989]

...
Examination — *see also Assessment*

...
- gynaecological 35500-00 [1296]
- - with any other gynaecological procedure — *omit code*
- hypospadias

Graciloplasty (for incontinence)

- ~~- for incontinence~~
- ~~- anal (dynamic) (perineal) 32203-00 [940]~~
- ~~- revision of 32203-01 [940]~~
- anal (dynamic) (perineal) 32203-00 [940]
- - revision 32203-01 [940]
- female (stress incontinence) 37044-01 [1110]
- - revision 37044-02 [1110]
- male (stress incontinence) 37044-00 [1109]
- - revision 37044-03 [1109]
- ~~- stress (with prosthesis)~~
- ~~- female 37044-01 [1110]~~
- ~~- male 37044-00 [1109]~~

...

Lift

- arm (1 excision) (unilateral) 30168-00 [1666]
- - ≥ 2 excisions (bilateral) 30171-00 [1666]
- brow (bilateral) 45588-01 [1675]

...

Mastectomy

- modified radical — see *Mastectomy/simple AND Excision/lymph node/axilla*
- partial 31500-00 [1744]
- - following previous open biopsy or excision 31515-00 [1744]
- simple (unilateral) 31518-00 [1748]
- - bilateral 31518-01 [1748]
- - extended — see *Mastectomy/simple AND Excision/lymph node/axilla*
- skin sparing — see *Mastectomy/subcutaneous*
- subcutaneous (unilateral) 31524-00 [1747]
- - bilateral 31524-01 [1747]
- total — see *Mastectomy/simple*

...

Osteotomy NEC 90569-00 [1556]

- accessory bone NEC 48400-00 [1556]
- calcaneus (wedge) [NEC 48406-15 \[1528\]](#)
- - for tarsal coalition 50333-00 [1532]
- - with internal fixation [48409-15 \[1528\]](#)
- carpal bone 48406-13 [1443]

...

Plication

...

- muscle, rectal
- - with mucosal excision (Delorme) 32111-00 [933]
- Nesbit [37417-00 \[1197\]](#)
- sphincter, urinary bladder 37375-00 [1123]
- urethrovesical junction
- - for stress incontinence (with prosthesis) 37043-00 [1110]
- uterosacral (laparoscopic) (ligament) 35684-00 [1271]
- - for repair of prolapse
- - - pelvic floor 35577-00 [1283]
- - - vagina — see *Repair/prolapse, prolapsed/pelvic floor/vaginal vault*
- - with repair of anterior and posterior vaginal compartment, vaginal approach 35573-00 [1283]
- - via laparotomy 35684-01 [1271]
- venous valve 34818-00 [736]

...

Procedure

- for

...

- - Peyronie's [disease](#) (plaque)
- - - correction 37417-00 **[1197]**
- - - injection 37415-00 **[1192]**

...

- nerve (cranial) (peripheral) (sympathetic) NEC 90016-01 **[86]**
- - diagnostic NEC 90016-00 **[86]**

- [Nesbit 37417-00 \[1197\]](#)

- Nissen's fundoplication — see *Fundoplasty/abdominal approach OR Fundoplasty/laparoscopic approach*

...

- sling ([for stress incontinence](#))

~~— for stress incontinence~~

~~— female 35599-00 **[1110]**~~

~~— revision 35599-01 **[1110]**~~

~~— male 37044-00 **[1109]**~~

~~— revision 37044-03 **[1109]**~~

~~— revision~~

~~— female 35599-01 **[1110]**~~

~~— male 37044-03 **[1109]**~~

- - [female 35599-00 \[1110\]](#)

- - - [revision 35599-01 \[1110\]](#)

- - intestinal, prior to radiotherapy 32183-00 **[925]**

- - [male 37044-00 \[1109\]](#)

- - - [revision 37044-03 \[1109\]](#)

...

Removal — see also *Excision*

...

- catheter

- - artery 34530-01 **[694]**

- - - connected to vascular access device (infusion port) (Port-A-Cath) (subcutaneous reservoir) 34530-05 **[766]**

- - bladder (~~endoscopic~~) (indwelling) ~~36800-03 **[1090]**~~ [NEC 92119-00 \[1902\]](#)

- - - [endoscopic 36800-03 \[1090\]](#)

- - - - [with replacement 36800-01 \[1090\]](#)

~~— with replacement 36800-01 **[1090]**~~

~~— nonoperative (nonendoscopic) NEC 92119-00 **[1902]**~~

- - central vein (closed) (cuffed) (CVC) (femoral) (jugular) (percutaneous) (subclavian) 34530-04 **[738]**

...

- - urinary (~~endoscopic~~) (indwelling) ~~36800-03 **[1090]**~~ [NEC 92119-00 \[1902\]](#)

- - - [endoscopic 36800-03 \[1090\]](#)

- - - - [with replacement 36800-01 \[1090\]](#)

~~— with replacement 36800-01 **[1090]**~~

~~— nonoperative (nonendoscopic) NEC 92119-00 **[1902]**~~

- - vein 34530-04 **[738]**

...

Replacement

...

- catheter

- - bladder (~~endoscopic~~) (indwelling) 36800-01 **[1090]**

- - peritoneal

- - - for renal dialysis (indwelling) (Tenckhoff) 13109-01 **[1062]**

- - - access device (port-catheter) 90376-01 **[983]**

- - spinal (caudal) (epidural) (intrathecal) (subarachnoid) 39125-00 **[39]**

- - urinary (~~endoscopic~~) (indwelling) 36800-01 **[1090]**

...

Revision (partial) (total)

...

- sling procedure ([for stress incontinence](#))

- - female 35599-01 **[1110]**

- - male 37044-03 **[1109]**

...

Sling procedure (for stress incontinence)

- for immobilisation — see *Immobilisation*
- ~~immobilisation — see *Immobilisation*~~
- ~~stress incontinence~~
- ~~female 35599-00 [1110]~~
- ~~revision 35599-01 [1110]~~
- ~~male 37044-00 [1109]~~
- ~~revision 37044-03 [1109]~~
- ~~revision~~
- ~~female 35599-01 [1110]~~
- ~~male 37044-03 [1109]~~
- female 35599-00 [1110]
- revision 35599-01 [1110]
- intestinal, prior to radiotherapy 32183-00 [925]
- male 37044-00 [1109]
- revision 37044-03 [1109]

...

Transplant, transplantation

- muscle NEC (see also *Flap/muscle*) 47966-01 [1573]
- - extraocular (adjustable) (Hummelsheim) 42848-00 [216]
- - - for strabismus 42848-00 [216]
- - - reoperation (redo) 42848-01 [219]
- - gracilis — see *Graciloplasty*
- ~~for incontinence~~
- ~~anal 32203-00 [940]~~
- ~~stress (bladder)~~
- ~~female (with prosthesis) 37044-01 [1110]~~
- ~~male (with prosthesis) 37044-00 [1109]~~
- - temporalis
- - - with exenteration of orbit 42536-02 [225]
- - - and skin graft 42536-03 [225]

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS

...

14. Genitourinary system

- 1404 Admission for kidney dialysis
- 1428 Diethylstilboestrol (DES) syndrome
- 1429 Loin pain/haematuria syndrome
- ~~1431 Examination under anaesthesia (EUA), gynaecology~~
- 1433 Bladder retraining
- 1434 Ovarian cysts
- 1437 Infertility
- 1438 Chronic kidney disease

...

18. Symptoms, signs and abnormal clinical and laboratory findings, NEC

- 1805 Acopia
- 1807 Acute and chronic pain
- 1808 Incontinence
- ~~1809 Febrile convulsions~~
- 1810 Skin tear and frail skin

0001 PRINCIPAL DIAGNOSIS

...

EXAMPLE 1:

Diagnoses as listed on the front sheet:

Diabetes mellitus

Coronary artery disease

Myocardial infarction

History of present illness:

Patient experienced severe chest pain on the morning of admission and was transported by ambulance to hospital and admitted to the coronary care unit.

In this example, the information from the clinical record indicates that myocardial infarction is the principal diagnosis.

The circumstances of inpatient admission will always govern the selection of principal diagnosis. In determining principal diagnosis, the coding directives in the ICD-10-AM manuals take precedence over all other guidelines (see ICD-10-AM Tabular List: *Conventions used in the [ICD-10-AM Tabular List of Diseases](#)* and ICD-10-AM Alphabetic Index: *Conventions [and general arrangement](#) ~~used in of the [ICD-10-AM Alphabetic Index of Diseases](#)~~*).

...

AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM)

Sequence the aetiology and manifestation (dagger and asterisk) codes according to the principal diagnosis definition. While dagger and asterisk pairs are always shown with the aetiology code sequenced first in the [ICD-10-AM Alphabetic Index](#), either code can be assigned as the principal diagnosis. Assign code combinations as specified in the [ICD-10-AM Alphabetic Index](#), or as per the discrete code ranges listed in the Tabular List (see also ICD-10-AM Tabular List: *Conventions used in the [ICD-10-AM Tabular List of Diseases/Aetiology and manifestation convention \(the 'dagger and asterisk' system\)](#)*).

...

RESIDUAL CONDITION OR NATURE OF SEQUELA

The residual condition or nature of the sequela is sequenced first, followed by the sequela code for the cause of the residual condition, except in a few instances where the Alphabetic Index directs otherwise (see also

ACS 0008 *Sequela* and ACS 1912 *Sequela* of injuries, poisoning, toxic effects and other external causes).

Note: For more information regarding choice of principal diagnosis in specific cases, refer to the following general rules and chapter specific rules. In particular, obstetric admissions, admissions for chemotherapy, radiotherapy and dialysis have special guidelines for principal diagnosis selection.

0012 SUSPECTED CONDITIONS

Clinicians may document conditions using terms that indicate uncertainty about the final diagnosis (such as probable, suspected, possible, likely, query, ?) or other similar qualifying expressions. This applies to diagnoses that have not been confirmed nor ruled out, either as principal diagnosis or additional diagnoses.

Where clinical documentation clearly indicates uncertainty about the final diagnosis at discharge, assign a code based on the following criteria:

- If a single condition is suspected, assign a code for the suspected condition.

Note: External cause codes are not included in these examples.

EXAMPLE 1:

Patient admitted with shortness of breath. The patient was discharged with a diagnosis of '?lower respiratory tract infection (LRTI)'.

Code: J22 *Unspecified acute lower respiratory infection*

EXAMPLE 2:

Patient admitted with a severe headache and neck stiffness. After review, the patient was transferred to a larger facility with a diagnosis of '?meningitis' for further investigation.

Code: G03.9 *Meningitis, unspecified*
Z75.6 *Transfer for suspected condition*

EXAMPLE 3:

[Patient admitted with viral enteritis. During the episode, patient had a seizure. A working diagnosis of suspected epilepsy was made and the patient was discharged home with an outpatient department appointment for an electroencephalogram \(EEG\).](#)

Code: [A08.4](#) *Viral intestinal infection, unspecified*
[G40.90](#) *Epilepsy, unspecified, without mention of intractable epilepsy*

- If **more than one suspected condition** is documented as the differential diagnosis:

- assign code(s) for the documented symptom(s)

OR

- if there are no symptom(s) documented, assign codes for all suspected conditions.

EXAMPLE 4:

Patient admitted with shortness of breath and wheezing. No history of respiratory problems. The patient was discharged with a diagnosis of '?asthma ?bronchiectasis'. Investigations during the episode of care did not confirm a diagnosis.

Code: R06.0 *Dyspnoea*
R06.2 *Wheezing*

EXAMPLE 5:

Patient admitted to a regional facility post motorcycle accident on the highway. Patient is transferred to the district trauma hospital with diagnosis of '?head injury and ?multiple rib fractures.

Code: S09.9 *Unspecified injury of head*
S22.40 *Multiple rib fractures, unspecified*
Z75.6 *Transfer for suspected condition*

EXAMPLE 5:

~~Patient admitted with viral enteritis. During the episode, patient has a seizure. A working diagnosis of suspected epilepsy is made and the patient is discharged home with an outpatient department appointment for an electroencephalogram (EEG).~~

~~Code: A08.4 Viral intestinal infection, unspecified~~

~~G40.90 Epilepsy, unspecified, without mention of intractable epilepsy~~

OBSERVATION FOR SUSPECTED DISEASES AND CONDITIONS (Z03.0–Z03.9)

Codes from category Z03 are assigned as principal diagnoses for admissions to evaluate the patient's condition when there is some evidence to suggest the existence of an abnormal condition or following an accident or other incident that ordinarily results in a health problem, and where no supporting evidence for the suspected condition is found and no treatment is currently required. An observation code is not assigned with additional related codes. If symptoms related to the suspected condition are noted, then the symptom codes are assigned, not Z03.-.

Z03.7- Observation and evaluation of newborn for suspected condition not found is assigned following the criteria in ACS 1611 Observation and evaluation of newborn and infants for suspected condition not found and ACS 1617 Neonatal sepsis/risk of sepsis.

EXAMPLE 6:

3-year-old child admitted for suspected ingestion of pills. Child was found with open bottle of pills. The child is asymptomatic, but is admitted for observation. After 24 hours, the child is cleared for discharge.

Code: Z03.6 Observation for suspected toxic effect from ingested substance

TRANSFER TO ANOTHER HOSPITAL FOR SUSPECTED CONDITION

In addition to the guidelines above, assign Z75.6 *Transfer for suspected condition* as a 'flag' to identify patients transferred to another facility with a suspected condition. This code is sequenced directly after the diagnosis code(s) to which it relates (**Note:** the discharge status identifies all transferred patients, therefore Z75.6 is only required as a flag for patients transferred with a suspected condition – see Examples 2 and Example 54).

0022 EXAMINATION UNDER ANAESTHESIA

...

EXAMPLE 1:

Examination under anaesthesia (EUA) of cervix using intravenous general anaesthesia.

Code: ~~35618-03 [1278]~~ *Other procedures on cervix*
~~35500-00 [1296]~~ *Gynaecological examination*
92514-~~99XX~~ [1910] *General anaesthesia, ASA 99*

~~35618-03 is accessed in the index with the lookup: Procedure/cervix.~~

EXAMPLE 2:

~~Examination under anaesthesia (EUA) of cerebral meninges using intravenous general anaesthesia.~~

Code: ~~90007-00 [28]~~ *Other diagnostic procedures on skull, brain or cerebral meninges*
~~92514-XX [1910]~~ *General anaesthesia*

~~90007-00 is accessed in the index with the lookup: Procedure/cerebral meninges/diagnostic.~~

~~See also ACS 1431 Examination under anaesthesia (EUA), gynaecology.~~

0015 COMBINATION CODES

A single code used to classify two diagnoses or a diagnosis with a manifestation or an associated complication is called a combination code. Combination codes are identified by referring to subterm entries in the [Alphabetic Index](#) and by reading the *iInclusion* and *eExclusion* notes in the Tabular List.

Assign only the combination code when that code fully identifies the diagnostic conditions involved and when the [Alphabetic Index](#) so directs.

0025 DOUBLE CODING

Although there is some argument for repeating the same code to reflect multiples of the same condition (eg bilateral varicose veins of legs, I83.9, I83.9 or bilateral Colles' fractures S52.51, S52.51), clinical coders **should not** apply this convention. The same code can only be repeated for the procedures required to treat these conditions.

EXAMPLE 1:

Varicose veins, bilateral, legs.

Procedure: Bilateral stripping and ligation of sapheno-femoral junction varicose veins.

Codes: I83.9 *Varicose veins of lower extremities without ulcer or inflammation*
32508-00, ~~32508-00~~ [727] *Interruption of sapheno-femoral junction varicose veins*
~~32508-00 [727]~~ *Interruption of sapheno-femoral junction varicose veins*

EXAMPLE 2:

Bilateral Colles' fractures.

Procedure: Closed reduction of bilateral Colles' fractures.

Codes: S52.51 *Fracture of lower end of radius with dorsal angulation*
47363-00, ~~47363-00~~ [1427] *Closed reduction of fracture of distal radius*
~~47363-00 [1427]~~ *Closed reduction of fracture of distal radius*

0030 ORGAN, TISSUE AND CELL PROCUREMENT AND TRANSPLANTATION

DEFINITIONS

AUTOLOGOUS DONATION

An autologous donor is a patient with a known disease (eg a malignancy) who is admitted to donate their own cells for reinfusion/transplantation at a later stage.

CLASSIFICATION

Assign: ~~a code for the condition that will be treated by the harvested cells.~~

- [an ICD-10-AM code for the condition to be treated by the harvested cells](#)
- [ACHI codes, as applicable](#)

ALLOGENEIC DONATION

An allogeneic donor provides organ(s)/tissue/cells for infusion/transplantation into another person. ~~— see classification guidelines below.~~

~~ORGAN, TISSUE AND CELL PROCUREMENT AND TRANSPLANTATION~~ ~~—ALLOGENEIC DONATION~~ [CLASSIFICATION](#)

1. Live donors

Patients admitted to donate organ(s)/tissue/cells usually have a principal diagnosis assigned from category ~~Z52–Z52~~ [Z52](#) *Donors of organs and tissues* or Z51.81 *Apheresis* —(see [also](#) *Organ/tissue procurement and transplantation table* ~~below~~).

Also assign ACHI code(s) performed during the episode of care.

2. Donation following death in hospital

The following guidelines apply to the classification of organ(s)/tissue/cells procurement from deceased donors:

a. In the episode during which the patient dies:

- assign as principal diagnosis the condition that occasioned the admission
- assign Z00.5 *Examination of potential donor of organ and tissue* as an additional diagnosis to indicate intent to procure, even if the organs are not subsequently procured
- do not assign the ACHI code(s) for procurement during this episode

b. In the procurement episode:

- assign as principal diagnosis the appropriate code from [category Z52–Z52](#) *Donors of organs and tissues*, even if the organs are not subsequently transplanted.

...

0031 ANAESTHESIA

...

CLASSIFICATION

...

- 1b. Assign a code(s) from block [1909] *Conduction anaesthesia* (excluding 92513-XX [1909] *Infiltration of local anaesthetic*) for each 'visit to theatre' regardless of where in the hospital the procedure is performed, for example operating theatre, endoscopy suite, emergency department, catheter laboratory. Each type of conduction anaesthesia should only be assigned once (see [Example 5](#)):

0052 SAME-DAY ENDOSCOPY – SURVEILLANCE

...

CLASSIFICATION

...

- codes from Z08 or Z09 *Follow-up examination after treatment for...* or Z11, Z12 and Z13 *Special screening examination for...* as appropriate. [That is, these codes may be assigned to reflect where a patient undergoes multiple endoscopies for different purposes within the same episode of care, and no condition is detected for one of the endoscopies \(see Example 14\).](#)

EXAMPLE 14:

[Patient admitted for oesophagogastroduodenoscopy and biopsy for known coeliac disease, and for colonoscopy due to family history of colorectal cancer. Pathology report detected evidence of coeliac disease in the biopsied tissue. No neoplasm was identified in colon or rectum.](#)

[Codes: K90.0 Coeliac disease](#)

[Z12.1 Special screening examination for neoplasm of intestinal tract](#)

[Z80.0 Family history of malignant neoplasm of digestive organs](#)

[Note: Sequence codes as per the guidelines in ACS 0001 Principal diagnosis.](#)

0104 VIRAL HEPATITIS

...

The following table summarises general classification guidelines for hepatitis A, B, C, D and E (see also 3. *Manifestations of hepatitis* and 4. *Cured/cleared hepatitis C* ~~below~~):

| CLASSIFICATION | | |
|----------------------|--|---|
| Viral Hepatitis/type | Code/description | General guidelines |
| Hepatitis A | B15.0 <i>Hepatitis A with hepatic coma</i> | <ul style="list-style-type: none"> A past history of hepatitis A may be assigned when the history meets ACS 2112 Personal history. Assign Z86.18 when hepatitis A is cured but the history is relevant to the current episode of care Where hepatitis A complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code of B15.0 or B15.9. |
| | B15.9 <i>Hepatitis A without hepatic coma</i> | |
| | O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i> | |

| | | |
|---|--|--|
| | Z86.18 <i>Personal history of other infectious and parasitic disease</i> | |
| Hepatitis B | B16.- <i>Acute hepatitis B</i>
B18.0 <i>Chronic viral hepatitis B with delta-agent</i>
B18.1 <i>Chronic viral hepatitis B without delta-agent</i>
O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i> | <ul style="list-style-type: none"> When documentation is unclear or ambiguous terms such as 'hepatitis B', 'hepatitis B positive' or 'past-history of hepatitis B' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign B18.1 the code for chronic viral hepatitis B (B18.1). Where hepatitis B complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code from B16.-, or B18.0 or B18.1. |
| Hepatitis C | B17.1 <i>Acute hepatitis C</i>
B18.2 <i>Chronic viral hepatitis C</i>
O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i> | <ul style="list-style-type: none"> When documentation is unclear or ambiguous terms such as 'hepatitis C' or 'hepatitis C positive' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign B18.2 the code for chronic viral hepatitis C (B18.2). When 'past-history of hepatitis C' is documented, assign B18.2 the code for chronic viral hepatitis C (B18.2) except when documented with terms such as 'cured', 'cleared' or 'with SVR' – see 4. <i>Cured/cleared hepatitis C below</i>. Where hepatitis C complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code of B17.1 or B18.2. |
| Hepatitis D (with acute HBV)

Hepatitis D (with chronic HBV)

Hepatitis D | B16.0 <i>Acute hepatitis B with delta-agent (coinfection) with hepatic coma</i>
B16.1 <i>Acute hepatitis B with delta-agent (coinfection) without hepatic coma</i>
B17.0 <i>Acute delta-(super)infection in chronic hepatitis B</i>
B18.0 <i>Chronic viral hepatitis B with delta-agent</i>
O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i> | <ul style="list-style-type: none"> When documentation is unclear or ambiguous terms such as 'hepatitis D', 'hepatitis D positive' or 'past-history of hepatitis D' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign B18.0 the code for chronic viral hepatitis B with delta-agent (B18.0). Where hepatitis D complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code from B16.0, B16.1, B17.0 or B18.0. |
| Hepatitis E | B17.2 <i>Acute hepatitis E</i>
B18.8 <i>Other chronic viral hepatitis</i>
O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i>

Z86.18 <i>Personal history of other infectious and parasitic disease</i> | <ul style="list-style-type: none"> A past history of hepatitis E may be assigned when the history meets ACS 2112 Personal history. Assign Z86.18 when hepatitis E is cured, but the history is relevant to the current episode of care Where hepatitis E complicates the pregnancy, childbirth or the puerperium, assign O98.4 and an additional code of B17.2 or B18.8. |

0112 INFECTION WITH DRUG RESISTANT MICROORGANISMS

...

RESISTANCE TO MULTIPLE ANTIBIOTICS OR ANTIMICROBIALS

Z06.67 *Resistance to multiple antibiotics* and Z06.77 *Resistance to multiple antimicrobial drugs* are assigned when an agent is resistant to two or more types of antibiotics or antimicrobial drugs, but the type of antibiotics or antimicrobial drugs are not specified. Where multiple resistant antibiotics or antimicrobial drugs are specified, code each resistant drug type separately.

Note: †The following examples refer to [category](#) Z06 *Resistance to antimicrobial drugs* only. A code for the infection and infective organism must be coded first.

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

...

GENERAL CLASSIFICATION RULES FOR DM AND IH

...

| | |
|----------------|---|
| Rule 6. | Multiple codes should not be used when the classification provides a combination code (see ACS 0015 Combination codes) for the DM or IH that clearly identifies all of the elements documented in the diagnosis (see examples 7 and 11). |
|----------------|---|

Hypoglycaemic and insulin reactions

1. For DM with hypoglycaemic episodes resulting from either **incorrect prescription or improper administration** of insulin or oral hypoglycaemic agents, assign:

Codes: T38.3 *Poisoning by insulin and oral hypoglycaemic [antidiabetic] drugs*
E1-.64 **Diabetes mellitus with hypoglycaemia*
X44 *Accidental poisoning by and exposure to other and unspecified drugs, medicaments and biological substances*

†See also ACS 1901 *Poisoning* and ACS 2001 *External cause code use and sequencing* ‡

2. For DM with hypoglycaemic episodes due to insulin or oral hypoglycaemic agents where the **dosage is correct or is being adjusted**, assign:

Codes: E1-.64 **Diabetes mellitus with hypoglycaemia*
Y42.3 *Insulin and oral hypoglycaemic [antidiabetic] drugs causing adverse effects in therapeutic use*

†See also ACS 1902 *Adverse effects* and ACS 2001 *External cause code use and sequencing* ‡

0503 DRUG, ALCOHOL AND TOBACCO USE DISORDERS

...

CLASSIFICATION

...

Tobacco use disorders

Documentation

~~Certain types of documentation are discussed below in terms of where these should be classified.~~

Tobacco consumption includes [use of chewing tobacco](#), and smoking of cigarettes, cigars, pipes and waterpipes (eg hookah, narghile, shisha). As electronic nicotine delivery systems (ENDS) (eg e-cigarettes, vape-pipes, e-shisha) deliver nicotine without tobacco, use of these devices does not require assignment of a code for tobacco use disorder. Documentation such as on patches, participation in a quit smoking program or trying to quit are not justification to classify to dependence (syndrome).

~~These codes should be assigned as additional diagnoses for all cases where appropriate documentation is provided regarding tobacco consumption.~~

~~Tobacco use may be classified into one of the following codes:~~

[Tobacco use is classified to the following codes, which are assigned as additional diagnoses for all cases where there is appropriate documentation in the clinical record regarding tobacco consumption:](#)

Z86.43 Personal history of tobacco use disorder

~~Assign this code if it is documented that the patient has smoked tobacco (any amount) in the past, but excluding the last month.~~ [Assign Z86.43 where there is documentation that the patient has consumed tobacco \(any amount\) in the past, but excluding the previous month.](#)

EXAMPLE 4:

A 40 year old patient diagnosed with chronic bronchitis has a history of quitting smoking three months prior to admission after having smoked since the age of 15.

| | | |
|--------|--------|---|
| Codes: | J42 | <i>Unspecified chronic bronchitis</i> |
| | Z86.43 | <i>Personal history of tobacco use disorder</i> |

Z72.0 Tobacco use, current

Assign [Z72.0](#) where ~~this code if the~~ documentation indicates that:

1. The patient has ~~smoked~~ [consumed](#) tobacco (any amount) within the last month.
2. There is documentation of hazardous use of tobacco. Hazardous use is defined as a pattern of substance use that increases the risk of harmful consequences for the user. In contrast to harmful use, hazardous use refers to patterns of use that are of public health significance despite the absence of any current disorder in the individual user.

Z72.0 ~~includes~~ [is assigned for](#) documentation of [current smoker](#), ~~or user of chewing tobacco, or patient on nicotine patches~~, or trying to quit. ~~This code should be assigned only when sufficient information is not~~ [Z72.0 is assigned when there is insufficient documentation](#) available to assign F17.2 *Tobacco dependence syndrome* or F17.1 *Harmful use of tobacco*.

EXAMPLE 5:

A 40 year old smoker is diagnosed with carpal tunnel syndrome.

Codes: G56.0 *Carpal tunnel syndrome*
Z72.0 *Tobacco use, current*

F17.1 Harmful use of tobacco

Assign [F17.1](#) ~~this code if~~ [where](#) the clinician has clearly documented a relationship between a particular condition(s) and [smoking tobacco consumption](#) (even if the patient has ceased [smoking tobacco use](#)).

Such documentation includes conditions qualified as tobacco related, indicating evidence that the [substance tobacco](#) use was responsible for (or substantially contributed to) physical or psychological harm.

~~This code [F17.1](#) should is not ~~be~~ assigned if [for](#) tobacco dependence (syndrome) is documented.~~

EXAMPLE 6:

A 65 year old patient has a history of smoking 40 cigarettes per day from the age of 15 until quitting at 51 years. The documented principal diagnosis is emphysema/smoker.

Codes: J43.9 *Emphysema, unspecified*
F17.1 *Mental and behavioural disorders due to use of tobacco, harmful use*

Z86.43 ~~should is~~ not ~~be~~ assigned.

EXAMPLE 7:

[Patient admitted with documentation of S](#) ~~smoking related chronic bronchitis~~ ~~in a 29 year old.~~

Codes: J42 *Unspecified chronic bronchitis*
F17.1 *Mental and behavioural disorders due to use of tobacco, harmful use*

Z72.0 ~~should is~~ not ~~be~~ assigned.

EXAMPLE 8:

A 63 year old female patient is admitted with a urinary tract infection. In the medical history, clinical documentation states that the patient has smoking related COPD, but she is now an ex-smoker. The COPD did not require any attention during the admission.

Codes: N39.0 *Urinary tract infection, site not specified*
F17.1 *Mental and behavioural disorders due to use of tobacco, harmful use*

A code for COPD is not assigned as it does not meet the criteria in ACS 0002 *Additional diagnoses*. F17.1 is assigned irrespective of whether or not the condition caused by the harmful use of tobacco (in this case COPD) meets the criteria in ACS 0002.

F17.2 Tobacco dependence syndrome

Assign ~~this code~~ [F17.2](#) if the patient is diagnosed ~~as having~~ [with](#) tobacco dependence, addiction or dependence syndrome.

EXAMPLE 9:

A patient admitted for treatment of chronic airway limitation and varicose veins of the left leg. Clinical documentation states the patient is tobacco dependent, evidenced by his strong desire to continue smoking despite being advised that smoking is ~~having~~-causing harmful effects on his health. Smoking cessation therapy commenced.

Codes: J44.9 *Chronic obstructive pulmonary disease, unspecified*
 I83.9 *Varicose veins of lower extremities without ulcer or inflammation*
 F17.2 *Mental and behavioural disorders due to use of tobacco, dependence syndrome*

See ACS 2118 *Exposure to tobacco smoke* for guidelines regarding passive smoking.

0625 QUADRIPLÉGIA AND PARAPLEGIA, NONTRAUMATIC

...

Subsequent [chronic] phase of paraplegia/quadriplegia

The subsequent phase of paraplegia/tetraplegia/quadriplegia includes:

- A patient with paraplegia/quadriplegia admitted to a hospital/facility (including rehabilitation) after a period in an acute hospital for initial phase treatment.
- A patient with paraplegia/quadriplegia admitted with a principal diagnosis of conditions such as urinary tract infection, fractured femur, etc, where the paraplegia/quadriplegia meets the definition of an additional diagnosis.

0809 INTRAORAL OSSEOINTEGRATED IMPLANTS

...

(See also ACS 1204 *Plastic surgery*, for admissions requiring reconstructive plastic surgery.)

0909 CORONARY ARTERY BYPASS GRAFTS

...

Other complications

Other complications of CABGs may include postoperative hypertension, cardiac arrhythmias, haemorrhage and wound infections (of either the sternal wound or the procurement area, eg leg or arm). Cerebrovascular accidents may also occur.

(See also ACS 1904 *Procedural complications* and ACS 0934 *Cardiac and vascular revision/reoperation procedures*).

...

Pacing wires (temporary pacemaker) (temporary electrodes)

Temporary pacing wires may be placed on the epicardial surface of the atrium and/or ventricle and brought out through the chest wall prior to closure of the operative wound. The pacing wires may be used postoperatively to stimulate the heart in the event of heart block or arrhythmia. As the insertion of pacing wires is a routine part of CABG procedure, a code for this component is not required- (See also ACS 0936 *Cardiac pacemakers and implanted defibrillators*).

0925 HYPERTENSION AND RELATED CONDITIONS

...

EXAMPLE 1:

An 82 year old man was admitted for excision of a persistent papillary TCC (transitional cell carcinoma) of left ureter. His comorbidities included Parkinson's disease, chronic renal impairment and hypertension. Routine eGFR (glomerular filtration rate estimate) = 59 mL/min.

He underwent open resection of the left kidney and remaining left ureter. Postoperatively his blood pressure proved difficult to control and his eGFR fell to 51 mL/min. Histopathology on the removed kidney confirmed hypertensive nephropathy and his nephrologist was consulted, advising a change to his hypertensive medications.

Histopathology reports: **Left ureter** – Chronic inflammation. Reactive urothelial hyperplasia, focal low grade papillary urothelial carcinoma. **Left kidney** – Frequent sclerosed glomeruli with tubular atrophy and interstitial fibrosis in keeping with hypertensive nephropathy.

Codes: C66 *Malignant neoplasm of ureter*
 M8130/3 *Papillary transitional cell carcinoma*
 I12.9 *Hypertensive kidney disease without kidney failure*
 N18.3 *Chronic kidney disease, stage 3*

(See also ACS 1438 *Chronic kidney disease*.)

0934 CARDIAC AND VASCULAR REVISION/REOPERATION PROCEDURES

...

A revision or reoperation procedure may follow as a matter of course, for example, a patient's angina is recurring or the patient is in cardiac failure; this is usually because the grafted artery has become blocked (a natural process of the disease, rather than a complication of the graft). A revision or reoperation procedure may also be performed due to a complication of the graft. Therefore code assignment for each case is based on clinical documentation. If the reason for revision or reoperation cannot be established based on the available documentation, assign a code for the condition requiring surgery as the principal diagnosis. The condition should only be assigned as a procedural complication when documentation clearly states that the condition arose as a complication of the initial surgery.

(See also ACS 1904 *Procedural complications* and ACS 0909 *Coronary artery bypass graft/CABG occlusion*).

...

EXAMPLE 2:

Resternotomy for a heart valve replacement following a previous coronary artery bypass graft (CABG) operation.

In this scenario, code 38656-01 [562] *Reopening of thoracotomy or sternotomy site* is not assigned as a resternotomy performed for a heart valve replacement following a previous CABG is not considered as a reoperation (redo) of a procedure. It is a reopening of a previous operative approach to perform a different procedure.

(See also ACS 0039 *Reoperation of operative site*.)

0936 Cardiac Pacemakers and Implanted Defibrillators

...

Temporary electrodes

...

(See also ACS 0909 *Coronary artery bypass grafts*.)

0940 ISCHAEMIC HEART DISEASE

(See also ACS 0941 *Arterial disease*.)

...

1. ACUTE CORONARY SYNDROME

...

Classification

Acute coronary syndrome is a general term ~~which~~that includes conditions described as myocardial infarction, ST elevation myocardial infarction (STEMI), non-ST elevation myocardial infarction (NSTEMI) or unstable angina. Clinical coders should be guided by the documentation in the medical record and:

- assign a code from category ~~I21-~~I21 *Acute myocardial infarction* if an infarction is documented,
or

0941 ARTERIAL DISEASE

...

3. CORONARY ARTERY DISEASE (CAD)

CAD refers to atherosclerosis in 99% of cases. The remaining 1% of cases are due to spasm, embolism and other specified causes.

Classification

If CAD is documented without mention of spasm, embolism and other specified causes (excluding atherosclerosis), [assign](#) a code from category [I25.1–I25.1](#) *Atherosclerotic heart disease* ~~should be assigned~~ (see also 2. *Atherosclerosis* ~~above~~).

4. EMBOLISM

...

Classification

If embolism of a coronary artery is documented (and the patient has not progressed to myocardial infarction), assign I24.0 *Coronary thrombosis not resulting in myocardial infarction*. In the latter case where the patient progresses to myocardial infarction, assign an appropriate code from category I21 *Acute myocardial infarction*. The presence of atherosclerosis (for example in atheroembolism) where documented should also be indicated by an additional diagnosis code from category [I25.1–I25.1](#) *Atherosclerotic heart disease*.

Atheroembolism requires a code for embolism as above and an additional diagnosis code from category [I25.1–I25.1](#) *Atherosclerotic heart disease*.

Embolisms of other sites are ~~coded~~ [classified](#) as indicated by the [ICD-10-AM](#) *Alphabetic Index of Diseases*, eg [For example](#), femoral; and iliac [embolisms are classified to](#)— category I74 *Arterial embolism and thrombosis*; renal [embolisms are classified to](#)— N28.0 *Ischaemia and infarction of kidney*.

Where [an](#) embolism is documented as a complication of the initial surgery, assign T82.82 *Embolism and thrombosis following insertion of cardiac and vascular prosthetic devices, implants and grafts*.

5. ISCHAEMIA

The term 'ischaemia' refers to the physiological process of reduced blood flow. The cause of ischaemia should be ascertained (trauma, embolus, thrombus).

Documentation of 'ischaemic leg' refers to PVD (see 8. *Peripheral Vascular Disease* ~~below~~). Ischaemic heart disease (IHD) may refer to coronary atherosclerosis, chronic coronary insufficiency, myocardial ischaemia or aneurysm of the heart. Therefore, atherosclerosis should not be assumed to be the cause.

Classification

[Assign](#) a specific code ~~should be assigned~~ for the cause of ischaemia (eg trauma, embolus, thrombus), if [possible](#) [known](#).

If only 'ischaemic leg' is documented, assign a code from category [I70.2–I70.2](#) *Atherosclerosis of arteries of extremities*.

If only 'ischaemic heart disease' is documented, and no further information is available, assign I25.9 *Chronic ischaemic heart disease, unspecified*. (~~S~~see also ACS 0940 *Ischaemic heart disease*).

6. OBSTRUCTION

Documentation of 'obstruction' refers to atherosclerosis in the majority of cases (see 2. *Atherosclerosis above*).

...

9. STENOSIS

Stenosis is a quantitative anatomical term and often refers to atherosclerosis- (see 2. *Atherosclerosis above*).

Classification

If stenosis of a coronary artery is documented without further information, [assign](#) a code from category ~~I25.1~~ [I25.1](#) *Atherosclerotic heart disease* ~~should be assigned~~. If it is evident from cardiac catheterisation or angiogram results that the stenosis is due to a thrombus (and the patient has not progressed to an AMI), assign I24.0 *Coronary thrombosis not resulting in myocardial infarction*. In the latter case, where the patient progresses to a myocardial infarction, assign a code from category I21 *Acute myocardial infarction*.

Similarly, stenosis of other arteries that is not documented as due to another cause is [classified to be assigned the an](#) appropriate atherosclerosis code- (Note that the index instruction after 'Stenosis' to 'see also Stricture' and the default codes for *Stenosis/artery* to I77.1 *Stricture of artery* should only be followed when 'stricture' is documented without further specification. (~~See also 10. Stricture below~~).

10. STRICTURE

Stricture is defined as an abnormal narrowing within an opening or body passage such as a vessel.

Classification

Without further information in the clinical documentation, do not assume that stricture is due to atherosclerosis. Therefore, if 'stricture of artery' is documented without further specification, assign I77.1 *Stricture of artery*. However, if it is evident (eg from cardiac catheterisation or angiogram results) that stricture of an artery is due to a thrombus or atheroma, assign a more specific code such as, for a coronary artery, I24.0 *Coronary thrombosis not resulting in myocardial infarction* or a code from category ~~I25.1~~ [I25.1](#) *Atherosclerotic heart disease*. In the latter case where the patient progresses to a myocardial infarction, assign a code from category I21 *Acute myocardial infarction*.

11. THROMBOSIS

...

Classification

If thrombosis of a coronary artery is documented (and the patient has not progressed to myocardial infarction), assign I24.0 *Coronary thrombosis not resulting in myocardial infarction*. In the same case as above, but where the patient progresses to myocardial infarction, assign a code from category I21 *Acute myocardial infarction*.

Thrombosis of other arteries ~~should be assigned codes~~ [is classified](#) in accordance with the [ICD-10-AM Alphabetic Index of Diseases](#).

Where [a](#) thrombosis is documented as a complication of the initial surgery, assign T82.82 *Embolism and thrombosis following insertion of cardiac and vascular prosthetic devices, implants and grafts*.

1002 ASTHMA

...

CLASSIFICATION

J45.- — *Asthma* ~~should be~~ assigned for diagnoses such as 'asthma', 'severe asthma', 'acute asthma' or any other variation of this terminology ~~which that~~ is not ~~included in~~ classified to J46 *Status asthmaticus*.

J46 — *Status asthmaticus* ~~should be~~ assigned only if ~~the~~ asthma is documented as 'acute severe' or 'refractory'.

Asthma described as **chronic obstructive** or asthma documented with chronic obstructive pulmonary disease (COPD) should be assigned a code from J44.- only. A code from J45.- *Asthma* is inappropriate in such cases, as evidenced by the exclusions at J45 and the index entry as follows:

Tabular: J45 Asthma

Excludes: ~~chronic asthmatic (obstructive) bronchitis (J44.-)~~
~~chronic obstructive asthma (J44.-)~~
• asthmatic (obstructive) bronchitis (J44.-)
• obstructive asthma (J44.-)

Index: ~~Disease, diseased~~

~~—lung J98.4~~

~~—obstructive (chronic) J44.9~~

~~—with~~

~~—asthma J44.8~~

~~—with (acute)~~

~~—exacerbation NEC J44.1~~

~~—infective J44.0~~

~~—lower respiratory infection J44.0~~

Asthma, asthmatic (bronchial) (catarrh) (spasmodic) J45.9

- with

- - COPD (chronic obstructive pulmonary disease) J44.8

- - - with (acute)

- - - - exacerbation NEC J44.1

- - - - - infective J44.0

- - - - - lower respiratory infection J44.0

- chronic J45.-

- - obstructive — see Asthma/with/COPD

J44.- — *Other chronic obstructive pulmonary disease* ~~should is not be~~ assigned for ~~the a~~ diagnosis of 'chronic asthma'. Chronic asthma ~~should be coded~~ is classified to J45.- *Asthma*-. (See also ACS 1008 *Chronic obstructive pulmonary disease (COPD)*-).

1006 VENTILATORY SUPPORT

...

CLASSIFICATION

1. Code first the ventilatory support (see also *Calculating the duration of CVS*)

...

- c. For the purpose of calculating the duration of ventilatory support:
- hours of ventilatory support should be interpreted as **completed cumulative hours**. If a patient is intubated and ventilated for < 1 hour the intubation and ventilation are not coded. This includes patients who die or are discharged or transferred.
 - a period of ≤ 1 hour between cessation and then restarting ventilatory support should be accounted for in the duration, ie continue counting the duration.
 - removal and immediate replacement of airway devices (tubes, masks) should be accounted for in the duration, ie continue counting the duration.

(See also *Calculating the duration of CVS*).

...

CALCULATING THE DURATION OF CVS

...

- **Admission of a ventilated patient**

For those patients who are admitted with CVS commenced in place, begin counting the duration at the time of admission- (S~~see also *Transferred intubated patients*~~).

...

END with:

...

- **Change of episode type**

In cases where the episode 'care type' changes (eg acute to rehabilitation), counting the duration should cease when the episode ends and counting recommences for the subsequent ventilatory period during the new episode type.

(See also ACS 1615 *Specific diseases and interventions related to the sick neonate*).

INTUBATION WITHOUT VENTILATION

...

1008 CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

...

Asthma described as **chronic obstructive** or asthma documented with COPD ~~should be~~ assigned a code from category J44-J44- *Other chronic obstructive pulmonary disease* only. A code from category J45-J45- *Asthma* is inappropriate in such cases, as evidenced by the ~~exclusions-~~Excludes note at J45 and the ICD-10-AM Alphabetic Index entry as follows:

J45 Asthma

Excludes: ~~chronic; asthmatic (obstructive) bronchitis (J44.-)~~
~~chronic obstructive asthma (J44.-)~~
• asthmatic (obstructive) bronchitis (J44.-)
• obstructive asthma (J44.-)

Index: ~~Disease, diseased~~

~~—lung J98.4~~

~~—obstructive (chronic) J44.9~~

~~—with~~

~~—asthma J44.8~~

~~—with (acute)~~

~~—exacerbation NEC J44.1~~

~~—infective J44.0~~

~~—lower respiratory infection J44.0~~

Asthma, asthmatic (bronchial) (catarrh) (spasmodic) J45.9

- with

-- COPD (chronic obstructive pulmonary disease) J44.8

--- with (acute)

---- exacerbation NEC J44.1

----- infective J44.0

----- lower respiratory infection J44.0

- chronic J45.-

-- obstructive — see Asthma/with/COPD

For example, 'acute exacerbation of ~~CAI-~~COPD with asthma' ~~should be assigned~~ is classified to J44.1 *Chronic obstructive pulmonary disease with acute exacerbation, unspecified*.

Acute exacerbation of COPD does not require an additional code to reflect the 'acute' and 'chronic' components in the description. Assign only J44.1 *Chronic obstructive pulmonary disease with acute exacerbation, unspecified*.

Infective exacerbation of COPD does not require an additional code to reflect the infective description unless the infective condition is a condition in its own right, such as pneumonia (see *COPD with pneumonia*). If there is no documented infective disorder, a diagnosis of 'infective exacerbation of COPD' or 'chest infection exacerbating COPD' ~~should be assigned the code~~ is classified to J44.0 *Chronic obstructive pulmonary disease with acute lower respiratory infection*.

Note: If emphysema and COPD are documented for the episode, assign only a code from category ~~J44-~~J44 *Other chronic obstructive pulmonary disease*.

1204 PLASTIC SURGERY

...

care involving plastic surgery as the principal diagnosis, as appropriate.

EXAMPLE 1:

Face lift performed under general anaesthesia (GA) for ageing face. (~~Note: ageing face is not a recognised diagnosis within ICD-10-AM~~)

Codes: Z41.1 *Other plastic surgery for unacceptable cosmetic appearance*

45588-00 [1675] *Facelift, bilateral*

92514-99 [1910] *General anaesthesia, ASA 9, nonemergency*

Note: Ageing face is not a recognised diagnosis within ICD-10-AM.

...

REMOVAL OF BREAST IMPLANTS

Breast implants are removed for physical or psychological reasons.

If the implant is being removed or replaced because of a complication of the implant (eg granulomas, chronic infection, leakage), ~~then~~ assign the appropriate code from category ~~T85-~~T85 *Complications of other internal prosthetic devices, implants and grafts* as the principal diagnosis ~~code~~.

1217 REPAIR OF WOUND OF SKIN AND SUBCUTANEOUS TISSUE

...

CLASSIFICATION

...

30029-00 [1635] *Repair of wound of skin and subcutaneous tissue of other site, involving soft tissue* are assigned for repairs involving soft tissue, where no specific soft tissue structures (as defined above) are identified as being repaired. Codes for the repair of specific soft tissue structures ~~should be~~are assigned instead (see eExample 3).

EXAMPLE 2:

Deep wound of hand with soft tissue involvement.

Procedure: Repair of deep wound of hand requiring layered suturing.

Code: 30029-00 [1635] *Repair of wound of skin and subcutaneous tissue of other site, involving soft tissue*

Suturing of the skin and subcutaneous tissue is inherent in the repair of soft tissue structures. A code from block [1635] *Repair of wound of skin and subcutaneous tissue* is not assigned for eExample 3 (see also ACS 0042 *Procedures normally not coded* and ACS 1916 *Superficial and soft tissue injuries*).

EXAMPLE 3:

Traumatic wound to right hand involving damage to nerve and tendon.

Procedure: Repair of nerve and tendon right hand.

Codes: 39300-00 [83] *Primary repair of nerve*

47963-02 [1467] *Repair of tendon of hand, not elsewhere classified*

(See also ACS 1908 ~~Laceration with nerve and tendon damage~~ [Open wound with artery, nerve and/or tendon damage.](#))

1221 PRESSURE INJURY

DEFINITION

A pressure injury is a localised injury to the skin and/or underlying tissue usually over a bony prominence. It results from ischaemic hypoxia of the tissue due to pressure (NPUAP & EPUAP, 2009). Synonymous terms for pressure injury are pressure ulcer, decubitus ulcer, pressure area, plaster ulcer and bedsore.

The ~~revised~~ ICD-10-AM codes for pressure injury and guidelines within this ACS are based on the Pan Pacific Clinical Practice Guideline for the Prevention and Management of Pressure injury, 2012.

CLASSIFICATION

The following points provide general classification guidelines:

1. Codes from category ~~L89.~~ [L89](#) *Pressure injury* capture both the severity and the site of the pressure injury. Assign multiple pressure injury codes as appropriate to identify all pressure injuries, however, do not double code (ie repeat code in the code string for the same site and severity. See also ACS 0025 *Double coding*) (see Examples 1 & 2).

...

6. Mucosal membrane pressure injuries:
 - are not classified to L89.- *Pressure injury* as they do not occur in skin and subcutaneous tissue. See Alphabetic Index: *Ulcer/by site*
 - are complications of medical devices. See ACS 1904 *Procedural complications/Classification of procedural complications (Diagnosis codes)/Complications classified to T80–T88*.

[For guidelines regarding pressure ulcer due to diabetic foot, see ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia/Diabetic foot*.](#)

1309 DISLOCATION OR COMPLICATION OF HIP PROSTHESIS

Assign ~~the code~~ S73.0- *Dislocation of hip*, with ~~an additional diagnosis code of~~ Z96.64 *Presence of hip implant* [as an additional diagnosis](#), when a patient sustains a dislocation of a hip prosthesis in circumstances such as:

- falling out of bed whilst recovering in hospital, having recently undergone a hip replacement
- making a sudden movement (eg twisting)
- performing activities of daily living (eg movement in bed, dressing, personal hygiene, etc)

A code from category T84 *Complications of internal orthopaedic prosthetic devices, implants and grafts* ~~should be~~ [is](#) assigned in the following circumstances:

- where the documentation indicates that there is mechanical failure due to faulty prosthetic components or tight or loose ligaments-~~(S~~ [see also ACS 1904 *Procedural complications*](#)-)
- when the reason for admission is a revision of hip replacement-
- when the documentation states 'osteoarthritis' as the principal diagnosis and the patient is undergoing a second or third hip replacement.

Note: Clinical coders may apply the advice in this standard to other joint prostheses.

1352 JUVENILE ARTHRITIS

The *Inclusion term* [Includes note](#) at M08 *Juvenile arthritis* states the following:

~~1431 EXAMINATION UNDER ANAESTHESIA (EUA), GYNAECOLOGY~~

~~Examination under anaesthesia (EUA) is inherent in almost every gynaecological procedure and most certainly in a dilation and curettage (D&C). EUA (35500-00 [1296] *Gynaecological examination*) is only coded when not performed in conjunction with another procedure.~~

~~(See also ACS 0031 *Anaesthesia* and ACS 0022 *Examination under anaesthesia*.)~~

1611 OBSERVATION AND EVALUATION OF NEWBORN AND INFANTS FOR SUSPECTED CONDITION NOT FOUND

[Codes in category Z03.7-Z03.7](#) *Observation and evaluation of newborn for suspected condition not found* codes are [for use assigned](#) in limited circumstances ~~on records of~~ [for](#) otherwise healthy newborns, who are suspected to be at risk for an abnormal condition ~~which that~~ requires study, but after examination and observation, it is determined that there is no need for further treatment or medical care. ([S](#)see also ACS 1617 *Neonatal sepsis/risk of sepsis*.)

1615 SPECIFIC DISEASES AND INTERVENTIONS RELATED TO THE SICK NEONATE

...

Ventilatory support

...

In addition, when the hours of invasive and noninvasive ventilatory support are added together and the total is ≥ 96 hours, assign 92211-00 [\[571\]](#) *Management of combined ventilatory support, ≥ 96 hours*.

1807 ACUTE AND CHRONIC PAIN

...

[EXAMPLE 7:](#)

[Patient admitted with left knee pain due to osteoarthritis. They were commenced on pain medication \(Panadol Osteo\) and an anti-inflammatory \(Celebrex\). Daily physiotherapy was performed to strengthen the knee structures.](#)

[Codes: M17.1 Other primary gonarthrosis](#)

[In this example, there was no documentation of 'nociceptive' or 'chronic' pain, therefore R52.2 was not assigned.](#)

EXAMPLE 8:

Patient admitted with nociceptive pain due to worsening gout in multiple joints. They were commenced on pain medication (Panadol Osteo) and the dosage of their gout medication (Colgout) was increased.

Codes: M10.90 Gout, unspecified, multiple sites

R52.2 Chronic pain

1809 FEBRILE CONVULSIONS

DEFINITION

Febrile convulsions (febrile seizures) occur primarily in children from six months to seven years old, in association with fever and generally without evidence of intracranial infection or other defined cause. It is important to note that febrile convulsions do not occur in adults, and if a diagnosis of febrile convulsion is recorded for patients not meeting the age criteria for this standard, the clinician should be consulted for clarification.

Simple or benign febrile convulsions are clinically defined as brief (less than 15 minutes duration), solitary and generalised.

Non simple or complicated febrile convulsions are clinically defined as either focal in nature, having a duration of 15 minutes or longer, with associated focal neurological signs or are likely to recur more than twice in less than 24 hours.

The majority of febrile convulsions are simple and these convulsions require no treatment other than observation. The treatment for non simple febrile convulsions involves insertion of an intravenous (IV) cannula, administration of drugs to stop the seizure, and occasionally will include mechanical ventilation (because of drug induced apnoea or ongoing seizures). However, all febrile convulsions are alarming and it is always necessary to rule out any underlying cause, such as epilepsy, encephalitis, intracerebral haemorrhage, gastroenteritis, otitis media, septicaemia, pneumonia or meningitis.

Clinical coders should be aware of the various terminology associated with febrile convulsions. The term 'febrile seizures' is synonymous with febrile convulsions. A 'fit', where the fit is associated with fever (pyrexia), is also synonymous with febrile convulsions.

CLASSIFICATION

The distinction between simple (benign) and non simple (complicated) febrile convulsions does not have any bearing on their classification and is provided so that coders are aware of the significance of the clinical entity of febrile convulsions.

R56.0 *Febrile convulsions* should be assigned as the principal diagnosis in cases of febrile convulsions (simple or non simple) where no underlying cause is documented.

Where an underlying cause is documented, the principal diagnosis convention should be followed (*see ACS 0001 Principal diagnosis*).

1901 POISONING

...

(See also ACS 1903 *Two or more drugs taken in combination* and ACS 2005 *Poisonings and injuries – indication of intent*).

1902 ADVERSE EFFECTS

...

(See also ACS 1903 *Two or more drugs taken in combination*).

...

EXAMPLE 4:

Burns to chest wall (body surface area (BSA) 4%) due to overdose of radiotherapy for breast cancer.

| | | |
|--------|--------|---|
| Codes: | T21.02 | <i>Burn of chest wall, unspecified thickness</i> |
| | T31.00 | <i>Burns involving less than 10% of body surface</i> |
| | Y63.2 | <i>Overdose of radiation given during therapy</i> |
| | Y92.23 | <i>Place of occurrence, health service area, not specified as this facility</i> |

Other diagnosis codes as appropriate

(See also ACS 2115 *Admission for allergen challenge*).

1906 CURRENT AND OLD INJURIES

DEFINITION

Current injury – an injury for which repair is proceeding or has yet to be completed. The principal diagnosis should remain as the injury code on initial and subsequent treatment of the current injury.

(See also ACS 1911 *Burns, readmission for burn treatment or for complications*).

Old injury – an injury which has been repaired. However, following repair, functionality has failed to occur, and thus continuing treatment is required. Follow the late effect rule in ACS 1912 *Sequelae of injuries, poisoning, toxic effects and other external causes*.

(See also ACS 1319 *Meniscus/ligament tear of knee, NOS*).

1915 SPINAL (CORD) INJURY

...

Spinal cord injury – subsequent phase

If a patient with paraplegia/quadriplegia is admitted ~~to a hospital/facility for treatment~~ (eg [with neurogenic bladder](#)), and the paraplegia/quadriplegia meets the definition of an additional diagnosis, assign [a code from category G82](#)– *Paraplegia and tetraplegia* and other conditions as appropriate. Sequencing of these diagnoses should be guided by the principal diagnosis definition: (~~See also ACS 0625 *Quadriplegia and paraplegia, nontraumatic*~~).

Immediately following the code from [category G82](#)– *G82 Paraplegia and tetraplegia*, assign T91.3 *Sequelae of injury of spinal cord* or T90.5 *Sequelae of intracranial injury* to indicate that the paraplegia/quadriplegia is a sequela of the spinal cord or intracranial injury, and follow that code with the appropriate late effect external cause and place of occurrence codes. Where there is no documentation to specify the type of injury (ie spinal cord or intracranial), assign T91.3 *Sequelae of injury of spinal cord* as the default.

It is not necessary to code the traumatic injury codes as these should only be used for the initial phase.

EXAMPLE 3:

Urinary tract infection. Incomplete paraplegia at C5 level as a result of a motor vehicle accident (MVA)

5 years ago.

| | | |
|--------|--------|--|
| Codes: | N39.0 | <i>Urinary tract infection, site not specified</i> |
| | G82.26 | <i>Paraplegia, unspecified, incomplete, chronic</i> |
| | T91.3 | <i>Sequelae of injury of spinal cord</i> |
| | Y85.0 | <i>Sequelae of motor vehicle accident</i> |
| | Y92.49 | Place of occurrence , U <i>unspecified public highway, street or road</i> |

1916 SUPERFICIAL AND SOFT TISSUE INJURIES

...

EXAMPLE 2:

Patient admitted for cellulitis of an infected blister of the index finger. Documentation in the clinical record confirms an associated infection with *Staphylococcus aureus*.

| | | |
|--------|--------|--|
| Codes: | L03.01 | <i>Cellulitis of finger</i> |
| | S60.82 | <i>Blister of wrist and hand</i> |
| | T79.3 | <i>Post traumatic wound infection, not elsewhere classified</i> |
| | B95.6 | <i>Staphylococcus aureus as the cause of diseases classified to other chapters</i> |

(~~See also ACS 1907 *Multiple injuries*~~).

1923 CONTACT WITH VENOMOUS/NONVENOMOUS CREATURES

...

Summary of venom immunotherapy dosing schedules

...

Classification

In cases of admission for prophylactic immunotherapy for desensitisation to bee, wasp and ant venom, assign the appropriate code from the category ~~Z51.6~~-Z51.6 *Desensitisation to allergens* as the principal diagnosis. Also assign one of the following procedure codes, depending on the dosing schedule given:

- 96195-00 [1884] *Administration of venom protein, other*
- 96195-01 [1884] *Administration of venom protein, rush protocol*
- 96195-02 [1884] *Administration of venom protein, ultrarush protocol*

1924 DIFFICULT INTUBATION

...

CLASSIFICATION

Assign T88.42 *Difficult intubation* when:

- difficult intubation (or the synonymous term difficult airway) is **specifically documented** **and**
- there is documentation of a Cormack-Lehane or Mallampati score of grade 2 or higher.

Assign the following external cause codes with T88.42 *Difficult intubation*:

Y84.8 *Other medical procedures (as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure)*

Y92.24 *Place of occurrence, Health service area, this facility*

Use of advanced techniques (video-laryngoscopy or introducers) may indicate difficult intubation, but for classification purposes the above criteria must first be met before the code for difficult intubation is assigned. Where documentation is unclear, coders should seek clinical advice.

(See also ACS 1006 *Ventilatory support*).

2001 EXTERNAL CAUSE CODE USE AND SEQUENCING

...

See category Y92 *Place of occurrence* and block U50–U73 *Activity* in the [ICD-10-AM](#) Tabular List of ~~Diseases~~ for ~~rules~~-[guidelines](#) regarding additional codes required with certain external cause codes.

2005 POISONINGS AND INJURIES – INDICATION OF INTENT

...

X40–X49 Accidental poisoning by and exposure to noxious substances

The 'includes' note at the beginning of this block in the [ICD-10-AM](#) Tabular List of ~~Diseases~~ specifies:

2103 ADMISSION FOR POST ACUTE CARE

...

(~~See~~ also ACS 2117 *Non-acute care* for guidelines regarding convalescent care).

2104 REHABILITATION

...

CLASSIFICATION

Where rehabilitation care is performed, assign Z50.9 *Care involving use of rehabilitation procedure, unspecified*. Details of the specific rehabilitation ~~will be~~ indicated by the assignment of appropriate intervention codes. ~~Z50.9 Care involving use of rehabilitation procedure, unspecified:~~

Z50.9 Care involving use of rehabilitation procedure, unspecified:

- ~~should is never be~~ assigned as a principal diagnosis. For admitted episodes of rehabilitation care, assign as the principal diagnosis ~~should reflect~~ the underlying condition requiring rehabilitation (see ACS 0001 *Principal diagnosis*).
- ~~should is~~ only ~~be~~ assigned as an additional diagnosis where there is documented evidence that the patient has been provided with rehabilitation care. ~~Do not assign Z50.9 when a rehabilitation care assessment has been performed but no actual rehabilitation care has been given. Documented evidence may be in the form of clinician entries or a care plan within the clinical record.~~

Do not assign Z50.9 when a rehabilitation care assessment has been performed but no actual rehabilitation care has been provided. Documented evidence of rehabilitation care may be in the form of clinician entries or a care plan within the clinical record.

- may be assigned independent of the admitted patient care type.

...

EXAMPLE 5: TRAUMATIC SPINAL CORD INJURY

Patient transferred for rehabilitation from acute hospital following motor bike accident in which he suffered a fracture of the 4th cervical vertebra with dislocation of the 4/5 cervical vertebral body and contusion to the spinal cord at the same level.

Codes: S14.10 *Injury of cervical spinal cord, unspecified*
S14.70 *Functional spinal cord injury, cervical level unspecified*
S12.22 *Fracture of fourth cervical vertebra*
S13.14 *Dislocation of C4/5 cervical vertebrae*
Appropriate external cause codes
Z50.9 *Care involving use of rehabilitation procedure, unspecified*

Patient admitted for rehabilitation for incomplete paraplegia at C4 level from the above spinal injury, nine months following the accident.

Codes: G82.26 *Paraplegia, unspecified, incomplete, chronic*
T91.3 *Sequelae of injury of spinal cord*
Y85.0 *Sequelae of motor vehicle accident*
Y92.49 Place of occurrence. ~~U~~ *unspecified public highway, street or road*
Z50.9 *Care involving use of rehabilitation procedure, unspecified*

(~~See~~ also ACS 1915 *Spinal (cord) injury*).

2117 NON-ACUTE CARE

...

Patients awaiting placement elsewhere

In cases where patients are admitted while awaiting placement in another facility, [assign](#) a code from category [Z75.1-Z75.1](#) *Person awaiting admission to adequate facility elsewhere* ~~should be assigned~~ as the principal diagnosis.

STANDARDS INDEX

Anaesthesia 0031

- examination under 0022; 0031
- for
- - ECT (electroconvulsive therapy) 0533
- ~~gynaecology 0031; 1431~~

Analgesia

- postprocedural 0031

Conveyance, pedestrian 2009

Convulsions

~~febrile 1809~~

COPD (chronic obstructive pulmonary disease) 1008

Definition (of)

...

- electrode, cardiac 0936
- external cause code 2001
- ~~febrile convulsion 1809~~
- fetal viability 1511

Diagnosis (in)

...

- principal (for) 0001

...

- - endoscopy, same-day 0051; 0052
- ~~febrile convulsion 1809~~
- - history of malignancy 2112

Examination

- follow-up 0052
- psychiatric 0521
- under anaesthesia 0022; 0031
- ~~gynaecological 0031; 1431~~

Excision

Familial adenomatous polyposis (FAP) 0052

~~Febrile convulsion 1809~~

FESS (functional endoscopic sinus surgery) 0807

Finding(s)

- abnormal 0010

Fit

~~fever (pyrexia) 1809~~

Flag, condition onset 0048

Secondary

- diabetes 0401
- hypertension 0925

Seizures

~~febrile 1809~~

Sepsis 0110



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Neoplasms (ICD-10-AM)

Introduction/Rationale:

This addenda proposal combines the following tasks, which originated from public submissions and coding queries:

- *Acanthoma* (TN1359, Q3180)
- *Addition of ACS (0245) symbol to relevant codes in to the Tabular List of Diseases* (P362)
- *Aplastic anaemia* (TN918, P236)
- *Atypical small acinar proliferation of the prostate* (TN1098, P272)
- *Benign juvenile granulosa cell tumour in a male (testis)* (Q3252)
- *Classification of VIN* (TN712, P206)
- *HyperIgD Syndrome* (TN1306, P310)
- *Morphology codes for the abbreviated term 'Ca'* (TN214)
- *No special type (NST) morphology code* (TN1337, Q3148)
- *Papillary urothelial carcinoma* (TN832, Q2750)
- *Respiratory epithelial adenomatoid hamartoma (REAH)* (TN1331, Q3094)

This document includes revision of classification of Vulval Intraepithelial Neoplasia (VIN) based on the World Health Organization (WHO) accepted new terminology. The classification of atypical small acinar proliferation of the prostate (ASAP), as well as new codes to classify benign granulosa cell tumour currently not currently classifiable in ICD-10-AM and ICD-O-3.

Summary of proposal:

- Addition of an *Instructional* term at C78.0 *Secondary malignant neoplasm of lung* to classify lymphangitis carcinomatosis and deletion of the redundant ACS 0218 *Lymphangitis carcinomatosis*
- Revise classification of Vulval Intraepithelial Neoplasia (VIN) in line with current terminology, and incorporate ICD-11 classification guidelines into ICD-10-AM
- Addition of a *Use additional* code instruction at D07.1 *Carcinoma in situ of Vulva* to classify HPV (human papillomavirus) associated vulvar intraepithelial neoplasia (VIN), if applicable, as the revised classification of VIN restricts to squamous cells, and categorised to two types, with the focus on whether the lesion is associated with HPV or not HPV related
- Creation of M8622/0 *Granulosa cell tumour, juvenile, benign* and amendment to the code title of M8622/1, as a benign juvenile granulosa cell tumour (JGCT) is currently not classifiable in ICD-10-AM, and is not in ICD-O3
- Classify atypical small acinar proliferation of the prostate (ASAP) to D40.0 *Neoplasm of uncertain or unknown behaviour, prostate* with the morphology M8555/1 *Acinar cell tumour*
- Addition of NST (no specific type) for ductal carcinoma NST in the Alphabetic Index
- Consideration was given to public submission (P236) regarding the creation of a code for pancytopenia. There is an existing Australian Coding Standard ACS 0304 *Pancytopenia* that clearly instructs the code(s) assigned for pancytopenia (NOS). ICD-11 continues to classify pancytopenia, NOS to *Aplastic anaemia, unspecified* (3A70.Z), indicating no change in the clinical

concept at international level, and therefore there will be no amendment made to ICD-10-AM Eleventh Edition in regard to pancytopenia

- Addition of hyperimmunoglobulin D syndrome to the Alphabetic Index and classification of this condition to D89.8 *Other specified disorders involving the immune mechanism, not elsewhere classified*
- Amendments to ICD-10-AM Alphabetic Index to address other issues.

ACCD PROPOSAL

Tabular List NEOPLASMS (C00–D48)

This chapter contains the following blocks:

C00–C96 Malignant Neoplasms

- C00–C75 Malignant neoplasms, stated or presumed to be primary, of specified sites, except of lymphoid, haematopoietic and related tissue
- C00–C14 Malignant neoplasms of lip, oral cavity and pharynx
- C15–C26 Malignant neoplasms of digestive organs
- C30–C39 Malignant neoplasms of respiratory and intrathoracic organs
- C40–C41 Malignant neoplasms of bone and articular cartilage
- C43–C44 Melanoma and other malignant neoplasms of skin
- C45–C49 Malignant neoplasms of mesothelial and soft tissue
- C50 Malignant neoplasms of breast
- C51–C58 Malignant neoplasms of female genital organs
- C60–C63 Malignant neoplasms of male genital organs
- C64–C68 Malignant neoplasms of urinary tract
- C69–C72 Malignant neoplasms of eye, brain and other parts of central nervous system
- C73–C75 Malignant neoplasms of thyroid and other endocrine glands
- C76–C80 Malignant neoplasms of ill-defined, secondary and unspecified sites
- C81–C96 Malignant neoplasms of lymphoid, haematopoietic and related tissue

D00–D09 In situ neoplasms

D10–D36 Benign neoplasms

D37–D48 Neoplasms of uncertain or unknown behaviour

Note:

- Primary, ill-defined, secondary and unspecified sites of malignant neoplasms**
Categories C76 – C80 include malignant neoplasms for which there is no clear indication of the original site of the ~~neoplasm~~ [neoplasm](#), or the ~~neoplasm~~ [neoplasm](#) is stated to be 'disseminated', 'scattered' or 'spread' without mention of the primary site. ~~In both cases~~ [If](#) the primary site is ~~considered to be unknown~~ [unspecified, assign C80.9 Malignant neoplasm, primary site unspecified. Where a neoplasm is documented as 'unknown primary', assign C80.0 Malignant neoplasm, primary site unknown, so stated.](#)
- Functional activity**
All neoplasms are classified in this chapter, whether they are functionally active or not. [Assign An](#) ~~an~~ additional code from Chapter 4 to identify [any documented](#) functional activity associated with any neoplasm.

For example, catecholamine-producing malignant pheochromocytoma of adrenal gland ~~should be coded~~ [is classified](#) to [category](#) C74 [Malignant neoplasm of adrenal gland](#), with [an](#) additional [diagnosis](#) code E27.5 [Adrenomedullary hyperfunction](#); and basophil adenoma of [the](#) pituitary gland with Cushing's syndrome ~~should be coded~~ [is classified](#) to D35.2 [Benign neoplasm of pituitary gland](#) with [an](#) additional [diagnosis](#) code E24.0 [Pituitary-dependent Cushing's disease](#).

3. Morphology

There are a number of major morphological (histological) groups of malignant neoplasms: carcinomas including squamous (cell) and adeno-carcinomas; sarcomas; other soft tissue tumours including mesotheliomas; lymphomas (Hodgkin and non-Hodgkin); leukaemia; other specified and site-specific types; and unspecified cancers. Cancer is a generic term and may be used for any of the above groups, although it is rarely applied to the malignant neoplasms of lymphatic, haematopoietic and related tissue. 'Carcinoma' is sometimes used incorrectly as a synonym for 'cancer'.

In Chapter 2, neoplasms are classified predominantly by site within broad groupings for behaviour. In a few exceptional cases morphology is indicated in the category and subcategory titles.

~~For those wishing to identify the histological type of neoplasm, a~~ comprehensive ~~separate list of~~ morphology codes are provided in this volume (see Appendix A). These morphology codes are derived from the third edition of International Classification of Diseases for Oncology (ICD-O-3), which is a dual-axis classification providing independent coding systems for topography and morphology. The first four digits of the morphology code identify the histological type; the fifth digit is the behaviour code (malignant primary, malignant secondary (metastatic), in situ, benign, uncertain whether malignant or benign). A sixth digit is used in ICD-O-3 as a grading code (differentiation) for solid tumours, and is also used as a special code for lymphomas and leukaemias, however, this sixth digit is not included in ICD-10-AM.

4. Use of subcategories in Chapter 2

Attention is drawn to the special use of subcategory .8 in this chapter [see note 5]. Where it has been necessary to provide subcategories for 'other', these have generally been designated as subcategory .7.

5. Malignant neoplasms overlapping site boundaries and the use of subcategory .8 (overlapping lesion)

Categories C00 – C75 classify primary malignant neoplasms according to their point of origin. Many three character categories are further divided into named parts or subcategories of the organ in question. A neoplasm that overlaps two or more contiguous sites within a three character category and whose point of origin cannot be determined ~~should be~~ classified to the subcategory .8 ('overlapping lesion'), unless the combination is specifically indexed elsewhere. For example, carcinoma of the oesophagus and stomach is specifically indexed to C16.0 *Malignant neoplasm, cardia* (~~cardia~~), while carcinoma of the tip and ventral surface of the tongue ~~should be assigned~~ classified to C02.8 *Malignant neoplasm, overlapping lesion of tongue*. On the other hand, carcinoma of the tip of the tongue extending to ~~involve~~ the ventral surface ~~should be coded~~ is classified to C02.1 *Border of tongue*, as the point of origin, the tip, is known. 'Overlapping' implies that the sites involved are contiguous (next to each other).

Numerically consecutive subcategories are ~~frequently~~ mostly anatomically contiguous, but ~~this is not~~ ~~always~~ invariably so (eg bladder category C67– *Malignant neoplasm of bladder*) and the clinical coder may need to consult anatomical texts to determine the topographical relationships.

Sometimes a neoplasm overlaps the boundaries of three character categories within certain systems. To take care of this the following subcategories have been designated:

- C02.8 *Overlapping lesion of tongue*
- C08.8 *Overlapping lesion of major salivary glands*
- C14.8 *Overlapping lesion of lip, oral cavity and pharynx*
- C21.8 *Overlapping lesion of rectum, anus and anal canal*
- C24.8 *Overlapping lesion of biliary tract*
- C26.8 *Overlapping lesion of digestive system*
- C39.8 *Overlapping lesion of respiratory and intrathoracic organs*
- C41.8 *Overlapping lesion of bone and articular cartilage*
- C49.8 *Overlapping lesion of connective and soft tissue*
- C57.8 *Overlapping lesion of female genital organs*
- C63.8 *Overlapping lesion of male genital organs*
- C68.8 *Overlapping lesion of urinary organs*
- C72.8 *Overlapping lesion of brain and other parts of central nervous system*

An example of this is a carcinoma of the stomach and small intestine, which ~~should be coded~~ is classified to C26.8 (~~Overlapping lesion of digestive system~~) *Overlapping lesion of digestive system*.

6. Malignant neoplasms of ectopic tissue

Malignant neoplasms of ectopic tissue are ~~to be coded~~ classified to the site where they are found, eg ectopic pancreatic malignant neoplasms of ovary are ~~coded~~ classified to C56 *Malignant neoplasm of ovary*. (~~C56~~).

7. Use of the Alphabetic Index in coding neoplasms

In addition to site, morphology and behaviour must also be taken into consideration when coding neoplasms, and reference should always be made first to the Alphabetic Index entry for the morphological description.

8. **Use of the third edition of International Classification of Diseases for Oncology (ICD-O-3)**
 For certain morphological types, Chapter 2 provides a ~~rather~~-restricted topographical (site) classification or none at all. The topography codes ~~of in ICD-O-3~~ use ~~for all neoplasms~~ essentially the same three- and four- character categories for all neoplasms (regardless of whether they are in situ, benign or malignant) that Chapter 2 ~~uses~~ assigns for malignant neoplasms (C00 – C77, C80.-), thus providing increased specificity of site for other neoplasms (malignant secondary (metastatic), benign, in situ and uncertain or unknown).

It is therefore recommended that agencies interested in identifying both the site and morphology of tumours, eg cancer registries, cancer hospitals, pathology departments and other agencies specialising in cancer, ~~use~~ refer to ICD-O-3.

Use additional code (Z07) to identify resistance to antineoplastic drugs.

C78 Secondary malignant neoplasm of respiratory and digestive organs

- C78.0 Secondary malignant neoplasm of lung
Use additional code (C80.9) to classify lymphangitis carcinomatosa NOS.
- C78.1 Secondary malignant neoplasm of mediastinum
- ...

C80 Malignant neoplasm without specification of site

- ~~∇ 0218, 0236~~
- Excludes:* Kaposi sarcoma, unspecified site (C46.9)
 mesothelioma, unspecified site (C45.9)
- C80.0 Malignant neoplasm, primary site unknown, so stated
- C80.9 Malignant neoplasm, primary site unspecified
 Cancer NOS † ~~NOS~~
 Carcinoma NOS †
 Malignancy
 Malignant neoplasm, not known whether primary or secondary
 Multiple cancer NOS
- Excludes* multiple secondary cancer NOS (C79.9)
 secondary malignant neoplasm, unspecified site (C79.9)
- ...

C88 Malignant immunoproliferative diseases

- ~~∇ 0222, 0245~~
- The following fifth character subdivisions are for use with subcategories C88.0 – C88.9:

- ⊗ 0 without mention of remission
- ⊗ 1 in remission

C88.0 Waldenström macroglobulinaemia

- See subdivisions*
 Lymphoplasmacytic lymphoma with IgM-production
 Macroglobulinaemia (idiopathic) (primary)
- Excludes* small cell B-cell lymphoma (C83.0)
- ...

C90 **Multiple myeloma and malignant plasma cell neoplasms**

[▽ 0245](#)

The following fifth character subdivisions are for use with subcategories C90.0 – C90.3:

- ⊗ 0 without mention of remission
- ⊗ 1 in remission

C90.0 **Multiple myeloma**

See subdivisions

Kahler's disease
Medullary plasmacytoma
Myelomatosis
Plasma cell myeloma

Excludes: solitary plasmacytoma (C90.3-)

...

C91 **Lymphoid leukaemia**

[▽ 0245](#)

The following fifth character subdivisions are for use with subcategories C91.0 – C91.9:

- ⊗ 0 without mention of remission
- ⊗ 1 in remission

C91.0 **Acute lymphoblastic leukaemia [ALL]**

See subdivisions

Note: This code should only be used for T-cell and B-cell precursor leukaemia.

...

C92 **Myeloid leukaemia**

[▽ 0245](#)

Includes: leukaemia:

- granulocytic
- myelogenous

The following fifth character subdivisions are for use with subcategories C92.0 – C92.9:

- ⊗ 0 without mention of remission
- ⊗ 1 in remission

C92.0 **Acute myeloblastic leukaemia [AML]**

See subdivisions

Acute myeloblastic leukaemia:

- 1/ETO
- M0
- M1
- M2
- minimal differentiation
- NOS (without a FAB classification)
- with maturation
- with t(8;21)

Refractory anaemia with excess blasts in transformation

Excludes: acute exacerbation of chronic myeloid leukaemia (C92.1-)

...

C93 Monocytic leukaemia

[V 0245](#)

Includes: monocytoid leukaemia

The following fifth character subdivisions are for use with subcategories C93.0 – C93.9:

- ⊛ 0 without mention of remission
- ⊛ 1 in remission

C93.0 Acute monoblastic/monocytic leukaemia

See subdivisions

Acute monoblastic/monocytic leukaemia:

- M5
- M5a
- M5b

...

C94 Other leukaemias of specified cell type

[V 0245](#)

Excludes: leukaemic reticuloendotheliosis (C91.4-)
plasma cell leukaemia (C90.1-)

The following fifth character subdivisions are for use with subcategories C94.0 – C94.7:

- ⊛ 0 without mention of remission
- ⊛ 1 in remission

C94.0 Acute erythroid leukaemia

See subdivisions

Acute myeloid leukaemia M6 (a)(b)

Erythroleukaemia

...

C95 Leukaemia of unspecified cell type

[V 0245](#)

The following fifth character subdivisions are for use with subcategories C95.0 – C95.9:

- ⊛ 0 without mention of remission
- ⊛ 1 in remission

C95.0 Acute leukaemia of unspecified cell type

See subdivisions

~~Acute:~~

~~• bilineal~~

~~• mixed lineage~~

~~Biphenotypic acute~~

leukaemia

Acute:

• [bilineal leukaemia](#)

• [mixed lineage leukaemia](#)

[Biphenotypic acute leukaemia](#)

Stem cell leukaemia of unclear lineage

Excludes: acute exacerbation of unspecified chronic leukaemia (C95.1-)

...

D07 Carcinoma in situ of other and unspecified genital organs

Excludes: melanoma in situ (D03.5)

D07.0 Endometrium

D07.1 Vulva

~~Vulvar intraepithelial neoplasia [VIN], grade III, with or without mention of severe dysplasia~~

[High grade squamous \(cell\) intraepithelial lesion \[HSIL\]](#)

[Vulvar intraepithelial neoplasia \[VIN\], grade II or III, with or without mention of severe dysplasia](#)

[Use additional code \(B97.7\) to identify HPV \(human papillomavirus\), if applicable](#)

Excludes: ~~severe dysplasia of vulva NOS (N90.2)~~

[benign neoplasm of vulva \(D28.0\)](#)

[dysplasia of vulva NOS \(N90.3\)](#)

D07.2 Vagina

Vaginal intraepithelial neoplasia [VAIN], grade III, with or without mention of severe dysplasia

Excludes severe dysplasia of vagina NOS (N89.2)

D07.3 Other and unspecified female genital organs

D07.4 Penis

Erythroplasia of Queyrat NOS

D07.5 Prostate

Excludes: low grade dysplasia of prostate (N42.3)

D07.6 Other and unspecified male genital organs

...

D28 Benign neoplasm of other and unspecified female genital organs

Includes: adenomatous polyp
skin of female genital organs

D28.0 Vulva

[Low grade squamous \(cell\) intraepithelial lesion \[LSIL\]](#)

[Mild dysplasia of vulva](#)

[Vulvar intraepithelial neoplasia \[VIN\], grade I](#)

[Use additional code \(B97.7\) to identify HPV \(human papillomavirus\), if applicable](#)

Excludes: [carcinoma in situ of vulva \(D07.1\)](#)

[dysplasia of vulva NOS \(N90.3\)](#)

D28.1 Vagina

D28.2 Uterine tubes and ligaments

Fallopian tube

Uterine ligament (broad) (round)

D28.7 Other specified female genital organs

D28.9 Female genital organ, unspecified

...

D40 **Neoplasm of uncertain or unknown behaviour of male genital organs**

- D40.0 Prostate
 [Atypical small acinar proliferation \(ASAP\)](#)
- D40.1 Testis
- D40.7 Other male genital organs
 Skin of male genital organs
- D40.9 Male genital organ, unspecified

...

D61 **Other aplastic anaemias**

Excludes agranulocytosis (D70)

- D61.0 Constitutional aplastic anaemia
 Aplasia, (pure) red cell (of):
 - congenital
 - infants
 - primary Blackfan-Diamond syndrome
 Familial hypoplastic anaemia
 Fanconi's anaemia
 Pancytopenia with malformations
- D61.1 Drug-induced aplastic anaemia
 Use additional external cause code (Chapter 20) to identify drug.
- D61.2 Aplastic anaemia due to other external agents
 Use additional external cause code (Chapter 20) to identify cause.
- D61.3 Idiopathic aplastic anaemia
- D61.8 Other specified aplastic anaemias
- D61.9 Aplastic anaemia, unspecified
 ▽ 0304 Hypoplastic anaemia NOS
 Medullary hypoplasia
 [Pancytopenia NOS](#)
 Panmyelophthisis

...

D89 **Other disorders involving the immune mechanism, not elsewhere classified**

Excludes hyperglobulinaemia NOS (R77.1)
 monoclonal gammopathy of undetermined significance (MGUS) (D47.2)
 transplant failure and rejection (T86.-)

- D89.0 Polyclonal hypergammaglobulinaemia
 Benign hypergammaglobulinaemic purpura
 Polyclonal gammopathy NOS
- D89.1 Cryoglobulinaemia
 Cryoglobulinaemia:
 - essential
 - idiopathic
 - mixed
 - primary
 - secondary Cryoglobulinaemic:
 - purpura
 - vasculitis

- D89.2 Hypergammaglobulinaemia, unspecified
- D89.3 Immune reconstitution syndrome
 Immune reconstitution inflammatory syndrome [IRIS]
Use additional external cause code (Chapter 20), to identify drug.
- D89.8 Other specified disorders involving the immune mechanism, not elsewhere classified
[Hyperimmunoglobulin D \[IgD\] syndrome](#)
 Immunocompromised status:
 - acquired NOS
 - drug related*Excludes* human immunodeficiency virus HIV disease (B20–B24)
- D89.9 Disorder involving the immune mechanism, unspecified
 Immune disease NOS
- ...

N90 Other noninflammatory disorders of vulva and perineum

Excludes: [benign neoplasm of vulva \(D28.0\)](#)
 carcinoma in situ of vulva (D07.1)
 current obstetric trauma (O70.-, O71.7–O71.8)
 inflammation of vulva (N76.-)

~~N90.0 Mild vulvar dysplasia
 Vulvar intraepithelial neoplasia [VIN], grade I~~

~~N90.1 Moderate vulvar dysplasia
 Vulvar intraepithelial neoplasia [VIN], grade II~~

~~N90.2 Severe vulvar dysplasia, not elsewhere classified
 Severe vulvar dysplasia NOS
Excludes: vulvar intraepithelial neoplasia [VIN], grade III, with or without mention of severe dysplasia, (D07.1)~~

N90.3 Dysplasia of vulva, unspecified
[Vulval intraepithelial neoplasia \(VIN\):](#)

- [pagetoid type](#)
- [unclassified type](#)

Use additional code (B97.7) to identify HPV (human papillomavirus), if applicable

Excludes: [benign neoplasm of vulva \(D28.0\)](#)
[carcinoma in situ of vulva \(D07.1\)](#)

N90.4 Leukoplakia of vulva
[Dystrophy of vulva](#)
[Kraurosis of vulva](#)

Dystrophy
Kraurosis

of vulva

N90.5 Atrophy of vulva
 Stenosis of vulva

N90.6 Hypertrophy of vulva
 Hypertrophy of labia

N90.7 Vulvar cyst

N90.8 Other specified noninflammatory disorders of vulva and perineum
 Adhesions of vulva
 Hypertrophy of clitoris

N90.9 Noninflammatory disorder of vulva and perineum, unspecified

...

P04 Fetus and newborn affected by noxious influences transmitted via placenta or breast milk

▽ 0050

Includes: nonteratogenic effects of substances transmitted via placenta

Excludes: congenital malformations due to teratogenic effects of substances transmitted via placenta (Q00–Q99)
neonatal jaundice due to drugs or toxins transmitted from mother (P58.4)

P04.0 Fetus and newborn affected by maternal anaesthesia and analgesia in pregnancy, labour and delivery

Reactions and intoxications from maternal opiates and tranquillisers administered during labour and delivery

P04.1 Fetus and newborn affected by other maternal medication

~~Cancer chemotherapy~~
~~Cytotoxic drugs~~

Includes: that by:

- [cytotoxic drugs](#)
- [pharmacotherapy for neoplasm](#)

Excludes: dysmorphism due to warfarin (Q86.2)
fetal hydantoin syndrome (Q86.1)
maternal use of drugs of addiction (P04.4)

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R87 Abnormal findings in specimens from female genital organs

See subdivisions

Abnormal findings in secretions and smears from:

- cervix uteri
- vagina
- vulva

Excludes: carcinoma in situ (D05–D07.3)
dysplasia of:

- cervix uteri (N87.-)
- vagina (N89.0–N89.3)
- vulva ~~NOS~~ (~~N90.0–N90.3~~)

R87.0 Abnormal findings in specimens from female genital organs, abnormal level of enzymes

R87.1 Abnormal findings in specimens from female genital organs, abnormal level of hormones

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Z54 Convalescence

▽ 2117

...

Z54.1 Convalescence following radiotherapy

Z54.2 Convalescence following ~~chemo~~pharmacotherapy
[Convalescence following chemotherapy](#)

Z54.3 Convalescence following psychotherapy

...

Z92 Personal history of medical treatment

▽ 0050

...

Z92.5 Personal history of rehabilitation measures

Z92.6 Personal history of ~~chemo~~pharmacotherapy for neoplastic disease

Z92.8 Personal history of other medical treatment

...

Appendix A

MORPHOLOGY OF NEOPLASMS

▽ 0050_0233

~~The third edition of the *International Classification of Diseases for Oncology (ICD-O)* was published in 2000. It contains a coded nomenclature for the morphology of neoplasms, which is reproduced here for those who wish to use it in conjunction with Chapter 2. The morphology codes listed here have been updated to align with ICD-O-3, 1 September 2011 Updates which were valid for use from January 2012.~~ The third edition of ICD-O was published in 2000. It contains a coded nomenclature for the morphology of neoplasms, and is reproduced here to use in conjunction with Chapter 2. The morphology codes listed here were updated for consistency with ICD-O-3 (*International Classification of Diseases for Oncology Third Edition*), 1 September 2011 Updates, implemented January 2012.

ICD-10-AM The morphology codes ~~numbers~~ consist of the letter 'M', followed by five digits; the first four digits identify the neoplasm's histological type, ~~of the neoplasm~~ and the fifth digit, following a slash (or solidus), indicates ~~its~~ the neoplasm's behaviour. The ~~one~~ fifth digit behaviour codes ~~is~~ are as follows:

/0 Benign

/1 Uncertain whether benign or malignant

Borderline malignancy

Low malignant potential

Uncertain malignant potential

/2 Carcinoma in situ

Intraepithelial

Noninfiltrating

Noninvasive

/3 Malignant, primary site

/6 Malignant, metastatic site

Malignant, secondary site

/9 Malignant, uncertain whether primary or metastatic site

~~In the nomenclature given here, the morphology code numbers include the behaviour code appropriate to the histological type of neoplasm; this behaviour code should be changed if the other reported information makes this appropriate. For example, chordoma is assumed to be malignant and is therefore assigned the code number M9370/3; the term 'benign chordoma' should, however, be coded M9370/0. Similarly, superficial spreading adenocarcinoma (M8143/3) should be coded M8143/2 when described as 'noninvasive', and melanoma (M8720/3) should be coded M8720/6 when described as 'secondary'.~~

In the nomenclature listed here, the morphology codes include the behaviour code appropriate to the histological type of neoplasm; it is appropriate to assign a different behaviour code if supported by documentation in the clinical record. For example, chordoma is assumed to be malignant and is therefore indexed to the default morphology code M9370/3; 'benign chordoma', however, is classified to M9370/0. Similarly, superficial spreading adenocarcinoma (M8143/3) is classified to M8143/2 when documented as 'noninvasive'.

The following table shows the correspondence between the behaviour code and the different sections of Chapter 2:

| Behaviour code | | Chapter 2 categories |
|----------------|---|----------------------|
| /0 | Benign neoplasms | D10–D36 |
| /1 | Neoplasms of uncertain and unknown behaviour | D37–D48 |
| /2 | In situ neoplasms | D00–D09 |
| /3 | Malignant neoplasms, stated or presumed to be primary | C00–C76
C80–C96 |
| /6 | Malignant neoplasms, stated or presumed to be secondary | C77–C79 |

~~Occasionally a problem arises when a site given in a diagnosis is different from the site indicated by the site-specific code. In such instances, the given Chapter 2 code should be ignored and the appropriate code for the site included in the diagnosis should be used~~

~~A documented neoplasm site may differ from the default site listed in the Alphabetic Index. In such instances, the listed default Chapter 2 code in the Alphabetic Index should not be assigned, and the more appropriate site specific code should be assigned from the *Neoplasm* table. For example, a code from category C50—*Malignant neoplasm of breast* is added to the morphologic term 'infiltrating duct carcinoma' (M8500/3), because this type of carcinoma usually arises in the breast. However, if the term 'infiltrating duct carcinoma' is used for a primary carcinoma arising in the pancreas, the correct code would be C25.9 *Malignant neoplasm of pancreas, unspecified*. For example, C69.9 *Malignant neoplasm of eye, unspecified* is the default site code listed in the Alphabetic Index with type A spindle cell melanoma (M8773/3). However, if the site of the neoplasm documented in the clinical record is specified as the choroid, assign C69.3 *Malignant neoplasm of choroid*. Similarly, infiltrating duct carcinoma (M8500/3) usually arises in the breast (classified to category C50 *Malignant neoplasm of breast*). However, if primary infiltrating duct carcinoma of the pancreas is documented in the clinical record, assign a site code from category C25 *Malignant neoplasm of pancreas*.~~

~~A coding difficulty sometimes arises where a morphological diagnosis contains two qualifying adjectives that have different code numbers. Where a documented morphology contains more than one qualifying term classifiable to different morphology codes, assign the morphology code with the higher number. An example is 'transitional cell epidermoid carcinoma'. 'Transitional cell carcinoma NOS' is classified to M8120/3 and 'epidermoid carcinoma NOS' is classified to M8070/3. In such circumstances, the higher number (M8120/3 in this example) should be used is assigned, as it is usually more specific. For other further information about regarding the coding of morphology, see the *Australian Coding Standards*.~~

M859–M867 Specialised gonadal neoplasms

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| | |
|-----------|---|
| M8621/1 | Granulosa cell-theca cell tumour |
| ⊕ M8621/2 | Granulosa cell-theca cell tumour, in situ |
| ⊕ M8621/3 | Granulosa cell-theca cell tumour, malignant |
| ⊕ M8621/6 | Granulosa cell-theca cell tumour, metastatic |
| ⊕ M8621/9 | Granulosa cell-theca cell tumour, uncertain whether primary or metastatic |
| ⊕ M8622/0 | Granulosa cell tumour, juvenile, benign |
| M8622/1 | Granulosa cell tumour, juvenile, NOS |
| M8623/1 | Sex cord tumour with annular tubules |
| M8630/0 | Androblastoma, benign |
| M8630/1 | Androblastoma NOS |
| ⊕ M8630/2 | Androblastoma, in situ |
| M8630/3 | Androblastoma, malignant |
| ⊕ M8630/6 | Androblastoma, malignant, metastatic |
| ⊕ M8630/9 | Androblastoma, malignant, uncertain whether primary or metastatic |

...

Alphabetic Index

Acantholysis L11.9

Acanthoma (M8070/3) — see [also Neoplasm/malignant - benign \(M8000/0\)](#) — see [also Neoplasm/benign](#)

Acanthosis (acquired) (nigricans) L83
- benign Q82.89

...

Ca — see [Cancer](#)

...

Carcinoma (M8010/3) — see [also Neoplasm/malignant](#)

Note: Except where otherwise indicated, the morphological varieties of carcinoma in the list below should be coded by site as for 'Neoplasm/malignant'.

...

- neuro-endocrine (M8246/3) C80.-
- - large cell (M8013/3)
- - low grade (M8240/3)
- - moderately differentiated (M8249/3)
- - primary cutaneous (M8247/3) — see [Neoplasm/skin/malignant](#)
- - small cell (M8041/3)
- - specified site NEC — see [Neoplasm/malignant](#)
- - well differentiated (M8240/3)

- [no](#)

- [special type \(NST\)](#) — see [Carcinoma/ductal](#)

- [specific type \(NST\)](#) — see [Carcinoma/ductal](#)

- nonencapsulated sclerosing (M8350/3) C73
- noninfiltrating — see [Carcinoma in situ](#)
- non-small cell NEC (M8046/3) — see [Neoplasm/lung/malignant](#)
- oat cell (M8042/3)
- - specified site — see [Neoplasm/malignant](#)
- - unspecified site C34.9

...

- - transitional cell (M8130/3) — see [also Neoplasm/bladder/malignant](#)
- - - of low malignant potential (M8130/1) D41.4
- - urothelial (M8130/3) — see [also Neoplasm/bladder/malignant](#)
- - - of low malignant potential (M8130/1) D41.4

...

- urothelial (M8120/3)
- - papillary (M8130/3) — see [also Neoplasm/bladder/malignant](#)
- ~~low malignant potential (M8130/1) D41.4~~
- - [low grade \(M8130/2\) D09.0](#)
- - - [invasive \(M8130/3\)](#) — see [also Neoplasm/bladder/malignant](#)
- - - noninvasive — see [Carcinoma in situ/urothelial/papillary \(M8130/2\) D09.0](#)
- - - [of low malignant potential \(M8130/1\) D41.4](#)
- verrucous (epidermoid) (squamous cell) (M8051/3)

...

Carcinoma in situ (M8010/2) — see [also Neoplasm/in situ](#)

...

- urothelial (M8120/2)
- - papillary (M8130/2) D09.0
- ~~low malignant potential (M8130/1) D41.4~~
- - [low grade \(M8130/2\) D09.0](#)
- - - [invasive \(M8130/3\)](#) — see [also Neoplasm/bladder/malignant](#)
- - - [noninvasive \(M8130/2\) D09.0](#)
- - - [of low malignant potential \(M8130/1\) D41.4](#)
- - [specified site](#) — see [Neoplasm/in situ](#)
- - [unspecified site D09.1](#)
- verrucous (epidermoid) (squamous cell) (M8051/2)

...

Carcinomatosis

- abdominal (M8010/3) C79.88
- [lymphangitis \(M8010/6\) C78.0](#)

- meninges (M8010/3) C79.3
- peritonei (M8010/6) C78.6
- ...

Chemodectoma (M8693/1) — *see Paraganglioma/extra-adrenal*

Chemoprophylaxis (*for neoplasm*) Z29.2

Chemosis, conjunctiva H11.4

Chemotherapy (for) (session)

- cancer Z51.1

- maternal, affecting fetus or newborn P04.1

- neoplasm Z51.1

~~- aftercare Z51.4~~

~~- maintenance NEC Z51.4~~

- [personal history of Z92.6](#)

- prophylactic NEC Z29.2

Cherubism K10.8

...

Condyloma (acuminatum) (*see also Wart(s)/anogenital region*) A63.00

- [flat \(M8077/0\) D28.0](#)

- gonorrhoeal A54.0

- latum A51.3

- syphilitic A51.3

- - congenital A50.0

...

Convalescence (following) Z54.9

- chemotherapy Z54.2

- [pharmacotherapy \(for neoplasm\) Z54.2](#)

- psychotherapy Z54.3

- radiotherapy Z54.1

...

Dysplasia — *see also Anomaly*

...

- vocal cords J38.3

- vulva [NEC N90.3](#)

- - mild ([M8077/0](#)) [D28.0](#) ~~N90.0~~

- - moderate ([M8077/2](#)) [D07.1](#) ~~N90.1~~

- - severe NEC ([M8077/2](#)) [D07.1](#) ~~N90.2~~

Dyspnoea (nocturnal) (paroxysmal) R06.0

...

Hamartoma, hamartoblastoma Q85.9

- epithelial (gingival), odontogenic, central or peripheral (M9321/0) D16.5

- - upper jaw (bone) D16.42

- [respiratory epithelial adenomatoid \(REAH\) \(M8010/0\)](#) — *see also Neoplasm/benign*

Hamartosis Q85.9

...

History (of) (personal)

...

- petrol 'sniffing' Z86.42

- [pharmacotherapy for neoplastic disease Z92.6](#)

- physical trauma NEC Z91.6

- - self-harm or suicide attempt Z91.5

...

Housemaid's knee M70.4

HSIL (HGSIL) (high grade squamous intraepithelial lesion) — *see Neoplasia/intraepithelial/cervix/squamous (cell)/high grade*

- *cervix* — *see Neoplasia/intraepithelial/cervix/squamous/high grade*

- *vulva* ([M8077/2](#)) [D07.1](#)

Hudson(-Staepli) line (cornea) H18.0

...

Lesion (nontraumatic)

...

- intracerebral — see *Lesion/brain*
- intrachiasmal (optic) H47.4
- [intraepithelial, squamous \(cell\)](#)
- - [cervix — see Neoplasia/intraepithelial/cervix/squamous](#)
- - [vulva](#)
- - - [high grade \(HSIL\) \(M8077/2\) D07.1](#)
- - - [low grade \(HPV effect only\) \(LSIL\) \(M8077/0\) D28.0](#)
- joint M25.9-

...

- vascular I99
- - affecting central nervous system I67.9
- - retina, retinal H35.0
- - umbilical cord, complicating delivery O69.5
- - - affecting fetus or newborn P02.6
- [vulva, vulval — see also Neoplasia/intraepithelial/vulva](#)
- - [squamous \(cell\)](#)
- - - [high grade \(HSIL\) \(M8077/2\) D07.1](#)
- - - [low grade \(HPV effect only\) \(LSIL\) \(M8077/0\) D28.0](#)
- warty — see *Verruca*

...

Leukaemia (M9800/3) C95.9-

Note: The following fifth character subdivision is for use with categories C90–C95:

- 0 without mention of remission
- 1 in remission

...

- aleukaemic NEC (M9800/3) C95.9-
- [ALL — see Leukaemia/lymphoblastic OR Leukaemia/lymphocytic/acute](#)
- AML — see also *Leukaemia/myeloblastic, acute AND Leukaemia/myeloid/acute*
- - M6 (M6a) (M6b) (M9840/3) C94.0-

...

- lymphatic (M9820/3) C91.9-
- - acute (M9835/3) C91.0-
- - aleukaemic (M9820/3) C91.9-
- - chronic (M9823/3) C91.1-
- - subacute (M9820/3) C91.9-
- lymphoblastic (acute) (~~ALL~~) ([not phenotyped](#)) ([precursor cell](#)) (M9835/3) C91.0-
- - [B-cell \(M9836/3\) C91.0-](#)
- - - [leukaemia-lymphoma — see Leukaemia/lymphoblastic/leukaemia-lymphoma/B](#)
- - leukaemia-lymphoma (M9835/3) C91.0-
- - - B (with) (M9811/3)
- - - - hyperdiploidy (M9815/3)
- - - - hypodiploidy (Hypodiploid ALL) (M9816/3)
- - - - t(1;19)(q23;p13.3); E2A-PBX1 (TCF3-PBX1) (M9818/3)
- - - - t(5;14)(q31;q32); IL3-IGH (M9817/3)
- - - - t(9;22)(q34;q11.2); BCR-ABL1 (M9812/3)
- - - - t(12;21)(p13;q22); TEL-AML1 (ETV6-RUNX1) (M9814/3)
- - - - t(v;11q23); MLL rearranged (M9813/3)
- - - T (M9837/3)
- - mature B-cell type (M9826/3) C91.8-
- - [T-cell \(M9837/3\) C91.0-](#)
- - - [leukaemia-lymphoma \(M9837/3\) C91.0-](#)
- - - ~~precursor cell (acute) (not phenotyped) (M9835/3) C91.0-~~
- - - ~~B-cell (M9836/3) C91.0-~~
- - - ~~leukaemia-lymphoma (M9811/3) — see Leukaemia/lymphoblastic/leukaemia-lymphoma/B~~
- - - ~~T-cell (M9837/3) C91.0-~~
- - - ~~leukaemia-lymphoma (M9837/3) C91.0-~~
- lymphocytic (M9820/3) C91.9-
- - acute ([not phenotyped](#)) ([precursor cell](#)) (M9835/3) C91.0-
- - aleukaemic (M9820/3) C91.9-

...

L-shaped kidney Q63.89

LSIL (LGSIL) (low grade squamous intraepithelial lesion) ~~N87.0~~

- cervix [N87.0](#)

- vulva (M8077/0) [D28.0](#)

Ludwig's angina or disease K12.2

...

Lymphoma (malignant) (M9590/3) C85.9

...

- non-Hodgkin (type) NEC (M9591/3) C85.9

- - and Hodgkin, composite (M9596/3) C85.7

- - follicular — *see Lymphoma/follicular*

- - non-follicular (diffuse) NEC (M9591/3) C83.9

- - resulting from HIV disease B21

- peripheral T-cell (M9702/3) C84.4

...

Maintenance

- chemotherapy for neoplasm Z51.1

- external fixation NEC Z47.8

- [pharmacotherapy \(for neoplasm\) Z51.1](#)

- traction NEC Z47.8

...

Maternal condition, affecting fetus or newborn P00.9

...

- operation unrelated to current pregnancy P00.6

- [pharmacotherapy \(for neoplasm\) P04.1](#)

- pre-eclampsia P00.0

...

Neoplasia

...

- intraepithelial

...

- - vulva ([pagetoid](#)) ([unclassified](#)) (VIN) [NEC](#) N90.3

~~— grade I N90.0~~

~~— grade II N90.1~~

~~— grade III (severe dysplasia) (M8077/2) D07.1~~

- - - basaloid (M8077/2) D07.1

- - - classical (M8077/2) D07.1

- - - differentiated (simplex) (M8077/2) D07.1

- - - grade — *see also Lesion/intraepithelial, squamous (cell)/vulva*

- - - - I (M8077/0) D28.0

- - - - II (M8077/2) D07.1

- - - - III (severe dysplasia) (M8077/2) D07.1

- - - mixed (basaloid or warty) (M8077/2) D07.1

- - - undifferentiated (M8077/2) D07.1

- - - usual type (M8077/2) D07.1

- - - warty (M8077/2) D07.1

Neoplasm, neoplastic

...

Pancytopenia [NEC](#) (acquired) D61.9

- with malformations D61.0

- congenital D61.0

...

Proliferation of primary cutaneous CD30-positive T-cells ~~(M9718/3) C86.6~~

- atypical small acinar, prostate (ASAP) (M8550/1) D40.0

- primary cutaneous CD30-positive T-cells (M9718/3) C86.6

Proliferative — see condition

...

Syndrome NEC — see also Disease [U91](#)

...

- bubbly lung P27.0
- [Buckley D82.4](#)
- Budd-Chiari I82.0
- bulbar (progressive) G12.2

...

- hypereosinophilic (M9964/3) D47.5
- hyperimmunoglobulin ~~E (IgE) D82.4~~
- [- D \(HIDS\) \(Hyper\(IgD\)\) \(IgD\) D89.8](#)
- [- E \(HIES\) \(Hyper\(IgE\)\) \(IgE\) D82.4](#)
- hyperkalaemic E87.5
- hyperkinetic (see also *Hyperkinesia*) F90.9
- - heart I51.8

...

- Jeune's Q77.2
- [Job D82.4](#)
- jugular foramen G52.7
- Kallmann's E23.0

...

Tumour (M8000/1) — see also *Neoplasm/uncertain behaviour*

...

- granulosa cell (M8620/1) D39.1
- - adult type (M8620/1)
- - in situ (M8620/2) D07.3
- - juvenile (M8622/1)
- [- - benign \(M8622/0\) — see Neoplasm/benign](#)
- - malignant (M8620/3) C56

...

Villous — see *condition*

VIN ([vulval intraepithelial neoplasia](#)), [unclassified type](#) — ~~see *Neoplasia/intraepithelial/vulva* N90.3~~

[- classified type - see *Neoplasia/intraepithelial/vulva*](#)

Vincent's

...

SECTION III TABLE OF DRUGS AND CHEMICALS

...

| | | | | | |
|--|-------|-----|-----|-----|-------|
| Camylofin | T44.3 | X43 | X63 | Y13 | Y51.3 |
| Cancer chemopharmacotherapy drug regimen | T45.1 | X44 | X64 | Y14 | Y43.3 |
| Candesartan | T46.5 | X44 | X64 | Y14 | Y52.5 |

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Neoplasms (ACHI)

Introduction/Rationale:

This addenda proposal combines the tasks TN196, TN203, TN216, and TN1292 which originated from coding queries regarding pharmacotherapeutic interventions in the treatment of malignant neoplasms, as well as those which treat other conditions, such as Albumex transfusion, administration of prothrombin X, and the administration of non blood product such as the administration of Haemacel. ACCD also identified the need for a new ACHI code for the removal of a brachytherapy applicator of the prostate.

Summary of proposal:

- TACE is a combination of chemotherapy (pharmacotherapy) and embolisation in the treatment of cirrhotic patients with hepatocellular carcinoma (HCC) and requires the assignment of two intervention codes to capture the clinical concept for this intervention. ACCD proposes to include a cross reference in the ACHI Alphabetic Index to classify TACE.
- During another addenda development, ACCD identified that although there is a code for the implantation of a brachytherapy applicator of the prostate, there is no intervention code for its removal. ACCD proposes to create a code for the *removal of brachytherapy applicator, prostate* in block **[1160]**.
- Amendments of the term from 'chemotherapy' to 'pharmacotherapy', where appropriate within the ACHI Alphabetic Index and Tabular List consistent with the ACS; block **[811]** was reviewed as it contains the term chemotherapy, however, these were not amended to 'pharmacotherapy' as it was not considered appropriate (ie. these terms remain clinically correct).
- T-cell therapy is based upon a type of white blood cell which plays an essential role in cell-mediated immunity. Immunotherapies are increasingly being used to strengthen the immune system of cancer patients. Therefore, ACCD proposes the creation of a subterm in the ACHI Alphabetic Index to classify this intervention.
- Following receipt of a query regarding the classification of prothrombin X in the Tenth Edition education workbook, ACCD proposes classifying administration of prothrombin X to 92061-00 **[1893]** *Administration of coagulation factors*.
- Albumex is a natural plasma component prepared from pooled human plasma and is used as a plasma volume expander in the treatment of shock due to blood loss. ACCD proposes to add Albumex to the Alphabetic Index as an NEM, with its assignment as per the guidelines in ACS 0302 *Blood transfusions*.
- Haemacel is a gelatin solution derived from cows, and not a blood product. ACCD proposes classifying administration of Haemacel to block **[1920]** *Administration of pharmacotherapy* with its assignment as per the guidelines in ACS 0042 *Procedures normally not coded, point 8. Drug treatment/pharmacotherapy/prescription of drugs*. Haemacel is proposed to be added to the Alphabetic Index.

- Amendments to ACHI Alphabetic Index will address other cited issues.

See also TN1342 Neoplasms (ICD-10-AM) and TN1344 Neoplasms (ACS).

ACCD PROPOSAL

Tabular List

741 Peripheral arterial or venous catheterisation

▽ 0943

Includes: administration of thrombolytic or other therapeutic agent for local effect

Excludes: systemic administration of thrombolytic or **chemo**pharmacotherapeutic agent (see block [1920]) that with:

- angioplasty (see blocks [670], [671] and [754])
- embolectomy or thrombectomy (see blocks [702], [703] and [729])

35317-01 Peripheral arterial or venous catheterisation with administration of thrombolytic agent
Transcatheter (catheter direct) thrombolytic therapy

35317-02 Peripheral arterial or venous catheterisation with administration of other therapeutic agent
Transcatheter (catheter direct) administration of **chemo**pharmacotherapeutic agent

...

802 Bone marrow/stem cell transplantation

▽ 0030

Code also when performed:

- **chemo**pharmacotherapy (see blocks [741] and [1920])
- total body irradiation (15600-03 [1789])

Excludes: adipose-derived stem cell therapy (14203-01 [1906])

13706-00 Allogeneic bone marrow or stem cell transplantation, matched related donor, without in vitro processing

Note: A matched related donor is:

- matched family (sibling)
- syngeneic (identical twin)

...

1160 Application, insertion or removal procedures on prostate or seminal vesicle

37218-01 Administration of agent into prostate
Administration of agent into periprostatic tissue

Includes: SpaceOAR

37223-00 Insertion of prostatic stent/coil

37227-00 Implantation of brachytherapy applicator, prostate
Insertion of catheters (needles) into prostate for brachytherapy

Includes: cystoscopy
ultrasound

Note: Radioactive (gold) seeds for brachytherapy

Code also:

- brachytherapy, prostate (15338-00 [1792])

Excludes: implantation of markers for radiotherapy guidance (37217-01 [1800])

90409-00 Implantation of other device(s), prostate
Prostatic urethral lift (PUL) procedure

Includes: Urolift

[96256-00 Removal of brachytherapy applicator, prostate](#)

...

1793 Removal of sealed radioactive source

15339-00 Removal of sealed radioactive source

[Removal of brachytherapy applicator NOS](#)

Excludes: removal of [brachytherapy eye](#)-applicator: ~~(42802-00 [177])~~

• [eye](#) (42802-00 [177])

• [female genital organ](#) (96251-01 [1299])

• [prostate](#) (96256-00 [1160])

...

1880 Therapies using agents, not elsewhere classified

...

92178-00 Heat therapy

Heat therapy involves the application of heat in the therapeutic treatment of disease or injury. Hyperthermia may be induced by hot packs or compresses, electric blankets, immersion in hot water (bath or tub), using humidified air or by extracorporeal warming of the blood. Hyperthermia may also be used as an adjunct to radiation therapy or ~~chemo~~pharmacotherapy and induced by microwave, ultrasound, low energy radiofrequency conduction or probes

Hyperthermic therapy

Includes: therapeutic treatment with the use of:

• heating pad

• infrared radiation

• microwaves

• shortwaves

• wax

Code also when performed:

• ~~chemo~~pharmacotherapy ~~(see Alphabetic Index: — see Alphabetic Index: ChemoPharmacotherapy)~~

• radiation therapy ~~(— see Alphabetic Index: Radiotherapy)~~

Excludes: thermocauterisation — ~~(see Alphabetic Index: Thermocauterisation)~~

thermocoagulation — ~~(see Alphabetic Index: Neurotomy/by site/radiofrequency)~~

thermokeratoplasty (90064-01 [173])

thermosclerectomy (42746-05 [191])

thermotherapy to prostate by microwaves (37224-00 [1162])

96154-00 Therapeutic ultrasound

Excludes: diagnostic ultrasound (see blocks [1940] to [1950])

...

1886 Perfusion

34533-00 Isolated limb perfusion

Includes: cannulation of artery and vein
regional perfusion for ~~chemo~~pharmacotherapy
repair of arteriotomy and venotomy

Excludes: that performed in conjunction with surgery – omit code

96231-00 Machine perfusion for organ transplantation

▽ 0030

Includes: machine perfusion:

• hypothermic

- normothermic
 - subnormothermic
- normothermic regional perfusion (NRP)

...

1891 Therapeutic collection and processing of blood/bone marrow

▽ 0030

13709-00 Collection of blood for transfusion
Donation of blood

13760-00 In vitro processing of bone marrow or peripheral blood for autologous stem cell transplantation

Includes: that as an adjunct to high dose ~~chemo~~pharmacotherapy
that with cryopreservation

...

1920 Administration of pharmacotherapy

▽ 0042, 0044, 0102, 0534, 0943, 1316, 1615, 1923

Administration of pharmacological agent for systemic effect

Excludes: administration of:

- blood and blood products
(see block [1893])
- pharmacological agent for:
 - anaesthesia (see blocks [1333], [1909] and [1910])
 - immunisation (see blocks [1881] to [1884])
 - local effect (see Alphabetic Index: Administration)
 - management of ectopic pregnancy
(see block [1256])
 - pain management (see blocks [31] to [37] and [60] to [66] and [1552])
 - perfusion (see block [1886])
 - vaccination (see blocks [1881] to [1883])
- surgical administration of ~~chemo~~pharmacotherapeutic agent (see block [741])

Note: The following list of extensions is provided for use with the codes in block [1920] *Administration of pharmacotherapy*.

-00 Antineoplastic agent

~~Agents used in the treatment of neoplasms and/or neoplasm-related conditions~~

Note: This extension is assigned for any agent (eg anti-infective, electrolytes, nutritional substances, steroids) classified to block [1920] that is used in the treatment of neoplasms and/or neoplasm related conditions.

Code also when performed:

- electrotherapy for skin lesion(s) (30195-06, 30195-07 [1612])

Excludes: transcatheter administration ~~of chemotherapeutic agent~~ (35317-02 [741])

-01 Thrombolytic agent

Excludes: transcatheter administration ~~of chemotherapeutic agent~~ (35317-01 [741])

-02 Anti-infective agent

Antibacterial
Antibiotic
Antifungal
Antiprotozoal
Antiviral

~~*Excludes:* when used in the treatment of neoplasms and/or neoplasm-related conditions (-00)~~

-03 Steroid

Corticosteroid

~~*Excludes:* when used in the treatment of neoplasms and/or neoplasm-related conditions (-00)~~

- 04 Antidote
 - Acetylcysteine
 - Antibody fragments
 - Antivenom
 - Digoxin
 - Heavy metal antagonist
- 06 Insulin
- 07 Nutritional substance
- 08 Electrolyte
- 10 Psychotherapeutic agent
 - Agents used in the treatment of mental, behavioural and psychiatric conditions
 - Administration of:
 - anticonvulsant
 - antidepressant
 - antiparkinsonian agent
 - antipsychotic
 - anxiolytic, sedative and hypnotic
 - mood stabiliser
 - other psychoactive medication
 - stimulant
- 19 Other and unspecified pharmacological agent
 - Dextrose
 - Iron
- 96196-XX Intra-arterial administration of pharmacological agent
 - See subdivisions*
 - Code also when performed:*
 - loading of drug delivery device (96209 [1920])

...

Alphabetic Index

Adjustment

...

- cannula
- - for
- - - cardiopulmonary bypass 38627-01 [642]
- - - extracorporeal membrane oxygenation 38627-03 [572]
- - - ventricular assist device 38627-00 [608]
- [continuous ambulatory drug delivery device \(CADD\) \(connection\) \(disconnection\) 13942-02 \[1922\]](#)
- defibrillator, generator (automatic) (cardioverter) (*see also Test, testing/defibrillator*) 90203-06 [656]
- denture (pre-existing) 97741-00 [475]
- - new denture — *omit code*
- device
- - [continuous ambulatory drug delivery device \(CADD\) \(connection\) \(disconnection\) 13942-02 \[1922\]](#)
- - gastric, for obesity (endoscopic) 90950-04 [889]
- - neurostimulator — *see Adjustment/neurostimulator*
- - ring fixator (or similar device) 50309-00 [1554]
- - - with
- - - - insertion of pin (fixation) 50309-00 [1554]
- - - - removal of pin (fixation) 50309-00 [1554]
- - stomach, for obesity (endoscopic) 90950-04 [889]
- electrode(s) (for)

...

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*

Note: Terms listed under the lead term 'Administration' are split by three main subterms; Administration/indication, Administration/specified site and Administration/type of agent.

[- for neoplasm and/or neoplasm related conditions — code to block \[1920\] with extension - 00](#)

- indication — *see also Administration/specified site OR Administration/type of agent*

...

- specified site — *see also Administration/indication OR Administration/type of agent*

- - anal region (sphincter) 44104-00 [929]

...

- type of agent — *see also Administration/indication OR Administration/specified site*

- - 5-FU (fluorouracil) 42824-01 [251]

- - acetylcysteine — *code to block [1920] with extension -04*

- - adipose-derived stem cells 14203-01 [1906]

- - albumin ([Albumex](#)) 92062-00 [1893]

- - alcohol

- - - nerve — *see Administration/specified site/nerve/by site/neurolytic agent*

...

- - blood (products) — *see also Transfusion/blood*

- - - for cardioplegia (retrograde) 38588-00 [642]

- - - autologous (collected prior to surgery) (intraoperative) 92060-00 [1893]

- - - [CAR \(chimeric antigen receptor\) T-cells 13706-04 \[1893\]](#)

- - - erythrocytes 13706-02 [1893]

- - - expander (Dextran) (Rheomacrodex) 92063-00 [1893]

- - - gamma globulin 13706-05 [1893]

- - - granulocytes 92064-00 [1893]

- - - immunoglobulin 13706-05 [1893]

- - - leukocytes (donor) 13706-04 [1893]

- - - packed cells 13706-02 [1893]

- - - plasma (FFP) (fresh frozen) 92062-00 [1893]

- - - platelets 13706-03 [1893]

- - - red cells 13706-02 [1893]

- - - serum NEC 92062-00 [1893]

- - - surrogate 92064-00 [1893]

- - - [T-cells, CAR \(chimeric antigen receptor\) 13706-04 \[1893\]](#)

- - - thrombocytes 13706-03 [1893]

- - - white cells (donor leukocytes) 13706-04 [1893]

- - - whole 13706-01 [1893]

- - bone

- - - graft substitute (paste) — *see Graft/bone/specified site*

- - - marrow 90280-00 [803]

- - - substitute material (paste) — *see Graft/bone/specified site*

- - botulinum toxin (Botox) (Botoxin) (onabotulinumtoxinA) (soft tissue) (type A) NEC (*see also Administration/indication OR Administration/specified site*) 18360-01 [1552]

- - - for strabismus 18366-01 [216]

- - - anorectal region 90344-02 [929]

- - - bladder wall 36851-00 [1092]

- - - eyelid 18370-03 [230]

- - - salivary gland 18360-02 [399]

- - - skin (subcutaneous tissue) 90660-00 [1602]

- - - vocal cord 41870-01 [521]

- - [CAR \(chimeric antigen receptor\) T-cells 13706-04 \[1893\]](#)

- - chemonucleolytic (intervertebral) 40336-00 [31]

- - chemotherapeutic — *see [ChemoPharmacotherapy](#)*

...

- - granulocytes 92064-00 [1893]

- - [Haemaccel 96199-19 \[1920\]](#)

- - heavy metal antagonist — *code to block [1920] with extension -04*

...

- - prophylactic NEC — *code to block [1920] with extension -19*

- - prostaglandin — *see also Induction/labour*

- - - for termination of pregnancy 90461-00 [1330]

- - [prothrombin X 92061-00 \[1893\]](#)

- - psychoactive medication

- - - anticonvulsant — *code to block [1920] with extension -10*

- - - antidepressant — *code to block [1920] with extension -10*

...

- - sympatholytic — *see also Administration/specified site/nerve/sympathetic*

- - - intra-arterial 90029-00 [65]

- - - intravenous 90029-00 [65]
- - [T-cells, CAR \(chimeric antigen receptor\) 13706-04 \[1893\]](#)
- - tattoo, tattooing
- - - by
- - - - colonoscopy (to caecum) 32090-02 [905]
- - - - - to hepatic flexure 32084-02 [905]
- - - - - panendoscopy (to duodenum) 30473-07 [1005]
- - - - - to ileum 30473-08 [1005]
- ...

Apheresis

- ...
- therapeutic NEC 13750-06 [1892]
- ...
- - stem cells, peripheral blood 13750-04 [1892]
- - - with cryopreservation (freezing) 13750-05 [1892]
- - [T-cells 13750-01 \[1892\]](#)

Apicectomy 97432-00 [463]

...

Catheterisation

- artery (open) 34524-00 [694]
- ...
- - peripheral
- - - with transcatheter administration of agent (percutaneous)
- - - - arrest haemorrhage — see *Embolisation/blood vessel, transcatheter/by site*
- - - - ~~chemotherapeutic 35317-02 [741]~~
- - - - occlude — see *Embolisation/blood vessel, transcatheter/by site*
- - - - [pharmacotherapeutic 35317-02 \[741\]](#)
- - - - thrombolytic 35317-01 [741]
- - umbilical, in neonate 13303-00 [694]
- ...

Chemocauterisation

- corneal epithelium 42650-00 [172]

[Chemoembolisation, liver](#) — see *Embolisation/blood vessel, transcatheter/liver AND Pharmacotherapy/for/local effect*

Chemomechanical preparation

- root canal (1 canal) (1st canal) (complete) 97415-00 [462]
- - each additional canal (≥ 2 canals) 97416-00 [462]
- ...

Chemotherapy — see *also Pharmacotherapy*

~~— for local effect (open) (percutaneous) (via peripheral arterial or venous catheterisation) 35317-02 [741]~~

Chevron procedure (osteotomy of toe) 48400-03 [1528]

- with internal fixation 48403-01 [1528]
- ...

Collection

- ...
- sweat, by iontophoresis 96205-19 [1920]
- [T-cells \(apheresis\) 13750-01 \[1892\]](#)
- tissue sample
- - for dental pathological laboratory examination 97044-00 [452]
- ...

Implant, implantation — see *also Insertion*

- ...
- bone conduction hearing device 41557-02 [321]
- brain wafer, ~~chemo~~pharmacotherapy [for neoplasm](#) 96201-00 [1920]
- cardioverter, generator (automatic) (with pacemaker functionality) 38393-00 [653]
- - with replacement 38393-01 [656]
- ...
- ureter — see *also Reimplantation/ureter*
- - stimulator, electronic 90355-00 [1069]
- wafer, ~~chemo~~pharmacotherapy, intracerebral [for neoplasm](#) 96201-00 [1920]

Impression

- for denture repair 97776-00 [477]
- ...

Insertion

- ...
- brain wafer, [chemopharmacotherapy for neoplasm](#) 96201-00 [1920]
- button
- - gastrostomy, nonendoscopic 30483-00 [870]
- - nasal septum 41907-00 [371]
- - patella 90562-00 [1524]
- ...
- catheter
- - artery (open) (percutaneous) 34524-00 [694]
- ...
- - - peripheral
- - - - with transcatheter administration of agent
- - - - arrest haemorrhage — see *Embolisation/blood vessel, transcatheter/by site*
- - - - ~~chemotherapeutic 35317-02 [741]~~
- - - - occlude (embolise) — see *Embolisation/blood vessel, transcatheter/by site*
- - - - [pharmacotherapeutic 35317-02 \[741\]](#)
- - - - thrombolytic 35317-01 [741]
- ...
- ventricular assist device
- ...
- - right 38615-01 [608]
- - - and left 38618-00 [608]
- wafer, [chemopharmacotherapy for neoplasm](#), intracerebral 96201-00 [1920]
- wire or pin (orthopaedic) 47921-00 [1554]
- - with
- - - adjustment of ring fixator (or similar device) 50309-00 [1554]
- ...

Maintenance (of)

- catheter, implanted (for administration of pharmacotherapy) NEC 92058-01 [1922]
- - vascular (central venous catheter) (Hickman's line) (permacath) (without reservoir) 92058-01 [1922]
- - - with reservoir (infusion port) (Port-A-Cath) 13939-02 [1922]
- continuous ambulatory drug delivery device (CADD) ([connection](#)) ([disconnection](#)) 13942-02 [1922]
- denture, by
- - addition of clasp(s)
- ...
- device
- - drug delivery (CADD) ([connection](#)) ([disconnection](#)) (external infusion pump) [NEC](#) 13942-02 [1922]
- - - with loading of device 96209 [1920]
- - vascular access 13939-02 [1922]
- drug delivery device (CADD) ([connection](#)) ([disconnection](#)) (external infusion pump) [NEC](#) 13942-02 [1922]
- peritoneal access device (peritoneal port-catheter) 92058-01 [1922]
- ...

Management (of)

- ...
- ectopic pregnancy 35677-03 [1256]
- - by
- - - ~~chemotherapy (Methotrexate) 35677-03 [1256]~~
- - - control of haemorrhage, cervical 96226-00 [1274]
- - - injection
- - - - fetotoxic (directly into fetus) (laparoscopic) 35674-01 [1256]
- - - - - using ultrasound guidance 35674-00 [1256]
- - - - - via laparotomy 35677-02 [1256]
- - - - intramuscular (Methotrexate) 35677-03 [1256]
- - - [pharmacotherapy \(Methotrexate\) 35677-03 \[1256\]](#)
- - - salpingectomy (bilateral) (laparoscopic) (unilateral) 35678-01 [1256]
- - - - via laparotomy 35677-05 [1256]

Pharmacotherapy (systemic effect) 96206 [1920]

- for ~~local effect~~ — see *Administration*
- - [local effect \(open\) \(percutaneous\) \(via peripheral arterial or venous catheterisation\) — see also Administration 35317-02 \[741\]](#)
- - [neoplasm and/or neoplasm related conditions — code to block \[1920\] with extension -00](#)
- enteral 96202 [1920]
- intra-arterial 96196 [1920]
- intracavitary 96201 [1920]
- intramuscular 96197 [1920]
- intrathecal 96198 [1920]
- intravenous 96199 [1920]
- oral 96203 [1920]
- specified NEC 96205 [1920]
- subcutaneous 96200 [1920]
- via vascular access device 96199 [1920]

Planning (of)

- ...
- brachytherapy (simple) 15536-00 [1799]
- - complex 15536-02 [1799]
- - intermediate 15536-01 [1799]
- - intravascular 15541-00 [1799]
- - prostate 15539-00 [1799]
- ~~chemotherapy~~
- ~~primary course 90762-00 [1922]~~
- ~~secondary course 90762-01 [1922]~~
- [pharmacotherapy \(chemotherapy\) \(for neoplasm\)](#)
- - [primary course 90762-00 \[1922\]](#)
- - [secondary course 90762-01 \[1922\]](#)

Plasmapheresis, therapeutic 13750-00 [1892]

...

Removal — see also *Excision*

- ...
- applicator for brachytherapy (catheters) (needles) [NEC](#) 15339-00 [1793]
- - eye 42802-00 [177]
- - [prostate 96256-00 \[1160\]](#)
- arch bars (mandible) (maxilla) 45823-00 [1360]
- arteriovenous
- - carbon dioxide (AVCO2R) (extracorporeal) 90225-02 [572]
- - fistula
- - - surgically created 34130-00 [765]
- ...
- bowel sphincter, artificial 32221-01 [940]
- - with replacement 32221-00 [940]
- brachytherapy applicator (catheters) (needles) [NEC](#) 15339-00 [1793]
- - eye 42802-00 [177]
- - [prostate 96256-00 \[1160\]](#)
- bridge (splint) 97656-00 [472]
- ...
- device — see also *Removal/by type of device*
- ...
- - prostatic
- - - brachytherapy applicator (catheters) (needles) ~~15339-00 [1793]~~[96256-00 \[1160\]](#)
- - - stent (coil) 92115-00 [1900]
- ...
- duct, submandibular (for control of drooling) 30255-00 [397]
- ectopic pregnancy
- - by
- ~~chemotherapy (Methotrexate) 35677-03 [1256]~~
- - - fetotoxic
- - - - injection (laparoscopic) 35674-01 [1256]
- - - - intramuscular (Methotrexate) 35677-03 [1256]
- - - - under ultrasound guidance 35674-00 [1256]
- - - - via laparotomy 35677-02 [1256]
- - - hydrostatic expression 35677-01 [1256]
- - - intramuscular injection (Methotrexate) 35677-03 [1256]
- - - manual expression 35677-01 [1256]
- - - [pharmacotherapy \(Methotrexate\) 35677-03 \[1256\]](#)

- - - salpingectomy (laparoscopic) 35678-01 [1256]
- - - via laparotomy 35677-05 [1256]
- ...
- post, cemented root canal (crown) (dental) 97452-00 [464]
- ~~- prostatic stent (coil) 92115-00 [1900]~~
- [prostatic](#)
- [applicator for brachytherapy 96256-00 \[1160\]](#)
- [stent \(coil\) 92115-00 \[1900\]](#)
- prosthesis, prosthetic device
- - for gastroschisis 43867-01 [1003]
- - abdominal wall (mesh) 90952-00 [987]
- - arm 90606-01 [1661]
- - bicep 90606-01 [1661]
- - breast 45548-00 [1758]
- - - with replacement 45552-00 [1758]
- ...

T

[TACE \(transarterial chemoembolisation\), liver](#) — see *Embolisation/blood vessel, transcatheter/liver AND Pharmacotherapy/for/local effect*

Tamponade — see also *Control/haemorrhage*

...

Therapy

- ...
- stem cell, adipose-derived 14203-01 [1906]
- stimulation (using electrophysical agent) NEC 96155-00 [1880]
- - tactile 96112-00 [1875]
- tactile stimulation 96112-00 [1875]
- [T-cell 13706-04 \[1893\]](#)
- ultraviolet (skin)
- ...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Neoplasms (ACS)

Introduction/Rationale:

This addenda proposal combines the following tasks, which are primarily based on public submissions and coding queries:

- ACS 0233 *Morphology* (TN835, Q2862, Q3005)
- ACS 0236 *Neoplasm coding and sequencing* (TN915)
- ACS 0002 *Additional diagnoses* (TN918, P236, Q2761)
- ACS 0044 *Chemotherapy* (TN1034, P253, Q3145)
- ACS 0237 *Recurrence of malignancy* (TN1092, Q3004)

In addition to the above public submission and coding query based addenda proposals, all the ACS within ACS Chapter 2 *Neoplasms* were reviewed. ACCD proposes deleting redundant standards and transferring the content to ICD-10-AM/ACHI Tabular List and/or Alphabetic Index, and/or another ACS where appropriate.

The guidelines for administration of oral/transmucosal pharmacotherapy for the treatment of malignant neoplasms, and administration of antineoplastic pharmacotherapy in multi-day episodes of care were reviewed. Research indicates that oral pharmacotherapy is increasingly being used to treat malignant neoplasms, often as part of a protocol with administration via other routes (eg intravenous). ACCD proposes expanding the guidelines in ACS 0044 to assign administration of antineoplastic pharmacotherapy via any route (eg oral, transmucosal, subcutaneous), consistent with that performed in multi-day episodes of care.

Summary of proposal:

- Rename ACS 0044 *Chemotherapy* to *Pharmacotherapy* to encompass all pharmacotherapy, (including but not limited to chemotherapy), as per the definition in ACS 0044; and amendment of the terminology 'chemotherapy' to 'pharmacotherapy' in ICD-10-AM/ACHI/ACS where appropriate.
- ACCD considered amendments to ACS 0102 *HIV/AIDS (Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome)* as there is reference to prophylactic chemotherapy for HIV infections. However, upon review of ACS 0102 it was identified that the entire standard will require revision and due to time constraints within this work cycle, the revision of ACS 0102 will be considered for a future edition.
- Deletion of the now redundant ACS 0218 *Lymphangitis carcinomatosa* with amendment to the Tabular List at C78.0 *Secondary malignant neoplasm of lung* and addition of this condition to the Alphabetic Index.
- Addition of examples throughout ACS relevant to neoplasms to demonstrate the use of guidelines and to minimise potential ambiguity.
- Pancytopenia (NOS) will remain classified as per ACS 0304 *Pancytopenia*, which remains consistent with ICD-11, as the WHO has not reclassified this clinical concept, ICD-10-AM and the ACS will remain unchanged.

ACCD PROPOSAL

Australian Coding Standards

TABLE OF CONTENTS

GENERAL STANDARDS FOR INTERVENTIONS

...
0042 Procedures normally not coded
0044 ~~Chemo~~Pharmacotherapy
0047 Adhesions
...

SPECIALTY STANDARDS

...

2. Neoplasms

~~0218 Lymphangitis carcinomatosis~~
0222 Lymphoma
0229 Radiotherapy
0233 Morphology
0234 Contiguous sites
0236 Neoplasm coding and sequencing
0237 Recurrence of malignancy
0239 Metastases
0241 ~~Malignancy~~Malignant neoplasm of lip
0245 Remission in malignant immunoproliferative diseases and leukaemia

0001 PRINCIPAL DIAGNOSIS

...

RESIDUAL CONDITION OR NATURE OF SEQUELA

The residual condition or nature of the sequela is sequenced first, followed by the sequela code for the cause of the residual condition, except in a few instances where the Alphabetic Index directs otherwise (see also ACS 0008 *Sequelae* and ACS 1912 *Sequelae of injuries, poisoning, toxic effects and other external causes*).

Note: For more information regarding ~~choice of~~ principal diagnosis [selection](#) in specific cases, refer to the following general rules and chapter specific rules. In particular, obstetric admissions, admissions for ~~chemo~~pharmacotherapy, radiotherapy and dialysis have special guidelines for principal diagnosis selection.

...

0020 BILATERAL/MULTIPLE PROCEDURES

...

MULTIPLE PROCEDURES

...

Classification

1. The SAME PROCEDURE repeated during the episode of care at DIFFERENT visits to theatre

A procedure which is repeated during the episode of care at different visits to theatre should be coded as many times as it is performed.

Exceptions to this rule are:

- procedures included in ACS 0042 *Procedures normally not coded*
- procedures with specific rules in other coding standards, such as:
 - burn dressings (see ACS 1911 *Burns*)
 - **chemo**pharmacotherapy (see ACS 0044 *ChemoPharmacotherapy*)
 - blood transfusions (see ACS 0302 *Blood transfusions*)
 - allied health interventions (see ACS 0032 *Allied health interventions*)

...

0042 PROCEDURES NORMALLY NOT CODED

...

CLASSIFICATION

...

The procedures listed below are normally not coded:

...

8. Drug treatment/pharmacotherapy/prescription of drugs (eg total parental nutrition (TPN))

Exception(s): code following the guidelines in:

- ACS 0044 *ChemoPharmacotherapy*
- ACS 0534 *Specific interventions related to mental health care services*

...

0044 **CHEMO**PHARMACOTHERAPY

DEFINITION

Pharmacotherapy is the treatment of a condition by means of drug(s). Chemotherapy is a type of pharmacotherapy and generally refers to pharmacotherapy for malignancy and to a lesser extent other systemic conditions such as HIV (see also ACS 0102 *HIV/AIDS* ([human immunodeficiency virus/acquired immune deficiency syndrome](#))), lupus erythematosus and rheumatoid arthritis.

For [coding classification](#) purposes, **chemotherapy** [pharmacotherapy](#) is defined as: “The administration of any therapeutic substance (usually a drug), excluding blood and blood products.”

[Episodes of care for administration of pharmacotherapy for a patient with a neoplasm may be to:](#)

- [1. treat the neoplasm](#)
- [2. treat a neoplasm related or neoplasm treatment related condition](#)
- [3. prevent a neoplasm related or neoplasm treatment related condition](#)
- [4. a combination of these factors.](#)

~~Chemotherapy~~ [Pharmacotherapy can may have different routes of administration be administered in a number of ways](#), including ~~the following~~:

1. intravenous
2. intra-arterial
3. intramuscular
4. intralesional/subcutaneous
5. intracavitary, (eg intraperitoneal, intrathecal, bladder)
6. oral
- [7. transmucosal \(eg buccal, intranasal, sublingual, rectal\)](#)

CLASSIFICATION

ICD-10-AM CLASSIFICATION

Same-day episodes of care for **chemo[pharmacotherapy](#) for neoplasm and neoplasm (treatment) related conditions**

~~For episodes of care for chemotherapy for a neoplasm or neoplasm related condition, where the patient is discharged on the same day as the admission, assign:~~

- ~~• *Z51.1 Pharmacotherapy session for neoplasm* as principal diagnosis~~
- ~~• a code for the neoplasm being treated as the first additional diagnosis (see also ACS 0236 *Neoplasm coding and sequencing*)~~
- ~~• additional diagnosis code(s) for any neoplasm related condition(s) being treated~~
- ~~• the appropriate procedure code.~~

[Where pharmacotherapy is administered for a neoplasm or neoplasm \(treatment\) related condition, and the admission and discharge are on the same day, assign:](#)

- [• *Z51.1 Pharmacotherapy session for neoplasm* as principal diagnosis](#)
- [• a code for the neoplasm being treated as the first additional diagnosis \(see also ACS 0236 *Neoplasm coding and sequencing*\)](#)

- [additional diagnosis code\(s\) for any neoplasm related condition or neoplasm treatment related condition\(s\) meeting ACS 0002 Additional diagnoses.](#)

Same-day episodes of care for ~~chemo~~pharmacotherapy for conditions other than neoplasms

For episodes of care for [administration of pharmacotherapy](#) for conditions other than [a neoplasms](#), where [admission and discharge are](#) on the same-day ~~as the admission~~, assign [a code for the condition as the principal diagnosis](#) (see Example 3).

- ~~a code for the condition~~
- ~~the appropriate procedure code~~

For guidelines regarding administration of pharmacotherapy for HIV/AIDS, see [ACS 0102 HIV/AIDS \(human immunodeficiency virus/acquired immune deficiency syndrome\)](#).

~~Administration of chemotherapy during m~~Multi-day episodes of care [for pharmacotherapy for neoplasm](#)

Where ~~chemo~~pharmacotherapy is administered [for a neoplasm or neoplasm \(treatment\) related condition](#) during multi-day episodes of care,:

- assign a code for the condition requiring treatment ~~and the appropriate procedure code(s)~~ (see [Example 5](#)).

- **do not** assign [Z51.1 Pharmacotherapy session for neoplasm](#).

~~Chemotherapy procedure coding~~ [ACHI CLASSIFICATION](#)

When a patient receives pharmacotherapy [for a neoplasm or neoplasm \(treatment\) related condition](#) ~~multiple number of~~ times during an episode of care, and the same ~~procedure code~~ [ACHI code](#) applies, assign the ~~procedure~~ [ACHI](#) code ~~only~~ once [only](#).

~~Oral chemotherapy should not be coded in inpatient episodes of care.~~

EXAMPLE 1:

Patient admitted for same-day chemotherapy for prostate cancer. ~~Intravenous (IV) cyclophosphamide given Oradoxel was administered orally, and the~~ patient [was](#) discharged same-day.

| | | |
|--------|---------------------------------|---|
| Codes: | Z51.1 | <i>Pharmacotherapy session for neoplasm</i> |
| | C61 | <i>Malignant neoplasm of prostate</i> |
| | M8000/3 | <i>Neoplasm, malignant</i> |
| | 96199-00 [1920] | <i>Intravenous administration of pharmacological agent, antineoplastic agent</i> |
| | 96203-00 [1920] | Oral administration of pharmacological agent, antineoplastic agent |

EXAMPLE 2:

Patient previously diagnosed with metastatic bone cancer from the breast and admitted for same-day [intravenous \(IV\)](#) infusion of Aredia for hypercalcaemia.

| | | |
|--------|---------|---|
| Codes: | Z51.1 | <i>Pharmacotherapy session for neoplasm</i> |
| | C79.5 | <i>Secondary malignant neoplasm of bone and bone marrow</i> |
| | M8000/6 | <i>Neoplasm, metastatic</i> |
| | C50.- | <i>Malignant neoplasm of breast</i> |

M8000/3 *Neoplasm, malignant*
E83.5 *Disorders of calcium metabolism*
96199-00 [1920] *Intravenous administration of pharmacological agent, antineoplastic agent*

Note: Aredia is a medication used to treat hypercalcaemia (a condition that commonly occurs in patients with bony neoplasms (in both primary and/or metastatic lesions)). Aredia is also administered to prevent pathological fractures due to bony neoplasms.

EXAMPLE 3:

Patient admitted for same-day IV infusion of methylprednisone for multiple sclerosis.

Codes: G35 *Multiple sclerosis*
96199-03 [1920] *Intravenous administration of pharmacological agent, steroid*

EXAMPLE 4:

Patient admitted for course of chemotherapy for breast cancer over twelve days. Intravenous chemotherapy (5FU) was administered.

Codes: C50.- *Malignant neoplasm of breast*
M8000/3 *Neoplasm, malignant*
96199-00 [1920] *Intravenous administration of pharmacological agent, antineoplastic agent*

EXAMPLE 5:

Patient admitted with a five day history of increasing abdominal distension and pain especially on deep inspiration. Last opened bowels today. Diagnosed 12 months ago with serous papillary adenocarcinoma of right ovary with metastases to the peritoneum. ~~Chemotherapy administered over the past six months.~~ A peritoneal tap was performed under local anaesthetic (LA) to treat the malignant ascites. Three days later IV chemotherapy administered without any problems. Final diagnosis: malignant ascites. ~~At discharge, patient well and mobilising freely.~~

Codes: C78.6 *Secondary malignant neoplasm of retroperitoneum and peritoneum*
M8460/6 *Papillary serous cystadenocarcinoma, metastatic*
C56 *Malignant neoplasm of ovary*
M8460/3 *Papillary serous cystadenocarcinoma*
30406-00 [983] *Abdominal paracentesis*
96199-00 [1920] *Intravenous administration of pharmacological agent, antineoplastic agent*

EXAMPLE 6:

A patient with Kaposi sarcoma of the skin due to HIV presents for same-day IV chemotherapy to treat the Kaposi sarcoma.

Codes: Z51.1 *Pharmacotherapy session for neoplasm*
C46.0 *Kaposi sarcoma of skin*

[M9140/3 Kaposi sarcoma](#)

[B21 Human immunodeficiency virus \[HIV\] disease resulting in malignant neoplasms](#)

[96199-00 \[1920\] Intravenous administration of pharmacological agent, antineoplastic agent](#)

Note: See also ACS 0102 HIV/AIDS (human immunodeficiency virus/acquired immune deficiency syndrome)

0102 HIV/AIDS (HUMAN IMMUNODEFICIENCY VIRUS/ACQUIRED IMMUNE DEFICIENCY SYNDROME)

Kaposi sarcoma

The *WHO Classification of Tumours* (Lamovec & Knuutila 2002, p. 170) classifies Kaposi sarcoma as a “locally aggressive endothelial tumour that typically presents with cutaneous lesions in the form of multiple patches, plaques or nodules but may also involve mucosal sites, lymph nodes and visceral organs”. The aetiological agent Human Herpes Virus (HHV-8) (also known as Kaposi Sarcoma Herpes Virus (KSHV)) may be listed as a causative agent. Assign a code from category C46– *Kaposi sarcoma* whether the primary site is known or unknown. Kaposi sarcoma should be coded for each subsequent episode of care following the initial diagnosis.

...

SAME-DAY **CHEMO**PHARMACOTHERAPY

ChemoPharmacotherapy

~~Chemotherapy, for coding purposes, refers to the administration of any therapeutic substance (usually a drug), excluding blood and blood products.~~ Same-day Admissions for chemopharmacotherapy for HIV manifestations (such as ganciclovir infusion for CMV retinitis) ~~should be~~ are assigned a principal diagnosis for the condition being treated and the appropriate procedure code from block [1920] *Administration of pharmacotherapy* (see also ACS 0044 **Chemo**Pharmacotherapy).

An additional diagnosis code(s) ~~should be~~ is assigned to indicate the HIV/AIDS status and any manifestation being treated.

EXAMPLE 5:

A person with AIDS status presents for multi-drug intravenous (IV) infusion for pulmonary mycobacterium avium complex (MAIC) on a same-day basis.

| | | | |
|--------|------------------------|-----------------|---|
| Codes: | Pulmonary MAIC | A31.0 | <i>Pulmonary mycobacterial infection</i> |
| | AIDS | B20 | <i>Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic diseases</i> |
| | Multi-drug IV infusion | 96199-19 [1920] | <i>Intravenous administration of pharmacological agent, other and unspecified pharmacological agent</i> |

Same-day **chemo**pharmacotherapy for Kaposi sarcoma

If a HIV/AIDS patient is admitted for same-day **chemo**pharmacotherapy to treat Kaposi sarcoma, ~~the principal diagnosis code should be assign~~ Z51.1 *Pharmacotherapy session for neoplasm as the principal diagnosis*, because ~~it is~~ the neoplasm ~~that~~ is the focus of treatment rather than the HIV/AIDS (see ACS 0044 *Pharmacotherapy, Example 6*).

Prophylactic **chemo**pharmacotherapy

Prophylactic interventions are used to:

- prevent the acquisition of a particular infection (primary), **or**
- keep a previously treated opportunistic infection suppressed (secondary)

Primary prophylactic **chemopharmacotherapy** for HIV infection, should be assigned a principal diagnosis code of ~~Z29.2~~ *Other prophylactic pharmacotherapy* if the patient is admitted and discharged on the same date.

The manifestation of the HIV infection may be coded only if it is present. The HIV status code should be sequenced as an additional diagnosis.

EXAMPLE 6:

An HIV infected patient with no symptoms attends for antiretroviral therapy on a same-day basis.

| | | | |
|--------|-----------------------------|-----------------|--|
| Codes: | Chemotherapy infusion | Z29.2 | <i>Other prophylactic pharmacotherapy</i> |
| | HIV positive (asymptomatic) | Z21 | <i>Asymptomatic human immunodeficiency virus [HIV] status</i> |
| | Antiretroviral therapy | 96199-02 [1920] | <i>Intravenous administration of pharmacological agent, anti-infective agent</i> |

Secondary prophylactic **chemopharmacotherapy** (for the purposes of clinical classification) should be coded according to the guidelines in ACS 0102 *HIV/AIDS/Same-day **chemo**pharmacotherapy/ChemoPharmacotherapy*.

EXAMPLE 7:

A person with AIDS presents for maintenance therapy IV infusion of ganciclovir for cytomegalovirus retinitis on a same-day basis.

| | | | |
|--------|-------------------------|-----------------|--|
| Codes: | CMV retinitis | H30.9 | <i>Chorioretinal inflammation, unspecified</i> |
| | | B25.8 | <i>Other cytomegaloviral diseases</i> |
| | AIDS | B20 | <i>Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic diseases</i> |
| | Ganciclovir IV infusion | 96199-02 [1920] | <i>Intravenous administration of pharmacological agent, anti-infective agent</i> |

...

0218 LYMPHANGITIS CARCINOMATOSIS

~~When no further information is available about the nature of this malignancy assign C78.0 Secondary malignant neoplasm of lung (principal) plus C80. Malignant neoplasm without specification of site.~~

...

0222 LYMPHOMA

EXTRANODAL SITES

Lymphomas are systemic diseases that do not metastasise in the same way as solid tumours. The malignant cells circulate within the lymphatic or haematopoietic circulation and may occur in other sites within these tissues, but ~~they~~ are considered ~~to be~~ part of the primary disease, ~~rather than~~ not metastatic spread.

~~A lymphoma, regardless of the number of sites involved, is not considered metastatic, and should only be coded to the C81–C88 categories. Lymphomas do not have to originate in the lymph glands. Lymphomas may originate in any lymphoid tissue throughout the body and may not necessarily be restricted to lymph nodes or glands. Lymphomas stated as 'extranodal' or of a site other than the lymph glands (eg stomach) should be assigned to the appropriate code in the categories C86 and C88.~~

Lymphomas do not have to originate in the lymph nodes or glands. Lymphomas may originate in any lymphoid tissue throughout the body and may not be restricted to lymph nodes or glands.

Regardless of the number of sites involved, lymphomas are classified to categories C81–C88, and are never classified as metastatic neoplasms.

EXAMPLE 1:

A patient with non-follicular lymphoma was admitted for drainage of malignant ascites under general anaesthesia (GA). Prior to discharge, the patient was found to be hypoalbuminaemic and intravenous (IV) transfusion of Albumex was given. The patient was monitored and discharged the next day.

Codes: C83.9 *Non-follicular (diffuse) lymphoma, unspecified*
M9591/3 *Lymphoma, non-Hodgkin NOS*
E88.0 *Disorders of plasma-protein metabolism, not elsewhere classified*
30406-00 [983] *Abdominal paracentesis*
92514-99 [1910] *General anaesthesia, ASA 9~~2~~, nonemergency or not known*
92062-00 [1893] *Administration of other serum*

EXAMPLE 2:

A patient with known diffuse large B-cell lymphoma was referred to hospital by his general practitioner (GP) to investigate sudden onset of back pain with no known trauma. Magnetic resonance imaging (MRI) of the spine revealed a pathological fracture of the L3/4 vertebrae. The patient's back pain was brought under control and the patient was discharged for follow up at the Cancer Care Centre the following week. Discharge summary noted: Pathological L4 vertebral fracture due to malignant invasion.

Codes: M90.78 *Fracture of bone in neoplastic disease, other site*
C83.3 *Diffuse large B-cell lymphoma*

EXAMPLE 3:

A patient with progressive paraesthesia across the back was admitted to hospital for investigations. MRI of the spine revealed a collapsed vertebra at T4 which was causing the neurological symptoms. After further investigations, the patient was diagnosed with multiple myeloma (MM). The patient was managed by the haematology team and commenced on IV chemotherapy. A final diagnosis of MM with collapsed vertebra was confirmed. The patient was discharged for follow up at the cancer clinic.

| | | |
|--------|-----------------|--|
| Codes: | C90.00 | <i>Multiple myeloma, without mention of remission</i> |
| | M9732/3 | <i>Multiple myeloma</i> |
| | M48.54 | <i>Collapsed vertebra, not elsewhere classified, thoracic region</i> |
| | 96199-00 [1920] | <i>Intravenous administration of pharmacological agent, antineoplastic agent</i> |

EXTRANODAL SITES

'Extranodal' lymphomas, ie lymphomas of a site other than the lymph glands (eg stomach), are classified to categories C86 *Other specified types of T/NK-cell lymphoma* and C88 *Malignant immunoproliferative diseases*.

MORPHOLOGY

Lymphomas can change morphology over time from low grade to high grade. Therefore, the latest biopsy results should be utilised when assigning a morphology code for lymphoma. Lymphomas may change morphology over time. Therefore, the most recent pathology (histopathology or cytology) results must be referenced to determine the morphology code for lymphoma.

0229 RADIOTHERAPY

ICD-10-AM CLASSIFICATION

Same-day episodes of care ~~FOR RADIOTHERAPY~~

~~Should there be any same day radiotherapy admissions (admission and discharge on the same day), assign Z51.0 *Radiotherapy session* as the principal diagnosis followed by the neoplasm code.~~

- ~~• Assign Z51.0 *Radiotherapy session* as principal diagnosis~~
- ~~• Assign code(s) for the neoplasm(s) being treated as an additional diagnosis (see also ACS 0236 *Neoplasm coding and sequencing*).~~

Multi-day episodes of care ~~FOR RADIOTHERAPY~~

~~Multi day episodes of care (ie patients separated on a subsequent date to the admission date) for radiotherapy for neoplasms should have the neoplasm sequenced as the principal diagnosis.~~

- ~~• Assign the principal diagnosis as per the guidelines in ACS 0001 *Principal diagnosis*~~

- Do not assign Z51.0 Radiotherapy session as an additional diagnosis

Note: ~~For information on classification of adverse effects of radiotherapy, refer to ACS 1902 Adverse effects for guidelines regarding classification of adverse effects of radiotherapy.~~

RADIOTHERAPY PROCEDURE CODING ACHI CLASSIFICATION

~~When a patient receives radiotherapy, without cerebral anaesthesia, a number of times during an episode of care and the same procedure code applies, assign the procedure code once only.~~

- When radiotherapy is performed multiple times **without cerebral anaesthesia** during an episode of care, **and** it is classified to the same ACHI code, assign the ACHI code once only
- ~~When the radiotherapy is performed **under cerebral anaesthesia**, the procedure should be coded as many times as it is performed.~~ When radiotherapy is performed **under cerebral anaesthesia**, assign the relevant ACHI code as many times as it is performed.

0233 MORPHOLOGY

~~The first four characters represent the histological type of the neoplasm and the fifth character indicates its behaviour. ICD-10-AM morphology codes consist of the letter 'M', followed by five digits. The first four digits identify the neoplasm's histological type, and the fifth digit, following a slash (or solidus), indicates the neoplasm's behaviour.~~

When assigning morphology codes, ensure that the explanatory notes at the beginning of the 'Morphology of neoplasms' appendix (ICD-10-AM Tabular List, Appendix A) are reviewed and understood.

The assignment of morphology codes is a decision for each state/territory. Clinical coders should therefore be guided by their state/territory policy.

Note the following important points:

1. Assign a morphology code ~~should always be assigned~~ directly after the neoplasm code to which it applies ~~ie. ICD-10-AM codes that require the assignment of a morphology code are:~~
 - C00–D48 *Neoplasms (see also ACS 0002 Additional diagnoses/Multiple coding)*
 - O01.0 *Classical hydatidiform mole*
 - O01.1 *Incomplete and partial hydatidiform mole*
 - O01.9 *Hydatidiform mole, unspecified*
 - Q85.0 *Neurofibromatosis (nonmalignant)*
2. A morphology code must is never appear assigned as ~~the~~ principal diagnosis ~~code~~.
3. The behaviour of the neoplasm is indicated by the last digit of the morphology code. **Note: that** ~~The~~ is behaviour code can may change depending on the behaviour description of the neoplasm in the clinical record. For example, a 'superficial spreading noninvasive adenocarcinoma' ~~should be coded~~ is classified to M8143/2 rather than M8143/3 because although superficial spreading adenocarcinoma is normally classified as /3 '~~m~~Malignant, primary site' (/3), the description of 'noninvasive' changes the behaviour classification to /2 'eCarcinoma in situ'.
4. Where documentation does not specify whether a malignant neoplasm is primary or secondary morphology, default to primary /3.
5. In a histopathology report, if a morphological diagnosis contains more than one qualifying term classifiable to:
 - different morphology codes, select the higher number as it is usually more specific (see Example 1).

• different behaviours, assign a morphology code for the most invasive neoplasm behaviour (see Example 2).

• different morphology and behaviour in the same lesion, assign a morphology code for the most invasive neoplasm behaviour.

All morphology codes referred to in this document are from ICD-O Third Edition.

If a morphological diagnosis contains two histological terms which have different morphology codes, select the highest number as it is usually more specific.

EXAMPLE 1: A histopathology report of biopsies taken of the bladder of a patient confirmed 'transitional cell epidermoid carcinoma'.

~~Transitional cell epidermoid carcinoma.~~

~~Transitional cell carcinoma NOS~~ is ~~coded~~-classified to M8120/3

~~Epidermoid carcinoma NOS~~ is ~~coded~~-classified to M8070/3

In such a case, the morphology code with the highest numerical value (M8120/3) ~~should be used~~ is assigned.

Note: This does not apply to multiple histological diagnoses from different timeframes or different episodes of care, even if in reference to the same tumour.

EXAMPLE 2:

Patient was admitted for a TRUS (transrectal ultrasound guided) biopsy of the prostate under local anaesthesia. Histopathology reported adenocarcinoma (M8140/3) and high grade glandular intraepithelial neoplasia (M8148/2) of the prostate.

Codes: C61 Malignant neoplasm of prostate

M8140/3 Adenocarcinoma NOS

37215-00 [1163] Endoscopic biopsy of prostate

Note: M8140/3 Adenocarcinoma NOS is more invasive than M8148/2 Glandular intraepithelial neoplasia, high grade and therefore the morphology for adenocarcinoma /3 is assigned.

0234 CONTIGUOUS SITES

PRIMARY SITE KNOWN SPREAD OF MALIGNANT NEOPLASM TO ADJACENT ORGAN OR SITE

If ~~the a neoplasm~~ spreads ~~is~~ from a known primary site to an adjacent organ or site, ~~(eg bowel to bladder or jejunum to ileum)~~ assign a code only for the primary neoplasm (site) only. The spread ~~at~~ into the adjacent site is neither primary nor secondary at that site, but an expansion of the primary neoplasm and is not coded.

EXAMPLE 1:

Patient was admitted for intravenous (IV) pharmacotherapy for treatment of an adenocarcinoma of the jejunum (primary). A recent colonoscopy report revealed that the neoplasm had infiltrated into the ileum. IV pharmacotherapy was administered and the patient was discharged on the same day.

Codes: Z51.1 Pharmacotherapy session for neoplasm

[C17.1 Malignant neoplasm of small intestine, jejunum](#)

[M8140/3 Adenocarcinoma NOS](#)

[96199-00 \[1920\] Intravenous administration of pharmacological agent, antineoplastic agent](#)

PRIMARY SITES UNKNOWN-MALIGNANT NEOPLASM OF OVERLAPPING SITES

A primary malignancy ~~which~~ that overlaps the boundaries of two or more subcategories within a three character category, and whose site of origin cannot be established, is classified to the fourth ~~digit~~ character subcategory '8' in most cases.

EXAMPLE 2:

[Patient admitted for wide local excision of a lesion of the right breast at 3 o'clock. The lesion was excised under GA. The histopathology report revealed breast carcinoma NST \(no special type\).](#)

Codes: [C50.8](#) [Overlapping lesion of breast](#)

[M8500/3 Infiltrating duct carcinoma NOS](#)

[31500-00 \[1744\] Excision of lesion of breast](#)

[92514-99 \[1910\] General anaesthesia, ASA 99](#)

ICD-10-AM provides the following codes for certain malignant neoplasms whose point of origin cannot be established and whose stated sites **overlap two or more three-character categories**:

C02.8 *Overlapping lesion of tongue*

C08.8 *Overlapping lesion of major salivary glands*

C14.8 *Overlapping lesion of lip, oral cavity and pharynx*

C21.8 *Overlapping lesion of rectum, anus and anal canal*

C24.8 *Overlapping lesion of biliary tract*

C26.8 *Overlapping lesion of digestive system*

C39.8 *Overlapping lesion of respiratory and intrathoracic organs*

C41.8 *Overlapping lesion of bone and articular cartilage*

C49.8 *Overlapping lesion of connective and soft tissue*

C57.8 *Overlapping lesion of female genital organs*

C68.8 *Overlapping lesion of urinary organs*

C72.8 *Overlapping lesion of brain and other parts of central nervous system*

EXAMPLE 3:

[Patient admitted with a mass in the tracheobronchial region. A biopsy was performed via a bronchoscopy under sedation, ASA 2. Histopathology report indicated squamous cell carcinoma \(SCC\).](#)

Codes: [C34.8](#) [Overlapping lesion of bronchus and lung](#)

[M8070/3 Squamous cell carcinoma NOS](#)

[41898-04 \[544\] Endoscopic \[needle\] biopsy of bronchus](#)

[92515-29 \[1910\] Sedation, ASA 29](#)

AMBIGUOUS VAGUE SITES

A malignant neoplasm of contiguous sites (overlapping boundaries), **not elsewhere classified**, whose point of origin cannot be determined ~~should be assigned~~ is classified to category C76- *Malignant neoplasm of other and ill-defined sites.*

Note: The ~~use-assignment~~ of a code from this category ~~would-is~~ only be warranted appropriate when there is nonspecific ~~information available~~ documentation regarding the ~~location~~ nature of the neoplasm. ~~(eg malignant neoplasm of chest)~~ and no further information is available.

EXAMPLE 4:

Patient admitted for the removal of a malignant neoplasm of the face. The procedure was cancelled.

Codes: C76.0 Malignant neoplasm of head, face and neck
 M8000/3 Neoplasm, malignant
 Z53.9 Procedure not carried out, unspecified reasons

0236 NEOPLASM CODING AND SEQUENCING

~~(excluding same-day chemotherapy/radiotherapy)~~

Note: This ACS does not include guidelines regarding episodes of care for same-day pharmacotherapy or radiotherapy for a neoplasm. See ACS 0044 *Pharmacotherapy and ACS 0229 Radiotherapy.*

The sequencing of ~~either~~ primary or-and secondary ~~malignancy~~ neoplasm codes ~~is-are~~ dependent on the treatment performed at each episode of care. Selection of Assign the principal diagnosis ~~should be made in accordance as per the criteria in~~ with ACS 0001 *Principal diagnosis.*

PRIMARY NEOPLASM AS A CURRENT CONDITION

~~The primary malignancy should be coded as a current condition if the episode of care is for:~~

A primary neoplasm is classified as a current condition if the episode of care is for:

- diagnosis or treatment of the primary ~~malignancy~~ neoplasm, in any of the following circumstances:
 - initial diagnosis of the primary ~~malignancy~~ neoplasm
 - treatment of complications of the ~~malignancy~~ primary neoplasm or neoplasm treatment
 - operative intervention to remove the ~~malignancy~~ primary neoplasm
 - medical care related to the ~~malignancy~~ primary neoplasm, including palliative care (see also ACS 2116 *Palliative care*)
 - recurrence of at the primary ~~malignancy~~ neoplasm previously eradicated from the same organ or tissue (see also ACS 0237 Recurrence of malignancy).
- diagnosis or treatment of a secondary (metastatic) ~~malignancy~~ neoplasm, regardless of when/if the primary site was previously resected. Assign an additional diagnosis code(s) should be assigned for the primary neoplasm site(s) if known, or C80.- *Malignant neoplasm without specification of site* if the site of the primary neoplasm-site is unknown or unspecified.
- treatment aimed at stopping progression of the ~~cancer~~ neoplasm progression, such as:
 - ~~chemo~~ pharmacotherapy or radiotherapy (see also ACS 0044 *ChemoPharmacotherapy* and ACS 0229 *Radiotherapy*)
 - subsequent admissions for wider excision (even if there is no residual ~~malignancy~~ neoplasm identified on histopathology)

- staged surgery for prophylactic removal of a related organ.
- treatment of ~~another~~ a nonmalignant condition, when the ~~malignancy~~ neoplasm is a comorbidity that ~~has an affect on the episode of care as per~~ meets the criteria in ACS 0002 *Additional diagnoses*.
- dental clearance prior to radiotherapy. ~~The malignancy or the complication will be coded as the principal diagnosis~~ Assign a code for the condition requiring the procedure as per the criteria in ACS 0001 *Principal diagnosis*.

If the episode of care is for follow-up care, the ~~malignancy~~ neoplasm may be coded as current or as a past history, dependent on the circumstances surrounding the episode of care. (~~See also ACS 1204 Plastic surgery, ACS 2112 Personal history and ACS 2114 Prophylactic surgery.~~)

- Where there is history of/follow-up for a neoplasm, and a secondary (metastatic) neoplasm is diagnosed, assign:
 - a code for the metastatic site with the appropriate morphology code
 - a code for the primary neoplasm with the appropriate morphology code.
- Assign a code from category Z85 Personal history of malignant neoplasm as an additional diagnosis only if the neoplasm is completely resolved and the history is relevant to the current episode of care.

See also ACS 0052 Same-day endoscopy – surveillance, ACS 0237 Recurrence of malignancy, ACS 1204 Plastic surgery and ACS 2114 Prophylactic surgery.

Where there are multiple secondary (metastatic) sites, assign a code for each metastatic site ~~in order~~ to reflect the severity of the neoplastic condition.

0237 RECURRENCE OF MALIGNANCY

• If 'recurrence in mastectomy scar' is documented in the clinical record without further qualification, assign C79.2 Secondary malignant neoplasm of skin.

• If the ~~primary malignancy~~ a previously eradicated primary malignant neoplasm has recurred, assign a code for the **original primary site** using the appropriate code from categories C00–C75. ~~Code also any secondary sites mentioned.~~

EXAMPLE 1:

Patient previously had a sigmoid colectomy in 1996 for carcinoma, now presents for follow up colonoscopy under sedation. ~~with a~~ recurrence was found in the rectum.

Codes: C18.7 *Malignant neoplasm of sigmoid colon*

M8010/3 *Carcinoma NOS*

32090-01 [911] *Fibreoptic colonoscopy to caecum, with biopsy*

92515-99 [1910] *Sedation, ASA 99*

~~If 'recurrence in mastectomy scar' is recorded in the clinical record without further qualification, it should be coded to C79.2 Secondary malignant neoplasm of skin.~~

EXAMPLE 2:

Patient admitted for a check cystoscopy under GA, for a previous transitional cell carcinoma (TCC) (M8120/3) of the bladder dome diagnosed six months ago. A TCC of the bladder wall was found.

Codes: C67.1 *Malignant neoplasm of dome of bladder*

M8120/3 Transitional cell carcinoma NOS

36836-00 [1098] Endoscopic biopsy of bladder

92514-99 [1910] General anaesthesia, ASA 99

Note: For classification purposes, this is considered a recurrence as the morphology is the same, even though the site in the bladder is different.

EXAMPLE 3:

Patient with a previous transitional cell carcinoma (TCC) (M8120/3) of the bladder dome was admitted for a check cystoscopy under GA. An in situ TCC (M8120/2) was found in the bladder wall.

Codes: C67.1 Malignant neoplasm of dome of bladder

M8120/3 Transitional cell carcinoma NOS

36836-00 [1098] Endoscopic biopsy of bladder

92514-99 [1910] General anaesthesia, ASA 99

Note: For classification purposes, this is considered a recurrence as the morphology is the same, even though the behaviour is different.

EXAMPLE 4:

Patient admitted for a check cystoscopy under GA, for a previous transitional cell carcinoma (TCC) (M8120/3) of the bladder. A papillary in situ TCC (M8130/2) of the bladder was found on biopsy.

Codes: D09.0 Carcinoma in situ, bladder

M8130/2 Papillary transitional cell carcinoma, non-invasive

Z08.9 Follow-up examination after unspecified treatment for malignant neoplasm

36836-00 [1098] Endoscopic biopsy of bladder

92514-99 [1910] General anaesthesia, ASA 99

Note: For classification purposes, this is **not** considered a recurrence as the morphology is different to the original neoplasm.

0239 METASTASES

~~Statements such as 'metastatic carcinoma of the ovary' or 'metastatic carcinoma to bone' should be queried with the clinician to determine whether the stated site is the primary or metastatic site.~~

~~The adjective 'metastatic' is used ambiguously, sometimes to mean secondary deposits from a primary lesion elsewhere and sometimes to mean a primary which is metastasising. No arbitrary rule can satisfactorily solve this problem. Therefore, the coder should examine the clinical record and, if necessary, consult the clinician for clarification.~~

Documentation of 'metastatic' may mean secondary deposits from a primary lesion elsewhere, or a primary neoplasm that has metastasised to a new site.

Where there is ambiguous documentation (eg 'metastatic carcinoma of the ovary'), seek clinician clarification.

A malignant neoplasm described as 'metastatic **from**' a site ~~should be interpreted~~ is classified as a primary neoplasm of that site. Also assign ~~the~~ appropriate code(s) for the secondary neoplasm(s).

EXAMPLE 1:

Carcinoma of axillary lymph nodes and lungs, metastatic **from** breast.

~~Breast = primary site;~~ Primary site = breast

~~Nodes and lungs = secondary sites;~~ Secondary sites = axillary lymph nodes and lungs

A malignant neoplasm described as 'metastatic **to**' a site ~~should be interpreted~~ is classified as a secondary neoplasm of that site. Also assign ~~the~~ an appropriate code for the primary neoplasm.

EXAMPLE 2:

Carcinoma of the breast, metastatic **to** the brain.

~~Breast = primary site;~~ Primary site = breast

~~Brain = secondary site;~~ Secondary site = brain

If two or more sites are ~~stated in the diagnosis~~ documented and all are described as metastatic and none described as primary, ~~code as for~~ assign C80.9 Malignant neoplasm, primary site unknown'-unspecified and assign codes for the ~~stated~~ documented sites as secondary neoplasms ~~of the stated sites~~.

0241 MALIGNANT ~~CY~~ NEOPLASM OF LIP

~~Two code series are available for coding of lip malignancy, C00.- Malignant neoplasm of lip and C44.0 Malignant neoplasm of skin of lip.~~

~~Code C44.0 Malignant neoplasm of skin of lip should be used for malignant lesions occurring on the hair-bearing skin between the upper vermillion border and the nose (philtrum) or the hair-bearing skin between the lower vermillion border and the mentolabial sulcus. Most commonly BCC (basal cell carcinoma) and SCC (squamous cell carcinoma) occur outside the vermillion border and should therefore be coded to C44.0 Malignant neoplasm of skin of lip.~~

~~All other malignant lesions described as 'lip', should be assigned the appropriate code within C00.- Malignant neoplasm of lip.~~

Malignant neoplasms of the lip are classified as follows:

- C43.0 Malignant melanoma of lip

C43.0 classifies malignant melanoma of the skin around the lip (ie not on the vermillion border but of the hair-bearing skin between the upper vermillion border and the nose (philtrum) or the skin between the lower vermillion border and the mentolabial sulcus. For melanoma of the lip on the vermillion border (ie. lipstick area) assign a code from categories C00.0–C00.2.

- C44.0 Malignant neoplasm of skin of lip

Assign C44.0 for other malignant neoplasm of the hair-bearing skin (outside of the vermillion border).

- C00.- Malignant neoplasm of lip

All other malignant neoplasms occurring 'on the lip', ie malignant neoplasms occurring on the vermilion border of the lip (including melanoma) are classified to category C00 Malignant neoplasm of lip.

0245 REMISSION IN MALIGNANT IMMUNOPROLIFERATIVE DISEASES AND LEUKAEMIA

~~This standard is provided to assist in determining when to assign the fifth characters for 'in remission' and 'without mention of remission' for categories C88 Malignant immunoproliferative diseases, C90 Multiple myeloma and malignant plasma cell neoplasms and C91–C95 Leukaemia.~~

This standard specifically relates to the following categories:

- C88 Malignant immunoproliferative diseases
- C90 Multiple myeloma and malignant plasma cell neoplasms
- C91 Lymphoid leukaemia
- C92 Myeloid leukaemia
- C93 Monocytic leukaemia
- C94 Other leukaemias of specified cell type
- C95 Leukaemia of unspecified cell type

The following fifth characters for 'in remission' and 'without mention of remission' are assigned for the above categories:

- 0 without mention of remission (includes partial remission)
- 1 in remission (complete remission)

~~It also provides guidance in the distinction between the concepts of 'in remission' and 'history of' in relation to these conditions. A definite cure, and therefore assignment of a 'history' code, may vary greatly from disease to disease and can only be applied retrospectively. The distinction therefore, after clinical consultation, is made on the basis of continuing treatment of the malignancy, rather than a set time-frame.~~

DEFINITIONS

Complete remission – no evidence of signs or symptoms of the malignancy.

Partial remission – reduction in the signs or symptoms of the tumour by > 50% but evidence of active disease exists.

~~**Where documentation is incomplete and the only information is 'in remission', it is advisable to seek further clarification from the clinician.**~~

CLASSIFICATION

~~This standard relates only to the following categories:~~

- ~~C88. Malignant immunoproliferative diseases~~
- ~~C90. Multiple myeloma and malignant plasma cell neoplasms?~~
- ~~C91. Lymphoid leukaemia~~
- ~~C92. Myeloid leukaemia~~
- ~~C93. Monocytic leukaemia~~
- ~~C94. Other leukaemias of specified cell type~~
- ~~C95. Leukaemia of unspecified cell type~~

with fifth characters:

~~0~~ ~~without mention of remission~~ (includes partial remission)

~~1~~ ~~in remission~~ (complete remission)

Without mention of remission ('0')

~~A~~The fifth character of ~~'0'~~ (without mention of remission) ~~should be~~ is assigned when:

- it is the first presentation and diagnosis of the disease, **OR**
- it is clear from the documentation that even if there has been a reduction in the disease, active disease still exists.

In remission ('1')

~~A~~The fifth character of ~~'1'~~ (in remission) is assigned when:

- the clinician has documented 'in remission' with no further information on the stage or history of the disease and clinical advice is unavailable, **OR**
- the patient is still receiving treatment for the inactive malignan~~ey~~ neoplasm ~~or~~ eg for side-effects of treatment~~therapy~~ (ie surgery, ~~chemotherapy~~ pharmacotherapy, ~~other drug treatment~~, etc)

AND

- it is clear from the documentation that this is a complete remission (ie no evidence of signs or symptoms of the malignancy).

Z85 Personal history of malignant neoplasm

In cases where complete remission is documented and there is no evidence of ~~the patient receiving~~ any form of treatment for the malignan~~ey~~ neoplasm ~~or~~ for, eg side-effects of therapy, assign a code for 'history of malignan~~ey~~ neoplasm' ~~should be assigned~~, when it is relevant to the current episode of care (~~as per ACS 0002 Additional diagnoses~~ Family and personal history and certain conditions influencing health status (Z80-Z99)).

The ~~possible 'history of malignaney'~~ applicable codes in category Z85 are:

Z85.6 *Personal history of leukaemia*

Z85.7 *Personal history of other malignant neoplasms of lymphoid, haematopoietic and related tissues*

0302 BLOOD TRANSFUSIONS

The administration of blood and blood products ~~should be~~ is coded **whenever** performed. However, ~~M~~multiple administrations of the same blood product within the same episode of care should be reflected by one procedure code only. If more than one type of blood product is administered during the episode of care, appropriate codes for those different products ~~should be~~ is assigned.

EXAMPLE 1:

Patient transfused with packed cells three times during the episode of care.

Code: 13706-02 [1893] *Administration of packed cells*

Note: ~~Only need to a~~Assign the code once only.

EXAMPLE 2:

Patient transfused with packed cells and gamma globulin during the episode of care.

Codes: 13706-02 [1893] Administration of packed cells

13706-05 [1893] Administration of gamma globulin

Note: Assign one code for each of the different products administered.

EXAMPLE 3:

Patient was admitted after being referred by the local GP (general practitioner) for hypoalbuminaemia. The patient was assessed, and albumin (Albumex) was ordered and transfused without complication.

Codes: E88.0 Disorders of plasma-protein metabolism, not elsewhere classified

92062-00 [1893] Administration of other serum

0304 PANCYTOPENIA

DEFINITION

Pancytopenia is a general term for the simultaneous decrease in haemoglobin level (anaemia), white cell count (leukocytopenia/neutropenia/leukopenia) and platelet count (thrombocytopenia).

Pancytopenia is caused by a number of disorders, including:

- adverse effects of drugs (especially chemotherapeutic substances)
- aplastic anaemia
- bone marrow infiltration or replacement (eg myelodysplasia, myeloma, secondary carcinoma, myelofibrosis, occasionally acute leukaemia)
- brucellosis
- Fanconi's anaemia
- folate deficiency
- paroxysmal nocturnal haemoglobinuria
- pregnancy
- sarcoidosis
- severe infection or sepsis
- splenic disorders (eg hypersplenism)
- systemic lupus erythematosus
- vitamin B₁₂ deficiency (Kumar & Clark 2002).

CLASSIFICATION

~~Where pancytopenia is documented without further specification, assign D61.9 *Aplastic anaemia, unspecified*. This default code should only be assigned when 'pancytopenia' is documented without mention of specific blood abnormalities (anaemia, neutropenia and thrombocytopenia).~~

~~Attempt to obtain clarification from the clinician of the specific blood abnormalities (anaemia, neutropenia and thrombocytopenia) and assign codes for these conditions rather than assigning the default for pancytopenia.~~

Where 'pancytopenia' is documented without further specification, seek clarification from the clinician of the specific blood abnormalities (ie anaemia, neutropenia, thrombocytopenia).

- Where the clinician confirms a specific blood abnormality(ies), assign codes for the specific blood abnormality(ies) meeting the criteria in ACS 0002 *Additional diagnoses*

or

- Where clinical advice is unavailable, assign D61.9 *Aplastic anaemia, unspecified*.

STANDARDS INDEX

C

...
Cancelled surgery 0011

Carcinomatosis
~~-lymphangitis 0218~~

Cardiac
- catheterisation and coronary angiography 0933
...

D

...
Diagnosis (in)
...
- principal (for) 0001

...
- - injury 1906
- - - multiple 1907
~~-- lymphangitis carcinomatosis 0218~~
- - morphology 0233
...

L

...
Loss
- consciousness 1905
- skin 1910

Low birth weight 1618
Lymphangitis
~~-carcinomatosis 0218~~

Lymph node
- para-aortic
- - biopsy of 0028
Lymphoma (extranodal) 0222
...

N

Neonate — *see Newborn*

Neoplasm(s) 0236
- chemotherapy 0044
- contiguous sites 0234
- extension 0234
- follow-up 0052
- history 2112
- lip 0241
- metastases 0239
- - sequencing 0236
- morphology 0233
- overlapping [sites](#) 0234
- palliative care for 2116
[- pharmacotherapy 0044](#)
- recurrence 0237
- secondary 0239
- sequencing 0236
- spread 0234
- vague sites 0234



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Nontraumatic haematoma

Introduction/Rationale:

This addenda proposal is the result of discussion regarding the classification of nontraumatic skin and subcutaneous haematomas, particularly in regards to anticoagulant use.

It is acknowledged that haematoma (or contusion) as a result of nontraumatic causes such as drug and medicament use is poorly classified in the existing ICD-10-AM structure. Therefore, ACCD proposes to create new ICD-10-AM codes and add inclusion terms at existing codes to classify this concept.

ACCD PROPOSAL

Tabular List

L98 Other disorders of skin and subcutaneous tissue, not elsewhere classified

...

L98.8 Other specified disorders of skin and subcutaneous tissue

[▽ 1916](#) [Nontraumatic haematoma of skin and subcutaneous tissue](#)

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

...

M79 Other soft tissue disorders, not elsewhere classified

See site code

Excludes: soft tissue pain, psychogenic (F45.4)

...

M79.8 Other specified soft tissue disorders

[▽ 1916](#)
[0-9]

[Nontraumatic haematoma of soft tissue](#)

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

R23**Other skin changes**

...

R23.3 Spontaneous ecchymoses
Petechiae

Excludes: ecchymoses in fetus and newborn (P54.5)

[nontraumatic haematoma:](#)

• [skin \(L98.8\)](#)

• [soft tissue \(muscle\) \(M79.8-\)](#)

purpura (D69.-)

Alphabetic Index

Haematoma (skin surface intact) (traumatic) (*see also Contusion*) T14.08

...

- mediastinum S27.88

- mesosalpinx (nontraumatic) ~~N83.7~~ [S37.88](#)

- ~~nontraumatic N83.7~~

- ~~traumatic S37.88~~

- muscle — ~~code as~~ *see also Contusion/by site*

- ~~nontraumatic M79.8-~~

- nontraumatic, ~~due to circulating anticoagulants (heparin) (warfarin) D68.3~~ — *see also Haematoma/by site/nontraumatic*

- ~~due to circulating anticoagulants (heparin) (warfarin) D68.3~~

- ~~skin and subcutaneous tissue L98.8~~

- ~~soft tissue M79.8-~~

- obstetrical ~~surgical~~ wound O90.2

...

- scrotum, superficial S30.2

- ~~due to~~ birth trauma P15.5

- seminal vesicle (~~nontraumatic~~) ~~N50.1~~ [S37.83](#)

- ~~nontraumatic N50.1~~

- ~~traumatic S37.83~~

- ~~skin and subcutaneous tissue T14.05~~

- ~~nontraumatic L98.8~~

- ~~soft tissue~~ — *see also Contusion/by site*

- ~~nontraumatic M79.8-~~

- spermatic cord (~~traumatic~~) S37.84

- ~~nontraumatic N50.1~~

...



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

ACHI Obstetrics and gynaecology review

Introduction/Rationale:

This addenda proposal incorporates a number of issues relating to the classification of obstetric and gynaecological procedures in ACHI Chapter 13 *Gynaecological procedures* (Blocks 1240–1299) and Chapter 14 *Obstetric procedures* (Blocks 1330-1347):

- Biopsy of uterine serosa (Q3181)
- Brachytherapy applicators; cervix and uterus (Q&A)
- Cervicopexy, perineorrhaphy and graft of the vagina (TN56, P49/09)
- Drainage of endometrioma (P311)
- Endometrial scratch (TN1082, Q3051)
- Fetal scalp lactate (Q3025)
- Fetoscopic tracheal balloon occlusion (TN320, Q2631)
- Goldilocks mastectomy (TN1262, Q3139)
- Hysterectomy with salpingo-oophorectomy and pelvic lymph node dissection (Q3165)
- Lipiodol flushing (TN1079, Q3050)
- Mona Lisa Touch (TN1325, Q3203)
- Pulsed dose rate cervical and uterine brachytherapy (and insertion of cervical and intrauterine brachytherapy applicators) (Q2894)
- Replacement procidentia/manual reduction of prolapsed uterus (TN864, Q2951)
- Transvaginal oocyte retrieval (TVOR) (Q2665)
- Oral misoprostol for abortion (Q3294; in progress)
- Buccal Misoprostol for induction of abortion / termination of pregnancy (P360)

Other issues:

- Management of haemorrhage following abortion (insertion of Bakri balloon).
ICD-10-AM classifies 'delayed or excessive haemorrhage' as a complication of abortion (ie four character codes (.1 and .6) at O03-O06 and O07 *Failed attempted abortion*, and O08.1 *Delayed or excessive haemorrhage following abortion and ectopic and molar pregnancy*).

ACHI lists codes:

- 96226-00 **[1274]** *Control of haemorrhage of cervix* (for arrest of cervical haemorrhage following cervical ectopic pregnancy)
- 35759-00 **[1299]** *Control of postoperative haemorrhage, following gynaecological surgery NEC*
- 96228-00 **[1347]** *Compression suture of uterus for postpartum haemorrhage*
- 16567-00 **[1347]** *Other management of postpartum haemorrhage*

The above ACHI codes for 'postoperative' and 'postpartum' haemorrhage are not applicable to haemorrhage following (spontaneous or medical/induced) abortion. Bakri balloon (uterine balloon tamponade) is one of the techniques utilised to treat postpartum haemorrhage, but may also be performed for post abortion haemorrhage.

- **Medical abortion.**
Following a review of ICD-10-AM codes for abortion and receipt of a coding query and public submission regarding administration of misoprostol, abortion codes in block [1330] *Antepartum application, insertion or removal procedures* were reviewed.

Misoprostol is a pharmacological agent that is administered to induce abortion/terminate pregnancy. It is usually administered orally (eg buccally) following ingestion of mifepristone. Misoprostol causes softening and opening of the cervix, and uterine contractions (ie it induces labour) (NPS Medicinewise 2017; The Royal Hospital for Women 2013).

- **Hysterectomy**
Following receipt of comments on an earlier version of this addenda proposal, a review was undertaken on blocks [1268] *Abdominal hysterectomy* and [1269] *Vaginal hysterectomy*. A review of other international intervention classifications highlighted that hysterectomy may be classified into four main types (based on route of access):
 - Open (abdominal)(default)
 - Laparoscopic
 - Vaginal
 - Laparoscopic assisted vaginal

ACCD notes that the term 'abdominal' is not always used in clinical practice, confounding code assignment for clinical coders. ACCD also notes that codes in block [1268] contain multiple concepts that are inconsistently applied (ie removal of adnexa, subtotal/total removal of tissue).

Summary of issues and proposed addenda:

- **Biopsy of uterine serosa:**
 - Proposed creation of codes for *biopsy of uterus* and *laparoscopic biopsy of uterus*
- **Cervicopexy, perineorrhaphy and graft of the vagina:**
 - Proposed creation of a code for *repair of the perineum* (not associated with current obstetric laceration or posterior vaginal compartment). *Vaginal graft* added to the Alphabetic Index, classifiable to urethroplasty.
- **Laparoscopic hysterectomy:**
 - Proposed creation of *laparoscopic/laparoscopically assisted* codes in blocks [1268] *Abdominal hysterectomy* and [1269] *Vaginal hysterectomy* for clinical currency, due to increased use of minimally invasive intervention methods.
- **Pulsed dose rate cervical and uterine brachytherapy:**
 - Proposed creation of a code for *implantation of brachytherapy applicator, female genital organ* (ie. uterus, cervix and vagina)
- **Replacement procidentia/manual reduction of prolapsed uterus:**
 - Proposed creation of a code for *manual reduction of uterine prolapse*. This concept was previously classified to 92104-00 [1900] *Vaginal packing* (a best fit in the absence of a specific code). It is noted that vaginal packing does not always include manual reduction of prolapsed uterus. The proposal to reclassify to a unique code (located in Chapter 13 *Gynaecological procedures*) is consistent with 90313-01 [940] *Manual reduction of rectal prolapse*
- **Management of haemorrhage following abortion:**
 - Proposed creation of a code for *control of post abortion haemorrhage*
- **Medical abortion/Termination of pregnancy NEC:**
 - ACCD proposes to classify administration of agent for termination of pregnancy (eg abortion using pharmacological agents) to a new code in block [1330]
- **Hysterectomy:**

- ACCD proposes to amend the indexing of codes from block [1268] to create a default (ie 'abdominal' as NEM at the lead term *Hysterectomy*)
- ACCD proposes to simplify the code selection in blocks [1268] and [1269] by removing some of the precoordinated concepts. That is, 'removal of adnexa' will be coded separately (if performed), and 'retroperitoneal dissection' will be included in the 'radical' codes. 'Radical excision of pelvic lymph nodes', if performed, will be assigned in addition to the hysterectomy code
- Minor amendments to ACHI Tabular List and Alphabetic Index for all other issues listed.

See also TN1223 ICD-10-AM Obstetrics review and TN1225 ACS Obstetrics review.

ACCD PROPOSAL

Tabular List

LIST OF ACHI BLOCK NUMBERS

| Block No. | Block Name |
|--------------------------|--|
| 1264 | Biopsy of endometrium uterus |
| ... | |
| 806 | Excision procedures on lymphatic structure node of neck |
| ... | |
| -05 | Pelvic |
| ... | |
| 96245-XX | Radical excision of lymphatic structure |
| ... | |
| 989 | Other excision procedures on abdomen, peritoneum or omentum |
| | <i>Excludes:</i> hysterectomy with retroperitoneal dissection (35667-00, 35667-02 [1268]) |
| 30396-00 | Debridement and lavage of peritoneal cavity
Washout for intraperitoneal sepsis |
| | <i>Includes:</i> removal of: <ul style="list-style-type: none"> • enteric contents (eg faecal material) • foreign material |
| ... | |
| 1121 | Urethroplasty |
| | <i>Includes:</i> graft (vaginal) |
| 37345-00 | Urethroplasty, staged procedure, first stage |
| 37348-00 | Urethroplasty, staged procedure, second stage |
| 37342-00 | Urethroplasty, single stage procedure
Urethroplasty NOS |
| ... | |

1243 Oophorectomy

Excludes: that with hysterectomy (see blocks [\[1268\]](#) and [\[1269\]](#))

35638-00 Laparoscopic wedge resection of ovary

...

1244 Other excision procedures on ovary

Includes: excision of para-ovarian cyst

Excludes: that with hysterectomy (see blocks [\[1268\]](#) and [\[1269\]](#))

35638-04 Laparoscopic ovarian cystectomy, unilateral

...

1248 Application, insertion or removal procedures on fallopian tube

35710-00 Falloposcopy

Includes: hysteroscopy
tubal catheterisation

35703-01 Therapeutic hydrotubation

Insufflation of fallopian tube to bring about tube patency

Includes: [with poppy seed oil \(Lipiodol\)](#)

...

1251 Salpingectomy

Salpingectomy for sterilisation

Excludes: that [for:](#)

• [removal of tubal pregnancy \(35677-05, 35678-01 \[\\[1256\\]\]\(#\)\)](#)

• [reversal of sterilisation \(35697-00 \[\\[1253\\]\]\(#\), 35694 \[\\[1254\\]\]\(#\)\)](#)

• ~~[for:](#)~~

• ~~[removal of tubal pregnancy \(35677-05, 35678-01 \[\\[1256\\]\]\(#\)\)](#)~~

• ~~[reversal of sterilisation \(35697-00 \[\\[1253\\]\]\(#\), 35694 \[\\[1254\\]\]\(#\)\)](#)~~

• ~~[with hysterectomy \(see blocks \[\\[1268\\]\]\(#\) and \[\\[1269\\]\]\(#\)\)](#)~~

...

1252 Salpingo-oophorectomy

Excludes: that with hysterectomy (see blocks [\[1268\]](#) and [\[1269\]](#))

35638-11 Laparoscopic salpingo-oophorectomy, unilateral

...

1264 Biopsy of ~~endometrium~~ [uterus](#)

[35620-02 Laparoscopic biopsy of uterus](#)

[Laparoscopic biopsy of uterine serosa](#)

~~35620-00 Biopsy of endometrium~~

~~*Excludes:* that by endoscopy (35630-00 [\[1259\]](#))~~

[35620-01 Biopsy of uterus](#)

[Open biopsy of:](#)

• [endometrium](#)

• [uterine serosa](#)

Excludes: [endoscopic \(35630-00 \[\\[1259\\]\]\(#\)\)](#)

[laparoscopic \(35620-02 \[\\[1264\\]\]\(#\)\)](#)

[that with hysteroscopy \(35630-00 \[\\[1259\\]\]\(#\)\)](#)

...

1268

Abdominal hysterectomy

Note: *Subtotal (~~laparoscopic~~) abdominal hysterectomy* – involves removal of the uterus leaving the cervix attached to the vagina

Total (~~laparoscopic~~) abdominal hysterectomy – involves removal of the uterus, including the cervix

Radical abdominal hysterectomy – involves removal of the uterus including the cervix, upper 1–2 centimetres of vagina and parametrial tissue

Code also when performed:

- debulking of uterus (35658-00 [1270])
- [radical excision of pelvic lymph nodes \(96245-05 \[806\]\)](#)
- [removal of adnexa \(fallopian tube, ovarian cyst, ovary \(bilateral\) \(unilateral\)\) – see Alphabetic Index](#)

~~90448-00~~ Subtotal laparoscopic abdominal hysterectomy

~~Laparoscopic supracervical (partial) hysterectomy~~

~~**Includes:** morcellation~~

~~removal of uterus via:~~

- ~~• laparoscopic port~~
- ~~• vagina~~

~~**Excludes:** that with removal of adnexa (bilateral) (unilateral) (90448-02 [1268])~~

[35653-05](#) Laparoscopic subtotal abdominal hysterectomy

[Laparoscopic:](#)

- [supracervical \(partial\) hysterectomy](#)
- [subtotal hysterectomy](#)

[Includes:](#) [morcellation](#)

[removal of uterus via:](#)

- [laparoscopic port](#)
- [vagina](#)

35653-00 Subtotal abdominal hysterectomy

[Subtotal hysterectomy NOS](#)

Excludes: that with:

- ~~extensive retroperitoneal dissection (35661-00 [1268])~~
- ~~radical excision of pelvic lymph nodes (35670-00 [1268])~~
- ~~removal of adnexa (bilateral) (unilateral) (35653-04 [1268])~~

~~90448-01~~ Total laparoscopic abdominal hysterectomy

~~**Includes:** morcellation~~

~~removal of uterus via:~~

- ~~• laparoscopic port~~
- ~~• vagina~~

~~**Excludes:** that with removal of adnexa (bilateral) (unilateral) (90448-02 [1268])~~

[35653-07](#) Laparoscopic total abdominal hysterectomy

[Laparoscopic total hysterectomy](#)

[Total laparoscopic hysterectomy](#)

[Includes:](#) [morcellation](#)

[removal of uterus via:](#)

- [laparoscopic port](#)
- [vagina](#)

35653-01 Total abdominal hysterectomy

Excludes: that with:

- ~~extensive retroperitoneal dissection (35661-00 [1268])~~
- ~~radical excision of pelvic lymph nodes (35670-00 [1268])~~
- ~~removal of adnexa (bilateral) (unilateral) (35653-04 [1268])~~

~~90448-02~~ Total laparoscopic abdominal hysterectomy with removal of adnexa

~~Subtotal laparoscopic hysterectomy with removal of adnexa~~

~~**Includes:** excision of (bilateral) (unilateral):~~

- ~~• fallopian tube~~
- ~~• ovarian cyst~~
- ~~• ovary~~
- ~~morcellation~~

~~35653-04 Total abdominal hysterectomy with removal of adnexa~~

~~Subtotal abdominal hysterectomy with removal of adnexa~~

~~**Includes:** excision of (bilateral) (unilateral):~~

- ~~• fallopian tube~~
- ~~• ovarian cyst~~
- ~~• ovary~~

~~**Excludes:** radical abdominal hysterectomy (35667-00 [1268])~~

~~35661-00 Abdominal hysterectomy with extensive retroperitoneal dissection~~

~~Abdominal hysterectomy (subtotal) (total) with extensive retroperitoneal dissection~~

~~**Includes:** salpingo oophorectomy (bilateral) (unilateral)~~

~~**Note:** Performed for:~~

- ~~• benign pelvic tumours~~
- ~~• management of severe endometriosis~~
- ~~• pelvic inflammatory disease~~

~~35670-00 Abdominal hysterectomy with radical excision of pelvic lymph nodes~~

~~Abdominal hysterectomy (subtotal)(total) with radical excision of pelvic lymph nodes~~

~~**Includes:** salpingo oophorectomy (bilateral)(unilateral)~~

~~**Excludes:** radical abdominal hysterectomy (35664-00 [1268])~~

[35667-02 Laparoscopic radical abdominal hysterectomy](#)

[Laparoscopic radical hysterectomy](#)

Includes: [extensive retroperitoneal dissection](#)

[mobilisation of ureters](#)

[morcellation](#)

[removal of uterus via:](#)

- [laparoscopic port](#)
- [vagina](#)

35667-00 Radical abdominal hysterectomy

[Radical hysterectomy NEC](#)

Includes: [extensive retroperitoneal dissection](#)

[mobilisation of ureters](#)

~~[salpingo oophorectomy \(bilateral\)\(unilateral\)](#)~~

~~35664-00 Radical abdominal hysterectomy with radical excision of pelvic lymph nodes~~

~~**Includes:** mobilisation of ureters~~

~~[salpingo oophorectomy \(bilateral\)\(unilateral\)](#)~~

1269

Vaginal hysterectomy

Code also when performed:

- debulking of uterus (35658-00 [1270])
- [radical excision of pelvic lymph nodes \(96245-05 \[806\]\)](#)
- [removal of adnexa \(fallopian tube, ovarian cyst, ovary \(bilateral\) \(unilateral\)\) – see Alphabetic Index](#)

35750-00 Laparoscopically assisted vaginal hysterectomy

Laparoscopic guided vaginal hysterectomy

Excludes: [laparoscopically assisted radical vaginal hysterectomy \(35667-03 \[1269\]\)](#)

~~[that with removal of adnexa \(bilateral\) \(unilateral\) \(35753-02 \[1269\]\)](#)~~

35657-00 Vaginal hysterectomy

Includes: [uterine curettage](#)

Excludes: radical vaginal hysterectomy (35667-01, ~~35664-01~~ [1269])

~~35753-02 Laparoscopically assisted vaginal hysterectomy with removal of adnexa~~

~~*Includes:* excision of (bilateral) (unilateral):~~

- ~~• fallopian tube~~
- ~~• ovarian cyst~~
- ~~• ovary~~

~~35673-02 Vaginal hysterectomy with removal of adnexa~~

~~*Includes:* excision of (bilateral) (unilateral):~~

- ~~• fallopian tube~~
- ~~• ovarian cyst~~
- ~~• ovary~~

~~*Excludes:* radical vaginal hysterectomy (35667-01, ~~35664-01~~ [1269])~~

[35667-03 Laparoscopically assisted radical vaginal hysterectomy](#)

[Laparoscopically assisted Schauta procedure](#)

35667-01 Radical vaginal hysterectomy

Schauta procedure

Includes: ~~salpingo oophorectomy (bilateral)(unilateral)~~

~~35664-01 Radical vaginal hysterectomy with radical excision of pelvic lymph nodes~~

~~*Includes:* salpingo oophorectomy (bilateral)(unilateral)~~

...

1273 Other procedures on uterus

[92104-01 Manual reduction of uterine prolapse](#)

Includes: [insertion of vaginal:](#)

- [• packing](#)
- [• pessary](#)

Excludes: [that with repair of pelvic floor prolapse \(35577-00 \[1283\]\)](#)

90436-00 Other procedures on uterus

...

1294 Repair procedures on vulva or perineum

35533-00 Vulvoplasty

Labioplasty

[35533-01 Repair of perineum](#)

[Perineoplasty](#)

[Perineorrhaphy](#)

Excludes: [that with repair \(of\):](#)

- [• current obstetric laceration:](#)
 - [• 1st or 2nd degree \(90481-00 \[1344\]\)](#)
 - [• 3rd or 4th degree \(16573-00 \[1344\]\)](#)
 - [• NOS \(90481-00 \[1344\]\)](#)
- [• posterior vaginal compartment \(35571-00 \[1283\]\)](#)

...

1297 Procedures for reproductive medicine

Code also when performed:

- falloposcopy (35710-00 [1248])

...

13212-00 Transvaginal oocyte retrieval

Includes: ultrasound assistance
[with or without successful egg retrieval](#)

...

1299 Other procedures on female genital organs

[96251-00 Implantation of brachytherapy applicator, female genital organ](#)

Code also when performed:

- brachytherapy (see block [1790])

[96251-01 Removal of brachytherapy applicator, female genital organ](#)

35638-14 Laparoscopic uterosacral nerve ablation [LUNA]

Laparoscopic uterosacral:

- ligament resection
- nerve transection

...

35759-00 Control of postoperative haemorrhage, following gynaecological surgery, ~~NEC~~ [not elsewhere classified](#)

▽ 0039

[35759-01 Control of post abortion haemorrhage, not elsewhere classified](#)

Includes: [intrauterine balloon \(catheter\) packing](#)

90442-00 Other procedures on female genital organs

...

1330 Antepartum application, insertion or removal procedures

...

90461-00 Intra-amniotic injection

▽ 1511

~~Injection for termination of pregnancy of:~~

- ~~• prostaglandin~~
- ~~• saline~~

Intra-amniotic injection for [termination of pregnancy \(abortion\) using:](#)

- [prostaglandin](#)
- [saline](#)

~~90462-00 Insertion of prostaglandin suppository for induction of abortion~~

▽ 1511

~~*Excludes:* that with labour (90465-01 [1334])~~

[90462-01 Termination of pregnancy \[abortion procedure\], not elsewhere classified](#)

▽ 1511

[Administration of pharmacological agent to induce abortion](#)

Includes: [administration \(oral\) \(suppository\) of:](#)

- [misoprostol](#)
- [prostaglandin](#)

Excludes: [intra-amniotic injection \(90461-00 \[1330\]\) that with induction of labour \(90465 \[1334\]\)](#)

...

FORCEPS DELIVERY

1337 Forceps rotation and delivery

Includes: [spontaneous delivery of placenta](#)

Code also when performed:

- episiotomy (90472-00 [1343])

Excludes: that for breech delivery (90470-02, 90470-04 [1339])

...

90468-05 Failed forceps [delivery](#)
▽ 0019

...

VACUUM DELIVERY

1338 Vacuum assisted delivery

Includes: rotation of fetal head
[spontaneous delivery of placenta](#)

...

BREECH DELIVERY

Excludes: [spontaneous breech delivery \(90470-05 \[1336\]\)](#)

1339 [Assisted B](#)reech delivery and extraction

Includes: [spontaneous delivery of placenta](#)

~~90470-00 Spontaneous breech delivery~~

90470-01 Assisted breech delivery

...

PROCEDURES ASSISTING DELIVERY

▽ 1505

EXAMINATION

1341 Fetal monitoring

...

1343 Other procedures associated with delivery

▽ 1551

...

[90477-01 Assisted vertex delivery](#)

Code also:

- [procedure\(s\) assisting delivery — see Alphabetic Index](#)

Excludes: [vertex delivery with successful:](#)

- [forceps delivery \(see block \[1337\]\)](#)
- [vacuum assisted delivery \(90469-00 \[1338\]\)](#)

90477-00 Other procedures to assist delivery

...

1344**Postpartum suture**

▽ 1551

...

- 90481-00 Suture of first or second degree tear of perineum
 Secondary repair of episiotomy
 Suture of current obstetric perineal laceration, rupture or tear (involving) (with):
- fourchette
 - labia ([bilateral](#)) ([unilateral](#))
 - pelvic floor
 - skin
 - vaginal involvement NOS
 - vulva

Excludes: suture of vaginal laceration only (90479-00 [**1344**])

- 16573-00 Suture of third or fourth degree tear of perineum
 Suture of perineal laceration with vaginal involvement and:
- rectum
 - sphincter ani
 - subcutaneous muscle

Includes: [suture of sites listed in 90481-00 \[**1344**\]](#)

...

1747**Subcutaneous mastectomy**

Excision of breast tissue with preservation of skin and nipple

Includes: [formation of mound using autologous cutaneous mastectomy tissue](#)
 that with or without frozen section biopsy

Code also when performed:

- excision of lymph nodes of axilla (30300-00, 30332-00, 30335-00, 30336-00 [**808**])
- implant of prosthesis (45527 [**1753**])

- 31524-00 Subcutaneous mastectomy, unilateral

- 31524-01 Subcutaneous mastectomy, bilateral

...

1790**Brachytherapy, intracavitary, gynaecological**

Code first:

- [implantation of brachytherapy applicator \(catheters\) \(needles\) \(96251-00 \[**1299**\]\)](#)

- 15303-00 Brachytherapy, intrauterine, low dose rate

- 15304-00 Brachytherapy, intrauterine, high dose rate

- 15311-00 Brachytherapy, intravaginal, low dose rate

- 15312-00 Brachytherapy, intravaginal, high dose rate

- 15319-00 Brachytherapy, combined intrauterine and intravaginal, low dose rate

- 15320-00 Brachytherapy, combined intrauterine and intravaginal, high dose rate

...

1793**Removal of sealed radioactive source**

- 15339-00 Removal of sealed radioactive source

Excludes: removal of [eye brachytherapy applicator](#); (~~42802-00 [**177**]~~)

- [eye \(42802-00 \[**177**\]\)](#)
- [female genital organ \(96251-01 \[**1299**\]\)](#)

...

...

1900 Nonincisional insertion, replacement and removal of therapeutic device, genital tract

92104-00 Vaginal packing

Excludes: with:

- any other gynaecological intervention – omit code
- manual reduction prolapsed uterus (replacement proclidentia) (92104-01 [1273])

92105-00 Insertion of vaginal mould

92106-00 Insertion of vaginal diaphragm

92107-00 Insertion of other vaginal pessary

Excludes: that for induction of:

- abortion (~~see Alphabetic Index: Induction/abortion~~) (90462-01 [1330])
- labour (~~— see Alphabetic Index: Induction/labour/medical~~)

with:

- any other gynaecological intervention — omit code
- manual reduction prolapsed uterus (replacement proclidentia) (92104-01 [1273])

Alphabetic Index

Ablation — see also *Destruction/by site*

...

- vessels, placental, endoscopic (fetoscopic) 90488-00 [1330]

[Abortion \(administration of pharmacological agent\) \(medical\) NEC 90462-01 \[1330\]](#)

- by

- - dilation (and)

- - - curettage (D&C) 35640-00 [1265]

- - - - suction 35640-03 [1265]

- - - evacuation (D&E) 35643-03 [1265]

- - intra-amniotic injection (prostaglandin) (saline) 90461-00 [1330]

- - suction curettage 35640-03 [1265]

- surgical — see *Abortion/by/dilation*

Abrasion

...

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*

Note: Terms listed under the lead term 'Administration' are split by three main subterms; Administration/indication, Administration/specified site and Administration/type of agent.

- indication — see also *Administration/specified site OR Administration/type of agent*

...

- - termination of pregnancy ([abortion](#)) [NEC 90461-00/90462-01 \[1330\]](#)

...

- specified site

...

- - intra-amniotic ([abortion](#)) ([termination of pregnancy](#)) 90461-00 [1330]

...

- type of agent

...

- - Methotrexate, intramuscular 96197-19 [1920]

- - - for ectopic pregnancy 35677-03 [1256]

- - [misoprostol](#) — see also *Induction/labour/medical*

- - - for termination of pregnancy ([abortion](#)) 90462-01 [1330]

- - - with any other gynaecological intervention — *code specific procedure(s) performed*

- - neurolytic — see *Administration/specified site/nerve/by site/neurolytic agent*

...

- - Polytex

- - - paraurethra, for stress incontinence (female) 37339-00 [1110]

- - - - male 37339-01 [1109]

- - [poppy seed oil \(Lipiodol\)](#)

- - - with

- - - - any other gynaecological intervention — *code specific procedure(s) performed*

- - - - [therapeutic hydrotubation \(fallopian tube\)](#) 35703-01 [1248]

- - prophylactic NEC — *code to block [1920] with extension -19*

- - prostaglandin — see also *Induction/labour*

- - - for ~~termination of pregnancy 90461-00 [1330]~~

- - - - [induction of labour](#) 90465-01 [1334]

- - - - [termination of pregnancy \(abortion\)](#) 90462-01 [1330]

...

- - saline, [intra-amniotic \(abortion\)](#) ~~for~~ ([termination of pregnancy](#)) 90461-00 [1330]

...

Arrest (of)

...

- haemorrhage

...

- - following

- - - [abortion \(balloon catheter\) \(packing\)](#) 35759-01 [1299]

- - - circumcision, male 30663-00 [1195]

- - - dental procedure 97399-00 [461]

- - - gynaecological surgery 35759-00 [1299]

...

- - peptic ulcer 30505-00 [874]

- - - by gastric resection (other than wedge resection) 30509-00 [880]

- - - - wedge 30505-00 [874]

- - [post abortion \(balloon catheter\) \(packing\)](#) 35759-01 [1299]

- - postoperative, site NEC 30058-01 [777]

...

Assistance, assisted

- with
- - activities related to
- - - body position/movement/mobility 96166-00 [1914]
- - - - transfers 96167-00 [1914]
- - - health maintenance 96164-00 [1914]
- - - home management 96168-00 [1914]
- - - parenting 96169-00 [1914]
- - - self care/self maintenance 96163-00 [1914]
- - - transfers 96167-00 [1914]
- - application of assistive or adaptive device, aid or equipment 96165-00 [1914]
- accompanying or transportation of client (patient) 96171-00 [1915]
- [breech delivery 90470-01 \[1339\]](#)
- [with forceps to after-coming head \(FACH\) 90470-02 \[1339\]](#)
- endotracheal respiratory — see *block* [569]
- reproductive technologies, to induce
- - oocyte growth and development 13206-00 [1297]
- - superovulation 13200-00 [1297]
- [vertex delivery \(see also Delivery\) 90477-01 \[1343\]](#)

Atherectomy

...

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

...

- endometrium ([closed](#)) (endoscopic) (pipelle) ([with hysteroscopy](#)) 35630-00 [1259]
- ~~with hysteroscopy 35630-00 [1259]~~
- - open 35620-01 [1264]

...

- uterus, uterine (closed) (~~endometrium~~) ([endoscopic](#)) ([with hysteroscopy](#)) 35630-00 [1259]
- - [laparoscopic 35620-02 \[1264\]](#)
- - open 35620-01 [1264]
- - [serosa](#)
- - - [laparoscopic 35620-02 \[1264\]](#)
- - - [open 35620-01 \[1264\]](#)

...

Brachytherapy

...

- [cervix, cervical — see Brachytherapy/intrauterine](#)
- eye 15012-00 [1794]
- interstitial — see *Brachytherapy/with implantation of*
- intracavitary NEC
- - high dose rate 90764-01 [1791]
- - low dose rate 90764-00 [1791]
- intrauterine
- - with intravaginal brachytherapy
- - - high dose rate 15320-00 [1790]
- - - low dose rate 15319-00 [1790]
- - - [pulsed dose rate 15319-00 \[1790\]](#)
- - high dose rate 15304-00 [1790]
- - low dose rate 15303-00 [1790]
- - [pulsed dose rate 15303-00 \[1790\]](#)
- intravaginal
- - with intrauterine brachytherapy
- - - high dose rate 15320-00 [1790]
- - - low dose rate 15319-00 [1790]
- - - [pulsed dose rate 15319-00 \[1790\]](#)
- - high dose rate 15312-00 [1790]
- - low dose rate 15311-00 [1790]
- ...
- prostate 15338-00 [1792]
- - planning 15539-00 [1799]
- using surface applicators 90766-00 [1794]
- [uterus, uterine — see Brachytherapy/intrauterine](#)

...

Cervicectomy — see *Excision/cervix*

Cervicopexy 35618-02 [1277]

- with repair of pelvic floor prolapse 35577-00 [1283]

CFR (coronary flow reserve) 38241-00 [668]

...

Delivery (spontaneous) (vertex) 90467-00 [1336]

- assist^{ance} procedure (McRobert's manoeuvre) NEC (*see also specific interventions*) 90477-00 [1343]

- - episiotomy 90472-00 [1343]

- - fetal monitoring — see *Monitoring/fetal*

- - incision of cervix 90474-00 [1343]

- - manual rotation of fetal head 90471-06 [1342]

- - replacement of prolapsed umbilical cord 90473-00 [1343]

- - symphysiotomy 90475-00 [1343]

- - version — see *Version, obstetrical*

- assisted 90477-01 [1343]

- breech 90470-05 [1336]

- - assisted 90470-01 [1339]

- - - with forceps to after-coming head (FACH) 90470-02 [1339]

- - extraction 90470-03 [1339]

- - - with forceps to after-coming head (FACH) 90470-04 [1339]

- caesarean — see *Caesarean section*

- forceps NEC 90468-06 [1337]

- - for breech presentation — see *Delivery/breech*

- - with rotation of fetal head 90468-04 [1337]

- - at caesarean section — *omit code*

- - failed 90468-05 [1337]

- - high 90468-02 [1337]

- - low (outlet) (Wrigley's) 90468-00 [1337]

- - mid (Keilland's) (Neville-Barnes) 90468-01 [1337]

- placenta NEC 90467-01 [1336]

- - with any other delivery procedure — *omit code*

- - postpartum — see *Removal/placenta*

- vacuum assisted (Kiwi) (Ventouse) 90469-00 [1338]

- - failed 90469-01 [1338]

...

Dissection

...

- retroperitoneal tissue

- - for neuro-endocrine lesion (extensive) (tumour) 30323-00 [989]

- - with hysterectomy (abdominal) (radical) 35667-00 [1268]

- - - laparoscopic 35667-02 [1268]

~~- - female pelvis~~

~~- - with abdominal hysterectomy 35661-00 [1268]~~

- thoracic structure

...

Drainage

...

- endolymphatic sac (without shunt) 41590-00 [330]

- - with shunt 41590-01 [330]

- endometrioma (ovary) — see *Drainage/cyst/ovary*

- extradural haemorrhage (cerebral) 39600-00 [8]

...

Endometrectomy

- bladder 90360-00 [1103]

Endometrial scratch 13215-03 [1297]

Endopyelotomy 36825-00 [1073]

...

Fetal reduction (percutaneous) 90463-00 [1330]
~~- endoscopic 90463-01 [1330]~~
~~- reduction (percutaneous) 90463-00 [1330]~~
~~- - endoscopic 90463-01 [1330]~~
~~- scalp~~
~~- - lactate 16606-00 [1330]~~
~~- - pH 16606-00 [1330]~~
Fetoscopic tracheal occlusion (balloon) (FETO) 90464-00 [1332]
FFR (fractional flow reserve), coronary 38241-00 [668]

...

Graft (repair)

...

- tendon NEC 90583-00 [1569]
- - hand (reconstruction) 46408-00 [1469]
- - - flexor tendon pulley (reconstruction) 46411-00 [1469]
~~- vagina, vaginal~~
~~- - with~~
~~- - - gynaecological intervention — code specific procedure(s) performed~~
~~- - - urethroplasty — see Urethroplasty~~
- vein, venous

...

Hysterectomy (abdominal) (total) NEC 35653-01 [1268]

~~- abdominal (total) 35653-01 [1268]~~
~~- with~~
~~- - dissection of pelvic lymph nodes 35670-00 [1268]~~
~~- - extensive retroperitoneal dissection 35661-00 [1268]~~
~~- - oophorectomy (bilateral) (unilateral) 35653-04 [1268]~~
~~- - laparoscopic 90448-02 [1268]~~
~~- - radical excision of pelvic lymph nodes 35670-00 [1268]~~
~~- - salpingectomy (bilateral) (unilateral) 35653-04 [1268]~~
~~- - laparoscopic 90448-02 [1268]~~
~~- - salpingo-oophorectomy (bilateral) (unilateral) 35653-04 [1268]~~
~~- - laparoscopic 90448-02 [1268]~~
~~- - laparoscopic 90448-01 [1268]~~
~~- - subtotal (supracervical) 35653-00 [1268]~~
~~- - laparoscopic 90448-00 [1268]~~
~~- laparoscopic NEC 35653-07 [1268]~~
~~- - radical 35667-02 [1268]~~
~~- - subtotal 35653-05 [1268]~~
- radical **NEC** (with mobilisation of ureters) (with salpingo-oophorectomy) 35667-00 [1268]
~~- abdominal 35667-00 [1268]~~
~~- - with radical excision of pelvic lymph nodes 35664-00 [1268]~~
~~- - laparoscopic NEC 35667-02 [1268]~~
- - vaginal 35667-01 [1269]
~~- - with radical excision of pelvic lymph nodes 35664-01 [1269]~~
~~- - - laparoscopically assisted (guided) 35667-03 [1269]~~
~~- subtotal (supracervical) 35653-00 [1268]~~
~~- - laparoscopic 35653-05 [1268]~~
- vaginal 35657-00 [1269]
~~- with~~
~~- - oophorectomy (bilateral) (unilateral) 35673-02 [1269]~~
~~- - laparoscopically assisted (guided) 35753-02 [1269]~~
~~- - salpingectomy (bilateral) (unilateral) 35673-02 [1269]~~
~~- - laparoscopically assisted (guided) 35753-02 [1269]~~
~~- - salpingo-oophorectomy (bilateral) (unilateral) 35673-02 [1269]~~
~~- - laparoscopically assisted (guided) 35753-02 [1269]~~
- - laparoscopically assisted (guided) 35750-00 [1269]
- - - proceeding to abdominal hysterectomy (open) 90343-01 [1011]
~~- - radical 35667-01 [1269]~~
~~- - - laparoscopically assisted (guided) 35667-03 [1269]~~
Hysterosalpingography 59712-00 [1982]

...

Implant, implantation — *see also Insertion*

- adipose-derived stem cells 14203-01 [1906]
- applicator for brachytherapy (catheters) (needles)
 - - cervix 96251-00 [1299]
 - - eye 42801-00 [177]
 - - female genital organ 96251-00 [1299]
 - - prostate 37227-00 [1160]
 - - uterus 96251-00 [1299]
 - - vagina 96251-00 [1299]
- artery

...

Induction

- abortion [NEC \(see also Abortion\) 90462-01 \[1330\]](#)
 - ~~by~~
 - ~~dilation~~
 - ~~and~~
 - ~~curettage (D&C) 35640-00 [1265]~~
 - ~~suction 35640-03 [1265]~~
 - ~~evacuation (D&E) 35643-03 [1265]~~
 - ~~intra-amniotic injection (prostaglandin) (saline) 90461-00 [1330]~~
 - ~~prostaglandin~~
 - ~~injection 90461-00 [1330]~~
 - ~~suppository (without labour) 90462-00 [1330]~~
 - ~~with labour 90465-01 [1334]~~
- labour
 - - medical (administration of pharmacological agent) 90465-02 [1334]

...

Insertion

...

- applicator for brachytherapy (catheters) (needles)
 - - cervix 96251-00 [1299]
 - - eye 42801-00 [177]
 - - female genital organ 96251-00 [1299]
 - - prostate 37227-00 [1160]
 - - uterus 96251-00 [1299]
 - - vagina 96251-00 [1299]
- artificial
 - ...
 - balloon (catheter)
 - - for arrest or control of haemorrhage
 - - - cervix 96226-00 [1274]
 - - - gastro-oesophageal (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
 - - - nasal 41677-00 [373]
 - - - anterior (Little's area) (with cauterisation) (with diathermy) 41677-00 [373]
 - - - posterior (with cauterisation) (with diathermy) 41656-00 [373]
 - - - oesophageal (Minnesota) (Sengstaken-Blakemore) 13506-00 [1899]
 - - - post abortion 35759-01 [1299]
 - ...
 - suppository ([prostaglandin](#))
 - ~~prostaglandin~~
 - ~~for induction of~~
 - ~~abortion (without labour) 90462-00 [1330]~~
 - ~~with labour 90465-01 [1334]~~
 - ~~labour 90465-01 [1334]~~
 - - for
 - - - induction of labour 90465-01 [1334]
 - - - termination of pregnancy (abortion) 90462-01 [1330]
- suture

...

Instillation

...

- suppository ([prostaglandin](#))
- ~~— prostaglandin 90462-00 [1330]~~
- ~~— for induction of~~
- ~~— abortion (without labour) 90462-00 [1330]~~
- ~~— with labour 90465-01 [1334]~~
- ~~— labour 90465-01 [1334]~~
- - for
- - - induction of labour 90465-01 [1334]
- - - termination of pregnancy (abortion) 90462-01 [1330]

Instruction

...

Irrigation — see also Maintenance

...

- eye 92025-00 [1887]
- - anterior chamber (blood) 42743-00 [185]
- fallopian tube 35703-01 [1248]
- gastric 14200-00 [1895]
- ...
- tube
- - biliary tract NEC 92096-00 [1895]
- - - cholecystostomy 92096-00 [1895]
- - fallopian 35703-01 [1248]
- - nasogastric 92037-00 [1895]
- - pancreatic 92074-00 [1895]
- ureterostomy 92100-00 [1901]
- wound (nonexcisional) NEC 90686-01 [1628]
- - excisional 90665-00 [1628]

...

Mastectomy

- goldilocks — see *Mastectomy/subcutaneous*
- modified radical — see *Mastectomy/simple AND Excision/lymph node/axilla*
- partial 31500-00 [1744]
- - following previous open biopsy or excision 31515-00 [1744]
- simple (unilateral) 31518-00 [1748]
- - bilateral 31518-01 [1748]
- - extended — see *Mastectomy/simple AND Excision/lymph node/axilla*
- subcutaneous (unilateral) 31524-00 [1747]
- - bilateral 31524-01 [1747]
- total — see *Mastectomy/simple*

...

Mobilisation

- ossicles (incus) (malleus) (stapes) 41611-00 [318]
- sputum, manual 96157-00 [1889]
- testis — see *Fixation/testis*
- ~~— ureters~~
- ~~— with radical abdominal hysterectomy 35667-00 [1268]~~
- ~~— and radical excision of pelvic lymph nodes 35664-00 [1268]~~
- urethra
- - with correction of chordee of penis 37418-00 [1197]
- - - and graft 37418-01 [1197]

...

Mohs chemosurgery (microscopically (micrographically) controlled serial excision of lesion (tumour) of skin) 31000-00 [1626]

[MonaLisa touch 35539-01 \[1281\]](#)

Monitoring

...

Occlusion

- ...
- fallopian tubes (for sterilisation) (laparoscopic) 35688-00 [1257]
- - by electrodestruction 35688-03 [1257]
- - open (via laparotomy) 35688-02 [1257]
- - - by electrodestruction 35688-04 [1257]
- - vaginal approach 35688-01 [1257]
- [fetoscopic tracheal \(balloon\) \(FETO\) 90464-00 \[1332\]](#)
- lacrimal punctum

...

Packing

- for arrest or control of haemorrhage
- - cervix 96226-00 [1274]
- - nose — *see Packing/nose*
- - [post abortion 35759-01 \[1299\]](#)
- external auditory canal 92027-00 [1887]

...

Perimetry (manual) (unilateral) 96040-00 [1832]

- bilateral 96041-00 [1832]
- computerised (quantitative) (unilateral) 11224-00 [1832]
- - bilateral 11221-00 [1832]

[Perineoplasty — *see Repair/perineum*](#)

[Perineorrhaphy — *see Repair/perineum*](#)

Periogard 97048-01 [452]

...

Procedure

- for

...

- - prolapse
- - - anorectal
- - - - insertion of anal suture (Thiersch wire) 32120-00 [929]
- - - pelvic floor 35577-00 [1283]
- - - rectal (mucosa) (perirectal) (submucosal)
- - - - Delorme procedure (mucosal excision and plication of rectal muscle) 32111-00 [933]
- - - - destruction (cauterisation) (cryotherapy) (infrared therapy) 32135-03 [931]
- - - - injection of agent (sclerosing) (sclerotherapy) 90344-02 [929]
- - - - insertion of anal suture (Thiersch wire) 32120-00 [929]
- - - - ligation, rubber band 32135-02 [931]
- - - - manual reduction 90313-01 [940]
- - - - rectopexy, abdominal 32117-00 [940]
- - - - reduction of rectal mucosa (by excision) 32111-00 [933]
- - - - - manual 90313-01 [940]
- - - urethra (excision) 37369-00 [1118]
- - - [uterus](#)
- - - - [with repair of pelvic floor 35577-00 \[1283\]](#)
- - - - [manual reduction 92104-01 \[1273\]](#)
- - pseudoarthrosis — *see also Excision/lesion(s)/bone*

...

- Schauta (radical vaginal hysterectomy) 35667-01 [1269]
- - [laparoscopically assisted 35667-03 \[1269\]](#)
- sclera NEC 90072-00 [184]

...

Reduction

...

- prolapse
- - enterostomy 92070-00 [1899]
- - rectum (by excision) (Delorme procedure) 32111-00 [933]
- - - manual 90313-01 [940]
- - [uterus](#)
- - - with repair of pelvic floor 35577-00 [1283]
- - - manual 92104-01 [1273]
- ptosis overcorrection, eyelid (*see also Reoperation/for/blepharoptosis*) 45625-00 [1687]

...

Removal — *see also Excision*

...

- applicator for brachytherapy (catheters) (needles) [NEC](#) 15339-00 [1793]
- - [cervix 96251-01 \[1299\]](#)
- - eye 42802-00 [177]
- - [female genital organ 96251-01 \[1299\]](#)
- ...
- - [uterus 96251-01 \[1299\]](#)
- - [vagina 96251-01 \[1299\]](#)
- arch bars (mandible) (maxilla) 45823-00 [1360]
- ...
- brachytherapy applicator (catheters) (needles) [NEC](#) 15339-00 [1793]
- - [cervix 96251-01 \[1299\]](#)
- - eye 42802-00 [177]
- - [female genital organ 96251-01 \[1299\]](#)
- ...
- - [uterus 96251-01 \[1299\]](#)
- - [vagina 96251-01 \[1299\]](#)
- bridge (splint) 97656-00 [472]

...

Repair

...

- ~~perineum (with prosthesis) (*see also Repair/obstetric laceration, current/perineum*) 35571-00 [1283]~~
- [perineum \(with prosthesis\) NEC 35533-01 \[1294\]](#)
- - [with repair](#)
- - - [current obstetric laceration — *see Repair/obstetric laceration, current/perineum*](#)
- - - [posterior vaginal compartment \(vaginal approach\) 35571-00 \[1283\]](#)
- peritoneum NEC 90329-01 [1000]

...

Replacement

- plate
- - skull 40600-00 [23]
- [prolapsed uterine prolapse — *see Reduction/prolapse*](#)
- prosthesis, prosthetic device
- - breast 45552-00 [1758]

...

Rupture

- cyst
- - ovary
- - - laparoscopic 35637-07 [1241]
- - - via laparotomy 35713-02 [1241]
- membranes, artificial ([amniotomy](#)) (ARM)
- - after onset of labour (surgical augmentation) 90466-01 [1335]
- - - with medical augmentation of labour 90466-02 [1335]
- - before onset of labour (surgical induction) 90465-03 [1334]
- - - with medical induction of labour 90465-05 [1334]

...

- **Schauta procedure** (radical vaginal hysterectomy) 35667-01 [1269]

- laparoscopically assisted 35667-03 [1269]

Scintigraphy

...

Scraping

- corneal epithelium (for smear or culture) 42650-00 [172]

Scratch, endometrial 13215-03 [1297]

Screening

- bacteriological, dental 97048-01 [452]

...

Termination of pregnancy — ~~code specific procedure(s) performed~~ (administration of pharmacological agent) (medical) NEC 90462-01 [1330]

- by

- - dilation (and)

- - - curettage (D&C) 35640-00 [1265]

- - - - suction 35640-03 [1265]

- - - evacuation (D&E) 35643-03 [1265]

- - intra-amniotic injection (prostaglandin) (saline) 90461-00 [1330]

- - suction curettage 35640-03 [1265]

- surgical — see *Abortion/by/dilation*

TEST (tubal embryo stage transfer) 13215-02 [1297]

Australian Coding Standards

0019 ...

...

EXAMPLE 5:

Patient admitted with menorrhagia for a laparoscopically assisted vaginal hysterectomy under GA. During the intervention, the surgeon decided to proceed to an open total abdominal hysterectomy.

| | | |
|--------|------------------------|---|
| Codes: | <u>N92.0 (COF 2)</u> | <u>Excessive and frequent menstruation with regular cycle</u> |
| | <u>35653-01 [1268]</u> | <u>Total abdominal hysterectomy</u> |
| | <u>90343-01 [1011]</u> | <u>Laparoscopic procedure proceeding to open procedure</u> |
| | <u>92514-99 [1910]</u> | <u>General anaesthesia, ASA 99</u> |

...

0053 ROBOTIC-ASSISTED INTERVENTION

Minimally invasive surgery is being performed across a wide range of specialities with the assistance of robotic technology. Robotic-assisted interventions involve use of very small instruments attached to a robotic arm and controlled by a clinician through a computer console.

CLASSIFICATION

Where a procedure is performed with the assistance of robotic technology, code first the procedure(s) performed, followed by 96233-00 [1923] *Robotic-assisted intervention*.

EXAMPLE 1:

Robotic-assisted laparoscopic abdominal hysterectomy.

| | | |
|--------|----------------------------|--|
| Codes: | 90448-01 [1268] | Total laparoscopic abdominal hysterectomy |
| | <u>35653-07 [1268]</u> | <u>Laparoscopic total abdominal hysterectomy</u> |
| | 96233-00 [1923] | <i>Robotic-assisted intervention</i> |



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

ACS Obstetrics review

Introduction/Rationale:

This addenda proposal incorporates a number of issues relating to the Australian Coding Standards (ACS) Chapter 15 *Pregnancy, childbirth and the puerperium*:

- Assisted delivery - external version of twin 2 with subsequent SVD (Q3182)
- In vitro fertilisation (IVF) (Coding Matters Vol 16 No 1)
- Immunisation for obstetric patients (Q3200)
- Additional diagnoses in obstetric episodes of care (Q3265)

Summary of proposal:

A review of Chapter 15 was undertaken for Tenth Edition. In addition to the above coding query/publication derived topics, this addenda proposal is a continuation of the Chapter 15 review. Redundant standards are proposed for deletion, with the content transferred to ICD-10-AM/ACHI Tabular List and/or Alphabetic Index, as appropriate.

Amendments are also proposed for some genitourinary standards (ACS Chapter 14 *Genitourinary system*) and neonatal/perinatal standards (ACS Chapter 16 *Certain conditions originating in the perinatal period*), as they are closely related to obstetric issues.

A number of amendments are also proposed to provide clarity, following publication of Tenth Edition FAQs.

See also TN1223 ICD-10-AM Obstetrics review and TN1224 ACHI Obstetrics review, and TN1350 Labour without delivery and Delivery outside hospital.

ACCD PROPOSAL

Australian Coding Standards

TABLE OF CONTENTS

14. Genitourinary system

- 1404 Admission for kidney dialysis
- 1428 Diethylstilboestrol (DES) syndrome
- 1429 Loin pain/haematuria syndrome
- 1431 Examination under anaesthesia (EUA), gynaecology
- 1433 Bladder retraining
- 1434 Ovarian cysts
- 1437 Infertility [and in vitro fertilisation \(IVF\)](#)
- 1438 Chronic kidney disease

15. Pregnancy, childbirth and the puerperium

- 1500 Diagnosis sequencing in ~~delivery-obstetric~~ episodes of care
- 1505 Delivery and assisted delivery codes
- 1506 Fetal presentation, disproportion and abnormality of maternal pelvic organs
- 1511 Termination of pregnancy ([abortion](#))
- 1521 Conditions and injuries in pregnancy
- 1544 Complications following ~~abortion and ectopic and molar~~ pregnancy [with abortive outcome](#)
- 1548 Puerperal/postpartum condition or complication
- 1549 Streptococcal group B infection/carrier in pregnancy
- 1550 Discharge/transfer in labour
- 1551 Obstetric perineal lacerations/grazes
- 1552 Premature rupture of membranes, labour delayed by therapy

16. Certain conditions originating in the perinatal period

- 1602 Neonatal complications of maternal diabetes
- 1605 Conditions originating in the perinatal period
- 1607 Newborn/neonate
- 1610 Sudden infant death syndrome/apparent life threatening event
- 1611 Observation and evaluation of newborn and infants for suspected condition not found
- 1613 Massive aspiration syndrome
- 1614 Respiratory distress syndrome/hyaline membrane disease/surfactant deficiency
- 1615 Specific diseases and interventions related to the sick neonate
- 1617 Neonatal sepsis/risk of sepsis
- ~~1618—Low birth weight and gestational age~~

0001 PRINCIPAL DIAGNOSIS

...

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

For guidelines regarding assignment of principal diagnosis in delivery episodes of care, see ACS 1500 *Diagnosis sequencing in ~~delivery~~-obstetric episodes of care.*

See also ACS 1521 *Conditions and injuries in pregnancy* and ACS 1548 *Puerperal/postpartum condition or complication.*

0002 ADDITIONAL DIAGNOSES

...

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

For general guidelines regarding assignment of additional diagnoses in delivery episodes of care, see ACS 1500 *Diagnosis sequencing in ~~delivery~~-obstetric episodes of care.*

See also ACS 1521 *Conditions and injuries in pregnancy* and ACS 1548 *Puerperal/postpartum condition or complication.*

0039 REOPENING OF OPERATIVE SITE

Codes for reopening of [an](#) operative site ~~should be~~[are](#) assigned for treatment of **postoperative complications**, such as haemorrhage:

39721-00 [10] *Postoperative reopening of craniotomy or craniectomy site*

90009-00 [49] *Postoperative reopening of laminotomy or laminectomy site*

90047-02 [111] *Reopening of wound of thyroid*

38656-01 [562] *Reopening of thoracotomy or sternotomy site*

33845-00 [746] *Control of postoperative bleeding or thrombosis after intra-abdominal vascular procedure*

33848-00 [746] *Control of postoperative bleeding or thrombosis of an extremity after vascular procedure*

30385-00 [985] *Postoperative reopening of laparotomy site*

35759-00 [1299] *Control of postoperative haemorrhage following gynaecological surgery. ~~NEC~~[not elsewhere classified](#)*

These codes ~~should be~~[are](#) ~~not be used~~[assigned](#) for a subsequent opening of the operative site for treatment of a recurrent or unrelated condition.

0042 PROCEDURES NORMALLY NOT CODED

...

8. Drug treatment/pharmacotherapy/prescription of drugs (eg total parental nutrition (TPN))

Exception(s): code following the guidelines in:

- ACS 0044 *Chemotherapy*
- ACS 0534 *Specific interventions related to mental health care services*
- ACS 0943 *Thrombolytic therapy*
- ACS 1316 *Cement spacer/beads*
- [ACS 1500 *Diagnosis sequencing in obstetric episodes of care*](#)
- [ACS 1511 *Termination of pregnancy \(abortion\)*](#)
- ACS 1615 *Specific diseases and interventions related to the sick neonate*

0053 ROBOTIC-ASSISTED INTERVENTION

...

EXAMPLE 1:

Robotic-assisted laparoscopic abdominal hysterectomy.

Codes: ~~90448-01 [1268] — Total laparoscopic abdominal hysterectomy~~
[35653-07 \[1268\]](#) [Laparoscopic total abdominal hysterectomy](#)
96233-00 [1923] *Robotic-assisted intervention*

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

...

DM and IH in pregnancy, childbirth and the puerperium

- DM or IH in pregnancy, childbirth or the puerperium that **predates the pregnancy** is classified to: ~~category O24 *Diabetes mellitus in pregnancy*~~
 - O24.0 *Pre-existing [Type 1 diabetes mellitus](#); ~~Type 1~~, in pregnancy, [childbirth and the puerperium](#)*
 - O24.1- *Pre-existing [Type 2 diabetes mellitus](#); ~~Type 2~~, in pregnancy, [childbirth and the puerperium](#)*
 - O24.2- *Pre-existing [other specified diabetes mellitus](#); ~~other specified type~~, in pregnancy, [childbirth and the puerperium](#)*
 - O24.3- *Pre-existing [unspecified diabetes mellitus](#); ~~unspecified~~, in pregnancy, [childbirth and the puerperium](#)*
 - O24.5- *Pre-existing intermediate hyperglycaemia; in pregnancy, [childbirth and the puerperium](#)*
- O24.4- *Diabetes mellitus arising during pregnancy* is assigned where there is documentation of gestational diabetes, or where the diagnosis of DM **does not predate the pregnancy**
- O24.9- *Diabetes mellitus in pregnancy, [childbirth and the puerperium](#), unspecified onset* is assigned where DM/IH in pregnancy is **not documented as pre-existing nor gestational**

Assign codes for DM or IH (E09–E14) as per the *Instructional notes (code also)* at [category O24. ~~Diabetes mellitus and intermediate hyperglycaemia in pregnancy, childbirth and the puerperium.~~](#)

However, if DM or IH is documented in pregnancy but does not meet the criteria for a pregnancy complication, assign a code for DM or IH (E09–E14) and Z33 *Pregnant state, incidental* (see ACS 1521 *Conditions and injuries in pregnancy*).

See also ACS 1548 *Puerperal/postpartum condition or complication*.

0505 MENTAL ILLNESS IN PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

Where a mental disorder is documented in pregnancy, childbirth or the puerperium, assign:

- a code from Chapter 5 *Mental and behavioural disorders* for the specific type of mental illness
- O99.31 *Mental disorders ~~and diseases of the nervous system~~ in pregnancy, childbirth and the puerperium.*

...

EXAMPLE 3:

Patient admitted at 36 weeks for bed rest and antidepressants for exacerbation of her major depression. During the same episode the patient delivered a liveborn infant by spontaneous vertex delivery at 39 weeks.

| | | |
|--------|--------|---|
| Codes: | O99.31 | <i>Mental disorders and diseases of the nervous system in pregnancy, childbirth and the puerperium</i> |
| | F32.20 | <i>Severe depressive episode without psychotic symptoms, not specified as arising in the postnatal period</i> |
| | O80 | <i>Single spontaneous delivery</i> |
| | Z37.0 | <i>Single live birth</i> |

1437 INFERTILITY AND IN VITRO FERTILISATION (IVF)

INVESTIGATION OR TREATMENT FOR INFERTILITY

When an admission is for investigation or treatment of infertility ~~(either male or female)~~, assign as principal diagnosis: a code from category N97 Female infertility or code N46 Male infertility should be assigned as principal diagnosis.

- a code from category N97 Female infertility for a female patient
- N46 Male infertility for a male patient.

IN VITRO FERTILISATION (IVF)

~~When a female is admitted specifically for IVF procedures and the principal diagnosis is 'IVF' or 'infertility', Z31.2 In vitro fertilisation should be assigned as the principal diagnosis code. An additional code from category N97 Female infertility, for the type of infertility may be assigned if known, including N97.4 Female infertility associated with male factors.~~

Female patient:

- When an admission is specifically for IVF procedures and the documented diagnosis is 'IVF' or 'infertility', assign Z31.2 In vitro fertilisation as the principal diagnosis
- Assign an additional diagnosis from category N97 Female infertility, for the type of infertility, if known.

Note: ACHI codes are not included in the following examples.

EXAMPLE 1:

A 32 year old woman is admitted 'for IVF'.

Codes: Z31.2 In vitro fertilisation

EXAMPLE 2:

A 32 year old woman is admitted for IVF due to failure to conceive due to infertile male partner.

Codes: Z31.2 In vitro fertilisation

N97.4 Female infertility associated with male factors

~~When a male is admitted specifically for procedures associated with IVF, such as aspiration of sperm, assign Z31.3 Other assisted fertilisation methods, as the principal diagnosis. Assign N46 Male infertility as an additional diagnosis to indicate presence of infertility.~~

Male patient:

- When an admission is specifically for procedures associated with IVF (eg aspiration of sperm), assign Z31.3 Other assisted fertilisation methods as the principal diagnosis
- Assign N46 Male infertility as an additional diagnosis, if applicable.

15 PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

1500 DIAGNOSIS SEQUENCING IN ~~DELIVERY~~ OBSTETRIC EPISODES OF CARE

O80–O84 DELIVERY AS PRINCIPAL DIAGNOSIS

- Assign **O80–O84 Delivery** as the principal diagnosis for a patient admitted for delivery **and** the outcome is delivery. These episodes of care may include documentation such as *in labour, for induction, for caesarean* etc
- Assign additional diagnoses to indicate the reason for any delivery intervention (eg the reason for induction, use of forceps, caesarean section)
- Where there is difficulty in determining the principal diagnosis in obstetric episodes of care with an outcome of delivery, assign a code from category O80–O84 *Delivery* as the principal diagnosis.

O80–O84 DELIVERY AS ADDITIONAL DIAGNOSIS

- Where a pregnant patient is admitted for management of a condition in the antepartum period, assign either a code from Chapter 15 *Pregnancy, childbirth and the puerperium* or another chapter that meets the definition of principal diagnosis (see also ACS 1521 *Conditions and injuries in pregnancy*)
- Assign O80–O84 *Delivery* as an additional diagnosis where the patient delivers during the episode.

OTHER ADDITIONAL DIAGNOSES IN ~~DELIVERY~~ OBSTETRIC EPISODES OF CARE

Note: †The following guidelines also apply to antenatal (ie without delivery) as well as delivery episodes of care.

- Assign the following codes when documented (as applicable to the episode of care):
 - O09.- *Duration of pregnancy* (see criteria in ICD-10-AM Tabular List)
 - O30.- *Multiple gestation*
 - O60.- *Preterm labour and delivery*
Assign O60.- when onset of labour and/or delivery occurs before 37 completed weeks gestation (see also ACS 1511 *Termination of pregnancy (abortion)* and ACS 1550 *Discharge/transfer in labour*).
 - Z29.1 *Prophylactic immunotherapy*
Assign Z29.1 for an obstetric patient who requires administration of anti-D, with 92173-00 [1884] *Passive immunisation with Rh(D) immunoglobulin*.
 - Z37.- *Outcome of delivery*
 - Codes for streptococcal group B infection/carrier – see ACS 1549 *Streptococcal group B infection/carrier in pregnancy*
 - [Prophylactic vaccination/need for immunisation – see ICD-10-AM Alphabetic Index: Vaccination/prophylactic and ACHI Alphabetic Index: Vaccination](#)
- Assign codes for other conditions/complications (pregnancy, childbirth, puerperal or nonobstetric) [from Chapter 15 Pregnancy, childbirth and the puerperium](#) that meet the criteria for an additional diagnosis in ACS 0002 *Additional diagnoses*. [Assign a code from another chapter where it adds specificity to the Chapter 15 code, or as per any Instructional notes.](#)

For guidelines regarding admission for termination of pregnancy, see ACS 1511 *Termination of pregnancy (abortion)*. See also specific standards within Chapter 15 *Pregnancy, childbirth and the puerperium*.

1505 DELIVERY AND ASSISTED DELIVERY CODES

Where a patient delivers during an episode of care, assign:

- a code from O80–O84 *Delivery* and
- ~~an~~ ACHI code(s) from [1336] – [1340] *Delivery procedures* and/or [1341] – [1343] *Procedures assisting delivery* ~~other procedure(s) to assist delivery~~

For guidelines regarding transfer in third stage of labour (ie after delivery of baby at one facility but before delivery of placenta at another facility), see ACS 1550 *Discharge/transfer in labour*.

| ICD-10-AM CODE | ACHI <u>DELIVERY</u> CODES |
|---|--|
| O80 <i>Single spontaneous delivery</i> | 90467-00 [1336] <i>Spontaneous vertex delivery</i>
90470-0 5 ⁹ [133 6 ⁹] <i>Spontaneous breech delivery</i> |
| O81 <i>Single delivery by forceps and vacuum extraction</i> | 90468-00 [1337] <i>Low forceps delivery</i>
90468-01 [1337] <i>Mid-cavity forceps delivery</i>
90468-02 [1337] <i>High forceps delivery</i>
90468-04 [1337] <i>Forceps rotation of fetal head with forceps delivery</i>
90468-06 [1337] <i>Forceps delivery, unspecified</i>
90469-00 [1338] <i>Vacuum assisted delivery</i>
90470-02 [1339] <i>Assisted breech delivery with forceps to after-coming head</i>
90470-04 [1339] <i>Breech extraction with forceps to after-coming head</i> |
| O82 <i>Single delivery by caesarean section</i> | Block [1340] <i>Caesarean section</i> |
| O83 <i>Other assisted single delivery</i> | 90468-03 [1337] Forceps rotation of fetal head
90470-01 [1339] <i>Assisted breech delivery</i>
90470-03 [1339] <i>Breech extraction</i>
<u>90477-01 [1343] Assisted vertex delivery</u>
16501-00 [1342] External version
90471-02 [1342] Internal version
90471-04 [1342] Combined internal and external version
90471-06 [1342] Manual rotation of fetal head
90477-00 [1343] Other procedures to assist delivery
90482-00 [1345] Manual removal of placenta
<u>Code also</u> Other procedure(s) to assist delivery not listed above — see ACHI Alphabetic Index |

| | | |
|--------|--|---|
| O84.0 | <i>Multiple delivery, all spontaneous</i> | 90467-00 [1336] <i>Spontaneous vertex delivery</i>
90470-05 9 [133 6 9] <i>Spontaneous breech delivery</i> |
| O84.1 | <i>Multiple delivery, all by forceps and vacuum extractor</i> | 90468-00 [1337] <i>Low forceps delivery</i>
90468-01 [1337] <i>Mid-cavity forceps delivery</i>
90468-02 [1337] <i>High forceps delivery</i>
90468-04 [1337] <i>Forceps rotation of fetal head with forceps delivery</i>
90468-06 [1337] <i>Forceps delivery, unspecified</i>
90469-00 [1338] <i>Vacuum assisted delivery</i>
90470-02 [1339] <i>Assisted breech delivery with forceps to after-coming head</i>
90470-04 [1339] <i>Breech extraction with forceps to after-coming head</i> |
| O84.2 | <i>Multiple delivery, all by caesarean section</i> | Block [1340] <i>Caesarean section</i> |
| O84.81 | <i>Multiple delivery, all assisted, not elsewhere classified</i> | 90468-03 [1337] Forceps rotation of fetal head
90470-01 [1339] <i>Assisted breech delivery</i>
90470-03 [1339] <i>Breech extraction</i>
90477-01 [1343] Assisted vertex delivery
16501-00 [1342] External version
90471-02 [1342] Internal version
90471-04 [1342] Combined internal and external version
90471-06 [1342] Manual rotation of fetal head
90477-00 [1343] Other procedures to assist delivery
90482-00 [1345] Manual removal of placenta
Code also other procedure(s) to assist delivery not listed above — see ACHI Alphabetic Index |
| O84.82 | <i>Multiple delivery by combination of methods</i> | Appropriate (multiple) codes from blocks [1336] – [1340]
<i>Delivery procedures</i> and/or [1341] – [1343] Procedures assisting delivery ; or other procedure(s) to assist delivery — see ACHI Alphabetic Index
Code also other procedure(s) to assist delivery — see ACHI Alphabetic Index |
| O84.9 | <i>Multiple delivery, unspecified</i> | No ACHI code assigned as the method of delivery is unspecified |

Note: ~~When ACHI codes for failed delivery procedures are assigned (eg failed forceps/vacuum extraction/version), assign appropriate ICD-10-AM codes for assisted delivery, unless the delivery proceeds to forceps or vacuum extraction, or caesarean section.~~

- [Spontaneous delivery may include:](#)

- [administration of Syntocinon in third stage of labour](#)
- [controlled cord traction \(CCT\)](#)
- [epidural injection/infusion](#)
- [episiotomy with repair](#)
- [fetal monitoring](#)
- [medical or surgical:](#)
 - [augmentation of labour](#)
 - [induction](#)
- [suture of obstetric perineal laceration](#)

[For classification purposes, once an assistance procedure \(not listed above\) is performed during the delivery episode of care \(eg McRoberts manoeuvre, version, breech extraction\), the delivery is **not classified as spontaneous**](#)

- [When ACHI codes for failed delivery procedures are assigned \(eg failed forceps/vacuum extraction\), assign ICD-10-AM codes for **assisted delivery** \(ie O83, O84.81 or O84.82\), unless the delivery proceeds to forceps or vacuum extraction \(O81\), or caesarean section \(O82\). Also assign O66.5 *Failed application of vacuum extractor and forceps, unspecified*, if applicable.](#)
- [Delivery is not complete until after expulsion of the placenta, excluding any retained portion\(s\), expelled or requiring removal post delivery.](#)
[See also ACS 1548 *Puerperal/postpartum condition or complication* and ACS 1550 *Discharge/transfer in labour*.](#)
- [Assign additional ACHI codes, as appropriate, for interventions performed during or following labour and delivery \(eg **episiotomy** postpartum suture, manual removal of placenta\).](#)

EXAMPLE 1:

[Patient admitted in labour \(39/40\). McRoberts manoeuvre performed, followed by vaginal delivery of healthy infant.](#)

Codes: O83 [Other assisted single delivery](#)
 Z37.0 [Single live birth](#)
 90477-01 [1343] [Assisted vertex delivery](#)
 90477-00 [1343] [Other procedures to assist delivery](#)

EXAMPLE 2:

[Patient admitted in labour \(39/40\). Vacuum delivery attempted but failed, followed by vaginal delivery of healthy infant.](#)

Codes: O83 [Other assisted single delivery](#)
 O66.5 [Failed application of vacuum extractor and forceps, unspecified](#)
 Z37.0 [Single live birth](#)
 90477-01 [1343] [Assisted vertex delivery](#)

90469-01 [1343] *Failed vacuum assisted delivery*

EXAMPLE 3:

Patient delivered baby (spontaneous vertex) in the ambulance on route to hospital. Placenta delivered spontaneously after admission to hospital.

Codes: O80 *Single spontaneous delivery*

Z37.0 *Single live birth*

90467-01 [1336] *Spontaneous delivery of placenta, not elsewhere classified*

In this example, delivery codes are assigned, as the delivery was completed (ie delivery of the placenta) during the admitted episode of care.

EXAMPLE 4:

Patient delivered baby at home (planned home birth). They were admitted to hospital four hours later due to postpartum haemorrhage and taken to theatre for removal of retained portions of placenta, by dilation and curettage (D&C) (under general anaesthesia).

Codes: O73.1 *Retained portions of placenta and membranes*

O72.1 *Other immediate postpartum haemorrhage*

Z39.02 *Postpartum care after planned, out of hospital delivery*

16564-00 [1345] *Postpartum evacuation of uterus by dilation and curettage*

92514-99 [1910] *General anaesthesia, ASA 99*

In this example, delivery codes are not assigned, as the delivery was complete prior to the admitted episode of care.

See also ACS 1548 *Puerperal/postpartum condition or complication*.

MULTIPLE DELIVERY

In a multiple delivery, if the babies are delivered by: ~~different methods, ACHI codes for all of the delivery methods must be assigned (except for any deliveries that occurred prior to the admitted episode of care, noting that delivery is not complete until after expulsion of the placenta).~~

- the same method, assign the relevant ACHI code once only
- different methods, assign ACHI codes for all of the delivery methods.

EXAMPLE 5:

Premature twins delivered at 35 weeks; Twin 1 delivered by breech extraction and twin 2, transverse position delivered by emergency lower segment caesarean section (LSCS) (with spinal anaesthesia, ASA 1 E) due to obstruction.

Codes: O84.82 *Multiple delivery by combination of methods*

O30.0 *Twin pregnancy*

O64.1 *Labour and delivery affected by breech presentation*

O64.8 *Labour and delivery affected by other malposition and malpresentation*

O60.1 *Preterm labour with preterm delivery*

O09.5 *Duration of pregnancy 34–<37 completed weeks*

Z37.2 *Twins, both liveborn*

16520-03 [1340] *Emergency lower segment caesarean section*

92508-10 [~~1333~~1909] *Neuraxial block, ASA 10*

90470-03 [1339] *Breech extraction*

EXAMPLE 6:

Term delivery; twin 1 delivered in the ambulance on the way to hospital (spontaneous vertex [delivery \(SVD\)](#)). Twin 2 [\(and placenta\)](#) delivered in hospital by emergency lower segment caesarean section (LSCS) (with spinal anaesthesia, ASA 1 E).

Codes: O84.82 *Multiple delivery by combination of methods*

O30.0 *Twin pregnancy*

Z37.2 *Twins, both liveborn*

16520-03 [1340] *Emergency lower segment caesarean section*

92508-10 [~~1333~~1909] *Neuraxial block, ASA 10*

In this example an ACHI delivery code for spontaneous vertex delivery of twin 1 ~~was~~ not assigned as it was not performed within the admitted episode of care. [However, the \(single\) placenta was removed during the caesarean section for twin 2.](#) ~~(note that removal of placenta is included in caesarean section).~~

EXAMPLE 7:

[Term delivery of healthy twins; both delivered by SVD.](#)

Codes: O84.0 *Multiple delivery, all spontaneous*

[O30.0](#) *Twin pregnancy*

[Z37.2](#) *Twins, both liveborn*

[90467-00 \[1336\]](#) *Spontaneous vertex delivery*

EXAMPLE 8:

[Term delivery of healthy twins; twin 1 delivered by SVD, and twin 2 delivered by spontaneous breech delivery.](#)

Codes: O84.0 *Multiple delivery, all spontaneous*

[O30.0](#) *Twin pregnancy*

[O64.1](#) *Labour and delivery affected by breech presentation*

[Z37.2](#) *Twins, both liveborn*

[90467-00 \[1336\]](#) *Spontaneous vertex delivery*

[90470-05 \[1336\]](#) *Spontaneous breech delivery*

EXAMPLE 9:

[Term delivery of healthy twins. Twin 1 delivered by SVD. Twin 2 delivered by breech extraction.](#)

Codes: O84.82 *Multiple delivery by combination of methods*

[O30.0](#) *Twin pregnancy*

[O64.1](#) *Labour and delivery affected by breech presentation*

[Z37.2](#) *Twins, both liveborn*

[90467-00 \[1336\]](#) [Spontaneous vertex delivery](#)

[90470-03 \[1339\]](#) [Breech extraction](#)

See ACS 1500 *Diagnosis sequencing in ~~delivery~~-obstetric episodes of care* for guidelines regarding sequencing of codes from O80–O84 *Delivery*.

...

1511 TERMINATION OF PREGNANCY ([ABORTION](#))

[ABORTION](#)

Induced abortion is defined as [intentional termination of pregnancy](#), ~~extraction, or expulsion following induction or other procedure, of the products of conception to intentionally terminate pregnancy~~, and may be performed before or after fetal viability. Fetal viability is defined as 20 completed weeks (140 days) gestation and/or fetal weight greater than or equal to 400g.

Medical abortion is an induced abortion performed in a health facility usually for medical/legal/mental health indications.

~~For delivery episodes of care following fetal death in utero (intrauterine death) (not induced), follow the Alphabetic Index at *Death/fetus, fetal* and the guidelines in ACS 1500 *Diagnosis sequencing in delivery episodes of care*.~~

[FETAL DEATH IN UTERO](#)

[Fetal death in utero](#) is spontaneous (ie not induced) intrauterine death with retention of the fetus.

[Follow the Alphabetic Index at *Death/fetus, fetal* and the guidelines in ACS 1500 *Diagnosis sequencing in obstetric episodes of care*.](#)

ICD-10-AM CODES FOR MEDICAL ABORTION:

~~**Before fetal viability** (less than 20 completed weeks (140 days) gestation and/or fetal weight less than 400g), assign:~~

- ~~• [O04.](#) *Medical abortion as the principal diagnosis*~~
- ~~• [O09.](#) *Duration of pregnancy*~~
- ~~• a code to indicate the reason for the medical abortion, when applicable~~

~~If the medical abortion results in a liveborn infant, assign the appropriate [Z37](#) *Outcome of delivery* code as an additional diagnosis.~~

~~**After fetal viability** (20 or more completed weeks (140 days) gestation and/or fetal weight \geq 400g), assign:~~

- ~~• a code to indicate the reason for the medical abortion as the principal diagnosis~~
- ~~• [O04.](#) *Medical abortion*~~
- ~~• a code from O80–O84 *Delivery*~~
- ~~• [O60.](#) *Preterm labour and delivery*~~
- ~~• [O09.](#) *Duration of pregnancy*~~
- ~~• [Z37.](#) *Outcome of delivery*~~

[Assign:](#)

- [• \[O04.\]\(#\)- *Medical abortion \(as the principal diagnosis\)*](#)
- [• \[O09.\]\(#\)- *Duration of pregnancy*](#)

- [a code to indicate the reason for the medical abortion, if known](#)
- [a code from O80–O84 *Delivery* – **only** if the medical abortion is performed **after fetal viability**](#)
- [O60.3 *Preterm delivery without spontaneous labour* – **only** if the medical abortion is performed **after fetal viability**](#)
- [Z37.- *Outcome of delivery* – if the medical abortion is performed **after fetal viability** \(regardless of outcome\), or **before fetal viability if the outcome is a liveborn infant**](#)

ICD-10-AM CODES FOR STAGED MEDICAL ABORTION

[Medical abortion may be performed as a two stage intervention. For example, an agent \(eg mifepristone\) is administered to begin the termination process, and the patient returns home \(initial episode of care \(stage 1\)\). They are admitted \(to the same facility or to another facility\) at a later stage to complete the termination of pregnancy \(subsequent episode of care \(stage 2\)\).](#)

- **Initial episode of care (stage 1):** Assign: [Z32.2 *Initiation of medical abortion*](#)

[Note: The initial episode \(stage 1\) may be performed in a non-admitted setting \(ie outpatient facility\), which is not coded.](#)

- **Subsequent episode of care (stage 2):** Assign: [O04.- *Medical abortion* with fourth character .5 – .9.](#)

[Note: Assign additional codes with Z32.2 or O04.- as per the \[guidelines for ICD-10-AM codes for medical abortion\]\(#\) \(see above\).](#)

ACHI CODES ~~PROCEDURES~~ FOR TERMINATION OF PREGNANCY (ABORTION)

Termination of pregnancy ([abortion](#)) may be performed by:

- ~~extraction~~ **surgical methods** (eg dilation and curettage/evacuation (D&C/D&E) or suction curettage). Assign an appropriate code from [block \[1265\] *Curettage and evacuation of uterus*](#).
- **medical methods** (eg [administration of pharmacological agent to induce abortion or labour](#)) – see [Alphabetic Index: Termination of pregnancy or Induction/labour](#). ~~induction of labour~~ Assign a code from block [\[1334\] *Medical or surgical induction of labour*](#) regardless of the duration of pregnancy and outcome
- ~~other methods (eg insertion of prostaglandin suppository). Code specific procedure(s) performed (see ACHI Alphabetic Index).~~

EXAMPLE 1:

Patient admitted for suction D&C (GA) for termination of pregnancy [\(13/40\)](#) ~~at 13 weeks~~ due to fetal anencephaly.

Codes: O04.9 *Medical abortion, complete or unspecified, without complication*
 O09.1 *Duration of pregnancy 5–13 completed weeks*
 O35.0 *Maternal care for (suspected) central nervous system malformation in fetus*
 35640-03 [1265] *Suction curettage of uterus*
 92514-99 [1910] *General anaesthesia, ASA 9~~2~~, nonemergency*

EXAMPLE 2:

Patient admitted for a suction D&C (GA) following fetal death in utero [\(13/40\)](#).

Codes: O02.1 *Missed abortion*
 O09.1 *Duration of pregnancy 5–13 completed weeks*
 35640-03 [1265] *Suction curettage of uterus*

EXAMPLE 3:

Patient admitted for medical abortion (21/40). Prostaglandin suppository inserted to induce labour. Single stillborn infant delivered vaginally without assistance.

Codes: O04.9 *Medical abortion, complete or unspecified, without complication*
 O09.3 *Duration of pregnancy 20–25 completed weeks*
 O80 *Single spontaneous delivery*
 O60.3 *Preterm delivery without spontaneous labour*
 Z37.1 *Single stillbirth*
 90467-00 [1336] *Spontaneous vertex delivery*
 90465-01 [1334] *Medical induction of labour, prostaglandin*

EXAMPLE 4:

Patient admitted for termination of pregnancy at (23/40) weeks due to diagnosis of liver and bony metastases two weeks ago. Mastectomy performed one year previously for infiltrating duct carcinoma of the breast. Medical and surgical induction of labour performed, followed by spontaneous vaginal delivery. Outcome single stillborn.

Codes: O04.9 *Medical abortion, complete or unspecified, without complication*
 O09.3 *Duration of pregnancy 20–25 completed weeks*
 O99.8 *Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium*
 C78.7 *Secondary malignant neoplasm of liver and intrahepatic bile duct*
 C79.5 *Secondary malignant neoplasm of bone and bone marrow*
 M8500/6 *Infiltrating duct carcinoma NOS, metastatic*
 C50.9 *Breast, unspecified*
 M8500/3 *Infiltrating duct carcinoma NOS*
~~O04.9 *Medical abortion, complete or unspecified, without complication*~~
 O80 *Single spontaneous delivery*
 O60.3 *Preterm delivery without spontaneous labour*
~~O09.3 *Duration of pregnancy 20–25 completed weeks*~~
 Z37.1 *Single stillbirth*
 90467-00 [1336] *Spontaneous vertex delivery*
 90465-05 [1334] *Medical and surgical induction of labour*

EXAMPLE 5:

Patient admitted for administration of mifepristone to induce abortion (16/40). They were monitored, and then discharged home. Readmitted the following day for administration of misoprostol to complete the termination of pregnancy. Discharged later in the day, without adverse effect.

Codes: Initial episode of care
 Z32.2 *Initiation of medical abortion*

009.2 Duration of pregnancy 14–19 completed weeks
90462-01 [1330] Termination of pregnancy [abortion procedure], not elsewhere classified
Subsequent episode of care
O04.9 Medical abortion, complete or unspecified, without complication
009.2 Duration of pregnancy 14–19 completed weeks
90462-01 [1330] Termination of pregnancy [abortion procedure], not elsewhere classified

EXAMPLE 6:

Patient was administered an agent to induce abortion (6/40) as an outpatient. They were admitted the following day for a suction D&C (GA), and discharged later in the day, without adverse effect.

Codes: Initial episode of care – outpatient presentation not coded

Subsequent episode of care
O04.9 Medical abortion, complete or unspecified, without complication
O09.1 Duration of pregnancy 5–13 completed weeks
35640-03 [1265] Suction curettage of uterus
92514-99 [1910] General anaesthesia, ASA 99

1521 CONDITIONS AND INJURIES IN PREGNANCY

A condition is classified as complicating pregnancy when it is associated with an increased risk of adverse fetal or maternal outcome.

Chapter 15 *Pregnancy, childbirth and the puerperium* lists codes for conditions that:

- exclusively or predominantly occur **only in a pregnant patient** (ie obstetric conditions/complications).

Assign codes for these conditions/complications that meet the criteria for assignment as per ACS 0001 *Principal diagnosis*, ACS 0002 *Additional diagnoses* and ACS 1500 *Diagnosis sequencing in ~~delivery~~ obstetric episodes of care*.

- may occur in any patient, but **may or may not cause complications in a pregnant patient** (ie nonobstetric conditions/complications). This standard provides guidelines for three mutually exclusive categories applicable to nonobstetric conditions/complications and injuries (trauma):
 - nonobstetric conditions complicating pregnancy
 - nonobstetric conditions not complicating pregnancy
 - nonobstetric injury/poisoning in pregnancy

NONOBSTETRIC CONDITIONS COMPLICATING PREGNANCY

A nonobstetric condition is a condition that may occur in any patient; these conditions may or may not complicate pregnancy.

Nonobstetric conditions are classified as complicating pregnancy when the condition meets the criteria in ACS 0001 *Principal diagnosis*, ACS 0002 *Additional diagnoses* or ACS 1500 *Diagnosis sequencing in ~~delivery~~ obstetric episodes of care* in an antepartum or delivery episode of care, and documentation specifies that the condition is complicating the pregnancy.

In the absence of specific documentation, a nonobstetric condition is classified as complicating pregnancy as indicated by two or more of the following criteria:

- Patient is admitted to an obstetric unit
- Patient is supervised/evaluated by an obstetrician/[gynaecologist \(or other medical clinician responsible for obstetric care\)](#), midwife and/or neonatologist (**Note:** evaluation may be performed remotely. That is, the clinician is located in another facility and consults via electronic methods (eg video/telephone conferencing))
- Fetal evaluation and/or monitoring is performed
- Patient is transferred to another facility for obstetric and/or neonatal care (see also ACS 1550 *Discharge/transfer in labour*).

CLASSIFICATION

- Assign a code from Chapter 15 *Pregnancy, childbirth and the puerperium* for a **nonobstetric condition complicating pregnancy** as per the Alphabetic Index (eg *Pregnancy/complicated by* or *condition/in pregnancy* or *condition/in pregnancy, childbirth or puerperium*)
- Assign as an **additional diagnosis** a code from another chapter to add specificity to the Chapter 15 code
- Once the decision has been made to classify one nonobstetric condition as complicating pregnancy, assign all other nonobstetric conditions in the episode of care as pregnancy complications (except for nonobstetric injuries/poisoning – see below)
- **Nonobstetric injuries/poisoning** (conditions classified to Chapter 19 *Injury, poisoning and certain other consequences of external causes*) are never assigned a code from Chapter 15 (see below – *Nonobstetric conditions not complicating pregnancy (Incidental pregnant state)* and *Nonobstetric injuries/poisoning in pregnancy (Supervision of normal pregnancy)*).

Note: ACHI codes are not included in the following examples.

EXAMPLE 1:

A pregnant patient was admitted with carpal tunnel syndrome for decompression of the median nerve. Following the procedure the patient was transferred to the obstetric unit, where she was reviewed by the midwifery staff.

Codes: O99.32 *Mental disorders and diseases of the nervous system in pregnancy, childbirth and the puerperium*
G56.0 *Carpal tunnel syndrome*

EXAMPLE 2:

A pregnant patient with pre-existing sickle cell anaemia was admitted with acute anaemia, for transfusion of packed cells. She was reviewed by the haematologist and obstetrician, and cardiotocography (CTG) performed.

Codes: O99.02 *Anaemia in ~~childbirth and the puerperium~~ pregnancy, with mention of pre-existing anaemia*
D57.1 *Sickle-cell anaemia without crisis*

EXAMPLE 3:

A pregnant patient was admitted for treatment of asthma. After 2 days she was transferred to the obstetric unit for observation of her gestational diabetes, and was reviewed by her obstetrician prior to discharge the following day.

Codes: O99.5 *Diseases of the respiratory system in pregnancy, childbirth and the puerperium*
J45.9 *Asthma, unspecified*

O24.49 *Diabetes mellitus arising during pregnancy, unspecified*

EXAMPLE 4:

A pregnant patient was admitted at 30 weeks gestation with diarrhoea and excessive vomiting resulting in dehydration. She was admitted to the obstetric unit, reviewed by her obstetrician and rehydrated with intravenous (IV) fluids. A diagnosis of viral gastroenteritis (NOS) was made and the patient discharged home after two days following cessation of symptoms.

| | | |
|--------|-------|--|
| Codes: | O98.5 | <i>Other viral diseases in pregnancy, childbirth and the puerperium</i> |
| | A08.4 | <i>Viral intestinal infection, unspecified</i> |
| | O99.2 | <i>Endocrine, nutritional and metabolic diseases in pregnancy, childbirth and the puerperium</i> |
| | E86 | <i>Volume depletion</i> |

EXAMPLE 5:

A pregnant patient was admitted by her obstetrician to the obstetric unit, with a diagnosis of deep vein thrombosis (DVT) in her left leg. She was treated with anticoagulant therapy and monitored by her obstetrician and the midwifery team.

| | | |
|--------|--------|--|
| Codes: | O22.9 | <i>Venous condition in pregnancy</i> |
| | I80.20 | <i>Phlebitis and thrombophlebitis of other deep vessels of lower extremities, not elsewhere classified</i> |

EXAMPLE 6:

A pregnant patient with elevated blood pressure (no diagnosis of hypertension) was admitted by her obstetrician to the obstetric unit for hourly BP (blood pressure) monitoring by midwifery staff. She was treated with calamine lotion for heat rash during the admission. Her blood pressure returned to normal and her rash was no longer evident, therefore she was discharged home the following day.

| | | |
|--------|-------|---|
| Codes: | O99.8 | <i>Other specified diseases and conditions in pregnancy, childbirth and the puerperium</i> |
| | R03.0 | <i>Elevated blood-pressure reading, without diagnosis of hypertension</i> |
| | O99.7 | <i>Diseases of the skin and subcutaneous tissue in pregnancy, childbirth and the puerperium</i> |
| | L74.0 | <i>Miliaria rubra</i> |

NONOBSTETRIC CONDITIONS NOT COMPLICATING PREGNANCY (INCIDENTAL PREGNANT STATE)

When a pregnant patient is admitted with a nonobstetric injury/poisoning, or with a nonobstetric condition that does not meet the criteria for a pregnancy complication listed above, do not classify the condition as a pregnancy complication.

CLASSIFICATION

- Assign codes as per the criteria in ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*
- Assign Z33 *Pregnant state, incidental* as an additional diagnosis

However, Z33 ~~should never be~~ is not assigned when a code from Chapter 15 *Pregnancy, childbirth and the puerperium* is assigned in the same episode of care.

Therefore, if a pregnant patient is admitted with a nonobstetric injury/poisoning **and**:

- a pregnancy complication is present or arises during the episode *and/or*
- the patient proceeds to labour and/or delivery during the episode of care

assign additional diagnoses from Chapter 15 and other chapters, if appropriate, instead of Z33.

EXAMPLE 7:

A pregnant patient was admitted with a fractured shaft of metacarpal (jammed hand in door).

Codes: S62.32 *Fracture of shaft of other metacarpal bone(s)*
 W23.0 *Caught, crushed, jammed or pinched in or between door*
 Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
 Z33 *Pregnant state, incidental*

EXAMPLE 8:

A pregnant patient was admitted to the day infusion centre with iron deficiency anaemia, for an iron infusion.

Codes: D50.9 *Iron deficiency anaemia, unspecified*
 Z33 *Pregnant state, incidental*

EXAMPLE 9:

A pregnant patient was admitted with carpal tunnel syndrome for decompression of the median nerve.

Codes: G56.0 *Carpal tunnel syndrome*
 Z33 *Pregnant state, incidental*

EXAMPLE 10:

A pregnant patient was admitted with a fractured shaft of metacarpal (jammed hand in door). Prior to discharge her membranes ruptured spontaneously. She was transferred to the labour ward and delivered a healthy term infant.

Codes: S62.32 *Fracture of shaft of other metacarpal bone(s)*
 W23.0 *Caught, crushed, jammed or pinched in or between door*
 Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
 O80 *Single spontaneous delivery*
 Z37.0 *Single live birth*

EXAMPLE 11:

A pregnant patient was admitted with a fractured shaft of metacarpal (jammed hand in door). Routine observations indicated that her blood pressure was elevated (no diagnosis of hypertension). She was transferred to the obstetric unit for blood pressure monitoring by midwifery staff. Her blood pressure returned to normal and she was discharged home the next day.

Codes: S62.32 *Fracture of shaft of other metacarpal bone(s)*
 W23.0 *Caught, crushed, jammed or pinched in or between door*
 Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
 O99.8 *Other specified diseases and conditions in pregnancy, childbirth and the puerperium*
 R03.0 *Elevated blood-pressure reading, without diagnosis of hypertension*

NONOBSTETRIC INJURIES/POISONING IN PREGNANCY (SUPERVISION OF NORMAL PREGNANCY)

Nonobstetric injuries/poisonings (conditions classified to Chapter 19 *Injury, poisoning and certain other consequences of external causes*) are never assigned a code from Chapter 15 *Pregnancy, childbirth and the puerperium*. However, if a pregnant patient with a nonobstetric injury/poisoning meets the criteria for a pregnancy complication, but there is no condition that qualifies for assignment of a code from Chapter 15, assign a code from Z34 *Supervision of normal pregnancy* as an additional diagnosis.

However, Z34.- ~~should is never not be~~ assigned [as an additional diagnosis in the above scenario](#) when a code from Chapter 15 *Pregnancy, childbirth and the puerperium* is assigned in the same episode of care.

Therefore, if a pregnant patient is admitted with a nonobstetric injury/poisoning and:

- a pregnancy complication is present or arises during the episode and/or
- the patient proceeds to labour and/or delivery during the episode of care

assign additional diagnoses from Chapter 15 and other chapters, if appropriate, instead of Z34.-.

EXAMPLE 12:

A pregnant patient was admitted with a fractured shaft of metacarpal (jammed hand in door). She was transferred to the obstetric unit for observation by midwifery team. No complications of her pregnancy were identified, therefore she was discharged home following treatment of her fracture.

Codes: S62.32 *Fracture of shaft of other metacarpal bone(s)*
W23.0 *Caught, crushed, jammed or pinched in or between door*
Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
Z34.9 *Supervision of normal pregnancy, unspecified*

EXAMPLE 13:

A pregnant patient was admitted to the obstetric unit for observation by the midwifery team following fall from a stepladder. She complained of pain in her ankle, but no injuries were identified on xray. She was discharged home the following morning.

Codes: S99.9 *Unspecified injury of ankle and foot*
W11 *Fall on and from ladder*
Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
Z34.9 *Supervision of normal pregnancy, unspecified*

EXAMPLE 14:

A pregnant patient was admitted with a fractured shaft of metacarpal (jammed hand in door). She was transferred to the obstetric unit for observation by the midwifery team of her pre-existing essential hypertension. Following treatment of her fracture and stabilisation of her hypertension she was discharged home.

Codes: S62.32 *Fracture of shaft of other metacarpal bone(s)*
W23.0 *Caught, crushed, jammed or pinched in or between door*
Appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
O10 *Pre-existing hypertension in pregnancy, childbirth and the puerperium*
I10 *Essential (primary) hypertension*

For guidelines regarding puerperal/postpartum conditions/complications see ACS 1548
Puerperal/postpartum condition or complication.

1544 **COMPLICATIONS FOLLOWING PREGNANCY WITH ABORTIVE OUTCOME ~~ABORTION AND ECTOPIC AND MOLAR PREGNANCY~~**

ABORTION WITH COMPLICATION(S) (O03-O06)

Codes from categories O03-O06 are assigned for admissions to **treat or perform** an abortion. Four character codes are assigned to classify complication(s) that occur during the **same episode of care** in which the abortion is treated or performed (ie the 'abortion' is the focus of care: also referred to as the 'current episode'):

- Identify a three character code for the type of abortion (ie O03 *Spontaneous abortion*, O04 *Medical abortion*, O05 *Other abortion* or O06 *Unspecified abortion*)
- Follow the Alphabetic Index at *Abortion/complicated*. Assign a fourth character from the options listed in the table under *Abortion (current episode) (O03-O06)*:
 - Subdivisions .0–.4 are assigned for **incomplete** abortion (ie where there are retained products of conception following abortion)
 - Subdivisions .5–.9 are assigned for **complete or unspecified** abortion (ie where there is no documentation of retained products of conception)
- Assign an additional diagnosis code from another chapter, where it adds specificity.

EXAMPLE 1:

Patient admitted with incomplete miscarriage (12/40) and acute parametritis. Intravenous antibiotics administered, and suction curettage performed (with general anaesthesia).

Codes: O03.0 *Spontaneous abortion, incomplete, complicated by genital tract and pelvic infection*

N73.0 *Acute parametritis and pelvic cellulitis*

O09.1 *Duration of pregnancy, 5–13 completed weeks*

35640-03 [1265] *Suction curettage of uterus*

92514-99 [1910] *General anaesthesia, ASA 99*

EXAMPLE 2:

Patient admitted with threatened abortion, for bedrest and observation. They progressed to complete miscarriage (5/40). Patient also developed and received treatment for a urinary tract infection.

Codes: O03.8 *Spontaneous abortion, complete or unspecified, with other and unspecified complications*

N39.0 *Urinary tract infection, site not specified*

O09.1 *Duration of pregnancy, 5–13 completed weeks*

EXAMPLE 3:

Patient admitted for administration of agent to induce abortion (6/40). Discharge delayed due to haemorrhage.

Codes: O04.6 *Medical abortion, complete or unspecified, complicated by delayed or excessive haemorrhage*
O09.1 *Duration of pregnancy, 5–13 completed weeks*
90462-01 [1330] *Termination of pregnancy, not elsewhere classified*

COMPLICATIONS FOLLOWING ABORTION

Codes from category O08 *Complications following abortion and ectopic and molar pregnancy* are assigned when a patient is readmitted with a ~~delayed~~ complication ~~from of~~ an abortion, but the abortion that was treated, performed or complete (eg complete spontaneous abortion) during a previous prior to the episode of care (ie the ‘complication’ is the focus of care; also referred to as the ‘subsequent episode’):-

- Assign a code from category O08 *Complications following abortion and ectopic and molar pregnancy*
- Assign a code from another chapter, where it adds specificity
- Sequence codes as per the guidelines in ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*.

The exception to the above guidelines is admission with **retained products of conception** following abortion – see *Admission for retained products of conception following abortion*.

EXAMPLE 4:

Patient admitted with pelvic infection following a complete spontaneous abortion two weeks previous (no evidence of retained products of conception). Antibiotics administered.

Codes: O08.0 *Genital tract and pelvic infection following abortion and ectopic and molar pregnancy*

In this example, the admission is for treatment of the complication only, as the spontaneous abortion occurred prior to the episode of care. An additional code is not required for the pelvic infection (see ACS 0015 *Combination codes*).

EXAMPLE 5:

Patient admitted with acute vaginitis following a medical abortion two days previous (no evidence of retained products of conception). Antibiotics administered.

Codes: N76.0 *Acute vaginitis*
O08.0 *Genital tract and pelvic infection following abortion and ectopic and molar pregnancy*

In this example, the admission is for treatment of the complication only, as the medical abortion was performed prior to the episode of care.

EXAMPLE 6:

Patient admitted to facility 1 for a medical abortion (13/40) (suction D&C with GA); transferred to facility 2 for ICU admission following cardiac arrest.

Codes: **Facility 1:**

O04.8 Medical abortion, complete or unspecified, with other and unspecified complications

O09.1 Duration of pregnancy, 5–13 completed weeks

I46.0 Cardiac arrest with successful resuscitation

35640-03 [1265] Suction curettage of uterus

92514-99 [1910] General anaesthesia, ASA 99

Facility 2:

I46.0 Cardiac arrest with successful resuscitation

O08.8 Other complications following abortion and ectopic and molar pregnancy

In this example, the first admission (facility 1) was to perform the medical abortion, and the complication occurred during the episode of care. The second admission (facility 2) is for treatment of the complication only.

COMPLICATIONS OF ECTOPIC OR MOLAR PREGNANCY OR OTHER ABNORMAL PRODUCTS OF CONCEPTION

- Assign a code for ectopic or molar pregnancy or other abnormal products of conception (ie O00.- Ectopic pregnancy, O01.- Hydatidiform mole or O02.- Other abnormal products of conception)
- Assign a code from category O08 Complications following abortion and ectopic and molar pregnancy
- Assign an additional diagnosis code from another chapter, where it adds specificity.

EXAMPLE 7:

Patient admitted for ruptured tubal pregnancy (5/40), with shock.

Codes: O00.1 Tubal pregnancy

 O08.3 Shock following abortion and ectopic and molar pregnancy

 O09.1 Duration of pregnancy, 5–13 completed weeks

~~An O08 code should also be assigned as an additional code to identify a complication associated with categories O00–O02 (Ectopic pregnancy, Hydatidiform mole, Other abnormal products of conception).~~

ADMISSION FOR RETAINED PRODUCTS OF CONCEPTION FOLLOWING ABORTION

~~If a patient is admitted because of retained products of conception from an abortion treated during a previous episode of care, the abortion should be coded as a complication of a current, **incomplete** abortion (O03–O06 with a fourth character of .0–4).~~

An admission for retained products of conception following abortion (where the abortion was treated, performed or occurred prior to the episode of care), is **not** classified as a complication of abortion.

Where a patient is admitted with retained products of conception:

- following an abortion (except missed abortion), assign a code for an **incomplete** abortion (O03–O06 with a fourth character .0–4)
- following a missed abortion, assign O02.1 Missed abortion
- assign an additional diagnosis code from another chapter, where it adds specificity

- do not assign a code from category O08 *Complications following abortion and ectopic and molar pregnancy.*

For guidelines regarding staged abortion, see ACS 1511 *Termination of pregnancy (abortion).*

EXAMPLE 8:

Patient attended outpatient facility for a medical abortion (5/40). Three days later, they were admitted with haemorrhage and retained products of conception.

Codes: O04.1 *Medical abortion, incomplete, complicated by delayed or excessive haemorrhage*
O09.1 *Duration of pregnancy 5–13 completed weeks*

EXAMPLE 9:

Patient discharged with a diagnosis of missed abortion (5/40). They were readmitted two days later with retained products of conception.

Codes: Admission 1 – O02.1 *Missed abortion*
O09.1 *Duration of pregnancy 5–13 completed weeks*
Admission 2 – O02.1 *Missed abortion*
O09.1 *Duration of pregnancy 5–13 completed weeks*

EXAMPLE 10:

Patient admitted one week following a miscarriage (12/40), with retained products of conception and acute pelvic peritonitis. Intravenous antibiotics administered, and suction curettage performed (with general anaesthesia).

Codes: O03.0 *Spontaneous abortion, incomplete, complicated by genital tract and pelvic infection*
N73.3 *Female acute pelvic peritonitis*
O09.1 *Duration of pregnancy, 5–13 completed weeks*
35640-03 [1265] *Suction curettage of uterus*
92514-99 [1910] *General anaesthesia, ASA 99*

However, if a patient is admitted because of retained products of conception following a **missed abortion** during a previous episode of care, code the missed abortion as the principal diagnosis to reflect the original episode's diagnosis. In this instance, the patient is still suffering from a 'missed abortion' and not a complication of abortion.

Assign an additional code from O09 *Duration of pregnancy* which reflects the duration of pregnancy at the time the abortion occurred (which may be prior to this episode of care). If this is not known, assign O09.9 *Unspecified duration of pregnancy*. A code from O08 *Complications following abortion and ectopic and molar pregnancy* is not assigned.

EXAMPLE 1:

~~Ruptured tubal pregnancy with shock.~~

~~Codes: O00.1 *Tubal pregnancy*
O08.3 *Shock following abortion and ectopic and molar pregnancy*
O09. *Duration of pregnancy*~~

EXAMPLE 2:

~~Incomplete abortion with perforation of uterus.~~

~~Codes: — O06.3 — *Unspecified abortion, incomplete, with other and unspecified complications*~~

~~— O71.02 — *Traumatic rupture of uterus before onset of labour*~~

~~— O09. — *Duration of pregnancy*~~

EXAMPLE 3:

~~Disseminated intravascular coagulation following abortion performed two days ago at another hospital.~~

~~Code: — O08.1 — *Delayed or excessive haemorrhage following abortion and ectopic and molar pregnancy*~~

~~No additional diagnosis code is required as the abortion was performed during a previous episode of care.~~

EXAMPLE 4:

~~Haemorrhage and retained products of conception following a medical abortion performed during a previous admission.~~

~~Codes: — O04.1 — *Medical abortion, incomplete, complicated by delayed or excessive haemorrhage*~~

~~— O09. — *Duration of pregnancy*~~

EXAMPLE 5:

~~Retained products of conception following a previous admission for missed abortion with suction curettage.~~

~~Codes: — O02.1 — *Missed abortion*~~

~~— O09. — *Duration of pregnancy*~~

1548 PUERPERAL/POSTPARTUM CONDITION OR COMPLICATION

...

1549 STREPTOCOCCAL GROUP B INFECTION/CARRIER IN PREGNANCY

Infections due to group B streptococci (GBS) in pregnant women are quite rare. Often, a low vaginal swab will identify GBS, however, the woman will have no symptoms and is simply a carrier of the bacteria. In Australia, the prevalence of GBS vaginal carriage has been estimated at 12%–15%. Approximately 1%–2% of infants born to women carrying GBS develop early-onset group B streptococcal disease (EOGBSD) with about 6% of cases being fatal. The risks of EOGBSD and death are particularly high in preterm infants (Connellan & Wallace 2000). A pregnant patient may be admitted with an infection (genital/genitourinary tract) due to group B streptococci (GBS), or they may be an asymptomatic carrier. Prophylactic treatment may be ~~given~~ administered to ensure that the organism is not passed onto the baby during ~~birth~~ delivery.

Classification

The following coding rules apply for obstetric patients with Strep B:

If no prophylactic treatment is given, assign:

Z22.3 — *Carrier of other specified bacterial diseases*

- Where a pregnant patient is documented as a **carrier of GBS** (eg GBS +) but **no prophylactic treatment** is administered, assign:

Z22.3 *Carrier of other specified bacterial diseases*

If prophylactic treatment (eg penicillin) is given, assign:

Z22.3 — *Carrier of other specified bacterial diseases*

and

Z29.2 — *Other prophylactic pharmacotherapy*

- Where a pregnant patient is documented as a **carrier of GBS** and **prophylactic treatment is administered**, assign:

Z22.3 *Carrier of other specified bacterial diseases*

and

Z29.2 *Other prophylactic pharmacotherapy*

If there is documentation of a genitourinary tract infection due to Strep B, assign:

O23.9 — *Other and unspecified genitourinary tract infection in pregnancy*

and

B95.1 — *Streptococcus, group B, as the cause of diseases classified to other chapters*

- Where a pregnant patient is documented with a **genital/genitourinary tract infection** due to GBS, assign:

O23.- *Infections of genitourinary tract in pregnancy* (see *Alphabetic Index: Infection, infected/in/pregnancy*)

and

B95.1 *Streptococcus, group B, as the cause of diseases classified to other chapters*

1550 DISCHARGE/TRANSFER IN LABOUR

...

1551 OBSTETRIC PERINEAL LACERATIONS/GRAZES

DEFINITIONS

Obstetric perineal grazes and lacerations/grazes (ruptures or tears)

Obstetric perineal grazes (involving fourchette, labia, skin, vagina and vulva) are superficial wounds ~~which that~~ may cause little or no bleeding, and do not usually require suturing.

Obstetric perineal lacerations (ruptures or tears) are more severe injuries and are divided into four categories – first, second, third and fourth degree. All four degrees usually require suturing. Third and fourth degree lacerations require additional care, ~~because as~~ involvement of the anal sphincter may lead to faecal incontinence.

Episiotomy

An episiotomy is a surgical incision into the perineum, performed to facilitate delivery.

Episiotomy extended by laceration (rupture or tear)

~~The episiotomy originally performed extends during the delivery of the baby. The extension results in spontaneous perineal trauma and may include the surrounding structures, such as anal sphincter and mucosa.~~ An episiotomy may extend during delivery due to spontaneous perineal rupture. The extension may include the surrounding structures, such as the anal sphincter and mucosa.

Laceration (rupture or tear) extended by episiotomy

~~There may be an initial small laceration of the perineum which requires an extension via episiotomy for the baby to be delivered.~~ A traumatic perineal laceration (rupture or tear) may be extended with an episiotomy, to facilitate delivery and minimise further damage to the surrounding tissues.

CLASSIFICATION

Perineal grazes and lacerations (ruptures or tears) ~~Laceration/grazes~~

Assign a code from category O70 Perineal laceration during delivery for an obstetric perineal graze or laceration (rupture or tear):

- that meets the criteria in ACS 0002 Additional diagnoses (eg requires repair/suture)

OR

- where documentation indicates that repair is required, but is not performed due to patient choice, or transfer to another facility prior to repair. Also assign a code from category Z53 Persons encountering health services for specific procedures, not carried out.

~~Obstetric perineal lacerations/grazes should only be assigned as an additional diagnosis in the delivery episode.~~

~~Perineal grazes and lacerations that are not sutured are not coded, with the exception of perineal lacerations/grazes where repair is clinically warranted but is not carried out, for example, where the patient chooses not to have their tear repaired. In this scenario assign the appropriate code for the~~

~~laceration/graze with the addition of a code from Z53 Persons encountering health services for specific procedures, not carried out.~~

~~If 'labial graze' is documented and has been sutured, assign O70.0 First degree perineal laceration during delivery.~~

Episiotomy extended by laceration (rupture or tear)

~~An additional code is required for the repair of the laceration because, in this scenario, the laceration is usually more severe and occasionally may involve the sphincter (third and fourth degree tears).~~

~~Two procedure codes are required: 90472-00 [1343] Episiotomy, together with the appropriate code from block [1344] Postpartum suture for the repair of the laceration.~~

Assign:

- 90472-00 [1343] Episiotomy

and

- a code from block [1344] Postpartum suture (for the repair of the laceration).

Laceration (rupture or tear) extended by episiotomy

~~Only one procedure code, 90472-00 [1343] Episiotomy, is required as the repair of the initial laceration is inherent in the episiotomy code.~~

Assign 90472-00 [1343] Episiotomy only.

A code for repair of the initial traumatic laceration (rupture or tear) is not assigned, as it is inherent in the episiotomy code.

Multiple perineal lacerations (ruptures or tears)

- Codes in category O70 Perineal laceration during delivery represent a continuum. Where multiple perineal lacerations (ruptures or tears) of different degrees are documented, assign a code for the highest (most severe) degree only
- ACHI codes for repair of perineal lacerations (ruptures or tears) include repair of multiple genitourinary sites (see ACHI Alphabetic Index: Repair/laceration/obstetric, current and Excludes notes in block [1344] Postpartum suture). Assign as applicable:

- 90481-00 [1344] Suture of first or second degree tear of perineum

OR

- 16573-00 [1344] Suture of third or fourth degree tear of perineum

EXAMPLE 1:

Patient had second degree perineal tear, and bilateral labial tears sutured post delivery.

Codes: O70.1 Second degree perineal laceration during delivery

90481-00 [1344] Suture of first or second degree tear of perineum

In this example, O70.1 is assigned, as it is more severe. 90481-00 [1344] includes repair of the labia.

EXAMPLE 2:

Patient had post delivery repair of second degree perineal tear, and a high vaginal wall tear.

Codes: O70.1 *Second degree perineal laceration during delivery*

O71.4 *Obstetric high vaginal laceration (alone)*

90481-00 [1344] *Suture of first or second degree tear of perineum*

In this example, O70.1 and O71.4 are assigned as the patient has tears in both sites. 90481-00 [1344] is assigned by following the Alphabetic Index (*Repair/laceration/obstetric, current/vagina/with perineal suture*) and the *Excludes* note at 90479-00 [1344].

1605 CONDITIONS ORIGINATING IN THE PERINATAL PERIOD

DEFINITION

~~The perinatal period is defined i~~n Australia as:

...

CLASSIFICATION

Codes from ICD-10-AM Chapter 16 *Certain conditions originating in the perinatal period* ~~apply to~~ are assigned for conditions ~~which that have their~~ originate in the perinatal period even though death or morbidity may occur later.

In a ~~preterm~~ mature infant's birth episode, the principal diagnosis will generally be either P07.2- *Extreme immaturity* or P07.3- *Other* and unspecified *preterm infants*.

EXAMPLE 1:

A premature baby girl (born at 33 weeks; birth weight 1300g), was sent to the special care nursery with intrauterine growth retardation (IUGR), jaundice and hypoglycaemia. The infant was treated with 24 hours of phototherapy, intravenous (IV) dextrose and frequent oral feeds.

Codes: P07.32 ~~Other p~~ P *Preterm infant, 32 or more completed weeks but less than 37 completed weeks*

P07.12 *Other low birth weight 1250–1499g*

P05.9 *Slow fetal growth, unspecified*

P59.0 *Neonatal jaundice associated with preterm delivery*

P70.4 *Other neonatal hypoglycaemia*

Z38.0 *Singleton, born in hospital*

90677-00 [1611] *Other phototherapy, skin*

96199-19 [1920] *Intravenous administration of pharmacological agent, other and unspecified pharmacological agent*

1607 NEWBORN/NEONATE

DEFINITION

The terms ‘newborn’ and ‘neonate’ are used interchangeably in ICD-10-AM.

A neonate is a liveborn who is less than 28 days old.

...

~~Note:—The following important rules should be applied if newborn episodes of care are coded in your state/territory:~~

CLASSIFICATION

Assign a code from category Z38 Liveborn infants according to place of birth:

- for an infant:
 - born in hospital
 - born outside the hospital, but admitted **immediately post delivery** (ie the time between delivery and admission to an acute care facility, allowing for transportation over long distances)
- as the principal diagnosis **only** when a newborn is completely well
- as an additional diagnosis when a newborn has **any morbid condition**, or observation for a suspected condition (classified to category Z03.7 *Observation and evaluation of newborn for suspected condition not found*)
- independent of the admitted patient care type.

Do not assign a code from category Z38 for **second or subsequent** admissions.

~~1. A code from category Z38 Liveborn infants according to place of birth should be sequenced as the principal diagnosis **only** when the newborn is completely well (including those babies who have had a circumcision performed). This category includes babies born:~~

- ~~• in hospital~~
- ~~• outside the hospital and admitted immediately post delivery.~~

EXAMPLE 1:

~~Newborn, born at home, no morbidity, vaginal delivery.~~

~~Code: Z38.1 *Singleton, born outside hospital*~~

EXAMPLE 1:

Single infant born in hospital, no morbidity documented.

Code: Z38.0 *Singleton, born in hospital*

EXAMPLE 2:

Single infant born on the way to hospital. Transferred by ambulance to hospital with mother; newborn completely well.

Code: Z38.1 *Singleton, born outside hospital*

EXAMPLE 3:

Single infant born in hospital, no morbidity documented. Circumcision performed at parent's request prior to discharge.

Code: Z38.0 *Singleton, born in hospital*
 Z41.2 *Routine and ritual circumcision*
 30653-00 [1196] *Male circumcision*

~~2. Any morbid condition arising during the birth episode should be sequenced before Z38 Liveborn infants according to place of birth.~~

EXAMPLE 2:

~~Newborn, born in hospital, with hypoglycaemia, vaginal delivery.~~

~~Codes: P70.4 *Other neonatal hypoglycaemia*
 Z38.0 *Singleton, born in hospital*~~

EXAMPLE 4:

Single infant born in hospital, treated for hypoglycaemia.

Codes: P70.4 *Other neonatal hypoglycaemia*
 Z38.0 *Singleton, born in hospital*

~~3. A code from category Z38 Liveborn infants according to place of birth is not required when coding second or subsequent admissions.~~

EXAMPLE 5:

~~Male newborn, transferred from hospital A after elective low segment caesarean section, to hospital B, Day 2, with respiratory distress syndrome and pneumothorax.~~ Single infant born at facility 1; transferred to facility 2 due to respiratory distress syndrome and pneumothorax.

~~Hospital A~~ Facility 1 codes: P22.0 *Respiratory distress syndrome of newborn*
 P25.1 *Pneumothorax originating in the perinatal period*
 Z38.0 *Singleton, born in hospital*

~~Hospital B~~ Facility 2 codes: P22.0 *Respiratory distress syndrome of newborn*
 P25.1 *Pneumothorax originating in the perinatal period*

EXAMPLE 6:

Newborn, readmitted to hospital at seven days of age, for circumcision.

Codes: Z41.2 *Routine and ritual circumcision*
 30653-00 [1196] *Male circumcision*

~~1618 LOW BIRTH WEIGHT AND GESTATIONAL AGE~~

~~BIRTH WEIGHT AND GESTATIONAL AGE~~

~~The codes P07.0 *Extremely low birth weight* and P07.1 *Other low birth weight* refer to what the baby weighed at the time of birth, not the weight at subsequent episodes of care.~~

~~The codes P07.2 *Extreme immaturity* and P07.3 *Other preterm infants* refer to how long the gestation period (ie the duration of the fetus in uterus) is for the baby, not how old the baby is (or what their age is in adjusted weeks).~~

~~When using codes from category P07 *Disorders related to short gestation and low birth weight, not elsewhere classified* for episodes subsequent to the birth episode, the fifth character must correspond to the birth weight and gestational age of the birth episode.~~

~~LOW BIRTH WEIGHT~~

~~A code for low birth weight at normal gestational age should only be assigned on the infant's record when this is documented by the obstetrician/clinician/midwife and meets the criteria of an additional diagnosis. It should not be assigned routinely for all babies less than 2500g at term.~~

~~The correct codes for this condition are P05.0 *Light for gestational age* or P05.1 *Small for gestational age*. The codes from P07 *Disorders related to short gestation and low birth weight, not elsewhere classified* are intended for use where low birth weight occurs in a premature infant.~~

STANDARDS INDEX

Standard numbers appear immediately after each entry.

A

Abortion (for) 1511

- incomplete 1544
- induced 1511
- medical 1511
- missed 1544
- [staged 1511](#)
- [surgical 1511](#)
- threatened 0010
- with
 - - complication 1544
 - - liveborn infant 1511

Additional

- diagnosis 0002; 0010
- - ~~delivery~~ [obstetric](#) episodes of care 1500

C

...

Complication(s) (of)

- antiretroviral therapy 0102
- cardiac/vascular revision/reoperation procedures 0934
- coronary bypass graft 0909
- diabetes — see *Diabetes, diabetic (mellitus)*
- following
 - - abortion 1544
 - - ectopic/molar pregnancy 1544
 - - [pregnancy with abortive outcome 1544](#)
- intraoperative 1904

...

Condition(s)

- acute — see *also condition*

...

- puerperal period 1548
- [relating to lactation 1548](#)
- residual 0001
- suspected 0001; 0012
 - - newborn or infant 1611
- threatened 0010
- underlying 0001

D

Diagnosis (in)

- additional 0002
- - in
- - - ~~delivery~~ [obstetric](#) episodes of care 1500
- - - same-day endoscopy 0051; 0052
- conflict with histology 0010
- double coding 0025
- for surgery not performed 0011
- multiple coding 0002
- neoplasm previously excised 0236
- principal (for) 0001
- - acute care, with
- - - mental health 0012
- - - nursing home type 2105
- - - rehabilitation 2104
- - angina 0940
- - assessment 2108
- - burns 1911
- - convalescence 2103; 2104
- - - non-acute 2117
- - - post acute 2103
- - [delivery prior to admitted episode of care 1548](#)
- - - ~~episodes of care 1500~~
- - - ~~prior to admitted episode of care 1548~~
- - dialysis 0001; 1404
- - endoscopy, same-day 0051; 0052
- - febrile convulsion 1809
- - history of malignancy 2112
- - injury 1906
- - - multiple 1907
- - lymphangitis carcinomatosis 0218
- - morphology 0233
- - multiple 0001
- - neoplasm 0236
- - newborn 1607
- - non-acute care 2117
- - ~~obstetrics 1500~~
- - - complication 1521
- - - [episodes of care 1500](#)
- - palliative care 2116
- - plastic surgery 1204
- - postpartum 1548
- - puerperal period 1548
- - radiotherapy 0229
- - rehabilitation 2104
- - respite care 2117
- - sepsis/septicaemia 0109; 0110
- - syndromes 0005

G

...

Generator, pulse 0936

~~Gestational age~~ 1618

Gestational diabetes 0401

L

...

Loss

- consciousness 1905

- skin 1910

~~Low birth weight~~ 1618

...

P

...

Pregnant, pregnancy

- molar/ectopic

- - with complication 1544

- state, incidental 1521

- termination 1511

- with

- - abortive outcome 1511

- - - [with complication 1544](#)

- - diabetes 0401

- - mental illness 0505

- - nonobstetric conditions and injuries 1521

- - viral hepatitis 0104



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

ICD-10-AM Obstetrics review

Introduction/Rationale:

This addenda proposal incorporates a number of issues relating to the classification of obstetrics in ICD-10-AM:

- Atonic uterus (Q3135)
- Failed induction of labour (TN709/P203)
- Failed trial of labour (TN480)
- Hypoglycaemia in gestational diabetes mellitus (TN1261/Q3124)
- Increase S/D or AEDF (TN802/Q2853)
- Mullerianosis (TN1007/Q2955)
- Placental site nodules (Q3208)
- Postpartum haemorrhage (Q3126)
- Pre-eclampsia and HELLP syndrome (Q3241)
- Pregnancy complicated by genital herpes (Q3262)
- Pregnancy with abortive outcome (TN788)
- *Z35 Supervision of high-risk pregnancy* (TN705/P127)
- Stromal endometriosis (Q3246)
- Retained/adherent placenta (P347)
- WHO URC updates 2015 and 2016

Summary of issues and proposed addenda:

Postpartum haemorrhage (and underlying cause)

ICD-10 classifies postpartum haemorrhage (PPH) to *O72 Postpartum haemorrhage*. Conditions identified as the underlying cause of PPH (eg atonic uterus, retained placenta) are inherent in *O72* in single condition coding.

In order to apply the ICD-10-AM principles of multiple condition coding, ACCD proposes to separate the concepts of atonic uterus, retained placenta and membranes, and postpartum haemorrhage. This will allow assignment of both a code from category *O72*, and the underlying cause, where supported by documentation in the clinical record.

Additionally, *O72.0 Third-stage haemorrhage*, *O72.1 Other immediate postpartum haemorrhage* and *O72.2 Delayed and secondary postpartum haemorrhage* are differentiated by onset of haemorrhage. Glossary descriptions are proposed to identify these differences, for consistency with definitions in ICD-11.

Retained/adherent placenta

There are three types of retained placenta:

- Trapped placenta; placenta is detached from the uterine wall, but trapped behind a closed cervix
- Placenta adherens (simple adherent placenta); placenta is adherent to the uterine wall (due to failure of the myometrium to contract behind the placenta), but is easily separated manually
- Morbidly adherent placenta; placenta is abnormally implanted into the uterine wall (placenta accreta, increta and percreta)

ACCD proposes to separate the classification of placenta adherens (adherent placenta NOS) from O43.2 *Morbidly adherent placenta*.

Failed induction of labour

ACCD proposes creation of four character codes to classify failed medical and surgical induction of labour.

Failed trial of labour (and failure to progress)

ACCD proposes indexing amendments to clarify code assignment for failed trial of labour and failure to progress unspecified (ie with or without underlying cause identified).

Pre-eclampsia and HELLP syndrome

ACCD proposes to amend the *Glossary description* at O14.2 *HELLP syndrome*, and relevant index entries to specify that severe pre-eclampsia is inherent in HELLP syndrome.

Other issues included in this addenda proposal

A major review of ICD-10-AM Chapter 15 *Pregnancy, childbirth and the puerperium* was undertaken for Tenth Edition, with the focus primarily on pregnancy complications. In addition to the above coding query and public submission derived issues, this addenda proposal continued the review of Chapter 15, with the focus on O00-O08 *Pregnancy with abortive outcomes*.

Other proposed amendments include:

- Deletion of a number of *Excludes* notes throughout ICD-10-AM for conditions 'complicating abortion or ectopic or molar pregnancy' to promote multiple condition coding (that is, assignment of a code from another chapter to provide specificity in addition to a code from O00-O08 *Pregnancy with abortive outcome*). The ICD-10 based *Excludes* notes were designed for single condition coding.
- Amendments to the code attributes (eg *Inclusion* terms, *Instructional* notes) at O03-O06 (especially the fourth character subdivisions) to clarify that codes from other chapters may be assigned to add specificity
- Amendments to code titles in Chapter 15 to specify '*in pregnancy, childbirth and puerperium*' (where applicable)

A number of issues relating to neonates are also included in this addenda proposal, due to the close relationship with obstetric issues.

See also TN1224 ACHI Obstetrics review, TN1225 ACS Obstetrics review, and TN1350 Labour without delivery & Delivery outside hospital.

ACCD PROPOSAL

Tabular List

A40

Streptococcal sepsis

▽ 0110

Includes: streptococcal septicaemia

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

Excludes: following:

- ~~abortion or ectopic or molar pregnancy (O03–O07, O08.0)~~
- immunisation (T88.0)
- infusion, transfusion or therapeutic injection (T80.2)
- neonatal (P36.0–P36.1)

...

A41

Other sepsis

▽ 0110

Includes: septicaemia

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

Excludes: bacteraemia NOS (A49.9)

following:

- ~~abortion or ectopic or molar pregnancy (O03–O07, O08.0)~~
- immunisation (T88.0)
- infusion, transfusion or therapeutic injection (T80.2)
- sepsis (due to) (in):
 - actinomycotic (A42.7)
 - anthrax (A22.7)
 - candidal (B37.7)
 - *Erysipelothrix* (A26.7)
 - extraintestinal yersiniosis (A28.2)
 - gonococcal (A54.8)
 - herpesviral (B00.7)
 - listerial (A32.7)
 - meningococcal (A39.2–A39.4)
 - neonatal (P36.-)
 - streptococcal (A40.-)
 - tularaemia (A21.7)
- septic:
 - melioidosis (A24.1)
 - plague (A20.7)
- toxic shock syndrome (A48.3)

...

D65

Disseminated intravascular coagulation [defibrination syndrome]

Afibrinogenaemia, acquired

Consumption coagulopathy

Diffuse or disseminated intravascular coagulation [DIC]

Fibrinolytic haemorrhage, acquired

Purpura:

- fibrinolytic
- fulminans

Excludes: that ~~(complicating):~~ [in newborn \(P60\)](#)

- ~~abortion or ectopic or molar pregnancy (O00–O07, O08.1)~~
- ~~in newborn (P60)~~

...

D68 Other coagulation defects

~~Excludes~~—those complicating abortion or ectopic or molar pregnancy (O00–O07, O08.1)

D68.0 Von Willebrand's disease
...

G08 Intracranial and intraspinal phlebitis and thrombophlebitis

...
~~Excludes~~: intracranial phlebitis and thrombophlebitis: [of nonpyogenic origin \(I67.6\)](#)
• ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.7)~~
• ~~of nonpyogenic origin (I67.6)~~
nonpyogenic intraspinal phlebitis and thrombophlebitis (G95.1)

G93 Other disorders of brain

...
G93.1 Anoxic brain damage, not elsewhere classified
~~Excludes~~: complicating: [surgical and medical care \(G97.8\)](#)
• ~~abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
• ~~surgical and medical care (G97.8)~~
neonatal anoxia (P21.9)

I26 Pulmonary embolism

Includes: pulmonary (artery)(vein):
• infarction
• thromboembolism
• thrombosis

~~Excludes~~—~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.2)~~

I26.0 Pulmonary embolism with mention of acute cor pulmonale
Acute cor pulmonale NOS

I46 Cardiac arrest

Note: ...

~~Excludes~~: cardiogenic shock (R57.0)
~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
...

I46.0 Cardiac arrest with successful resuscitation

I47 Paroxysmal tachycardia

~~Excludes~~: ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
tachycardia:
• NOS (R00.0)
• sinoauricular NOS (R00.0)
• sinus [sinusal] NOS (R00.0)

I49 Other cardiac arrhythmias

Excludes: bradycardia:
• NOS (R00.1)
• sinoatrial (R00.1)
• sinus (R00.1)
• vagal (R00.1)
~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
neonatal cardiac dysrhythmia (P29.1)

...

I50 Heart failure

Use additional code (Z99.4) if mention of artificial heart dependence.

Excludes: ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
due to hypertension:
• NOS (I11.0)
• with renal disease (I13.-)
neonatal cardiac failure (P29.0)

...

I74 Arterial embolism and thrombosis

Includes: infarction:
• embolic
• thrombotic
occlusion:
• embolic
• thrombotic

Excludes: embolism and thrombosis:
• basilar (I63.0–I63.2, I65.1)
• carotid (I63.0–I63.2, I65.2)
• cerebral (I63.3–I63.5, I66.9)
~~• complicating abortion or ectopic or molar pregnancy (O00–O07, O08.2)~~
• coronary (I21–I25)
• mesenteric (K55.0)
• precerebral (I63.0–I63.2, I65.9)
• pulmonary (I26.-)
• renal (N28.0)
• retinal (H34.-)
• vertebral (I63.0–I63.2, I65.0)

...

I80 Phlebitis and thrombophlebitis

Includes: endophlebitis
inflammation, vein
periphlebitis
suppurative phlebitis

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

Excludes: phlebitis and thrombophlebitis (of):
~~• complicating abortion or ectopic or molar pregnancy (O00–O07, O08.7)~~
• intracranial:
• nonpyogenic (I67.6)
• NOS (G08)
• septic (G08)
• intraspinal:
• nonpyogenic (G95.1)
• NOS (G08)
• septic (G08)
• portal (vein) (K75.1)
postphlebitic syndrome (I87.0)
thrombophlebitis migrans (I82.1)

...

I82**Other venous embolism and thrombosis**

Excludes: venous embolism and thrombosis (of):

- cerebral (I63.6, I67.6)
- ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.7)~~
- coronary (I21–I25)
- intracranial:
 - nonpyogenic (I67.6)
 - NOS (G08)
 - septic (G08)
- intraspinal:
 - nonpyogenic (G95.1)
 - NOS (G08)
 - septic (G08)
- lower extremities (I80.0–I80.3)
- mesenteric (K55.0)
- portal (I81)
- pulmonary (I26.-)
- upper extremities (I80.4-)

...

K65**Peritonitis**

Excludes: peritonitis:

- aseptic (T81.6)
- benign paroxysmal (E85.0)
- chemical (T81.6)
- due to talc or other foreign substance (T81.6)
- neonatal (P78.0–P78.1)
- pelvic, female (N73.3–N73.5)
- periodic familial (E85.0)
- puerperal (O85)
- with ~~or following:~~
 - ~~abortion or ectopic or molar pregnancy (O00–O07, O08.0)~~
 - appendicitis (K35.-)
 - diverticular disease of intestine (K57.-)

...

K72**Hepatic failure, not elsewhere classified**

...

Excludes: alcoholic hepatic failure (K70.4)

- ~~hepatic failure complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
- icterus of fetus and newborn (P55–P59)
- viral hepatitis (B15–B19)
- with toxic liver disease (K71.1)

...

K76**Other diseases of liver**

...

K76.7 Hepatorenal syndrome

~~*Excludes*—following labour and delivery (O90.4)~~

K76.8 Other specified diseases of liver

- Focal nodular hyperplasia of liver
- Hepatoptosis
- Simple cyst of liver

K76.9 Liver disease, unspecified

...

KIDNEY FAILURE

(N17–N19)

▽ 1438

Use additional external cause code (Chapter 20) to identify external agent.

Excludes: congenital kidney failure (P96.0)
drug- and heavy-metal-induced tubulo-interstitial and tubular conditions (N14.-)
extrarenal uraemia (R39.2)
haemolytic-uraemic syndrome (D59.3)
hepatorenal syndrome:
• NOS (K76.7)
• postpartum (O90.4)
~~kidney failure:~~
~~• complicating abortion or ectopic or molar pregnancy (O00–O07, O08.4)~~
~~• following labour and delivery (O90.4)~~
prerenal uraemia (R39.2)

...

OTHER DISEASES OF URINARY SYSTEM

(N30–N39)

Excludes: urinary infection: [with urolithiasis \(N20–N23\)](#)
~~• complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)~~
~~• with urolithiasis (N20–N23)~~

...

DISORDERS OF BREAST

(N60–N64)

Excludes: disorders of breast associated with childbirth [\(lactation\)](#) [\(pregnancy\)](#) [\(puerperium\)](#) (O91–O92)

...

INFLAMMATORY DISEASES OF FEMALE PELVIC ORGANS

(N70–N77)

~~**Excludes:** complicating abortion or ectopic or molar pregnancy (O00–O07, O08.0)~~

N70 Salpingitis and oophoritis

...

N97 Female infertility

▽ 1437

Includes: inability to achieve a pregnancy
~~sterility, female NOS~~

Excludes: relative infertility (N96)

N97.0 Female infertility associated with anovulation

N97.1 Female infertility of tubal origin
~~Infertility: Associated with congenital anomaly of tube~~
• [associated with congenital anomaly of \(fallopian\) tube](#)
• [due to \(fallopian\) tube:](#)
• [blockage](#)
• [occlusion](#)
• [stenosis](#)
~~Tubal:~~
• ~~block~~
• ~~occlusion~~
• ~~stenosis~~

N97.2 Female infertility of uterine origin
~~Infertility: A~~ associated with congenital anomaly of uterus
Nonimplantation of ovum

N97.3 Female infertility of cervical origin

N97.4 Female infertility associated with male factors
[Failure to conceive due to infertility of male partner](#)

N97.8 Female infertility of other origin

N97.9 Female infertility, unspecified
[Female sterility NOS](#)

...

CHAPTER 15

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00–O99)

▽ 1500

This chapter contains the following blocks:

O00–O08 Pregnancy with abortive outcome
O09 Duration of pregnancy
O10–O16 Oedema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium
O20–O28 Other maternal disorders predominantly related to pregnancy
O30–O48 Maternal care related to the fetus and amniotic cavity and possible delivery problems
O60–O75 Complications of labour and delivery
O80–O84 Delivery
O85–O92 Complications predominantly related to the puerperium
O94–O99 Other obstetric conditions, not elsewhere classified

Note: ~~The e~~Codes in this chapter are ~~to be used~~[assigned](#) for conditions related to or aggravated by ~~the~~ pregnancy, childbirth or ~~by~~ the puerperium (maternal causes or obstetric causes)

Excludes: incidental pregnant state (Z33)
supervision of normal pregnancy (Z34.-)

PREGNANCY WITH ABORTIVE OUTCOME

(O00–O08)

Fetal viability is defined as 20 completed weeks (140 days) gestation and/or fetal weight greater than or equal to 400g

Excludes: continuing pregnancy in multiple gestation after abortion of one fetus or more (O31.1)

O00 Ectopic pregnancy

[▽ 1544](#)

Includes: ruptured ectopic pregnancy

Use additional code from category O08.- to identify any associated complication.

Use additional code from category O09.- to identify duration of pregnancy.

O00.0 Abdominal pregnancy

Excludes: maternal care for viable fetus in abdominal pregnancy (O36.7)

O00.1 Tubal pregnancy

Fallopian pregnancy

Rupture of (fallopian) tube due to pregnancy

Tubal abortion

O00.2 Ovarian pregnancy

O00.8 Other ectopic pregnancy

Pregnancy:

- cervical
- cornual
- intraligamentous
- mural

O00.9 Ectopic pregnancy, unspecified

O01 Hydatidiform mole

[▽ 0233, 1544](#)

Includes: morphology code M9100 with behaviour code /0

Use additional code from category O08.- to identify any associated complication.

Use additional code from category O09.- to identify duration of pregnancy.

Excludes: malignant hydatidiform mole (D39.2)

O01.0 Classical hydatidiform mole

Complete hydatidiform mole

O01.1 Incomplete and partial hydatidiform mole

O01.9 Hydatidiform mole, unspecified

Trophoblastic disease NOS

Vesicular mole NOS

O02 Other abnormal products of conception

[▽ 1544](#)

Use additional code from category O08.- to identify any associated complication.

Use additional code from category O09.- to identify duration of pregnancy.

Excludes: papyraceous fetus (O31.0)

O02.0 Blighted ovum and nonhydatidiform mole

Mole:

- carneous
 - fleshy
 - intrauterine NOS
- Pathological ovum

O02.1 Missed abortion

~~▽ 1544~~

Fetal death in utero before fetal viability (less than 20 completed weeks (140 days) gestation and/or fetal weight less than 400g) with retention of dead fetus

Excludes: missed abortion with:

- blighted ovum (O02.0)
- mole:
 - hydatidiform (O01.-)
 - nonhydatidiform (O02.0)

O02.8 Other specified abnormal products of conception

Excludes: those with:

- blighted ovum (O02.0)
- mole:
 - hydatidiform (O01.-)
 - nonhydatidiform (O02.0)

O02.9 Abnormal product of conception, unspecified

The following fourth character subdivisions are for use with categories O03–O06:

Subdivisions .0–.4 are assigned for incomplete abortion (ie where there are retained products of conception following abortion).

Subdivisions .5–.9 are assigned for complete or unspecified abortion (ie where there is no documentation of retained products of conception):

.0 incomplete, complicated by genital tract and pelvic infection

~~With conditions in O08.0~~

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: ~~4~~ Sepsis.

Use additional code (B95–B97) to identify infectious agent.

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.

Code also specific type of infection, if known

.1 incomplete, complicated by delayed or excessive haemorrhage

~~With conditions in O08.1~~

Code also coagulopathy, if applicable

.2 incomplete, complicated by embolism

~~With conditions in O08.2~~

Code also site of embolism, if known

.3 incomplete, with other and unspecified complications

~~With conditions in O08.3–O08.9~~

.4 incomplete, without complication

.5 complete or unspecified, complicated by genital tract and pelvic infection

~~With conditions in O08.0~~

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: ~~4~~ Sepsis.

Use additional code (B95–B97) to identify infectious agent.

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.

Code also specific type of infection, if known

.6 complete or unspecified, complicated by delayed or excessive haemorrhage

~~With conditions in O08.1~~

Code also coagulopathy, if applicable

.7 complete or unspecified, complicated by embolism

~~With conditions in O08.2~~

Code also site of embolism, if known

.8 complete or unspecified, with other and unspecified complications

~~With conditions in O08.3–O08.9~~

.9 complete or unspecified, without complication

O03 Spontaneous abortion

[▽ 1544](#)

See subdivisions

Spontaneous expulsion of products of conception before fetal viability (less than 20 completed weeks (140 days) gestation and/or fetal weight less than 400g)

Miscarriage

Use additional code from category O09.- to identify duration of pregnancy.

O04 Medical abortion

[▽ 1511, 1544](#)

See subdivisions

[Abortion performed in a health care facility for medical indications, using medical and/or surgical interventions](#)

[Therapeutic abortion](#)

Includes: ~~termination of pregnancy:~~

~~• legal~~

~~• therapeutic~~

~~therapeutic abortion~~

Use additional code from category O09.- to identify duration of pregnancy.

Excludes: [admission for initiation of medical abortion \(Z32.2\)](#)

O05 Other abortion

[▽ 1544](#)

See subdivisions

Use additional code from category O09.- to identify duration of pregnancy.

O06 Unspecified abortion

[▽ 1544](#)

See subdivisions

Includes: ~~induced abortion NOS~~

[Induced abortion NOS](#)

Use additional code from category O09.- to identify duration of pregnancy.

O07 Failed attempted abortion

[Continuing pregnancy after failed attempt to terminate the pregnancy](#)

[Failed attempt to induce abortion](#)

Includes: ~~failure of attempted induction of abortion~~

Use additional code from category O09.- to identify duration of pregnancy.

Excludes: incomplete abortion (O03–O06)

O07.0 Failed medical abortion, complicated by genital tract and pelvic infection

~~With conditions in O08.0~~

Use additional code (Chapter I) to identify sepsis, if applicable — see Alphabetic Index: Sepsis.

[Use additional code \(B95–B97\) to identify infectious agent.](#)

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.

[Code also specific type of infection, if known](#)

O07.1 Failed medical abortion, complicated by delayed or excessive haemorrhage

~~With conditions in O08.1~~

[Code also coagulopathy, if applicable](#)

O07.2 Failed medical abortion, complicated by embolism

~~With conditions in O08.2~~

[Code also site of embolism, if known](#)

O07.3 Failed medical abortion, with other and unspecified complications

~~With conditions in O08.3–O08.9~~

- O07.4 Failed medical abortion, without complication
Failed medical abortion NOS
- O07.5 Other and unspecified failed attempted abortion, complicated by genital tract and pelvic infection
~~With conditions in O08.0~~
Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis.
Use additional code (B95–B97) to identify infectious agent.
Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.
Code also specific type of infection, if known
- O07.6 Other and unspecified failed attempted abortion, complicated by delayed or excessive haemorrhage
~~With conditions in O08.1~~
Code also coagulopathy, if applicable
- O07.7 Other and unspecified failed attempted abortion, complicated by embolism
~~With conditions in O08.2~~
Code also site of embolism, if known
- O07.8 Other and unspecified failed attempted abortion, with other and unspecified complications
~~With conditions in O08.3–O08.9~~
- O07.9 Other and unspecified failed attempted abortion, without complication
Failed attempted abortion NOS

O08

Complications following abortion and ectopic and molar pregnancy

▽ 1544

Note: Codes from category O08 are assigned for complication(s) of:
• abortion, where the abortion was treated, performed or occurred prior to the episode of care
• ectopic and molar pregnancy

Excludes: complication(s) during episode of care:
• for staged abortion (O04.5–O04.9)
• in which an abortion is treated, performed or occurred (current episode) (O03–O06)
retained products of conception (O03–O06)

- O08.0 Genital tract and pelvic infection following abortion and ectopic and molar pregnancy

| | |
|---|---|
| <p>Endometritis</p> <p>Oophoritis</p> <p>Parametritis</p> <p>Pelvic peritonitis</p> <p>Salpingitis</p> <p>Salpingo-oophoritis</p> | <p>following conditions
classifiable to O00–O07</p> |
|---|---|

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis.
Use additional code (B95–B97) to identify infectious agent.
Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.
Code also specific type of infection, if known

Excludes: septic or septicopyaemic embolism (O08.2)
urinary tract infection (O08.8)

- O08.1 Delayed or excessive haemorrhage following abortion and ectopic and molar pregnancy

| | |
|---|---|
| <p>Afibrinogenaemia</p> <p>Defibrination syndrome</p> <p>Intravascular coagulation</p> | <p>following conditions
classifiable to O00–O07</p> |
|---|---|

Code also coagulopathy, if applicable

O08.2 Embolism following abortion and ectopic and molar pregnancy

~~Embolism:~~

- ~~• air~~
- ~~• amniotic fluid~~
- ~~• blood clot (pulmonary)~~
- ~~• NOS~~
- ~~• pyaemic~~
- ~~• septic~~

following conditions
classifiable to O00–O07

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: ~~Sepsis~~.

Code also site of embolism, if known

O08.3 Shock following abortion and ectopic and molar pregnancy

- ~~Circulatory collapse~~
- ~~Shock (postprocedural)~~

following conditions
classifiable to O00–O07

Use additional code (R57.2) to identify septic shock, if applicable

O08.4 Kidney failure following abortion and ectopic and molar pregnancy

~~Kidney:~~

- ~~• failure (acute)~~
- ~~• shutdown~~
- ~~• tubular necrosis~~
- ~~Oliguria~~
- ~~Uraemia~~

following conditions
classifiable to O00–O07

Code also type of kidney failure, if known

O08.5 Metabolic disorders following abortion and ectopic and molar pregnancy

~~Electrolyte imbalance following conditions classifiable to O00–O07~~

Code also type of metabolic disorder, if known

O08.6 Damage to pelvic organs and tissues following abortion and ectopic and molar pregnancy

~~Laceration, perforation, tear or chemical damage of:~~

- ~~• bladder~~
- ~~• bowel~~
- ~~• broad ligament~~
- ~~• cervix~~
- ~~• periurethral tissue~~
- ~~• uterus~~

following conditions
classifiable to O00–O07

Includes: laceration, perforation, tear or chemical damage of:

- bladder
- bowel
- broad ligament
- cervix
- periurethral tissue
- uterus

Use additional code to identify external cause (Chapter 20), if applicable.

O08.7 Other venous complications following abortion and ectopic and molar pregnancy

Code also specific venous condition, if known

O08.8 Other complications following abortion and ectopic and molar pregnancy

| | |
|------------------------------------|---|
| Cardiac arrest | following conditions
classifiable to O00–O07 |
| Urinary tract infection | |

O08.9 Complication following abortion and ectopic and molar pregnancy, unspecified
Unspecified complication following ~~conditions classifiable to O00–O07~~ [abortion and ectopic and molar pregnancy](#)

DURATION OF PREGNANCY

(O09)

★O09 Duration of pregnancy

▽ 0050

Note: ~~37 completed weeks refers to 36 weeks plus 7 days. Duration of pregnancy less than 37 completed weeks is deemed premature.~~

~~Category O09 identifies the duration of pregnancy at admission on the mother's record and should only be assigned as an additional diagnosis with the following conditions:~~

~~Category O09 identifies duration of pregnancy at admission on the patient's (mother's) record.~~

~~Codes from this category are assigned only in addition to the conditions listed below, if they occur before 37 completed weeks (ie < 36 weeks plus 7 days) of gestation.~~

- ~~• abortion (O00–O07 Pregnancy with abortive outcome)~~
- ~~• early onset of labour (O60 Preterm labour and delivery)~~
- ~~• fetal death in utero (O36.4) (before 37 completed weeks of gestation)~~
- ~~• premature rupture of membranes (O42) (before 37 completed weeks of gestation)~~
- ~~• threatened:~~
 - ~~• abortion (O20.0)~~
 - ~~• premature labour (O47.0 False labour before 37 completed weeks of gestation)~~

Code first:

- [• abortion \(O00–O07\)](#)
- [• early onset of labour \(O60.-\)](#)
- [• fetal death in utero \(O36.4\)](#)
- [• initiation of medical abortion \(Z32.2\)](#)
- [• premature rupture of membranes \(O42.-\)](#)
- [• threatened:](#)
 - [• abortion \(O20.0\)](#)
 - [• premature labour \(O47.0\)](#)

★O09.0 < 5 completed weeks

★O09.1 5–13 completed weeks

★O09.2 14–19 completed weeks

★O09.3 20–25 completed weeks

★O09.4 26–33 completed weeks

★O09.5 34–<37 completed weeks

[37 completed weeks is defined as 36 weeks plus 7 days](#)

★O09.9 Unspecified duration of pregnancy

Note: ~~This code should be a~~ Assigned [this code](#) only with [the](#) conditions listed above, ~~and~~ where the duration of pregnancy has not been ~~recorded~~ [documented](#)

OEDEMA, PROTEINURIA AND HYPERTENSIVE DISORDERS IN PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

(O10–O16)

...

O14 Pre-eclampsia

Excludes: pre-eclampsia superimposed on pre-existing hypertension (O11)

O14.0 Mild to moderate pre-eclampsia

O14.1 Severe pre-eclampsia

O14.2 HELLP syndrome

[Severe pre-eclampsia with](#) ~~Combination of~~ haemolysis, elevated liver enzymes and low platelet count

O14.9 Pre-eclampsia, unspecified

...

O15 Eclampsia

▽ 1521

Includes: ~~coma~~ ~~convulsions~~ ~~delirium~~ [following conditions in O10–O14 and O16](#)
[coma following conditions classified to O10–O14 and O16](#)
[convulsions following conditions classified to O10–O14 and O16](#)
[delirium following conditions classified to O10–O14 and O16](#)
eclampsia with pregnancy-induced or pre-existing hypertension

Code also specific type of pre-existing hypertension (I10–I15), if known

...

OTHER MATERNAL DISORDERS PREDOMINANTLY RELATED TO PREGNANCY

(O20–O28)

Note: Categories O24–, O25, O26.6, O26.7 and O26.81 classify conditions in pregnancy, childbirth and the puerperium.

Excludes: maternal care related to the fetus and amniotic cavity and possible delivery problems (O30–O48)

O20 Haemorrhage in early pregnancy

Excludes: pregnancy with abortive outcome (O00–O08)

O20.0 Threatened abortion

Haemorrhage specified as due to threatened abortion

Use additional code from category O09. - to identify duration of pregnancy.

[Excludes: that resulting in spontaneous abortion \(O03.-\)](#)

O20.8 Other haemorrhage in early pregnancy

O20.9 Haemorrhage in early pregnancy, unspecified

O21 Excessive vomiting in pregnancy

▽ 1521

Excludes: vomiting in pregnancy due to a specified cause classified elsewhere — code condition (see Alphabetic Index)

O21.0 Hyperemesis gravidarum

[Hyperemesis gravidarum starting before 20 completed weeks of gestation](#)

~~Hyperemesis gravidarum~~ ~~Excessive vomiting~~ [starting before the end of the 20th week of gestation](#)

...

O23 Infections of genitourinary tract in pregnancy

▽ 1521, 1549

Use additional code (~~B95–B97~~ [Chapter 1](#)) to identify infectious agent.

Code also specific type of infection, if known.

Excludes: gonococcal infections (O98.2)
infections with a predominantly sexual mode of transmission ~~NOS~~ [classified to A55–A64](#) (O98.3)
syphilis (O98.1)
tuberculosis of genitourinary system (O98.0)
venereal disease NOS (O98.3)

- O23.0 Infections of kidney in pregnancy
- O23.1 Infections of bladder in pregnancy
- O23.2 Infections of urethra in pregnancy
- O23.3 Infections of other parts of urinary tract in pregnancy
- O23.4 Unspecified infection of urinary tract in pregnancy
- O23.5 Infections of the genital tract in pregnancy
- O23.9 Other and unspecified genitourinary tract infection in pregnancy
Genitourinary tract infection in pregnancy NOS

O24 Diabetes mellitus [and intermediate hyperglycaemia](#) in pregnancy, [childbirth and the puerperium](#)

▽ 0401, 1521

~~Includes: diabetes mellitus~~
~~intermediate hyperglycaemia~~ | ~~in childbirth and the puerperium~~

- O24.0 Pre-existing [Type 1](#) diabetes mellitus, ~~Type 1~~, in pregnancy, [childbirth and the puerperium](#)

Code also diabetes mellitus (E10.-)

The following fifth character subdivisions are for use with subcategories O24.1–O24.9:

- ✦ 2 insulin treated
- ✦ 3 oral hypoglycaemic therapy
- ✦ 4 other
 - Diet
 - Exercise
 - Lifestyle management
- ✦ 9 unspecified

Note: When multiple fifth characters apply, assign the one appearing highest on the list.

O24.1 Pre-existing [Type 2](#) diabetes mellitus, ~~Type 2~~, in pregnancy, [childbirth and the puerperium](#)

See subdivisions

Code also diabetes mellitus (E11.-)

O24.2 Pre-existing [other specified](#) diabetes mellitus, ~~other specified type~~, in pregnancy, [childbirth and the puerperium](#)

See subdivisions

Code also diabetes mellitus (E13.-)

O24.3 Pre-existing [unspecified](#) diabetes mellitus, ~~unspecified~~, in pregnancy, [childbirth and the puerperium](#)

See subdivisions
Code also diabetes mellitus (E14.-)

O24.4 Diabetes mellitus arising during pregnancy

See subdivisions
Gestational diabetes mellitus NOS

★O24.5 Pre-existing intermediate hyperglycaemia⁷ in pregnancy, [childbirth and the puerperium](#)

See subdivisions
Code also intermediate hyperglycaemia (E09.-)

O24.9 Diabetes mellitus in pregnancy, [childbirth and the puerperium](#), unspecified onset

See subdivisions

O25 Malnutrition in pregnancy, [childbirth and the puerperium](#)

~~Malnutrition in childbirth and the puerperium~~

Code also type of malnutrition (E40–E46), if known

...

MATERNAL CARE RELATED TO THE FETUS AND AMNIOTIC CAVITY AND POSSIBLE DELIVERY PROBLEMS

(O30–O48)

...

O31 Complications specific to multiple gestation

Excludes: conjoined twins causing disproportion (O33.7)
delayed delivery of second ~~twin, triplet, etc~~ or [subsequent fetus in multiple delivery](#) (O63.2)
the listed conditions affecting labour and delivery (O64–O66)

O31.0 Papyraceous fetus
Fetus compressus

O31.1 Continuing pregnancy after abortion of one fetus or more
[Continuing pregnancy after:](#)
• fetal death in utero before fetal viability (less than 20 completed weeks (140 days) gestation and/or fetal weight less than 400g), of one fetus or more
• medical abortion of one fetus or more
• missed abortion of one fetus or more
• spontaneous abortion of one fetus or more

O31.2 Continuing pregnancy after intrauterine death of one fetus or more
[Continuing pregnancy after fetal death in utero after fetal viability \(greater than or equal to 20 completed weeks \(140 days\) gestation and/or fetal weight greater than or equal to 400g\), of one fetus or more](#)

O31.8 Other complications specific to multiple gestation

...

O33 Maternal care for known or suspected disproportion

▽ 1506

Includes: the listed conditions as a reason for observation, hospitalisation or other obstetric care of the mother, or for caesarean section before onset of labour

Excludes: the listed conditions affecting labour or delivery (O65–O66)

...

O33.3 Maternal care for disproportion due to outlet contraction of pelvis

~~Mid-cavity contraction (pelvis)~~ | causing
~~Outlet contraction (pelvis)~~ | disproportion

...

O33.7 Maternal care for disproportion due to other fetal deformities

~~Conjoined twins~~

~~Fetal:~~

• ~~ascites~~

• ~~hydrops~~

• ~~meningomyelocele~~

• ~~sacral teratoma~~

• ~~tumour~~

causing disproportion

O33.8 Maternal care for disproportion of other origin

O33.9 Maternal care for disproportion, unspecified

Cephalopelvic disproportion NOS

Fetopelvic disproportion NOS

O34

Maternal care for known or suspected abnormality of pelvic organs

▽ 1506

Includes: the listed conditions as a reason for observation, hospitalisation or other obstetric care of the mother, or for caesarean section before onset of labour

...

O34.3 Maternal care for cervical incompetence

~~Maternal care for:~~

• ~~cerclage~~

• ~~Shirodkar suture~~

with or without mention of cervical incompetence

Excludes: that affecting labour and delivery (O65.5)

O34.4 Maternal care for other abnormalities of cervix

~~Maternal care for:~~

• ~~polyp~~

• ~~previous surgery~~

• ~~stricture or~~

• ~~stenosis~~

• ~~tumour~~

(of) (to) cervix

Code also specific type of abnormality, if known.

Excludes: that affecting labour and delivery (O65.5)

O34.5 Maternal care for other abnormalities of gravid uterus

~~Maternal care for:~~

• ~~incarceration~~

• ~~prolapse~~

• ~~retroversion~~

of gravid uterus

Code also specific type of abnormality, if known.

Excludes: that affecting labour and delivery (O65.5)

O34.6 Maternal care for abnormality of vagina

~~Maternal care for:~~

• ~~previous surgery~~

• ~~septate~~

• ~~stenosis (acquired) (congenital)~~

• ~~stricture~~

• ~~tumour~~

(of) (to) vagina

Code also specific type of abnormality, if known.

Excludes: maternal care for vaginal varices in pregnancy (O22.9) that affecting labour and delivery (O65.5)

...

O35 Maternal care for known or suspected fetal abnormality and damage

Includes: the listed conditions in the fetus as a reason for observation, hospitalisation or other obstetric care ~~of the mother~~, or for caesarean section or ~~for~~ termination of pregnancy

Excludes: maternal care for known or suspected disproportion (O33.-)

...

O36 Maternal care for other known or suspected fetal problems

Includes: the listed conditions in the fetus as a reason for observation, hospitalisation or other obstetric care ~~of the mother~~, or for caesarean section or ~~for~~ termination of pregnancy

Excludes: labour and delivery complicated by fetal stress [distress] (O68.-)
placental transfusion syndromes (O43.0)

...

O36.4 Maternal care for intrauterine death

Maternal care for fetal death in utero after fetal viability (greater than or equal to 20 completed weeks (140 days) gestation and/or fetal weight greater than or equal to 400g)

Use additional code from category O09.- to identify duration of pregnancy, before 37 completed weeks.

Excludes: continuing pregnancy in multiple gestation after fetal death in utero of one fetus or more (O31.2)
fetal death in utero before fetal viability (O02.1)
missed abortion (O02.1)

...

O43 Placental disorders

Excludes: maternal care for poor fetal growth due to placental insufficiency (O36.5)
placenta praevia (O44.-)
premature separation of placenta [abruptio placentae] (O45.-)

...

O43.2 Morbidly adherent placenta

Placenta:

- accreta
- increta
- percreta

Code also ~~associated postpartum haemorrhage (O72.0)~~ or ~~retained placenta without haemorrhage (O73.0)~~, if applicable.

O43.8 Other placental disorders

Placental:

- dysfunction
- infarction

O43.9 Placental disorder, unspecified

O44 Placenta praevia

O44.0 Placenta praevia specified as without haemorrhage

Low implantation of placenta specified as without haemorrhage

O44.1 Placenta praevia with haemorrhage

Low implantation of placenta, NOS or with haemorrhage

~~Placenta praevia:~~

- ~~• marginal~~
- ~~• partial~~ | NOS or with haemorrhage
- ~~• total~~

Excludes: labour and delivery complicated by haemorrhage from vasa praevia (O69.4)

...

COMPLICATIONS OF LABOUR AND DELIVERY

(O60–O75)

...

O61 Failed induction of labour

O61.0 Failed medical induction of labour

Failed induction (of labour) by:

- oxytocin
- prostaglandins

Excludes: with failed surgical (instrumental) induction of labour (O61.2)

O61.1 Failed ~~instrumental~~-surgical induction of labour

Failed ~~induction (of labour):~~

- instrumental induction of labour
- mechanical induction of labour

~~• surgical~~

Excludes: with failed medical induction of labour (O61.2)

★O61.2 Failed medical with surgical induction of labour

Failed induction of labour, following use of both medical and surgical (instrumental) methods

O61.8 Other failed induction of labour

O61.9 Failed induction of labour, unspecified

O62 Abnormalities of forces of labour

O62.0 Primary inadequate contractions

Failure of cervical dilatation

Primary hypotonic uterine dysfunction

Uterine inertia during latent phase of labour

O62.1 Secondary uterine inertia

Arrested active phase of labour

Secondary hypotonic uterine dysfunction

O62.2 Other uterine inertia

Atony of uterus

Desultory labour

Hypotonic uterine dysfunction NOS

Irregular labour

Poor contractions

Uterine inertia NOS

~~*Excludes:* atonic postpartum haemorrhage (O72.1)~~

Code also, if applicable:

• postpartum haemorrhage (O72.1, O72.2)

• third-stage haemorrhage (O72.0)

O62.3 Precipitate labour

O62.4 Hypertonic, incoordinate, and prolonged uterine contractions

Contraction ring dystocia

Dyscoordinate labour

Hour-glass contraction of uterus

Hypertonic uterine dysfunction

Incoordinate uterine action

Tetanic contractions

Uterine dystocia NOS

Excludes: dystocia (fetal)(maternal) NOS (O66.9)

O62.8 Other abnormalities of forces of labour

O62.9 Abnormality of forces of labour, unspecified
Failure to progress NOS

...

O65 Labour and delivery affected by maternal pelvic abnormality

▽ 1506

Obstructed labour due to maternal pelvic abnormality

O65.0 Labour and delivery affected by deformed pelvis

O65.1 Labour and delivery affected by generally contracted pelvis

O65.2 Labour and delivery affected by pelvic inlet contraction

O65.3 Labour and delivery affected by pelvic outlet and mid-cavity contraction

O65.4 Labour and delivery affected by fetopelvic disproportion, unspecified

Excludes: dystocia due to abnormality of fetus (O66.2–O66.3)

O65.5 Labour and delivery affected by abnormality of maternal pelvic organs

~~Labour and delivery affected by conditions listed in O34.0, O34.1, O34.3–O34.9~~

Excludes: labour and delivery affected by uterine scar from (any) previous surgery (O34.2)

O65.8 Labour and delivery affected by other maternal pelvic abnormalities

O65.9 Labour and delivery affected by maternal pelvic abnormality, unspecified

...

O67 Labour and delivery complicated by intrapartum haemorrhage, not elsewhere classified

Excludes: antepartum haemorrhage NEC (O46.-)

placenta praevia (O44.-)

postpartum haemorrhage (O72.-[1](#), [O72.2](#))

premature separation of placenta [abruptio placentae] (O45.-)

[third-stage haemorrhage \(O72.0\)](#)

O67.0 Intrapartum haemorrhage with coagulation defect

Intrapartum haemorrhage (excessive) associated with:

- afibrinogenaemia
- disseminated intravascular coagulation
- hyperfibrinolysis
- hypofibrinogenaemia

Code also specific type of coagulation defect, if known.

O67.8 Other intrapartum haemorrhage

Excessive intrapartum haemorrhage

O67.9 Intrapartum haemorrhage, unspecified

...

O70**Perineal laceration during delivery**

▽ 1551

Includes: episiotomy extended by laceration**Note:** [Codes in category O70 represent a continuum. Where multiple perineal lacerations \(ruptures or tears\) of different degrees are documented, assign a code for the highest \(most severe\) degree only.](#)**Excludes:** obstetric high vaginal laceration (O71.4)
vaginal sulcus laceration (O71.4)**O70.0 First degree perineal laceration during delivery**~~Perineal graze, laceration, rupture or tear (involving):~~

- | | | |
|--|--|--------------------|
| <ul style="list-style-type: none"> ▲ fourchette ▲ labia ▲ periurethral tissue ▲ skin ▲ slight ▲ vagina, low ▲ vulva | | during
delivery |
|--|--|--------------------|

Includes: [perineal graze, laceration, rupture or tear \(involving\):](#)

- [fourchette](#)
- [labia](#)
- [low vagina](#)
- [periurethral tissue](#)
- [skin](#)
- [vulva](#)

Excludes: periurethral laceration involving urethra (O71.5)
that with laceration of:

- high vaginal wall (middle) (upper third of vaginal wall) (O71.4)
- vaginal sulcus (O71.4)

O70.1 Second degree perineal laceration during delivery~~Perineal laceration, rupture or tear as in O70.0, also involving:~~

- | | | |
|---|--|-----------------|
| <ul style="list-style-type: none"> ▲ pelvic floor ▲ perineal muscles ▲ vaginal muscles | | during delivery |
|---|--|-----------------|

Includes: [perineal laceration, rupture or tear of sites listed in O70.0 and \(involving\):](#)

- [pelvic floor](#)
- [perineal muscles](#)
- [vaginal muscles](#)

Excludes: that involving anal sphincter (O70.2)**O70.2 Third degree perineal laceration during delivery**~~Perineal laceration, rupture or tear as in O70.1, also involving:~~

- | | | |
|--|--|-----------------|
| <ul style="list-style-type: none"> ▲ anal sphincter ▲ rectovaginal septum ▲ sphincter NOS | | during delivery |
|--|--|-----------------|

Includes: [perineal laceration, rupture or tear of sites listed in O70.0 and O70.1, and \(involving\):](#)

- [anal sphincter](#)
- [rectovaginal septum](#)
- [sphincter NOS](#)

Excludes: that involving anal or rectal mucosa (O70.3)

O70.3 Fourth degree perineal laceration during delivery
~~Perineal laceration, rupture or tear as in O70.2, also involving:~~
~~• anal mucosa~~ | during delivery
~~• rectal mucosa~~

Includes: perineal laceration, rupture or tear of sites listed in O70.0-O70.2, and (involving):
• anal mucosa
• rectal mucosa

O70.9 Perineal laceration during delivery, unspecified

O71 Other obstetric trauma

...

O71.6 Obstetric damage to pelvic joints and ligaments
~~Avulsion of inner symphyseal cartilage~~ | obstetric
~~Damage to coccyx~~
~~Traumatic separation of symphysis (pubis)~~

O71.7 Obstetric haematoma of pelvis
Obstetric haematoma of:
• perineum
• vagina
• vulva

...

O72 Third-stage and Postpartum haemorrhage

~~Includes: haemorrhage after delivery of fetus or infant~~

O72.0 Third-stage haemorrhage
Excessive haemorrhage during the third stage of labour (ie after delivery of infant, but before delivery of placenta)
~~Haemorrhage associated with retained or trapped placenta~~
~~Retained placenta NOS~~

Code also ~~morbidly adherent placenta (O43.2), if applicable:-~~
• adherent placenta NOS (O73.0)
• atonic uterus (O62.2)
• morbidly adherent placenta (O43.2)
• retained placenta (O73.0)

O72.1 Other immediate postpartum haemorrhage
~~Haemorrhage following delivery of placenta~~
Postpartum haemorrhage: ~~(atonic) NOS~~
• ≤ 24 hours following delivery of placenta
• NOS

Code also, if applicable:
• atonic uterus (O62.2)
• retained portions of placenta or membranes (O73.1)

O72.2 Delayed and secondary postpartum haemorrhage
~~Haemorrhage associated with retained portions of placenta or membranes~~
~~Retained products of conception NOS, following delivery~~
Postpartum haemorrhage > 24 hours following delivery of placenta

Code also retained portions of placenta or membranes (O73.1), if applicable

O72.3 Postpartum coagulation defects
Postpartum:
• afibrinogenaemia
• fibrinolysis

Code also specific type of coagulation defect, if known.

...

O73 Retained placenta and membranes, ~~without haemorrhage~~

O73.0 Retained placenta ~~without haemorrhage~~
[Adherent placenta NOS](#)

Code also ~~morbidly adherent placenta (O43.2)~~ [third-stage haemorrhage \(O72.0\)](#), if applicable.

[Excludes: morbidly adherent placenta \(O43.2\)](#)

O73.1 Retained portions of placenta and membranes, ~~without haemorrhage~~
Retained products of conception following delivery, ~~without haemorrhage~~

[Code also postpartum haemorrhage \(O72.1, O72.2\)](#), if applicable.

...

DELIVERY

(O80–O84)

▽ [1500](#), [1505](#), [1511](#), [1550](#)

Note: ~~Codes from this section are for use in all obstetric episodes of care where delivery is the outcome. Other abnormalities/complications classifiable elsewhere in Chapter 15 may be assigned in conjunction with codes O80–O84 to fully describe the delivery episode.~~

[Codes from O80–O84 are assigned when delivery is completed within the episode of care \(for classification purposes delivery is not complete until after expulsion of the placenta, excluding any retained portion\(s\), expelled or requiring removal post delivery\).](#)

~~Code also the~~ [Use additional code to identify outcome of delivery \(Z37.-\)](#).

O80 Single spontaneous delivery

Cases with minimal or no assistance

Single spontaneous delivery:

- breech
- NOS
- vaginal
- vertex

Includes: that with:

- [administration of Syntocinon in third stage of labour](#)
- controlled cord traction (CCT)
- epidural injection/infusion
- episiotomy with repair
- fetal monitoring
- medical or surgical:
 - [augmentation of labour](#)
 - [induction of labour](#)

~~• augmentation~~ | ~~of labour~~
~~• induction~~

- suture of obstetric perineal laceration

Excludes: pregnancy with abortive outcome [before fetal viability](#) (O00–O08)

single delivery (by) (with):

- assisted NOS (O83)
- breech extraction (O83)
- caesarean section (O82)
- forceps:
 - NOS (O81)
 - with forceps rotation of fetal head (O81)
- manual:
 - removal of placenta (O83)
 - rotation of fetal head (O83)
- McRoberts manoeuvre (O83)
- rotation of fetal head without forceps delivery (O83)
- vacuum extraction (O81)
- version (with extraction) (O83)

...

O83**Other assisted single delivery**

Includes: assisted single:

- [breech delivery NOS](#)
- [delivery NOS](#)

~~• breech delivery~~ NOS

~~• delivery~~

breech extraction

forceps rotation of fetal head without forceps delivery

single delivery assisted (facilitated) by:

- manual:
 - removal of placenta
 - rotation of fetal head
- McRoberts manoeuvre
- other procedures, not elsewhere classified
- procedures on fetus
- version (with extraction)

Excludes: single delivery:

- by caesarean (O82)
- using forceps and vacuum extractor (O81)

...

COMPLICATIONS PREDOMINANTLY RELATED TO THE PUERPERIUM**(O85–O92)**

[▼ 1548](#)

The puerperium is defined as the period of 42 days following childbirth.

Note: Categories O88.-, O91.- and O92.- classify conditions in pregnancy, childbirth and the puerperium.

Excludes: mental and behavioural disorders associated with the puerperium NEC (F53.-)
 obstetrical tetanus (A34)
 puerperal osteomalacia (M83.0-)

...

O86**Other puerperal infections**

Use additional code (B95–B97) to identify infectious agent.

Excludes: infection during labour (O75.3)

O86.0 Infection of obstetric surgical wound

Infection:

- [caesarean section wound](#)
- [obstetric perineal repair wound](#)

Infected:

- ~~caesarean section wound~~ | ~~following delivery~~
- ~~perineal repair~~

O86.1 Other infection of genital tract following delivery

Code also specific type of infection, if known.

Excludes: puerperal endometritis (O85)

...

O88**Obstetric embolism**

[▼ 1904](#)

...

O88.2 Obstetric blood clot embolism

- ~~Embolism NOS~~ | ~~in pregnancy;~~
- ~~Pulmonary embolism NOS~~ | ~~childbirth and the~~
- ~~Thromboembolism NOS~~ | ~~puerperium~~

O88.3 Obstetric pyaemic and septic embolism

...

O90 Complications of the puerperium, not elsewhere classified

...

O90.4 Postpartum acute kidney failure
~~Hepatorenal syndrome following labour and delivery~~

O90.5 Postpartum thyroiditis

...

O91 Infections of breast associated with childbirth

Includes: the listed conditions ~~during in~~ pregnancy, the puerperium, or associated with lactation

The following fifth character subdivisions are for use with subcategories O91.0–O91.2:

⊕ 0 without mention of attachment difficulty

⊕ 1 with mention of attachment difficulty

O91.0 Infection of nipple associated with childbirth

See subdivisions

Abscess of nipple:

- gestational
- puerperal

O91.1 Abscess of breast associated with childbirth

See subdivisions

| | |
|-------------------------------|-------------------------------------|
| Mammary abscess | |
| Purulent mastitis | gestational or puerperal |
| Subareolar abscess | |

O91.2 Nonpurulent mastitis associated with childbirth

See subdivisions

| | |
|-----------------------------------|-------------------------------------|
| Lymphangitis of breast | |
| Mastitis: | |
| ▲ interstitial | gestational or puerperal |
| ▲ NOS | |
| ▲ parenchymatous | |

...

O92 Other disorders of breast and lactation associated with childbirth

Includes: the listed conditions ~~during in~~ pregnancy, the puerperium, or associated with lactation

The following fifth character subdivisions are for use with subcategories O92.0–O92.7:

⊕ 0 without mention of attachment difficulty

⊕ 1 with mention of attachment difficulty

O92.0 Retracted nipple associated with childbirth

See subdivisions

Inverted nipple, gestational or puerperal

O92.1 Cracked nipple associated with childbirth

See subdivisions

Fissure of nipple, gestational or puerperal

O92.2 Other and unspecified disorders of breast associated with childbirth

See subdivisions

- Blistered nipple
- Blocked duct(s)
- Bruised nipple | gestational or puerperal
- Engorgement
- Grazed nipple

O92.3 Agalactia

See subdivisions

Physiological suppression of lactation occurring prior to establishment of lactation
Failure of lactation
Primary agalactia

O92.4 Hypogalactia

See subdivisions

- Delayed | milk supply
- Insufficient

O92.5 Suppressed lactation

See subdivisions

Therapeutic suppression of lactation prior to or after establishment of lactation

Agalactia:

- secondary
- therapeutic

Note: Performed for patients with certain conditions (eg epilepsy, bipolar disorder) or where current medications contraindicate breastfeeding.

Excludes: elective suppression (mother's decision not to breastfeed) – omit code

O92.6 Galactorrhoea

See subdivisions

Oversupply of milk

Excludes: galactorrhoea not associated with childbirth (N64.3)

O92.7 Other and unspecified disorders of lactation

See subdivisions

Puerperal galactocele

...

O98**Maternal infectious and parasitic diseases classifiable elsewhere in pregnancy, childbirth and the puerperium**

▽ 1521

Note: Refer to the Alphabetic Index at *Pregnancy/complicated by/conditions in or Pregnancy/complicated by/diseases of* for specific code ranges of the underlying infectious or parasitic disease.

Code also specific infection or parasitic disease (Chapter 1).

Excludes: genitourinary tract infections:

- in pregnancy (O23.-)
- puerperal (O86.1–O86.3)
- infection during labour (O75.3)

puerperal:

- infection (O86.-)
- sepsis (O85)

when the reason for maternal care is that the disease is known or suspected to have affected the fetus (O35–O36)

- O98.0 Tuberculosis in pregnancy, childbirth and the puerperium
- O98.1 Syphilis in pregnancy, childbirth and the puerperium
- O98.2 Gonorrhoea in pregnancy, childbirth and the puerperium
- O98.3 Other infections with a predominantly sexual mode of transmission in pregnancy, childbirth and the puerperium
[Conditions in A55–A64 in pregnancy, childbirth and the puerperium](#)
- O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium
▽ 0104
- O98.5 Other viral diseases in pregnancy, childbirth and the puerperium
[Excludes: with a predominantly sexual mode of transmission \(O98.3\)](#)
- O98.6 Protozoal diseases in pregnancy, childbirth and the puerperium
- ...

O99**Other maternal diseases classifiable elsewhere in pregnancy, childbirth and the puerperium**

...

O99.3**Mental disorders and diseases of the nervous system in pregnancy, childbirth and the puerperium**

▽0503, 0505

Excludes: ~~mental disorder in puerperium NEC (F53.-)~~

~~postnatal depression (F53.0)~~

~~postpartum:~~

~~• blues~~

~~• dysphoria~~

~~• mood disturbance~~

~~• sadness~~

~~puerperal psychosis (F53.1)~~

~~vomiting associated with other psychological disturbances (F50.5)~~

NOS (F53.8)

★O99.31 [Mental disorders in pregnancy, childbirth and the puerperium](#)

▽0503, 0505

Excludes: [mental disorder in puerperium NEC \(F53.-\)](#)

[postnatal depression \(F53.0\)](#)

[postpartum:](#)

• [blues NOS \(F53.8\)](#)

• [dysphoria NOS \(F53.8\)](#)

• [mood disturbance NOS \(F53.8\)](#)

• [sadness NOS \(F53.8\)](#)

[puerperal psychosis \(F53.1\)](#)

[vomiting associated with other psychological disturbances \(F50.5\)](#)

★O99.32 [Diseases of the nervous system in pregnancy, childbirth and the puerperium](#)

...

P07 Disorders related to short gestation and low birth weight, not elsewhere classified

▽ 4618

Includes: the listed conditions, without further specification, as the cause of mortality, morbidity or additional care, in newborn

Note: ~~When both birth weight and gestational age are available, priority of assignment should be given to gestational age.~~

Excludes: low birth weight; ~~due to slow fetal growth and fetal malnutrition (P05.-)~~
• [due to slow fetal growth and fetal malnutrition \(P05.-\)](#)
• [in term infant \(P05.-\)](#)

P07.0 Extremely low birth weight

Note: [Category P07.0 identifies an infant's weight at the **time of birth**, not the weight at subsequent episodes of care](#)

[Code first the gestational age \(P07.2-, P07.3-\).](#)

⊕P07.01 Extremely low birth weight 499g or less

⊕P07.02 Extremely low birth weight 500–749g

⊕P07.03 Extremely low birth weight 750–999g

P07.1 Other low birth weight

Note: [Category P07.1 identifies an infant's weight at the **time of birth**, not the weight at subsequent episodes of care.](#)

[Code first the gestational age \(P07.2-, P07.3-\).](#)

⊕P07.11 Other low birth weight 1000–1249g

⊕P07.12 Other low birth weight 1250–1499g

⊕P07.13 Other low birth weight 1500–2499g

P07.2 Extreme immaturity

Note: [Category P07.2 identifies the infant's gestational age \(ie period of time spent in utero\), not the infant's age in adjusted weeks](#)

[Code also low birth weight \(P07.0-, P07.1-\), if known.](#)

⊕P07.21 Extreme immaturity, less than 24 completed weeks
Extreme immaturity, less than 168 completed days

⊕P07.22 Extreme immaturity, 24 or more completed weeks but less than 28 completed weeks
Extreme immaturity, 168 or more completed days but less than 196 completed days

P07.3 Other [and unspecified](#) preterm infants

Note: [Category P07.3 identifies the infant's gestational age \(ie period of time spent in utero\), not the infant's age in adjusted weeks](#)

[Code also low birth weight \(P07.0-, P07.1-\), if known.](#)

⊕P07.30 [Preterm infant](#) ~~Prematurity~~, unspecified
[Preterm \(premature\) infant of unspecified gestational age](#)

⊕P07.31 ~~Other p~~[P](#)reterm infant, 28 or more completed weeks but less than 32 completed weeks
~~Other p~~[P](#)reterm infant, 196 or more completed days but less than 224 completed days

⊕P07.32 ~~Other p~~[P](#)reterm infant, 32 or more completed weeks but less than 37 completed weeks
~~Other p~~[P](#)reterm infant, 224 or more completed days but less than 259 completed days

...

P96 Other conditions originating in the perinatal period

...

P96.4 Termination of pregnancy, affecting fetus and newborn

▼ 0050

~~Excludes: termination of pregnancy (affecting mother) (O04.-)~~

...

R34 Anuria and oliguria

Excludes: that with:

- [kidney disorder in pregnancy \(O26.81\)](#)
- [postpartum acute kidney failure \(O90.4\)](#)
- ~~complicating abortion or ectopic or molar pregnancy (O00–O07, O08.4)~~
- with:
 - ~~kidney disorder in pregnancy (O26.81)~~
 - ~~postpartum acute kidney failure (O90.4)~~

...

R55 Syncope and collapse

Blackout

Fainting

Excludes: neurocirculatory asthenia (F45.31)
orthostatic hypotension:

- neurogenic (I95.12)
- NOS (I95.10)

shock:

- cardiogenic (R57.0)
- [during or following labour and delivery \(O75.1\)](#)
- ~~complicating or following:~~
 - ~~abortion or ectopic or molar pregnancy (O00–O07, O08.3)~~
 - ~~labour and delivery (O75.1)~~
- NOS (R57.9)
- postprocedural (T81.1)

Stokes-Adams attack (I45.9)
syncope:

- carotid sinus (G90.0)
- heat (T67.1)
- psychogenic (F48.8)

unconsciousness NOS (R40.2)

...

R57 Shock, not elsewhere classified

Excludes: shock (due to):

- anaesthesia (T88.2)
- anaphylactic (due to):
 - ...
 - ~~complicating or following abortion or ectopic or molar pregnancy (O00–O07, O08.3)~~
 - [during or following labour and delivery \(O75.1\)](#)
 - electric (T75.4)
 - lightning (T75.0)
 - ~~obstetric (O75.1)~~
 - postprocedural (T81.1)
 - psychic (F43.0)
 - traumatic (T79.4)
- toxic shock syndrome (A48.3)

R57.0 Cardiogenic shock

...

Z03 Medical observation and evaluation for suspected diseases and conditions, [ruled out](#)

▽ 0012

...

...

✦Z03.7 Observation and evaluation of newborn for suspected condition not found

▽ 1607, 1611, 1617

Note: ~~This category is to be used for newborns, within the neonatal period (the first 28 days of life), who are suspected of having an abnormal condition resulting from exposure from mother or birth process, but without signs or symptoms, and which after examination and observation, is found not to exist.~~ Assign code(s) from this category for newborns (infants less than 28 days old) without signs or symptoms, who are suspected of having an abnormal condition that is ruled out after examination and observation.

Use additional code (Z38.-) to identify liveborn infant according to place of birth, if applicable.

✦Z03.70 Observation of newborn for unspecified suspected condition

✦Z03.71 Observation of newborn for suspected infectious condition

✦Z03.72 Observation of newborn for suspected neurological condition

✦Z03.73 Observation of newborn for suspected respiratory condition

✦Z03.79 Observation of newborn for other suspected condition

...

Z32 Pregnancy supervision, examination and test, not elsewhere classified

▽ 0050

Z32.0 Pregnancy, not (yet) confirmed

▽ 0050

Z32.1 Pregnancy confirmed

▽ 0050

✦Z32.2 Initiation of medical abortion

▽ 1511

Admission for supervision of the initial episode of care for a staged medical abortion

Use additional code from category O09.- to identify duration of pregnancy.

Excludes: that with:

- completion of abortion (procedure) (O04.5-O04.9)
- expulsion of products of conception (O04.5-O04.9)

Z34 Supervision of normal pregnancy

▽ 1521, 1550

Excludes: false labour (~~O47.-~~ O47.0, O47.1, O47.9)
incidental pregnant state (Z33)
labour without delivery (O47.2)
preterm contractions without delivery (O60.0)
with any condition classified to Chapter 15 — see Alphabetic Index

...

Z35 Supervision of high-risk pregnancy

Supervision for high-risk conditions or problems affecting management of pregnancy

Z35.0 Supervision of pregnancy with history of infertility

...

Z37**Outcome of delivery**

▽ 0050

Note: ~~This A code from this category is intended for use assigned as an additional code on the patient's (ie mother's) record to identify the outcome of delivery on the mother's record.~~

Code first the delivery (O80–O84).

...

Z38**Liveborn infants according to place of birth**

▽ 1607

Code first any morbid condition, or observation for suspected condition (Z03.7-), if applicable.

Excludes: second or subsequent admission – omit code

- Z38.0 Singleton, born in hospital
- Z38.1 Singleton, born outside hospital
- Z38.2 Singleton, unspecified as to place of birth
Liveborn infant NOS
- Z38.3 Twin, born in hospital
- Z38.4 Twin, born outside hospital
- Z38.5 Twin, unspecified as to place of birth
- Z38.6 Other multiple, born in hospital
- Z38.7 Other multiple, born outside hospital
- Z38.8 Other multiple, unspecified as to place of birth

Z39**Postpartum care and examination****Z39.0****Postpartum care and examination immediately after delivery**

▽ 1548

Care and observation in the period of 42 days following delivery (including delivery of placenta)

Excludes: admission for postpartum complications after the puerperal period — see *Alphabetic Index*

- ✦Z39.00 Postpartum care and examination after delivery, unspecified
- ✦Z39.01 Postpartum care after hospital delivery
- ✦Z39.02 Postpartum care after planned, out of hospital delivery
- ✦Z39.03 Postpartum care after unplanned, out of hospital delivery
- Z39.1 Care and examination of lactating mother
Breastfeeding (attachment) difficulty without disorder of lactation
Supervision of lactation
Excludes: [breast infections associated with lactation \(O91.-\)](#)
disorders of lactation (O92.-)
[noninfective disorders of breast associated with lactation \(O92.-\)](#)
- Z39.2 Routine postpartum follow-up

...

Z41 **Procedures for purposes other than remedying health state**

...

Z41.2 Routine and ritual circumcision

[▽ 1607](#)

[Code first liveborn infant according to place of birth \(Z38.-\), if applicable.](#)

Z41.3 Ear piercing

...

Z53 **Persons encountering health services for specific procedures, not carried out**

[▽ 0011, 0019, 0050, 1551](#)

Excludes: immunisation not carried out (Z28.-)

Z53.0 Procedure not carried out because of contraindication

Z53.1 Procedure not carried out because of patient's decision for reasons of belief or group pressure

Z53.2 Procedure not carried out because of patient's decision for other and unspecified reasons

Z53.8 Procedure not carried out for other reasons

Z53.9 Procedure not carried out, unspecified reason

Alphabetic Index

GENERAL ARRANGEMENT OF THE ALPHABETIC INDEX OF DISEASES

...

SEQUENCE

Lead terms are ~~usually~~ sequenced alphabetically.

EXAMPLE 51:

Bee sting
Beer drinker's heart
Descemetocoele
Descemet's membrane
Fibromyxosarcoma
Fibro-odontoma, ameloblastic

...

EXAMPLE 62:

~~Pregnancy~~

~~-duration~~

~~— < 5 completed weeks O09.0~~

~~— 5–13 completed weeks O09.1~~

~~— 14–19 completed weeks O09.2~~

~~— 20–25 completed weeks O09.3~~

~~— 26–33 completed weeks O09.4~~

~~— 34–<37 completed weeks O09.5~~

~~— unspecified duration of pregnancy O09.9~~

Preterm (infant) NEC P07.30

- 28 completed weeks or more but less than 32 completed weeks P07.31

- 32 completed weeks or more but less than 37 completed weeks P07.32

- extremely

- - 24 completed weeks or more but less than 28 completed weeks P07.22

- - less than 24 completed weeks P07.21

Abnormal, abnormality, abnormalities — see also *Anomaly*

...

- finding

- - antenatal screening—(mother) O28.9

...

- membranes (fetal)

- - affecting fetus or newborn P02.9

- - - specified type NEC P02.8

- - complicating pregnancy O41.9

~~- - - specified type, affecting fetus or newborn P02.8~~

- movement (disorder) (see also *Disorder/movement*) G25.9

...

- parturition — see also *Pregnancy/complicated by*

- - affecting fetus or newborn P03.9

~~- - mother — see *Pregnancy/complicated by*~~

- pelvis (bony) — see *Deformity/pelvis*

...

Aborter, habitual or recurrent [N96](#)

~~- without current pregnancy N96~~

- care in current pregnancy O26.2

- current abortion — see [also O03–O06-Abortion/by type](#)

- - affecting fetus ~~or newborn~~ P01.8

Abortion (complete) (incomplete) O06.-

- accidental ([see also Abortion/spontaneous](#)) ~~O03–O03.9~~

- affecting fetus or newborn P96.4

- attempted ~~(failed) (induced) (nonmedical) O07.9~~ — see [Abortion/failed attempted](#)

~~- complicated by~~

~~— afibrinogenaemia O07.6~~

~~— cardiac arrest O07.8~~

~~— chemical damage of pelvic organ(s) O07.8~~

~~— circulatory collapse O07.8~~

~~— defibrination syndrome O07.6~~

~~— electrolyte imbalance O07.8~~

~~— embolism (amniotic fluid) (blood clot) (pulmonary) (septic) (soap) O07.7~~

~~— endometritis O07.5~~

~~— haemorrhage (delayed) (excessive) O07.6~~

~~— infection, genital tract or pelvic O07.5~~

~~— intravascular coagulation O07.6~~

~~— kidney failure or shutdown (acute) O07.8~~

~~— laceration of pelvic organ(s) O07.8~~

~~— oliguria O07.8~~

~~— oophoritis O07.5~~

~~— parametritis O07.5~~

~~— pelvic peritonitis O07.5~~

~~— perforation of pelvic organ(s) O07.8~~

~~— renal failure or shutdown O07.8~~

~~— salpingitis or salpingo-oophoritis O07.5~~

~~— sepsis O07.5~~

~~— shock O07.8~~

~~— specified condition NEC O07.8~~

~~— tubular necrosis (renal) O07.8~~

~~— urinary infection O07.8~~

~~— illegal O07.-~~

~~— medical O07.4~~

~~— complicated by~~

~~— afibrinogenaemia O07.1~~

~~— cardiac arrest O07.3~~

~~— chemical damage of pelvic organ(s) O07.3~~

~~— circulatory collapse O07.3~~

~~— defibrination syndrome O07.1~~

~~— electrolyte imbalance O07.3~~

~~— embolism (amniotic fluid) (blood clot) (pulmonary) (septic) (soap) O07.2~~

~~— endometritis O07.0~~

~~— haemorrhage (delayed) (excessive) O07.1~~

~~— infection, genital tract or pelvic O07.0~~

~~— intravascular coagulation O07.1~~

~~— kidney failure or shutdown (acute) O07.3~~

~~— laceration of pelvic organ(s) O07.3~~

~~— oliguria O07.3~~

- ~~oophoritis O07.0~~
- ~~parametritis O07.0~~
- ~~pelvic peritonitis O07.0~~
- ~~perforation of pelvic organ(s) O07.3~~
- ~~renal failure or shutdown O07.3~~
- ~~salpingitis or salpingo-oophoritis O07.0~~
- ~~sepsis O07.0~~
- ~~shock O07.3~~
- ~~specified condition NEC O07.3~~
- ~~tubular necrosis (renal) O07.3~~
- ~~urinary infection O07.3~~

| | Complication of
a A ab ortion ₇
(current episode)
(O03–O06) | Complication of
pregnancy with abortive
outcome ₇
(subsequent episode)
(O08) | |
|--|---|---|--|
| | complete or
unspecified | incomplete | |

Note: The following fourth character list is provided to be used are assigned with categories O03–O06 and O08.

O03–O06 – assigned for episodes of care in which an abortion was treated, performed or occurred, and any resulting complication(s) were also treated.

O08 – assigned for complication(s) of ectopic or molar pregnancy, or complication(s) of abortion where the abortion was treated, performed or occurred prior to the episode of care.

~~A distinction is made between an episode of care at which a disease or injury and resulting complications or manifestations are treated together – 'current episode' – and an episode of care for complications or manifestations of diseases or injuries treated previously – 'subsequent episode'.~~

Abortion (complete) (incomplete)

| | | | |
|--|---------------|---------------|---------------|
| - complicated (by) | .8 | .3 | .9 |
| - - afibrinogenaemia | .6 | .1 | .1 |
| <u>- - anuria</u> | <u>.8</u> | <u>.3</u> | <u>.4</u> |
| - - cardiac arrest..... | .8 | .3 | .8 |
| <u>- - cellulitis, pelvic.....</u> | <u>.5</u> | <u>.0</u> | <u>.0</u> |
| - - chemical damage (burn), pelvic organ(s) or tissue .. | .8 | .3 | .6 |
| bladder | .8 | .3 | .6 |
| bowel..... | .8 | .3 | .6 |
| broad ligament..... | .8 | .3 | .6 |
| cervix..... | .8 | .3 | .6 |
| periurethral tissue..... | .8 | .3 | .6 |
| uterus..... | .8 | .3 | .6 |
| - - circulatory collapse | .8 | .3 | .3 |
| condition specified NEC..... | .8 | .3 | .8 |
| - - damage to pelvic organ(s) or tissues NEC | .8 | .3 | .6 |
| - - defibrination syndrome | .6 | .1 | .1 |
| - - electrolyte imbalance | .8 | .3 | .5 |
| - - embolism (any type) | .7 | .2 | .2 |
| air..... | .7 | .2 | .2 |
| amniotic fluid..... | .7 | .2 | .2 |
| blood clot..... | .7 | .2 | .2 |

| | | | |
|---|---------------|---------------|---------------|
| pulmonary | .7 | .2 | .2 |
| pyaemic | .7 | .2 | .2 |
| septic | .7 | .2 | .2 |
| septicopyaemic | .7 | .2 | .2 |
| soap | .7 | .2 | .2 |
| - - endometritis | .5 | .0 | .0 |
| - - fibrinolysis | .6 | .1 | .1 |
| - - haemorrhage (delayed) (excessive) | .6 | .1 | .1 |
| - - infection | | | |
| - - - genital (organ) (tract) | .5 | .0 | .0 |
| - - - pelvic (organ) | .5 | .0 | .0 |
| - - - urinary (organ) (tract) | .8 | .3 | .8 |
| - - injury, pelvic organ(s) or tissue | .8 | .3 | .6 |
| - - intravascular coagulation (haemolysis) | .6 | .1 | .1 |
| - - kidney failure or shutdown (acute) | .8 | .3 | .4 |
| - - laceration, pelvic organ(s) or tissue | .8 | .3 | .6 |
| bladder | .8 | .3 | .6 |
| bowel | .8 | .3 | .6 |
| broad ligament | .8 | .3 | .6 |
| cervix | .8 | .3 | .6 |
| perirethral tissue | .8 | .3 | .6 |
| uterus | .8 | .3 | .6 |
| - - lymphangitis | .8 | .3 | .8 |
| - - metabolic disorder | .8 | .3 | .5 |
| - - oliguria | .8 | .3 | .4 |
| - - oophoritis | .5 | .0 | .0 |
| - - parametritis | .5 | .0 | .0 |
| - - pelvic infection (inflammatory disease) peritonitis | .5 | .0 | .0 |
| - - perforation, pelvic organ(s) or tissue | .8 | .3 | .6 |
| bladder | .8 | .3 | .6 |
| bowel | .8 | .3 | .6 |
| cervix | .8 | .3 | .6 |
| uterus | .8 | .3 | .6 |
| - - peritonitis, pelvic | .5 | .0 | .0 |
| - - phlebitis, pelvic | .5 | .0 | .0 |
| renal failure or shutdown (acute) | .8 | .3 | .4 |
| - - salpingitis | .5 | .0 | .0 |
| - - salpingo-oophoritis | .5 | .0 | .0 |
| - - sepsis | .5 | .0 | .0 |
| - - shock (postprocedural) | .8 | .3 | .3 |
| - - specified condition NEC | .8 | .3 | .8 |
| - - tear, pelvic organ(s) or tissue | .8 | .3 | .6 |
| bladder | .8 | .3 | .6 |
| bowel | .8 | .3 | .6 |
| broad ligament | .8 | .3 | .6 |

| | | | |
|---|---------------|---------------|---------------|
| — cervix..... | .8 | .3 | .6 |
| — periurethral tissue..... | .8 | .3 | .6 |
| — uterus..... | .8 | .3 | .6 |
| <u>-- thrombophlebitis, pelvic.....</u> | <u>.5</u> | <u>.0</u> | <u>.0</u> |
| <u>-- thrombosis.....</u> | <u>.8</u> | <u>.3</u> | <u>.7</u> |
| - - tubular necrosis (kidney)(renal)..... | .8 | .3 | .4 |
| - - uraemia..... | .8 | .3 | .4 |
| — urinary infection..... | .8 | .3 | .8 |
| <u>-- vaginitis.....</u> | <u>.5</u> | <u>.0</u> | <u>.0</u> |
| <u>-- venous disorder NEC.....</u> | <u>.8</u> | <u>.3</u> | <u>.7</u> |

Abortion (complete) (incomplete)

- failed attempted — ~~see Abortion/attempted~~ (without complication) O07.9

- - complicated by

- - - afibrinogenaemia O07.6

- - - defibrination syndrome O07.6

- - - embolism (any type) O07.7

- - - haemorrhage (delayed) (excessive) O07.6

- - - infection

- - - - genital (organ) (tract) O07.5

- - - - pelvic (organ) O07.5

- - - - urinary (organ) (tract) O07.8

- - - - intravascular coagulation O07.6

- - - - specified condition NEC O07.8

- - medical O07.4

- - - complicated by

- - - - afibrinogenaemia O07.1

- - - - defibrination syndrome O07.1

- - - - embolism (any type) O07.2

- - - - haemorrhage (delayed) (excessive) O07.1

- - - - infection

- - - - - genital (organ) (tract) O07.0

- - - - - pelvic (organ) O07.0

- - - - - urinary (organ) (tract) O07.3

- - - - - intravascular coagulation O07.1

- - - - - specified condition NEC O07.3

~~— fetus or newborn P96.4~~

- following threatened abortion ~~O03~~ — ~~see Abortion/spontaneous~~

- habitual or recurrent N96

~~— with current abortion — see O03–O06~~

~~— fetus P01.8~~

~~— without current pregnancy N96~~

- - care in current pregnancy O26.2

- - current abortion — ~~see Abortion/by type~~

- - - affecting fetus P01.8

- illegal O05.-

- - failed attempted — ~~see Abortion/failed attempted~~

- induced O06.-

- - for

- - - legal indications O04.-

- - - medical indications O04.-

- - - psychiatric indications O04.-

- - failed attempted — ~~see Abortion/failed attempted~~

- - initiation (supervision) Z32.2

- - nonmedical O05.-

- - initiation (supervision) Z32.2

- legal (~~induced~~) O04.-

~~— fetus P96.4~~

- - failed attempted — ~~see Abortion/failed attempted/medical~~

- - initiation (supervision) Z32.2

- medical O04.-

- - failed attempted — ~~see Abortion/failed attempted/medical~~

~~— fetus P96.4~~

- - initiation (supervision) Z32.2

- missed O02.1
- operative ([using surgical interventions](#)) — see *Abortion/medical*
- spontaneous O03.-
 - ~~with~~
 - ~~complication (incomplete) NEC O03.3~~
 - ~~complete O03.8~~
 - ~~damage to pelvic organ (incomplete) (laceration) (rupture) (tear) O03.3~~
 - ~~complete O03.8~~
 - ~~embolism (air) (amniotic fluid) (blood clot) (incomplete) (pulmonary) (pyaemic) (septic) (soap) O03.2~~
 - ~~complete O03.7~~
 - ~~genital tract and pelvic infection (incomplete) O03.0~~
 - ~~complete O03.5~~
 - ~~haemorrhage (delayed) (excessive) (incomplete) O03.1~~
 - ~~complete O03.6~~
 - ~~kidney failure or shutdown (acute) (incomplete) O03.3~~
 - ~~complete O03.8~~
 - ~~metabolic disorder (incomplete) O03.3~~
 - ~~complete O03.8~~
 - ~~renal failure or shutdown (acute) (incomplete) O03.3~~
 - ~~complete O03.8~~
 - ~~sepsis (genital tract) (incomplete) (pelvic organ) O03.0~~
 - ~~complete O03.5~~
 - ~~urinary tract (incomplete) O03.3~~
 - ~~complete O03.8~~
 - ~~shock (incomplete) (postprocedural) O03.3~~
 - ~~complete O03.8~~
 - ~~specified complication (incomplete) NEC O03.3~~
 - ~~complete O03.8~~
 - ~~toxaemia (incomplete) O03.3~~
 - ~~complete O03.8~~
 - ~~urinary tract infection (incomplete) O03.3~~
 - ~~complete O03.8~~
- - without complication (incomplete) O03.9⁴
 - ~~complete O03.9~~
 - ~~incomplete O03.4~~
 - ~~fetus P01.8~~
 - ~~affecting fetus P01.8~~
 - ~~complicated by — see also *Abortion/complicated by*~~
 - ~~embolism (any type) (complete) O03.7~~
 - ~~incomplete O03.2~~
 - ~~genital tract and pelvic infection (complete) O03.5~~
 - ~~incomplete O03.0~~
 - ~~haemorrhage (complete) (delayed) (excessive) O03.6~~
 - ~~incomplete O03.1~~
 - ~~specified complication (complete) NEC O03.8~~
 - ~~incomplete O03.3~~
- - threatened O20.0
 - - - affecting fetus or newborn P01.8
- therapeutic O04.-
 - ~~fetus P06.4~~
 - ~~failed attempted — see *Abortion/failed attempted/medical*~~
 - ~~initiation (supervision) Z32.2~~
- threatened (~~spontaneous~~) O20.0
 - - affecting fetus or newborn P01.8
- tubal O00.1

...

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

...

- areola (acute) (chronic) (nonpuerperal) N61
- - [associated with lactation O91.0-](#)
- - in pregnancy O91.00
- - puerperal, postpartum O91.0-

...

- breast (acute) (chronic) (nonpuerperal) N61
- - [associated with lactation O91.1-](#)
- - in pregnancy O91.10
- - newborn P39.0
- - puerperal, postpartum O91.1-

- ...
- genital organ or tract NEC
- - female (external) N76.4
- - - following
- - - - abortion (subsequent episode) O08.0
- - - - [current episode — see Abortion](#)
- - - - ectopic or molar pregnancy O08.0
- - - puerperal O86.1
- - male N49.9

- ...
- nipple N61
- - [associated with lactation O91.0-](#)
- - in pregnancy O91.00
- - puerperal, postpartum O91.0-

- ...
- peritoneum, peritoneal (perforated) (ruptured) K65.0
- - with appendicitis K35.3
- ~~following~~
- ~~abortion (subsequent episode) O08.0~~
- ~~ectopic or molar pregnancy O08.0~~
- - pelvic
- - - female (see also Peritonitis/pelvic/female) N73.5
- - - [following](#)
- - - - abortion (subsequent episode) O08.0
- - - - [current episode — see Abortion](#)
- - - - [ectopic or molar pregnancy O08.0](#)
- - - male K65.0

- ...
- subareolar N61
- - [associated with lactation O91.1-](#)
- - in pregnancy O91.10
- - puerperal, postpartum O91.1-

...

Absence, [absent](#) (complete or partial) (organ or part)

- ...
- ejaculatory duct (congenital) Q55.43
- [end diastolic flow \(AEDF\), affecting management of pregnancy O36.5](#)
- endocrine gland (congenital) NEC Q89.29

...

Accident

- ...
- during pregnancy, ~~to~~ (mother)
- - affecting fetus or newborn P00.5

...

Addiction (see also Dependence) — code to F10–F19 with fourth character .2

- alcohol, alcoholic (ethyl) (methyl) (wood) F10.2
- - in pregnancy, childbirth or puerperium NEC O99.31
- - - affecting fetus or newborn P04.3
- - suspected damage to fetus affecting management of pregnancy O35.4
- drug NEC F19.2
- - in pregnancy, childbirth or puerperium NEC O99.31

...

Adherent — see also Adhesions

- labia (minora) N90.8
- pericardium I31.0
- - rheumatic I09.2
- placenta [NEC \(morbidly\) O43.2](#)~~O43.2~~[O73.0](#)
- [morbidly O43.2](#)
- prepuce N47

...

Admission (for)

...

- immunisation (for) vaccination — see *Vaccination*
- [initiation of medical abortion \(supervision\) Z32.2](#)
- in vitro fertilisation Z31.2

...

Advanced maternal age, affecting [management of pregnancy](#), ~~labour and delivery~~ (supervision ~~only~~)

- multigravida Z35.52
- primigravida Z35.51

...

Adynamia episodica hereditaria G72.3

[AEDF \(absent end diastolic flow\) affecting management of pregnancy O36.5](#)

Aeration lung imperfect, newborn P28.1

...

Afibrinogenaemia (see also *Defect/coagulation*) D68.8

- acquired D65
- congenital D68.2
- [following](#)
- - [abortion \(subsequent episode\) O08.1](#)
- - - [current episode — see Abortion](#)
- - [ectopic or molar pregnancy O08.1](#)
- puerperal, postpartum O72.3

...

Agalactia ([associated with lactation](#)) (postpartum) (primary) (puerperal) O92.3-

- elective, secondary or therapeutic O92.5-

...

Air

...

- embolism (any site) (artery) (cerebral) ([traumatic](#)) T79.0
- - due to implanted device NEC — see *Complication(s)/by site and type/specified NEC*
- - following ~~infusion, therapeutic injection or transfusion T80.0~~
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - [current episode — see Abortion](#)
- - - [ectopic or molar pregnancy O08.2](#)
- - - [infusion, therapeutic injection or transfusion T80.0](#)
- - in pregnancy, childbirth or puerperium NEC O88.0
- ~~traumatic T79.0~~
- hunger, psychogenic F45.34

...

Alcoholism (chronic) F10.2

- with psychosis (see also *Psychosis/alcoholic*) F10.5
- in
- - family Z63.71
- - pregnancy, childbirth or puerperium NEC O99.31

...

Antenatal

- care, normal pregnancy Z34.9
- - 1st Z34.0
- - specified NEC Z34.8
- screening (for) Z36.9
- - abnormal findings — see *Abnormal/finding/antenatal screening*, ~~mother~~

...

Arrest, arrested

- ...
- cardiac I46.9
- - with successful resuscitation I46.0
- - complicating
- - - anaesthesia (general) (local) or other sedation
- - - - correct substance properly administered I46.9
- - - - overdose or wrong substance given T41.-
- - - - specified anaesthetic — see *Table of drugs and chemicals*
- - following
- - - abortion (subsequent episode) O08.8
- - - - current episode — see *Abortion*
- - - ectopic or molar pregnancy O08.8
- - newborn P29.1
- cardiorespiratory (see also *Arrest/cardiac*) I46.9

...

Ascites (abdominal) R18

- chylous (nonfilarial) I89.8
- - filarial (see also *Filaria*) B74.9
- fetal, ~~affecting labour or delivery (mother) O66.3~~
- - with disproportion (fetopelvic) O33.7
- - - affecting labour or delivery O66.3
- - affecting labour or delivery O66.3
- malignant C78.6

...

Atonia, atony, atonic

- ...
- uterus (~~postpartum~~) (~~during labour~~) O72.4 O62.2
- - affecting fetus or newborn P03.6
- ~~during labour O62.2~~
- Atopy** — see *Hypersensitive, hypersensitiveness, hypersensitivity*

...

Atrophy, atrophic

- ...
- breast N64.2
- - associated with lactation O92.2-
- - puerperal, postpartum O92.2-

...

Avulsion (traumatic) T14.7

- ...
- cartilage (see also *Dislocation/by site*) T14.3
- - symphyseal (inner), ~~complicating delivery~~ due to obstetric trauma (during labour and delivery) O71.6
- external site other than limb — see *Wound, open/by site*
- ...
- symphyseal cartilage (inner), ~~complicating delivery~~ due to obstetric trauma (during labour and delivery) O71.6
- - symphysis pubis, due to obstetric trauma (during labour and delivery) O71.6
- tendon — see *Injury/muscle*

...

Birth

- abnormal, affecting fetus or newborn P03.9
- complications ~~in~~ (mother) NEC (see also *Pregnancy/complicated by*) O75.9
- defect — see *Anomaly*
- delayed, [affecting fetus or newborn](#) P03.8
- difficult, affecting fetus or newborn P03.9

...

- immature [NEC](#) P07.30
- - 28 completed weeks or more but less than 32 completed weeks P07.31
- - 32 completed weeks or more but less than 37 completed weeks P07.32
- - extremely
- - - 24 completed weeks or more but less than 28 completed weeks P07.22
- - - less than 24 completed weeks P07.21

...

- palsy or paralysis, newborn ([due to](#) birth trauma) NEC P14.9

...

- precipitate, affecting fetus or newborn P03.5
- premature (infant) [NEC](#) P07.30
- - 28 completed weeks or more but less than 32 completed weeks P07.31
- - 32 completed weeks or more but less than 37 completed weeks P07.32
- - extremely
- - - 24 completed weeks or more but less than 28 completed weeks P07.22
- - - less than 24 completed weeks P07.21
- [preterm \(infant\) NEC P07.30](#)
- - [28 completed weeks or more but less than 32 completed weeks P07.31](#)
- - [32 completed weeks or more but less than 37 completed weeks P07.32](#)
- - extremely
- - - [24 completed weeks or more but less than 28 completed weeks P07.22](#)
- - - [less than 24 completed weeks P07.21](#)
- prolonged, affecting fetus or newborn P03.8

...

Blister (see also *Injury/superficial*) T14.02

...

- nipple S20.12
- - [associated with lactation O92.2-](#)
- - in pregnancy O92.20
- - puerperal, postpartum O92.2-

...

Block, blocked, blockage — see also *Obstruction*

...

- conduction I45.9
- [duct\(s\), breast](#)
- - [associated with lactation O92.2-](#)
- - [in pregnancy O92.20](#)
- - [puerperal, postpartum O92.2-](#)
- fascicular (left) I44.6

...

- Wenckebach (types I and II) I44.1

~~Blockage~~ — see *Obstruction*

Blocq's disease F44.4

...

Blue(s)

...

- puerperal, [postpartum](#) F53.8

...

Breakdown

...

- ~~perineum (obstetric) O90.1~~
- [perineal wound, obstetric O90.1](#)
- wound — see *Disruption/wound*

...

Bruise (skin surface intact) (see also *Contusion*) T14.05

- with open wound — see *Wound, open*
- fetus or newborn P54.5
- internal organ — see *Injury/by site*
- nipple S20.0

[-- associated with lactation O92.2-](#)

- - in pregnancy O92.20

- - puerperal, postpartum O92.2-

- scalp, ~~due to birth trauma, newborn P12.3~~ [S00.05](#)

[- - due to birth trauma P12.3](#)

- umbilical cord O69.5

...

Burn (electricity) (flame) (hot gas, liquid or object) (steam) (thermal) T30.0

...

- chemical (acids) (alkalines) (caustics) (external) (internal) — see [also Burn/by site](#)

[-- pelvic organ\(s\) or tissue](#)

[-- - following abortion \(subsequent episode\) O08.6](#)

[-- - - current episode — see Abortion](#)

- chest wall T21.-

...

- pelvis, [pelvic \(organ\(s\) or tissue\) T21.-](#)

[-- chemical, following abortion \(subsequent episode\) O08.6](#)

[-- - current episode — see Abortion](#)

- penis T21.-

...

Caked breast ([associated with lactation](#)) (postpartum) (puerperal) O92.2-

...

Care (following) (for) (of)

...

- lactation ~~ng~~ (mother) ([without lactation disorder](#)) Z39.1

- - for

- - - blocked ducts O92.2-

- - - breast ~~disorder (implants) (lump) (reduction) NEC O92.2-~~

[-- - - abscess O91.1-](#)

[-- - - disorder \(implants\) \(lump\) \(reduction\) NEC O92.2-](#)

[-- - - infection — see Mastitis](#)

- - - delayed milk supply O92.4-

- - - engorgement O92.2-

[-- - galactorrhoea O92.6-](#)

[-- - hypogalactia O92.4-](#)

- - - insufficient milk supply O92.4-

[-- - mastitis — see Mastitis](#)

- - - nipple

- - - - blistered O92.2-

- - - - bruised O92.2-

- - - - cracked (fissure) O92.1-

- - - - grazed O92.2-

[-- - - infection O91.0-](#)

- - - - inverted O92.0-

- - - - retracted O92.0-

- - - - transposition O92.2-

- - - oversupply of milk O92.6-

...

Carpal tunnel syndrome G56.0

- in pregnancy, childbirth or puerperium O99.32

...

Cephalocele, cephal(o)haematocele — see [Cephalhaematocele, cephal\(o\)haematocele](#)

~~- fetus or newborn P52.8~~

~~- birth trauma P10.8~~

~~- traumatic S09.8~~

Cephalematoma, cephalhaematoma (calcified)

[- due to birth trauma P12.0](#)

~~- fetus or newborn (birth trauma) P12.0~~

- traumatic S09.8

Cephalgia, cephalgia (see also *Headache*) R51

- nonorganic origin F45.4

[Cephalhaematocele, cephal\(o\)haematocele](#)

- due to birth trauma P10.8

- fetus or newborn P52.8

- traumatic S09.8

...

Chemical burn — see also *Burn/by site*

~~- following induced abortion — O08.6~~

- pelvic organ(s) or tissue

- - following abortion (subsequent episode) O08.6

- - - current episode — see *Abortion*

Chemodectoma (M8693/1) — see *Paraganglioma/extra-adrenal*

...

Chignon (disease) B36.8

- due to birth trauma (from vacuum extraction) P12.1

~~- fetus or newborn (birth trauma) (from vacuum extraction) P12.1~~

Chilblain(s) T69.1

...

Chorioamnionitis O41.1

- affecting fetus or newborn P02.7

~~- fetus or newborn P02.7~~

Chorioangioma (M9120/0) O02.8

...

Collapse R55

...

- cardiovascular (*see also Collapse/circulatory*) R57.9

~~- newborn P29.89~~

- circulatory (peripheral) R57.9

- - during or after labour and delivery O75.1

- - fetus or newborn P29.89

- - following

- - - abortion (subsequent episode) O08.3

- - - - current episode — see *Abortion*

- - - ectopic or molar pregnancy O08.3

- during or after labour and delivery O75.1

...

Complication(s) (from) (of)

[- abortion \(subsequent episode\) \(see also Abortion/complicated\) NEC O08.9](#)

- accidental puncture or laceration during procedure NEC T81.2

...

- anaesthesia, anaesthetic NEC (*see also Anaesthesia/complication or reaction NEC*) T88.59

- - awareness (during) T88.53

- - due to

- - - correct substance properly administered T88.59

- - - overdose or wrong substance given T41.-

- - - - specified anaesthetic — see *Table of drugs and chemicals*

- - failed T88.53

- - headache T88.52

- - hyperthermia, malignant T88.3

- - hypothermia NEC T88.51

~~- in abortion — see Abortion~~

- - intubation (endotracheal)

- - - difficult T88.42

- - - failed T88.41

- - malignant hyperthermia T88.3

- - shock T88.2

...

- caesarean section wound (puerperal) NEC O90.8

- - dehiscence, ~~uterine scar (during labour) O71.1-~~ [O90.0](#)

~~- - before onset of labour (in pregnancy) O71.0-~~

[- - - due to obstetric trauma](#)

[- - - before onset of labour \(in pregnancy\) O71.0-](#)

[- - - during labour O71.1-](#)

- - - - - disruption O90.0
- - - - - [due to obstetric trauma](#)
- - - - - [before onset of labour \(in pregnancy\) O71.0-](#)
- - - - - [during labour O71.1-](#)
- - - haematoma O90.2
- - - infection O86.0
- ...
- ear (*see also Complication(s)/by site and type*) H93.9
- - - device, implant or graft (auditory brainstem implant) (cochlear) (middle ear) NEC T85.88
- - - - - embolism T85.84
- - - - - haemorrhage (bleeding) T85.83
- - - - - infection or inflammation T85.77
- - - - - mechanical T85.62
- - - - - occlusion T85.84
- - - - - pain T85.85
- - - - - stricture (stenosis) T85.86
- - - - - thrombosis T85.84
- - - intraoperative or postprocedural H95.9
- - - - - following mastoidectomy NEC H95.19
- - - - - granulation H95.12
- - - - - inflammation (chronic) H95.11
- - - - - mucosal cyst H95.13
- - - - - specified NEC H95.8
- [ectopic or molar pregnancy \(see also Abortion/complicated\) O08.9](#)
- electronic stimulator device (electrode(s)) (pulse generator)
- ...
- fixation device, internal (orthopaedic) T84.9
- - - infection or inflammation T84.6
- - - mechanical T84.2
- - - - - bones of limb T84.1
- - - - - specified NEC T84.89
- - following
- - - abortion ([subsequent episode](#)) (*see also Abortion/complicated*) NEC O08.9
- - - ~~specified NEC O08.8~~
- - - [current episode — see Abortion](#)
- - - acute myocardial infarction NEC I23.8
- - - - - aneurysm (false) (non-ruptured) (of cardiac wall) (of heart wall) I23.3
- - - - - haemopericardium I23.0
- - - - - rupture
- - - - - - - cardiac wall I23.3
- - - - - - - - - with haemopericardium I23.0
- - - - - - - chordae tendineae I23.4
- - - - - - - papillary muscle I23.5
- - - - - - - septal defect (heart)
- - - - - - - - - atrial I23.1
- - - - - - - - - ventricular I23.2
- - - - - - - thrombosis (heart)
- - - - - - - - - atrium I23.6
- - - - - - - - - auricular appendage I23.6
- - - - - - - - - ventricle I23.6
- - - ectopic or molar pregnancy ([see also Abortion/complicated](#)) O08.9
- - - ~~specified NEC O08.8~~
- foreign body accidentally left in body cavity or operation wound T81.5
- ...
- postprocedural T81.9
- ...
- - - dehiscence (of wound) T81.3
- - - - - caesarean section ~~O90.0~~ — [see Complication\(s\)/caesarean section wound/dehiscence](#)
- - - - - episiotomy O90.1
- - - - - disruption of wound T81.3
- - - - - caesarean section ~~O90.0~~ — [see Complication\(s\)/caesarean section wound/disruption](#)
- - - - - episiotomy O90.1
- ...
- umbilical cord
- - - affecting fetus or newborn P02.6
- - - around neck (without compression) O69.8
- - - - - with compression O69.1
- - - - - complicating delivery O69.9
- - - - - specified NEC O69.8
- - - - - compression — *see Compression/umbilical cord*

- - velamentous insertion ~~O69.8~~
- - - ~~affecting~~
- - - - ~~labour or delivery O69.8~~
- - - - ~~pregnancy O43.1~~
- ureterostomy (stoma) NEC N99.59
- ...

Contraction(s), contracture, contracted

- ...
- preterm without delivery (before 37 completed weeks of gestation) O60.0
- ...
- uterus N85.8
- - abnormal, during labour (~~complicating delivery~~) NEC O62.9
- - - affecting fetus or newborn P03.6
- - - atonic O62.2
- - - clonic O62.4
- - - due to uterine inertia — see Inertia/uterus
- - - dyscoordinate O62.4
- - - hourglass O62.4
- - - hypertonic O62.4
- - - hypotonic NEC O62.2
- - - inadequate
- - - - primary O62.0
- - - - secondary O62.1
- - - incoordinate O62.4
- - - poor O62.2
- - - specified type NEC O62.8
- - - tetanic O62.4
- - in pregnancy (false labour) O47.9
- - - with labour — see Labour
- - - at or after 37 completed weeks of gestation O47.1
- - - before 37 completed weeks of gestation O47.0
- - irregular — see Labour/false
- vagina (outlet) N89.5
- ...

Cracked nipple N64.0

- associated with lactation O92.1-
- in pregnancy O92.10
- puerperal, postpartum O92.1-
- ...

Damage

- ...
- chemical, following abortion (subsequent episode) O08.6
- - current episode — see Abortion
- coccyx, ~~complicating delivery due to obstetric trauma (during labour and delivery)~~ O71.6
- coronary (*see also Ischaemia/heart*) I25.9
- eye, ~~birth trauma P15.3 — see also Disease/eye~~
- - due to birth trauma P15.3
- kidney (*see also Disease/kidney*) N28.9
- liver (nontraumatic) K76.9
- - alcoholic K70.9
- - due to drugs — *see Disease/liver/toxic*
- - toxic — *see Disease/liver/toxic*
- pelvic (organ(s) or tissue)
- - due to obstetric trauma (during labour and delivery) O71.5
- - following
- - - abortion (subsequent episode) O08.6
- - - - current episode — see Abortion
- - - - ectopic or molar pregnancy O08.6
- - joint or ligament, ~~during delivery due to obstetric trauma (during labour and delivery)~~ O71.6
- - ~~organ NEC~~
- - ~~during delivery O71.5~~
- - ~~following~~
- - ~~abortion (subsequent episode) O08.6~~
- - ~~current episode — see Abortion~~
- - ~~ectopic or molar pregnancy O08.6~~
- placenta, affecting fetus or newborn

...

Dehiscence

- caesarean [section](#) wound ([puerperal](#)) O90.0
- - [due to obstetric trauma](#)
- - - [before onset of labour \(in pregnancy\) O71.0-](#)
- - - [during labour O71.1-](#)
- episiotomy O90.1
- operation wound NEC T81.3
- perineal wound (~~postpartum~~[puerperal](#)) O90.1
- postprocedural NEC T81.3
- uterine scar (~~during labour~~) [O71.1-](#)
- - [due to obstetric trauma](#)
- - - [before onset of labour \(in pregnancy\) O71.0-](#)
- - - [during labour O71.1-](#)
- ~~before onset of labour O71.0-~~

...

Delay, delayed

- ~~birth or delivery NEC O63.9~~
- ~~affecting fetus or newborn P03.8~~
- closure, ductus arteriosus (Botalli) P29.3
- coagulation (*see also Defect/coagulation*) D68.9
- conduction (cardiac) (ventricular) I45.8
- ~~delivery, 2nd twin, triplet, etc. O63.2~~
- [delivery \(see also Labour/prolonged or protracted\) NEC O63.9](#)
- - [affecting fetus or newborn P03.8](#)
- - [second or subsequent fetus in multiple delivery O63.2](#)
- development R62.9

...

- menstruation (cause unknown) N91.0
- milestone R62.0
- [milk supply O92.4-](#)
- plane in pelvis, complicating delivery O66.9
- primary respiration (*see also Asphyxia/newborn*) P21.9
- puberty (constitutional) E30.0
- union, fracture M84.2-

...

Delivery (single) (spontaneous) (vertex) NEC O80

...

...

- early onset ([before 37 completed weeks of gestation](#)) (with spontaneous labour) NEC O60.1
- - without spontaneous labour O60.3
- forceps NEC O81

...

- premature ~~or preterm (with spontaneous labour) NEC O60.1~~ — [see Delivery/preterm](#)
- ~~without spontaneous labour O60.3~~
- ~~previous, affecting management of pregnancy Z35.2~~
- [preterm \(before 37 completed weeks of gestation\) \(with spontaneous labour\) NEC O60.1](#)
- - [without spontaneous labour O60.3](#)
- - [history, affecting management of pregnancy \(supervision\) Z35.2](#)
- threatened ~~premature (before 37 weeks of gestation) O47.0~~ — [see Labour/false](#)

...

Dependence

- due to
- - alcohol (ethyl) (methyl) F10.2
- - - counselling and surveillance Z71.4
- - - detoxification therapy Z50.2
- - - in pregnancy, childbirth or puerperium O99.31
- ...
- - drug NEC F19.2
- - - combinations F19.2
- - - counselling and surveillance Z71.5
- - - in pregnancy, childbirth or puerperium O99.31

...

Detachment

- cartilage (see also *Sprain*) T14.3
- cervix, annular, ~~(complicating delivery)~~ [due to obstetric trauma \(during labour and delivery\)](#) O71.3
- choroid (old) (postinfectious) (simple) (spontaneous) H31.4

...

Diabetes, diabetic (controlled) (mellitus) (without complication) E1-.9

...

- with

...

- - postural hypotension E1-.43
- - [pregnancy, childbirth or puerperium — see *Diabetes, diabetic/in pregnancy, childbirth or puerperium*](#)
- - preretinal haemorrhage E1-.33

...

Diastasis

...

- recti (abdominal muscle) (DRAM)
- - congenital Q79.52
- - in pregnancy, ~~or childbirth~~ [due to obstetric trauma \(during labour and delivery\)](#) O71.82

...

Difficult, difficulty (in)

- acculturation Z60.3
- birth, affecting fetus or newborn P03.9
- feeding NEC R63.3
- - breast, ~~due to (without lactation disorder)~~ [— \(see also *Care/lactation of mother*\) Z39.1](#)
- - newborn P92.9

...

Disease, diseased — see also *Syndrome*

...

- breast N64.9
- - [associated with lactation O92.2-](#)
- - cystic (chronic) N60.1

...

- facial nerve (seventh) G51.9
- - [due to birth trauma P11.3](#)
- - ~~newborn (birth trauma) P11.3~~
- factitious F68.1

...

- malignant (M8000/3) — see also *Neoplasm/malignant*
- - [history — see also *History/malignant neoplasm*](#)
- - - [affecting management of pregnancy \(supervision\) Z35.8](#)
- - ~~previous, affecting management of pregnancy Z35.8~~
- maple-syrup-urine E71.0

...

- nervous system G98
- - autonomic G90.9
- - central G96.9
- - - specified NEC G96.8
- - in pregnancy, childbirth or puerperium O99.32

...

Dislocation (articular) ([traumatic](#)) T14.3

...

- elbow (radioulnar) (ulnohumeral) S53.10
- - anterior S53.11
- - congenital Q74.09
- - lateral S53.14
- - medial S53.13
- - posterior S53.12
- - recurrent ([nontraumatic](#)) M24.42
- - specified NEC S53.18
- eye, eyeball; ([nontraumatic](#)) H44.8

...

- hip (acetabulum) (femur proximal end) S73.00
- - anterior S73.02
- - congenital Q65.2
- - - bilateral Q65.1
- - - unilateral Q65.0
- - posterior S73.01
- - prosthesis S73.0-
- - - mechanical complication T84.0
- - recurrent ([nontraumatic](#)) M24.45
- - specified NEC S73.08

...

- joint (~~nontraumatic~~) ~~NEC M24.3~~ ~~T09.2~~
- - [nontraumatic NEC M24.3](#)-
- - - [recurrent M24.4](#)-
- - - ~~recurrent M24.4~~
- - - ~~traumatic T09.2~~
- knee (tibia, proximal end) (tibiofibular joint) S83.10
- - anterior S83.11
- - cap S83.0
- - congenital Q74.12
- - lateral S83.14
- - medial S83.13
- - old ([nontraumatic](#)) M23.8-
- - pathological ([nontraumatic](#)) M24.36
- - posterior S83.12
- - - femur (distal end) S83.11
- - recurrent ([nontraumatic](#)) M24.46
- - specified NEC S83.18
- lacrimal gland ([nontraumatic](#)) H04.1
- leg, meaning lower limb — see *Dislocation/limb/lower*
- lens (complete) (crystalline) (partial) ~~H27.1~~ [S05.8](#)
- - congenital Q12.1
- - [nontraumatic H27.1](#)
- - ~~traumatic S05.8~~
- ligament — code as *Dislocation/by site*

...

- old ([nontraumatic](#)) M24.8-
- - knee M23.8-
- ossicles, ear ([nontraumatic](#)) H74.2
- patella S83.0
- - congenital Q74.12
- - recurrent ([nontraumatic](#)) M22.0
- pathological ([nontraumatic](#)) NEC M24.3-
- - lumbosacral joint M53.27

...

- recurrent ([nontraumatic](#)) M24.49
- - elbow M24.42

...

- sacroiliac (joint) (ligament) S33.2
- - congenital Q74.21
- - recurrent ([nontraumatic](#)) M53.28
- sacrum S33.2
- scaphoid (bone) (hand) (wrist) S63.08
- - foot S93.38
- scapula S43.3
- semilunar cartilage, knee — see *Tear/meniscus*
- septal cartilage (nose) S03.1

- septum (nasal) [\(nontraumatic\)](#) (old) J34.2
- sesamoid bone — *code as Dislocation/by site*
- shoulder (blade) (glenohumeral joint) (humerus, proximal end) (joint) (ligament) S43.00
 - - with Bankart lesion — *see ACS 1353 Bankart lesion*
 - - anterior S43.01
 - - chronic [\(nontraumatic\)](#) M24.41
 - ...
 - - recurrent [\(nontraumatic\)](#) M24.41
 - - specified part NEC S43.08
- spine T09.2
 - ...
 - spontaneous [\(nontraumatic\)](#) M24.3-
 - sternoclavicular (joint) S43.2
 - sternum S23.2
 - subglenoid S43.08
 - symphysis pubis S33.3
 - - [due to obstetric trauma \(during labour and delivery\) O71.6](#)
 - ~~obstetric (traumatic) O71.6~~
 - talus S93.0

...

Disorder (of) — *see also Disease*

- ...
- breast N64.9
 - - [associated with lactation O92.2-](#)
 - - in pregnancy O92.20
 - - puerperal, postpartum O92.2-
 - - specified NEC N64.8
- ...
- mental (nonpsychotic) (or behavioural) F99
 - ...
 - - following organic brain damage F06.9
 - - - frontal lobe syndrome F07.0
 - - - personality change F07.0
 - - - postconcussional syndrome F07.2
 - - - specified NEC F07.8
 - - [history — see also History](#)
 - - [affecting management of pregnancy \(supervision\) Z35.8](#)
 - - in pregnancy, childbirth or puerperium NEC (*see also Disorder/mental/puerperal*) O99.31
 - ...
 - - presenile, psychotic F03
 - ~~previous, affecting management of pregnancy Z35.8~~
 - - psychoneurotic (*see also Neurosis*) F48.9
 - ...
 - metabolism, [metabolic](#) NEC E88.9
 - ...
 - - following ~~abortion O08.5~~
 - - - [abortion \(subsequent episode\) O08.5](#)
 - - - [current episode — see Abortion](#)
 - - - [ectopic or molar pregnancy O08.5](#)
 - - fructose E74.1

...

Disruption

- ...
- wound
 - - episiotomy O90.1
 - - operation NEC T81.3
 - - - caesarean section ~~O90.0~~ — [see Complication\(s\)/caesarean section wound/disruption](#)
 - - perineal ~~obstetric (obstetric)~~ O90.1

...

Duration

- pregnancy — ~~see Pregnancy/duration~~ [NEC O09.9](#)
 - - [< 5 completed weeks O09.0](#)
 - - [5–13 completed weeks O09.1](#)
 - - [14–19 completed weeks O09.2](#)
 - - [20–25 completed weeks O09.3](#)
 - - [26–33 completed weeks O09.4](#)
 - - [34–< 37 completed weeks O09.5](#)

...

Dysfunction

...

- symbolic NEC R48.8
- [symphysis pubis M25.55](#)
- [in pregnancy, childbirth or puerperium O26.7](#)
- temporomandibular (joint) (joint-pain syndrome) K07.6

...

- uterus, ~~complicating delivery O62.9~~ [NEC N85.8](#)
- [during labour — see Contraction\(s\)/uterus/abnormal, during labour](#)
- ~~affecting fetus or newborn P03.6~~
- ~~hypertonic O62.4~~
- ~~hypotonic O62.2~~
- ~~primary O62.0~~
- ~~secondary O62.1~~
- ventricle, left I51.8

...

Elderly

- multigravida, affecting [management of pregnancy](#), ~~labour and delivery~~ (supervision-only) Z35.52
- primigravida, affecting [management of pregnancy](#), ~~labour and delivery~~ (supervision-only) Z35.51

...

Embolism (septic) I74.9

- air (any site) (traumatic) T79.0
- - dysbaric (postprocedural) T70.3
- - following
- - - abortion — [see Embolism/following/abortion \(subsequent episode\) O08.2](#)
- - - - current episode — [see Abortion](#)
- - - - [ectopic or molar pregnancy O08.2](#)
- - - infusion, therapeutic injection or transfusion T80.0
- - - procedure NEC T81.7
- - in pregnancy, childbirth or puerperium NEC O88.0
- amniotic fluid O88.1
- - following ~~abortion — see Embolism/following/abortion~~
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - current episode — [see Abortion](#)
- - - - [ectopic or molar pregnancy O08.2](#)
- aorta, aortic I74.1

...

- ~~birth, mother — see Embolism/in pregnancy, childbirth or puerperium~~
- blood clot
- - following ~~abortion O08.2~~
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - current episode — [see Abortion](#)
- - - - [ectopic or molar pregnancy O08.2](#)
- - in pregnancy, childbirth or puerperium O88.2

...

- pulmonary (artery) (vein) I26.9
- - with acute cor pulmonale I26.0
- - following
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - current episode — [see Abortion](#)
- - - - [ectopic or molar pregnancy O08.2](#)
- - in pregnancy, childbirth or puerperium — [see Embolism/in pregnancy, childbirth or puerperium](#)
- pyaemic (multiple) (see also Sepsis) A41.9
- - following
- - - abortion (subsequent episode) O08.2
- - - - current episode — [see Abortion](#)
- - - - [ectopic or molar pregnancy O08.2](#)
- - in pregnancy, childbirth or puerperium (any organism) O88.3
- - pneumococcal A40.3
- - - with pneumonia J13
- - specified organism NEC A41.8
- - staphylococcal A41.2
- - streptococcal A40.9
- renal (artery) N28.0
- - vein I82.3

- - - affecting fetus or newborn P29.83
- retina, retinal H34.2
- [septic, septicæmic — see also Sepsis](#)
- - following
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - [current episode — see Abortion](#)
- - - [ectopic or molar pregnancy O08.2](#)
- ~~septicæmic — see Sepsis~~
- sinus — see [Embolism/intracranial/venous sinus](#)
- soap, ~~following abortion O08.2~~
- - following
- - - [abortion \(subsequent episode\) O08.2](#)
- - - - [current episode — see Abortion](#)
- - - [ectopic or molar pregnancy O08.2](#)
- spinal cord G95.1

...

Embryotomy (single) (to facilitate delivery) O83

- [affecting fetus or newborn P03.8](#)

- ~~fetus P03.8~~

- multiple — see [Delivery/multiple](#)

...

Endometriosis ([with endosalpingioma](#)) N80.9

- ~~with endosalpingioma N80.-~~

- broad ligament N80.3

- cul-de-sac (Douglas') N80.3

- fallopian tube N80.2

- intestine N80.5

- ovary N80.1

- parametrium N80.3

- pelvic peritoneum N80.3

- peritoneal (pelvic) N80.3

- rectovaginal septum N80.4

- round ligament N80.3

- skin (scar) N80.6

- specified site NEC N80.8

- stromal (~~M8931/3~~) ~~C54.1~~

- - [malignant \(M8931/3\) C54.1](#)

- - [non-malignant — see Endometriosis/by site](#)

- thorax N80.8

- uterus N80.0

- vagina N80.4

...

Engorgement

- breast N64.5

- - [associated with lactation O92.2-](#)

- - newborn P83.4

- - puerperal, postpartum O92.2-

...

Erb(-Duchenne) paralysis (~~birth trauma~~) (~~newborn~~) P14.0

Erb-Goldflam disease or syndrome G70.0

Erb's

- disease G71.0

- palsy, paralysis (~~birth~~) (brachial) (~~newborn~~) P14.0

- - spinal (spastic), syphilitic A52.1

- pseudohypertrophic muscular dystrophy G71.0

...

Evisceration

- ~~birth trauma P15.8~~

- [due to birth trauma P15.8](#)

- operative wound T81.3

...

Examination (for) (general) (of) (routine) Z00.0

...

- lactation~~ag~~ (mother) Z39.1

...

Excess, excessive, excessively

...

- kalium E87.5

- ~~lactation~~ O92.6-

- large

...

- secretion — *see also* *Hypersecretion*

- ~~breast milk~~ O92.6-

~~milk~~ O92.6-

- sputum R09.3

- sweat R61.9

...

Extroversion

- bladder (*see also* *Ectopic, ectopia/bladder*) Q64.19

- uterus (~~sequela~~-obstetric *sequelae*) N81.4

~~complicating delivery~~ O71.2

- ~~postpartum (due to obstetric trauma)~~ O71.2

Extrusion

...

Failure, failed

...

- induction (of labour) O61.9

- by *drugs (oxytocin) (prostaglandins)* — *see* *Failure/induction/medical*

~~oxytocic drugs~~ O61.0

~~prostaglandins~~ O61.0

- abortion — *see* *Abortion/attempted*

- instrumental O61.1

- ~~with medical~~ O61.2

- mechanical O61.1

- medical O61.0

- ~~with surgical~~ O61.2

- specified NEC O61.8

- surgical O61.1

- ~~with medical~~ O61.2

- intubation, endotracheal (requiring emergency airway management procedures) T88.41

...

- to

- gain weight R62.8

- progress (in labour) (*no underlying cause*) NEC O62.9

- ~~underlying cause identified~~ — *see* *condition*

- thrive (child) NEC R62.8

- adult R64

...

- trial of labour (*no underlying cause*) (with subsequent caesarean section) O66.4

- affecting fetus or newborn P03.1

- ~~underlying cause identified~~ — *see* *condition*

- urinary — *see* *Failure/kidney*

...

False — *see also* *condition*

- joint M84.1-

- labour (~~Braxton Hicks~~) (~~irregular uterine tightenings~~) (~~irritable uterus~~) (pains) O47.9

- at or after 37 completed weeks of gestation O47.1

- before 37 completed weeks of gestation O47.0

- passage, urethra (prostatic) N36.0

- positive serological test for syphilis (Wassermann reaction) R76.2

- pregnancy F45.8

- rupture of membranes ~~O47.~~ — *see* *False/labour*

...

Feeding

- difficulties (mismanagement) NEC R63.3
- - breast ([without lactation disorder](#)) (~~due to~~) (~~postpartum~~) (~~puerperal~~) ([see also Care/lactation](#)) Z39.1
- ~~--- agalactia O92.3~~
- ~~--- blocked ducts O92.2~~
- ~~--- breast disorder (implants) (lump) (reduction) O92.2~~
- ~~--- delayed milk supply O92.4~~
- ~~--- engorgement O92.2~~
- ~~--- galactorrhoea O92.6~~
- ~~--- hypogalactia O92.4~~
- ~~--- insufficient milk supply O92.4~~
- ~~--- nipple~~
 - ~~--- blistered O92.2~~
 - ~~--- bruised O92.2~~
 - ~~--- cracked (fissure) O92.1~~
 - ~~--- grazed O92.2~~
 - ~~--- inverted O92.0~~
 - ~~--- retracted O92.0~~
 - ~~--- transposition O92.2~~
 - ~~--- oversupply of milk O92.6~~
- faulty R63.3

...

Fibrosis, fibrotic

- ...
- perineum, ~~in pregnancy~~ O34.7
- - affecting
- - - fetus or newborn P03.1
- - - labour or delivery O65.5
- - - [pregnancy](#) O34.7
- placenta O43.8

...

Fissure, fissured

- ...
- nipple N64.0
- - [associated with lactation](#) O92.1-
- - in pregnancy O92.10
- - puerperal, postpartum O92.1-

...

Fistula L98.8

- ...
- breast N61
- - [with mastitis](#) — [see Mastitis](#)
- - [associated with lactation](#) O92.1-
- - in pregnancy O92.10
- ~~--- with mastitis — see Mastitis~~
- - puerperal, postpartum O92.1-
- ~~--- with mastitis — see Mastitis~~

...

- nipple N64.0
- - [associated with lactation](#) O92.2-
- - in pregnancy O92.20
- - puerperal, postpartum O92.2-

...

Flail

- chest S22.5
- - [due to birth trauma](#) P13.8
- ~~--- newborn (birth trauma) P13.8~~
- joint (paralytic) M25.29

...

Fracture (abduction) (adduction) (avulsion) (closed) (comminuted) (compound) (compression) (depressed) (dislocated) (displaced) (elevated) (fissured) (greenstick) (impacted) (infected) (linear) (missile) (oblique) (open) (puncture) (separation) (simple) (slipped epiphysis) (spiral) T14.2-

...

- bone T14.2-

~~— birth trauma P13.9~~

[- - due to birth trauma P13.9](#)

- - following insertion of orthopaedic implant, joint prosthesis or bone plate M96.6

...

- clavicle (collar bone) (interligamentous) S42.00

- - with humerus and scapula S42.7

- - acromial end S42.03

~~— birth trauma P13.4~~

[- - due to birth trauma P13.4](#)

- - multiple S42.09

...

- femur, femoral S72.9

~~— birth trauma P13.2~~

- - cervicotrochanteric section S72.05

- - condyle(s), epicondyle(s) NEC S72.41

- - distal end — see *Fracture/femur/lower*

[- - due to birth trauma P13.2](#)

- - epiphysis

...

- skull S02.9

- - with face bone(s) (multiple) S02.7

- - base S02.1

~~— birth trauma P13.0~~

[- - due to birth trauma P13.0](#)

- - ethmoid (bone) (sinus) S02.1

...

- vertebra, vertebral (back) (body) (column) (facet) (lamina) (neural arch) (pedicle) (spinous process) (transverse process) T08.-

- - atlas S12.0

- - axis S12.1

~~— birth trauma P11.5~~

- - cervical S12.9

...

- - coccyx S32.2

- - dorsal — see *Fracture/vertebra/thoracic*

[- - due to birth trauma P11.5](#)

~~— fetus or newborn (birth trauma) P11.5~~

- - lumbar S32.00

...

Galactocele N64.8

[- associated with lactation O92.7-](#)

- in pregnancy O92.70

- puerperal, postpartum O92.7-

Galactophoritis N61

[- associated with lactation O91.2-](#)

- in pregnancy O91.20

- puerperal, postpartum O91.2-

Galactorrhoea N64.3

[- associated with lactation O92.6-](#)

- in pregnancy O92.60

- puerperal, postpartum O92.6-

...

Ganglionitis

- 5th nerve (*see also Neuralgia/trigeminal*) G50.0

- gasserian (postherpetic) (postzoster) B02.3† H58.8*

- geniculate G51.1

[- - due to birth trauma P11.3](#)

~~— newborn (birth trauma) P11.3~~

- - postherpetic, postzoster B02.2† G53.0*

...

Glaucoma H40.9

...

- traumatic H40.3
- - [due to birth trauma P15.3](#)
- ~~newborn (birth trauma) P15.3~~
- tuberculous A18.5† H42.8*

...

Graze

- nipple S20.11
- - [associated with lactation O92.2-](#)
- - in pregnancy O92.20
- - puerperal, postpartum O92.2-
- perineum, perineal (fourchette) (labia) (skin) (vagina) (vulva) S30.81
- ~~complicating delivery O70.0~~
- - [during delivery O70.0](#)

Green sickness D50.8

...

Haematocele

- female NEC N94.8
- - with ectopic pregnancy ([see also Pregnancy/by site](#)) O00.9
- - ovary N83.8

...

Haematoma (skin surface intact) (traumatic) (see also Contusion) T14.08

...

- auricle S00.45
- - nontraumatic H61.1
- ~~birth trauma NEC P15.8~~
- brain (~~traumatic~~) ([cerebellum](#)) ([cerebrum](#)) ([diffuse](#)) ([multiple](#)) S06.23
- ~~cerebellum (diffuse) (multiple) S06.23~~
- ~~focal S06.34~~
- ~~cerebrum (diffuse) (multiple) S06.23~~
- ~~focal S06.33~~
- ~~diffuse (cerebellum) (cerebrum) (intracerebral) (multiple) S06.23~~
- - [due to birth trauma P10.1](#)
- ~~fetus or newborn NEC P52.4~~
- ~~birth trauma P10.1~~
- - focal [NEC S06.33](#)
- - - cerebellum S06.34
- ~~cerebrum S06.33~~
- - nontraumatic ([see also Haemorrhage/intracerebral](#)) I61.9
- - - epidural or extradural I62.1
- - - [fetus or newborn P52.4](#)
- - - subarachnoid ([see also Haemorrhage/subarachnoid](#)) I60.9
- - - subdural ([see also Haemorrhage/subdural](#)) I62.0
- - subarachnoid, arachnoid, ~~traumatic~~ S06.6
- - subdural, ~~traumatic~~ S06.5
- breast (~~nontraumatic~~) [N64.8 S20.0](#)
- - [nontraumatic N64.8](#)
- ~~traumatic S20.0~~
- broad ligament (~~nontraumatic~~) [N83.7 S37.88](#)
- - [nontraumatic N83.7](#)
- ~~traumatic S37.88~~
- caesarean section wound O90.2
- ~~cerebellum — see Haematoma/brain~~
- cerebellar, cerebellum — [see Haematoma/brain](#)
- cerebral, cerebrum — [see Haematoma/brain](#)
- ~~complicating delivery O71.7~~
- corpus cavernosum (nontraumatic) N48.8
- [due to](#)
- - [birth trauma NEC P15.8](#)
- - [circulating anticoagulants \(heparin\) \(nontraumatic\) \(warfarin\) D68.3](#)
- epididymis (~~nontraumatic~~) [N50.1 S30.2](#)
- - [nontraumatic N50.1](#)
- ~~traumatic S30.2~~
- epidural (~~traumatic~~) S06.4
- - spinal — [see Injury/spinal cord/by region](#)
- episiotomy O90.2

- extradural (~~traumatic~~) S06.4
- face, ~~birth trauma~~ P15.4 [S00.85](#)
- - due to birth trauma P15.4
- ~~traumatic~~ S00.85
- genital organ, (~~nontraumatic~~) NEC (external site) (superficial) S30.2
- - due to obstetric trauma (during labour and delivery) O71.7
- - internal — see *Injury/by site*
- ~~female (nonobstetric)~~ N94.8
- ~~male~~ N50.1
- - nontraumatic
- - - female (nonobstetric) N94.8
- - - male N50.1
- ~~traumatic (external site), superficial~~ S30.2
- ~~internal — see Injury/by site~~
- internal organs — see *Injury/by site*
- intracerebral — see *Haematoma/brain*
- intracranial — see *Haematoma/brain*
- kidney S37.01
- labia (~~nonobstetric~~) (~~nontraumatic~~) N90.8 [S30.2](#)
- - due to obstetric trauma (during labour and delivery) O71.7
- - nontraumatic (nonobstetric) N90.8
- ~~traumatic~~ S30.2
- liver (~~nontraumatic~~) (subcapsular) ~~K76.8~~ [S36.11](#)
- ~~birth trauma~~ P15.0
- - due to birth trauma P15.0
- - nontraumatic K76.8
- ~~traumatic~~ S36.11
- lung S27.31
- mediastinum S27.88
- mesosalpinx (~~nontraumatic~~) ~~N83.7~~ [S37.88](#)
- - nontraumatic N83.7
- ~~traumatic~~ S37.88
- muscle — code as *Contusion/by site*
- ...
- obstetrical surgical wound O90.2
- orbit, orbital (~~nontraumatic~~) ~~H05.2~~ [S05.1](#)
- - nontraumatic H05.2
- ~~traumatic~~ S05.1
- pelvis (female) (~~nonobstetric~~) (~~nontraumatic~~) N94.8 (*see also Injury/by site*) [S37.9](#)
- ~~complicating delivery~~ O71.7
- - due to obstetric trauma (during labour and delivery) O71.7
- - nontraumatic (nonobstetric) N94.8
- - specified organ NEC [S37.88](#)
- ~~traumatic (see also Injury/by site)~~ S37.9
- ~~specified organ NEC (see also Injury/by site)~~ S37.88
- penis (~~nontraumatic~~) N48.8 [S30.2](#)
- ~~birth trauma~~ P15.5
- - due to birth trauma P15.5
- - nontraumatic N48.8
- ~~traumatic~~ S30.2
- perianal (~~nontraumatic~~) ~~K64.5~~ [S30.0](#)
- - nontraumatic K64.5
- perineal S30.2
- ~~complicating delivery~~ O71.7
- - due to obstetric trauma (during labour and delivery) O71.7
- ~~traumatic~~ S30.2
- ...
- perirenal S37.01
- - nontraumatic K66.1
- pinna S00.45
- - nontraumatic H61.1
- placenta O43.8
- postprocedural T81.0
- retroperitoneal (~~nontraumatic~~) ~~K66.1~~ [S36.83](#)
- - nontraumatic K66.1
- ~~traumatic~~ S36.83
- scrotum, superficial S30.2
- ~~birth trauma~~ P15.5
- - due to birth trauma P15.5
- seminal vesicle (~~nontraumatic~~) ~~N50.1~~ [S37.83](#)
- - nontraumatic N50.1

~~traumatic S37.83~~
 ...
 - spermatic cord (~~traumatic~~) S37.84
 - - nontraumatic N50.1
 - spinal (cord) (meninges) (see also *Injury/spinal cord/by region*) T09.3
[- - due to birth trauma P11.5](#)
~~fetus or newborn (birth trauma) P11.5~~
 - spleen S36.01
 - sternocleidomastoid, [due to birth trauma P15.2](#)
 - sternomastoid, [due to birth trauma P15.2](#)
 - subarachnoid (~~traumatic~~) S06.6
[- - due to birth trauma P10.3](#)
~~fetus or newborn (nontraumatic) P52.5~~
~~birth trauma P10.3~~
 - - nontraumatic (see also *Haemorrhage/subarachnoid*) I60.9
[- - - fetus or newborn P52.5](#)
 - subchorionic O43.8
 - subdural (~~traumatic~~) S06.5
~~birth injury P10.0~~
[- - due to birth trauma P10.0](#)
 - - in pregnancy, childbirth or puerperium O99.4
 - - nontraumatic (see also *Haemorrhage/subdural/nontraumatic*) I62.0
 - - - fetus or newborn (localised) P52.8
 - - - spinal G95.1
 - subgaleal (subaponeurotic) S00.05
 - - due to birth trauma P12.2
 - superficial, fetus or newborn P54.5
 - testis (~~nontraumatic~~) N50.4 [S30.2](#)
~~birth trauma P15.5~~
[- - due to birth trauma P15.5](#)
[- - nontraumatic N50.1](#)
~~traumatic S30.2~~
 - tunica vaginalis (~~nontraumatic~~) N50.4 [S30.2](#)
[- - nontraumatic N50.1](#)
~~traumatic S30.2~~
 - umbilical cord, complicating [labour and delivery O69.5](#)
 - - affecting fetus or newborn P02.6
 - uterine ligament (broad) (~~nontraumatic~~) N83.7 [S37.88](#)
[- - nontraumatic N83.7](#)
~~traumatic S37.88~~
 - vagina (~~nontraumatic~~) N89.8 [S37.88](#)
~~complicating delivery O71.7~~
[- - due to obstetric trauma \(during labour and delivery\) O71.7](#)
[- - nontraumatic N89.8](#)
~~traumatic S37.88~~
 - vas deferens (~~nontraumatic~~) N50.4 [S37.84](#)
[- - nontraumatic N50.1](#)
~~traumatic S37.84~~
 - vitreous (~~nontraumatic~~) H43.1
 - vulva (~~nonobstetric~~) (~~nontraumatic~~) N90.8 [S30.2](#)
~~complicating delivery O71.7~~
[- - due to](#)
[- - - birth trauma P15.5](#)
[- - - obstetric trauma \(during labour and delivery\) O71.7](#)
~~fetus or newborn (birth trauma) P15.5~~
[- - nontraumatic \(nonobstetric\) N90.8](#)
~~traumatic S30.2~~

Haematometra N85.7

...

Haematomyelia (central) G95.1

[- due to birth trauma P11.5](#)
~~fetus or newborn (birth trauma) P11.5~~
 - traumatic T14.4

...

Haematorachis, haematorrhachis G95.1

[- due to birth trauma P11.5](#)
~~fetus or newborn (birth trauma) P11.5~~

Haematosalpinx N83.6

Haemorrhage, haemorrhagic R58

- 3rd stage [labour \(postpartum\)-O72.0](#)

...

- brain (miliary) (nontraumatic) I61.9

- - due to

- - - birth trauma P10.1

- - - rupture of aneurysm (congenital) (*see also Haemorrhage/subarachnoid*) I60.9

- - - syphilis A52.0† I68.8*

- - fetus or newborn P52.4

~~birth trauma P10.1~~

- - in pregnancy, childbirth or puerperium O99.4

...

- cerebral, cerebrum (*see also Haemorrhage/intracerebral*) I61.9

~~due to birth trauma P10.1~~

- fetus or newborn (anoxic) P52.4

~~birth trauma P10.1~~

- - in pregnancy, childbirth or puerperium O99.4

...

- complicating

- - delivery O67.9

- - - affecting fetus or newborn P02.1

- - - associated with coagulation defect (afibrinogenaemia) (hyperfibrinolysis) (hypofibrinogenaemia) O67.0

- - - - affecting fetus or newborn P03.8

- - - due to

- - - - low-lying placenta O44.1

- - - - affecting fetus or newborn P02.0

- - - - placenta praevia O44.1

- - - - affecting fetus or newborn P02.0

- - - - premature separation of placenta (*see also Abruptio placentae*) O45.9

- - - - affecting fetus or newborn P02.1

~~retained~~

~~placenta O72.0~~

~~products of conception O72.2~~

~~secundines O72.2~~

~~partial O72.2~~

- - - - trauma O67.8

- - - - affecting fetus or newborn P03.8

- - - - uterine leiomyoma O67.8

- - - - affecting fetus or newborn P03.8

~~ectopic or molar pregnancy (subsequent episode) O08.1~~

~~labour — see also Haemorrhage/complicating/delivery~~

~~3rd-stage O72.0~~

~~puerperium — see Haemorrhage/postpartum~~

- - surgical procedure T81.0

...

- cutaneous R23.3

- - due to autosensitivity, erythrocyte D69.2

- - fetus or newborn P54.5

~~delayed~~

~~following~~

~~abortion (subsequent episode) O08.1~~

~~ectopic or molar pregnancy O08.1~~

~~postpartum O72.2~~

- diathesis (familial) D69.9

...

- epicranial subaponeurotic (massive), [due to birth trauma P12.2](#)

- epidural (traumatic) S06.4

~~excessive, following abortion or ectopic pregnancy (subsequent episode) O08.1~~

- extradural (traumatic) S06.4

~~birth trauma P10.8~~

~~due to birth trauma P10.8~~

- fetus or newborn (anoxic) (~~nontraumatic~~) P52.8

- in pregnancy, childbirth or puerperium O99.4

- nontraumatic I62.1

~~fetus or newborn (anoxic) P52.8~~

...

- following ~~abortion (subsequent episode) O08.1~~

~~abortion (delayed) (excessive) (subsequent episode) O08.1~~

~~current episode — see Abortion~~

~~current episode — see Abortion~~

- - [delivery — see Haemorrhage/postpartum](#)
- - [ectopic or molar pregnancy \(delayed\) \(excessive\) O08.1](#)
- fundus, eye H35.6
- ...
- intracerebral (nontraumatic) I61.9
- - deep I61.0
- - [due to birth trauma P10.1](#)
- - fetus or newborn P52.4
- ~~birth trauma P10.1~~
- - in
- - - brain stem I61.3
- - - cerebellum I61.4
- - - hemisphere I61.2
- - - - cortical I61.1
- - - - subcortical I61.0
- - - pregnancy, childbirth or puerperium O99.4
- - intraventricular I61.5
- - multiple localised I61.6
- - specified NEC I61.8
- - superficial I61.1
- - traumatic (diffuse) S06.23
- - - focal S06.33
- - - - cerebellum S06.34
- - - - cerebrum S06.33
- intracranial (nontraumatic) I62.9
- ~~birth trauma P10.9~~
- - [due to birth trauma P10.9](#)
- - fetus or newborn P52.9
- ...
- intraventricular I61.5
- - [due to birth trauma P10.2](#)
- - fetus or newborn (nontraumatic) P52.3
- ~~birth trauma P10.2~~
- - - grade
- - - - 1 P52.0
- ...
- postpartum (~~atonic~~) ([≤ 24 hours](#) following delivery of placenta) NEC O72.1
- ~~3rd stage O72.0~~
- - delayed or secondary ([> 24 hours post delivery of placenta](#)) O72.2
- ~~retained placenta O72.0~~
- postprocedural T81.0
- pregnancy (*see also Haemorrhage/antepartum*) O46.9
- - due to
- - - abruptio placentae O45.9
- - - - affecting fetus or newborn P02.1
- - - afibrinogenaemia, or other coagulation defect (conditions in category D65–D68) O46.0
- - - affecting fetus or newborn P02.1
- - - leiomyoma, uterus O46.8
- - - - affecting fetus or newborn P02.1
- - - placenta praevia O44.1
- - - - affecting fetus or newborn P02.0
- - - premature separation of placenta (normally implanted) (*see also Abruptio placentae*) O45.9
- - - - affecting fetus or newborn P02.1
- - - threatened abortion O20.0
- - - - affecting fetus or newborn P02.1
- - - trauma, affecting fetus or newborn P02.1
- - early O20.9
- - - affecting fetus or newborn P02.1
- - [history, affecting management of pregnancy \(supervision\) Z35.2](#)
- ~~previous, affecting management of pregnancy, childbirth Z35.2~~
- - unavoidable — *see Haemorrhage/pregnancy/due to/placenta praevia*
- preretinal H35.6
- prostate N42.1
- puerperal (*see also Haemorrhage/postpartum*) ([≤ 24 hours following delivery of placenta](#)) NEC O72.1
- - delayed or secondary ([> 24 hours post delivery of placenta](#)) O72.2
- pulmonary R04.8
- ...
- spinal cord G95.1
- - [due to birth trauma P11.5](#)
- ~~fetus or newborn (birth trauma) P11.5~~
- spleen D73.5

- stomach K92.2
- - newborn P54.3
- - ulcer — see *Ulcer/stomach/with/haemorrhage*
- subarachnoid (nontraumatic) I60.9
- - [due to birth trauma P10.3](#)
- - fetus or newborn P52.5
- - ~~birth trauma P10.3~~
- - from
- - - anterior communicating artery I60.2
- ...
- subconjunctival H11.3
- - ~~birth trauma P15.3~~
- - [due to birth trauma P15.3](#)
- subcortical (brain) I61.0
- ...
- subdural (acute) (traumatic) S06.5
- - [due to birth injury-trauma P10.0](#)
- ...
- tentorium (cerebellum) (diffuse) (traumatic) NEC S06.23
- - [due to birth trauma P10.4](#)
- - ~~fetus or newborn (birth trauma) P10.4~~
- - focal S06.34

...

Healthy

- infant accompanying sick [parent \(mother\) Z76.3](#)
- person accompanying sick person Z76.3

...

HELLP (haemolysis, elevated liver enzymes and low platelet count) syndrome [\(with severe pre-eclampsia\) O14.2](#)

...

Hemiplegia G81.9

- ...
- newborn NEC P91.8
- - ~~birth trauma P11.9~~
- - [due to birth trauma P11.9](#)
- spastic G81.1

...

Hepatorenal syndrome, following labour and delivery O90.4 [NEC K76.7](#)

- [postpartum O90.4](#)

Hepatitis K76.8

...

Herpes, herpetic B00.9

- ...
- genital, genitalis A60.0
- - female A60.0† ~~N77.*~~ [N77.1*](#)
- - - [with ulceration A60.0† N77.0*](#)
- - male A60.0† N51.8*

...

History (of) (personal)

- ...
- disease or disorder (of) Z87.8
- ...
- - immune mechanism Z86.2
- - [in pregnancy, childbirth or puerperium Z87.5](#)
- - infectious Z86.10

...

Human

- ...
- papillomavirus (as cause of disease classified elsewhere) B97.7
- - with
- - - warts
- - - - anogenital ([see also Wart\(s\)/anogenital region](#)) A63.00
- - - - specified NEC B07

...

Hydatidiform mole (benign) (complicating pregnancy) (delivered) (undelivered) (M9100/0) (see also *Mole/hydatid, hydatidiform*) O01.9

- classical (M9100/0) O01.0
- complete (M9100/0) O01.0

- [history, affecting management of pregnancy \(supervision\) Z35.1](#)

- incomplete (M9103/0) O01.1
- invasive (M9100/1) D39.2
- malignant (M9100/1) D39.2
- partial (M9103/0) O01.1

~~- previous, affecting management of pregnancy Z35.1~~

Hydatidosis — see *Echinococcus*

...

Hydrops R60.9

...

- fetal(is) ~~or newborn~~ (idiopathic) ([newborn](#)) P83.2

- - [with disproportion \(fetopelvic\) O33.7](#)

- - - [affecting labour or delivery O66.3](#)

- - - affecting ~~management of pregnancy O36.2~~

- - - [labour or delivery O66.3](#)

- - - [management of pregnancy O36.2](#)

- - due to

- - - ABO isoimmunisation P56.0

- - - - affecting management of pregnancy O36.1

- - - haemolytic disease NEC P56.9

- - - isoimmunisation (ABO) (Rh) P56.0

- - - Rh incompatibility P56.0

- - - - affecting management of pregnancy O36.0

...

Hypersecretion

- ACTH (not associated with Cushing's syndrome) E27.0

- - pituitary E24.0

- - adrenaline E27.5

- - adrenomedullary E27.5

- - androgen (testicular) E29.0

- - ovarian (drug-induced) (iatrogenic) E28.1

- [breast milk \(postpartum\) \(puerperal\) O92.6-](#)

- calcitonin E07.0

...

- milk, [breast](#) (postpartum) (puerperal) O92.6-

...

Hypertrophy, hypertrophic

...

- breast N62

- - [associated with lactation O92.2-](#)

- - cystic N60.1

- - - with epithelial proliferation N60.3

- - - fetus or newborn P83.4

- - - pubertal, massive N62

- - - puerperal, postpartum O92.2-

- - - senile (parenchymatous) N62

...

Hypotonia, hypotonicity, hypotony

- bladder N31.2

- congenital (benign) P94.2

- eye H44.4

- uterus (~~postpartum~~) ([during labour](#)) ~~O72.4~~ NEC O62.2

- - [affecting fetus or newborn P03.6](#)

~~- - during labour O62.2~~

- - [primary O62.0](#)

- - [secondary O62.1](#)

Hypotrichosis (see also *Alopecia*) L65.9

...

Illegitimacy (unwanted pregnancy) Z64.0
- [affecting management of pregnancy \(supervision\) Z35.7](#)
~~- supervision of high-risk pregnancy Z35.7~~

Illiteracy Z55.0

Illness (see also *Disease*) R69

Imbalance R26.8

- autonomic G90.8
- constituents of food intake E63.1
- electrolyte NEC E87.8
- - following ~~abortion O08.5~~
- - - [abortion \(subsequent episode\) O08.5](#)
- - - [current episode — see Abortion](#)
- - - [ectopic or molar pregnancy O08.5](#)
- - neonatal, transitory NEC P74.4

...

Inadequate, inadequacy

...

- prenatal care, affecting management of pregnancy ([supervision](#)) Z35.3

...

Increase, increased

...

- permeability, capillaries I78.8
- [S/D ratio, affecting management of pregnancy O36.5](#)
- secretion
- ...
- sphericity, lens Q12.4
- splenic activity D73.1
- [systolic/diastolic ratio, affecting management of pregnancy O36.5](#)
- venous pressure I87.8

...

Induction of labour

- affecting fetus or newborn P03.8
- failed O61.9
- ~~- instrumental (mechanical) (surgical) O61.1~~
- - medical (oxytocin) (prostaglandins) O61.0
- - - [with surgical \(instrumental\) O61.2](#)
- - specified NEC O61.8
- - [surgical \(instrumental\) \(mechanical\) O61.1](#)
- - - [with medical O61.2](#)

Induratio penis plastica N48.6

Induration, indurated

- brain G93.8
- breast (fibrous) N64.5
- - [associated with lactation O92.2-](#)
- - in pregnancy O92.20
- - puerperal, postpartum O92.2-

...

Inertia

...

- uterus (~~postpartum~~) ([during labour](#)) ~~O72.4~~ [NEC O62.2](#)
- - affecting fetus or newborn P03.6
- ~~- - during labour O62.2~~
- - latent phase O62.0
- - primary O62.0
- - secondary O62.1
- vesical (neurogenic) N31.2

...

Infection, infected (opportunistic) (see also *Infestation*) B99

Note: Parasitic diseases may be described as either 'infection' or 'infestation'; both lead terms should therefore be consulted.

- with lymphangitis — see *Lymphangitis*
- ~~- abortion (subsequent episode) O08.0~~
- ~~- current episode — see *Abortion*~~
- abscess (skin) — see *Abscess/by site*
- ...
- breast — see *Mastitis*
- ...
- focal, teeth K04.7
- following
- - abortion (subsequent episode) (see also *Abortion/complicated/infection*) O08.-
- - - current episode — see *Abortion*
- - ectopic or molar pregnancy (see also *Abortion/complicated/infection*) O08.-
- Fonsecaea (compacta) (pedrosoi) B43.0
- ...
- genital organ or tract NEC
- - female (see also *Disease/pelvis/inflammatory*) N73.9
- - - in pregnancy O23.5
- - - - affecting fetus or newborn P00.8
- - - puerperal, postpartum NEC O86.1
- - following
- - - abortion (subsequent episode) O08.0
- - - - current episode — see *Abortion*
- - - ectopic or molar pregnancy O08.0
- - male N49.9
- - - multiple sites N49.8
- - - specified NEC N49.8
- genitourinary tract NEC — see also *Infection, infected/genital organ or tract OR Infection, infected/urinary*
- - in pregnancy O23.9
- - puerperal, postpartum O86.3
- ...
- kidney (cortex) (haematogenous) NEC N15.9
- - with calculus (see also *Calculus/kidney*) N20.0
- - following
- - - abortion (subsequent episode) O08.8
- - - - current episode — see *Abortion*
- - - ectopic ~~gestation~~ or molar pregnancy O08.8
- - in pregnancy O23.0
- - - affecting fetus or newborn P00.1
- - pelvis and ureter (cystic) N28.8
- - puerperal, postpartum O86.2
- - specified NEC N15.8
- ...
- major — see *Sepsis*
- ~~- following~~
- ~~- - abortion (subsequent episode) O08.0~~
- ~~- - - current episode — see *Abortion*~~
- ~~- - - ectopic or molar pregnancy O08.0~~
- ~~- - - puerperal, postpartum (with sepsis) O85~~
- Malassezia furfur B36.0
- ...
- nipple N61
- - associated with lactation O91.0-
- - in pregnancy O91.00
- - puerperal, postpartum O91.0-
- ...
- urinary (tract) NEC N39.0
- - following
- - - abortion (subsequent episode) O08.8
- - - - current episode — see *Abortion*
- - - ectopic or molar pregnancy O08.8
- - in pregnancy O23.4
- - - affecting fetus or newborn P00.1
- - newborn P39.3
- - puerperal, postpartum O86.2
- - tuberculous A18.1
- uterus, uterine (see also *Endometritis*) N71.9

...

Infertility

- female N97.9
- - associated with
- - - anovulation N97.0
- - - cervical (mucus) disease or anomaly N97.3
- - - congenital anomaly
- - - - cervix N97.3
- - - - fallopian tube N97.1
- - - - uterus N97.2
- - - - vagina N97.8
- - - fallopian tube disease or anomaly N97.1
- - - male factors ([infertility of male partner](#)) N97.4
- - - pituitary-hypothalamic origin E23.0
- - - specified origin NEC N97.8
- - - Stein-Leventhal syndrome E28.2
- - - uterine disease or anomaly N97.2
- - - vaginal disease or anomaly N97.8
- - [history, affecting management of pregnancy \(supervision\) Z35.0](#)
- - nonimplantation N97.2
- ~~previous, requiring supervision of pregnancy Z35.0~~

...

Inflammation, inflamed, inflammatory (with exudation)

...

- areola N61
- - [associated with lactation O91.0-](#)
- - in pregnancy O91.00
- - puerperal, postpartum O91.0-

...

- breast N61
- - [associated with lactation O91.2-](#)
- - in pregnancy O91.20
- - puerperal, postpartum O91.2-

...

- nipple N61
- - [associated with lactation O91.0-](#)
- - in pregnancy O91.00
- - puerperal, postpartum O91.0-

...

Injury (traumatic) (see also specified injury type) T14.9

...

- bladder (sphincter) S37.20
- - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- ~~obstetric trauma O71.5~~
- - specified type NEC S37.28

...

- blood vessel NEC T14.5

...

- - wrist (level) S65.9
- - - and hand, multiple S65.7
- - - specified S65.8

- [bowel — see Injury/intestine](#)

- brachial plexus S14.3

- [due to birth trauma P14.3](#)

- ~~newborn P14.3~~

- brain S06.9

...

- broad ligament S37.88
- - [due to obstetric trauma \(during labour and delivery\) O71.6](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- bronchus, bronchi S27.4

...

- cervix (uteri) S37.6
- - [due to obstetric trauma \(during labour and delivery\) O71.3](#)
- - [following abortion \(subsequent episode\) O08.6](#)

- - - [current episode](#) — *see* [Abortion](#)
- cheek (wall) S09.9
- chest — *see also* [Injury/thorax, thoracic](#)
- - flail S22.5
- - - [due to birth trauma](#) P13.8
- ~~- - - newborn (birth trauma) P13.8~~
- childbirth (~~fetus or newborn~~) (*see also* [Birth/trauma](#)) P15.9
- - [due to](#)
- - - [birth trauma](#) NEC (*see also* [Birth/trauma](#)) P15.9
- - - [obstetric trauma \(during labour and delivery\)](#) NEC O71.9
- ~~- - - maternal NEC O71.9~~
- chin S09.9
- choroid (eye) S05.8
- clitoris S39.9
- coccyx S39.9
- ~~- - - complicating delivery O71.6~~
- - [due to obstetric trauma \(during labour and delivery\)](#) O71.6
- coeliac ganglion or plexus S34.5
- colon S36.50
- - ascending (right) S36.51
- - descending (left) S36.53
- - [due to obstetric trauma \(during labour and delivery\)](#) O71.5
- - multiple sites S36.59
- - sigmoid S36.54
- - specified site NEC S36.59
- - transverse S36.52
- common bile duct S36.18
- concussive — *see* [Concussion](#)
- conjunctiva (superficial) S05.0
- cord
- - spermatic (pelvic region) S37.84
- - - scrotal region S39.8
- - spinal — *see* [Injury/spinal cord/by region](#)
- cornea S05.8
- - abrasion S05.0
- cortex (cerebral) S06.9
- - visual S04.0
- costal region NEC S29.9
- costochondral NEC S29.9
- cranial
- - cavity — *see* [Injury/brain](#)
- - nerve — *see* [Injury/nerve/cranial](#)
- crushing — *see* [Crush](#)
- cutaneous sensory nerve — *see* [Injury/nerve/cutaneous sensory](#)
- cystic duct S36.18
- decompression (cardiovascular) (cerebellar) (cerebral) (peripheral nerve) (postprocedural) (pulmonary) (spinal cord) (visceral) T70.3
- delivery (~~fetus or newborn~~) P15.9
- - [due to](#)
- - - [birth trauma](#) NEC (*see also* [Birth/trauma](#)) P15.9
- - - [obstetric trauma \(during labour and delivery\)](#) NEC O71.9
- ~~- - - maternal NEC O71.9~~
- Descemet's membrane — *see* [Injury/eyeball/penetrating](#)
- diaphragm S27.81
- due to ~~accidental puncture or laceration during procedure~~ — *see* [Complication\(s\)/accidental puncture or laceration during procedure](#)
- - [accidental puncture or laceration during procedure](#) — *see* [Complication\(s\)/accidental puncture or laceration during procedure](#)
- - [birth trauma](#) NEC (*see also* [Birth/trauma](#)) P15.9
- - [obstetric trauma \(during labour and delivery\)](#) NEC O71.9
- duodenum S36.41
- ...
- genital organ(s)
- - [due to obstetric trauma \(during labour and delivery\)](#) NEC O71.9
- - external S39.9
- - internal S37.9
- ~~- - - obstetric trauma O71.9~~
- gland
- ...
- instrumental (during surgery) NEC (*see also* [Complication\(s\)/accidental puncture or laceration during procedure](#)) T81.2

- - birth trauma — see *Birth/trauma*
- - nonsurgical [NEC \(see also Injury/by site\) T14.9](#)
- - obstetric [trauma \(during labour and delivery\) NEC \(see also Injury/obstetric\) O71.9](#)
- ~~--- bladder O71.5~~
- ~~--- cervix O71.3~~
- ~~--- high vaginal (laceration) O71.4~~
- ~~--- perineal NEC O70.9~~
- ~~--- urethra O71.5~~
- ~~--- uterus O71.88~~
- ~~--- with rupture or perforation O71.12~~
- internal — see *Injury/by site*

Note: For injury of internal organ(s) by foreign body entering through a natural orifice (eg inhaled, ingested or swallowed) — see *Foreign body/entering through orifice*.

- intervertebral disc T09.9
- intestine NEC S36.88
- [- - due to obstetric trauma \(during labour and delivery\) O71.5](#)
- [- - following abortion \(subsequent episode\) O08.6](#)
- [- - - current episode — see Abortion](#)
- - large S36.50
- - - ascending (right) S36.51
- - - descending (left) S36.53
- - - multiple sites S36.59
- - - sigmoid S36.54
- - - specified site NEC S36.59
- - - transverse S36.52
- - small S36.40
- - - duodenum S36.41
- - - ileum S36.49
- - - jejunum S36.49
- - - multiple sites S36.49
- - - specified site NEC S36.49
- ...
- joint NEC T14.9
- - old or residual ([nontraumatic](#)) M25.8-
- kidney NEC S37.00
- - nontraumatic — see *Failure/kidney*
- knee S89.9
- - meniscus (lateral) (medial) S83.6
- - - with ligament (collateral) (cruciate) S83.7
- - - old injury or tear ([nontraumatic](#)) M23.2-
- - multiple structures S83.7
- labium (majus) (minus) S39.9
- [- - due to obstetric trauma \(during labour and delivery\) O71.88](#)
- labyrinth, ear S09.9
- ...
- nerve T14.4
- ...
- - facial S04.5
- [- - - due to birth trauma P11.3](#)
- ~~--- newborn P11.3~~
- - femoral (hip level) (thigh level) S74.1
- ...
- obstetric [trauma \(during labour and delivery\) \(see also Injury/instrumental/obstetric\) NEC O71.9](#)
- [- - bladder O71.5](#)
- [- - cervix O71.3](#)
- [- - high vagina O71.4](#)
- [- - perineum NEC \(see also Laceration/perineum, perineal/during delivery\) O70.9](#)
- - specified NEC O71.88
- [- - urethra O71.5](#)
- [- - uterus O71.5](#)
- [- - - with rupture or perforation O71.12](#)
- ...
- pelvis, pelvic (floor) S39.9
- ~~--- complicating delivery O70.4~~
- [- - during delivery O70.1](#)
- - joint or ligament, ~~complicating delivery~~ [due to obstetric trauma \(during labour and delivery\) O71.6](#)
- - organ S37.9
- - - with
- - - - abdominal organ(s) S39.6
- - - - intrathoracic organ(s) T06.5

- ~~--- complication of abortion --- code to O03-O07 with fourth character .3 or .8~~
- - - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- - - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- ~~--- obstetric trauma NEC O71.5~~
- - - specified site NEC S37.88
- - specified type NEC S39.8
- penis S39.9
- perineum S39.9
- - [during delivery NEC O70.9](#)
- - - [1st degree O70.0](#)
- - - [2nd degree O70.1](#)
- - - [3rd degree O70.2](#)
- - - [4th degree O70.3](#)
- peritoneum S36.81
- periurethral tissue S37.38
- ~~--- complicating delivery O70.0~~
- - [during delivery O70.0](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- phalanges
- ...
- scalp S09.9
- - [due to birth trauma P12.-](#)
- ~~--- fetus or newborn (birth trauma) P12.9~~
- ~~--- due to monitoring (electrode) (sampling incision) P12.4~~
- ~~--- specified NEC P12.8~~
- scapular region S49.9
- ...
- skeleton, [due to birth trauma P13.-9](#)
- ~~--- specified part NEC P13.8~~
- skull NEC S09.9
- ...
- urethra (sphincter) S37.30
- - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- - membranous S37.31
- - penile S37.32
- - prostatic S37.33
- - specified part NEC S37.38
- uterus S37.6
- - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- uvula S09.9
- vagina S37.88
- - [high, due to obstetric trauma \(during labour and delivery\) O71.4](#)
- - [low, during delivery NEC O70.0](#)
- vas deferens S37.84
- vein (*see also Injury/blood vessel*) T14.5
- vena cava (superior) S25.2
- - inferior S35.1
- vesical (sphincter) S37.20
- viscera (abdominal) multiple S36.7
- - thoracic NEC S27.7
- visual cortex S04.0
- vitreous (humour) S05.9
- - specified NEC S05.8
- vulva S39.9
- - [during delivery NEC O70.0](#)
- whiplash (cervical spine) S13.4

...

Insertion

- contraceptive device (intrauterine) (IUCD) Z30.1
- cord (umbilical) lateral or velamentous ~~O43.4~~
- - [affecting](#)
- - - [labour or delivery O69.8](#)
- - - [pregnancy O43.1](#)
- placenta, vicious — *see Placenta/praevia*

...

Insufficiency, insufficient

- ...
- biliary K83.8
- [breast milk O92.4-](#)
- cardiorenal, hypertensive (*see also Hypertension/cardiorenal*) I13.2
- ...
- prenatal care, affecting management of pregnancy ([supervision](#)) Z35.3
- ...

Intoxication

- ...
- septic ~~A41.9~~ — *see Sepsis*
- ~~during labour O75.3~~
- ~~following~~
- ~~abortion (subsequent episode) O08.0~~
- ~~current episode — see Abortion~~
- ~~ectopic gestation O08.0~~
- ~~general A41.9~~
- ~~puerperal, postpartum O85~~
- serum (prophylactic) (therapeutic) T80.6
- ...

Inversion

- ...
- nipple N64.5
- [associated with lactation O92.0-](#)
- congenital Q83.8
- in pregnancy O92.00
- puerperal, postpartum O92.0-
- ...

Klumpke(-Déjerine) palsy, paralysis ~~(birth) (newborn)~~ P14.1

...

Labour — *see also Delivery*

- without delivery ([at or after 37 completed weeks of gestation](#)) ~~NEC Z34-~~ [O47.2](#)
- [before 37 completed weeks of gestation O60.0](#)
- abnormal NEC O75.8
- ...
- early onset (before 37 completed weeks of gestation) — *see Labour/preterm, spontaneous*
- ~~spontaneous~~
- ~~with delivery~~
- ~~preterm O60.1~~
- ~~term O60.2~~
- ~~without delivery O60.0~~
- false (~~Braxton Hicks~~) (~~irregular uterine tightenings~~) (~~irritable uterus~~) O47.9
- at or after 37 completed weeks of gestation O47.1
- before 37 completed weeks of gestation O47.0
- ...
- premature ~~or preterm~~ — *see Labour/preterm, spontaneous*
- ~~spontaneous~~
- ~~with delivery~~
- ~~preterm O60.1~~
- ~~term O60.2~~
- ~~without delivery O60.0~~
- [preterm, spontaneous](#)
- [with delivery](#)
- [at or after 37 completed weeks of gestation O60.2](#)
- [before 37 completed weeks of gestation O60.1](#)
- [without delivery O60.0](#)
- prolonged or protracted O63.9
- 1st stage O63.0
- 2nd stage O63.1
- [3rd stage O63.3](#)
- affecting fetus or newborn P03.8
- [threatened \(see also Labour/false\) O47.9](#)

Laboured breathing (*see also Hyperventilation*) R06.4

...

Laceration (traumatic) NEC (see also Wound, open) T14.1
~~with abortion (subsequent episode) O08.6~~
~~current episode — see Abortion~~

- accidental, during procedure NEC (see also *Complication(s)/accidental puncture or laceration during procedure*) T81.2
- Achilles tendon S86.0
- anus (sphincter) S31.80
- ~~complicating delivery O70.2~~
- ~~with laceration of anal or rectal mucosa O70.3~~
- - during delivery O70.2
- - with injury to anal or rectal mucosa O70.3
- nontraumatic, nonpuerperal (see also *Fissure/anus*) K60.2
- bladder (urinary) S37.28
- - due to obstetric trauma O71.5
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- ~~obstetric trauma O71.5~~
- blood vessel — see *Injury/blood vessel*
- bowel — see also *Injury/intestine*
- - due to obstetric trauma O71.5
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- ~~complicating abortion~~
 - - - code to O03–O07 with fourth character .3 or .8
- ~~obstetric trauma O71.5~~
- brain (cerebellum) (cerebrum) (cortex) (diffuse) (membrane) (multiple) S06.28
- - during to birth trauma P10.8
- - - with haemorrhage P10.1
- - focal S06.38
- broad ligament S37.88
- - due to obstetric trauma O71.6
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- - laceration syndrome N83.8
- ~~obstetric trauma O71.6~~
- - syndrome (laceration) N83.8
- ~~traumatic S37.88~~
- capsule, joint — see *Sprain*
- causing eversion of cervix uteri (old) N86
- central (perineal), ~~complicating during delivery O70.9~~
- ~~cerebellum (diffuse) S06.28~~
- cerebral (diffuse) S06.28
- - during to birth trauma P10.8
- - - with haemorrhage P10.1
- - focal S06.38
- - meninges S06.9
- - - multiple S06.28
- cervix (uteri) S37.6
- - due to obstetric trauma O71.3
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- nonpuerperal, nontraumatic N88.1
- ~~obstetric trauma (current) O71.3~~
- - old (postpartal) N88.1
- ~~traumatic S37.6~~
- chordae tendineae NEC I51.1
- - concurrent with acute myocardial infarction — see *Infarct/myocardium*
- - following acute myocardial infarction (current complication) I23.4
- cortex (cerebellum) (cerebrum) (diffuse) S06.28
- - focal S06.38
- dura — see *Laceration/meninges*
- during procedure — see *Complication(s)/accidental puncture or laceration during procedure*
- eye(ball) (without prolapse or loss of intraocular tissue) S05.3
- - with prolapse or loss of intraocular tissue S05.2
- - penetrating S05.6
- eyelid S01.1
- fourchette, ~~complicating delivery O70.0~~ S31.0
- - during delivery O70.0
- heart (without penetration into heart chamber) S26.82
- - with penetration into heart chamber S26.83
- internal organ — see *Injury/by site*
- intracranial NEC S06.28

- ~~— birth trauma P10.9~~
- ~~- - due to birth trauma P10.9~~
- joint, capsule — see *Sprain*
- kidney S37.02
- labia, ~~complicating delivery O70.0~~ [S31.4](#)
- ~~- - during delivery O70.0~~
- ~~— traumatic S31.4~~
- ligament (see also *Sprain*) T14.3
- liver S36.12
- - major S36.15
- - minor S36.13
- - moderate S36.14
- lung S27.32
- meninges
- - cerebral S06.9
- - - multiple S06.28
- - spinal T09.3
- meniscus (see also *Tear/meniscus*) S83.2
- - old (tear) M23.2-
- - site other than knee — see *Sprain/by site*
- multiple T01.9
- muscle — see *Injury/muscle*
- nerve — see *Injury/nerve*
- ocular NEC S05.3
- - adnexa S01.1
- pelvic
- - floor ([nonpuerperal](#)) S31.0
- ~~— complicating delivery O70.4~~
- ~~- - - during delivery O70.1~~
- ~~— nonpuerperal (traumatic) S31.0~~
- - - old (postpartal) N81.8
- ~~— organ NEC, obstetric trauma O71.5~~
- ~~- - organ NEC S37.9~~
- ~~- - - due to obstetric trauma (during labour and delivery) O71.5~~
- ~~- - - following abortion (subsequent episode) O08.6~~
- ~~- - - - current episode — see *Abortion*~~
- ~~— traumatic S37.9~~
- perineum, perineal S31.0
- ~~— complicating delivery O70.9~~
- ~~— 1st degree O70.0~~
- ~~— 2nd degree O70.1~~
- ~~— 3rd degree O70.2~~
- ~~— 4th degree O70.3~~
- ~~— central O70.9~~
- ~~— involving~~
- ~~— anus (sphincter) O70.2~~
- ~~— fourchette O70.0~~
- ~~— hymen O70.0~~
- ~~— labia O70.0~~
- ~~— pelvic floor O70.1~~
- ~~— perineal muscles O70.1~~
- ~~— periurethral tissue O70.0~~
- ~~— rectovaginal septum O70.2~~
- ~~— with anal or rectal mucosa O70.3~~
- ~~— skin O70.0~~
- ~~— sphincter (anal) O70.2~~
- ~~— with anal or rectal mucosa O70.3~~
- ~~— vagina, low O70.0~~
- ~~— high (deep) (instrumental) (mid) (sulcus) O71.4~~
- ~~— vaginal muscles O70.1~~
- ~~— vulva O70.0~~
- ~~— secondary O90.1~~
- ~~- - during delivery (central) NEC O70.9~~
- ~~- - - 1st degree O70.0~~
- ~~- - - 2nd degree O70.1~~
- ~~- - - 3rd degree O70.2~~
- ~~- - - 4th degree O70.3~~
- ~~- - - involving~~
- ~~- - - - anal sphincter O70.2~~
- ~~- - - - - with anal or rectal mucosa O70.3~~
- ~~- - - - fourchette O70.0~~

- [- - - - hymen O70.0](#)
- [- - - - labia O70.0](#)
- [- - - - muscles O70.1](#)
- [- - - - pelvic floor O70.1](#)
- [- - - - perineal muscles O70.1](#)
- [- - - - periurethral tissue O70.0](#)
- [- - - - rectovaginal septum O70.2](#)
- [- - - - - with anal or rectal mucosa O70.3](#)
- [- - - - skin O70.0](#)
- [- - - - vagina \(low\) O70.0](#)
- [- - - - - high \(deep\) \(instrumental\) \(mid\) \(sulcus\) O71.4](#)
- [- - - - vaginal muscles O70.1](#)
- [- - - - vulva O70.0](#)
- ~~— male S31.0~~
- ~~— muscles, complicating delivery O70.4~~
- - old (postpartal) N81.8
- - secondary (postpartal) O90.1
- ~~— traumatic S31.0~~
- ~~— peritoneum, obstetric trauma O71.5~~
- peritoneum — [see also Injury/by site](#)
- - due to obstetric trauma (during labour and delivery) O71.5
- - following abortion (subsequent episode) O08.6
- - - current episode — [see Abortion](#)
- ~~— traumatic — see Injury/by site~~
- periurethral tissue S37.38
- - during delivery O70.0
- - - with injury to urethra O71.5
- - following abortion (subsequent episode) O08.6
- - - current episode — [see Abortion](#)
- ~~— obstetric trauma O70.0~~
- rectovaginal (septum) S31.80
- ~~— complicating delivery O71.4~~
- ~~— with perineum O70.2~~
- ~~— involving anal or rectal mucosa O70.3~~
- - during delivery NEC O70.2
- - - with injury to anal or rectal mucosa O70.3
- - nonpuerperal, nontraumatic N89.8
- - old (postpartal) N89.8
- spinal cord ([see also Injury/spinal cord/by region](#)) T09.3
- - due to birth trauma P11.5
- ~~— fetus or newborn (birth trauma) P11.5~~
- spleen (capsular) S36.02
- - extending into parenchyma S36.03
- tendon ([see also Injury/muscle OR Injury/tendon](#)) T14.6
- - Achilles S86.0
- - tentorium cerebelli (diffuse) S06.28
- - focal S06.34
- urethra, ~~obstetric trauma O71.5~~ [NEC S37.30](#)
- - due to obstetric trauma (during labour and delivery) O71.5
- ~~— traumatic NEC S37.30~~
- uterus S37.6
- - due to obstetric trauma (during labour and delivery) (extension of caesarean incision) NEC O71.81
- - following abortion (subsequent episode) O08.6
- - - current episode — [see Abortion](#)
- - nonpuerperal, nontraumatic N85.8
- ~~— obstetric trauma (extension of caesarean incision) NEC O71.81~~
- - old (postpartal) N85.8
- vagina, vaginal wall (low) S31.4
- ~~— complicating delivery O70.0~~
- ~~— and muscles (perineal) (vaginal) O70.4~~
- ~~— high (deep) (instrumental) (mid) (sulcus) O71.4~~
- - during delivery O70.0
- - - with injury to
- - - - high vaginal wall O71.4
- - - - muscles O70.1
- - - - vaginal sulcus O71.4
- - nonpuerperal, nontraumatic N89.8
- - old (postpartal) N89.8
- vulva S31.4
- ~~— complicating delivery O70.0~~
- - during delivery O70.0

- - nonpuerperal, nontraumatic N90.8
- - old (postpartal) N90.8
- ...

Lack of

- prenatal care, affecting management of pregnancy ([supervision](#)) Z35.3
- ...

Lactation, lactating (breast) (postpartum) (puerperal)

Note: The following fifth character subdivision ~~should be used~~ [is assigned](#) with categories O91–O92:

- 0 without mention of attachment difficulty
- 1 with attachment difficulty

- [with](#)
- - [blocked ducts O92.2-](#)
- - [breast](#)
- - - [abscess O91.1-](#)
- - - [disorder \(implants\) \(lump\) \(reduction\) NEC O92.2-](#)
- - - [engorgement O92.2-](#)
- - - [infection — see Mastitis](#)
- - [insufficient milk supply O92.4-](#)
- - [mastitis — see Mastitis](#)
- - [nipple](#)
- - - [blister O92.2-](#)
- - - [bruise O92.2-](#)
- - - [crack \(fissure\) O92.1-](#)
- - - [graze O92.2-](#)
- - - [infection O91.0-](#)
- - - [inversion O92.0-](#)
- - - [retraction O92.0-](#)
- - - [transposition O92.2-](#)
- [care and examination \(mother\) \(without lactation disorder\) Z39.1](#)
- [defective O92.4-](#)
- [delayed O92.4-](#)
- [disorder NEC O92.7-](#)
- [excessive O92.6-](#)
- [failed \(complete\) O92.3-](#)
- - [partial O92.4-](#)
- [mastitis ~~NEC O91.2— see Mastitis~~](#)
- ~~[mother \(care and/or examination\) Z39.1](#)~~
- [nonpuerperal N64.3](#)
- [suppressed \(see also Lactation, lactating/failed\) O92.5-](#)
- ...

Long

- labour O63.9
- - 1st stage O63.0
- - 2nd stage O63.1
- - [3rd stage O63.3](#)
- - affecting fetus or newborn P03.8
- ...

Luxation — see also Dislocation

- eyeball (nontraumatic) H44.8
- ~~[birth trauma P15.3](#)~~
- - [due to birth trauma P15.3](#)
- globe, nontraumatic H44.8
- ...

Lymphadenitis I88.9

- breast
- - [associated with lactation \(nonpurulent\) O91.2-](#)
- - - [purulent O91.1-](#)
- - in pregnancy (nonpurulent) O91.20
- - - purulent O91.10
- - puerperal, postpartum (nonpurulent) O91.2-
- - - purulent O91.1-

...

Lymphangitis I89.1

...

- breast

- - [associated with lactation \(nonpurulent\) O91.2-](#)

- - - [purulent O91.1-](#)

- - in pregnancy (nonpurulent) O91.20

- - - purulent O91.10

- - puerperal, postpartum (nonpurulent) O91.2-

- - - purulent O91.1-

...

Macrosigmoid K59.3

- congenital Q43.2

[Macrosomia](#) — *see Large-for-dates*

Macrostomia (congenital) Q18.4

...

Mastitis (acute) (infective) (nonpuerperal) (periductal) (subacute) N61

- [associated with lactation \(nonpurulent\) O91.2-](#)

- - [purulent O91.1-](#)

- chronic (cystic) N60.1

- - with epithelial proliferation N60.3

- cystic (Schimmelbusch's type) N60.1

- - with epithelial proliferation N60.3

- in pregnancy (nonpurulent) O91.20

- - purulent O91.10

- infective N61

- - newborn P39.0

- neonatal (noninfective) P83.4

- - infective P39.0

- puerperal, postpartum (nonpurulent) O91.2-

- - purulent O91.1-

...

Membrane(s), membranous — *see also condition*

...

- retained (~~complicating delivery~~) (~~with haemorrhage~~) ([postpartum](#)) ~~O72.2~~[O73.1](#)

~~— without haemorrhage O73.4~~

- secondary cataract H26.4

- unruptured (causing asphyxia) — *see Asphyxia/newborn*

- vitreous H43.3

...

Metrorrhagia N92.1

- climacteric N92.4

- menopausal N92.4

- postpartum (~~atonic~~) ([≤ 24 hours](#) following delivery of placenta) NEC O72.1

- - delayed or secondary ([> 24 hours post delivery of placenta](#)) O72.2

- preclimacteric or premenopausal N92.4

- psychogenic F45.8

...

Milk — *see also Lactation, lactating*

- crust L21.0

~~— excessive secretion (postpartum) (puerperal) O92.6-~~

- leg — *see Phlebitis*

~~— oversupply (postpartum) (puerperal) O92.6-~~

- poisoning T62.8

~~— retention (postpartum) (puerperal) O92.7-~~

- sickness T62.8

~~— supply (postpartum) (puerperal)~~

~~— delayed O92.4-~~

~~— excessive O92.6-~~

~~— insufficient O92.4-~~

Milk-alkali disease or syndrome E83.5

...

Missed

- abortion O02.1
- delivery O36.4
- [miscarriage O02.1](#)

Misshapen

...

Mole (pigmented) (M8720/0) — *see also Naevus*

...

- hydatid, hydatidiform (benign) (complicating pregnancy) (delivered) (undelivered) (M9100/0) O01.9
- - classical (M9100/0) O01.0
- - complete (M9100/0) O01.0
- - [history, affecting management of pregnancy \(supervision\) Z35.1](#)
- - incomplete (M9103/0) O01.1
- - invasive (M9100/1) D39.2
- - malignant (M9100/1) D39.2
- - partial (M9103/0) O01.1
- ~~previous, affecting management of pregnancy Z35.1~~
- invasive (~~hydatidiform~~) (M9100/1) D39.2
- malignant, meaning
- - malignant hydatidiform mole (M9100/1) D39.2
- - melanoma (M8720/3) — *see Melanoma*
- nonhydatidiform O02.0
- nonpigmented (M8730/0) — *see Naevus*
- pregnancy NEC O02.0
- skin (M8720/0) — *see Naevus*
- tubal O00.1
- vesicular (M9100/0) (*see also Mole/hydatid, hydatidiform*) O01.9
- - [history, affecting management of pregnancy \(supervision\) Z35.1](#)
- ~~previous, affecting management of pregnancy Z35.1~~

Molluscum contagiosum (epitheliale) B08.1

...

Mullerian mixed tumour (M8950/3)

- in situ (M8950/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D07.3
- specified site — *see Neoplasm/malignant*
- unspecified site C54.9

[Mullerianosis](#) — *see Endometriosis*

Multigravida

- elderly, affecting [management of pregnancy](#), ~~labour and delivery~~ (supervision-~~only~~) Z35.52

Multiparity (grand) Z64.1

- affecting management of pregnancy, ~~labour and delivery~~ (supervision-~~only~~) Z35.4

...

Neuralgia, neuralgic (acute) (*see also Neuritis*) M79.2-

...

- in pregnancy, childbirth or puerperium O99.32

...

Neuritis M79.2-

...

- cranial nerve

...

- - 7th or facial G51.8

- - - [due to birth trauma P11.3](#)

~~newborn (birth trauma) P11.3~~

- - 8th or acoustic or auditory H93.3

...

- facial G51.8

- - [due to birth trauma P11.3](#)

~~newborn (birth trauma) P11.3~~

- general — *see Polyneuropathy*

...

- in

- - disease classified elsewhere — *see Polyneuropathy*

- - pregnancy, childbirth or puerperium O99.32

...

- puerperal, postpartum O99.32

...

Nodule(s), nodular

...

- milker's B08.0
- [placental site O90.8](#)
- prostate N40

...

Obstetric trauma (~~complicating during labour and~~ delivery) NEC ([see also Injury/obstetric trauma](#)) O71.9

- affecting fetus or newborn P03.8
- ~~following abortion (subsequent episode) O08.6~~
- ~~current episode — see Abortion~~
- ~~specified NEC O71.88~~

Obstipation (*see also Constipation*) K59.0

...

Oedema, oedematous R60.9

...

- brain G93.6
- - due to birth trauma P11.0
- - fetus or newborn (anoxia or hypoxia) P52.4
- ~~birth trauma P11.0~~
- - traumatic S06.1

...

Oversupply, [breast](#) milk (postpartum) (puerperal) O92.6-

...

Pain(s) R52.9

...

- pelvic R10.2
- - [girdle M25.55](#)
- - - [in pregnancy, childbirth or puerperium O26.7](#)
- penis N48.8

...

Palsy (*see also Paralysis*) G83.9

- atrophic diffuse (progressive) G12.2
- Bell's (*see also Paralysis/facial*) G51.0
- brachial plexus NEC G54.0
- [due to birth trauma P14.3](#)
- ~~fetus or newborn (birth trauma) P14.3~~
- brain — *see Palsy/cerebral*

...

Paralysis, paralytic (complete) (incomplete) (*see also Paresis*) G83.9

...

- Benedikt's I67.9† G46.3*
- ~~birth trauma P14.9~~
- bladder (neurogenic) (sphincter) N31.2
- - puerperal, postpartum O90.8
- bowel, colon or intestine (*see also Ileus*) K56.0
- brachial plexus NEC G54.0
- ~~birth trauma P14.3~~
- [due to birth trauma P14.3](#)
- ~~newborn P14.3~~
- bronchial J98.0
- ...
- Duchenne's G71.0
- ~~birth trauma P14.0~~
- [due to birth trauma P14.0](#)
- due to ~~intracranial or spinal~~ birth trauma — *see Palsy/cerebral* [NEC P14.9](#)
- [intracranial or spinal — see Palsy/cerebral](#)
- embolic (current episode) I63.4
- Erb(-Duchenne) (~~birth~~ (~~newborn~~)) P14.0
- Erb's syphilitic spastic spinal A52.1
- eye muscle (extrinsic) H49.9
- - intrinsic H52.5
- facial

- - due to
- ...
- - - facial nerve disorder (Bell's palsy) G51.0
- ~~newborn P11.3~~
- familial (periodic) (recurrent) G72.3
- ...
- Klumpke(-Déjerine) (~~birth trauma~~) (~~newborn~~) P14.1
- ...
- nerve — see also *Disorder/nerve*
- ...
- - 7th or facial G51.0
- ~~newborn (birth trauma) P11.3~~
- ~~birth trauma P14.9~~
- - due to birth trauma P14.9
- - facial G51.0
- ~~birth trauma P11.3~~
- - - due to birth trauma P11.3
- ~~newborn P11.3~~
- ~~newborn (birth trauma) P14.9~~
- - phrenic, due to (birth trauma) P14.2
- - radial G56.3
- ~~birth trauma P14.3~~
- - - due to birth trauma P14.3
- ~~newborn P14.3~~
- - syphilitic A52.1† G59*
- ...
- radial nerve G56.3
- ~~birth trauma P14.3~~
- - due to birth trauma P14.3
- rectus muscle (eye) H49.9
- ...

Perforation, perforated (nontraumatic)

- ...
- bladder (urinary)
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- ~~obstetric trauma O71.5~~
- - traumatic S37.28
- - - due to obstetric trauma O71.5
- bowel ~~K63.1~~ — see *Perforation, perforated/intestine*
- ~~fetus or newborn P78.0~~
- ~~obstetric trauma O71.5~~
- ~~traumatic — see *Injury/intestine*~~
- broad ligament N83.8
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- ~~obstetric trauma O71.6~~
- - traumatic S37.88
- - - due to obstetric trauma (during labour and delivery) O71.6
- caecum (*see also Perforation/perforated/intestine*) K63.1
- cervix (uteri) N88.8
- - following abortion (subsequent episode) O08.6
- - - current episode — see *Abortion*
- ~~obstetric trauma O71.3~~
- - traumatic S37.6
- - - due to obstetric trauma (during labour and delivery) O71.3
- colon K63.1
- - fetus or newborn P78.0
- ~~obstetric trauma O71.5~~
- - traumatic — see *Injury/colon/by site*
- ...
- ileum K63.1
- - fetus or newborn P78.0
- ~~obstetric trauma O71.5~~
- - traumatic S36.49
- - - due to obstetric trauma (during labour and delivery) O71.5
- instrumental, ~~surgical~~ (blood vessel) (nerve) (organ) (~~surgical~~) NEC (*see also Complication(s)/accidental puncture or laceration during procedure*) T81.2

- - birth trauma NEC (*see also Birth/trauma*) P15.9
- - nonsurgical NEC (*see also Injury/by site*) T14.9
- - obstetric trauma (during labour and delivery) NEC (*see also Injury/obstetric*) O71.9
- internal organ NEC — *see Injury/by site*
- intestine NEC K63.1
- - fetus or newborn P78.0
- ~~— obstetric trauma O71.5~~
- - traumatic — *see Injury/intestine*
- ...
- jejunum, jejunal K63.1
- - fetus or newborn P78.0
- ~~— obstetric trauma O71.5~~
- - traumatic S36.49
- - - due to obstetric trauma O71.5
- - ulcer — *see Ulcer/gastrojejunal/with/perforation*
- ...
- pelvic
- - floor S31.0
- - - during delivery O70.1
- ~~— obstetric trauma O70.4~~
- - organ NEC S37.88
- ~~— with abortion (subsequent episode) O08.6~~
- ~~— current episode — see Abortion~~
- - - due to obstetric trauma (during labour and delivery) O71.5
- - - following abortion (subsequent episode) O08.6
- - - current episode — *see Abortion*
- ~~— obstetric trauma O71.5~~
- perineum — *see Laceration/perineum*
- periurethral tissue
- - following abortion (subsequent episode) O08.6
- - - current episode — *see Abortion*
- - traumatic S37.88
- - - during delivery O70.0
- pharynx J39.2
- rectum K63.1
- - fetus or newborn P78.0
- ~~— obstetric trauma O71.5~~
- - traumatic S36.6
- - - due to obstetric trauma (during labour and delivery) O71.5
- sigmoid K63.1
- - fetus or newborn P78.0
- ~~— obstetric trauma O71.5~~
- - traumatic S36.54
- - - due to obstetric trauma (during labour and delivery) O71.5
- ...
- urethra N36.8
- ~~— obstetric trauma O71.5~~
- - traumatic — *see Injury/urethra*
- uterus
- - by intrauterine contraceptive device T83.3
- - following abortion (subsequent episode) O08.6
- - - current episode — *see Abortion*
- ~~— obstetric trauma (during labour) O71.12~~
- ~~— before onset of labour O71.02~~
- - traumatic S37.6
- - - due to obstetric trauma (during labour) O71.12
- - - before onset of labour (in pregnancy) O71.02
- uvula K13.7
- - syphilitic A52.7† K93.8*
- vagina — *see Laceration/vagina*
- ...
- Peritonitis (adhesive) (fibrinous) (with effusion) K65.9**
- ...
- pelvic
- ...
- - following
- - - abortion (subsequent episode) O08.0
- - - current episode — *see Abortion*
- - - ectopic or molar pregnancy O08.0

...

Placenta, placental — *see also condition*

- ablatio (*see also Abruptio placentae*) O45.9
- - affecting fetus or newborn P02.1
- abnormal, abnormality NEC O43.1
- - with haemorrhage O46.8
- - - affecting
- - - - fetus or newborn P02.1
- - - - labour or delivery O67.8
- - affecting fetus or newborn P02.2
- abruptio (*see also Abruptio placentae*) O45.9
- - affecting fetus or newborn P02.1
- accreta O43.2
- [adherens \(*see also Placenta/adherent*\) O73.0](#)
- adherent ~~NEC (morbidly) O43.2~~[O73.0](#)
- - [morbidly O43.2](#)
- battledore O43.1
- bipartita O43.1
- ...
- morbidly adherent O43.2
- multilobed O43.1
- multipartita O43.1
- necrosis O43.8
- percreta O43.2
- polyp O90.8
- praevia (central) (complete) (marginal) (partial) (total) (with haemorrhage) O44.1
- - without haemorrhage O44.0
- - affecting fetus or newborn P02.0
- [retained \(total\) O73.0](#)
- - [partial \(fragments\) \(portions\) O73.1](#)
- ~~retention (with postpartum haemorrhage) O72.0~~
- ~~without haemorrhage O73.0~~
- ~~fragments, complicating puerperium (delayed haemorrhage) O72.2~~
- ~~without haemorrhage O73.1~~
- separation (normally implanted) (partial) (premature) (with haemorrhage) O45.9
- - with coagulation defect O45.0
- - affecting fetus or newborn P02.1
- - specified NEC O45.8
- septuplex O43.1
- small — *see Placenta/insufficiency*
- softening (premature) O43.8
- spuria O43.1
- succenturiata O43.1
- syphilitic O98.1
- transmission of chemical substance — *see Absorption/chemical/through placenta*
- trapped (~~with postpartum haemorrhage~~) [\(total\) O72.0](#)[O73.0](#)
- ~~without haemorrhage O73.0~~
- tripartita, triplex O43.1
- varicose vessels O43.8

...

Poor

- ~~contractions, labour O62.2~~
- [contractions, uterine \(during labour\) O62.2](#)
- - affecting fetus or newborn P03.6
- fetal growth NEC P05.9
- - affecting management of pregnancy O36.5
- mobility, requiring care provider Z74.0
- personal hygiene R46.0
- prenatal care, affecting management of pregnancy [\(supervision\) Z35.3](#)

...

Pregnancy (single) (uterine) — *see also condition/in pregnancy*

...

- complicated by
 - - abnormal, abnormality
 - - - [broad ligament O34.8](#)
 - - - cervix O34.4
 - - - cord (umbilical) O69.9
 - - - fetus (suspected) O35.9
 - - - - specified NEC O35.8
 - - - - [fallopian tube O34.8](#)
 - - - glucose tolerance NEC O24.-
 - - - [ovary O34.8](#)
 - - - pelvic organs or tissues O34.9
 - - - - specified NEC O34.8
 - - - pelvis, with disproportion (bony) (major) NEC O33.0
 - - - perineum ~~or vulva~~ O34.7
 - - - placenta, placental (vessel) O43.1
 - - - - accreta O43.2
 - - - - increta O43.2
 - - - - morbidly adherent O43.2
 - - - - percreta O43.2
 - - - position
 - - - - fetus — *see Malpresentation, fetus*
 - - - - placenta (with haemorrhage) O44.1
 - - - - - without haemorrhage O44.0
 - - - - uterus O34.5
 - - - uterus (~~congenital~~) NEC O34.50
 - - - - [congenital O34.0](#)
 - - - - [vagina O34.6](#)
 - - - - [vulva O34.7](#)
 - - abscess or cellulitis
 - - bladder O23.1
 - - genital organ or tract O23.5
 - - adhesions (pelvic) (peritoneum) O34.8
 - - albuminuria O12.1
 - - - with oedema O12.2
 - - alcohol dependence (F10.2) O99.31
 - - amnionitis O41.1
 - - [amputation, cervix O34.4](#)
 - - anaemia (conditions in D50–D64) O99.01
 - - - with mention of pre-existing anaemia O99.02
 - - anaphylactoid syndrome O88.1
 - - [anhydramnios NEC O41.0](#)
 - - [anogenital](#)
 - - - [herpesviral infection \(conditions in A60\) \(herpes simplex\) O98.3](#)
 - - - [warts \(conditions in A63.00–A63.05\) \(venereal\) O98.3](#)
 - - [anteversion](#)
 - - - [cervix O34.4](#)
 - - - [uterus O34.5](#)
 - - antibodies (maternal)
 - - - Anti-D O36.0
 - - - blood group (ABO) O36.1
 - - - - Rh (factor) (rhesus) O36.0
 - - [atresia, atretic](#)
 - - - [cervix O34.4](#)
 - - - [genital organ](#)
 - - - - [external NEC O34.7](#)
 - - - - [internal NEC O34.9](#)
 - - - [uterus O34.5](#)
 - - - [vagina O34.6](#)
 - - - [vulva O34.7](#)
 - - atrophy (acute) (subacute) (yellow), liver O26.6
 - - bicornis or bicornuate uterus O34.0
 - - [biforis uterus O34.0](#)
 - - bone and joint disorders of back, pelvis and lower limbs O99.8
 - - [Braxton Hicks contractions — see Labour/false](#)
 - - breech presentation O32.1
 - - [brow presentation O32.3](#)
 - - cardiovascular diseases (conditions in I00–I09, I20–I52, I70–I99) O99.4
 - - carpal tunnel syndrome O99.32
 - - [central nervous system malformation, fetus O35.0](#)

- - [cerclage \(with cervical incompetence\) O34.3](#)
- - cerebrovascular disorders (conditions in I60–I69) O99.4
- - [cervical incompetence O34.3](#)
- - cervicitis O23.5
- - [chancroid O98.3](#)
- - [chin presentation O32.3](#)
- - [chlamydia, sexually transmitted O98.3](#)
- - chloasma (gravidarum) O99.7
- - cholestasis (intrahepatic) O26.6
- - [chromosomal abnormality, fetus O35.1](#)
- - compound presentation O32.6
- - conditions in
 - ...
 - - - F00–F52 O99.3¹
 - - - F50.5 O21.-
 - - - F54–F99 O99.3¹
 - - - G00–G99 NEC O99.3²
 - - - G08 O22.9
 - ...
 - - - N00–N99 NEC ([see also Pregnancy/complicated by/diseases of/genitourinary system](#)) O26.81
 - - - N10–N12 O23.0
 - - - N13.6 O23.3
 - - - N15.1 O23.0
 - - - N30 O23.1
 - - - N34 O23.2
 - - - N39.0 O23.4
 - ~~----- N60–N64 (see also condition/in pregnancy) NEC O99.8~~
 - ~~----- N70–N73, N76, N77* O23.5~~
 - ~~----- N73.6 O34.8~~
 - ~~----- N80–N90 (see also Pregnancy/complicated by/abnormal, abnormality/by site) NEC O99.8~~
 - ~~----- N85.4 O34.5~~
 - ~~----- N85.4 O34.5~~
 - - - N93.0–N93.9 O46.-
 - - - Q00–Q99 NEC O99.8
 - - - R00–R99 O99.8
 - - - R73 O24.-
 - - congenital malformations, deformations and chromosomal abnormalities NEC O99.8
 - - contracted pelvis (general) O33.1
 - - inlet O33.2
 - - outlet O33.3
 - - convulsions (eclamptic) (uraemic) ([see also Eclampsia](#)) O15.0
 - - [cyst](#)
 - - - [ovary O34.8](#)
 - - - [pelvis O34.8](#)
 - - cystitis O23.1
 - - cystocele O34.8
 - - death of fetus (≥ 20 completed weeks (140 days) gestation and/or fetal weight ≥ 400g) (after fetal viability) O36.4
 - - before fetal viability, with retention (< 20 completed weeks (140 days) gestation and/or fetal weight < 400g) O02.1
 - - decidualitis O41.1
 - - [deformity](#)
 - - - [pelvic organs or tissues O34.8](#)
 - - diabetes (mellitus) O24.9-
 - - - gestational O24.4-
 - - - pre-existing O24.3-
 - - - specified NEC O24.2-
 - - - Type 1 O24.0
 - - - Type 2 O24.1-
 - - diastasis recti (abdominal muscle) (DRAM) O71.82
 - - diseases of
 - ...
 - - - eye and adnexa (conditions in H00–H59) O99.8
 - - - [genital organs NEC \(see also Pregnancy/complicated by/abnormal, abnormality/by site\) O99.8](#)
 - - - - [with infection O23.-](#)
 - - - - [with predominantly sexual mode of transmission NEC O98.3](#)
 - - - - [abnormal bleeding \(uterine\) \(vaginal\) O46.-](#)
 - - - genitourinary system (conditions in N00–N99) ([see also Pregnancy/complicated by/diseases of/genital organs](#))
 - NEC-O26.81
 - - - - [with infection O23.-](#)
 - - - - [with predominantly sexual mode of transmission NEC O98.3](#)
 - ~~----- N10–N12 O23.0~~

- ~~----- N13.6 O23.3~~
- ~~----- N15.1 O23.0~~
- ~~----- N30 O23.1~~
- ~~----- N34 O23.2~~
- ~~----- N39.0 O23.4~~
- ~~----- N70-N73, N76, N77* O23.5~~
- ~~----- N73.6 O34.8~~
- ~~----- N80-N90 (see also *Pregnancy/complicated by/abnormal, abnormality/by site*) NEC O99.8~~
- ~~----- N85.4 O34.5~~
- ~~----- N85.4 O34.5~~
- - kidney — see *Pregnancy/complicated by/diseases of/genitourinary system*
- ...
- - nervous system (conditions in G00–G99) NEC O99.3²
- - G08 O22.9
- - respiratory system (conditions in J00–J99) O99.5
- - skin and subcutaneous tissue (conditions in L00–L99) O99.7
- - disorders of liver O26.6
- - displacement, uterus NEC O34.5
- - disproportion — see *Disproportion*
- - [donovanosis O98.3](#)
- [double](#)
- [uterus O34.0](#)
- [vagina O34.6](#)
- - drug dependence (conditions in F11–F19, fourth character .2) O99.3¹
- - early delivery ([before 37 completed weeks of gestation](#)) (with spontaneous labour) NEC O60.1
- - without spontaneous labour O60.3
- - eclampsia, eclamptic (coma) (convulsions) (delirium) (nephritis) (uraemia) O15.0
- - with pre-existing hypertension O15.0
- - effusion, amniotic fluid O41.8
- - [endometriosis NEC O34.8](#)
- [cutaneous scar O99.8](#)
- [intestine O99.8](#)
- [peritoneum \(pelvic\) O34.7](#)
- [uterus O34.5](#)
- [vagina O34.6](#)
- - embolism (cerebral) (precerebral) (pulmonary) NEC O88.2
- air O88.0
- amniotic fluid O88.1
- blood clot (thromboembolism) O88.2
- fat O88.8
- pyaemic O88.3
- septic O88.3
- specified O88.8
- - endocrine diseases NEC O99.2
- - endometritis O23.5
- decidual O41.1
- - excessive ~~weight gain NEC O26.0~~
- [fetal growth O36.6](#)
- [with disproportion O33.5](#)
- [weight gain NEC O26.0](#)
- - exhaustion O26.88
- ...
- - false labour (~~Braxton Hicks~~) (~~irregular uterine tightenings~~) (~~irritable uterus~~) (~~pains~~) (~~see also Labour/false~~) O47.9 — see [Labour/false](#)
- ...
- - fibroid (tumour) (uterus) O34.1
- - [fibromyoma O34.1](#)
- - [fibrosis of perineum O34.7](#)
- - [fistula](#)
- [genital tract-intestine O99.8](#)
- [genital tract-skin O99.8](#)
- [genitourinary O34.8](#)
- - genital infection O23.5
- [with a predominantly sexual mode of transmission NEC O98.3](#)
- - glomerular diseases (conditions in N00–N07) O26.81
- - with pre-existing hypertension O10
- - gonococcal infection O98.2
- - [granuloma inguinale O98.3](#)

- - [haematoma, broad ligament O34.8](#)
- - [haematosalpinx O34.8](#)
- - haemorrhage NEC
- - - antepartum (*see also Haemorrhage/antepartum*) O46.9
- - - before 20 completed weeks gestation O20.9
- - - - specified NEC O20.8
- - - due to premature separation, placenta O45.9
- - - early O20.9
- - - - specified NEC O20.8
- - - threatened abortion O20.0
- - haemorrhoids O22.4
- - herniation of uterus O34.5
- - [herpesviral infection NEC O98.5](#)
- - - [with a predominantly sexual mode of transmission O98.3](#)
- - high fetal head at term O32.4
- - [history — see *Pregnancy/complicated by/previous AND Pregnancy/supervision/history*](#)
- - human immunodeficiency virus (HIV) disease O98.7
- ...
- - incompetent cervix O34.3
- - [infantile](#)
- - - [genitalia, genitals O34.8](#)
- - - [uterus O34.5](#)
- - infection(s)
- - - [with a predominantly sexual mode of transmission NEC O98.3](#)
- - - amniotic fluid or sac O41.1
- - - bladder O23.1
- - - genital organ or tract O23.5
- - - genitourinary tract NEC O23.9
- - - kidney O23.0
- - - ~~[with a predominantly sexual mode of transmission NEC O98.3](#)~~
- - - specified NEC O98.8
- - - urethra O23.2
- - - urinary (tract) O23.4
- - - - specified part NEC O23.3
- - infectious or parasitic disease NEC O98.9
- - insufficient weight gain O26.1
- - intermediate hyperglycaemia (tolerance) O24.5-
- - intrauterine death (≥ 20 completed weeks (140 days) gestation and/or fetal weight ≥ 400 g) (after fetal viability) O36.4
- - - before fetal viability, with retention (< 20 completed weeks (140 days) gestation and/or fetal weight < 400 g) O02.1
- - [irregular](#)
- - - [contractions — see *Labour/false*](#)
- - - [uterine tightenings — see *Labour/false*](#)
- - [irritable uterus — see *Labour/false*](#)
- - isoimmunisation (ABO) O36.1
- - - Rh (factor) (rhesus) O36.0
- - kidney disease or failure NEC O26.81
- - - with pre-existing hypertension O10
- - large-for-dates fetus O36.6
- - [lateroversion](#)
- - - [cervix O34.4](#)
- - - [uterus O34.5](#)
- - [ligament pain \(broad\) \(round\) O34.8](#)
- - light-for-dates fetus O36.5
- - malaria O98.6
- - malformation
- - - [pelvic organs or tissues O34.8](#)
- - - placenta, placental (vessel) O43.1
- - - uterus (congenital) O34.0
- - malnutrition (conditions in E40–E46) O25
- - malposition
- - - fetus — *see Malpresentation, fetal*
- - - [pelvic organs or tissues O34.8](#)
- - - uterus O34.5
- - malpresentation of fetus — *see Malpresentation, fetus*
- - mental disorders (conditions in F00–F99) O99.31
- ...
- - neuralgia O99.32
- - neuritis O99.32

- - [noninflammatory disorder genital tract](#) — *see Pregnancy/complicated by/abnormal, abnormality/by site*
- - nutritional diseases NEC O99.2
- - oblique lie or presentation O32.2
- - oedema O12.0
- - - with proteinuria O12.2
- - oligohydramnios NEC O41.0
- - onset of contractions before 37 weeks gestation — *see Labour/early onset*
- - oophoritis O23.5
- - oversize fetus O33.5
- - [pain, ligament \(broad\) \(round\) O34.8](#)
- - papyraceous fetus O31.0
- - [patent cervix O34.3](#)
- - [pelvic girdle pain O26.7](#)
- - [pendulous abdomen O34.8](#)
- - peripheral neuritis O99.32
- - [persistent hymen O34.7](#)
- - phlebothrombosis O22.9
- - placenta, placental
- - - abnormality O43.1
- - - abruptio or ablatio (*see also Abruptio placentae*) O45.9
- - - accreta O43.2
- - - detachment (*see also Abruptio placentae*) O45.9
- - - disease O43.9
- - - dysfunction O43.8
- - - increta O43.2
- - - infarction O43.8
- - - [insufficiency O36.5](#)
- - - low implantation (with haemorrhage) O44.1
- - - - without haemorrhage O44.0
- - - - malformation O43.1
- - - malposition (with haemorrhage) O44.1
- - - - without haemorrhage O44.0
- - - morbidly adherent O43.2
- - - percreta O43.2
- - - praevia (with haemorrhage) O44.1
- - - - without haemorrhage O44.0
- - - separation, premature (*see also Abruptio placentae*) O45.9
- - - transfusion syndrome O43.0
- - placentitis O41.1
- - polyhydramnios O40
- - polyp — *see Pregnancy/complicated by/tumour*
- - - [cervix O34.4](#)
- - - [genital tract NEC O34.8](#)
- - - [uterus O34.1](#)
- - - [vagina O34.6](#)
- - - [vulva O34.7](#)
- - [poor fetal growth O36.5](#)
- - postmaturity O48
- - pre-eclampsia O14.9
- - - mild O14.0
- - - moderate O14.0
- - - severe O14.1
- - premature rupture of membranes — *see Rupture/membranes/premature*
- - previous — *see also Pregnancy/supervision/~~previous~~ history*
- - - ~~abortion Z35.1~~
- - - ~~habitual O26.2~~
- - - caesarean section O34.2
- - - - proceeding to vaginal delivery O75.7
- - - [surgery](#)
- - - - [cervix O34.4](#)
- - - - [gynaecological NEC O34.8](#)
- - - - [pelvic \(floor\) \(soft tissues\) O34.8](#)
- - - - [perineum O34.7](#)
- - - - [uterus O34.2](#)
- - - - [vagina O34.6](#)
- - - - [vulva O34.7](#)
- - - ~~prolapse, uterus O34.5~~
- - - [and hernia, ovary or fallopian tube O34.8](#)
- - - [cervix O34.4](#)
- - - [genital NEC O34.8](#)
- - - [uterovaginal O34.5](#)

- [- - - uterus O34.5](#)
- [- - - vagina \(anterior\) \(wall\) O34.6](#)
- - prolonged pregnancy O48
- - proteinuria O12.1
- - - with oedema O12.2
- - protozoal diseases O98.6
- - pruritus (neurogenic) O99.7
- - psychosis or psychoneurosis O99.3₁
- - ptyalism O99.6
- - pyelitis O23.0
- [- - rectocele O34.6](#)
- - renal disease or failure NEC — *see Pregnancy/complicated by/kidney disease or failure*
- - retention, retained
- - - dead ovum O02.0
- - - intrauterine contraceptive device O26.3
- - retroversion, uterus O34.5
- - Rh (factor) (rhesus) immunisation, incompatibility or sensitisation O36.0
- [- - rigid](#)
- [- - - cervix O34.4](#)
- [- - - pelvic floor O34.8](#)
- [- - - perineum O34.7](#)
- [- - - vagina O34.6](#)
- [- - - vulva O34.7](#)
- - rupture
- - - amnion (premature) — *see Rupture/membranes/premature*
- - - membranes (premature) — *see Rupture/membranes/premature*
- - - uterus (~~during labour~~) ~~O71.1-O71.0-~~
- ~~before onset of labour O71.0-~~
- [- - sacculation O34.5](#)
- - salivation (excessive) O99.6
- - salpingitis O23.5
- - salpingo-oophoritis O23.5
- [- - scar, scarring](#)
- [- - - cervix O34.4](#)
- [- - - previous surgery — *see Pregnancy/complicated by/previous/surgery*](#)
- [- - separation, symphysis pubis O26.7](#)
- - sepsis (conditions in A40.-, A41.-) O98.8
- [- - septate vagina O34.6](#)
- [- - Shirodkar suture O34.3](#)
- - signs of fetal hypoxia (unrelated to labour or delivery) O36.3
- - small-for-dates fetus O36.5
- - specified condition NEC O26.88
- - spurious labour pains (*see also Labour/false*) O47.9
- [- - stenosis](#)
- [- - - cervix O34.4](#)
- [- - - vagina O34.6](#)
- [- - stricture](#)
- [- - - cervix O34.4](#)
- [- - - vagina O34.6](#)
- - superfecundation O30.8
- - superfetation O30.8
- [- - suspended uterus O34.5](#)
- [- - symphysis pubis separation O26.7](#)
- - syphilis (conditions in A50–A53) O98.1
- - threatened
- - - abortion O20.0
- - - delivery ~~O47.9~~ — *see Labour/false*
- ~~at or after 37 completed weeks of gestation O47.1~~
- ~~before 37 completed weeks of gestation O47.0~~
- - thrombophlebitis O22.9
- - thrombosis O22.9
- - torsion ~~of uterus O34.5~~
- [- - - fallopian tube O34.8](#)
- [- - - ovary \(ovarian pedicle\) O34.8](#)
- [- - - uterus O34.5](#)
- - toxæmia (*see also Pre-eclampsia*) O14.9
- - transverse lie or presentation O32.2
- [- - trichomonas, urogenital O98.3](#)
- - tuberculosis (conditions in A15–A19) O98.0
- - tumour
- - - cervix (uteri) O34.4

- - - ovary O34.8
- - - pelvic organs or tissues NEC O34.8
- - - [perineum O34.7](#)
- - - uterus (body) (see also *Pregnancy/complicated by/tumour/cervix*) O34.1
- - - [vagina O34.6](#)
- - - [vulva O34.7](#)
- - unstable lie O32.0
- - urethritis O23.2
- - [urethrocele O34.8](#)
- - [uterine scar from previous surgery O34.2](#)
- - vaginitis or vulvitis O23.5
- - [vaginal enterocele O34.6](#)
- - - [with prolapse of uterus O34.5](#)
- - [varices O22.9](#)
- - varicose
- - placental vessels O43.8
- - veins O22.9
- - venereal disease (conditions in A64) NEC O98.3
- - viral diseases (conditions in A80–B09, B25–B34) O98.5
- - vomiting NEC O21.9
- - - after 20 completed weeks gestation O21.2
- - - before 20 completed weeks gestation O21.0
- - [warts, anogenital \(conditions in A63.00–A63.05\) O98.3](#)
- complication NEC O26.9
- ...
- concealed, [affecting management of pregnancy \(supervision\) Z35.3](#)
- ...
- continuing after
- - abortion of one fetus or more ([medical](#)) ([missed](#)) ([spontaneous](#)) O31.1
- - intrauterine death of one fetus or more ~~O31.2~~
- - - [after fetal viability \(≥ 20 completed weeks \(140 days\) gestation and/or fetal weight ≥ 400g\) O31.2](#)
- - - [before fetal viability \(< 20 completed weeks \(140 days\) gestation and/or fetal weight < 400g\) O31.1](#)
- ...
- duration [NEC O09.9](#)
- - < 5 completed weeks O09.0
- - 5–13 completed weeks O09.1
- - 14–19 completed weeks O09.2
- - 20–25 completed weeks O09.3
- - 26–33 completed weeks O09.4
- - 34–< 37 completed weeks O09.5
- ~~unspecified duration of pregnancy O09.9~~
- ectopic (ruptured) O00.9
- ...
- hidden, [affecting management of pregnancy](#) (supervision ~~only~~) Z35.3
- illegitimate (unwanted) Z64.0
- - [affecting management of pregnancy \(supervision\) Z35.7](#)
- ~~supervision of high-risk pregnancy Z35.7~~
- in double uterus O34.0
- ...
- management affected by — see *Pregnancy/supervision*
- ...
- supervision (for) ([high-risk conditions and problems affecting management of pregnancy](#)) (of)
- - advanced maternal age
- - - multigravida Z35.52
- - - primigravida Z35.51
- - elderly
- - - multigravida Z35.52
- - - primigravida Z35.51
- - high-risk Z35.9
- - - specified NEC Z35.8
- - [history](#)
- - - [abortion Z35.1](#)
- - - [difficult delivery Z35.2](#)
- - - [forceps delivery Z35.2](#)
- - - [haemorrhage, antepartum or postpartum Z35.2](#)
- - - [hydatidiform mole Z35.1](#)
- - - [infertility Z35.0](#)
- - - [malignancy NEC Z35.8](#)
- - - [neonatal death Z35.2](#)
- - - [nonobstetric condition Z35.8](#)

- - - [obstetric condition \(conditions in O10–O92\) Z35.2](#)
- - - [preterm delivery Z35.2](#)
- - - [stillbirth Z35.2](#)
- - - [trophoblastic disease \(conditions in O01.-\) Z35.1](#)
- - - [vesicular mole Z35.1](#)
- - maternal age
- - - advanced
- - - - multigravida Z35.52
- - - - primigravida Z35.51
- - - very young primigravida Z35.6
- - multiparity (grand) Z35.4
- - normal NEC Z34.9
- - - 1st Z34.0
- - - specified Z34.8
- - poor obstetric history (conditions in O10–O92) Z35.2
- ~~— previous~~
- ~~— abortion Z35.1~~
- ~~— habitual O26.2~~
- ~~— difficult delivery Z35.2~~
- ~~— forceps delivery Z35.2~~
- ~~— haemorrhage, antepartum or postpartum Z35.2~~
- ~~— hydatidiform mole Z35.1~~
- ~~— infertility Z35.0~~
- ~~— malignancy NEC Z35.8~~
- ~~— neonatal death Z35.2~~
- ~~— nonobstetric condition Z35.8~~
- ~~— premature delivery Z35.2~~
- ~~— stillbirth Z35.2~~
- ~~— trophoblastic disease (conditions in O01.-) Z35.1~~
- ~~— vesicular mole Z35.1~~
- - social problem Z35.7
- - specified problem NEC Z35.8
- - very young primigravida Z35.6
- triplet O30.1
- tubal (with abortion) (with rupture) O00.1

...

Premature — *see also condition*

- adrenarache E27.0
- aging E34.8
- beats I49.4
- - atrial I49.1
- birth NEC ([see also Preterm](#)) P07.30
- ~~— 28 completed weeks or more but less than 32 completed weeks P07.31~~
- ~~— 32 completed weeks or more but less than 37 completed weeks P07.32~~
- ~~— extremely~~
- ~~— 24 completed weeks or more but less than 28 completed weeks P07.22~~
- ~~— less than 24 completed weeks P07.21~~
- closure, foramen ovale Q21.89
- contraction
- - atrial I49.1
- - atrioventricular I49.2
- - heart (extrasystole) I49.4
- - junctional I49.2
- - ventricular I49.3
- delivery ([with spontaneous labour](#)) NEC O60.1 — [see Delivery/preterm](#)
- ~~— without spontaneous labour O60.3~~
- ejaculation F52.4
- infant NEC ([see also Preterm](#)) P07.30
- ~~— 28 completed weeks or more but less than 32 completed weeks P07.31~~
- ~~— 32 completed weeks or more but less than 37 completed weeks P07.32~~
- ~~— extremely~~
- ~~— 24 completed weeks or more but less than 28 completed weeks P07.22~~
- ~~— less than 24 completed weeks P07.21~~
- ~~— light for dates P05.0~~
- lungs P28.0
- menopause E28.3
- newborn — [see Promaturity/Preterm](#)
- puberty E30.1
- rupture, membranes or amnion ([see also Rupture/membranes/premature](#)) O42.9
- - affecting fetus or newborn P01.1

- senility E34.8
- separation, placenta (partial) (*see also Abruptio placentae*) O45.9
- thelarche E30.8
- ventricular systole I49.3

Prematurity NEC (*see also Preterm*) P07.30

- ~~- 28 completed weeks or more but less than 32 completed weeks P07.31~~
- ~~- 32 completed weeks or more but less than 37 completed weeks P07.32~~
- ~~- extremely~~
- ~~- 24 completed weeks or more but less than 28 completed weeks P07.22~~
- ~~- less than 24 completed weeks P07.21~~

Premenstrual tension (syndrome) N94.3

...

Pressure

- area — *see Injury/pressure*
- birth, ~~fetus or newborn~~, NEC P15.9
- brachial plexus G54.0
- brain G93.5
- ~~- due to birth trauma NEC P11.1~~
- ~~- trauma at birth NEC P11.1~~
- cone, tentorial G93.5
- hyposystolic (*see also Hypotension*) I95.9
- - incidental reading, without diagnosis of hypotension R03.1
- increased
- - intracranial (benign) G93.2
- ~~- - due to birth trauma P11.0~~
- ~~- - trauma at birth P11.0~~
- - intraocular H40.0

...

Preterm infant, newborn- (infant) NEC P07.30

- 28 completed weeks or more but less than 32 completed weeks P07.31
- 32 completed weeks or more but less than 37 completed weeks P07.32
- extremely
- - 24 completed weeks or more but less than 28 completed weeks P07.22
- - less than 24 completed weeks P07.21

...

Primigravida

- elderly, affecting management of pregnancy, ~~labour and delivery~~ (supervision-only) Z35.51
- very young, affecting management of pregnancy, ~~labour and delivery~~ (supervision-only) Z35.6

Primipara

- elderly, affecting management of pregnancy, ~~labour and delivery~~ (supervision-only) Z35.51
- very young, affecting management of pregnancy, ~~labour and delivery~~ (supervision-only) Z35.6

...

Prolonged, prolongation

- bleeding time (*see also Defect/coagulation*) R79.83
- - with bleeding due to circulating anticoagulants D68.3
- coagulation or prothrombin time R79.83
- - with bleeding due to circulating anticoagulants D68.3
- labour O63.9
- - 1st stage O63.0
- - 2nd stage O63.1
- ~~- 3rd stage O63.3~~
- - affecting fetus or newborn P03.8

...

Psychosis, psychotic F29

...

- in pregnancy or childbirth O99.31

...

- organic F09

...

- - in pregnancy or childbirth O99.31

...

Puerperal, puerperium — *see also condition/puerperal, postpartum*

...

- haemorrhage (*see also Haemorrhage/postpartum*) O72.1

- - brain O99.4

- - bulbar O99.4

- - cerebellar O99.4

- - cerebral O99.4

- - cortical O99.4

~~- - delayed (uterine) O72.2~~

- - extradural O99.4

- - internal capsule O99.4

- - intracranial O99.4

- - intrapontine O99.4

- - meningeal O99.4

- - pontine O99.4

- - subarachnoid O99.4

- - subcortical O99.4

- - subdural O99.4

- - uterine, ~~delayed~~ (≤ 24 hours following delivery of placenta) O72.2 O72.1

- - - delayed or secondary (> 24 hours post delivery of placenta) O72.2

- - ventricular O99.4

...

- hemiplegia, cerebral O99.32

- - due to cerebrovascular disorder O99.4

...

- metrorrhagia (*see also Haemorrhage/postpartum*) (≤ 24 hours following delivery of placenta) O72.1

- - delayed or secondary (secondary) (> 24 hours post delivery of placenta) O72.2

...

- neuritis O99.32

...

Quadriplegia (chronic) G82.5-

Note: The following fifth character subdivision is ~~for use~~ assigned with category G82:

0 unspecified

...

6 incomplete, chronic

- congenital (cerebral) G80.8

- due to birth trauma NEC P11.9

- embolic (current episode) I63.4

- flaccid G82.3-

- - congenital (cerebral) G80.8

- - - spastic G80.03

~~- - newborn NEC P11.9~~

- spastic G82.4-

- - congenital (cerebral) G80.03

- spinal G82.4-

- thrombotic (current episode) I63.3

- traumatic (spinal cord) current episode — *see also Injury/spinal cord*

- - due to birth trauma NEC P11.9

Quadruplet

...

Retention, retained

- [breast milk \(postpartum\) \(puerperal\) O92.7-](#)

- cyst — see *Cyst*

- dead

- - fetus

- - - after fetal viability (≥ 20 completed weeks (140 days) gestation and/or fetal weight ≥ 400 g) O36.4

- - - before fetal viability (< 20 completed weeks (140 days) gestation and/or fetal weight < 400 g) O02.1

- - ovum O02.0

- decidua (~~following delivery) (fragments) (with haemorrhage) O72.2~~ [O73.1](#)

~~— with abortion — see *Abortion/by type*~~

~~— without haemorrhage O73.1~~

~~— following abortion — code to O03-O06 with fourth character .0-4~~

- deciduous tooth K00.6

- dental root K08.3

- faecal (see also *Constipation*) K59.0

- fetus, dead — see *Retention, retained/dead/fetus*

...

- intrauterine contraceptive device, in pregnancy O26.3

- membranes (~~complicating delivery) (with haemorrhage) O72.2~~ [O73.1](#)

~~— with abortion — see *Abortion/by type*~~

~~— without haemorrhage O73.1~~

~~— following abortion — code to O03-O06 with fourth character .0-4~~

- meniscus (see also *Derangement/meniscus*) M23.3-

- menses N94.8

- milk, [breast](#) (postpartum) (puerperal) O92.7-

- nitrogen, extrarenal R39.2

...

- placenta (total) (~~with haemorrhage) O72.0~~ [O73.0](#)

~~— without haemorrhage O73.0~~

~~— portions or fragments (with haemorrhage) O72.2~~

~~— without haemorrhage O73.1~~

~~— following abortion — code to O03-O06 with fourth character .0-4~~

~~— partial (fragments) (portions) O73.1~~

- products of conception — (see also *Retention, retained/dead/fetus*) [O73.1](#)

- - following [abortion — code to O03-O06 with fourth character .0-4](#)

~~— abortion — see *Abortion/by type/complicated/incomplete*~~

~~— delivery (with haemorrhage) O72.2~~

~~— without haemorrhage O73.1~~

- secundines (~~total) (following delivery) (with haemorrhage) O72.0~~ [O73.0](#)

~~— with abortion — see *Abortion/by type*~~

~~— following abortion — code to O03-O06 with fourth character .0-4~~

~~— without haemorrhage O73.0~~

~~— complicating puerperium (delayed haemorrhage) O72.2~~

- - partial ([fragments](#)) ([portions](#)) [O72.2](#) [O73.1](#)

~~— without haemorrhage O73.1~~

- smegma, clitoris N90.8

...

Retraction

...

- nipple N64.5

- - [associated with lactation O92.0-](#)

- - congenital Q83.8

- - in pregnancy O92.00

- - puerperal, postpartum O92.0-

...

Rupture, ruptured (see also *Injury/by site*)

...

- bladder (nontraumatic) (sphincter) (spontaneous) N32.4
- - following abortion ([subsequent episode](#)) O08.6
- - - [current episode — see Abortion](#)
- ~~- - - obstetrical trauma O71.5~~
- - traumatic (extraperitoneal) (intraperitoneal) S37.22
- - - [due to obstetric trauma \(during labour and delivery\) O71.5](#)

...

- bowel (nontraumatic) ([see also Rupture, ruptured/intestine](#)) K63.1
- ~~- - fetus and newborn P78.0~~
- ~~- - obstetric trauma O71.5~~
- ~~- - traumatic — see Injury/intestine~~

...

- cervix (uteri)
- - following abortion ([subsequent episode](#)) O08.6
- - - [current episode — see Abortion](#)
- ~~- - - obstetrical trauma O71.3~~
- - traumatic S37.6
- - - [due to obstetric trauma \(during labour and delivery\) O71.3](#)

...

- colon (nontraumatic) ([see also Rupture, ruptured/intestine](#)) K63.1
- ~~- - fetus or newborn P78.0~~
- ~~- - obstetric trauma O71.5~~
- ~~- - traumatic — see Injury/colon/by site~~

...

- fallopian tube (nonobstetric) (nontraumatic) NEC N83.8
- - due to [tubal](#) pregnancy O00.1
- - traumatic S37.5

...

- ileum (nontraumatic) ([see also Rupture, ruptured/intestine](#)) K63.1
- ~~- - fetus or newborn P78.0~~
- ~~- - obstetric trauma O71.5~~
- - traumatic S36.49

...

- intestine (nontraumatic) NEC K63.1
- - fetus or newborn P78.0
- - following abortion ([subsequent episode](#)) O08.6
- - - [current episode — see Abortion](#)
- ~~- - - obstetric trauma O71.5~~
- - traumatic — see *Injury/intestine*
- iris H21.5
- - traumatic — see *Rupture/eye*
- jejunum, jejunal (nontraumatic) ([see also Rupture, ruptured/intestine](#)) K63.1
- ~~- - fetus or newborn P78.0~~
- ~~- - obstetric trauma O71.5~~
- - traumatic S36.49

...

- kidney S37.03
- - with complete disruption of parenchyma S37.03
- ~~- - birth trauma P15.8~~
- - capsule S37.02
- - [due to birth trauma P15.8](#)
- - nontraumatic N28.8

...

- ligament (traumatic) ([see also Sprain](#)) T14.3
- - ankle S93.2
- - [broad](#)
- - - [due to obstetric trauma \(during labour and delivery\) O71.6](#)
- - - following abortion ([subsequent episode](#)) O08.6
- - - - [current episode — see Abortion](#)
- - carpus (radiocarpal) (ulnocarpal) S63.3

...

- liver S36.15
- ~~- - birth trauma P15.0~~
- - [due to birth trauma P15.0](#)
- lymphatic vessel I89.8

...

- membranes (spontaneous)
- ...
- - false ~~O47.~~ — [see Labour/false](#)
- ...
- oviduct (nonobstetric) (nontraumatic) N83.8
- - due to [tubal](#) pregnancy O00.1
- - traumatic S37.5
- ...
- pelvic — [see Injury/pelvis, pelvic](#)
- ~~— floor, complicating delivery O70.1~~
- ~~— organ NEC, obstetrical trauma O71.5~~
- perineum (nonobstetric) (nontraumatic) N90.8
- ~~— complicating delivery O70.9~~
- ~~— 1st degree O70.0~~
- ~~— 2nd degree O70.1~~
- ~~— 3rd degree O70.2~~
- ~~— 4th degree O70.3~~
- - traumatic S31.0
- - - during delivery NEC O70.9
- - - - 1st degree O70.0
- - - - 2nd degree O70.1
- - - - 3rd degree O70.2
- - - - 4th degree O70.3
- popliteal cyst M66.0
- ...
- rectum (nontraumatic) K63.1
- - fetus or newborn P78.0
- ~~— obstetric trauma O71.5~~
- - traumatic S36.6
- - - due to obstetric trauma (during labour and delivery) O71.5
- ...
- sigmoid (nontraumatic) ([see also Rupture, ruptured/intestine](#)) K63.1
- ~~— fetus or newborn P78.0~~
- ~~— obstetric trauma O71.5~~
- - traumatic S36.54
- spinal cord ([see also Injury/spinal cord/by region](#)) T09.3
- - due to birth trauma P11.5
- ~~— fetus or newborn (birth trauma) P11.5~~
- spleen (traumatic) S36.04
- ~~— birth trauma P15.1~~
- ~~— congenital (birth trauma) P15.1~~
- - due to [Plasmodium vivax malaria B51.0](#)
- - - birth trauma P15.1
- - - [Plasmodium vivax malaria B51.0](#)
- - nontraumatic D73.5
- ...
- symphysis pubis [M25.55](#)
- - in pregnancy, childbirth or puerperium O26.7
- ~~— obstetric O71.6~~
- - traumatic S33.4
- - - due to obstetric trauma (during labour and delivery) O71.6
- ...
- tube, tubal (nonobstetric) (nontraumatic) N83.8
- - abscess ([see also Salpingo-oophoritis](#)) N70.9
- - due to [tubal](#) pregnancy O00.1
- ...
- umbilical cord, ~~complicating delivery O69.8~~
- - affecting fetus or newborn P50.1
- - [complicating labour and delivery O69.8](#)
- ureter (traumatic) S37.1
- ...
- urethra (nontraumatic) N36.8
- ~~— following abortion O08.6~~
- ~~— obstetrical trauma O71.5~~
- - traumatic — [see Injury/urethra/by site](#)
- ...
- uterus (traumatic) S37.6
- - due to obstetric trauma (during labour) O71.1-
- - - affecting fetus or newborn P03.8
- - - before onset of labour (in pregnancy) O71.0-

- ~~— during labour or delivery O71.1-~~
- ~~— affecting fetus or newborn P03.8~~
- ~~- - following~~
- ~~- - - abortion (subsequent episode) O08.6~~
- ~~- - - - current episode — see Abortion~~
- ~~— in pregnancy O71.0-~~
- - nonpuerperal, nontraumatic N85.8
- vagina S31.4
- ~~— complicating delivery O71.4~~
- ~~- - due to obstetric trauma (during labour and delivery) O71.4~~
- valve, valvular (heart) — see Endocarditis
- varicose vein — see Varicose/vein
- varix — see Varix
- vena cava R58
- vessel R58
- - pulmonary I28.8
- viscus R19.89
- vulva S31.4
- ~~— complicating delivery O70.0~~
- ~~- - during delivery O70.0~~

Russell-Silver syndrome Q87.15

...

[S/D \(systolic/diastolic\) ratio, increased, affecting management of pregnancy O36.5](#)

Saber, sabre tibia (syphilitic) A50.5† M90.26*

...

Salpingo-oophoritis (purulent) (ruptured) (septic) (suppurative) N70.9

- acute N70.0
- ~~— following~~
- ~~— abortion (subsequent episode) O08.0~~
- ~~— current episode — see Abortion~~
- ~~— ectopic or molar pregnancy O08.0~~
- - gonococcal A54.2† N74.3*
- chronic (see also Salpingo-oophoritis/by type/chronic) N70.1
- following
- - abortion (subsequent episode) O08.0
- - - current episode — see Abortion
- - ectopic or molar pregnancy O08.0
- gonococcal (acute) (chronic) A54.2† N74.3*
- in pregnancy O23.5
- - affecting fetus or newborn P00.8
- puerperal, postpartum O86.1
- ~~— specific A54.2† N74.3*~~
- tuberculous (acute) (chronic) A18.1† N74.1*
- venereal A54.2† N74.3*

...

Separation

- anxiety, abnormal (of childhood) F93.0
- apophysis, traumatic — code as Fracture/by site
- choroid H31.4
- epiphysis, epiphyseal, traumatic — code as Fracture/by site
- fracture — see Fracture
- joint (current) (traumatic) — code as Dislocation/by site
- placenta (normally implanted) (premature) (see also Abruptio placentae) O45.9
- pubic bone, due to obstetric† trauma (during labour and delivery) O71.6
- retina, retinal — see Detachment/retina
- symphysis pubis, due to obstetric† trauma (during labour and delivery) O71.6
- tracheal ring, incomplete, congenital Q32.1

...

Shutdown, kidney (see also Failure/kidney) N19

- ~~— following~~
- ~~— abortion (subsequent episode) O08.4~~
- ~~— current episode — see Abortion~~
- ~~— ectopic or molar pregnancy O08.4~~
- Shy-Drager syndrome** — see Atrophy/multiple (multi-) system

...

Subinvolution

- breast N64.8
- - [associated with lactation \(postlactation\) O92.2-](#)
- - puerperal, postpartum O92.2-
- uterus N85.3

...

Supervision (of)

- child NEC Z76.22
- - awaiting adoption or foster placement Z76.21
- - contraceptive method previously prescribed Z30.5
- dietary Z71.3
- ~~high-risk pregnancy (see also Pregnancy/supervision) Z35.9~~
- infant NEC Z76.22
- - abandoned (foundling) Z76.1
- - awaiting adoption or foster placement Z76.21
- [initial episode for staged medical abortion Z32.2](#)
- lactation ([without lactation disorder](#)) Z39.1
- pregnancy ([high-risk](#)) — see *Pregnancy/supervision*

...

Suppuration, suppurative — see also condition

...

- breast N61
- - [associated with lactation O91.1-](#)
- - in pregnancy O91.10
- - puerperal, postpartum O91.1-

...

- mammary gland N61
- - [associated with lactation O91.1-](#)
- - in pregnancy O91.10
- - puerperal, postpartum O91.1-

...

Syndrome — see also Disease

...

- carpal tunnel G56.0
- - in pregnancy, [childbirth or puerperium](#) O99.32

...

- defibrination (see also *Fibrinolysis*) D65

...

- - fetus or newborn P60
- - [following](#)
- - - [abortion \(subsequent episode\) O08.1](#)
- - - - [current episode — see Abortion](#)
- - - [ectopic or molar pregnancy O08.1](#)
- - postpartum O72.3

...

- HELLP (haemolysis, elevated liver enzymes and low platelet count) ([with severe pre-eclampsia](#)) O14.2

...

- lower radicular, ~~newborn due to (birth trauma)~~ P14.8

...

- placental
- - dysfunction O43.8
- - - affecting fetus or newborn P02.2
- - insufficiency O43.8
- - - affecting fetus or newborn P02.2
- - transfusion (mother) O43.0
- ~~in fetus or newborn P02.3~~
- - - [affecting fetus or newborn P02.3](#)
- Plummer-Vinson D50.1

...

- radicular NEC M54.1-
- - upper limbs, ~~newborn due to (birth trauma)~~ P14.3

...

- twin (to twin) transfusion [O43.0](#)
- - [affecting fetus or newborn P02.3](#)
- ~~in fetus or newborn P02.3~~
- ~~mother O43.0~~
- Ullrich(-Bonnievie) (-Turner) Q96.-

...

System, systemic — *see also condition*

- atrophy, multiple (brain) (CNS) NEC G23.2
- - cerebellar type [MSA-C] G23.3
- - parkinsonian type [MSA-P] G23.2
- disease, combined — *see Degeneration/combined*
- hyalinosis (fibromatosis) (infantile) (juvenile) Q87.89
- lupus erythematosus (*see also Lupus/erythematosus/systemic*) M32.9
- - inhibitor present D68.6

[Systolic/diastolic \(S/D\) ratio, increased, affecting management of pregnancy O36.5](#)

...

Tear, torn (traumatic) (*see also Wound, open*) T14.1

- ~~— with abortion (subsequent episode) O08.6~~
- ~~— current episode — see Abortion~~
- anus, anal (sphincter) S31.80
- ~~— complicating delivery O70.2~~
- ~~— with mucosa O70.3~~
- - [during delivery O70.2](#)
- - - [with anal or rectal mucosa O70.3](#)
- - nontraumatic, nonpuerperal (*see also Fissure/anus*) K60.2
- articular cartilage, old M24.1-
- bladder [S37.28](#)
- - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- ~~— obstetrical O71.5~~
- ~~— traumatic S37.28~~
- bowel, ~~obstetrical trauma O71.5~~ — *see Injury/intestine*
- broad ligament, ~~obstetrical trauma O71.6~~ [S37.88](#)
- - [due to obstetric trauma \(during labour and delivery\) O71.6](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- bucket handle (knee) (meniscus) S83.2
- - old M23.2-
- capsule, joint — *see Sprain*
- cartilage — *see also Sprain*
- - articular, old M24.1-
- cervix [S37.6](#)
- - [due to obstetric trauma \(during labour and delivery\) O71.3](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- ~~— obstetrical trauma (current) O71.3~~
- - old N88.1
- ~~— traumatic S37.6~~
- dura — *see Tear/meninges*
- internal organ — *see Injury/by site*
- knee cartilage
- - articular (current) S83.3
- - old M23.2-
- ligament — *see also Sprain*
- - knee (current injury) NEC S83.6
- - - collateral S83.40
- - - - lateral (fibular) S83.43
- - - - medial (tibial) S83.44
- - - - cruciate S83.50
- - - - - anterior S83.53
- - - - - posterior S83.54
- - - old (chronic) M23.5-
- meninges
- - cerebral S06.9
- - - multiple S06.28
- - spinal T09.3
- meniscus (current injury) (knee) S83.2
- - bucket handle S83.2
- - - old (anterior horn) (lateral) (medial) (posterior horn) M23.2-
- - old (anterior horn) (lateral) (medial) (posterior horn) M23.2-
- - site other than knee — *code as Sprain*
- muscle — *see Injury/muscle*
- pelvic — *see Injury/pelvis, pelvic*

- ~~— floor, complicating delivery O70.1~~
- ~~— organ NEC, obstetric trauma O71.5~~
- perineum, perineal S31.0
- ~~— complicating delivery O70.9~~
- ~~— 1st degree O70.0~~
- ~~— 2nd degree O70.1~~
- ~~— 3rd degree O70.2~~
- ~~— 4th degree O70.3~~
- ~~— muscles O70.4~~
- ~~— skin O70.0~~
- ~~— slight O70.0~~
- - [during delivery NEC O70.9](#)
- - - [1st degree O70.0](#)
- - - [2nd degree O70.1](#)
- - - [3rd degree O70.2](#)
- - - [4th degree O70.3](#)
- - [muscles, during delivery O70.1](#)
- - [skin, during delivery O70.0](#)
- - [slight, during delivery O70.0](#)
- periurethral tissue, ~~obstetric trauma O70.0~~ [S37.38](#)
- - [during delivery O70.0](#)
- - [following abortion \(subsequent episode\) O08.6](#)
- - - [current episode — see Abortion](#)
- rectovaginal septum — *see Laceration/rectovaginal*
- retina, retinal (horseshoe) (without detachment) H33.3
- - with detachment H33.0
- rotator cuff (complete) (incomplete) (nontraumatic) M75.1
- - traumatic (tendon) S46.0
- - - capsule S43.4
- semilunar cartilage, knee (*see also Tear/meniscus*) S83.2
- serosal — *see Complication(s)/accidental puncture or laceration during procedure/by site*
- skin, nontraumatic (incidental) R23.4
- spleen (capsular) S36.02
- - with major disruption of parenchyma S36.04
- supraspinatus (complete) (incomplete) (nontraumatic) M75.1
- tendon — *see Injury/muscle*
- tentorial, ~~at~~ [due to birth trauma](#) P10.4
- umbilical cord
- - affecting fetus or newborn P50.1
- - complicating delivery O69.8
- urethra, ~~obstetric trauma O71.5~~ [S37.30](#)
- - [due to obstetric trauma \(during labour and delivery\) O71.5](#)
- ~~— periurethral tissue O70.0~~
- uterus — *see Injury/uterus*
- vagina — *see Laceration/vagina*
- vulva, ~~complicating delivery O70.0~~ [S31.4](#)
- - [during delivery O70.0](#)

...

Teratoma (solid) (M9080/1) — *see also Neoplasm/uncertain behaviour*

...

- sacral, fetal, ~~affecting labour or delivery (mother) O66.3~~
- - [with disproportion \(fetopelvic\) O33.7](#)
- - - [affecting labour or delivery O66.3](#)
- - [affecting labour or delivery O66.3](#)
- testis (M9080/3) C62.9

...

Tetanus, tetanic (cephalic) (convulsions) A35

- with abortion, or ectopic [or molar pregnancy gestation](#) A34
- in pregnancy, childbirth or puerperium A34
- inoculation Z23.5
- - reaction (due to serum) — *see Complication(s)/vaccination*
- neonatorum A33

...

Thelitis N61

- [associated with lactation O91.0-](#)
- in pregnancy O91.00
- puerperal, postpartum O91.0-

...

Threatened

- abortion O20.0
- ~~- with subsequent abortion O03-~~
- - affecting fetus P01.8
- job loss, anxiety concerning Z56.2
- labour ~~(see also Labour/false) O47.9~~ — [see also Labour/false](#)
- - affecting fetus [or newborn](#) P01.8
- loss of job, anxiety concerning Z56.2
- miscarriage O20.0
- - affecting fetus P01.8
- ~~- premature delivery, affecting fetus P01.8~~
- ~~- preterm delivery, affecting fetus or newborn P01.8~~
- unemployment, anxiety concerning Z56.2

...

Thrombophlebitis I80.9

...

- pelvic
- - following
- - - abortion [\(subsequent episode\)](#) O08.0
- ~~- - - current episode — see Abortion~~
- - - ectopic or molar pregnancy O08.0
- - puerperal O87.9

...

Tight fascia (lata) M62.8-

[Tightenings, irregular uterine \(false labour\) — see also Labour/false](#)
[- with labour — see Contraction\(s\)/uterus/abnormal](#)

Tightness

...

Torsion

...

- umbilical cord, ~~in-~~[affecting](#) fetus or newborn P02.5

...

Transfusion

- blood
- - without reported diagnosis Z51.3
- - reaction or complication — [see Complication\(s\)/transfusion](#)
- fetomaternal ~~(mother)-~~O43.0
- ~~- - affecting fetus or newborn P02.3~~
- maternofetal ~~(mother)-~~O43.0
- ~~- - affecting fetus or newborn P02.3~~
- placental ~~(mother)-~~(syndrome) O43.0
- ~~- - affecting fetus or newborn P02.3~~
- ~~- in fetus or newborn P02.3~~
- reaction (adverse) — [see Complication\(s\)/transfusion](#)
- twin-to-twin O43.0
- ~~- - affecting fetus or newborn P02.3~~

Transient (meaning homeless) ([see also condition](#)) Z59.0

...

Trapped placenta ([see also Retention/placenta](#)) ~~(with haemorrhage) O72.0~~[O73.0](#)

~~- without haemorrhage O73.0~~

Trauma, traumatism ([see also Injury](#)) T14.9

- acoustic H83.3
- birth — [see Birth/trauma](#)
- ~~- during delivery NEC O71.9~~
- ~~- history NEC ([see also History/trauma](#)) Z91.6~~
- ~~- - affecting management of pregnancy Z35.8~~
- maternal, during pregnancy, affecting fetus or newborn P00.5
- obstetric [NEC \(\[see also Injury/obstetric trauma\]\(#\)\)](#) O71.9
- ~~- specified NEC O71.88~~
- ~~- previous major, affecting management of pregnancy Z35.8~~

Traumatic — [see condition](#)

...

Trophoblastic disease (M9100/0) (see also *Mole/hydatid, hydatidiform*) O01.9

- [history, affecting management of pregnancy Z35.1](#)

~~- previous, affecting management of pregnancy Z35.1~~

Trophoneurosis NEC G96.8

...

Tumour (M8000/1) — see also *Neoplasm/uncertain behaviour*

...

- fetal, ~~affecting labour or delivery (mother) O66.3~~

- - [with disproportion \(fetopelvic\) O33.7](#)

- - - [affecting labour or delivery O66.3](#)

- - [affecting labour or delivery O66.3](#)

- fibroblastic, reticular cell (M9759/3) C96.7

...

Twist, twisted

- bowel, colon or intestine K56.2

- hair (congenital) Q84.1

- mesentery or omentum K56.2

- organ or site, congenital NEC — see *Anomaly/by site*

- ovarian pedicle N83.5

- - congenital Q50.2

- umbilical cord, ~~in~~ [affecting](#) fetus or newborn P02.5

...

Uraemia, uraemic (coma) (see also *Failure/kidney*) N19

- chronic (see also *Disease/kidney/chronic*) N18.9

- complicating hypertension (see also *Hypertension/kidney*) I12.0

- congenital P96.0

- extrarenal R39.2

- following

- - abortion (subsequent episode) O08.4

- - - [current episode — see Abortion](#)

- - ectopic or molar pregnancy O08.4

...

Vaginitis (acute) N76.0

...

- following

- - abortion (subsequent episode) O08.0

- - - [current episode — see Abortion](#)

- - ectopic or molar pregnancy O08.0

...

Vein, venous — see *condition*

[Velamentous \(umbilical\) cord insertion](#)

- [affecting](#)

- - [labour or delivery O69.8](#)

- - [pregnancy O43.1](#)

Veldt sore (see also *Ulcer/skin*) L98.4

...

Wound, open (animal bite) (cut) (laceration) (puncture wound) (shot wound) (with penetrating foreign body) T14.1

...

- digit(s)

- - foot S91.1

- - - with damage to nail (matrix) S91.2

- - hand S61.0

- - - with damage to nail (matrix) S61.1

- [due to birth trauma NEC \(see also Birth/trauma\) P15.9](#)

- ear (canal) (external) S01.30

...

- scalp S01.0

~~- scalp, fetus or newborn (birth trauma) P15.8~~

- scapular region S41.80



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Ophthalmology updates Part II

Introduction/Rationale:

This addenda proposal is a continuation of Ophthalmology updates Part I (undertaken for Tenth Edition) in which codes from block **[160]** *Examination procedures on eyeball* to block **[220]** *Other procedures on extraocular muscle or tendon* in ACHI Chapter 3 *Procedures on eye and adnexa* were reviewed and amended.

In this addenda proposal, codes from block **[221]** *Application, insertion or removal procedures on orbit* to block **[256]** *Other procedures on conjunctiva* have been reviewed in conjunction with the following MBS items which were added, deleted or amended in 2015 to 2017.

Items with amended descriptions

11215, 11218, 11219, 42573, 42725, 42734, 42758, 42788, 42789, 42791, 42792

New items

11220, 42576, 42705

Deleted item

42621 (deleted in 2014, missed in Ophthalmology updates Part I). This item will be updated as 'inactive'14' in Appendix A of ACHI Tabular List.

In addition, the following tasks based upon public submissions and queries relating to ophthalmology interventions are included in this proposal:

- P295 Code assignment of iris hooks with cataract surgery
- P339 Code assignment for insertion of iStent for glaucoma
- TN523 Entropion/Ectropion repair resulting from Coding Matters June 2007
- TN524 Lateral canthal sling resulting from Coding Matters March 2008)
- TN1296 Socket moulding after eyeball enucleation resulting from Coding Rule March 2017
- Q3226 Collagen cross linking for keratoconus

As with Ophthalmology updates Part I, codes with similar procedural concepts have been combined into a single code. Certain codes have been deleted as the procedural concepts are already present in other codes or the low volume of assignment of some codes as per the national frequencies deemed them to be unnecessarily specific. The code titles of the deleted codes with very low volume of assignment have not been added as *Inclusion* terms in the Tabular List but are classified to codes with similar concepts in the Alphabetic Index.

20/02/2018 – It was noted that there were new two MBS items (12325 and 12326) which were not included in the proposal that was circulated to ITG on 2 February 2018. These items relate to assessment of visual acuity and bilateral retinal photography for the presence or absence of diabetic retinopathy. 12326-00 *Bilateral retinal photography* will be created in block **[1835]** *Other diagnostic ophthalmic tests, measures or investigations* with relevant Index entries.

05/04/2018 – In response to a comment from ITG on the exenteration of orbit, clinical advice was sought from the Royal Australian and New Zealand College of Ophthalmologists. No response was received to date. Amendments have been made at block [225] *Exenteration of orbit* (see page 8) to improve the classification of this procedure.

ACCD PROPOSAL

Please note that the following proposed amendments are listed in sequential order of block numbers.

A summary of the proposed amendments is listed at each block where changes have been made.

Tabular List

Q3226 Collagen cross linking for keratoconus was received regarding the code assignment for collagen cross linking for keratoconus.

174 Other repair procedures on cornea

...

90065-00 Limbal stem cell transplant
▽ 0030

90066-00 Other repair of cornea
[Corneal collagen cross linking \[CXL\]](#)

Excludes: reoperation keratoplasty (42656-00, 42656-01 [175])

MBS ITEM

42758 Amended

Amended description

Goniotomy for the treatment of primary congenital glaucoma, excluding the minimally invasive implantation of glaucoma drainage devices

Previous description

Goniotomy

42705 New item

Lens extraction and insertion of intraocular lens, excluding surgery performed for the correction of refractive error except for anisometropia greater than 3 dioptres following the removal of cataract in the first eye, performed in association with a trans-trabecular drainage device or devices, in a patient diagnosed with open angle glaucoma who is not adequately responsive to topical anti-glaucoma medications or who is intolerant of anti-glaucoma medication.

Public submission 339 requested a code for insertion of iStent® during cataract surgery in patients with glaucoma. The submission stated that 42758-00 *Goniotomy* and 42752-00 *Insertion of aqueous shunt* were currently thought to be the appropriate codes to assign for this procedure. However, these codes do not adequately represent the procedure performed.

Glaucoma is commonly associated with increased pressure in the eye due to an imbalance in production and outflow of ocular fluid. Normally, this natural fluid flows out through an area called the trabecular meshwork, and is absorbed into the bloodstream.

While the gold standard operation for glaucoma is trabeculectomy, new techniques and implants are being developed to treat glaucoma. The iStent® system is preloaded with two micro-scale stents

(<1 mm) that are inserted sideways through a single corneal entry to open up the trabecular meshwork or Schlemm's canal to allow aqueous fluid to bypass the blockage. The iStent® is approved by the Australian Therapeutics Goods Administration for use in conjunction with cataract surgery for the reduction of intraocular pressure (IOP) in adult patients with mild-to-moderate glaucoma currently treated with ocular hypotensive medication. Other different types of stents/implants such as Hydrus stent, CyPass microstent and XEN Gel Glaucoma Implant are also used (Kerr 2017).

Goniotomy is usually performed for congenital or paediatric glaucoma where an incision is made through the trabecular meshwork or Schlemm's canal under direct gonioscopic (operating microscope with goniolens) visualisation under GA (Brandt 2011).

Glaucoma drainage devices such as Molteno, Baerveldt and Ahmed are flexible plastic tube with an attached silicone pouch or reservoir that are inserted to shunt aqueous from the anterior chamber. This type of procedure is usually done for more complex glaucomas or after a trabeculectomy has failed and are performed under GA (Glaucoma Australia n.d.).

MBS has created 42705 for implantation of iStent® (trans-trabecular drainage device) in glaucoma patients who are simultaneously undergoing a cataract procedure. Research has indicated that internationally iStent® surgery is also mostly performed combined with cataract surgery and is only being performed as a standalone procedure for experimental or investigative purposes.

Public submission P295 stated that there are no index entries for insertion of iris hooks during cataract surgery resulting in the assignment of 90076-00 **[192]** *Other procedures on iris* for this procedure. A pupil that dilates insufficiently to permit access to the lens may be widened with iris hooks (American Academy of Ophthalmology, 2017). Research has indicated that iris stretching refers to the process of manually opening up the iris at the beginning of surgery for safe and controlled access to the cataract. Iris hooks are inserted through very small side openings at the edge of the cornea to pull the edge of the iris out to enlarge the pupil. This is done before cataract surgery takes place and the iris hooks remain in place until the end of the cataract operation when they are removed (Khan J 2016).

ACCD proposes to:

- create 42705-00 *Extraction of crystalline lens with implantation of trans-trabecular drainage device* in block **[200]**
- add a *Note* to indicate that 42705-00 **[200]** is for a combined procedure for glaucoma and cataract
- add an *Includes note* at block **[200]** for insertion of iris hooks
- add Alphabetic Index terms to support the changes

Tabular List

200 Extraction of crystalline lens

Includes: insertion of iris hooks

Code also when performed:

- insertion of intraocular lens (see block **[193]**)

42698-06 Intracapsular extraction of crystalline lens

42698-07 Phacoemulsification of crystalline lens
Phacofragmentation of cataract

- Includes:** aspiration
- 42698-08 Other extracapsular extraction of crystalline lens
- 42731-01 Extraction of crystalline lens with removal of vitreous
- ~~Limbal:~~
- | | | |
|----------------------------------|--|----------------------------|
| • capsulectomy | | with vitrectomy |
| • lensectomy | | |
| Pars plana lensectomy | | |
- Limbal:
- [capsulectomy with vitrectomy](#)
 - [lensectomy with vitrectomy](#)
 - [Pars plana lensectomy with vitrectomy](#)

- Includes:** division of vitreal bands
removal of epiretinal membranes
- [42705-00 Extraction of crystalline lens with implantation of trans-trabecular drainage device](#)
[Extraction of crystalline lens with implantation of microstents](#)
- Note: [Performed for glaucoma in conjunction with cataract surgery](#)

- 42698-05 Other extraction of crystalline lens
Refractive Laser Assisted Cataract Surgery (ReLACS)
Removal of cataract NOS

References:

American Academy of Ophthalmology, 2017, *Iris hooks*, viewed 25 July 2017, <https://www.aao.org/SearchResults.aspx?q=Iris+hooks>

Brandt, JD 2011, *Goniotomy and Trabeculotomy*, Ophthalmology, Medtextfree, viewed 1 December 2017, <https://medtextfree.wordpress.com/2011/04/06/chapter-238-goniotomy-and-trabeculotomy/>

Glaucoma Australia n.d., *Tube implant glaucoma surgery fact sheet*, Glaucoma Australia, viewed 1 December 2017, <https://www.glaucoma.org.au/media/1332/tube-implant-glaucoma-surgery-aw1013111.pdf>

Kerr, N 2017, *Minimally invasive glaucoma surgery*, Glaucoma Australia, viewed 1 December 2017, <https://www.glaucoma.org.au/articles/minimally-invasive-glaucoma-surgery-body/>

Khan, J 2016, *Why do I use iris stretching in cataract surgery*, viewed 25 July 2017, <http://jaheedkhan.co.uk/i-use-iris-stretching-cataract-surgery/>

MBS ITEM

42734 Amended

Amended description
Capsulotomy, other than by laser, and other than a service associated with a service to which item 42725 or 42731 applies

Previous description
Capsulotomy, other than by laser

42788 Amended

Amended description

Laser capsulotomy—each treatment episode to one eye, to a maximum of 2 treatments to that eye in a 2 year period—other than a service associated with a service to which item 42702 applies

Previous description

Laser capsulotomy - each treatment episode to 1 eye, to a maximum of 2 treatments to that eye in a 2 year period

42789 Amended

Amended description

Laser capsulotomy—each treatment episode to one eye—if it can be demonstrated that a third or subsequent treatment to that eye (including any treatments to which item 42788 applies) is indicated in a 2 year period—other than a service associated with a service to which item 42702 applies

Previous description

Laser capsulotomy - each treatment episode to 1 eye - where it can be demonstrated that a 3rd or subsequent treatment to that eye (including any treatments to which item 42788 applies) is indicated in a 2 year period

ACCD proposes:

- no amendments related to these items as capsulotomy of lens performed with or without laser is classified to 42734-01 **[203]** *Capsulotomy of lens*. The two item numbers are currently mapped to 42734 in ACHI Appendix A as seen below.

Tabular List

203 Other procedures on lens

42734-01 Capsulotomy of lens
Discission of lens

Includes: that by laser

Appendix A

| MBS Item | ACHI Code Map |
|-----------------|----------------------|
| 42788 | 42734 |
| 42789 | 42734 |

Alphabetic Index

Capsulotomy

- lens (laser) 42734-01 **[203]**

MBS ITEM

42791 Amended

Amended description

Laser vitreolysis or corticolysis of lens material or fibrinolysis, excluding vitreolysis in the posterior vitreous cavity - each treatment to one eye, to a maximum of 2 treatments to that eye in a 2 year period

Previous description

Laser vitreolysis or corticolysis of lens material or fibrinolysis - each treatment to one eye, to a maximum of 2 treatments to that eye in a 2 year period

42792 Amended

Amended description

Laser vitreolysis or corticolysis of lens material or fibrinolysis, excluding vitreolysis in the posterior vitreous cavity - each treatment to one eye - if it can be demonstrated that a third or subsequent treatment to that eye (including any treatments to which item 42791 applies) is indicated in a 2 year period

Previous description

Laser vitreolysis or corticolysis of lens material or fibrinolysis - each treatment to one eye - where it can be demonstrated that a third or subsequent treatment to that eye (including any treatments to which item 42791 applies) is indicated in a 2 year period

ACCD proposes:

- no amendments related to this item. MBS item 42792 is currently mapped to 42791 in Appendix A (see below).

Appendix A

| MBS Item | ACHI Code Map |
|----------|---------------|
| 42788 | 42734 |
| 42789 | 42734 |
| 42792 | 42791 |

MBS ITEM

42725 Amended

Amended description

Vitreotomy via pars plane sclerotomy, including one or more of the following:

- (a) removal of vitreous;
- (b) dissection of vitreous bands;
- (c) removal of epiretinal membranes;
- (d) capsulotomy

ACCD proposes to:

- add 'capsulotomy' as *Includes* note at 42725-00 **[207]** *Removal of vitreous, pars plana approach.*

Tabular List

207 **Vitreotomy**

42719-01 Removal of vitreous, limbal approach
Anterior (limbal) vitrectomy
Vitreotomy NOS

Excludes: that with:

- capsulectomy (42731-01 **[200]**)
- extraction of crystalline lens (42731-01 **[200]**)

42725-00 Removal of vitreous, pars plana approach
Pars plana vitrectomy

Includes: [capsulotomy](#)

- division of vitreal bands
- fluid and gas exchange
- removal of epiretinal membranes
- replacement with vitreous substitutes (silicone oil)

Excludes: that with:

- capsulectomy (42731-01 **[200]**)
- extraction of crystalline lens (42731-01 **[200]**)

Review of blocks [221] Application, insertion or removal procedures on orbit to block [256] Other procedures on conjunctiva

National frequencies (Public Hospitals) on the usage of codes in block [223] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|-----------------------------|-----------|-----------|-----------|
| 223 | 42572-00 | Drainage of orbital abscess | 60 | 67 | 62 |
| | 42572-01 | Drainage of orbital cyst | 7 | 6 | 7 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42572-01 [223] *Drainage of orbital cyst* and reclassify its concept to 42572-00 [223]
- amend the code title of 42572-00 [223] to *Drainage of orbital abscess or cyst*

Tabular List

223 Other incision procedures on orbit

42572-00 Drainage of orbital abscess [or cyst](#)

Excludes: that by orbitotomy (42533-00 [222])

~~42572-01 Drainage of orbital cyst~~

~~*Excludes:* that by orbitotomy (42533-00 [222])~~

National frequencies (Public Hospitals) on the usage of codes in block [224] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 224 | 42533-01 | Exploratory orbitotomy with biopsy | 91 | 96 | 77 |
| | 42542-00 | Expl orbitomy anterior aspect w exc lsn | 35 | 34 | 30 |
| | 42542-01 | Expl orbitomy anterior aspect w R/O FB | 18 | 17 | 24 |
| | 42543-00 | Expl orbitomy retrobulbar aspt w exc lsn | 5 | 11 | 7 |
| | 42543-01 | Expl orbitomy retrobulbar aspt w R/O FB | 1 | 1 | 1 |
| | 42545-01 | Orbitotomy, decompression orbit R/O fat | 33 | 28 | 32 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42543-00 [224] *Exploratory orbitotomy, retrobulbar aspect, with excision of lesion*
- delete 42543-01 [224] *Exploratory orbitotomy, retrobulbar aspect, with removal of foreign body*

- amend the code title of 42542-00 [224] to *Exploratory orbitotomy with excision of lesion*
- amend the code title of 42542-01 [224] to *Exploratory orbitotomy with removal of foreign body*
- amend code title of 42545-01 [224] to *Decompression orbitotomy by removal of intraorbital fat*

Tabular List

224 Orbitotomy with biopsy or excision

Excludes: that with removal and replacement of bone (see block [227])

42542-00 Exploratory orbitotomy, ~~anterior aspect~~, with excision of lesion

~~42543-00 Exploratory orbitotomy, retrobulbar aspect, with excision of lesion~~

42542-01 Exploratory orbitotomy, ~~anterior aspect~~, with removal of foreign body
Removal of orbital foreign body, ~~anterior aspect~~, by incision

~~42543-01 Exploratory orbitotomy, retrobulbar aspect, with removal of foreign body
Removal of orbital foreign body, retrobulbar aspect, by incision~~

42545-01 ~~Orbitotomy for d~~Decompression ~~of orbit~~ orbitotomy by removal of intraorbital (~~peribulbar~~
(retrobulbar) fat

Note: Performed for dysthyroid eye disease

42533-01 Exploratory orbitotomy with biopsy

National frequencies (Public Hospitals) on the usage of codes in block [225] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 225 | 42536-00 | Exenteration of orbit | 48 | 47 | 28 |
| | 42536-01 | Exenteration of orbit with skin graft | 8 | 3 | 9 |
| | 42536-02 | Exent orbit w temporalis musc transplant | 1 | 2 | 3 |
| | 42536-03 | Exent orbit w skin graft & musc trnsplnt | 7 | 8 | 5 |
| | 42536-04 | Exent orbit w R/O adjacent structures | 18 | 68 | 93 |
| | 42536-05 | Exent orbit with thrpc R/O orbital bone | 12 | 9 | 7 |

Source: APC data for Financial years 14/15 – 16/17

Research has indicated that common indications for exenteration include primary orbital malignancy, orbital extension of adnexal tumors (including skin cancers and sinus tumors), extrascleral extension of primary ocular tumors, intractable pain, life-threatening infection, and extensive ocular surface malignancy.

There are different types of exenteration. Total exenteration involves removal of all orbital tissue including the eyelids, globe, orbital soft tissues and periorbita. Adjacent bone and the sinuses may also be included in the removal. A limited or subtotal exenteration involves globe removal with the sparing of some orbital soft tissue, limiting the excision to the anterior orbit. Either total or subtotal exenteration may be combined with sparing of the eyelids, which allows for faster healing and results in less disfigurement (Korn & Kikkawa 2017).

ACCD proposes to:

- delete 42536-03 [225] *Exenteration of orbit with skin graft and temporalis muscle transplant*, 42536-01 [225] *Exenteration of orbit with skin graft* and 42536-02 [225] *Exenteration of orbit with temporalis muscle transplant*
- add *Includes* note 'with skin graft' 'with temporalis muscle transplant' at block [225] *Exenteration of orbit*
- delete 42536-05 [225] *Exenteration of orbit with therapeutic removal of orbital bone* and reclassify its concept to 42536-04 [225] to *Exenteration of orbit with removal of adjacent structures*
- add *Includes* note 'removal of eyelid, fat, lacrimal gland, nerves, orbital bone and surrounding muscles' at 42536-04 [225] to *Exenteration of orbit with removal of adjacent structures*
- delete *Inclusion* term at block [225] as *evisceration* is classified at 42512-00 *Evisceration of eyeball without implant* and 42515-00 *Evisceration of eyeball with insertion of implant*
- add *Code also when performed* at block [225] for flap codes to be assigned when performed.

Tabular List

225 Exenteration of orbit

~~Evisceration of orbit~~

Includes: with:

- [skin graft](#)
- [temporalis muscle transplant](#)

Code also when performed:

- [flap \(see blocks \[1671\] to \[1674\]\)](#)

42536-00 Exenteration of orbit
[Exenteration of orbit NOS](#)

~~42536-01 Exenteration of orbit with skin graft~~

~~*Excludes:* that with temporalis muscle transplant (42536-03 [225])~~

~~42536-02 Exenteration of orbit with temporalis muscle transplant~~

~~*Excludes:* that with skin graft (42536-03 [225])~~

~~42536-03 Exenteration of orbit with skin graft and temporalis muscle transplant~~

42536-04 Exenteration of orbit with removal of adjacent structures

Includes: removal of:

- [eyelid](#)
- [fat](#)
- [lacrimal gland](#)
- [nerves](#)
- [orbital bone](#)
- [surrounding muscles](#)

~~42536-05 Exenteration of orbit with therapeutic removal of orbital bone~~

Reference

Korn, BS & Kikkawa, DO 2017, *Orbital exenteration*, VideoAtlas of Oculofacial Plastic and Reconstructive Surgery, Elsevier, viewed 23 March 2018, <https://www-clinicalkey-com-au.ezproxy1.library.usyd.edu.au/#!/content/book/3-s2.0-B9780323297554000737>

MBS ITEM

42573 Amended

DERMOID, periorbital, excision of, on a person 10 years of age or over

42576 New

DERMOID, orbital, excision of, on a person under 10 years of age

MBS added and amended items on excision of periorbital and orbital dermoid for paediatric cases. 42576 will be mapped to 42573 in Appendix A.

National frequencies (Public Hospitals) on the usage of codes in block [226] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 226 | 42573-00 | Exc periorbit dermoid ant t orbit septum | 34 | 28 | 29 |
| | 42574-00 | Exc orbital dermoid post t orbit septum | 30 | 29 | 23 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- amend 42573-00 and 42574-00 [226] with generic code titles. There will be no changes to the corresponding index entries.

Tabular List

226 Other excision procedures on orbit

42573-00 Excision of periorbital dermoid, ~~anterior to orbital septum~~

42574-00 Excision of orbital dermoid, ~~posterior to orbital septum~~

Appendix A

MBS Item ACHI Code Map

| | |
|-----------------------|-----------------------|
| 42566 | 42569 |
| 42576 | 42574 |
| 42578 | inactive '06 |

National frequencies (Public Hospitals) on the usage of codes in block [227] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 227 | 42530-00 | Expl orbitotomy req R/O & replace bone | 25 | 17 | 26 |
| | 42530-01 | Expl orbitotomy w Bx, R/O & replace bone | 6 | 4 | 53 |
| | 42539-00 | Orbitomy w exc lesion R/O & replace bone | 10 | 12 | 12 |
| | 42539-01 | Expl orbitomy w R/O FB R/O & replace bne | 2 | 1 | 2 |
| | 42545-00 | Orbitomy decomp orbit fenest >= 2 walls | 50 | 55 | 45 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42530-01 [227] *Exploratory orbitotomy with biopsy requiring removal and replacement of bone* and reclassify its concepts to 42539-00 [227] *Exploratory orbitotomy with excision of lesion, requiring removal and replacement of bone*
- add *Includes* note 'biopsy' at 42539-00 [227] *Exploratory orbitotomy with excision of lesion, requiring removal and replacement of bone*
- delete 42539-01 [227] *Exploratory orbitotomy with removal of foreign body, requiring removal and replacement of bone* and reclassify its concepts to 42539-00 [227] *Exploratory orbitotomy with excision of lesion, requiring removal and replacement of bone*
- add *Inclusion* term 'Exploratory orbitotomy with removal of foreign body, requiring removal and replacement of bone' at 42539-00 [227] *Exploratory orbitotomy with excision of lesion, requiring removal and replacement of bone*
- amend code title of 42545-00 [227] to Decompression orbitotomy by fenestration of \geq 2 walls

Tabular List

227 Orbitotomy with removal and replacement of bone Decompression orbitotomy with removal and replacement of bone

42530-00 Exploratory orbitotomy requiring removal and replacement of bone

~~42530-01 Exploratory orbitotomy with biopsy, requiring removal and replacement of bone~~

42539-00 Exploratory orbitotomy with excision of lesion, requiring removal and replacement of bone
[Exploratory orbitotomy with removal of foreign body, requiring removal and replacement of bone](#)

Includes: [biopsy](#)

~~42539-01 Exploratory orbitotomy with removal of foreign body, requiring removal and replacement of bone~~

42545-00 ~~Orbitotomy for d~~Decompression ~~of orbitotomy~~ by fenestration of \geq 2 walls

Includes: removal and replacement of bone

Note: Performed for dysthyroid eye disease

National frequencies (Public Hospitals) on the usage of codes in block [228] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--------------------------|-----------|-----------|-----------|
| 228 | 42530-02 | Repair of wound of orbit | 7 | 14 | 8 |
| | 90082-00 | Other repair of orbit | 18 | 19 | 16 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42530-02 [228] *Repair of wound of orbit* and reclassify its concepts to 90082-00 [228] *Other repair of orbit*

Tabular List

228 Other repair procedures on orbit

~~42530-02 Repair of wound of orbit~~

90082-00 Other repair of orbit
[Repair of wound of orbit](#)

National frequencies (Public Hospitals) on the usage of codes in block [229] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|---------------------------|-----------|-----------|-----------|
| 229 | 42821-00 | Ocular transillumination | 1 | 0 | 0 |
| | 90083-00 | Other procedures on orbit | 31 | 35 | 23 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42821-00 **[229]** *Ocular transillumination*.

229 Other procedures on orbit

~~42821-00 Ocular transillumination~~
~~Retrobulbar transillumination~~

90083-00 Other procedures on orbit

National frequencies (Public Hospitals) on the usage of codes in block [231] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|-----------------------------|-----------|-----------|-----------|
| 231 | 90084-00 | Incision of eyelid | 238 | 201 | 189 |
| | 90090-00 | Severing of blepharorrhaphy | 1 | 1 | 0 |
| | 90091-00 | Canthotomy | 134 | 152 | 202 |

Source: APC data for Financial years 14/15 – 16/17

Blepharorrhaphy or tarsorrhaphy is suturing of the eyelid. Severing of blepharorrhaphy is synonymous with reopening of blepharorrhaphy/tarsorrhaphy or division of blepharorrhaphy/tarsorrhaphy (See [Appendix B](#)) and involves removal of sutures between upper and lower eyelids.

ACCD proposes to:

- delete 90090-00 **[231]** *Severing of blepharorrhaphy* and reclassify its procedural concepts to 90084-00 *Incision of eyelid*
- add 'blepharotomy' as an *Inclusion* term at 90084-00 **[231]** *Incision of eyelid*
- add index terms 'reopening of tarsorrhaphy', 'reversal of tarsorrhaphy' and 'severing of tarsorrhaphy' classifiable to 90084-00 *Incision of eyelid*

231 Incision procedures on eyelid

90084-00 Incision of eyelid
[Blepharotomy](#)
Incision of eyelid margin
[Severing of blepharorrhaphy](#)

~~90090-00 Severing of blepharorrhaphy~~

90091-00 Canthotomy
Enlargement of palpebral fissure

National frequencies (Public Hospitals) on the usage of codes in block [234] are

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 234 | 42860-00 | Gft upp eyelid w recesn lid retrac 1 eye | 6 | 10 | 11 |
| | 42860-01 | Gft upp eyelid w recesn lid retrac eyes | 2 | 4 | 1 |
| | 42860-02 | Gft low eyelid w recesn lid retrac 1 eye | 27 | 35 | 37 |
| | 42860-03 | Gft low eyelid w recesn lid retrac eyes | 6 | 3 | 3 |

Source: APC data for Financial years 14/15 – 16/17

Retraction of eyelid

Treatment of lower eyelid retraction is common in patients with thyroid ophthalmopathy. It may also occur as a complication of previous blepharoplasty procedures, both cosmetic and functional. Treatment consists of recessing the lower lid retractors and placing a spacer between them and the inferior tarsal border. Present options include hard-palate grafting for the spacer because (1) it provides a mucous membrane lining to the internal lower lid; (2) it is rigid and flat; and (3) it is autogenous. A useful alternative however is using an allogeneic spacer graft to avoid issues relating to harvesting and also to reduce operative time (Putterman & Fagien 2015).

ACCD proposes to:

- amend code titles of 42860-00 [234] to *Graft to upper eyelid, with recession of lid retractors* and 42860-02 [234] to *Graft to lower eyelid, with recession of lid retractors* to remove the concept of laterality
- delete 42860-01 [234] *Graft to upper eyelid, with recession of lid retractors, both eyes*
- delete 42860-03 [234] *Graft to lower eyelid, with recession of lid retractors, both eyes*
- add an *Includes* note 'hard palate' at block [234] *Graft to eyelid*

Tabular List

234

Graft to eyelid

Includes: Gore-tex

scleral

skin

graft to eyelid

*Includes: Gore-tex graft
hard palate graft
scleral graft
skin graft*

42860-00 Graft to upper eyelid, with recession of lid retractors, ~~1 eye~~

~~42860-01 Graft to upper eyelid, with recession of lid retractors, both eyes~~

42860-02 Graft to lower eyelid, with recession of lid retractors, ~~1 eye~~

~~42860-03 Graft to lower eyelid, with recession of lid retractors, both eyes~~

Reference

Putterman, AM & Fagien, S 2015, Treatment of Lower Eyelid Retraction with Recession of Lower Lid Retractors and Placement of Hard-Palate or Allogeneic Dermal Matrix Spacer Grafts, *Putterman Cosmetic Oculoplastic Surgery E-Book*, viewed 24 October 2017, <https://clinicalgate.com/treatment-of-lower-eyelid-retraction-with-recession-of-lower-lid-retractors-and-placement-of-hard-palate-or-allogeneic-dermal-matrix-spacer-grafts/>

National frequencies (Public Hospitals) on the usage of codes in block [236] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 236 | 30052-01 | Repair of wound of eyelid | 914 | 855 | 809 |
| | 42584-00 | Tarsorrhaphy | 547 | 561 | 627 |
| | 42854-01 | Repair of medial palpebral ligament | 1 | 2 | 0 |
| | 42863-00 | Recession of eyelid | 57 | 70 | 99 |
| | 42872-00 | Elevation of eyebrow for paretic state | 11 | 12 | 7 |
| | 90085-00 | Other repair of eyelid | 49 | 42 | 67 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42854-01 [236] *Repair of medial palpebral ligament* and reclassify its procedural concept to 90085-00 [236] *Other repair of eyelid*

236 Other repair procedures on eyelid

42584-00 Tarsorrhaphy
Blepharorrhaphy
Canthorrhaphy
Revision of scar of tarsal plate

~~42854-01 Repair of medial palpebral ligament~~

30052-01 Repair of wound of eyelid
Repair of laceration of eyelid

42863-00 Recession of eyelid
Recession of eyelid for:
• anophthalmos
• lid retraction

Excludes: that with graft to eyelid (42860 [234])

42872-00 Elevation of eyebrow for paretic state

90085-00 Other repair of eyelid

National frequencies (Public Hospitals) on the usage of 90095-00 [237] for financial year 14/15, 15/16 and 16/17 – nil

ACCD proposes to:

- delete 90095-00 [237] *Reconstruction of eyelid with hair follicle graft* and block [237] *Reconstruction of eyelid*. The procedural concept is reclassified to 45614-00 [1684] *Reconstruction of eyelid* in the Alphabetic Index.

~~237 Reconstruction procedure on eyelid~~

~~90095-00—Reconstruction of eyelid with hair follicle graft~~

National frequencies (Public Hospitals) on the usage of codes in block [238] are

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|-----------|-----------|-----------|
| 238 | 42587-00 | Correction trichiasis by cryotherapy 1 eye | 24 | 26 | 13 |
| | 42587-01 | Correction trichiasis by cryotherapy, eyes | 8 | 11 | 12 |
| | 42587-02 | Correction of trichiasis by laser, 1 eye | 1 | 0 | 0 |
| | 42587-03 | Correction trichiasis by laser, 2 eyes | 2 | 1 | 1 |
| | 42587-04 | Correction trichiasis electrolysis 1 eye | 15 | 21 | 25 |
| | 42587-05 | Correction trichiasis electrolysis, eyes | 9 | 11 | 12 |

Source: APC data for Financial years 14/15 – 16/17

Trichiasis is a common eyelid abnormality where the eyelashes grow inwards toward the eye causing foreign body sensation, tearing and red eye. It differs from entropion in that the eyelid position is normal. Surgical treatment is destruction of eyelash and follicle by electrolysis, cryosurgery, etc. or reposition the eyelashes (Boyd 2012).

ACCD proposes to:

- create 96246-00 **[238]** *Destruction procedures on eyelash follicle* and incorporate the different destruction methods as *Includes* note
- create 96247-01 *Repositioning of eyelashes* in block **[238]**
- delete 42587-00, 42587-01, 42587-02, 42587-03, 42587-04 and 42587-05 **[238]** and the procedural concepts added to 96246-00 **[238]** *Destruction procedures on eyelashes*

238 Procedures for correction of trichiasis

~~42587-00—Correction of trichiasis by cryotherapy, 1 eye~~

~~42587-01—Correction of trichiasis by cryotherapy, both eyes~~

~~42587-02—Correction of trichiasis by laser, 1 eye~~

~~42587-03—Correction of trichiasis by laser, both eyes~~

~~42587-04—Correction of trichiasis by electrolysis, 1 eye~~

~~42587-05—Correction of trichiasis by electrolysis, both eyes~~

[96246-00](#) [Destruction procedures on eyelash follicle](#)

Includes: that by:

- [cryotherapy](#)
- [electrolysis](#)
- [laser](#)

[96247-01](#) [Repositioning of eyelashes](#)

Reference

Boyd, K 2012, *What is Trichiasis?*, American Academy of Ophthalmology, viewed 23 October 2017, <https://www.aao.org/eye-health/diseases/what-is-trichiasis>

National frequencies (Public Hospitals) on the usage of codes in block [239] are

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|--|------------------------|-----------|-----------|
| 239 | 42581-00 | Cauterisation of ectropion | 38 | 35 | 63 |
| | 42581-01 | Cauterisation of entropion | 9 | 10 | 12 |
| | 42866-00 | Repect/entropion by rep infer retrac | 178 | 198 | 229 |
| | 42866-01 | Repect/entropion oth rep infer retrac | 264 | 250 | 303 |
| | 45626-00 | Correction ectropion/entropion by suture | 567 | 610 | 564 |
| | 45626-01 | Cor ectropion/entropion w wedge resect | 520 | 514 | 490 |
| | 1684 | 45614-01 | Tarsal strip procedure | 1106 | 1302 |

Source: APC data for Financial years 14/15 – 16/17

There are several types of ectropion and entropion such as involuntional, cicatricial, paralytic, mechanical and congenital. Multiple corrective procedures classified in ACHI maybe performed during the operative episode depending on the aetiology, severity and presence of associated laxity or cicatricial changes. For example, the tarsal strip procedure maybe performed in conjunction with recession of lower lid retractors, retractor reinsertion (transconjunctival or anterior lamella approach) or inverting sutures for paralytic ectropion. Free skin grafts, midfacelift, cheek lift and other reconstructive procedures may also be performed during the operation.

In addition, other ectropion procedures not classified in ACHI such as canthopexy, cantholysis, Lateral canthal resuspension sine canthotomy (LCR-SC), medial conjunctival spindle procedure (excision of the medial conjunctiva and retractors) and canthus sparing ectropion repair, may also be performed (Bashour 2017, Lenci et al 2015, Georgescu et al. 2011).

While ACS 0741 *Ectropion/Entropion* provides guidelines to assign ACHI codes for ectropion/entropion procedures, coders have found it confusing to assign the correct codes. Different terminologies may be used to describe the same procedure, or the documented procedure may not be classified in the Alphabetic Index.

ACCD proposes to:

- create 96248-02 *Corrective procedures for ectropion or entropion, not elsewhere classified* to classify other corrective procedures for ectropion or entropion in block [239]
- add *Code also when performed: skin graft of eyelid* (45451-00 [1649]) at block [239]
- delete ACS 0741 *Ectropion/Entropion* and add relevant advice to the Tabular List

235 Canthoplasty

Includes: excision of tarsal cartilage [tarsectomy]

42590-00 Lateral canthoplasty
Canthoplasty NOS
[Lateral canthal tightening](#)

42590-01 Medial canthoplasty

239
▽ 0744

Procedures for ectropion or entropion

Includes: excision of tarsal cartilage [tarsectomy]

Code also when performed:

- [canthoplasty \(42590-00 \[235\]\)](#)
- eyelid reconstruction (45614-00, 45671-01, 45674-01 [1684])
- [full thickness skin graft of eyelid \(45451-00 \[1649\]\)](#)
- [tarsal strip procedure \(45614-01 \[1684\]\)](#)

42581-00 Cauterisation of ectropion

42581-01 Cauterisation of entropion

42866-00 Repair of ectropion or entropion by tightening or shortening of inferior retractors
Repositioning of posterior eyelid lamella by tightening or shortening of inferior retractors

42866-01 Repair of ectropion or entropion by other repair of inferior retractors
Repositioning of posterior eyelid lamella by other repair of inferior retractors

45626-00 Correction of ectropion or entropion by suture technique
Repositioning of anterior eyelid lamella

Excludes: [suture of the canthus for ectropion or entropion \(42590-00 \[235\]\)](#)

45626-01 Correction of ectropion or entropion with wedge resection
Tarsconjunctival diamond, ~~repair of ectropion~~ [triangle or rhomboid excision, repaired with layered sutures](#)

[96248-02 Corrective procedures for ectropion or entropion, not elsewhere classified](#)

References:

Bashour M 2017, *Ectropion lower eyelid reconstruction treatment and management*, Medscape, viewed 25 October 2017, <https://emedicine.medscape.com/article/877155-treatment#d10>

Georgescu, D, Anderson, RL and McCann JD 2011, *Lateral canthal resuspension sine canthotomy*, Journal of Ophthalmic Plastic & Reconstructive Surgery, Vol.27, (5), pp. 371-375, viewed 25 October 2017, <https://insights.ovid.com/pubmed?pmid=21659913>

Lenci, LT, Clark, JT and Allen, R 2015, *Involitional ectropion, Options for surgical management of ectropion*, EyeRounds.org, viewed 25 October 2017, <http://webeye.ophth.uiowa.edu/eyeforum/cases/218-ectropion.htm>

National frequencies (Public Hospitals) on the usage of codes in block [242] are

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|---|-----------|-----------|-----------|
| 242 | 42608-00 | Ins oth nasolacrm tube lacm/conjunct sac | 641 | 691 | 674 |
| | 42608-01 | Ins glas nasolacrm tube lacm/conjunct sac | 49 | 45 | 53 |
| | 42614-00 | Replace nasolacrimal tube, unilateral | 25 | 15 | 13 |
| | 42614-02 | Removal nasolacrimal tube, unilateral | 47 | 56 | 53 |
| | 42615-00 | Replace nasolacrimal tube, bilateral | 0 | 4 | 3 |
| | 42615-02 | Removal nasolacrimal tube, bilateral | 7 | 12 | 7 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- amend code titles of 42614-00 **[242]** *Replacement of nasolacrimal tube, unilateral* and 42615-00 **[242]** *Removal of nasolacrimal tube, unilateral* to remove the concept of laterality
- delete 42615-00 **[242]** *Replacement of nasolacrimal tube, bilateral*
- delete 42615-02 **[242]** *Removal of nasolacrimal tube, bilateral*

242 Insertion, replacement or removal of nasolacrimal tube

42608-01 Insertion of glass (Pyrex) nasolacrimal tube/stent into lacrimal/conjunctival sac for drainage
Insertion of Lester Jones (Jones) tube

Code also when performed:

- conjunctivodacryocystorhinostomy (42629-00 **[247]**)
- dacryocystorhinostomy (42623-00 **[247]**)

Excludes: replacement of tube (42614-00, ~~42615-00~~ **[242]**)

42608-00 Insertion of other nasolacrimal tube/stent into lacrimal/conjunctival sac for drainage

Insertion of:

- Crawford tube
- Monoka tube
- silicone tube

Code also when performed:

- conjunctivodacryocystorhinostomy (42629-00 **[247]**)
- dacryocystorhinostomy (42623-00 **[247]**)

Excludes: replacement of tube (42614-00, ~~42615-00~~ **[242]**)

42614-00 Replacement of nasolacrimal tube, ~~unilateral~~

~~42615-00 Replacement of nasolacrimal tube, bilateral~~

42614-02 Removal of nasolacrimal tube, ~~unilateral~~

~~42615-02 Removal of nasolacrimal tube, bilateral~~

National frequencies (Public Hospitals) on the usage of codes in block **[244]** are

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|-------------------------------------|-----------|-----------|-----------|
| 244 | 42593-01 | Incision of lacrimal gland | 0 | 0 | 3 |
| | 42596-00 | Incision of lacrimal sac | 8 | 8 | 13 |
| | 42596-03 | Other incision of lacrimal passages | 14 | 15 | 11 |
| | 42617-00 | Incision of lacrimal punctum | 195 | 267 | 267 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- delete 42593-01 **[244]** *Incision of lacrimal gland*
- delete 42596-00 **[244]** *Incision of lacrimal sac*
- reclassify the concepts of 42593-01 *Incision of lacrimal gland* and 42596-00 **[244]** *Incision of lacrimal sac* to 42596-03 *Other incision of lacrimal passages*

244 Incision procedures on lacrimal system

Includes: removal of:

- calculus
- foreign body

~~42593-01 Incision of lacrimal gland~~

~~*Includes: removal of calculus*~~

42617-00 Incision of lacrimal punctum
Punctum snip procedure

~~*Includes: removal of calculus*~~

~~42596-00 Incision of lacrimal sac
Removal of foreign body from lacrimal sac~~

~~*Includes: removal of calculus*~~

42596-03 Other incision of lacrimal passages
Incision of nasolacrimal duct

National frequencies (Public Hospitals) on the usage of codes in block [245] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|-----------------------------------|-----------|-----------|-----------|
| 245 | 42622-00 | Occlusion lacm punctum by cautery | 24 | 28 | 36 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- create 96249-03 *Destruction procedures on lacrimal punctum* in block [245] for consistency with the classification of destruction procedures in ACHI
- delete 42622-00 [245] *Occlusion of lacrimal punctum by cautery*
- add the various modes of destruction as *Includes* note

245 Destruction procedures on lacrimal system

~~42622-00 Occlusion of lacrimal punctum by cautery~~

~~*Includes: diathermy*~~

[96249-03 Destruction procedures on lacrimal punctum](#)

Includes: [occlusion of lacrimal punctum by:](#)
• [cauterisation](#)
• [diathermy](#)

National frequencies (Public Hospitals) on the usage of codes in block [249] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|---------------------------------------|-----------|-----------|-----------|
| 249 | 42599-00 | Clsd proc est patency lacm canlr, eye | 46 | 71 | 65 |
| | 42599-01 | Clsd proc est patency lacm canlr eyes | 9 | 5 | 11 |
| | 42602-00 | Opn proc est patency lacm canlr, eye | 73 | 55 | 90 |
| | 42602-01 | Opn proc est patency lacm canlr, eyes | 4 | 2 | 10 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- amend code titles of 42599-00 [249] *Closed procedure for establishment of patency lacrimal canalicular system, 1 eye* and 42602-00 [249] *Open procedure for establishment of patency lacrimal canalicular system, 1 eye* to remove the concept of laterality
- delete 42599-01 [249] *Closed procedure for establishment of patency lacrimal canalicular system, both eyes* and 42602-01 [249] *Open procedure for establishment of patency lacrimal canalicular system, both eyes*
- remove the deleted codes in *Code also when performed* instructions at 42629-00 [247] *Conjunctivodacryocystorhinostomy [CDCR]* and 42626-00 [248] *Reoperation of dacryocystorhinostomy, second or subsequent procedure*

247 Repair procedures on lacrimal system

...

42629-00 Conjunctivodacryocystorhinostomy [CDCR]
Dacryocystorhinostomy with fashioning of conjunctival flaps

Code also when performed:

- establishment of lacrimal patency (42599-00, ~~42599-01~~, 42602-00, ~~42602-01~~ [249])
- insertion of nasolacrimal tube/stent (42608-00, 42608-01 [242])

90092-00 Repair of lacrimal punctum, not elsewhere classified

248 Reoperation procedures on lacrimal passages

42626-00 Reoperation of dacryocystorhinostomy, second or subsequent procedure

Code also when performed:

- establishment of lacrimal patency (42599-00, ~~42599-01~~, 42602-00, ~~42602-01~~ [249])
- insertion of nasolacrimal tube/stent (42608-00, 42608-01 [242])

249 Procedures for establishment of lacrimal patency

Includes: insertion of drainage tube/stent (glass) (silicone)

42599-00 Closed procedure for establishment of patency lacrimal canalicular system, ~~1 eye~~

~~42599-01 Closed procedure for establishment of patency lacrimal canalicular system, both eyes~~

42602-00 Open procedure for establishment of patency lacrimal canalicular system, ~~1 eye~~

~~42602-01 Open procedure for establishment of patency lacrimal canalicular system, both eyes~~

National frequencies (Public Hospitals) on the usage of codes in block [253] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|------------------------------|-----------|-----------|-----------|
| 253 | 42677-00 | Cauterisation of conjunctiva | 7 | 11 | 9 |
| | 42680-00 | Cryotherapy of conjunctiva | 117 | 103 | 122 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- create 96250-04 *Destruction procedures on conjunctiva* in block [253] for consistency with the classification of destruction procedures in ACHI
- delete 42677-00 [253] *Cauterisation of conjunctiva* and 42680-00 [253] *Cryotherapy of conjunctiva* and reclassify the concepts to 96250-04 *Destruction procedures on conjunctiva*

- add the various modes of destruction as *Includes* note

253 Destruction procedures on conjunctiva 96250

Excludes: that by excision (42683-00 [254])

~~42677-00 Cauterisation of conjunctiva
Cauterisation of conjunctival lesion~~

~~42680-00 Cryotherapy of conjunctiva
Cryotherapy to conjunctival lesion~~

96250-04 Destruction procedures on conjunctiva
Destruction of lesion of conjunctiva

Includes: that by:
• cauterisation
• cryotherapy

1684 Reconstruction of eyelid and ear

45614-00 Reconstruction of eyelid
Reconstruction of eyelid, NOS

Includes: that with hair follicle graft

Excludes: that with:

- flap (45671-01, 45674-01 [1684])
- graft:
 - ~~hair follicle (90095-00 [237])~~
 - mucosal (45656-02 [1669])
 - skin (45400-01, 45403-01 [1641], 45400-00 [1642], 45485-00 [1643], 45448-00 [1645], 45451-10 [1648], 45451-00 [1649])

MBS ITEM

12325 New

Assessment of visual acuity and bilateral retinal photography with a non mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if:

- the patient is of Aboriginal and Torres Strait Islander descent; and
- the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient's diabetes; and
- this item and item 12326 have not applied to the patient in the preceding 12 months; and
- the patient does not have:
 - an existing diagnosis of diabetic retinopathy; or
 - visual acuity of less than 6/12 in either eye; or
 - a difference of more than 2 lines of vision between the 2 eyes at the time of presentation

MBS ITEM

12326 New

Assessment of visual acuity and bilateral retinal photography with a non-mydriatic retinal camera, including analysis and reporting of the images for initial or repeat assessment for presence or absence of diabetic retinopathy, in a patient with medically diagnosed diabetes, if:

- the assessment is performed by the medical practitioner (other than an optometrist or ophthalmologist) providing the primary glycaemic management of the patient's diabetes; and
- this item and item 12325 have not applied to the patient in the preceding 24 months; and
- the patient does not have:
 - an existing diagnosis of diabetic retinopathy; or

- (ii) visual acuity of less than 6/12 in either eye; or
- (iii) a difference of more than 2 lines of vision between the 2 eyes at the time of presentation

Retinal photography with Non-mydratric retinal camera (RP-NMRC)

RP-NMRC is a non-invasive technique for imaging the retina and optic disc. Non-mydratric retinal cameras use infrared light to image the retina without requiring chemical eye drops to dilate the pupils. RP-NMRC is thought to avoid the discomfort that may be associated with chemical dilation of the pupils (mydriasis), and may be performed by a technician or photographer without medical qualifications. For these reasons RP-NMRC may be preferable and/or more accessible compared with other methods used to detect diabetic retinopathy(MSAC 2014).

ACCD proposal:

- create 12326-00 *Optical coherence tomography* in Block **[1835]** *Other diagnostic ophthalmic tests, measures or investigations*
- add *Includes* note and *Note* instruction to clarify the assignment of 12326-00
- map MBS item 12325 to 12326 in Appendix A.

1835 Other diagnostic ophthalmic tests, measures or investigations

11200-00 Provocative test for glaucoma

Includes: water drinking

Note: Performed for open angle glaucoma

[12326-00 Bilateral retinal photography](#)

Includes: [analysis and reporting of images](#)
[assessment/measurement of visual acuity](#)

Note: [Performed for absence or presence of diabetic retinopathy](#)

92016-00 Tonometry

Measurement of intraocular pressure

11204-00 Electroretinography [ERG]

Excludes: pattern electroretinography (11210-00 [1835])

...

Appendix A

| MBS Item | ACHI Code Map |
|-----------------------|-----------------------|
| 12325 | 12326 |

Reference:

Ellery B, Milverton J, Newton S, Morona J, Gum D, Parsons J, Vogan A, Fischer S & Merlin T 2014, *Retinal photography with a non-mydratric retinal camera in people with diabetes*. MSAC application no. 1181, Assessment Report. Commonwealth of Australia, Canberra, ACT, viewed 2 March 2018, [http://www.msac.gov.au/internet/msac/publishing.nsf/Content/A4CDB4090198F241CA25801000123BC6/\\$File/1181_NMP_FinalReport%20-accessible.pdf](http://www.msac.gov.au/internet/msac/publishing.nsf/Content/A4CDB4090198F241CA25801000123BC6/$File/1181_NMP_FinalReport%20-accessible.pdf)

MBS ITEM

11219 Amended

OPTICAL COHERENCE TOMOGRAPHY to determine if the requirements relating to:

- a) age related macular degeneration for access to initial treatment with ranibizumab or aflibercept;
- or

- b) diabetic macular oedema for access to initial treatment with ranibizumab, aflibercept or dexamethasone; or
- c) central or branch retinal vein occlusion for access to initial treatment with ranibizumab or aflibercept; or
- d) vitreomacular traction for access to initial treatment with ocriplasmin;

MBS ITEM

11215 Amended

RETINAL ANGIOGRAPHY, multiple exposures of 1 eye with intravenous dye injection

11218 Amended

RETINAL ANGIOGRAPHY, multiple exposures of both eyes with intravenous dye injection

National frequencies (Public Hospitals) on the usage of codes in block [1990] are:

| Block | Code | Description | fy2014_15 | fy2015_16 | fy2016_17 |
|-------|----------|----------------------------------|-----------|-----------|-----------|
| 1990 | 11215-00 | Retinal photography of 1 eye | 34 | 35 | 44 |
| | 11218-00 | Retinal photography of both eyes | 66 | 88 | 189 |
| | 96188-00 | Other photography of eye | 29 | 13 | 40 |

Source: APC data for Financial years 14/15 – 16/17

ACCD proposes to:

- amend code title of 11215-00 [1990] to *Retinal angiography* and remove the concept of laterality
- delete 11218-00 [1990] *Retinal photography of both eyes* and reclassify its concept to 11215-00 [1990] *Retinal angiography*
- amend code title of 96188-00 [1990] to *Other angiography of eye*

ANGIOGRAPHY

1990 Other angiography

11215-00 Retinal ~~photography~~ angiography of 1 eye

Includes: intravenous dye injection
multiple exposures
one or both eyes

~~11218-00 Retinal photography of both eyes~~

~~*Includes:* intravenous dye injection
multiple exposures~~

96188-00 Other ~~photography~~ angiography of eye
Anterior segment photography

Includes: intravenous dye injection
multiple exposures
one or both eyes

...

Appendix A

MBS Item ACHI Code Map

MBS ITEM**11219 Amended**

OPTICAL COHERENCE TOMOGRAPHY to determine if the requirements relating to:

- a) age related macular degeneration for access to initial treatment with ranibizumab or aflibercept; or
- b) diabetic macular oedema for access to initial treatment with ranibizumab, aflibercept or dexamethasone; or
- c) central or branch retinal vein occlusion for access to initial treatment with ranibizumab or aflibercept; or
- d) vitreomacular traction for access to initial treatment with ocriplasmin;

11220 New

OPTICAL COHERENCE TOMOGRAPHY for the assessment of the need for treatment following provision of pharmaceutical benefits scheme-subsidised ocriplasmin

Optical coherence tomography is an imaging system used across several specialties including ophthalmology and cardiology. It is used to assess retinal macular diseases, diabetic retinopathy, glaucoma, and to observe blood flow in coronary arteries, skin conditions such as nonmelanoma skin cancers and certain GI tract conditions such as oesophageal varices and neoplasms.

ACCD proposal:

- create 11219-00 *Optical coherence tomography* in Block **[2016]** *Other imaging services*
- map MBS item 11220 to 11219 in Appendix A.

2016 Other imaging services

90904-00 Thermography, not elsewhere classified

Excludes: thermography of breast with radiography (59300-01, 59303-01 **[1973]**)

[11219-00 Optical coherence tomography](#)

Appendix A

MBS Item ACHI Code Map

[11220](#)

[11219](#)

Alphabetic Index

CONVENTIONS USED IN THE ALPHABETIC INDEX OF INTERVENTIONS

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, they always take precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

...

When multiple prepositional references are present, they are listed in alphabetic sequence.

EXAMPLE 5:

Orbitotomy (exploratory) 42533-00 [222]
- for
-- decompression, by removal of
--- bone (with replacement) — *see Orbitotomy/with/removal of/bone*
--- intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
-- dysthyroid eye disease, by
-- fenestration of ≥ 2 walls 42545-00 [227]
-- removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- with
-- biopsy 42533-01 [224]
-- drainage 42533-00 [222]
-- excision of lesion ~~(anterior aspect)~~ 42542-00 [224]
~~— retrobulbar aspect 42543-00 [224]~~

Angiography

...

- eye (anterior segment) ~~(fluorescein) (intravenous dye injection) (multiple exposures)~~ 96188-00 [1990]
~~— anterior segment 96188-00 [1990]~~
-- retina ~~(1 eye)~~ 11215-00 [1990]
~~— both eyes 11218-00 [1990]~~
- head (with neck)
-- spiral (by computerised tomography) 57350-00 [1966]

Aspiration

...

- cyst — *see also Aspiration/by site*
-- liver 30224-01 [987]
-- orbit 42572-0400 [223]
-- ovary 35518-00 [1240]

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

...

- orbit 42533-01 [224]

- - with ~~removal of bone (and replacement)~~ 42530-01 [227]
- - - [excision of lesion](#) 42539-00 [227]
- - - [removal of bone \(and replacement\)](#) 42539-00 [227]
- ovary (aspiration) (closed) (open) (punch) 35637-06 [1242]
- palate (bony) (hard) 30075-23 [402]

Blepharorrhaphy 42584-00 [236]

- division or severing ~~90090-00~~ [90084-00](#) [231]

Blepharotomy 90084-00 [231]

- lid margin 90084-00 [231]

Casting

...

- metal
- - base (partial denture)
- - - mandibular 97728-00 [474]
- - - maxillary 97727-00 [474]
- - palate (plate) 97716-00 [474]
- [mould for eye socket](#) 96091-00 [1870]
- mounting, for occlusal analysis 97964-00 [489]

Cauterisation — *see also Destruction*

- angioma 45027-00 [743]
- caruncle
- - urethra 35527-00 [1116]
- cervix 35608-00 [1275]
- choroid plexus 90007-02 [28]
- conjunctiva ~~42677-00~~ [96250-04](#) [253]
- ectropion 42581-00 [239]
- entropion 42581-01 [239]
- haemangioma 45027-00 [743]
- haemorrhoids 32135-01 [941]
- lacrimal punctum ~~42622-00~~ [96249-03](#) [245]
- lesion
- - cervix 35608-00 [1275]
- - conjunctiva ~~42677-00~~ [96250-04](#) [253]
- - sclera 90068-00 [179]
- - vagina 90437-00 [1281]
- ...
- pharynx 41674-02 [419]
- punctum, lacrimal ~~42622-00~~ [96249-03](#) [245]
- septum (nasal) 41674-01 [374]
- soft tissue

Closure (of)

...

- lacrimal punctum ~~42622-00~~ [96249-03](#) [245]
- - by [plug](#) 42620-00 [243]
- ~~--- cautery 42622-00 [245]~~
- ~~--- plug 42620-00 [243]~~
- laparostomy 30399-00 [1000]

...

- proctostomy 30562-05 [917]
- pseudomeningocele — *see Closure/meningocele*
- punctum, lacrimal ~~42622-00~~ [96249-03](#) [245]
- - by [plug](#) 42620-00 [243]
- ~~--- cautery 42622-00 [245]~~

- ~~plug 42620-00 [243]~~
- pyelostomy 90350-00 [1059]

Correction — see also *Repair*

...

- ectropion [NEC 96248-02 \[239\]](#)
- - by
- - - cauterisation 42581-00 [239]
- - - [lateral canthal sling 96248-02 \[239\]](#)
- - - repair of inferior retractors ([lower eyelid](#)) 42866-01 [239]
- - - - tightening or shortening 42866-00 [239]
- - - suture technique ([stitching of eyelid](#)) 45626-00 [239]
- - - tarsconjunctival ([diamond](#)) ([rhomboid](#)) ([triangular](#)) [excision repaired with layered sutures](#) 45626-01 [239]
- - - [tightening of lateral canthus 42590-00 \[235\]](#)
- - - with wedge resection 45626-01 [239]
- entropion [NEC 96248-02 \[239\]](#)
- - by
- - - cauterisation 42581-01 [239]
- - - [lateral canthal sling 96248-02 \[239\]](#)
- - - repair of inferior retractors ([lower eyelid](#)) 42866-01 [239]
- - - - tightening or shortening 42866-00 [239]
- - - suture technique ([stitching of eyelid](#)) 45626-00 [239]
- - - [tarsconjunctival \(diamond\) \(rhomboid\) \(triangular\) excision repaired with layered sutures 45626-01 \[239\]](#)
- - - [tightening of lateral canthus 42590-00 \[235\]](#)
- - - with wedge resection 45626-01 [239]
- everted lacrimal punctum 90092-00 [247]
- eyebrow
- - ptosis (bilateral) 45588-01 [1675]
- - - unilateral 45587-01 [1675]
- eyelid
- - ectropion — see *Correction/ectropion*
- - entropion — see *Correction/entropion*
- - height, following previous correction of blepharoptosis 45625-00 [1687]
- - ptosis — see *Correction/blepharoptosis*
- - retraction 42863-00 [236]
- - - with graft (to)
- - - - lower eyelid (~~1 eye~~) 42860-02 [234]
- - - - ~~both eyes 42860-03 [234]~~
- - - - upper eyelid (~~1 eye~~) 42860-00 [234]
- - - - ~~both eyes 42860-01 [234]~~
- facial soft tissue asymmetry 45587-00 [1675]

...

- trichiasis [96246-00 \[238\]](#)
- ~~by~~
- ~~cryotherapy (1 eye) 42587-00 [238]~~
- ~~both eyes 42587-01 [238]~~
- ~~electrolysis (1 eye) 42587-04 [238]~~
- ~~both eyes 42587-05 [238]~~
- ~~laser (1 eye) 42587-02 [238]~~
- ~~both eyes 42587-03 [238]~~
- tricuspid valve atresia (heart)

Cricopharyngotomy — see *Myotomy/cricopharyngeal*

Cricothyrostomy (direct stab) (for tracheobronchial toilet) (Seldinger technique) (using Minitrache device) 41884-00 [535]

[Cross linking, corneal collagen \(CXL\) 90066-00 \[174\]](#)

Crown, dental

Cryosurgery — see *Cryotherapy*

Cryotherapy — see also *Destruction/by site*

- cervix 35608-01 [1275]
- ciliary body (laser) 42770-00 [191]
- conjunctiva ~~42680-00~~[96250-04 \[253\]](#)
- cornea (lesion) (ulcer) 42797-03 [168]
- eyelid
 - - for correction of trichiasis (~~1 eye~~) ~~42587-00~~[96246-00 \[238\]](#)
 - ~~— both eyes 42587-01 [238]~~
 - - lesion (single) (skin of eyelid) 30195-04 [1612]
 - - - multiple lesions 30195-05 [1612]
- haemorrhoids 32135-01 [941]
- intracranial, stereotactic 40801-00 [27]
- lesion
 - - conjunctiva ~~42680-00~~[96250-04 \[253\]](#)
 - - cornea 42797-03 [168]
 - - oral mucosa 52034-00 [1612]

Cutdown

- venous — see *Catheterisation/vein/central/open*

[CXL \(corneal collagen cross linking\) 90066-00 \[174\]](#)

Cyclocryotherapy 42770-00 [191]

Cyclodestruction (laser) 42770-00 [191]

Decompression

...

- optic nerve sheath 42548-00 [69]
- orbit 42530-00 [227]
 - - ~~for dysthyroid eye disease,~~by
 - - - fenestration of >= 2 walls 42545-00 [227]
 - - - removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
 - - with
 - - - biopsy ~~42530-01~~[42539-00 \[227\]](#)
 - - - excision of lesion 42539-00 [227]
 - - - fenestration of >= 2 walls 42545-00 [227]
 - - - removal of
 - - - - foreign body 42539-~~01~~[00 \[227\]](#)
 - - - - intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
 - - - - posterior cranial fossa (with duraplasty) 40106-01 [9]

Destruction (ablation) (cauterisation) (coagulation) (cryotherapy) (diathermy) (HIFUS) (irreversible electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)

...

- ciliary body 42770-00 [191]
- conjunctiva ([lesion](#)) [96250-04 \[253\]](#)
 - ~~— by~~
 - ~~— cauterisation 42677-00 [253]~~
 - ~~— cryotherapy 42680-00 [253]~~
 - cornea (lesion) (thermocauterisation) 42797-03 [168]
 - ear

- ...
- endometriosis (fallopian tube) (omentum) (ovary) (uterine adnexae) (uterus)
- - endometrium (endoscopic) 35622-00 [1263]
- - - open 90451-00 [1263]
- - pelvic cavity (laparoscopic) 35637-02 [1299]
- - - via laparotomy 35713-01 [1299]
- eyelash follicle — ~~see Correction/trichiasis~~ [96246-00 \[238\]](#)
- false aneurysm, by administration of agent 45027-02 [742]
- fetus, to facilitate delivery 90476-00 [1343]

- ...
- labyrinth (inner ear) 41572-00 [330]
- lacrimal punctum (~~by cauterisation~~) (~~by diathermy~~) ~~42622-00~~ [96249-03 \[245\]](#)
- lash follicle — *see Correction/trichiasis*

- ...
- lesion (tissue) (tumour) — *see also Destruction/by site*
- - colon
- - - endoscopic (closed) 90308-00 [908]
- - - - by laser 30479-02 [908]
- - conjunctiva [96250-04 \[253\]](#)
- - - ~~by~~
- - - ~~cauterisation~~ 42677-00 [253]
- - - ~~cryotherapy~~ 42680-00 [253]
- - fallopian tube (laparoscopic) 35637-02 [1299]
- - - via laparotomy 35713-01 [1299]

Diathermy — *see also Destruction/by site*

- ileum, endoscopic 30478-15 [1007]
- lacrimal punctum ~~42622-00~~ [96249-03 \[245\]](#)
- lesion (tissue) — *see also Diathermy/by site*

- ...
- punctum, lacrimal ~~42622-00~~ [96249-03 \[245\]](#)
- retina (lesion) 42809-00 [211]
- - for repair of retinal detachment (tear) 90079-00 [212]
- - - with scleral buckling 42776-00 [212]
- salivary gland or duct 30262-01 [396]

Diverticulectomy

- bladder (open) 37020-01 [1103]
- - via laparoscopy 37020-00 [1103]
- lacrimal sac 42596-~~00~~ [03 \[244\]](#)
- Meckel's 30375-09 [896]
- - with resection of small intestine, with anastomosis 30566-00 [895]

Drainage

- cyst — *see also Drainage/by site*
- - orbit (percutaneous) 42572-~~04~~ [00 \[223\]](#)
- - - by orbitotomy 42533-00 [222]
- - ovary (open) 35713-02 [1241]

- ...
- orbit, orbital 42533-00 [222]
- - abscess 42572-00 [223]
- - - by orbitotomy 42533-00 [222]
- - cyst 42572-~~04~~ [00 \[223\]](#)

- - - by orbitotomy 42533-00 [222]
- pancreas, pancreatic (by catheter) 30375-14 [976]

Electrolysis of eyelash follicle (for correction of trichiasis) 96246-00 [238]

- eyelid
- - for correction of trichiasis
- - - 1 eye 42587-04 [238]
- - - both eyes 42587-05 [238]

Electromagnetic navigation bronchoscopy (ENB) — see Bronchoscopy
Electromyography (EMG) 11012-00 [1826]

Establishment (of)

- patency of lacrimal canalicular system
- - closed procedure 42599-00 [249]
- - open procedure 42602-00 [249]
- - - 1 eye
- - - closed procedure 42599-00 [249]
- - - open procedure 42602-00 [249]
- - - both eyes
- - - closed procedure 42599-01 [249]
- - - open procedure 42602-01 [249]
- peritoneal dialysis 13112-00 [1062]

Estimation

Excision — see also Removal

- bone NEC (see also Osteotomy) 90572-00 [1563]
- ...
- - orbit (with replacement of bone) 42530-00 [227]
- - - with
- - - - biopsy 42530-01 42539-00 [227]
- - - - excision of lesion of orbit 42539-00 [227]
- - - - removal of foreign body of orbit 42539-04 00 [227]
- - patella 49503-04 [1504]
- - - with reattachment of tendon for patellar fracture 47582-00 [1520]
- ...
- cyst — see also Excision/lesion(s)
- - dermoid
- - - orbital (posterior to orbital septum) 42574-00 [226]
- - - periorbital (anterior to orbital septum) 42573-00 [226]
- - duplication
- - - enteric 43912-01 [1009]
- ...
- dermoid (cyst)
- - with intranasal extension 41729-00 [377]
- - orbital (posterior to orbital septum) 42574-00 [226]
- - periorbital (anterior to orbital septum) 42573-00 [226]
- desmoid tumour — see Excision/tumour/soft tissue/by en bloc resection
- ...
- diverticulum
- - bladder (open) 37020-01 [1103]
- - - via laparoscopy 37020-00 [1103]
- - lacrimal sac 42596-00 03 [244]
- - Meckel's 30375-09 [896]

- ...
- lesion(s) — see also *Excision/tumour AND Excision/cyst AND Excision/polyp*
- orbit
- dermoid cyst (tumour) 42574-00 [226]
- via orbitotomy (~~anterior aspect~~) 42542-00 [224]
- with removal of bone (with replacement) 42539-00 [227]
- ~~retrobulbar aspect 42543-00 [224]~~
- ovary

- ...
- tumour — see also *Excision/lesion(s)*
- ...
- orbit
- via orbitotomy (~~anterior aspect~~) 42542-00 [224]
- with removal of bone (with replacement) 42539-00 [227]
- ~~retrobulbar aspect 42543-00 [224]~~
- oropharynx, overlapping other sites of upper aerodigestive tract 31400-00 [421]

Exenteration

- orbit [NEC](#) 42536-00 [225]
- with [removal of adjacent structures](#) 42536-04 [225]
- ~~muscle transplant (temporalis) 42536-02 [225]~~
- ~~and skin graft 42536-03 [225]~~
- ~~removal of~~
- ~~adjacent structures 42536-04 [225]~~
- ~~orbital bone (therapeutic) 42536-05 [225]~~
- ~~skin graft 42536-01 [225]~~
- ~~and muscle transplant (temporalis) 42536-03 [225]~~
- pelvic

Exploration — see also *Examination AND Incision/by site*

- ...
- orbit 42533-00 [222]
- with
- biopsy 42533-01 [224]
- and removal of bone (and replacement) ~~42530-01~~[42539-00](#) [227]
- drainage 42533-00 [222]
- excision of lesion (~~anterior aspect~~) 42542-00 [224]
- with removal of bone (with replacement) 42539-00 [227]
- ~~retrobulbar aspect 42543-00 [224]~~
- removal of
- bone (with replacement of bone) 42530-00 [227]
- and
- biopsy ~~42530-01~~[42539-00](#) [227]
- excision of lesion 42539-00 [227]
- removal of foreign body 42539-~~01~~[00](#) [227]
- foreign body (~~anterior aspect~~) 42542-01 [224]
- with removal of bone (with replacement) 42539-~~01~~[00](#) [227]
- ~~retrobulbar aspect 42543-01 [224]~~
- pancreas
- endoscopic 30484-02 [974]

Extraction

- calculus (stone)
- ...
- lacrimal
- canaliculus, by

- incision (~~1 eye~~) 42602-00 [249]
- ~~---- both eyes 42602-01 [249]~~
- probing (unilateral) 42614-01 [241]
- bilateral 42615-01 [241]
- gland (by incision) ~~42593-01~~ 42596-03 [244]
- nasolacrimal duct, by
- incision 42596-03 [244]
- probing (unilateral) 42614-01 [241]
- bilateral 42615-01 [241]
- passages (by probing) (unilateral) NEC 42614-01 [241]
- bilateral 42615-01 [241]
- punctum (by incision) 42617-00 [244]
- by probing
- bilateral 42615-01 [241]
- unilateral 42614-01 [241]
- sac (by incision) 42596-~~01~~03 [246244]
- pancreas, endoscopic 90349-00 [975]
- prostate 37212-02 [1161]

- ...
- lens (crystalline) NEC 42698-05 [200]
- - with ~~removal of vitreous 42731-01 [200]~~
- - - [implantation of trans-trabecular drainage device \(iStent\) \(microstents\) 42705-00 \[200\]](#)
- - - [removal of vitreous 42731-01 \[200\]](#)
- - after cataract, by

Fenestration

- inner ear 90117-00 [332]
 - orbital walls, ~~2 or more~~ ≥ 2 , for decompression ~~of orbit~~ 42545-00 [227]
- Fenton's procedure** (enlargement of vaginal orifice) 35569-00 [1287]

Graft (repair)

- ...
- eyelid
- - for symblepharon 45629-00 [1676]
- - with recession of lid retractors
- - - lower (~~1 eye~~) 42860-02 [234]
- ~~---- both eyes 42860-03 [234]~~
- - - upper (~~1 eye~~) 42860-00 [234]
- ~~---- both eyes 42860-01 [234]~~
- - composite 45656-02 [1669]
- - septochondromucosal 45656-02 [1669]
- ...
- skin (autogenous) (free) (mucous membrane)
- ...
- - with
- - - canaloplasty of external auditory meatus 41521-01 [304]
- - - correction of auditory canal stenosis 41521-01 [304]
- - - exenteration of orbit ~~42536-01~~42536-00 [225]
- ~~---- and muscle transplant (temporalis) 42536-03 [225]~~
- ~~----- with removal of adjacent structures 42536-04 [225]~~
- - - vestibuloplasty (open) (oral) 45837-01 [406]

Implant, implantation — see also Insertion

- ...
- device

- cardiac
- event monitor (ECG) (looping memory) (patient activated) 38285-00 [1604]
- resynchronisation — see *Insertion/pacemaker/cardiac*
- [-- drainage, trans-trabecular \(iStent\) \(microstents\) with extraction of lens 42705-00 \[200\]](#)
- hearing

Incision

- ...
- labyrinth (inner ear) 41572-00 [330]
- lacrimal
- canaliculi [42602-00 \[249\]](#)
- ~~--- 1 eye 42602-00 [249]~~
- ~~--- both eyes 42602-01 [249]~~
- gland ~~42593-01~~ [42596-03 \[244\]](#)
- nasolacrimal duct 42596-03 [244]
- passages NEC 42596-03 [244]
- punctum 42617-00 [244]
- sac 42596-~~00~~03 [244]
- larynx 90164-00 [522]
- median (laryngofissure) 41876-00 [527]

Insertion

- ...
- device — see also *Insertion/by type of device*
- ...
- spinal infusion, implantable (epidural) (intrathecal) 39127-00 [39]
- stomach, for obesity (endoscopic) (see also *Banding/gastric, for obesity*) 90950-02 [889]
- [-- trans-trabecular \(iStent\) \(microstents\) with extraction of lens 42705-00 \[200\]](#)
- ureteral stimulator, electronic 90355-00 [1069]
- ...
- total artificial heart 96229-00 [608]
- tracheostomy tube — see *Tracheostomy*
- [- trans-trabecular drainage device \(iStent\) \(microstents\) with extraction of lens 42705-00 \[200\]](#)
- tube
- ...
- lacrimal canaliculus
- ~~--- with~~
- ~~--- establishment of patency of lacrimal canalicular system~~
- ~~--- closed procedure (1 eye) 42599-00 [249]~~
- ~~--- both eyes 42599-01 [249]~~
- ~~--- open procedure (1 eye) 42602-00 [249]~~
- ~~--- both eyes 42602-01 [249]~~
- ~~--- glass (Pyrex) 42608-01 [242]~~
- ~~--- other 42608-00 [242]~~
- [--- for establishment of patency of lacrimal canalicular system — see *Establishment/patency of lacrimal canalicular system*](#)
- [--- with](#)
- [---- glass \(Pyrex\) 42608-01 \[242\]](#)
- [---- other 42608-00 \[242\]](#)
- nasobiliary, endoscopic (for drainage) 30491-00 [958]
- nasogastric (for decompression) 92036-00 [1895]
- for enteral infusion of concentrated nutritional substance (feeding) 96202-07 [1920]
- nasolacrimal (conjunctival sac) (lacrimal sac)
- ~~--- with~~
- ~~--- establishment of patency of lacrimal canalicular system~~
- ~~--- closed procedure~~
- ~~--- 1 eye 42599-00 [249]~~

- ~~----- both eyes 42599-01 [249]~~
- ~~----- open procedure~~
- ~~----- 1 eye 42602-00 [249]~~
- ~~----- both eyes 42602-01 [249]~~
- ~~----- glass (Pyrex) 42608-01 [242]~~
- ~~----- other 42608-00 [242]~~
- [- - - for establishment of patency of lacrimal canalicular system — see *Establishment/patency of lacrimal canalicular system*](#)
- [- - - with](#)
- [- - - - glass \(Pyrex\) 42608-01 \[242\]](#)
- [- - - - other 42608-00 \[242\]](#)
- - nasopharyngeal 90179-02 [568]

Intubation — see also *Catheterisation AND Insertion/tube*

...

- Jones 42608-01 [242]
- lacrimal canaliculus
- [- - for establishment of patency of lacrimal canalicular system — see *Establishment/patency of lacrimal canalicular system*](#)
- [- - with](#)
- [- - - glass \(Pyrex\) 42608-01 \[242\]](#)
- [- - - - other 42608-00 \[242\]](#)
- ~~----- with~~
- ~~----- establishment of patency of lacrimal canalicular system~~
- ~~----- closed procedure~~
- ~~----- 1 eye 42599-00 [249]~~
- ~~----- both eyes 42599-01 [249]~~
- ~~----- open procedure~~
- ~~----- 1 eye 42602-00 [249]~~
- ~~----- both eyes 42602-01 [249]~~
- ~~----- glass (Pyrex) 42608-01 [242]~~
- ~~----- other 42608-00 [242]~~
- Lester Jones 42608-01 [242]
- Monoka 42608-00 [242]
- nasobiliary, endoscopic (for drainage) 30491-00 [958]
- nasogastric
- - for
- - - decompression, intestinal 92036-00 [1895]
- - - enteral infusion of concentrated nutritional substance 96202-07 [1920]
- - - feeding 96202-07 [1920]
- nasolacrimal duct (conjunctival sac) (lacrimal sac)
- [- - for establishment of patency of lacrimal canalicular system — see *Establishment/patency of lacrimal canalicular system*](#)
- [- - with](#)
- [- - - glass \(Pyrex\) 42608-01 \[242\]](#)
- [- - - other 42608-00 \[242\]](#)
- ~~----- with~~
- ~~----- establishment of patency of lacrimal canalicular system~~
- ~~----- closed procedure (1 eye) 42599-00 [249]~~
- ~~----- both eyes 42599-01 [249]~~
- ~~----- open procedure (1 eye) 42602-00 [249]~~
- ~~----- both eyes 42602-01 [249]~~
- ~~----- glass (Pyrex) 42608-01 [242]~~
- ~~----- other 42608-00 [242]~~
- nasopharyngeal 90179-02 [568]

Laser therapy — see also *Destruction/by site*

...

- endometrium (endoscopic) 35622-00 [1263]
- eyelid [for correction of trichiasis 96246-00 \[238\]](#)
- ~~--- for correction of trichiasis~~
- ~~--- 1 eye 42587-02 [238]~~
- ~~--- both eyes 42587-03 [238]~~
- fragmentation of calculus (stone)
- - kidney
- - - via
- ...
- thermokeratoplasty 90064-01 [173]
- trichiasis [96246-00 \[238\]](#)
- ~~--- 1 eye 42587-02 [238]~~
- ~~--- both eyes 42587-03 [238]~~
- trichoepithelioma, face or neck 30190-00 [1612]
- tumour — see *Laser therapy/lesion*

Latent — see *condition*

[Lateral canthal sling 96248-02 \[239\]](#)

Laterocession — see *Lateroversion*

Lateroflexion — see *Lateroversion*

Mosaicplasty (knee) 49503-02 [1520]

- arthroscopic 49558-01 [1520]

[Mould, moulding](#)

- [socket for enucleated eyeball 96091-00 \[1870\]](#)

Mounting

- model, for occlusal analysis 97964-00 [489]

Obliteration

- fistula
- - carotid-cavernous 39815-00 [11]
- lacrimal punctum [96249-03 \[245\]](#)
- - by [insertion of plug 42620-00 \[243\]](#)
- ~~--- diathermy 42622-00 [245]~~
- ~~--- insertion of plug 42620-00 [243]~~
- lymphatic (channel) (peripheral) 90283-00 [812]

Occlusion

...

- fallopian tubes (for sterilisation) (laparoscopic) 35688-00 [1257]
- - by electrodestruction 35688-03 [1257]
- - open (via laparotomy) 35688-02 [1257]
- - - by electrodestruction 35688-04 [1257]
- - vaginal approach 35688-01 [1257]
- lacrimal punctum [96249-03 \[245\]](#)
- - by [insertion of plug 42620-00 \[243\]](#)
- ~~--- cautery 42622-00 [245]~~
- ~~--- plug 42620-00 [243]~~
- placental vessels, endoscopic (fetoscopic) 90488-00 [1330]
- umbilical cord (percutaneous) 90463-00 [1330]

Ophthalmoscopy (under general anaesthesia) 42503-00 [160]

- with any other procedure on eye — *omit code*

[Optical coherence tomography 11219-00 \[2016\]](#)

Orbitomaxillectomy, radical 42536-04 [225]

Orbitotomy (exploratory) 42533-00 [222]

- for

-- decompression, by removal of

--- bone (with replacement) — see *Orbitotomy/with/removal of/bone*

--- intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]

-- dysthyroid eye disease, by

--- fenestration of >= 2 walls 42545-00 [227]

--- removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]

- with

-- biopsy 42533-01 [224]

-- drainage 42533-00 [222]

-- excision of lesion ~~(anterior aspect)~~ 42542-00 [224]

~~--- retrobulbar aspect 42543-00 [224]~~

-- removal of

--- bone (with replacement) 42530-00 [227]

---- and

----- biopsy ~~42530-01~~ 42539-00 [227]

----- excision of lesion 42539-00 [227]

----- fenestration of >= 2 walls 42545-00 [227]

----- removal of foreign body 42539-~~01~~00 [227]

--- foreign body ~~(anterior aspect)~~ 42542-01 [224]

~~--- retrobulbar aspect 42543-01 [224]~~

--- intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]

Orchidectomy (unilateral) 30641-00 [1184]

Photography

~~- anterior segment 96188-00 [1990]~~

~~- retina (1 eye) (intravenous dye injection) (multiple exposures) 11215-00 [1990]~~

~~- both eyes 11218-00 [1990]~~

- retinal, bilateral 12326-00 [1835]

Photoiridosyneresis, laser 42764-03 [190]

Photomydriasis, laser 42764-03 [190]

Plication

- for facial nerve paralysis (subcutaneous) 45581-01 [1692]

...

- diaphragm

-- for

--- eventration 43915-00 [566]

--- repair of diaphragmatic hernia 30601-00 [998]

- eyelid (lower) retractors 42866-01 [239]

- by tightening or shortening 42866-00 [239]

- fascia 30238-00 [1574]

- gastric, for obesity — see *Gastroplasty, for obesity*

Procedure

- for

...

-- dysthyroid eye disease, by (decompression of orbit)

--- fenestration of >= 2 walls 42545-00 [227]

--- removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]

-- ectropion NEC 96248-02 [239]

--- cauterisation 42581-00 [239]

~~--- lateral canthal sling 96248-02 [239]~~

--- repair of inferior refractors (lower eyelid) 42866-01 [239]

---- tightening or shortening 42866-00 [239]

--- suture technique (stitching of eyelid) 45626-00 [239]

- - tarsoconjunctival (diamond) (rhomboid) (triangular) excision repaired with layered sutures 45626-01 [239]
- ~~--- tightening of lateral canthus 42590-00 [235]~~
- - wedge resection 45626-01 [239]
- enlargement of bladder (open) 37047-01 [1107]
- ~~--- via laparoscopy 37047-00 [1107]~~
- entropion [NEC 96248-02 \[239\]](#)
- ~~--- cauterisation 42581-01 [239]~~
- ~~--- lateral canthal sling 96248-02 [239]~~
- ~~--- repair of inferior refractors (lower eyelid) 42866-01 [239]~~
- ~~--- tightening or shortening 42866-00 [239]~~
- ~~--- suture technique (stitching of eyelid) 45626-00 [239]~~
- ~~--- tarsoconjunctival (diamond) (rhomboid) (triangular) excision repaired with layered sutures 45626-01 [239]~~
- ~~--- tightening of lateral canthus 42590-00 [235]~~
- ~~--- wedge resection 45626-01 [239]~~
- epispadias (single stage) 37836-00 [1199]
- ~~--- secondary repair 37842-00 [1199]~~
- ~~--- with ureteric reimplantation 37842-01 [1199]~~
- staged repair
- ~~--- 1st stage 37836-00 [1199]~~
- ~~--- 2nd stage 37839-00 [1199]~~
- establishment of patency, lacrimal canalicular system
- closed procedure [42599-00 \[249\]](#)
- ~~--- 1 eye 42599-00 [249]~~
- ~~--- both eyes 42599-01 [249]~~
- open procedure [42602-00 \[249\]](#)
- ~~--- 1 eye 42602-00 [249]~~
- ~~--- both eyes 42602-01 [249]~~
- eventration (plication of diaphragm) 43915-00 [566]
- facial nerve paralysis (weakness)

- ...
- Treacher Collins syndrome
- ~~--- periorbital correction 45773-00 [1711]~~
- trichiasis [96246-00 \[238\]](#)
- ~~--- by~~
- ~~--- cryotherapy (1 eye) 42587-00 [238]~~
- ~~--- both eyes 42587-01 [238]~~
- ~~--- electrolysis (1 eye) 42587-04 [238]~~
- ~~--- both eyes 42587-05 [238]~~
- ~~--- laser (1 eye) 42587-02 [238]~~
- ~~--- both eyes 42587-03 [238]~~
- undescended testis — see *Fixation/testis*
- urethral stricture

Recession

- ...
- extraocular muscle, for strabismus repair (for nystagmus repair) — see *Procedure/for/strabismus*
- eyelid [retractors 42863-00 \[236\]](#)
- ~~--- with graft to eyelid~~
- ~~--- lower 42860-02 [234]~~
- ~~--- upper 42860-00 [234]~~
- ~~--- retractors 42863-00 [236]~~
- ~~--- with graft to eyelid~~
- ~~--- lower (1 eye) 42860-02 [234]~~
- ~~--- both eyes 42860-03 [234]~~
- ~~--- upper (1 eye) 42860-00 [234]~~

- ~~----- both eyes 42860-01 [234]~~
- frontal bone — see *Recession/bone/frontal*
- tendon — see also *Repair/tendon*

Reconstruction

- ...
- eyelid 45614-00 [1684]
- by tarsal strip (lateral) 45614-01 [1684]
- with
- flap (single or 1st stage) (tarsconjunctival) 45671-01 [1684]
- 2nd stage 45674-01 [1684]
- graft
- with recession of lid retractors
- lower eyelid (~~1 eye~~) 42860-02 [234]
- ~~----- both eyes 42860-03 [234]~~
- upper eyelid (~~1 eye~~) 42860-00 [234]
- ~~----- both eyes 42860-01 [234]~~
- composite (chondrocutaneous) (chondromucosal) 45656-02 [1669]
- [hair follicle 45614-00 \[1684\]](#)
- skin (split or partial thickness) 45448-00 [1645]
- with recession of lid retractors — see *Reconstruction/eyelid/with/graft/with recession of lid retractors*
- full thickness 45451-00 [1649]
- granulating 45400-00 [1642]
- ~~----- hair follicle 90095-00 [237]~~
- cosmetic — see *Rhytidectomy/eyelid*

Removal — see also *Excision*

- ...
- bone
- ...
- orbit 42530-00 [227]
- with
- biopsy (with replacement) ~~42530-01~~[42539-00 \[227\]](#)
- excision of lesion of orbit (with replacement) 42539-00 [227]
- exenteration of orbit (~~therapeutic~~) ~~42536-05~~[04 \[225\]](#)
- fenestration of >= 2 walls (with replacement) 42545-00 [227]
- removal of foreign body ~~of orbit~~ (with replacement) ~~42539-04~~[00 \[227\]](#)
- spicules — see *Removal/bone/fragments*
- ...
- eyeball (globe)
- by
- enucleation (without implant) 42506-00 [161]
- with insertion of implant (coralline) (hydroxy apatite) (integrated) (sphere) 42509-00 [161]
- evisceration (without implant) 42512-00 [161]
- with insertion of implant (cartilage) (intrascleral ball) 42515-00 [161]
- exenteration [NEC](#) 42536-00 [225]
- with [removal of](#)
- [adjacent structures 42536-04 \[225\]](#)
- [orbital bone 42536-04 \[225\]](#)
- ~~----- and muscle transplant (temporalis) 42536-03 [225]~~
- ~~----- muscle transplant (temporalis) 42536-02 [225]~~
- ~~----- and skin graft 42536-03 [225]~~
- ~~----- removal of~~
- ~~----- adjacent structures 42536-04 [225]~~
- ~~----- orbital bone (therapeutic) 42536-05 [225]~~
- faeces (impacted) (nonsurgical) 92076-00 [1895]
- ...

- foreign body.
- ...
- lacrimal sac ~~42596-00~~[03 \[244\]](#)
- larynx, without incision 92032-00 [1887]
- ...
- orbit
- via orbitotomy ~~(anterior aspect)~~ 42542-01 [224]
- with removal of bone (with replacement) 42539-~~04~~[00 \[227\]](#)
- ~~---- retrobulbar aspect 42543-01 [224]~~
- penis, without incision 92126-00 [1903]
- pharynx (by incision) 41779-00 [418]
-

- tube
- ...
- nasolacrimal [42614-02 \[242\]](#)
- ~~---- bilateral 42615-02 [242]~~
- ~~---- with replacement 42615-00 [242]~~
- ~~---- unilateral 42614-02 [242]~~
- ~~---- with replacement 42614-00 [242]~~
- with replacement [42614-00 \[242\]](#)
- nasopharyngeal (stent) 96190-02 [568]
- with replacement 96190-01 [568]

Reopening — see also *Incision/by site*

- [blepharorrhaphy 90084-00 \[231\]](#)
- craniotomy or craniectomy site, postoperative (via osteoplastic flap) 39721-00 [10]
- extremity
- for control of bleeding or thrombosis (following vascular procedure) (postoperative) 33848-00 [746]
- ...
- sternotomy site (arrest of haemorrhage) 38656-01 [562]
- [tarsorrhaphy 90084-00 \[231\]](#)
- thoracotomy site (arrest of haemorrhage) 38656-01 [562]

Repair

- ...
- ectropion [NEC 96248-02 \[239\]](#)
- by
- cauterisation 42581-00 [239]
- [lateral canthal sling 96248-02 \[239\]](#)
- repair of inferior retractors ([lower eyelid](#)) 42866-01 [239]
- tightening or shortening 42866-00 [239]
- suture technique ([stitching of eyelid](#)) 45626-00 [239]
- tarsoconjunctival ([diamond](#)) ([rhomboid](#)) ([triangular](#)) [excision repaired with layered sutures](#) 45626-01 [239]
- [tightening of lateral canthus 42590-00 \[235\]](#)
- with wedge resection 45626-01 [239]
- elbow NEC 90536-00 [1418]
- ...
- entropion [NEC 96248-02 \[239\]](#)
- by
- cauterisation 42581-01 [239]
- [lateral canthal sling 96248-02 \[239\]](#)
- repair of inferior retractors ([lower eyelid](#)) 42866-01 [239]
- tightening or shortening 42866-00 [239]

- - - suture technique ([stitching of eyelid](#)) 45626-00 [239]
- - - [tarsconjunctival \(diamond\) \(rhomboid\) \(triangular\) excision repaired with layered sutures 45626-01 \[239\]](#)
- - - [tightening of lateral canthus 42590-00 \[235\]](#)
- - with wedge resection 45626-01 [239]
- epididymis (and spermatic cord) NEC 30644-11 [1187]
- ...
- eyelid NEC 90085-00 [236]
- - by tarsorrhaphy 42584-00 [236]
- - for
- - - reconstruction — see *Reconstruction/eyelid*
- - - reduction
- - - - lower 45620-00 [1662]
- - - - upper 45617-00 [1662]
- - canthus 42590-00 [235]
- - - lateral 42590-00 [235]
- - - medial 42590-01 [235]
- - ectropion — see *Repair/ectropion*
- - entropion — see *Repair/entropion*
- - laceration (full thickness) (wound) 30052-01 [236]
- - lamella
- - - anterior 45626-00 [239]
- - - posterior, by
- - - - shortening of inferior retractors 42866-00 [239]
- - - - specified repair of inferior retractors 42866-01 [239]
- - - - tightening of inferior retractors 42866-00 [239]
- - ptosis — see *Repair/blepharoptosis*
- - retraction 42863-00 [236]
- - with graft (to)
- - - lower eyelid (~~1 eye~~) 42860-02 [234]
- - - ~~both eyes 42860-03 [234]~~
- - - upper eyelid (~~1 eye~~) 42860-00 [234]
- - - ~~both eyes 42860-01 [234]~~
- - wound (full thickness) 30052-01 [236]
- facial
- - asymmetry due to soft tissue abnormality 45587-00 [1675]
- - bone NEC 90681-00 [1712]
- ...
- lacrimal canaliculus 42605-00 [247]
- - with insertion of drainage tube or stent (glass) (silicone)
- - - closed procedure [42599-00 \[249\]](#)
- - - ~~1 eye 42599-00 [249]~~
- - - ~~both eyes 42599-01 [249]~~
- - - open procedure [42602-00 \[249\]](#)
- - - ~~1 eye 42602-00 [249]~~
- - - ~~both eyes 42602-01 [249]~~
- lamella, eyelid
- ...
- ligament NEC 90589-01 [1574]
- - interphalangeal
- - - hand 46330-00 [1465]
- - - - with free tissue graft or implant 46333-00 [1465]
- - metacarpophalangeal 46330-01 [1465]
- - - with free tissue graft or implant 46333-01 [1465]
- - palpebral, medial ~~42854-01~~ [90085-00 \[236\]](#)
- - specified site 50106-00 [1571]
- - wrist, with reconstruction 49215-00 [1470]
- ...

- omentum NEC 90329-02 [1000]
- orbit ([wound](#)) NEC 90082-00 [228]
- - dystopia (extracranial) (subcranial) 45779-00 [1711]
- - - intracranial 45776-00 [1711]
- ~~- - - wound 42530-02 [228]~~
- orthodontic appliance, removable 97875-00 [483]
- ...

- syndactyly 90673-00 [1655]
- ~~- tarsoconjunctival diamond~~
- ~~- - for ectropion 45626-00 [239]~~
- temporomandibular joint 45758-00 [1712]
- tendon 47954-00 [1572]

Replacement

- ...
- tube
- - nasogastric 92078-00 [1896]
- - nasolacrimal [42614-00 \[242\]](#)
- ~~- - - bilateral 42615-00 [242]~~
- ~~- - - unilateral 42614-00 [242]~~
- - nephrostomy 36649-00 [1042]
- - oesophagostomy 92078-00 [1896]

Repositioning

- ...
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) (valve) 45566-03 [1661]
- - breast 45548-02 [1758]
- [eyelashes 96247-01 \[238\]](#)
- gastric
- - balloon (bubble), for obesity (endoscopic) 90950-04 [889]

Reversal (of)

- [blepharorrhaphy 90084-00 \[231\]](#)
- Hartmann's procedure 32033-00 [917]
- procedure for
- - obesity (surgical) 30514-01 [889]
- - sterilisation
- - - female (laparoscopic) 35694-01 [1254]
- - - - microsurgical 35697-00 [1253]
- - - - via laparotomy 35694-05 [1254]
- - - - - microsurgical 35697-00 [1253]
- - - male
- - - - vasoepididymostomy (bilateral) 37619-03 [1185]
- - - - - microsurgical 37616-03 [1185]
- - - - - unilateral 37619-02 [1185]
- - - - - - microsurgical 37616-02 [1185]
- - - - vasovasostomy (bilateral) 37619-01 [1185]
- - - - - microsurgical 37616-01 [1185]
- - - - - unilateral 37619-00 [1185]
- - - - - - microsurgical 37616-00 [1185]
- [tarsorrhaphy 90084-00 \[231\]](#)

Review

Setting

- field (radiation) — see *Field setting*

- ~~- Severing (of) of blepharorrhaphy 90090-00 [231]~~
- [blepharorrhaphy 90084-00 \[231\]](#)

- tarsorrhaphy 90084-00 [231]

SG (sleeve gastrectomy) — see *Gastrectomy/sleeve*

Shortening

- chorioscleral, for macular translocation (rotation)

(with retinotomy) 90080-02 [214]

- eyelid 45665-01 [1662]

~~— for repair of ectropion or entropion — see block [239]~~

- - inferior retractors 42866-00 [239]

- muscle

- - extraocular — see *Procedure/for/strabismus*

- - levator palpebrae (eyelid) 45623-02 [1677]

Suture (laceration)

...

- eyelid

- - for

- - - adjustment of lid position 42584-00 [236]

- - - repair of ectropion or entropion ~~45626-00 [239]~~ — see block [239]

- - canthus 42584-00 [236]

- - wound (full thickness) 30052-01 [236]

Tighten, tightening

- bladder neck

- - with secondary repair of

- - - epispadias 37842-00 [1199]

- - - - and ureteric reimplantation 37842-01 [1199]

- - - exstrophy of bladder 37842-02 [1106]

- - - - and ureteric reimplantation 37842-03 [1106]

- canthus, lateral 42590-00 [235]

- inferior retractors (lower eyelid) for repair of entropion or ectropion 42866-00 [239]

~~— for repair of entropion or ectropion 42866-00 [239]~~

TMR (transmyocardial revascularisation)

Tomography NEC 60100-00 [1951]

...

- kidney, with intravenous pyelography 58706-00 [1978]

- optical coherence 11219-00 [2016]

- photon emission (single) (SPECT)

Transfusion — see also *Administration*

...

- exchange

- - blood (adult) 92206-00 [1893]

- - - infant 13306-00 [1893]

- intrauterine, fetal — see *Transfusion/blood/fetal*

Transillumination

~~- ocular 42821-00 [229]~~

~~- retrobulbar 42821-00 [229]~~

Translocation, macular (with retinotomy) 90080-02 [214]

Transplant, transplantation

...

- muscle NEC (see also *Flap/muscle*) 47966-01 [1573]

...

- - temporalis
- - - with exenteration of orbit ~~42536-02~~ [42536-00](#) [225]
- - - - and ~~skin graft 42536-03~~ [removal of adjacent structures 42536-04](#) [225]
- nerve (peripheral) 39321-00 [83]
- ovary (laparoscopic) (with oophoropexy) 35729-00 [1245]

TABLE OF CONTENTS

| | |
|-----------------|------------------------------------|
| 7. | Eye and adnexa |
| 0701 | Cataract |
| 0724 | Corneal calcium chelation |
| 0733 | Haemodilution |
| 0741 | Ectropion/entropion |
| 0742 | Orbital and periorbital cellulitis |

~~0741 ECTROPION/ENTROPION~~

~~DEFINITION~~

~~“Entropion is inward turning of the upper or lower eyelid so that the lid margin rests against and rubs the eyeball. Ectropion is outward turning of the upper or lower eyelid so that the lid margin does not rest against the eyeball, but falls or is pulled away” (Cassin & Rubin 2011).~~

~~CLASSIFICATION~~

~~Block [239] Procedures for ectropion or entropion groups together procedures performed exclusively for repair of ectropion or entropion.~~

~~42581-00 [239]—Cauterisation of ectropion~~

~~42581-01 [239]—Cauterisation of entropion~~

~~Cautery used to shrink the tissues of the eyelid margin to treat the everted/inverted lid.~~

~~42866-00 [239]—Repair of ectropion or entropion by tightening or shortening of inferior retractors~~

~~42866-01 [239]—Repair of ectropion or entropion by other repair of inferior retractors~~

~~Correction of entropion is achieved by repairing the inferior 'retractors' (a term commonly applied to the eyelid movement mechanism).~~

~~45626-00 [239]—Correction of ectropion or entropion by suture technique~~

~~Absorbable sutures are used to correct the eyelid's malposition. No incision is required.~~

~~45626-01 [239]—Correction of ectropion or entropion with wedge resection~~

~~A wedge of the tarsus and conjunctiva is excised (generally in the configuration of a triangle, diamond or rhomboid) to eliminate the ectropion or entropion. The incision is repaired with layered sutures.~~

~~EXAMPLE 1:~~

~~Operation report:~~

~~Diagnosis: Ectropion of (L) upper eyelid.~~

~~Procedure: Wedge resection of (L) upper eyelid.~~

~~Assign procedure code: ~~45626-01~~ ~~Correction of ectropion or entropion with wedge resection [239]~~~~

~~Note: Other procedures classified elsewhere in the ACHI Tabular List may be performed to repair an ectropion or entropion, such as grafts, canthoplasty and tarsal strip procedure.~~

EXAMPLE 2:**Operation report:**

Diagnosis: (R) LL (Right lower lid) cicatricial ectropion.

Procedure: Lateral canthal tightening with 4/0 nylon.

PAWG (post auricular Wolfe graft) left ear to right lower lid secured with 6/0 BSS (black silk suture) with tie over 4/0 nylon to ear.

Assign procedure codes: ~~42590-00 [235]~~ *Lateral canthoplasty*

~~45451-00~~ *Full thickness skin graft of eyelid*
[1649]

In the above example, the lateral canthus was tightened with sutures and a post auricular Wolfe graft was performed to repair the ectropion. Note the anatomic distinction between 45626-00 [239] *Correction of ectropion or entropion by suture technique* in which the eyelid is stitched and 42590-00 [235] *Lateral canthoplasty* in which the canthus (angle formed by the inner or outer junction of the upper and lower eyelids) is stitched.

STANDARDS INDEX

E

~~Ectropion 0741~~

Education

- diabetic 0401

...

Endoscopy 0023

- for gastrointestinal bleeding 1103

- of ileum 0024

- panendoscopy 0024

~~Entropion 0741~~

Envenomation



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Repetitive Transcranial Magnetic Stimulation (rTMS)

Introduction/Rationale:

This addenda proposal is a result of a query (Q3298) and a public submission (P351) requesting a procedure code for repetitive transcranial magnetic stimulation (rTMS). rTMS is also one of the items requested by IHPA for consideration in ACHI Eleventh Edition development.

Transcranial magnetic stimulation involves stimulation of a small area on the surface of the brain through magnetic fields, generated from a coil placed on the head. rTMS is performed using pulses of various intensities or frequencies administered repeatedly, for treatment of major depressive and other mental disorders. A session of rTMS typically takes 10-30 minutes and is performed daily. Maintenance rTMS may be implemented to prevent a relapse of depression after a patient has responded to the treatment (Rachid 2018). Anaesthesia is not required for rTMS.

Internationally, rTMS is provided in outpatient clinics. In Australia, rTMS is mainly being provided on an inpatient basis. Clinical advice has confirmed that for an acute rTMS regime, patients are admitted for a full treatment course of 20 – 30 sessions. Maintenance treatment in admitted patients is usually 5 – 6 sessions performed twice daily over 2- 3 days, once a month. The same treatment regimen is also applicable to long stay patients with depression in mental health facilities. In non-admitted facilities, treatment is provided on consecutive days.

ACCD proposes to create codes for rTMS in block **[1908]** *Other therapeutic interventions*.

ACCD PROPOSAL

Tabular List

1908 Other therapeutic interventions

93173-00 Acupuncture

[96252-00](#) [Repetitive transcranial magnetic stimulation, 1 treatment](#)
[Repetitive transcranial magnetic stimulation NOS](#)

[96253-00](#) [Repetitive transcranial magnetic stimulation, 2–20 treatments](#)

[96254-00](#) [Repetitive transcranial magnetic stimulation, ≥ 21 treatments](#)

92195-00 Irrigation of catheter, not elsewhere classified

Excludes: indwelling urinary (92101-00 **[1901]**)
peritoneal port (92058-01 **[1922]**)
ureteral (92100-00 **[1901]**)
vascular (92058-01 **[1922]**)
ventricular (90002-00 **[5]**)

...

Alphabetic Index

Repair

- abdominal wall NEC 90329-00 [1000]
- - following procurement of myocutaneous flap for breast reconstruction (TRAM) 30403-05 [1000]

...

- wrist NEC 90542-00 [1468]
- - capsule or ligament, with reconstruction 49215-00 [1470]

[Repetitive transcranial magnetic stimulation \(rTMS\) \(1 treatment\) 96252-00 \[1908\]](#)

[- 2–20 treatments 96253-00 \[1908\]](#)

[- ≥ 21 treatments 96254-00 \[1908\]](#)

Replacement

- acetabular lining
- - hip, with revision of joint replacement (partial) 49346-00 [1492]
- AICD (automatic implantable cardioverter defibrillator) 38393-01 [656]

Stimulation — see also Insertion/device

...

- carotid sinus 92054-00 [1890]
 - central nervous system
 - - evoked responses — see *Investigation/central nervous system*
 - electrical
 - - cardiac
 - - - for restoration of rhythm 13400-00 [1890]
 - - - - incidental to cardiac surgery — *omit code*
 - evoked responses
 - - central nervous system — see *Investigation/central nervous system*
 - lesion
 - - brain, stereotactic 40801-00 [27]
 - phrenic nerve for assessment of phrenic nerve function 11503-06 [1849]
 - [transcranial magnetic, repetitive \(rTMS\) \(1 treatment\) 96252-00 \[1908\]](#)
 - [- 2–20 treatments 96253-00 \[1908\]](#)
 - [- ≥ 21 treatments 96254-00 \[1908\]](#)
 - unerupted tooth (packing) 97381-00 [461]
- Sting procedure** (injection into ureteral orifice) 36851-00 [1092]

Transcatheter

- closure (of)
- - patent ductus arteriosus (percutaneous) (with prosthesis or device) 38700-00 [690]
- - ventricular septal defect (percutaneous) (with prosthesis or device) 38751-00 [618]
- embolisation of blood vessels — see *Embolisation/blood vessel, transcatheter/by site*
- thrombectomy (embolectomy) of blood vessels — see *Thrombectomy/artery AND Thrombectomy/vein*

[Transcranial magnetic stimulation, repetitive \(rTMS\) \(1 treatment\) 96252-00 \[1908\]](#)

[- 2–20 treatments 96253-00 \[1908\]](#)

[- ≥ 21 treatments 96254-00 \[1908\]](#)

Transection — see also Division

- bladder
- - with reanastomosis to trigone (open) 37053-01 [1108]

Australian Coding Standards

N/A



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Respiratory distress syndrome

Introduction/Rationale:

This addenda proposal was initiated following the identification of issues regarding the classification of respiratory distress syndrome (RDS).

ICD-10-AM Tenth Edition classifies RDS as either J80 *Adult respiratory distress syndrome* or P22.0 *Respiratory distress syndrome of newborn*. There is no code for RDS in non-neonatal paediatric patients.

A literature review confirmed that the term **adult** *respiratory distress syndrome* has been replaced with **acute** *respiratory distress syndrome*.

Internationally:

- ICD-10-CA (Canada) has added *acute respiratory distress syndrome* as an *Includes* note at J80 *Adult respiratory distress syndrome*
- ICD-10-CM (USA) has renamed J80 *Acute respiratory distress syndrome (with acute respiratory distress syndrome in adult or child* as an *Inclusion* term)
- ICD-11 (Beta draft) (WHO) includes a code for *acute respiratory distress syndrome (with adult respiratory distress syndrome* as an *Index* term)
- SNOMED CT includes *Acute respiratory distress syndrome (with adult respiratory distress syndrome* as a subterm)

ACCD proposes to rename J80 to replace the term *Adult* with *Acute* for clinical currency, and to allow the classification of RDS in non-neonatal paediatric patients. It is also proposed to delete the *Excludes* note at J96 *Respiratory failure, not elsewhere classified* to allow the assignment of codes for both ARDS and acute respiratory failure, when both conditions meet the criteria for code assignment in ACS 0001 *Principal diagnosis* or ACS 0002 *Additional diagnoses* (eg when ARDS is the underlying cause of respiratory failure).

In addition to the ICD-10-AM review and proposed addenda, a review of ACS 1614 *Respiratory distress syndrome/hyaline membrane disease/surfactant deficiency* was performed. ACCD proposes deleting the standard and relocating the classification information in the ICD-10-AM Tabular List and Alphabetic Index.

ACCD PROPOSAL

Tabular List

LIST OF THREE-CHARACTER CATEGORIES

...

Other respiratory diseases principally affecting the interstitium (J80–J84)

| | |
|-----|--|
| J80 | Acute Adult respiratory distress syndrome |
| J81 | Pulmonary oedema |
| J82 | Pulmonary eosinophilia, not elsewhere classified |
| J84 | Other interstitial pulmonary diseases |

OTHER RESPIRATORY DISEASES PRINCIPALLY AFFECTING THE INTERSTITIUM (J80–J84)

J80 [Acute](#)~~Adult~~ respiratory distress syndrome

[Adult respiratory distress syndrome](#)

~~Adult~~[Hyaline membrane disease \(adult\) \(child\)](#)

[Excludes: newborn \(P22.0\)](#)

...

J96 Respiratory failure, not elsewhere classified

Excludes: ~~cardiorespiratory failure (R09.2)~~
[newborn \(P28.5\)](#)
postprocedural respiratory failure (J95.-)
~~respiratory:~~
~~▪ arrest (R09.2)~~
~~▪ distress:~~
~~▪ in newborn (P22.-)~~
~~▪ syndrome of adult (J80)~~

The following fifth character subdivisions are for use with subcategories J96.0–J96.9:

- 0 Type I [hypoxic]
- 1 Type II [hypercapnic]
- 9 Type unspecified

J96.0 Acute respiratory failure

See subdivisions

J96.1 Chronic respiratory failure

See subdivisions

J96.9 Respiratory failure, unspecified

See subdivisions

...

P22 Respiratory distress of newborn

Excludes: respiratory failure of newborn (P28.5)

P22.0 Respiratory distress syndrome of newborn

▽ 1614

Hyaline membrane disease [of newborn](#)

P22.1 Transient tachypnoea of newborn

P22.8 Other respiratory distress of newborn

P22.9 Respiratory distress of newborn, unspecified

[Excludes: respiratory distress with identified underlying cause – code condition – see Alphabetic Index](#)

...

R06 Abnormalities of breathing

Excludes: respiratory:

- arrest (R09.2)

- ~~distress:~~

- ~~in newborn (P22.-)~~

- ~~syndrome of adult (J80)~~

- failure:

- NOS (J96.-)

- of newborn (P28.5)

R06.0 Dyspnoea

Orthopnoea

Shortness of breath

Excludes: [acute respiratory distress syndrome \(ARDS\) in adult or child \(J80\)](#)

[respiratory distress of newborn \(P22.-\)](#)

transient tachypnoea of newborn (P22.1)

R06.1 Stridor

Excludes: congenital laryngeal stridor (P28.89)

laryngismus (stridulous) (J38.5)

R06.2 Wheezing

R06.3 Periodic breathing

Cheyne-Stokes breathing

R06.4 Hyperventilation

Excludes: psychogenic hyperventilation (F45.34)

R06.5 Mouth breathing

▽ 0635

Snoring

Excludes: dry mouth NOS (R68.2)

R06.6 Hiccough

Excludes: psychogenic hiccough (F45.34)

R06.7 Sneezing

R06.8 Other and unspecified abnormalities of breathing

Apnoea NOS

Breath-holding (spells)

Choking sensation

Sighing

Excludes: apnoea (of):

- newborn (P28.4-)

- sleep:

- newborn (primary) (P28.3)

- NOS (G47.3-)

...

R09 Other symptoms and signs involving the circulatory and respiratory systems

Excludes: respiratory:
• distress (syndrome)(of):
• adult (J80)
• newborn (P22.-)
• failure:
• NOS (J96.-)
• of newborn (P28.5)

...

R09.2 Respiratory arrest
Cardiorespiratory failure

...

R68 Other general symptoms and signs

...

R68.8 Other specified general symptoms and signs

Excludes: [multiple organ failure of specified sites – code each site – see Alphabetic Index](#)

...

T71 Asphyxiation

Suffocation (by strangulation)
Systemic oxygen deficiency due to:
• low oxygen content in ambient air
• mechanical threat to breathing

Excludes: [acute respiratory distress syndrome \(ARDS\) in adult or child \(J80\)](#)
anoxia due to high altitude (T70.2)
asphyxia from:
• carbon monoxide (T58)
• inhalation of food or foreign body (T17.-)
• other gases, fumes and vapours (T59.-)
respiratory distress (syndrome) in: [of newborn \(P22.-\)](#)
• adult (J80)
• newborn (P22.-)

...

T79 Certain early complications of trauma, not elsewhere classified

Excludes: [acute respiratory distress syndrome \(ARDS\) in adult or child \(J80\)](#)
complications of surgical and medical care NEC (T80–T88)
respiratory distress: [of newborn \(P22.-\)](#)
• in newborn (P22.-)
• syndrome of adult (J80)
when occurring during or following medical procedures (T80–T88)

Alphabetic Index

Deficiency, deficient

- ...
- sulfite oxidase E72.1
- [surfactant \(lung\) \(newborn\) P22.0](#)
- thiamine, thiaminic (chloride) E51.9

...

Disease, diseased — see also Syndrome

- hyaline (diffuse) (generalised)
- ~~membrane (lung) (newborn) P22.0~~
- [membrane \(adult\) \(child\) \(lung\) J80](#)
- ~~adult J80~~
- [newborn P22.0](#)
- hydatid (see also *Echinococcus*) B67.9

...

Disorder (of) — see also Disease

- ...
- respiratory
- - function, impaired [J96.99](#) — see [Failure, failed/respiration, respiratory](#)
- ~~acute (type unspecified) J96.09~~
- ~~type I (hypoxic) J96.00~~
- ~~type II (hypercapnic) J96.01~~
- ~~chronic (type unspecified) J96.19~~
- ~~type I (hypoxic) J96.10~~
- ~~type II (hypercapnic) J96.14~~
- - psychogenic F45.34
- - system NEC J98.9
- - intraoperative or postprocedural — see [Complication\(s\)/respiratory/intraoperative or postprocedural](#)
- ~~type I (hypoxic), not specified as acute or chronic J96.90~~
- ~~type II (hypercapnic), not specified as acute or chronic J96.91~~
- right hemisphere organic affective F07.8

...

Distress

- ...
- respiratory R06.0
- ~~adult J80~~
- - newborn ([no underlying cause](#)) P22.9
- - [with](#)
- - - [respiratory distress syndrome \(RDS\) P22.0](#)
- - - [transient tachypnoea P22.1](#)
- - - specified NEC P22.8
- - [underlying cause identified — see condition](#)
- - psychogenic F45.34
- - syndrome (idiopathic) ([RDS](#)) (~~newborn~~) [P22.0](#)
- - [acute \(ARDS\) \(child\) \(non-neonate\) J80](#)
- - - adult ([ARDS](#)) J80
- - - [newborn P22.0](#)

Distribution vessel, atypical Q27.9

...

Dyspnoea (nocturnal) (paroxysmal) R06.0

- ...
- newborn P22.8
- [with respiratory distress — see Distress/respiratory/newborn](#)
- psychogenic F45.34
- uraemic N19

...

Failure, failed

...

- cardiorespiratory (~~see also Failure/heart~~) R09.2 — see [Failure/heart AND Failure/respiratory](#)

...

- heart (acute) (senile) (sudden) I50.9
 - with
 - acute pulmonary oedema — see [Failure/ventricular/left](#)
 - decompensation (*see also Failure/heart/congestive*) I50.9
 - dilatation — see [Disease/heart](#)
 - ~~--- other organ failure, code each site (see also Failure/organ/multiple)~~
 - congestive I50.0
 - hypertensive (*see also Hypertension/heart*) I11.0
 - with kidney disease (CKD stage 1–4 and unspecified) I13.0
 - with CKD stage 5 (kidney failure) I13.2
 - newborn P29.0
 - degenerative (*see also Degeneration/myocardial*) I51.5
 - high output — see [Disease/heart](#)
 - hypertensive (*see also Hypertension/heart*) I11.0
 - with kidney disease (CKD stage 1–4 and unspecified) I13.0
 - with CKD stage 5 (kidney failure) I13.2
 - in pregnancy, childbirth or puerperium O99.4
 - ischaemic I25.5
 - left (ventricular) (*see also Failure/ventricular/left*) I50.1
 - newborn P29.0
 - organic — see [Disease/heart](#)
 - rheumatic (chronic) (inactive) — see [condition/by valve/rheumatic](#)
 - right (secondary to left heart failure, conditions in I50.1) (ventricular) (*see also Failure/heart/congestive*) I50.0
 - thyrotoxic (*see also Thyrotoxicosis*) E05.-† I43.8*
 - valvular — see [Endocarditis](#)

...

- organ — see [also Failure/by site](#)

-- multiple NEC R68.8

...

- respiration, respiratory (type unspecified) J96.99
 - ~~--- with~~
 - ~~--- other organ failure, code each site (see also Failure/organ/multiple)~~
 - acute (~~type unspecified~~) J96.09
 - [hypercapnic J96.01](#)
 - [hypoxic J96.00](#)
 - type I (~~hypoxic~~) J96.00
 - type II (~~hypercapnic~~) J96.01
 - centre G93.8
 - chronic (~~type unspecified~~) J96.19
 - [hypercapnic J96.11](#)
 - [hypoxic J96.10](#)
 - type I (~~hypoxic~~) J96.10
 - type II (~~hypercapnic~~) J96.11
 - [hypercapnic NEC J96.91](#)
 - [hypoxic NEC J96.90](#)
 - newborn P28.5
 - type I (~~hypoxic~~), not specified as acute or chronic [NEC J96.90](#)
 - type II (~~hypercapnic~~), not specified as acute or chronic [NEC J96.91](#)
 - rotation

...

Syndrome ...

...

- respiratory
 - distress ([RDS](#)) (~~idiopathic~~) (~~newborn~~) P22.0
 - acute ([ARDS](#)) (child) J80
 - adult ([ARDS](#)) J80
 - newborn (~~idiopathic~~) P22.0
 - severe acute U04.9

Australian Coding Standards

TABLE OF CONTENTS

SPECIALTY STANDARDS

...

- 16. Certain conditions originating in the perinatal period**
- 1602 Neonatal complications of maternal diabetes
 - 1605 Conditions originating in the perinatal period
 - 1607 Newborn/neonate
 - 1610 Sudden infant death syndrome/apparent life threatening event
 - 1611 Observation and evaluation of newborn and infants for suspected condition not found
 - 1613 Massive aspiration syndrome
 - ~~1614 Respiratory distress syndrome/hyaline membrane disease/surfactant deficiency~~
 - 1615 Specific diseases and interventions related to the sick neonate
 - 1617 Neonatal sepsis/risk of sepsis
 - 1618 Low birth weight and gestational age

~~1614 RESPIRATORY DISTRESS SYNDROME/HYALINE MEMBRANE DISEASE/SURFACTANT DEFICIENCY~~

~~DEFINITION~~

~~Respiratory distress syndrome or hyaline membrane disease is synonymous with surfactant deficiency and should be diagnosed if the infant has:~~

- ~~• respiratory distress by four hours of age, **and**~~
- ~~• there are radiological signs of a diffuse reticulo granular ground glass appearance throughout both lung fields, **and/or**~~
- ~~• an air bronchogram extending beyond the cardiac borders, **and**~~
- ~~• the illness follows a pattern consistent with the diagnosis.~~

~~Respiratory distress syndrome is characterised by the following:~~

- ~~• cyanosis in air or a demonstrable oxygen requirement, **and**~~
- ~~• tachypnoea (respiratory rate > 60/min), **and**~~
- ~~• rib/sternal retraction, **and**~~
- ~~• grunting on expiration.~~

~~The natural history of hyaline membrane disease is:~~

- ~~• progressive deterioration from the first few hours of life to 36 hours, **and**~~
- ~~• a plateau from 36 to 60 hours, **and**~~
- ~~• resolution by 5–7 days.~~

~~Whilst this is variably modified by use of surfactant, the disease process remains recognisable.~~

~~Surfactant is administered routinely for the treatment of respiratory distress syndrome of the newborn and should not be coded (see ACS 0042 *Procedures normally not coded*).~~

~~This is a life threatening disease and frequently requires mechanical ventilatory support (see ACS 1006 *Ventilatory support*).~~

~~CLASSIFICATION~~

The code for respiratory distress syndrome of newborn (~~P22.0 Respiratory distress syndrome of newborn~~) should be reserved to classify the condition of:

- ~~hyaline membrane disease, or~~
- ~~respiratory distress syndrome, or~~
- ~~surfactant deficiency.~~

Respiratory distress unspecified

The term 'respiratory distress unspecified' should not be coded as such, as it is considered a symptom not a diagnosis. Further information regarding a definitive diagnosis should be sought from the clinician.

STANDARDS INDEX

Defibrillator

- cardiac 0936

Deficiency

~~-surfactant 1614~~

Definition (of)

- abortion 1511

...

Disease

- acute and/on chronic 0001
- Alzheimer's 0528
- atherosclerotic heart 0940; 0941
- codes that must never be assigned 0049
- coronary artery (CAD) 0940; 0941
- Crohn's
- - histology 0010
- heart
- - atherosclerotic 0940
- - ischaemic 0940
- - - specified form NEC 0940
- HIV (human immunodeficiency virus) 0102
- ~~-hyaline membrane 1614~~
- hypertensive
- - heart 0925

...

Human

- immunodeficiency virus (HIV) 0102

~~**Hyaline membrane disease 1614**~~

Hydrocephalus

- treated by ventriculostomy 0634

...

Resistance, insulin 0401

~~**Respiratory distress (syndrome), neonate 1614; 1615**~~

Respite care 2117

...

Supplementary codes for chronic conditions 0003

~~Surfactant deficiency 1614~~

Surgery

- arthroscopic 0023

...

Syndrome 0005

- acute

- - coronary 0940

- - HIV (human immunodeficiency virus) infection 0102

- congenital 0005

- coronary, acute 0940

- crush 1922

- dependence, drug and alcohol 0503

- diethylstilboestrol 1428

- Dressler's 0940

- loin pain/haematuria 1429

- massive aspiration 1613

- mitochondrial encephalopathy lactic acid stroke-like episode 0627

- Münchhausen's 0526

- myoclonus epilepsy ragged red fibre 0627

- pacemaker (cardiac) 0936

~~- respiratory distress 1614~~

- sleep hypoventilation 0635

- sudden infant death (near miss) (SIDS) 1610

- systemic inflammatory response (SIRS) 0110

- upper airway resistance 0635



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**Removal of braces (|)
Part 1
ICD-10-AM**

Introduction/Rationale:

This addenda proposal was created to address the issue of braces (|) in ICD-10-AM and ACHI Tabular Lists. This convention derives from ICD-10.

The inclusion of braces in ICD-10-AM and ACHI is problematic as the relevant terms require manual formatting in postproduction. This action adds to the postproduction burden, and increases the likelihood of error.

ACCD proposes to remove or replace all braces in ICD-10-AM and ACHI to avoid the above issues.

Reference to braces will also be deleted from the Conventions.

Formatting 'tidy up' of some sections of the Tabular List and Alphabetic Index is also proposed.

For ease of review, this addenda proposal is split into:

- Part 1 ICD-10-AM
- Part 2 ACHI

ACCD PROPOSAL

Tabular List

ICD-10-AM TABULAR LIST

INTRODUCTION

...

CONVENTIONS USED IN THE TABULAR LIST OF DISEASES

...

BRACE

A brace is used in listings of *Inclusion* terms and *Excludes* notes to indicate that neither the words that precede it nor the words after it are complete terms. Any of the terms before the brace should be qualified by one or more of the terms that follow it.

EXAMPLE 27:

Q71.6 *Obstetric damage to pelvic joints and ligaments*

Avulsion of inner symphyseal cartilage

Damage to coccyx

Traumatic separation of symphysis (pubis)

obstetric

NOS

...

A09

Other gastroenteritis and colitis of infectious and unspecified origin

▼1120

Excludes: due to bacterial, protozoal, viral and other specified infectious agents (A00–A08) noninfective (noninfectious) diarrhoea:

- neonatal (P78.3)
- NOS (K52.9)

A09.0

Other gastroenteritis and colitis of infectious origin

Catarrh, enteric or intestinal

Diarrhoea:

- acute:
 - bloody
 - haemorrhagic
 - watery
 - dysenteric
 - epidemic

Infectious:

- [diarrhoea NOS](#)
- [or septic:](#)
 - [haemorrhagic:](#)
 - [colitis NOS](#)
 - [enteritis NOS](#)
 - [gastroenteritis NOS](#)

~~Infectious:~~

- ~~[diarrhoea NOS](#)~~
 - ~~[or septic:](#)~~
 - ~~[colitis](#)~~
 - ~~[enteritis](#)~~
 - ~~[gastroenteritis](#)~~
- [haemorrhagic, NOS](#)

...

A15

Respiratory tuberculosis, bacteriologically and histologically confirmed

A15.0

Tuberculosis of lung, confirmed by sputum microscopy with or without culture

~~Tuberculosis:~~

- ~~[bronchiectasis](#)~~
 - ~~[fibrosis of lung](#)~~
 - ~~[pneumonia](#)~~
 - ~~[pneumothorax](#)~~
- [confirmed by sputum microscopy with or without culture](#)

[Tuberculosis of lung, bacteriologically confirmed, with or without culture](#)

Tuberculosis:

- [bronchiectasis, confirmed bacteriologically, with or without culture](#)
- [fibrosis of lung, confirmed bacteriologically, with or without culture](#)
- [pneumonia, confirmed bacteriologically, with or without culture](#)
- [pneumothorax, confirmed bacteriologically, with or without culture](#)

Excludes: confirmed by culture only (A15.1)

A15.1

Tuberculosis of lung, confirmed by culture only

~~Tuberculosis:~~

- ~~[bronchiectasis](#)~~
 - ~~[fibrosis of lung](#)~~
 - ~~[pneumonia](#)~~
 - ~~[pneumothorax](#)~~
- [confirmed by culture only](#)

Tuberculosis:

- [bronchiectasis, confirmed by culture only](#)
- [fibrosis of lung, confirmed by culture only](#)
- [pneumonia, confirmed by culture only](#)
- [pneumothorax, confirmed by culture only](#)

- A15.2 Tuberculosis of lung, confirmed histologically
Tuberculous:
 - bronchiectasis
 - fibrosis of lung
 - pneumonia
 - pneumothorax} confirmed histologically
Tuberculosis:
 - [bronchiectasis, confirmed histologically](#)
 - [fibrosis of lung, confirmed histologically](#)
 - [pneumonia, confirmed histologically](#)
 - [pneumothorax, confirmed histologically](#)
- A15.3 Tuberculosis of lung, confirmed by unspecified means
Tuberculous:
 - bronchiectasis
 - fibrosis of lung
 - pneumonia
 - pneumothorax} confirmed but unspecified whether bacteriologically or histologically
Tuberculosis:
 - [bronchiectasis, confirmed by unspecified means](#)
 - [fibrosis of lung, confirmed by unspecified means](#)
 - [pneumonia, confirmed by unspecified means](#)
 - [pneumothorax, confirmed by unspecified means](#)

Includes: confirmed tuberculosis diagnosis, but unspecified whether bacteriological or histological confirmation

A15.4 Tuberculosis of intrathoracic lymph nodes, confirmed bacteriologically and histologically
Tuberculosis of lymph nodes:
 - hilar
 - mediastinal
 - tracheobronchial} confirmed bacteriologically and histologically
Includes: [hilar lymph nodes](#)
[mediastinal lymph nodes](#)
[tracheobronchial lymph nodes](#)
Excludes: specified as primary (A15.7)

A15.5 Tuberculosis of larynx, trachea and bronchus, confirmed bacteriologically and histologically
Tuberculosis of:
 - bronchus
 - glottis
 - larynx
 - trachea} confirmed bacteriologically and histologically
Includes: [glottis](#)

A15.6 Tuberculous pleurisy, confirmed bacteriologically and histologically
Tuberculosis of pleura
Tuberculous empyema } confirmed bacteriologically and histologically
[Tuberculosis of pleura, confirmed bacteriologically and histologically](#)
[Tuberculous empyema, confirmed bacteriologically and histologically](#)
Excludes: in primary respiratory tuberculosis, confirmed bacteriologically and histologically (A15.7)

A15.7 Primary respiratory tuberculosis, confirmed bacteriologically and histologically

A15.8 Other respiratory tuberculosis, confirmed bacteriologically and histologically
Mediastinal tuberculosis
Nasopharyngeal tuberculosis
Tuberculosis of:
 - nose
 - sinus [any nasal]} confirmed bacteriologically and histologically
Includes: [mediastinum](#)
[nasopharynx](#)
[nose](#)
[sinus \[any nasal\]](#)

A15.9 Respiratory tuberculosis unspecified, confirmed bacteriologically and histologically

A16 Respiratory tuberculosis, not confirmed bacteriologically or histologically

A16.0 Tuberculosis of lung, bacteriologically and histologically negative

~~Tuberculosis:~~

- ~~• bronchiectasis~~
- ~~• fibrosis of lung~~ ~~bacteriologically and histologically negative~~
- ~~• pneumonia~~
- ~~• pneumothorax~~

Tuberculosis:

- [bronchiectasis, bacteriologically and histologically negative](#)
- [fibrosis of lung, bacteriologically and histologically negative](#)
- [pneumonia, bacteriologically and histologically negative](#)
- [pneumothorax, bacteriologically and histologically negative](#)

A16.1 Tuberculosis of lung, bacteriological and histological examination not done

~~Tuberculosis:~~

- ~~• bronchiectasis~~
- ~~• fibrosis of lung~~ ~~bacteriological and histological examination~~
- ~~• pneumonia~~ ~~not done~~
- ~~• pneumothorax~~

Tuberculosis:

- [bronchiectasis, bacteriological and histological examination not done](#)
- [fibrosis of lung, bacteriological and histological examination not done](#)
- [pneumonia, bacteriological and histological examination not done](#)
- [pneumothorax, bacteriological and histological examination not done](#)

A16.2 Tuberculosis of lung, without mention of bacteriological or histological confirmation

~~Tuberculosis of lung~~

~~Tuberculosis:~~

- ~~• bronchiectasis~~
- ~~• fibrosis of lung~~ ~~NOS (without mention of~~
- ~~• pneumonia~~ ~~bacteriological or histological~~
- ~~• pneumothorax~~ ~~confirmation)~~

Tuberculosis:

- [bronchiectasis NOS](#)
- [fibrosis of lung NOS](#)
- [pneumonia NOS](#)
- [pneumothorax NOS](#)

A16.3 Tuberculosis of intrathoracic lymph nodes, without mention of bacteriological or histological confirmation

~~Tuberculosis of lymph nodes:~~

- ~~• hilar~~
- ~~• intrathoracic~~ ~~NOS (without mention of~~
- ~~• mediastinal~~ ~~bacteriological or~~
- ~~• tracheobronchial~~ ~~histological confirmation)~~

Includes: [hilar lymph nodes](#)

[mediastinal lymph nodes](#)

[tracheobronchial lymph nodes](#)

Excludes: when specified as primary (A16.7)

A16.4 Tuberculosis of larynx, trachea and bronchus, without mention of bacteriological or histological confirmation

~~Tuberculosis of:~~

- ~~• bronchus~~
- ~~• glottis~~ ~~NOS (without mention of~~
- ~~• larynx~~ ~~bacteriological or histological~~
- ~~• trachea~~ ~~confirmation)~~

Includes: [glottis](#)

A16.5 Tuberculous pleurisy, without mention of bacteriological or histological confirmation

~~Tuberculosis of pleura~~
~~Tuberculous:~~
~~• empyema~~
~~• pleurisy~~

NOS (without mention of
bacteriological or histological
confirmation)

[Tuberculosis of pleura NOS](#)

[Tuberculous:](#)

[• empyema NOS](#)

[• pleurisy NOS](#)

Excludes: in primary respiratory tuberculosis (A16.7)

A16.7 Primary respiratory tuberculosis without mention of bacteriological or histological confirmation

Primary:

• respiratory tuberculosis NOS

• tuberculous complex

A16.8 Other respiratory tuberculosis, without mention of bacteriological or histological confirmation

~~Mediastinal tuberculosis~~

~~Nasopharyngeal tuberculosis~~

~~Tuberculosis of:~~

~~• nose~~

~~• sinus [any nasal]~~

NOS (without mention of
bacteriological or histological
confirmation)

Includes: [mediastinum](#)

[nasopharynx](#)

[nose](#)

[sinus \[any nasal\]](#)

A17

Tuberculosis of nervous system

...

A17.8† Other tuberculosis of nervous system

~~Tuberculoma~~ of ~~brain (G07*),~~
~~Tuberculosis~~ of ~~spinal cord (G07*)~~

[Tuberculoma:](#)

[• brain \(G07*\)](#)

[• spinal cord \(G07*\)](#)

[Tuberculosis:](#)

[• brain \(G07*\)](#)

[• spinal cord \(G07*\)](#)

[Tuberculous:](#)

• abscess of brain (G07*)

• meningoencephalitis (G05.0*)

• myelitis (G05.0*)

• polyneuropathy (G63.0*)

...

A52

Late syphilis

...

A52.3 Neurosyphilis, unspecified

[Gumma \(syphilitic\) of central nervous system NOS](#)

[Syphilis \(late\) of central nervous system NOS](#)

[Syphiloma of central nervous system NOS](#)

~~Gumma (syphilitic)~~

~~Syphilis (late)~~

~~Syphiloma~~

of central nervous system NOS

A52.7 Other symptomatic late syphilis
 Glomerular disease in syphilis† (N08.0*)
~~Gumma (syphilitic)~~ | any sites, except those classified to A52.0–A52.3
~~Late or tertiary syphilis~~
 Late syphilitic:
 • bursitis† (M73.1-*)
 • chorioretinitis† (H32.0*)
 • episcleritis† (H19.0*)
 • female pelvic inflammatory disease† (N74.2*)
 • leukoderma† (L99.8*)
 • oculopathy NEC† (H58.8*)
 • peritonitis† (K67.2*)
 Syphilis [stage unspecified] of:
 • bone† (M90.2-*)
 • liver† (K77.0*)
 • lung† (J99.8*)
 • muscle† (M63.0-*)
 • synovium† (M68.0-*)

...

A59 Trichomoniasis

Excludes: intestinal trichomoniasis (A07.8)

A59.0 Urogenital trichomoniasis
[Leukorrhoea \(vaginalis\) due to *Trichomonas \(vaginalis\)*](#)
[Prostatitis† \(N51.0*\) due to *Trichomonas \(vaginalis\)*](#)
~~Leukorrhoea (vaginalis)~~ | due to *Trichomonas (vaginalis)*
~~Prostatitis† (N51.0*)~~

...

A66 Yaws

...

A66.6 Bone and joint lesions of yaws
[Yaws \(early\) \(late\):](#)
[• ganglion](#)
[• goundou](#)
[• gumma, bone](#)
[• gummatous osteitis or periostitis](#)
[• hydrarthrosis](#)
[• osteitis](#)
[• periostitis \(hypertrophic\)](#)
~~Ganglion~~ | of yaws
~~Hydrarthrosis~~ | (early)(late)
~~Osteitis~~
~~Periostitis (hypertrophic)~~
~~Goundou~~ | of yaws (late)
~~Gumma, bone~~
~~Gummatous osteitis~~
~~or-periostitis~~

...

A67 Pinta [carate]

A67.0 Primary lesions of pinta
[Pinta \[carate\]:](#)
[• chancre \(primary\)](#)
[• papule \(primary\)](#)
~~Chancre (primary)~~ | of pinta [carate]
~~Papule (primary)~~

A67.1 Intermediate lesions of pinta
[Pinta \[carate\]](#):

- [erythematous plaques](#)
- [hyperchromic lesions](#)
- [hyperkeratosis](#)
- [pintids](#)

~~Erythematous plaques~~
~~Hyperchromic lesions~~
~~Hyperkeratosis~~
~~Pintids~~ | of pinta [carate]

A67.2 Late lesions of pinta
[Cardiovascular lesions† \(I98.1*\) of pinta \[carate\]](#)
[Pinta \[carate\] skin lesions](#):

- [achromic](#)
- [cicatrical](#)
- [dyschromic](#)

~~Cardiovascular lesions† (I98.1*)~~
~~Skin lesions:~~
~~• achromic~~
~~• cicatrical~~
~~• dyschromic~~ | of pinta [carate]

...

B00 Herpesviral [herpes simplex] infections

Excludes: anogenital herpesviral infection (A60.-)
congenital herpesviral infection (P35.2)
gammaherpesviral mononucleosis (B27.0)
herpangina (B08.5)
Kaposi's varicelliform eruption

B00.1 Herpesviral vesicular dermatitis
Herpes simplex:

- facialis
- labialis

Vesicular dermatitis [due to human \(alpha\) herpesvirus 2](#) of:

- [ear](#)
- [lip](#)

~~• ear~~ | ~~due to human (alpha) herpesvirus 2~~
~~• lip~~

...

B17 Other acute viral hepatitis

...

B17.9 Acute viral hepatitis, unspecified
Acute:

- [hepatitis NOS](#)
- [infectious hepatitis NOS](#)

~~• hepatitis~~
~~• infectious hepatitis~~ | NOS

...

C79 Secondary malignant neoplasm of other and unspecified sites

C79.9 Secondary malignant neoplasm, unspecified site

[Carcinomatosis NOS](#)

[Disseminated \(secondary\):](#)

• [cancer NOS](#)

• [malignancy NOS](#)

[Generalised \(secondary\):](#)

• [cancer NOS](#)

• [malignancy NOS](#)

[Multiple secondary cancer NOS](#)

[Sarcomatosis NOS](#)

~~Carcinomatosis (secondary)~~

~~Disseminated (secondary):~~

~~• cancer~~

~~• malignancy~~

~~Generalised (secondary):~~

~~• cancer~~

~~• malignancy~~

~~Multiple secondary cancer~~

~~Sarcomatosis (secondary)~~

NOS

...

C80 Malignant neoplasm without specification of site

C80.9 Malignant neoplasm, primary site unspecified

[Cancer NOS](#)

[Carcinoma NOS](#)

~~Cancer~~

~~Carcinoma~~

NOS

Malignancy

Malignant neoplasm, not known whether primary or secondary

Multiple cancer NOS

Excludes: multiple secondary cancer NOS (C79.9)
secondary malignant neoplasm, unspecified site (C79.9)

...

C83 Non-follicular lymphoma

▼0222

C83.0 Small cell B-cell lymphoma

[Lymphoplasmacytic lymphoma](#)

[Nodal marginal zone lymphoma](#)

[Splenic marginal zone lymphoma](#)

~~Lymphoplasmacytic~~

~~Nodal marginal zone~~

~~Splenic marginal zone~~

lymphoma

Non-leukaemic variant of B-CLL

Excludes: chronic lymphocytic leukaemia (C91.1)
mature T/NK-cell lymphomas (C84.-)
Waldenström macroglobulinaemia (C88.0-)

...

C83.3 Diffuse large B-cell lymphoma

[Diffuse large B-cell lymphoma:](#)

- [anaplastic](#)
- [CD30-positive](#)
- [centroblastic](#)
- [immunoblastic](#)
- [plasmablastic](#)
- [subtype not specified](#)
- [T-cell rich](#)

Anaplastic

CD30-positive

Centroblastic

Immunoblastic

Plasmablastic

Subtype not specified

T-cell rich

diffuse large B-cell lymphoma

Excludes: mature T/NK-cell lymphomas (C84.-)
mediastinal (thymic) large B-cell lymphoma (C85.2)

...

C86 Other specified types of T/NK-cell lymphoma

...

C86.6 Primary cutaneous CD30-positive T-cell proliferations

Lymphomatoid papulosis

Primary cutaneous:

- [anaplastic large cell lymphoma](#)
- [CD30-positive large T-cell lymphoma](#)

• ~~anaplastic large cell~~

• ~~CD30-positive large T-cell~~

lymphoma

...

C91 Lymphoid leukaemia

C91.5 Adult T-cell leukaemia/lymphoma [HTLV-1-associated]

See subdivisions

Includes: [acute variant](#)

[chronic variant](#)

[lymphomatoid variant](#)

[smouldering variant](#)

Acute

Chronic

Lymphomatoid

Smouldering

variant

...

C94 Other leukaemias of specified cell type

C94.7 Other specified leukaemias

See subdivisions

[Acute basophilic leukaemia](#)

[Aggressive NK-cell leukaemia](#)

Acute basophilic

Aggressive NK-cell

leukaemia

...

C95 Leukaemia of unspecified cell type

C95.0 Acute leukaemia of unspecified cell type

See subdivisions

Acute:

- [bilineal leukaemia](#)
- [mixed lineage leukaemia](#)
- [Biphenotypic acute leukaemia](#)

~~• bilineal~~
~~• mixed lineage~~ | leukaemia
~~Biphenotypic acute~~

Stem cell leukaemia of unclear lineage

Excludes: acute exacerbation of unspecified chronic leukaemia (C95.1-)

...

C96 Other and unspecified malignant neoplasms of lymphoid, haematopoietic and related tissue

...

C96.4 Sarcoma of dendritic cells (accessory cells)

~~Interdigitating dendritic cell~~ | sarcoma
~~Langerhans cell~~

- [Interdigitating dendritic cell sarcoma](#)
- [Langerhans-cell sarcoma](#)

Sarcoma of follicular dendritic cells

...

D33 Benign neoplasm of brain and other parts of central nervous system

D33.0 Brain, supratentorial

Cerebral ventricle

Cerebrum

[Frontal lobe](#)

[Occipital lobe](#)

[Parietal lobe](#)

[Temporal lobe](#)

~~Frontal~~
~~Occipital~~ | lobe
~~Parietal~~
~~Temporal~~

Excludes: fourth ventricle (D33.1)
nervous system (central) NOS

...

D43 Neoplasm of uncertain or unknown behaviour of brain and central nervous system

Excludes: peripheral nerves and autonomic nervous system (D48.2)

D43.0 Brain, supratentorial

Cerebral ventricle

Cerebrum

[Frontal lobe](#)

[Occipital lobe](#)

[Parietal lobe](#)

[Temporal lobe](#)

~~Frontal~~
~~Occipital~~ | lobe
~~Parietal~~
~~Temporal~~

Excludes: fourth ventricle (D43.1)

...

D47**Other neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue**

D47.0

Histiocytic and mast cell tumours of uncertain and unknown behaviour

Indolent systemic mastocytosis

[Mast cell tumour NOS](#)[Mastocytoma NOS](#)~~Mast cell tumour~~~~Mastocytoma~~

| NOS

Systematic mastocytosis, associated with clonal haematopoietic non-mast-cell disease (SM-AHNMD)

Excludes: mastocytosis (congenital) (cutaneous) (Q82.2)

...

D57**Sickle-cell disorders**

...

D57.1

Sickle-cell anaemia without crisis

Sickle-cell:

• [anaemia NOS](#)• [disease NOS](#)• [disorder NOS](#)~~• anaemia~~~~• disease~~~~• disorder~~

| NOS

...

E04**Other nontoxic goitre***Excludes:* congenital goitre: [\(E03.0\)](#)~~• diffuse~~~~• NOS~~~~• parenchymatous~~

| (E03.0)

iodine-deficiency-related goitre (E00–E02)

E04.0

Nontoxic diffuse goitre

Goitre, nontoxic:

• diffuse (colloid)

• simple

...

E05**Thyrotoxicosis [hyperthyroidism]**

Thyroid (thyrotoxic):

• [eye disease† \(H58.8*\)](#)• [heart disease† \(I43.8*\)](#)~~• eye† (H58.8*)~~~~• heart† (I43.8*)~~

| disease

Excludes: chronic thyroiditis with transient thyrotoxicosis (E06.2)

neonatal thyrotoxicosis (P72.1)

...

E07**Other disorders of thyroid**

...

E07.8

Other specified disorders of thyroid

Abnormality of thyroid-binding globulin

~~Haemorrhage~~~~Infarction~~

| of thyroid

Sick-euthyroid syndrome

[Thyroid:](#)• [haemorrhage](#)• [infarction](#)

...

E10 Type 1 diabetes mellitus

⊛E10.0 Type 1 diabetes mellitus with hyperosmolarity

⊛E10.01 Type 1 diabetes mellitus with hyperosmolarity without nonketotic hyperglycaemic-hyperosmolar coma (NKHHC)

Type 1 diabetes mellitus with:

• [hypernatraemia NOS](#)

• [hyperosmolarity NOS](#)

• ~~hypernatraemia~~ NOS

• ~~hyperosmolarity~~

⊛E10.02 Type 1 diabetes mellitus with hyperosmolarity with coma

...

E11 Type 2 diabetes mellitus

E11.0 Type 2 diabetes mellitus with hyperosmolarity

⊛E11.01 Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycaemic-hyperosmolar coma [NKHHC]

Type 2 diabetes mellitus with:

• [hypernatraemia NOS](#)

• [hyperosmolarity NOS](#)

• ~~hypernatraemia~~ NOS

• ~~hyperosmolarity~~

⊛E11.02 Type 2 diabetes mellitus with hyperosmolarity with coma

...

E13 Other specified diabetes mellitus

E13.0 Other specified diabetes mellitus with hyperosmolarity

⊛E13.01 Other specified diabetes mellitus with hyperosmolarity, without nonketotic hyperglycaemic-hyperosmolar coma [NKHHC]

Diabetes mellitus NEC with:

• [hypernatraemia NOS](#)

• [hyperosmolarity NOS](#)

• ~~hypernatraemia~~ NOS

• ~~hyperosmolarity~~

⊛E13.02 Other specified diabetes mellitus with hyperosmolarity, with coma

...

E14 Unspecified diabetes mellitus

E14.0 Unspecified diabetes mellitus with hyperosmolarity

⊛E14.01 Unspecified diabetes mellitus with hyperosmolarity, without nonketotic hyperglycaemic-hyperosmolar coma [NKHHC]

Diabetes mellitus NOS with:

• [hypernatraemia NOS](#)

• [hyperosmolarity NOS](#)

• ~~hypernatraemia~~ NOS

• ~~hyperosmolarity~~

⊛E14.02 Unspecified diabetes mellitus with hyperosmolarity, with coma

...

E50 Vitamin A deficiency

...

E50.8 Other manifestations of vitamin A deficiency

[Follicular keratosis due to vitamin A deficiency† \(L86*\)](#)

[Xeroderma due to vitamin A deficiency† \(L86*\)](#)

Follicular keratosis | due to vitamin A
Xeroderma | deficiency† (L86*)

...

F32 Depressive episode

F32.2 Severe depressive episode without psychotic symptoms

See subdivisions

An episode of depression in which several of the above symptoms are marked and distressing, typically loss of self-esteem and ideas of worthlessness or guilt. Suicidal thoughts and acts are common and a number of 'somatic' symptoms are usually present.

[Agitated depression, single episode without psychotic symptoms](#)

[Major depression, single episode without psychotic symptoms](#)

[Vital depression, single episode without psychotic symptoms](#)

Agitated depression | single episode without
Major depression | psychotic symptoms
Vital depression

...

F51 Nonorganic sleep disorders

F51.2 Nonorganic disorder of the sleep-wake schedule

A lack of synchrony between the sleep-wake schedule and the desired sleep-wake schedule for the individual's environment, resulting in a complaint of either insomnia or hypersomnia.

Psychogenic inversion of:

• [circadian rhythm](#)

• [nyctohemeral rhythm](#)

• [sleep rhythm](#)

• circadian | rhythm
• nyctohemeral
• sleep

Excludes: disorders of the sleep-wake schedule (organic) (G47.2)

...

F53 Mental and behavioural disorders associated with the puerperium, not elsewhere classified

...

F53.8 Other mental and behavioural disorders associated with the puerperium, not elsewhere classified

Postpartum:

• [blues NOS](#)

• [dysphoria NOS](#)

• [mood disturbance NOS](#)

• [sadness NOS](#)

• blues | NOS
• dysphoria
• mood disturbance
• sadness

F53.9 Puerperal mental disorder, unspecified

...

G00 Bacterial meningitis, not elsewhere classified

Includes: bacterial:

- [arachnoiditis](#)
- [leptomeningitis](#)
- [meningitis](#)
- [pachymeningitis](#)

~~Includes:~~ ~~arachnoiditis~~
~~leptomeningitis~~
~~meningitis~~
~~pachymeningitis~~ | bacterial

Excludes: bacterial:

- meningoencephalitis (G04.2)
- meningomyelitis (G04.2)

...

G03 Meningitis due to other and unspecified causes

Includes: [arachnoiditis due to other and unspecified causes](#)
[leptomeningitis due to other and unspecified causes](#)
[meningitis due to other and unspecified causes](#)
[pachymeningitis due to other and unspecified causes](#)

~~Includes:~~ ~~arachnoiditis~~
~~leptomeningitis~~
~~meningitis~~
~~pachymeningitis~~ | due to other and unspecified causes

Excludes: meningoencephalitis (G04.-)
meningomyelitis (G04.-)

...

G04 Encephalitis, myelitis and encephalomyelitis

G04.0 Acute disseminated encephalitis

Postimmunisation:

- [encephalitis](#)
- [encephalomyelitis](#)

~~Encephalitis~~
~~Encephalomyelitis~~ | postimmunisation

Use additional external cause code (Chapter 20) to identify vaccine.

...

G08 Intracranial and intraspinal phlebitis and thrombophlebitis

Septic:

- ~~embolism~~
 - ~~endophlebitis~~
 - ~~phlebitis~~
 - ~~thrombophlebitis~~
 - ~~thrombosis~~
- | of intracranial or intraspinal venous sinuses and veins

Includes: septic:

- [embolism](#)
- [endophlebitis](#)
- [phlebitis](#)
- [thrombophlebitis](#)
- [thrombosis](#)

Excludes: intracranial phlebitis and thrombophlebitis:

- complicating abortion or ectopic or molar pregnancy (O00–O07, O08.7)
- of nonpyogenic origin (I67.6)
- nonpyogenic intraspinal phlebitis and thrombophlebitis (G95.1)

...

NERVE, NERVE ROOT AND PLEXUS DISORDERS (G50–G59)

Excludes: current traumatic nerve, nerve root and plexus disorders — see nerve injury by body region

[neuralgia NOS \(M79.2-\)](#)

[neuritis NOS \(M79.2-\)](#)

~~neuralgia~~ | ~~neuritis~~ | ~~NOS (M79.2-)~~

radiculitis NOS (M54.1-)

...

G54 Nerve root and plexus disorders

Excludes: current traumatic nerve root and plexus disorders — see nerve injury by body region

intervertebral disc disorders (M50–M51)

neuralgia or neuritis NOS (M79.2-)

neuritis or radiculitis:

• [brachial NOS \(M54.1-\)](#)

• [lumbar NOS \(M54.1-\)](#)

• [lumbosacral NOS \(M54.1-\)](#)

• [thoracic NOS \(M54.1-\)](#)

[radiculitis NOS \(M54.1-\)](#)

[radiculopathy NOS \(M54.1-\)](#)

~~• brachial NOS~~

~~• lumbar NOS~~

~~• lumbosacral NOS~~ | ~~(M54.1-)~~

~~• thoracic NOS~~

~~radiculitis NOS~~

~~radiculopathy NOS~~

spondylosis (M47.-)

...

G83.8 Other specified paralytic syndromes

...

☛G83.81 Facial paralysis due to cerebrovascular accident

▼0604

Facial:

• [droop due to cerebrovascular accident](#)

• [hemiplegia due to cerebrovascular accident](#)

• [weakness due to cerebrovascular accident](#)

~~• droop~~

~~• hemiplegia~~ | ~~due to cerebrovascular accident~~

~~• weakness~~

Excludes: Bell's palsy (G51.0)

facial paralysis due to:

• birth trauma (P11.3)

• facial nerve disorder (G51.0)

...

G93 Other disorders of brain

G93.0 Cerebral cysts

Arachnoid cyst

Porencephalic cyst, acquired

Excludes: [acquired:](#)

• [periventricular cysts of newborn \(P91.1\)](#)

• [porencephalic cysts of newborn \(P91.1\)](#)

~~— acquired periventricular~~ | ~~cysts of newborn (P91.1)~~

~~acquired porencephalic~~

congenital cerebral cysts (Q04.6-)

...

G93.5 Compression of brain
[Compression of brain \(stem\)](#)
[Herniation of brain \(stem\)](#)
~~Compression~~ | ~~Herniation~~ of brain (stem)
Excludes: traumatic compression of brain:
 • diffuse (S06.28)
 • focal (S06.38)
 • NOS (S06.28)

...

H00 Hordeolum and chalazion

H00.0 Hordeolum and other deep inflammation of eyelid
 ▼0742

~~Abcess~~ | ~~Furuncle~~ of eyelid
[Eyelid:](#)
 • [abscess](#)
 • [furuncle](#)
 Stye

...

H01 Other inflammation of eyelid

H01.1 Noninfectious dermatoses of eyelid

Dermatitis [of eyelid](#):
 • [allergic](#)
 • [contact](#)
 • [eczematous](#)
[Discoid lupus erythematosus of eyelid](#)
[Xeroderma of eyelid](#)
~~• allergic~~
~~• contact~~
~~• eczematous~~ | ~~Discoid lupus erythematosus~~ | ~~Xeroderma~~ of eyelid

...

H02 Other disorders of eyelid

H02.7 Other degenerative disorders of eyelid and periocular area

[Chloasma of eyelid](#)
[Madarosis of eyelid](#)
[Vitiligo of eyelid](#)
~~Chloasma~~
~~Madarosis~~ | ~~Vitiligo~~ of eyelid

...

H04 Disorders of lacrimal system

...

H04.3 Acute and unspecified inflammation of lacrimal passages

[Acute, subacute or unspecified:](#)
 • [dacryocystitis \(phlegmonous\)](#)
 • [dacropericystitis](#)
 • [lacrimal canaliculitis](#)
~~Dacryocystitis (phlegmonous)~~
~~Dacryopericystitis~~ | ~~Lacrimal canaliculitis~~ | acute, subacute or unspecified
Excludes: neonatal dacryocystitis (P39.1)

H04.4 Chronic inflammation of lacrimal passages

Chronic:

• [dacryocystitis](#)

• lacrimal:

• [canaliculitis](#)

• [mucocele](#)

~~Dacryocystitis~~

~~Lacrimal:~~

~~• canaliculitis~~

~~• mucocele~~

chronic

...

H05

Disorders of orbit

H05.0

Acute inflammation of orbit

▼0742

Orbital:

• [abscess](#)

• [cellulitis](#)

• [osteomyelitis](#)

• [periostitis](#)

• [tenonitis](#)

~~Abscess~~

~~Cellulitis~~

~~Osteomyelitis~~

~~Periostitis~~

~~Tenonitis~~

of orbit

H05.2

Exophthalmic conditions

Displacement of globe (lateral) NOS

Orbital:

• [haemorrhage](#)

• [oedema](#)

~~Haemorrhage~~

~~Oedema~~

of orbit

H05.3

Deformity of orbit

Orbital:

• [atrophy](#)

• [exostosis](#)

~~Atrophy~~

~~Exostosis~~

of orbit

...

H18

Other disorders of cornea

...

H18.3

Changes in corneal membranes

[Fold in Descemet's membrane](#)

[Rupture in Descemet's membrane](#)

~~Fold~~

~~Rupture~~

in Descemet's membrane

H18.8

Other specified disorders of cornea

~~Anaesthesia~~

~~Hypaesthesia~~

~~Recurrent erosion~~

Contact lens intolerance NOS

Corneal:

• [anaesthesia](#)

• [hypaesthesia](#)

[Recurrent corneal erosion](#)

of cornea

...

H30 Chorioretinal inflammation

...

H30.9 Chorioretinal inflammation, unspecified

- [Chorioretinitis NOS](#)
- [Choroiditis NOS](#)
- [Retinitis NOS](#)
- [Retinochoroiditis NOS](#)

| | |
|--|-----|
| Chorioretinitis
Choroiditis
Retinitis
Retinochoroiditis | NOS |
|--|-----|

...

H31 Other disorders of choroid

H31.1 Choroidal degeneration

- [Choroidal:](#)
- [atrophy](#)
- [sclerosis](#)

| | |
|--|------------|
| Atrophy
Sclerosis | of choroid |
|--|------------|

Excludes: angiod streaks (H35.3)

...

H35 Other retinal disorders

...

H35.3 Degeneration of macula and posterior pole

| | |
|---|-----------|
| Angiod streaks
Cyst
Drusen (degenerative)
Hole
Puckering | of macula |
|---|-----------|

- [Angiod streaks of macula](#)
- [Drusen \(degenerative\) macula](#)

Kuhnt-Junius degeneration

[Macular:](#)

- [cyst](#)
- [hole](#)
- [puckering](#)

Senile macular degeneration (atrophic) (exudative)

Toxic maculopathy

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

...

H50 Other strabismus

H50.0 Convergent concomitant strabismus

Esotropia (alternating)(monocular), ~~except intermittent~~

[Excludes: intermittent esotropia \(H50.3\)](#)

H50.1 Divergent concomitant strabismus

Exotropia (alternating)(monocular), ~~except intermittent~~

[Excludes: intermittent extropia \(H50.3\)](#)

H50.2 Vertical strabismus

Hypertropia

Hypotropia

H50.3 Intermittent heterotropia
Intermittent:
[• esotropia \(alternating\) \(monocular\)](#)
[• exotropia \(alternating\) \(monocular\)](#)
~~• esotropia~~ | ~~(alternating)(monocular)~~
~~• exotropia~~

...

H52 Disorders of refraction and accommodation

...

H52.5 Disorders of accommodation
Internal ophthalmoplegia (complete),(total)
[Paresis of accommodation](#)
[Spasm of accommodation](#)
~~Paresis~~ | ~~of accommodation~~
~~Spasm~~

H52.6 Other disorders of refraction

...

H59 Intraoperative and postprocedural disorders of eye and adnexa, not elsewhere classified

☛H59.1 Accidental puncture and laceration of eye and adnexa during a procedure

...

☛H59.13 Accidental puncture and laceration of capsule of lens during a procedure
[Capsular breach or tear NOS, during a procedure](#)
[Dropped nucleus due to capsular breach or tear during a procedure](#)
~~Capsular breach or tear NOS~~ | ~~during a procedure~~
~~Dropped nucleus due to capsular~~
~~breach or tear~~

...

H60 Otitis externa

H60.0 Abscess of external ear
[Auricle or external auditory canal:](#)
[• boil](#)
[• carbuncle](#)
[• furuncle](#)
~~Boil~~ | ~~of auricle or external auditory canal~~
~~Carbuncle~~
~~Furuncle~~

...

H68 Eustachian salpingitis and obstruction

...

H68.1 Obstruction of Eustachian tube
[Eustachian tube:](#)
[• compression](#)
[• stenosis](#)
[• stricture](#)
~~Compression~~ | ~~of Eustachian tube~~
~~Stenosis~~
~~Stricture~~

...

H70 Mastoiditis and related conditions

H70.0 Acute mastoiditis
[Mastoid:](#)
• [abscess](#)
• [empyema](#)
~~Abscess~~ | ~~of mastoid~~
~~Empyema~~

H70.1 Chronic mastoiditis
[Mastoid:](#)
• [caries](#)
• [fistula](#)
~~Caries~~ | ~~of mastoid~~
~~Fistula~~

...

H72 Perforation of tympanic membrane

...

H72.8 Other perforations of tympanic membrane
[Tympanic membrane Perforation\(s\):](#)
• [multiple](#)
• [total](#)
~~multiple~~ | ~~of tympanic membrane~~
~~total~~

...

H74 Other disorders of middle ear and mastoid

...

H74.3 Other acquired abnormalities of ear ossicles
[Ear ossicles:](#)
• [ankylosis](#)
• [partial loss](#)
~~Ankylosis~~ | ~~of ear ossicles~~
~~Partial loss~~

...

H83 Other diseases of inner ear

...

H83.2 Labyrinthine dysfunction
[Labyrinth:](#)
• [hypersensitivity](#)
• [hypofunction](#)
• [loss of function](#)
~~Hypersensitivity~~ | ~~of labyrinth~~
~~Hypofunction~~
~~Loss of function~~

...

H90 Conductive and sensorineural hearing loss

...

H90.5 Sensorineural hearing loss, unspecified
[Central hearing loss NOS](#)
Congenital deafness NOS
~~Hearing loss:~~
[Neural hearing loss NOS](#)
[Perceptive hearing loss NOS](#)
Sensorineural deafness NOS
[Sensory hearing loss NOS](#)
~~central~~ | ~~NOS~~

~~•neural~~
~~•perceptive~~
~~•sensory~~

...

I21 Acute myocardial infarction

...

I21.3 Acute transmural myocardial infarction of unspecified site
[ST elevation myocardial infarction \[STEMI\] NOS](#)
[Transmural myocardial infarction NOS](#)
~~ST elevation myocardial infarction [STEMI]~~ | NOS
~~Transmural myocardial infarction~~

...

I24 Other acute ischaemic heart diseases

I24.0 Coronary thrombosis not resulting in myocardial infarction
▼0941

Coronary (artery)(vein):
[• embolism, not resulting in myocardial infarction](#)
[• occlusion, not resulting in myocardial infarction](#)
[• thromboembolism, not resulting in myocardial infarction](#)
~~• embolism~~ | ~~not resulting in myocardial infarction~~
~~• occlusion~~
~~• thromboembolism~~

Excludes: specified as chronic or with a stated duration of more than 4 weeks (more than 28 days) from onset (I25.8)

...

I28 Other diseases of pulmonary vessels

...

I28.8 Other specified diseases of pulmonary vessels
[Pulmonary vessel:](#)
[• rupture](#)
[• stenosis](#)
[• stricture](#)
~~Rupture~~ | ~~of pulmonary vessel~~
~~Stenosis~~
~~Stricture~~

...

I33 Acute and subacute endocarditis

...

I33.9 Acute endocarditis, unspecified
[Acute or subacute:](#)
[• endocarditis](#)
[• myoendocarditis](#)
[• periendocarditis](#)
~~Endocarditis~~ | ~~acute or subacute~~
~~Myoendocarditis~~
~~Periendocarditis~~

...

I34 Nonrheumatic mitral valve disorders

Excludes: mitral (valve):
• disease (I05.9)
• failure (I05.8)
• stenosis (I05.0)
when of unspecified cause but with mention of:
• diseases of aortic valve (I08.0)
• mitral stenosis or obstruction (I05.0)
when specified as:
• congenital (Q23.2–Q23.9)
• rheumatic (I05.-)

I34.0 Mitral (valve) insufficiency
Mitral (valve):
• [incompetence NOS or of specified cause NEC](#)
• [regurgitation NOS or of specified cause NEC](#)
• ~~incompetence~~ | ~~NOS or of specified cause,~~
• ~~regurgitation~~ | ~~except rheumatic~~

...

I35 Nonrheumatic aortic valve disorders

Excludes: hypertrophic subaortic stenosis (I42.1)
when of unspecified cause but with mention of diseases of mitral valve (I08.0)
when specified as:
• congenital (Q23.0–Q23.1, Q23.4–Q23.9)
• rheumatic (I06.-)

I35.0 Aortic (valve) stenosis

I35.1 Aortic (valve) insufficiency
Aortic (valve):
• [incompetence NOS or of specified cause NEC](#)
• [regurgitation NOS or of specified cause NEC](#)
• ~~incompetence~~ | ~~NOS or of specified cause,~~
• ~~regurgitation~~ | ~~except rheumatic~~

...

I36 Nonrheumatic tricuspid valve disorders

Excludes: when of unspecified cause (I07.-)
when specified as:
• congenital (Q22.4-, Q22.8-, Q22.9)
• rheumatic (I07.-)

I36.0 Nonrheumatic tricuspid (valve) stenosis

I36.1 Nonrheumatic tricuspid (valve) insufficiency
Tricuspid (valve):
• [incompetence, nonrheumatic or of specified cause NEC](#)
• [regurgitation, nonrheumatic or of specified cause NEC](#)
• ~~incompetence~~ | ~~of specified cause, except~~
• ~~regurgitation~~ | ~~rheumatic~~

...

I37 Pulmonary valve disorders

Excludes when specified as:
• congenital (Q22.1, Q22.2, Q22.3-)
• rheumatic (I09.8)

I37.0 Pulmonary valve stenosis

I37.1 Pulmonary valve insufficiency
Pulmonary valve:
• [incompetence NOS or of specified cause NEC](#)
• [regurgitation NOS or of specified cause NEC](#)
• ~~incompetence~~ |

~~• regurgitation~~ | NOS or of specified cause,
except rheumatic

...

I38

Endocarditis, valve unspecified

Endocarditis (chronic) NOS

Valvular:

- [incompetence NOS](#)
- [insufficiency NOS](#)
- [regurgitation NOS](#)
- [stenosis NOS](#)

[Valvulitis \(chronic\) NOS](#)

~~• incompetence~~
~~• insufficiency~~
~~• regurgitation~~
~~• stenosis~~
~~Valvulitis (chronic)~~ | of unspecified valve | NOS or of specified cause,
except rheumatic or congenital

Excludes: congenital:

- insufficiency of cardiac valve NOS (Q24.87)
 - stenosis of cardiac valve NOS (Q24.87)
- endocardial fibroelastosis (I42.4)
when specified as rheumatic (I09.1)

...

I50

Heart failure

I50.1

▼0920

Left ventricular failure

Cardiac asthma

Left heart failure

[Oedema of lung, with mention of heart disease or heart failure](#)

[Pulmonary oedema, with mention of heart disease or heart failure](#)

~~Oedema of lung~~
~~Pulmonary oedema~~ | with mention of heart
disease or heart failure

...

I60

Subarachnoid haemorrhage

I60.7

Subarachnoid haemorrhage from intracranial artery, unspecified

Ruptured (congenital) berry aneurysm NOS

Subarachnoid haemorrhage from:

- [cerebral artery NOS](#)
- [communicating artery NOS](#)

~~• cerebral~~
~~• communicating~~ | artery NOS

...

I65

Occlusion and stenosis of precerebral arteries, not resulting in cerebral infarction

[Precerebral artery:](#)

- [embolism NEC](#)
- [narrowing NEC](#)
- [obstruction \(complete\) \(partial\) NEC](#)
- [thrombosis NEC](#)

Includes: basilar artery
carotid artery
vertebral artery

~~Includes: embolism~~
~~narrowing~~
~~obstruction (complete) (partial)~~
~~thrombosis~~ | of basilar, carotid or vertebral
arteries, not resulting in cerebral
infarction

Excludes: when causing cerebral infarction (I63.-)

I66**Occlusion and stenosis of cerebral arteries, not resulting in cerebral infarction**

Cerebral artery:

- embolism NEC
- narrowing NEC
- obstruction (complete) (partial) NEC
- thrombosis NEC

Includes: anterior cerebral artery
cerebellar artery
middle cerebral artery
posterior cerebral artery

~~**Includes:** embolism
narrowing
obstruction (complete) (partial)
thrombosis~~

~~of middle, anterior and posterior cerebral
arteries, and cerebellar arteries, not resulting
in cerebral infarction~~

Excludes: when causing cerebral infarction (I63.-)

...

I71**Aortic aneurysm and dissection**

...

I71.9

Aortic aneurysm of unspecified site, without mention of rupture

Aortic:

- aneurysm NOS
- dilatation NOS
- Hyaline necrosis of aorta NOS

~~Aneurysm~~

~~Dilatation~~

~~Hyaline necrosis~~

~~of aorta NOS~~

...

I77**Other disorders of arteries and arterioles**

...

I77.8

Other specified disorders of arteries and arterioles

Erosion of artery

Ulcer of artery

~~Erosion~~

~~Ulcer~~

~~of artery~~

...

I80**Phlebitis and thrombophlebitis**

...

I80.2**Phlebitis and thrombophlebitis of other deep vessels of lower extremities**

Use additional external cause code (X51) to identify DVT due to travel.

☛I80.20

Phlebitis and thrombophlebitis of deep vessels of lower extremities, not elsewhere classified
Deep vein thrombosis NOS

Includes: gastrocnemius vein

peroneal vein

soleal vein

~~**Includes:** gastrocnemius~~

~~peroneal~~

~~soleal~~

~~vein~~

...

180.4 Phlebitis and thrombophlebitis of vessels of upper extremities

...

180.41 Phlebitis and thrombophlebitis of superficial vessels of upper extremities

Includes: [antecubital vein](#)
[basilic vein](#)
[cephalic vein](#)

~~*Includes:* antecubital
basilic
cephalic~~ | vein

180.42 Phlebitis and thrombophlebitis of deep vessels of upper extremities

Includes: [brachial vein](#)
[radial vein](#)
[ulnar vein](#)

~~*Includes:* brachial
radial
ulnar~~ | vein

...

183 Varicose veins of lower extremities

...

183.9 Varicose veins of lower extremities without ulcer or inflammation

[Phlebectasia of lower extremity \[any part\] or of unspecified site](#)
[Varicose veins of lower extremity \[any part\] or of unspecified site](#)
[Varix of lower extremity \[any part\] or of unspecified site](#)

~~Phlebectasia
Varicose veins
Varix~~ | ~~of lower extremity [any part]
or of unspecified site~~

...

188 Nonspecific lymphadenitis

Excludes: acute lymphadenitis, except mesenteric (L04.-)
enlarged lymph nodes NOS (R59.-)

188.0 Nonspecific mesenteric lymphadenitis
Mesenteric lymphadenitis (acute)(chronic)

188.1 Chronic lymphadenitis, except mesenteric

Chronic:
• [adenitis NEC](#)
• [lymphadenitis NEC](#)

~~Adenitis
Lymphadenitis~~ | ~~chronic, any lymph node except
mesenteric~~

Excludes: [mesenteric \(188.0\)](#)

188.8 Other nonspecific lymphadenitis

188.9 Nonspecific lymphadenitis, unspecified
Lymphadenitis NOS

...

I97**Intraoperative and postprocedural disorders of circulatory system, not elsewhere classified**

...

I97.2

Postmastectomy lymphoedema syndrome

[Elephantiasis due to mastectomy](#)[Obliteration of lymphatic vessels due to mastectomy](#)~~Elephantiasis~~~~Obliteration of lymphatic vessels~~| ~~due to mastectomy~~

...

J01**Acute sinusitis**[Acute sinus:](#)• [abscess](#)• [empyema](#)• [infection](#)• [inflammation](#)• [suppuration](#)[Includes:](#) [accessory sinus](#)[nasal sinus](#)**Includes:** ~~abscess~~~~empyema~~~~infection~~~~inflammation~~~~suppuration~~| acute, of sinus
(accessory)(nasal)*Use additional code (B95–B97) to identify infectious agent.***Excludes:** sinusitis, chronic or NOS (J32.-)

...

J09**Influenza due to identified zoonotic or pandemic influenza virus**

▽ 1012

Influenza caused by influenza virus strains of special epidemiological importance with an animal-human or inter-human transmission.

Includes: influenza A/H5N1 epidemic [avian influenza]*Use additional code to identify pneumonia or other manifestations.**Code also manifestation(s), if known.***Excludes:** *Haemophilus influenzae:*

• infection NOS (A49.2)

• meningitis (G00.0)

• pneumonia (J14)

influenza due to other identified (seasonal) influenza virus (J10.-)

...

J10**Influenza due to other identified influenza virus**

▽ 1012

...

J10.1

Influenza with other respiratory manifestations, other influenza virus identified

[Influenza due to other identified influenza virus](#)[Influenzal:](#)• [acute upper respiratory infection, due to other identified influenza virus](#)• [laryngitis, due to other identified influenza virus](#)• [pharyngitis, due to other identified influenza virus](#)• [pleural effusion, due to other identified influenza virus](#)~~Influenza~~~~Influenzal:~~~~• acute upper~~~~respiratory infection~~~~• laryngitis~~~~• pharyngitis~~| other influenza virus
identified

J10.8 ~~• pleural effusion~~ |
 Influenza with other manifestations, other influenza virus identified
Influenzal:
 • [encephalopathy, due to other identified influenza virus](#)
 • [gastroenteritis, due to other identified influenza virus](#)
 • [myocarditis \(acute\), due to other identified influenza virus](#)
~~Encephalopathy due to influenza~~
~~Influenzal:~~
~~• gastroenteritis~~
~~• myocarditis (acute)~~ | other influenza virus identified

...

J11

Influenza, virus not identified

Influenza, not stated as due to specific virus
Viral influenza, not stated as due to specific virus

~~Includes: influenza~~
~~viral influenza~~ | specific virus not stated to have been identified

Excludes: *Haemophilus influenzae* [*H. influenzae*]:

- infection NOS (A49.2)
- meningitis (G00.0)
- pneumonia (J14)

J11.0 Influenza with pneumonia, virus not identified
 Influenzal (broncho)pneumonia, unspecified or specific virus not identified

J11.1 Influenza with other respiratory manifestations, virus not identified
 Influenza NOS

Influenzal:
 • [acute upper respiratory infection, unspecified or specific virus not identified](#)
 • [laryngitis, unspecified or specific virus not identified](#)
 • [pharyngitis, unspecified or specific virus not identified](#)
 • [pleural effusion, unspecified or specific virus not identified](#)

~~Influenzal:~~
~~• acute upper respiratory infection~~
~~• laryngitis~~
~~• pharyngitis~~
~~• pleural effusion~~ | unspecified or specific virus not identified

J11.8 Influenza with other manifestations, virus not identified

Influenzal:
 • [encephalopathy, unspecified or specific virus not identified](#)
 • [gastroenteritis, unspecified or specific virus not identified](#)
 • [myocarditis \(acute\), unspecified or specific virus not identified](#)

~~Encephalopathy due to influenza~~
~~Influenzal:~~
~~• gastroenteritis~~
~~• myocarditis (acute)~~ | unspecified or specific virus not identified

...

J32

Chronic sinusitis

Sinus (chronic):
 • [abscess](#)
 • [empyema](#)
 • [infection](#)
 • [inflammation](#)
 • [suppuration](#)

Includes: [accessory sinus](#)
[nasal sinus](#)

~~Includes: abscess~~
~~empyema~~
~~infection~~
~~suppuration~~ | (chronic) of sinus (accessory)(nasal)

Use additional code (B95–B97) to identify infectious agent.

Excludes: acute sinusitis (J01.-)

...

J34 Other disorders of nose and nasal sinuses

Excludes: varicose ulcer of nasal septum (I86.8)

J34.0 Abscess, furuncle and carbuncle of nose

Nasal (septum):

• cellulitis

• necrosis

• ulceration

Cellulitis

Necrosis

Ulceration

of nose (septum)

...

J38 Diseases of vocal cords and larynx, not elsewhere classified

...

J38.3 Other diseases of vocal cords

Vocal cord(s):

• abscess

• cellulitis

• granuloma

• leukokeratosis

• leukoplakia

Abscess

Cellulitis

Granuloma

Leukokeratosis

Leukoplakia

of vocal cord(s)

...

J38.7 Other diseases of larynx

Laryngeal:

• abscess

• cellulitis

• disease NOS

• necrosis

• pachyderma

• perichondritis

• ulcer

Abscess

Cellulitis

Disease NOS

Necrosis

Pachyderma

Perichondritis

Ulcer

of larynx

...

J39 Other diseases of upper respiratory tract

...

J39.2 Other diseases of pharynx

Pharyngeal:

• cyst

• oedema

Cyst

Oedema

of pharynx or nasopharynx

Includes: nasopharynx

Excludes: pharyngitis:

• chronic (J31.2)

• ulcerative (J02.9)

J68**Respiratory conditions due to inhalation of chemicals, gases, fumes and vapours**

...

J68.4

Chronic respiratory conditions due to chemicals, gases, fumes and vapours

[Emphysema \(diffuse\) \(chronic\) due to inhalation of chemicals, gases, fumes and vapours](#)[Obliterative bronchiolitis \(chronic\) \(subacute\) due to inhalation of chemicals, gases, fumes and vapours](#)[Pulmonary fibrosis \(chronic\) due to inhalation of chemicals, gases, fumes and vapours](#)~~Emphysema (diffuse)(chronic)~~~~Obliterative bronchiolitis (chronic)(subacute)~~~~Pulmonary fibrosis (chronic)~~| ~~due to inhalation of chemicals, gases,
fumes and vapours~~

...

J98**Other respiratory disorders**

J98.0

Diseases of bronchus, not elsewhere classified

[Bronchial:](#)[• calcification](#)[• stenosis](#)[• ulcer](#)

Broncholithiasis

~~Calcification~~~~Stenosis~~~~Ulcer~~| ~~of bronchus~~

Tracheobronchial:

• collapse

• dyskinesia

...

J98.5

Diseases of mediastinum, not elsewhere classified

~~Fibrosis~~~~Hernia~~~~Retraction~~| ~~of mediastinum~~[Mediastinal:](#)[• fibrosis](#)[• hernia](#)[• retraction](#)

Mediastinitis

Thoracic adhesions

Excludes: abscess of mediastinum (J85.3)

adhesions:

• lung (J98.4)

• pericardium (I31.0)

• pleura (J94.8)

...

K00**Disorders of tooth development and eruption****Excludes:** embedded and impacted teeth (K01.-)

...

K00.2

Abnormalities of size and form of teeth

~~Concrescence~~~~Fusion~~~~Gemination~~| ~~of teeth~~[Concrescence of teeth](#)

Dens:

• evaginatus

• in dente

• invaginatus

Enamel pearls

[Fusion of teeth](#)

[Gmination of teeth](#)

Macrodontia

...

K00.5 Hereditary disturbances in tooth structure, not elsewhere classified

~~Amelogenesis~~
~~Dentinogenesis~~ | imperfecta
~~Odontogenesis~~

[Amelogenesis imperfecta](#)

Dentinal dysplasia

[Dentinogenesis imperfecta](#)

[Odontogenesis imperfecta](#)

Shell teeth

K00.6 Disturbances in tooth eruption

Dentia praecox

~~Natal~~
~~Neonatal~~ | tooth

[Natal tooth](#)

[Neonatal tooth](#)

Premature:

- eruption of tooth
 - shedding of primary [deciduous] tooth
- Retained [persistent] primary tooth

...

K03 Other diseases of hard tissues of teeth

K03.0 Excessive attrition of teeth

[Worn \(approximal\) \(occlusal\) teeth](#)

~~Wear:~~

~~▲ approximal~~
~~▲ occlusal~~ | of teeth

K03.1 Abrasion of teeth

[Wedge defect of teeth NOS](#)

Includes: due to dentifrice

[habitual](#)

[occupational](#)

[ritual](#)

[traditional](#)

~~Abrasion:~~

~~▲ dentifrice~~

~~▲ habitual~~

~~▲ occupational~~

~~▲ ritual~~

~~▲ traditional~~

~~Wedge defect NOS~~

of teeth

...

K04 Diseases of pulp and periapical tissues

...

K04.6 Periapical abscess with sinus

[Dental abscess with sinus](#)

[Dentoalveolar abscess with sinus](#)

~~Dental~~
~~Dentoalveolar~~ | abscess with sinus

K04.7 Periapical abscess without sinus

[Dental abscess NOS](#)

[Dentoalveolar abscess NOS](#)
[Periapical abscess NOS](#)
~~Dental~~
~~Dentoalveolar~~ | abscess NOS
~~Periapical~~

...

K07 Dentofacial anomalies [including malocclusion]

K07.0 Major anomalies of jaw size

...

⊕K07.09 Other major anomalies of jaw size

~~Hyperplasia~~ | (~~of~~) jaw NOS
~~Hypoplasia~~
[Hyperplasia of jaw NOS](#)
[Hypoplasia of jaw NOS](#)
Underdeveloped jaw

...

K07.3 Anomalies of tooth position

~~Crowding~~
~~Diastema~~
~~Displacement~~
~~Rotation~~ | of tooth or teeth
~~Spacing, abnormal~~
~~Transposition~~

[Abnormal spacing of tooth or teeth](#)

Impacted or embedded teeth with abnormal position of such teeth or adjacent teeth

[Tooth or teeth:](#)

- [crowding](#)
- [diastema](#)
- [displacement](#)
- [rotation](#)
- [transposition](#)

Excludes: embedded and impacted teeth without abnormal position (K01.-)

...

K09 Cysts of oral region, not elsewhere classified

...

K09.8 Other cysts of oral region, not elsewhere classified

~~Dermoid cyst~~
~~Epidermoid cyst~~ | of mouth
~~Lymphoepithelial cyst~~
Epstein's pearl

[Mouth cyst:](#)

- [dermoid](#)
- [epidermoid](#)
- [lymphoepithelial](#)

...

K10 Other diseases of jaws

...

K10.2 Inflammatory conditions of jaws

~~Osteitis~~
~~Osteomyelitis (neonatal)~~
~~Osteonecrosis (drug-induced)~~ | ~~of jaw (acute)-(chronic)~~
~~(radiation-induced)~~ | ~~(suppurative)~~
~~Osteoradionecrosis~~
~~Periostitis~~
[Osteitis of jaw](#)
[Osteomyelitis of jaw](#)
[Osteonecrosis of jaw](#)
[Osteoradionecrosis of jaw](#)
[Periostitis of jaw](#)

Sequestrum of jaw bone (~~acute~~)(~~chronic~~)(~~suppurative~~)

Use additional external cause code (Chapter 20) to identify drug, if drug-induced or to identify radiation, if radiation-induced.

...

K10.8 Other specified diseases of jaws

Cherubism
~~Exostosis~~ | ~~of jaw~~
~~Fibrous dysplasia~~
[Exostosis of jaw](#)
[Fibrous dysplasia of jaw](#)
Unilateral condylar:
• hyperplasia
• hypoplasia

...

K11 Diseases of salivary glands

...

K11.5 Sialolithiasis

[Salivary gland or duct:](#)
• [calculus](#)
• [stone](#)
~~Calculus~~ | ~~of salivary gland or duct~~
~~Stone~~

K11.6 Mucocele of salivary gland

~~Mucous:~~
• ~~extravasation cyst~~ | ~~of salivary gland~~
• ~~retention cyst~~
[Mucous:](#)
• [extravasation cyst of salivary gland](#)
• [retention cyst of salivary gland](#)
Ranula

...

K11.8 Other diseases of salivary glands

Benign lymphoepithelial lesion of salivary gland
Mikulicz' disease
Necrotising sialometaplasia
Sialiectasia
[Stenosis of salivary duct](#)
[Stricture of salivary duct](#)
~~Stenosis~~ | ~~of salivary duct~~
~~Stricture~~

Excludes: sicca syndrome [Sjögren] (M35.0)

...

K13 Other diseases of lip and oral mucosa

...

K13.2 Leukoplakia and other disturbances of oral epithelium, including tongue

~~Erythroplakia~~
~~Leukoedema~~ | of oral epithelium, including tongue

[Erythroplakia of oral epithelium, including tongue](#)
[Leukoedema of oral epithelium, including tongue](#)

Leukokeratosis nicotina palati
Smoker's palate

Excludes: hairy leukoplakia (K13.3)

...

K13.4 Granuloma and granuloma-like lesions of oral mucosa

[Eosinophilic granuloma of oral mucosa](#)
[Granuloma pyogenicum of oral mucosa](#)
[Verrucous xanthoma of oral mucosa](#)

~~Eosinophilic granuloma~~
~~Granuloma pyogenicum~~
~~Verrucous xanthoma~~ | of oral mucosa

...

K14 Diseases of tongue

Excludes erythroplakia
focal epithelial hyperplasia
leukoedema
leukoplakia | of tongue (K13.2)

Excludes: [erythroplakia of tongue \(K13.2\)](#)
[focal epithelial hyperplasia of tongue \(K13.2\)](#)
hairy leukoplakia (K13.3)
[leukoedema of tongue \(K13.2\)](#)
[leukoplakia of tongue \(K13.2\)](#)
macroglossia (congenital) (Q38.2)
submucous fibrosis of tongue (K13.5)

K14.0 Glossitis

[Tongue:](#)
• [abscess](#)
• [ulceration \(traumatic\)](#)

~~Abscess~~
~~Ulceration (traumatic)~~ | of tongue

Excludes: atrophic glossitis (K14.4)

...

K14.5 Plicated tongue

[Fissured tongue](#)
[Furrowed tongue](#)
[Scrotal tongue](#)

~~Fissured~~
~~Furrowed~~ | tongue
~~Scrotal~~

Excludes: fissured tongue, congenital (Q38.39)

...

K14.8 Other diseases of tongue

[Tongue:](#)
• [atrophy](#)
• [crenated](#)
• [enlargement](#)
• [hypertrophy](#)
~~Atrophy~~ | (of) tongue

~~Crenated~~
~~Enlargement~~
~~Hypertrophy~~

...

K31 Other diseases of stomach and duodenum

...

K31.5 Obstruction of duodenum

Duodenal:

- constriction
- ileus (chronic)
- stenosis
- stricture

~~Constriction~~
~~Stenosis~~
~~Stricture~~
~~Duodenal ileus (chronic)~~ | of duodenum

Excludes: congenital stenosis of duodenum (Q41.02)

...

K38 Other diseases of appendix

...

K38.1 Appendicular concretions

Faecalith of appendix
Stercolith of appendix

~~Faecalith~~
~~Stercolith~~ | of appendix

...

K40 Inguinal hernia

K40.3 Unilateral or unspecified inguinal hernia, with obstruction, without gangrene

See subdivisions

Inguinal hernia (unilateral):

- causing obstruction without gangrene
- incarcerated without gangrene
- irreducible without gangrene
- strangulated without gangrene

~~causing~~
~~obstruction~~
~~incarcerated~~
~~irreducible~~
~~strangulated~~ | without gangrene

Includes: that with adhesions

...

K41 Femoral hernia

...

K41.3 Unilateral or unspecified femoral hernia, with obstruction, without gangrene

Femoral hernia (unilateral):

- causing obstruction without gangrene
- incarcerated without gangrene
- irreducible without gangrene
- strangulated without gangrene

~~causing obstruction~~
~~incarcerated~~
~~irreducible~~
~~strangulated~~ | without gangrene

Includes: that with adhesions

...

K42 Umbilical hernia

K42.0 Umbilical hernia with obstruction, without gangrene

Umbilical hernia:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ~~causing obstruction~~
 - ~~incarcerated~~
 - ~~irreducible~~
 - ~~strangulated~~
- without gangrene

Includes: that with adhesions

...

K43 Ventral hernia

K43.0 Incisional hernia with obstruction, without gangrene

Incisional hernia:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ~~causing obstruction~~
 - ~~incarcerated~~
 - ~~irreducible~~
 - ~~strangulated~~
- without gangrene

Includes: that with adhesions

...

K43.3 Parastomal hernia with obstruction, without gangrene

Parastomal hernia:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ~~causing obstruction~~
 - ~~incarcerated~~
 - ~~irreducible~~
 - ~~strangulated~~
- without gangrene

Includes: that with adhesions

...

K43.6 Other and unspecified ventral hernia with obstruction, without gangrene

Hernia (~~epigastric~~) (~~hypogastric~~) (~~midline~~) (~~spigelian~~) (~~subxyphoid~~):

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ~~causing obstruction~~
 - ~~incarcerated~~
 - ~~irreducible~~
 - ~~strangulated~~
- without gangrene

Includes: [epigastric hernia](#)
[hypogastric hernia](#)
[midline hernia](#)
[spigelian hernia](#)
[subxyphoid hernia](#)
that with adhesions

K43.7 Other and unspecified ventral hernia with gangrene

Hernia:

- ▲ epigastric
 - ▲ hypogastric
 - ▲ midline
 - ▲ spigelian
 - ▲ subxyphoid
- with gangrene

Includes: [epigastric hernia](#)
[hypogastric hernia](#)
[midline hernia](#)
[spigelian hernia](#)
[subxyphoid hernia](#)

K43.9 Other and unspecified ventral hernia without obstruction or gangrene

Hernia:

- ▲ epigastric
 - ▲ hypogastric
 - ▲ midline
 - ▲ spigelian
 - ▲ subxyphoid
- without obstruction or gangrene

Ventral hernia NOS

Includes: [epigastric hernia](#)
[hypogastric hernia](#)
[midline hernia](#)
[spigelian hernia](#)
[subxyphoid hernia](#)

...

K44

Diaphragmatic hernia

K44.0 Diaphragmatic hernia with obstruction, without gangrene

Diaphragmatic hernia:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ▲ causing obstruction
 - ▲ incarcerated
 - ▲ irreducible
 - ▲ strangulated
- without gangrene

Includes: that with adhesions

...

K45

Other abdominal hernia

- Includes:* hernia:
- abdominal, specified site NEC
 - lumbar
 - obturator
 - pudendal
 - retroperitoneal
 - sciatic

K45.0 Other specified abdominal hernia with obstruction, without gangrene

Any ~~condition-hernia~~ listed under K45:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

- ▲ causing obstruction
 - ▲ incarcerated
 - ▲ irreducible
 - ▲ strangulated
- without gangrene

Includes: that with adhesions

K45.1 Other specified abdominal hernia with gangrene
Any ~~condition-hernia~~ listed under K45 specified as gangrenous

...

K46 Unspecified abdominal hernia

Includes: enterocele
epiplocele
hernia:
• interstitial
• intestinal
• intra-abdominal
• NOS

Excludes vaginal enterocele (N81.5)

K46.0 Unspecified abdominal hernia with obstruction, without gangrene

Any ~~condition-hernia~~ listed under K46:

- [causing obstruction without gangrene](#)
- [incarcerated without gangrene](#)
- [irreducible without gangrene](#)
- [strangulated without gangrene](#)

~~• causing obstruction~~

~~• incarcerated~~

~~• irreducible~~

~~• strangulated~~

without gangrene

Includes: that with adhesions

K46.1 Unspecified abdominal hernia with gangrene

Any ~~condition-hernia~~ listed under K46 specified as gangrenous

K46.9 Unspecified abdominal hernia without obstruction or gangrene

Abdominal hernia NOS

...

K52 Other noninfective gastroenteritis and colitis

...

K52.9 Noninfective gastroenteritis and colitis, unspecified

Noninfectious:

• [diarrhoea](#)

• [enteritis](#)

• [ileitis](#)

• [jejunitis](#)

• [sigmoiditis](#)

~~Diarrhoea~~

~~Enteritis~~

~~Ileitis~~

~~Jejunitis~~

~~Sigmoiditis~~

specified as noninfectious

...

K55 Vascular disorders of intestine

...

K55.9 Vascular disorder of intestine, unspecified

Ischaemic:

• [colitis NOS](#)

• [enteritis NOS](#)

• [enterocolitis NOS](#)

~~Ischaemic:~~

~~• colitis~~

~~• enteritis~~

~~• enterocolitis~~

NOS

...

K56 Paralytic ileus and intestinal obstruction without hernia

...

K56.2 Volvulus

Colon or intestine:

- strangulation
- torsion
- twist

| | |
|--|-----------------------|
| Strangulation
Torsion
Twist | of colon or intestine |
|--|-----------------------|

...

K56.6 Other and unspecified intestinal obstruction

Colon or intestine:

- occlusion
- stenosis
- stricture

Enterostenosis
Obstructive ileus NOS

| | |
|---|-----------------------|
| Occlusion
Stenosis
Stricture | of colon or intestine |
|---|-----------------------|

Excludes: other and unspecified neonatal intestinal obstruction classifiable to P76.8 or P76.9

...

K57 Diverticular disease of intestine

Diverticulitis of (large) (small) intestine
Diverticulosis of (large) (small) intestine
Diverticulum of (large) (small) intestine

| | |
|---|-----------------------------|
| Includes: diverticulitis
diverticulosis
diverticulum | of (small)(large) intestine |
|---|-----------------------------|

Excludes: congenital diverticulum of intestine (Q43.89)
diverticulum of appendix (K38.2)
Meckel's diverticulum (Q43.0)

...

K61 Abscess of anal and rectal regions

Cellulitis of anal and rectal regions

| | |
|---|---|
| Includes: abscess
cellulitis | of anal and rectal regions
with or without fistula |
|---|---|

Includes: with or without fistula

K61.0 Anal abscess
Perianal abscess

Excludes: intrasphincteric abscess (K61.4)

...

K72 Hepatic failure, not elsewhere classified

Includes: hepatic:
 ▲ coma NOS
 ▲ encephalopathy NOS

| | |
|--|--|
| hepatitis:
▲ fulminant
▲ malignant | NEC, with hepatic failure
liver (cell) necrosis with hepatic failure
yellow liver atrophy or dystrophy |
|--|--|

...

K76 Other diseases of liver

...

K76.1 Chronic passive congestion of liver

Cardiac:

- cirrhosis (so-called) of liver
- sclerosis of liver

~~Cardiac:~~

- ~~cirrhosis (so-called)~~ | ~~of liver~~
- ~~sclerosis~~

...

K80 Cholelithiasis

The following fifth character subdivisions are for use with subcategories K80.0–K80.8:

⊕ 0 without mention of obstruction

⊕ 1 with obstruction

K80.0 Calculus of gallbladder with acute cholecystitis

See subdivisions

Any conditions listed in K80.2- with acute cholecystitis

K80.1 Calculus of gallbladder with other cholecystitis

See subdivisions

Any condition listed in K80.2- with cholecystitis (chronic)

Cholecystitis with cholelithiasis NOS

K80.2 Calculus of gallbladder without cholecystitis

See subdivisions

Cholecystolithiasis NOS or without cholecystitis

Cholelithiasis NOS or without cholecystitis

Gallbladder colic (recurrent) NOS or without cholecystitis

Gallstone (impacted) of:

- cystic duct NOS or without cholecystitis
- gallbladder NOS or without cholecystitis

~~Cholecystolithiasis~~

~~Cholelithiasis~~

~~Colic (recurrent) of gallbladder~~ | ~~unspecified or without~~

~~Gallstone (impacted) of:~~ | ~~cholecystitis~~

• ~~cystic duct~~

• ~~gallbladder~~

Excludes: with cholecystitis:

• acute (K80.0-)

• chronic (K80.1-)

• NOS (K80.1-)

K80.3 Calculus of bile duct with cholangitis

See subdivisions

Any condition listed in K80.5- with cholangitis

K80.4 Calculus of bile duct with cholecystitis

See subdivisions

Any condition listed in K80.5- with cholecystitis (with cholangitis)

K80.5 **Calculus of bile duct without cholangitis or cholecystitis**

See subdivisions

[Choledocholithiasis NOS or without cholangitis or cholecystitis](#)

[Gallstone \(impacted\) of:](#)

- [bile duct NOS or without cholangitis or cholecystitis](#)
- [common duct NOS or without cholangitis or cholecystitis](#)
- [hepatic duct NOS or without cholangitis or cholecystitis](#)

[Hepatic:](#)

- [cholelithiasis NOS or without cholangitis or cholecystitis](#)
- [colic \(recurrent\) NOS or without cholangitis or cholecystitis](#)

~~Choledocholithiasis~~

~~Gallstone (impacted) of:~~

- ~~bile duct NOS~~
- ~~common duct~~
- ~~hepatic duct~~

~~unspecified or without
cholangitis or cholecystitis~~

~~Hepatic:~~

- ~~cholelithiasis~~
- ~~colic (recurrent)~~

[Excludes: with:](#)

- [cholangitis:](#)
- [and cholecystitis \(K80.4-\)](#)
- [NOS \(K80.3-\)](#)
- [cholecystitis \(and cholangitis\) \(K80.4-\)](#)

...

K81 **Cholecystitis**

Excludes: with cholelithiasis or choledocholithiasis (K80. -)

K81.0 Acute cholecystitis

[Abscess of gallbladder without calculus](#)

[Angiocholecystitis without calculus](#)

[Cholecystitis:](#)

- [emphysematous \(acute\) without calculus](#)
- [gangrenous without calculus](#)
- [suppurative without calculus](#)

[Empyema of gallbladder without calculus](#)

[Gangrene of gallbladder without calculus](#)

~~Abscess of gallbladder~~

~~Angiocholecystitis~~

~~Cholecystitis:~~

- ~~emphysematous (acute)~~
- ~~gangrenous~~
- ~~suppurative~~

~~without calculus~~

~~Empyema of gallbladder~~

~~Gangrene of gallbladder~~

...

K82 **Other diseases of gallbladder**

K82.0 Obstruction of gallbladder

[Occlusion of cystic duct or gallbladder without calculus](#)

[Stenosis of cystic duct or gallbladder without calculus](#)

[Stricture of cystic duct or gallbladder without calculus](#)

~~Occlusion~~

~~Stenosis~~

~~Stricture~~

~~of cystic duct or gallbladder without
calculus~~

Excludes: with cholelithiasis (K80. -)

...

K82.3 Fistula of gallbladder

[Cholecystocolic fistula](#)

[Cholecystoduodenal fistula](#)

~~Cholecystocolic~~

~~Cholecystoduodenal~~

~~fistula~~

...

K82.8 Other specified diseases of gallbladder

[Cystic duct or gallbladder:](#)

- [adhesions](#)
- [atrophy](#)
- [cyst](#)
- [dyskinesia](#)
- [hypertrophy](#)
- [nonfunctioning](#)
- [ulcer](#)

Adhesions

Atrophy

Cyst

Dyskinesia

Hypertrophy

Nonfunctioning

Ulcer

of cystic duct or gallbladder

...

K83 Other diseases of biliary tract

...

K83.1 Obstruction of bile duct

[Occlusion of bile duct without calculus](#)

[Stenosis of bile duct without calculus](#)

[Stricture of bile duct without calculus](#)

Occlusion

Stenosis

Stricture

of bile duct without calculus

Excludes: with cholelithiasis (K80.-)

K83.8 Other specified diseases of biliary tract

[Bile duct:](#)

• [adhesions](#)

• [atrophy](#)

• [hypertrophy](#)

• [ulcer](#)

Adhesions

Atrophy

Hypertrophy

Ulcer

of bile duct

...

K86 Other diseases of pancreas

...

K86.8 Other specified diseases of pancreas

Atrophy

Calculus

Cirrhosis

Fibrosis

of pancreas

Pancreatic:

• [atrophy](#)

• [calculus](#)

• [cirrhosis](#)

• [fibrosis](#)

• infantilism

• necrosis:

• aseptic

• fat

• NOS

L04

Acute lymphadenitis

Acute:

- [lymph node abscess NEC](#)
- [lymphadenitis NEC](#)

Includes: ~~abscess (acute)~~ | any lymph node;
~~lymphadenitis, acute~~ | ~~except mesenteric~~

Excludes: enlarged lymph nodes (R59.-)
 lymphadenitis:
 • chronic or subacute, except mesenteric (I88.1)
 • mesenteric, nonspecific (I88.0)
 • NOS (I88.9)

...

L05

Pilonidal cyst

Coccygeal or pilonidal:

- [fistula](#)
- [sinus](#)

Includes: ~~fistula~~ | coccygeal or pilonidal
~~sinus~~

...

L86*

Keratoderma in diseases classified elsewhere

[Follicular keratosis due to vitamin A deficiency \(E50.8†\)](#)

[Xeroderma due to vitamin A deficiency \(E50.8†\)](#)

~~Follicular keratosis~~ | ~~due to a vitamin A~~
~~Xeroderma~~ | ~~deficiency (E50.8†)~~

CHAPTER 13

SITE OF MUSCULOSKELETAL INVOLVEMENT

The following subclassification to indicate the site of involvement is provided for use with the appropriate categories in Chapter 13.

Valid characters are in [brackets] under each code. Different subclassifications for use with derangement of knee and dorsopathies are ~~given-listed~~ on separate site notes.

- 0 multiple sites
- 1 shoulder region
 - [Acromioclavicular joint](#)
 - [Clavicle](#)
 - [Glenohumeral joint](#)
 - [Scapula](#)
 - [Sternoclavicular joint](#)
 - ~~Clavicle—Acromioclavicular~~
 - ~~Scapula—Glenohumeral~~
 - ~~Sternoclavicular~~
- 2 upper arm
 - [Elbow joint](#)
 - Humerus ~~Elbow joint~~
- 3 forearm
 - Radius ~~Wrist joint~~
 - Ulna
 - [Wrist joint](#)
- 4 hand
 - Carpus ~~Joints between these bones~~
 - Fingers
 - [Joints between hand bones](#)
 - Metacarpus
- 5 pelvic region and thigh
 - Buttock ~~Hip (joint)~~
 - Femur ~~Sacroiliac joint~~
 - [Hip \(joint\)](#)
 - Pelvis
 - [Sacroiliac joint](#)
- 6 lower leg
 - Fibula ~~Knee joint~~
 - [Knee \(joint\)](#)
 - Tibia
- 7 ankle and foot
 - [Ankle joint](#)
 - Metatarsus ~~Ankle joint~~
 - [Other joints in foot](#)
 - Tarsus ~~Other joints in foot~~
 - Toes

...

M23.3 Other meniscus derangements

[0-6,9]

See site code

[Degenerate meniscus](#)

[Detached meniscus](#)

[Retained meniscus](#)

~~Degenerate~~
~~Detached~~ | meniscus
~~Retained~~

...

M47 Spondylosis

▼1334

See site code

Includes: arthrosis or osteoarthritis of spine
degeneration of facet joints

...

M47.8 Other spondylosis

[0-9]

[Spondylosis without myelopathy or radiculopathy:](#)

• [cervical](#)

• [lumbosacral](#)

• [thoracic](#)

~~Cervical spondylosis~~
~~Lumbosacral spondylosis~~ | without myelopathy or radiculopathy
~~Thoracic spondylosis~~

M47.9 Spondylosis, unspecified

[0-9]

...

M67 Other disorders of synovium and tendon

See site code

Excludes: palmar fascial fibromatosis [Dupuytren] (M72.0)
tendinitis NOS (M77.9)
xanthomatosis localised to tendons (E78.2)

...

M67.4 Ganglion

[0-9]

Ganglion of joint or tendon (sheath)

Excludes: [cyst of:](#)
• [bursa \(M71.2–M71.3-\)](#)
• [synovium \(M71.2–M71.3-\)](#)

~~cyst of:~~
~~• bursa~~ | (M71.2–M71.3-)
~~• synovium~~
ganglion in jaws (A66.6)

...

M77 Other enthesopathies

...

M77.9 Enthesopathy, unspecified

[Bone spur NOS](#)

[Capsulitis NOS](#)

[Periarthritis NOS](#)

[Tendinitis NOS](#)

~~Bone spur~~ | NOS
~~Capsulitis~~

Periarthritis
Tendinitis

...

M79 Other soft tissue disorders, not elsewhere classified

...

M79.2 Neuralgia and neuritis, unspecified

[0-9]

Excludes: [brachial radiculitis \(M54.1-\)](#)
[lumbosacral radiculitis \(M54.17\)](#)
mononeuropathies (G56–G58)
radiculitis: [NOS \(M54.1-\)](#)
~~• brachial NOS~~
~~• lumbosacral NOS~~ (M54.1)
~~• NOS~~
sciatica (M54.3–M54.4)

...

M92 Other juvenile osteochondrosis

...

M92.9 Juvenile osteochondrosis, unspecified

Juvenile:
[• apophysitis NEC](#)
[• epiphysitis NEC](#)
[• osteochondritis NEC](#)
[• osteochondrosis NEC](#)
~~Apophysitis~~
~~Epiphysitis~~
~~Osteochondritis~~
~~Osteochondrosis~~ | specified as juvenile, of unspecified site

...

M93 Other osteochondropathies

Excludes: osteochondrosis of spine (M42.-)

...

M93.9 Osteochondropathy, unspecified

[Apophysitis NEC](#)
[Epiphysitis NEC](#)
[Osteochondritis NEC](#)
[Osteochondrosis NEC](#)
~~Apophysitis~~
~~Epiphysitis~~
~~Osteochondritis~~
~~Osteochondrosis~~ | not specified as adult or juvenile, of unspecified site

...

N05 Unspecified nephritic syndrome

See subdivisions

Includes: ~~glomerular disease~~
~~glomerulonephritis~~ NOS
~~nephritis~~
[glomerular disease NOS](#)
[glomerulonephritis NOS](#)
[nephritis NOS](#)
nephropathy NOS and renal disease NOS with morphological lesion specified in [subdivisions .0–.8](#)
~~in subdivisions~~

Excludes: nephropathy NOS with no stated morphological lesion (N28.9)
renal disease NOS with no stated morphological lesion (N28.9)
tubulo-interstitial nephritis NOS (N12)

...

N11 Chronic tubulo-interstitial nephritis

- Includes:* chronic:
- infectious interstitial nephritis
 - pyelitis
 - pyelonephritis

Use additional code (B95–B97) to identify infectious agent.

N11.0 Nonobstructive reflux-associated chronic pyelonephritis
 Pyelonephritis (chronic) associated with (vesicoureteral) reflux
Excludes: vesicoureteral reflux NOS (N13.7)

N11.1 Chronic obstructive pyelonephritis
 Pyelonephritis (chronic) associated with:
 • [anomaly, pelviureteric junction, pyeloureteric junction, ureter](#)
 • [kinking, pelviureteric junction, pyeloureteric junction, ureter](#)
 • [obstruction, pelviureteric junction, pyeloureteric junction, ureter](#)
 • [stricture, pelviureteric junction, pyeloureteric junction, ureter](#)

| | | |
|--|----|---|
| <ul style="list-style-type: none"> • anomaly • kinking • obstruction • stricture | of | <ul style="list-style-type: none"> pelviureteric junction, pyeloureteric junction, ureter |
|--|----|---|

Excludes: calculous pyelonephritis (N20.9)
obstructive uropathy (N13.-)

...

N28 Other disorders of kidney and ureter, not elsewhere classified

- Excludes:* acute renal disease NOS (N00.9)
 hydronephrosis (N13.4)
 ureteric kinking and stricture:
- with hydronephrosis (N13.1)
 - without hydronephrosis (N13.5)

...

N28.8 Other specified disorders of kidney and ureter
 Hypertrophy of kidney
 Megaloureter
 Nephroptosis
[Pyelitis cystica](#)
[Pyeloureteritis cystica](#)
[Ureteritis cystica](#)
~~Pyelitis~~
~~Pyeloureteritis~~ cystica
~~Ureteritis~~
 Ureterocele

...

N39 Other disorders of urinary system

...

N39.4 Other specified urinary incontinence
[Overflow incontinence](#)
[Reflex incontinence](#)
[Urge incontinence](#)

| | | |
|---|--|---|
| <ul style="list-style-type: none"> Overflow Reflex Urge | | <ul style="list-style-type: none"> incontinence |
|---|--|---|

Use additional code (N32.8) to identify overactive bladder or detrusor muscle hyperactivity.

- Excludes:* enuresis NOS (R32)
 urinary incontinence (of):
- nonorganic origin (F98.0)
 - NOS (R32)

...

N40

Hyperplasia of prostate

~~Adenofibromatous hypertrophy~~
~~Enlargement (benign)~~
~~Hypertrophy (benign)~~ | of prostate
[Adenofibromatous hypertrophy of prostate](#)
[Enlargement \(benign\) of prostate](#)
[Hypertrophy \(benign\) of prostate \(BPH\)](#)
Median bar (prostate)
Prostatic obstruction NOS

Code also associated bladder neck obstruction (N32.0).

Excludes: benign neoplasms of prostate (D29.1)

...

N48

Other disorders of penis

N48.2 Other inflammatory disorders of penis

[Corpus cavernosum and penis:](#)

- [abscess](#)
- [boil](#)
- [carbuncle](#)
- [cellulitis](#)

~~Abscess~~
~~Boil~~
~~Carbuncle~~ | of corpus cavernosum and penis
~~Cellulitis~~

Cavernitis (penis)

Use additional code (B95–B97) to identify infectious agent.

...

N48.8 Other specified disorders of penis

[Corpus cavernosum and penis:](#)

- [atrophy](#)
- [hypertrophy](#)
- [thrombosis](#)

~~Atrophy~~
~~Hypertrophy~~ | of corpus cavernosum and penis
~~Thrombosis~~

N48.9 Disorder of penis, unspecified

N49

Inflammatory disorders of male genital organs, not elsewhere classified

Use additional code (B95–B97) to identify infectious agent.

Excludes: inflammation of penis (N48.1–N48.2)
orchitis and epididymitis (N45.-)

...

N49.9 Inflammatory disorder of unspecified male genital organ

[Male genital organ:](#)

- [abscess NEC](#)
- [boil NEC](#)
- [carbuncle NEC](#)
- [cellulitis NEC](#)

~~Abscess~~
~~Boil~~
~~Carbuncle~~ | of unspecified male genital organ
~~Cellulitis~~

N50 Other disorders of male genital organs

Excludes: torsion of testis (N44)

N50.0 Atrophy of testis

N50.1 Vascular disorders of male genital organs

Male genital organ:

- haematocele NOS
- haemorrhage
- thrombosis

~~Haematocele NOS~~
~~Haemorrhage~~
~~Thrombosis~~

of male genital organs

N50.8 Other specified disorders of male genital organs

~~Atrophy~~
~~Hypertrophy~~
~~Oedema~~
~~Ulcer~~

of scrotum, seminal vesicle, spermatic cord, testis [except atrophy], tunica vaginalis and vas deferens

Chylocele, tunica vaginalis (nonfilarial) NOS
Fistula, urethroscrotal

Male genital organ:

- atrophy
- hypertrophy
- oedema
- stricture
- ulcer

Stricture of:

- ~~spermatic cord~~
- ~~tunica vaginalis~~
- ~~vas deferens~~

Includes: scrotum

- seminal vesicle
- spermatic cord
- testis
- tunica vaginalis
- vas deferens

Excludes: atrophy of testis (N50.0)

...

N72 Inflammatory disease of cervix uteri

Cervicitis with or without erosion or ectropion

Endocervicitis with or without erosion or ectropion

Exocervicitis with or without erosion or ectropion

~~Cervicitis~~
~~Endocervicitis~~
~~Exocervicitis~~

with or without erosion or ectropion

Use additional code (B95–B97) to identify infectious agent.

Excludes: erosion and ectropion of cervix without cervicitis (N86)

...

N73 Other female pelvic inflammatory diseases

Use additional code (B95–B97) to identify infectious agent.

N73.0 Acute parametritis and pelvic cellulitis

Acute Abscess of:

- broad ligament
- parametrium

• ~~broad ligament~~
 • ~~parametrium~~

specified as acute

Pelvic cellulitis, female

...

N83**Noninflammatory disorders of ovary, fallopian tube and broad ligament**

Excludes: hydrosalpinx (N70.1)

...

N83.2 Other and unspecified ovarian cysts

Ovarian:

- [retention cyst](#)
- [simple cyst](#)

~~Retention cyst~~ | ~~of ovary~~
~~Simple cyst~~

Excludes: ovarian cyst:

- developmental (Q50.1-)
- neoplastic (D27)

 polycystic ovarian syndrome (E28.2)

...

N85**Other noninflammatory disorders of uterus, except cervix**

Excludes: endometriosis (N80.-)
 inflammatory diseases of uterus (N71.-)
 noninflammatory disorders of cervix except malposition (N86–N88)
 polyp of corpus uteri (N84.0)
 uterine prolapse (N81.-)

...

N85.4 Malposition of uterus

Uterine:

- [anteversion](#)
- [retroflexion](#)
- [retroversion](#)

~~Anteversion~~ | ~~of uterus~~
~~Retroflexion~~
~~Retroversion~~

...

N86**Erosion and ectropion of cervix uteri**

[Decubitus \(trophic\) ulcer of cervix](#)
[Eversion of cervix](#)
~~Decubitus (trophic) ulcer~~ | ~~of cervix~~
~~Eversion~~

Excludes: with cervicitis (N72)

...

N90**Other noninflammatory disorders of vulva and perineum**

Excludes: carcinoma in situ of vulva (D07.1)
 current obstetric trauma (O70.-, O71.7–O71.8)
 inflammation of vulva (N76.-)

...

N90.4 Leukoplakia of vulva

[Dystrophy of vulva](#)
[Kraurosis of vulva](#)

~~Dystrophy~~ | ~~of vulva~~
~~Kraurosis~~

...

P01 Fetus and newborn affected by maternal complications of pregnancy

▼0050

...

P01.7 Fetus and newborn affected by malpresentation before labour

[Breech presentation before labour](#)

[External version before labour](#)

[Face presentation before labour](#)

[Transverse lie before labour](#)

[Unstable lie before labour](#)

~~Breech presentation~~

~~External version~~

~~Face presentation~~

~~Transverse lie~~

~~Unstable lie~~

before labour

P01.8 Fetus and newborn affected by other maternal complications of pregnancy

Spontaneous abortion, fetus

...

P15 Other birth trauma

...

P15.3 Birth trauma to eye

[Subconjunctival haemorrhage due to birth trauma](#)

[Traumatic glaucoma due to birth trauma](#)

~~Subconjunctival haemorrhage~~

~~Traumatic glaucoma~~

due to birth trauma

P15.4 Birth trauma to face

Facial congestion due to birth trauma

...

P21 Birth asphyxia

Note: This category is not to be used for low Apgar score without mention of asphyxia or other respiratory problems.

Excludes: intrauterine hypoxia or asphyxia (P20.-)

...

P21.9 Birth asphyxia, unspecified

[Birth:](#)

• [anoxia NOS](#)

• [asphyxia NOS](#)

• [hypoxia NOS](#)

~~Anoxia~~

~~Asphyxia~~ NOS

~~Hypoxia~~

...

P37 Other congenital infectious and parasitic diseases

...

P37.5 Neonatal candidiasis

☉P37.52 Invasive neonatal candidiasis

▼0110

Generalised neonatal candidal sepsis

[Neonatal pulmonary candidiasis](#)

[Systemic neonatal candidiasis](#)

~~Neonatal pulmonary~~

~~Systemic neonatal~~

candidiasis

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable.

...

P54 Other neonatal haemorrhages

Excludes: fetal blood loss (P50.-)
pulmonary haemorrhage originating in the perinatal period (P26.-)

...

P54.5 Neonatal cutaneous haemorrhage

Fetus or newborn:

- bruising
- ecchymoses
- petechiae
- superficial haematoma

| | | |
|--|--|---------------------|
| <p>Bruising
Ecchymoses
Petechiae
Superficial haematomata</p> | | in fetus or newborn |
|--|--|---------------------|

Excludes: bruising of scalp due to birth trauma (P12.3)
cephalhaematoma due to birth trauma (P12.0)

...

P91.6 Hypoxic ischaemic encephalopathy [HIE] of newborn

Code also any co-existent severe birth asphyxia (P21.0).

⊕P91.60 Hypoxic ischaemic encephalopathy [HIE] of newborn, unspecified

⊕P91.61 Stage 1 hypoxic ischaemic encephalopathy [HIE] of newborn

HIE of newborn:

- grade 1
- mild

| | | |
|---|--|--|
| <p>Grade 1
Mild</p> | | hypoxic ischaemic
encephalopathy [HIE] of newborn |
|---|--|--|

⊕P91.62 Stage 2 hypoxic ischaemic encephalopathy [HIE] of newborn

HIE of newborn:

- grade 2
- moderate

| | | |
|---|--|--|
| <p>Grade 2
Moderate</p> | | hypoxic ischaemic
encephalopathy [HIE] of newborn |
|---|--|--|

Includes: seizures

⊕P91.63 Stage 3 hypoxic ischaemic encephalopathy [HIE] of newborn

HIE of newborn:

- grade 3
- severe

| | | |
|---|--|--|
| <p>Grade 3
Severe</p> | | hypoxic ischaemic
encephalopathy [HIE] of newborn |
|---|--|--|

Includes: seizures

...

Q04 Other congenital malformations of brain

Excludes: cyclopia (Q87.00)
macrocephaly (Q75.3-)

...

Q04.3 Other and unspecified reduction deformities of brain

Excludes: congenital malformations of corpus callosum (Q04.0-)

...

⊛Q04.39 Other reduction anomalies of brain

- [Absence of brain NOS](#)
- [Agenesis of brain NOS](#)
- [Aplasia of brain NOS](#)
- [Hypoplasia of brain NOS](#)

| | |
|--|--|
| <ul style="list-style-type: none"> Absence Agenesis Aplasia Hypoplasia | <ul style="list-style-type: none"> of part of brain NOS |
|--|--|

Q04.4 Septo-optic dysplasia

...

Q04.9 Congenital malformation of brain, unspecified

Congenital:

- [anomaly NOS of brain](#)
- [deformity NOS of brain](#)
- [disease or lesion NOS of brain](#)
- [multiple anomalies NOS of brain](#)

| | |
|---|--|
| <ul style="list-style-type: none"> anomaly deformity disease or lesion multiple anomalies | <ul style="list-style-type: none"> NOS of brain |
|---|--|

Q05 Spina bifida

...

Q05.0 Cervical spina bifida with hydrocephalus

See subdivisions

Q05.1 Thoracic spina bifida with hydrocephalus

See subdivisions

Spina bifida:

- [dorsal with hydrocephalus](#)
- [dorsolumbar with hydrocephalus](#)
- [thoracolumbar with hydrocephalus](#)

| | |
|---|--|
| <ul style="list-style-type: none"> dorsal dorsolumbar thoracolumbar | <ul style="list-style-type: none"> with hydrocephalus |
|---|--|

Q05.2 Lumbar spina bifida with hydrocephalus

See subdivisions

Lumbosacral spina bifida with hydrocephalus

...

Q05.6 Thoracic spina bifida without hydrocephalus

See subdivisions

Spina bifida:

- [dorsal NOS](#)
- [dorsolumbar NOS](#)
- [thoracolumbar NOS](#)

| | |
|---|-----|
| <ul style="list-style-type: none"> • dorsal • dorsolumbar • thoracolumbar | NOS |
|---|-----|

Q05.7 Lumbar spina bifida without hydrocephalus

See subdivisions

Lumbosacral spina bifida NOS

...

Q06 Other congenital malformations of spinal cord

Excludes: syringomyelia and syringobulbia (G95.0)

...

Q06.9 Congenital malformation of spinal cord, unspecified

Congenital:

- [anomaly NOS of spinal cord or spinal meninges](#)
- [deformity NOS of spinal cord or spinal meninges](#)
- [disease or lesion NOS of spinal cord or spinal meninges](#)

| | |
|--|--------------------------------|
| <ul style="list-style-type: none"> • anomaly • deformity • disease or lesion | NOS of spinal cord or meninges |
|--|--------------------------------|

Q07 Other congenital malformations of nervous system

Excludes: familial dysautonomia [Riley-Day] (G90.1)
neurofibromatosis (nonmalignant) (Q85.0)

...

Q07.9 Congenital malformation of nervous system, unspecified

Congenital:

- [anomaly NOS of nervous system](#)
- [deformity NOS of nervous system](#)
- [disease or lesion NOS of nervous system](#)

| | |
|--|-----------------------|
| <ul style="list-style-type: none"> • anomaly • deformity • disease or lesion | NOS of nervous system |
|--|-----------------------|

...

Q11 Anophthalmos, microphthalmos and macropthalmos

Q11.0 Cystic eyeball

Q11.1 Other anophthalmos

Eye:

- [agenesis](#)
- [aplasia](#)

| | |
|---|--------|
| <ul style="list-style-type: none"> • Agenesis • Aplasia | of eye |
|---|--------|

**Q11.2 Microphthalmos
Cryptophthalmos NOS**

Eye:

- [dysplasia](#)
- [hypoplasia](#)
- [rudimentary](#)

| | |
|---|----------|
| <ul style="list-style-type: none"> • Dysplasia • Hypoplasia • Rudimentary | (of) eye |
|---|----------|

Excludes: cryptophthalmos syndrome (Q87.03)

...

Q15 Other congenital malformations of eye

Excludes: congenital nystagmus (H55)
ocular albinism (E70.3)
retinitis pigmentosa (H35.5)

...

Q15.9 Congenital malformation of eye, unspecified
Congenital:

- [anomaly NOS of eye](#)
- [deformity NOS of eye](#)
- ~~anomaly~~ | ~~NOS of eye~~
- ~~deformity~~ | ~~NOS of eye~~

...

Q18 Other congenital malformations of face and neck

...

Q18.8 Other specified congenital malformations of face and neck
[Face and neck medial:](#)

- [cyst](#)
 - [fistula](#)
 - [sinus](#)
- Facial cleft
~~Medial:~~
- ~~cyst~~ | ~~of face and neck~~
 - ~~fistula~~ | ~~of face and neck~~
 - ~~sinus~~ | ~~of face and neck~~

Q18.9 Congenital malformation of face and neck, unspecified
Congenital anomaly NOS of face and neck

...

Q21 Congenital malformations of cardiac septa

Excludes: acquired cardiac septal defect (I51.0)

Q21.0 Ventricular septal defect

Excludes: that with tetralogy of Fallot (Q21.3)

...

★Q21.02 Perimembranous ventricular septal defect

- [Ventricular septal defect:](#)
- [membranous](#)
 - [paramembranous](#)
 - [subaortic](#)

- ~~Membranous~~
- ~~Paramembranous~~ | ~~ventricular septal defect~~
- ~~Subaortic~~

★Q21.03 Subarterial ventricular septal defect

- [Ventricular septal defect:](#)
- [conoseptal](#)
 - [doubly committed subarterial](#)
 - [infundibular](#)
 - [subpulmonary](#)
 - [supracristal](#)
- ~~Conoseptal~~
 - ~~Doubly committed subarterial~~ | ~~ventricular septal defect~~
 - ~~Infundibular~~
 - ~~Subpulmonary~~
 - ~~Supracristal~~

✦Q21.04 Gerbode defect

...

Q24 Other congenital malformations of heart

Excludes: endocardial fibroelastosis (I42.4)

...

Q24.9 Congenital malformation of heart, unspecified

Congenital:

- cyanotic heart disease

- [anomaly NOS of heart](#)

- [disease NOS of heart](#)

~~• anomaly~~ | NOS of heart
~~• disease~~

Q25 Congenital malformations of great arteries

...

Q25.4 Other and unspecified congenital malformations of aorta

...

✦Q25.45 Persistent aortic arch

Persistent:

- [convolutions of aortic arch](#)

- [right aortic arch](#)

~~• convolutions of~~ | aortic arch
~~• right~~

✦Q25.46 Pseudotruncus arteriosus

...

Q25.7 Other and unspecified congenital malformations of pulmonary artery

...

✦Q25.79 Other specified congenital malformations of pulmonary artery

[Aberrant pulmonary artery](#)

[Agenesis of pulmonary artery](#)

[Hypoplasia of pulmonary artery](#)

~~Aberrant~~ |
~~Agenesis~~ (of) pulmonary artery
~~Hypoplasia~~

Q25.8 Other congenital malformations of great arteries

Q25.9 Congenital malformation of great arteries, unspecified

...

Q27 Other congenital malformations of peripheral vascular system

...

Q27.8 Other specified congenital malformations of peripheral vascular system

Aberrant subclavian artery

[Absence of artery or vein NEC](#)

[Atresia of artery or vein NEC](#)

~~Absence~~ | of artery or vein NEC
~~Atresia~~

Congenital:

- aneurysm (peripheral)

- stricture, artery

- varix

...

Q30 Congenital malformations of nose

Excludes: congenital deviation of nasal septum (Q67.42)

Q30.0 Choanal atresia and stenosis

⊛Q30.01 Choanal atresia
Atresia of [nares \(anterior\) \(posterior\)](#):
~~•anterior~~ | ~~•posterior~~ | [nares](#)

⊛Q30.02 Choanal stenosis
Congenital stenosis of [nares \(anterior\) \(posterior\)](#):
~~•anterior~~ | ~~•posterior~~ | [nares](#)

Q30.1 Agenesis and underdevelopment of nose
Congenital absence of nose

...

Q31 Congenital malformations of larynx

Excludes: congenital laryngeal stridor NOS (P28.89)

...

Q31.8 Other congenital malformations of larynx

~~Absence~~ | ~~Agenesis~~ | ~~Atresia~~ | [of cricoid cartilage, epiglottis, glottis, larynx or thyroid cartilage](#)

[Absence of larynx](#)

[Agenesis of larynx](#)

[Atresia of larynx](#)

Cleft thyroid cartilage

Congenital stenosis of larynx NEC

Fissure of epiglottis

Posterior cleft of cricoid cartilage

Includes: [cricoid cartilage](#)

[epiglottis](#)

[glottis](#)

[thyroid cartilage](#)

...

Q32 Congenital malformations of trachea and bronchus

Excludes: congenital bronchiectasis (Q33.4)

Q32.0 Congenital tracheomalacia

Q32.1 Other congenital malformations of trachea

Anomaly of tracheal cartilage

Atresia of trachea

Congenital:

• [dilatation of trachea](#)

• [malformation of trachea](#)

• [stenosis of trachea](#)

~~• dilatation~~

~~• malformation~~ | ~~• stenosis~~ | [of trachea](#)

• tracheocele

Q32.2 Congenital bronchomalacia

Q32.3 Congenital stenosis of bronchus

Q32.4 Other congenital malformations of bronchus

- [Absence of bronchus](#)
- [Agenesis of bronchus](#)
- [Atresia of bronchus](#)
- [Congenital malformation NOS of bronchus](#)
- [Diverticulum of bronchus](#)

~~Absence~~
~~Agenesis~~
~~Atresia~~
~~Congenital malformation NOS~~
~~Diverticulum~~ | of bronchus

...

Q34 Other congenital malformations of respiratory system

...

Q34.9 Congenital malformation of respiratory system, unspecified
Congenital:

- [absence of respiratory organ](#)
- [anomaly NOS of respiratory organ](#)

~~absence~~
~~anomaly~~
NOS | of respiratory organ

...

Q38 Other congenital malformations of tongue, mouth and pharynx

Excludes: macrostomia (Q18.4)
microstomia (Q18.5)

...

Q38.3 Other and unspecified congenital malformations of tongue

...

★Q38.39 Other congenital malformations of tongue
Congenital:

- [adhesion of tongue](#)
- [fissure of tongue](#)

~~adhesion~~
~~fissure~~ | of tongue

Q38.4 Congenital malformations of salivary glands and ducts

...

Q40 Other congenital malformations of upper alimentary tract

Q40.0 Congenital hypertrophic pyloric stenosis
Congenital or infantile:

- [constriction of pylorus](#)
- [hypertrophy of pylorus](#)
- [spasm of pylorus](#)
- [stenosis of pylorus](#)
- [stricture of pylorus](#)

~~constriction~~
~~hypertrophy~~
~~spasm~~
~~stenosis~~
~~stricture~~ | of pylorus

Q40.1 Congenital hiatus hernia
Displacement of cardia through oesophageal hiatus
Excludes: congenital diaphragmatic hernia (Q79.0)

Q40.2 Other specified congenital malformations of stomach

...

★Q40.29 Other specified congenital malformations of stomach

Cardiospasm

Congenital:

• [displacement of stomach](#)

• [hourglass stomach](#)

• [malposition of stomach](#)

▲ ~~displacement~~ | (of) stomach

▲ ~~hourglass~~

▲ ~~malposition~~

...

Q40.3 Congenital malformation of stomach, unspecified

Q40.8 Other specified congenital malformations of upper alimentary tract

Q40.9 Congenital malformation of upper alimentary tract, unspecified

Congenital:

• [anomaly NOS of upper alimentary tract NEC](#)

• [deformity NOS of upper alimentary tract NEC](#)

▲ ~~anomaly~~ | NOS of upper alimentary tract

▲ ~~deformity~~

...

Q43 Other congenital malformations of intestine

Q43.0 Meckel's diverticulum

Persistent:

• omphalomesenteric duct

• vitelline duct

Q43.1 Hirschsprung's disease

★Q43.10 Hirschsprung's disease, unspecified

[Aganglionosis NOS](#)

[Congenital \(aganglionic\) megacolon NOS](#)

Aganglionosis | NOS

Congenital (aganglionic) megacolon

★Q43.11 Short segment Hirschsprung's disease

...

Q43.3 Congenital malformations of intestinal fixation

★Q43.31 Malrotation of colon

[Incomplete rotation of caecum and colon](#)

[Insufficient rotation of caecum and colon](#)

Rotation: [failure of caecum and colon](#)

▲ ~~failure~~

▲ ~~incomplete~~ | of caecum and colon

▲ ~~insufficient~~

★Q43.32 Congenital intra-abdominal adhesions (bands)

...

Q45 Other congenital malformations of digestive system

Excludes: congenital:
• diaphragmatic hernia (Q79.0)
• hiatus hernia (Q40.1)

...

Q45.9 Congenital malformation of digestive system, unspecified

Congenital:
[• anomaly NOS of digestive system](#)
[• deformity NOS of digestive system](#)
~~• anomaly~~ | ~~NOS of digestive system~~
~~• deformity~~

...

Q50 Congenital malformations of ovaries, fallopian tubes and broad ligaments

...

Q50.3 Other and unspecified congenital malformations of ovary

...

✳Q50.39 Other congenital malformations of ovary

[Dysplasia of ovary](#)
[Hypoplasia of ovary](#)
~~Dysplasia~~ | ~~(of) ovary~~
~~Hypoplasia~~

...

Q50.6 Other and unspecified congenital malformations of fallopian tube and broad ligament

...

✳Q50.69 Other congenital malformations of fallopian tube and broad ligament

[Accessory fallopian tube or broad ligament](#)
[Atresia of fallopian tube or broad ligament](#)
~~Accessory~~ | ~~(of) fallopian tube or broad ligament~~
~~Atresia~~

...

Q55 Other congenital malformations of male genital organs

Excludes: congenital hydrocele (P83.5)
hypospadias (Q54.-)

...

Q55.9 Congenital malformation of male genital organ, unspecified

Congenital:
[• anomaly NOS of male genital organ](#)
[• deformity NOS of male genital organ](#)
~~• anomaly~~ | ~~NOS of male genital organ~~
~~• deformity~~

...

Q62 Congenital obstructive defects of renal pelvis and congenital malformations of ureter

Q62.0 Congenital hydronephrosis

Q62.1 Atresia and stenosis of ureter

✳Q62.15 Atresia of ureter, unilateral

Atresia of ureter:
• NOS
[• ureteropelvic junction, unilateral](#)
[• ureterovesical junction, unilateral](#)
[Impervious ureter, unilateral](#)

- ~~ureteropelvic junction~~
 - ~~ureterovesical junction~~
 - ~~Impervious ureter~~|
unilateral

- ✦Q62.16 Atresia of ureter, bilateral
 Atresia of ureter:
 - [ureteropelvic junction, bilateral](#)
 - [ureterovesical junction, bilateral](#)
 - [Impervious ureter, bilateral](#)
 - ~~ureteropelvic junction~~
 - ~~ureterovesical junction~~
 - ~~Impervious ureter~~|
bilateral

- ✦Q62.17 Stenosis of ureter, unilateral
 Occlusion of ureter, unilateral
 Stenosis:
 - NOS
 - [ureteropelvic junction, unilateral](#)
 - [ureterovesical junction, unilateral](#)
 - [Stricture of ureter, unilateral](#)
 - ~~ureteropelvic junction~~
 - ~~ureterovesical junction~~
 - ~~Stricture of ureter~~|
unilateral

- ✦Q62.19 Stenosis of ureter, bilateral
 Occlusion of ureter, bilateral
 Stenosis:
 - [ureteropelvic junction, bilateral](#)
 - [ureterovesical junction, bilateral](#)
 - [Stricture of ureter, bilateral](#)
 - ~~ureteropelvic junction~~
 - ~~ureterovesical junction~~
 - ~~Stricture of ureter~~|
bilateral

- Q62.2 Congenital megaloureter
 Congenital dilatation of ureter
 ...

- Q62.6 Malposition of ureter**
 Ureter:
 - [deviation](#)
 - [displacement](#)
 - [ectopic](#)
 - [implantation, anomalous](#)
 - ~~Deviation~~
 - ~~Displacement~~
 - ~~Ectopic~~
 - ~~Implantation, anomalous~~|
(of) ureter or ureteric orifice

[Includes: ureteric orifice](#)

- ✦Q62.60 Malposition of ureter, unspecified ureteric drainage site
 ...

- Q64 Other congenital malformations of urinary system**
 ...

- Q64.9 Congenital malformation of urinary system, unspecified
 Congenital:
 - [anomaly NOS of urinary system](#)
 - [deformity NOS of urinary system](#)
 - ~~anomaly~~
 - ~~deformity~~|
NOS of urinary system

Q65 Congenital deformities of hip

Excludes: clicking hip (R29.4)

...

Q65.6 Unstable hip

[Dislocatable hip](#)

[Subluxatable hip](#)

~~Dislocatable~~ | hip
~~Subluxatable~~

✪Q65.60 Unstable hip, unspecified

...

Q65.8 Other congenital deformities of hip

...

✪Q65.89 Other congenital deformities of hip

[Congenital:](#)

• [acetabular dysplasia](#)

• [anteversion of femoral neck](#)

• [dysplasia of hip](#)

[Developmental dysplasia of hip](#)

~~Congenital acetabular dysplasia~~

~~Congenital anteversion of femoral neck~~

~~Congenital dysplasia~~

~~Developmental dysplasia~~ | of hip

Q65.9 Congenital deformity of hip, unspecified

...

Q69 Polydactyly

...

Q69.2 Accessory toe(s)

✪Q69.21 Accessory hallux [halluces]

[Accessory great toe\(s\)](#)

[Bifid great toe\(s\)](#)

~~Accessory~~ | great toe(s)
~~Bifid~~

✪Q69.29 Other accessory toe(s)

...

Q71 Reduction defects of upper limb

...

Q71.8 Other reduction defects of upper limb(s)

✪Q71.81 Other reduction defects of upper arm(s)

[Congenital:](#)

• [hypoplasia of upper arm\(s\)](#)

• [shortening of upper arm\(s\)](#)

~~Congenital hypoplasia~~ | of upper arm(s)
~~Congenital shortening~~

✪Q71.82 Other reduction defects of forearm(s)

[Congenital:](#)

• [hypoplasia of forearm\(s\)](#)

• [shortening of forearm\(s\)](#)

~~Congenital hypoplasia~~ | of forearm(s)
~~Congenital shortening~~

✪Q71.83 Other reduction defects of hand(s)

Congenital:
• [hypoplasia of hand\(s\)](#)
• [shortening of hand\(s\)](#)
~~Congenital hypoplasia~~ | of hand(s)
~~Congenital shortening~~

☛Q71.84 Other reduction defects of finger(s) and thumb(s)
Congenital hypoplasia of:
• finger(s)
• thumb(s)

☛Q71.89 Other reduction defects of upper limb(s)
Congenital:
• [hypoplasia of upper limb\(s\)](#)
• [shortening of upper limb\(s\)](#)
~~Congenital hypoplasia~~ | of upper limb(s)
~~Congenital shortening~~

Q71.9 Reduction defect of upper limb, unspecified
[Congenital amputation of upper limb NOS](#)
[Constriction ring of upper limb NOS](#)
~~Congenital amputation~~ | (of) upper limb NOS
~~Constriction ring~~

Q72 Reduction defects of lower limb

...

Q72.8 Other reduction defects of lower limb(s)

☛Q72.81 Other reduction defects of lower leg(s)
Congenital:
• [hypoplasia of lower leg\(s\)](#)
• [shortening of lower leg\(s\)](#)
~~Congenital hypoplasia~~ | of lower leg(s)
~~Congenital shortening~~

☛Q72.82 Other reduction defects of foot/feet
Congenital:
• [hypoplasia of foot/feet](#)
• [shortening of foot/feet](#)
~~Congenital hypoplasia~~ | of foot/feet
~~Congenital shortening~~

☛Q72.83 Other reduction defects of toe(s)
Congenital:
• [hypoplasia of toe\(s\)](#)
• [shortening of toe\(s\)](#)
~~Congenital hypoplasia~~ | of toe(s)
~~Congenital shortening~~

☛Q72.89 Other reduction defects of lower limb(s)
Congenital:
• [hypoplasia of lower limb\(s\)](#)
• [shortening of lower limb\(s\)](#)
~~Congenital hypoplasia~~ | of lower limb(s)
~~Congenital shortening~~

Q72.9 Reduction defect of lower limb, unspecified
Congenital amputation of lower limb NOS
Constriction ring of lower limb NOS

Q73 Reduction defects of unspecified limb

...

Q73.8 Other reduction defects of unspecified limb(s)

...

- ✦Q73.89 Other reduction defects of unspecified limb(s)
 - Absence of digit(s) NOS
 - [Congenital amputation of limb\(s\) NEC](#)
 - [Constriction ring syndrome of limb\(s\) NEC](#)
 - [Ectromelia of limb\(s\) NOS](#)
 - [Hemimelia of limb\(s\) NOS](#)
 - [Longitudinal reduction deformity of limb\(s\) NEC](#)
 - [Micromelia of limb\(s\) NOS](#)
 - ~~Congenital amputation~~
 - ~~Constriction ring syndrome~~
 - ~~Longitudinal reduction deformity~~
 - ~~Ectromelia~~
 - ~~Hemimelia~~
 - ~~Micromelia~~

of unspecified limb(s)

of limb(s) NOS

Q74 Other congenital malformations of limb(s)

Excludes: polydactyly (Q69.-)
reduction defect of limb (Q71–Q73)
syndactyly (Q70.-)

...

Q74.2 Other and unspecified congenital malformations of lower limb(s), including pelvic girdle

- ✦Q74.20 Congenital malformation of lower limb(s), including pelvic girdle, unspecified
- ✦Q74.21 Other congenital malformations of pelvis, not elsewhere classified

Congenital:

- [fusion of sacroiliac joint](#)
- [malformation of sacroiliac joint](#)
- ~~• fusion~~
- ~~• malformation~~

of sacroiliac joint

Excludes: anteversion of femur (neck) (Q65.89)
other congenital deformities of hip (Q65.89)

...

- ✦Q74.4 Distal arthrogyposis syndromes
 - [Beals syndrome](#)
 - [Cerebro-oculo-facial-skeletal \(COFS\) syndrome](#)
 - [Gordon syndrome](#)
 - [Whistling face \(Freeman-Sheldon\) syndrome](#)
 - ~~Beals~~
 - ~~Cerebro-oculo-facial-skeletal (COFS)~~
 - ~~Gordon~~
 - ~~Whistling face (Freeman-Sheldon)~~

syndrome

Excludes: Pena-Shokeir (Q87.07)

...

Q76 Congenital malformations of spine and bony thorax

Excludes: congenital musculoskeletal deformities of spine and chest (Q67.5– Q67.8)

...

Q76.4 Other and unspecified congenital malformations of spine, not associated with scoliosis

Excludes: congenital malformations with scoliosis (Q67.5-, Q76.3-)

...

- ✦Q76.49 Other congenital malformations of spine, not associated with scoliosis
 - Congenital:
 - [fusion of spine NOS](#)
 - [gibbus NOS](#)
 - [kyphosis NOS](#)
 - [lordosis NOS](#)

[Malformation of spine NOS](#)
[Platyspondylisis NOS](#)
~~▲ fusion of spine~~
~~▲ gibbus~~
~~▲ kyphosis~~
~~▲ lordosis~~
~~Malformation of spine~~
~~Platyspondylisis~~

NOS

Q76.5 Cervical rib
Supernumerary rib in cervical region

...

Q78 Other osteochondrodysplasias

Q78.9 Osteochondrodysplasia, unspecified

[Chondrodystrophy NOS](#)
[Osteodystrophy NOS](#)
[Skeletal dysplasia NOS](#)
~~Chondrodystrophy~~
~~Osteodystrophy~~
~~Skeletal dysplasia~~

NOS

Q79 Congenital malformations of the musculoskeletal system, not elsewhere classified

Excludes: congenital (sternomastoid) torticollis (Q68.01)

...

Q79.8 Other congenital malformations of musculoskeletal system

★Q79.81 Other congenital malformations of muscle, not elsewhere classified

[Absence of muscle](#)
[Accessory muscle](#)
~~Absence~~
~~Accessory~~

(of) muscle

★Q79.82 Other congenital malformations of tendon, not elsewhere classified

[Absence of tendon](#)
[Congenital shortening of tendon](#)
~~Absence~~
~~Congenital shortening~~

(of) tendon

Excludes: congenital shortening of Achilles tendon (Q66.83)

Q79.9 Congenital malformation of musculoskeletal system, unspecified

Congenital:
 • [anomaly NOS of musculoskeletal system NEC](#)
 • [deformity NOS of musculoskeletal system NEC](#)
~~▲ anomaly NOS~~
~~▲ deformity NOS~~

of musculoskeletal system
NOS

★Q79.90 Congenital malformation of musculoskeletal system, unspecified

...

Q84 Other congenital malformations of integument

Q84.9 Congenital malformation of integument, unspecified

[Congenital:](#)
 • [anomaly NOS of integument NEC](#)
 • [deformity NOS of integument NEC](#)
~~Congenital:~~
~~▲ anomaly NOS~~
~~▲ deformity NOS~~

of integument NOS

...

Q87 Other specified congenital malformation syndromes affecting multiple systems

▼0005

Q87.0 Congenital malformation syndromes predominantly affecting facial appearance

...

- ★Q87.08 Goldenhar syndrome
[Facio-auriculo-vertebral association](#)
[Oculo-auriculo-vertebral association \[hemifacial microsomia\]](#)
~~Facio-auriculo-vertebral~~ | ~~Oculo-auriculo-vertebral~~ association
~~[hemifacial microsomia]~~

- ★Q87.09 Other specified congenital malformation syndromes predominantly affecting facial appearance

Q87.1 Congenital malformation syndromes predominantly associated with short stature

Excludes: Ellis-van Creveld syndrome (Q77.6)
Turner(- Ullrich) syndrome (Q96.-)

...

- ★Q87.16 Seckel syndrome
[Bird-headed dwarfism](#)
[Microcephalic primordial dwarfism](#)
~~Bird-headed~~ | ~~Microcephalic-primordial~~ dwarfism

- ★Q87.17 Smith-Lemli-Opitz syndrome
7-dehydrocholesterol reductase deficiency

...

Q87.2 Congenital malformation syndromes predominantly involving limbs

Excludes: Fanconi's anaemia with absent radius (D61.0)

...

- ★Q87.28 Congenital malformation syndrome with ectrodactyly, not elsewhere classified
[Ectrodactyly-ectodermal dysplasia-cleft \(EEC\) syndrome](#)
[Limb-mammary syndrome](#)
~~Ectrodactyly-ectodermal~~ | ~~Limb-mammary~~ syndrome
~~dysplasia-cleft [EEC]~~

Excludes: ectrodactyly NOS (Q71.6)

- ★Q87.29 Other specified congenital malformation syndromes predominantly involving limbs
Congenital malformation syndrome predominantly involving limbs NOS

...

Q87.8 Other specified congenital malformation syndromes, not elsewhere classified

...

- ★Q87.87 Velocardiofacial syndrome [VCFS]
[22q11 deletion syndrome](#)
[CATCH 22 syndrome](#)
[Shprintzen syndrome](#)
~~22q11 deletion~~ | ~~CATCH 22~~ syndrome
~~Shprintzen~~

Excludes: Di George syndrome (D82.1)

- ★Q87.88 Opitz BBB/G syndrome
BBB syndrome, X-linked
G syndrome
[Hypospadias-dysphagia syndrome](#)
[Hypospadias-hypertelorism syndrome](#)

~~Hypospadias-dysphagia~~ | syndrome
~~Hypospadias-hypertelorism~~ | syndrome
~~Opitz~~
~~Opitz-G/BBB~~ | syndrome, X-linked
Opitz-Frias syndrome
[Opitz G/BBB syndrome, X-linked](#)
[Opitz syndrome, X-linked](#)

Excludes: Opitz:
• C Syndrome (Q87.09)
• Disease (D73.2)

...

R01 Cardiac murmurs and other cardiac sounds

Excludes: those originating in the perinatal period (P29.82)

R01.0 Benign and innocent cardiac murmurs
Functional cardiac murmur

R01.1 Cardiac murmur, unspecified
[Cardiac bruit NOS](#)
[Systolic murmur NOS](#)
~~Cardiac bruit~~ | NOS
~~Systolic murmur~~

R01.2 Other cardiac sounds
Cardiac dullness, increased or decreased
Precordial friction

...

R09 Other symptoms and signs involving the circulatory and respiratory systems

Excludes: respiratory:
• distress (syndrome)(of):
• adult (J80)
• newborn (P22.-)
• failure:
• NOS (J96.-)
• of newborn (P28.5)

...

R09.3 Abnormal sputum
Abnormal:
[amount of sputum](#)
[coloured sputum](#)
[sputum odour](#)
[Excessive sputum](#)

~~amount~~ |
~~colour~~ | (of)-sputum
~~odour~~ |
~~Excessive~~

Excludes: blood-stained sputum (R04.2)

...

R19 Other symptoms and signs involving the digestive system and abdomen

Excludes: acute abdomen (R10.0)

...

R19.5 Other faecal abnormalities

▼0051

Abnormal stool colour

Bulky stools

[Faecal occult blood \(FOB\)](#)

[Mucus in stools](#)

[Occult blood in stools](#)

~~Mucus~~ | ~~Occult blood~~ | ~~in stools~~

Excludes: melaena:

- neonatal (P54.1)
- NOS (K92.1)

...

R23 Other skin changes

...

R23.4 Changes in skin texture

▼1810

[Delicate skin](#)

[Desquamation of skin](#)

[Fragile skin](#)

[Frail skin](#)

[Friable skin](#)

[Induration of skin](#)

[Scaling skin](#)

~~Delicate~~
~~Desquamation~~
~~Fragile~~
~~Frail~~ | ~~(of) skin~~
~~Friable~~
~~Induration~~
~~Scaling~~

Skin tear:

- incidental
- nontraumatic

Excludes: ...

...

R26 Abnormalities of gait and mobility

Excludes: ataxia:

- hereditary (G11.-)
 - locomotor (syphilitic) (A52.1)
 - NOS (R27.0)
- immobility syndrome (paraplegic) (M62.3-)

...

R26.8 Other and unspecified abnormalities of gait and mobility

~~Impaired~~ | ~~mobility NOS~~
~~Reduced~~

[Impaired mobility NOS](#)

[Reduced mobility NOS](#)

Unsteadiness on feet NOS

...

R54

Senility

~~Old age~~ | without mention of psychosis
~~Senescence~~

[Old age without mention of psychosis](#)
[Senescence without mention of psychosis](#)

Senile:

- asthenia
- debility

Excludes: senile psychosis (F03)

CHAPTER 19 INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00–T98)

...

The blocks of the S-section as well as T00–T14 and T90–T98 contain injuries at the three character level classified by type as follows:

Superficial injury ~~including:~~

~~abrasion~~
~~blister (nonthermal)~~
~~contusion, including bruise and haematoma~~
~~injury from superficial foreign body (splinter) without major open wound~~
~~insect bite (nonvenomous)~~

Includes: [abrasion](#)
[blister \(nonthermal\)](#)
[contusion, including bruise and haematoma](#)
[injury from superficial foreign body \(splinter\) without major open wound](#)
[insect bite \(nonvenomous\)](#)

Open wound ~~including:~~

~~animal bite~~
~~cut~~
~~laceration~~
~~puncture wound:~~
~~• NOS~~
~~• penetrating injury (except that involving deeper structures)~~

Includes: [animal bite](#)
[cut](#)
[laceration](#)
[puncture wound:](#)
[• NOS](#)
[• penetrating injury \(except that involving deeper structures\)](#)

Excludes: skin tear:

- incidental (R23.4)
- nontraumatic (R23.4)

Fracture ~~including:~~

~~fracture:~~
~~• closed:~~
~~• comminuted~~
~~• depressed~~
~~• elevated~~
~~• fissured~~ | with or without delayed healing
~~• greenstick~~
~~• impacted~~
~~• linear~~
~~• simple~~

- slipped epiphysis
- spiral
- dislocated
- displaced

fracture:

- open:
- compound
- infected
- missile
- puncture
- with foreign body

with or without delayed healing

Includes: fracture (with or without delayed healing):

- closed:
 - comminuted
 - depressed
 - elevated
 - fissured
 - greenstick
 - impacted
 - linear
 - simple
 - slipped epiphysis
 - spiral
- dislocated
- displaced
- open:
 - compound
 - infected
 - missile
 - puncture
 - with foreign body

Excludes: fracture:

- pathological:
 - NOS (M84.4)
 - with osteoporosis (M80.-)
- stress (M84.3-)
- malunion of fracture (M84.0)
- nonunion of fracture [pseudoarthrosis] (M84.1)

Dislocation, sprain and strain ~~including:~~

~~avulsion~~

~~laceration~~

~~sprain~~

~~strain~~

~~traumatic:~~

—• ~~haemarthrosis~~

—• ~~rupture~~

—• ~~subluxation~~

—• ~~tear~~

of cartilage, joint (capsule), ligament

Includes: cartilage, joint (capsule), ligament:

- avulsion
- laceration
- sprain
- strain
- traumatic:
 - haemarthrosis
 - rupture

- [subluxation](#)
- [tear](#)

Injury to nerves and spinal cord including:

complete or incomplete lesion of spinal cord
 lesion in continuity of nerves and spinal cord
 traumatic:

- [division of nerve](#)
- [haematomyelia](#)
- [paralysis \(transient\)](#)
- [paraplegia](#)
- [quadriplegia](#)

Includes: [complete or incomplete lesion of spinal cord](#)
[lesion in continuity of nerves and spinal cord](#)

[traumatic:](#)

- [division of nerve](#)
- [haematomyelia](#)
- [paralysis \(transient\)](#)
- [paraplegia](#)
- [quadriplegia](#)

Injury to blood vessels including:

avulsion

cut

laceration

traumatic:

- [aneurysm or fistula \(arteriovenous\)](#)
- [arterial haematoma](#)
- [rupture](#)

of blood vessels

Includes: [avulsion](#)

[cut](#)

[laceration](#)

[traumatic:](#)

- [aneurysm or fistula \(arteriovenous\)](#)
- [arterial haematoma](#)
- [rupture](#)

Injury to muscle, fascia and tendon including:

avulsion

cut

laceration

sprain

strain

traumatic rupture

of muscle, fascia and tendon

Includes: [avulsion](#)

[cut](#)

[laceration](#)

[sprain](#)

[strain](#)

[traumatic rupture](#)

Crushing injury

Traumatic amputation

Injury to internal organs including:

blast injuries

bruise

concussion injuries

crushing

laceration

traumatic:

- [haematoma](#)
- [puncture](#)
- [rupture](#)

of internal organs

~~tear~~

Includes: blast injuries

bruise

concussion injuries

crushing

laceration

traumatic:

• haematoma

• puncture

• rupture

• tear

Other and unspecified injuries

Excludes: birth trauma (P10 – P15)
obstetric trauma (O70 – O71)

...

INJURIES TO THE THORAX (S20–S29)

Includes: injuries of:

- breast
- chest (wall)
- interscapular area

Excludes: burns (T20–T31)

effects of foreign body in:

- bronchus (T17.5)
- lung (T17.8)
- oesophagus (T18.1)
- trachea (T17.4)

fracture of spine NOS (T08)

frostbite (T33–T35)

injuries of:

• axilla (S40–S49)

• clavicle (S40–S49)

• scapular region (S40–S49)

• shoulder (S40–S49)

~~axilla~~ (S40–S49)

~~clavicle~~

~~scapular region~~

~~shoulder~~

• spinal cord NOS (T09.3)

• trunk NOS (T09.-)

insect bite or sting, venomous (T63.4)

...

S35 Injury of blood vessels at abdomen, lower back and pelvis level

...

S35.5 Injury of iliac blood vessels

Hypogastric artery or vein

Iliac artery or vein

Uterine artery or vein

~~Hypogastric~~

~~Iliac~~

~~Uterine~~

~~artery or vein~~

S35.7 Injury of multiple blood vessels at abdomen, lower back and pelvis level

...

T00 Superficial injuries involving multiple body regions

▼1916

...

T00.9 Multiple superficial injuries, unspecified

Multiple:

- [abrasions NOS](#)
- [blisters \(nonthermal\) NOS](#)
- [bruises NOS](#)
- [contusions NOS](#)
- [haematomas NOS](#)
- [insect bites \(nonvenomous\) NOS](#)

- ~~abrasions~~ NOS
- ~~blisters (nonthermal)~~
- ~~bruises~~
- ~~contusions~~
- ~~haematomas~~
- ~~insect bites (nonvenomous)~~

T01 Open wounds involving multiple body regions

▼1917

Use additional code T89.- to indicate open wounds with complications of foreign body, infection and delayed healing/treatment.

Excludes: traumatic amputations involving multiple body regions (T05.-)

...

T01.9 Multiple open wounds, unspecified

Multiple:

- [animal bites NOS](#)
- [cuts NOS](#)
- [lacerations NOS](#)
- [puncture wounds NOS](#)

- ~~animal bites~~
- ~~cuts~~
- ~~lacerations~~ NOS
- ~~puncture wounds~~

T14 Injury of unspecified body region

Excludes: injuries involving multiple body regions (T00–T07)

...

T14.1 Open wound of unspecified body region

- [Animal bite NOS](#)
- [Cut NOS](#)
- [Laceration NOS](#)
- [Open wound NOS](#)
- [Puncture wound with \(penetrating\) foreign body NOS](#)

- ~~Animal bite~~
- ~~Cut~~
- ~~Laceration~~
- ~~Open wound~~ NOS
- ~~Puncture wound with (penetrating) foreign body~~

Use additional code T89.0- to indicate open wounds with complications of foreign body, infection and delayed healing/treatment.

Excludes: multiple:

- open wounds NOS (T01.9)
- traumatic amputations NOS (T05.9)
- traumatic amputation NOS (T14.7)

...

T14.3 Dislocation, sprain and strain of unspecified body region

- [Avulsion:](#)
- [cartilage NOS](#)
- [joint \(capsule\) NOS](#)
- [Laceration of ligament NOS](#)
- [Rupture cartilage NOS](#)
- [Sprain NOS](#)
- [Strain NOS](#)
- [Traumatic:](#)
- [cartilage tear NOS](#)
- [haemarthrosis NOS](#)
- [ligament tear NOS](#)
- [subluxation of joint \(capsule\) NOS](#)

| | | |
|----------------------------|------------|-----|
| Avulsion | | |
| Laceration | | |
| Sprain | | |
| Strain | | |
| Traumatic: | | |
| • haemarthrosis | of joint | |
| • rupture | (capsule), | NOS |
| • subluxation | ligament | |
| • tear | | |

Excludes: multiple dislocations, sprains and strains NOS (T03.9)
sprain and strain of muscle(s) and tendon(s) NOS (T14.6)

T14.4 Injury of nerve(s) of unspecified body region

- [Injury of nerve NOS](#)
- [Traumatic:](#)
- [division of nerve NOS](#)
- [haematomyelia NOS](#)
- [paralysis \(transient\) NOS](#)

| | |
|------------------------------------|-----|
| Injury of nerve | |
| Traumatic: | |
| • division of nerve | NOS |
| • haematomyelia | |
| • paralysis (transient) | |

Excludes: multiple injuries of nerves NOS (T06.2)

T14.5 Injury of blood vessel(s) of unspecified body region

- [Avulsion of blood vessel\(s\) NOS](#)
- [Cut of blood vessel\(s\) NOS](#)
- [Injury of blood vessel\(s\) NOS](#)
- [Laceration of blood vessel\(s\) NOS](#)
- [Traumatic:](#)
- [aneurysm or fistula \(arteriovenous\) of blood vessel\(s\) NOS](#)
- [arterial haematoma of blood vessel\(s\) NOS](#)
- [rupture of blood vessel\(s\) NOS](#)

| | |
|--|------------------------|
| Avulsion | |
| Cut | |
| Injury | |
| Laceration | |
| Traumatic: | |
| • aneurysm or fistula (arteriovenous) | of blood vessel(s) NOS |
| • arterial haematoma | |
| • rupture | |

Excludes: multiple injuries of blood vessels NOS (T06.3)

T14.6 Injury of muscles and tendons of unspecified body region

- [Avulsion of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Cut of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Injury of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Laceration of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Sprain of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Strain of muscle\(s\) NOS and tendon\(s\) NOS](#)
- [Traumatic rupture of muscle\(s\) NOS and tendon\(s\) NOS](#)

| | |
|---|------------------------------------|
| Avulsion
Cut
Injury
Laceration
Sprain and strain
Traumatic rupture | of muscle(s) NOS and tendon(s) NOS |
|---|------------------------------------|

Excludes: multiple injuries of tendons and muscles NOS (T06.4)

...

T42 Poisoning by antiepileptic, sedative-hypnotic and antiparkinsonism drugs

Excludes: intoxication meaning inebriation (F10–F19)

...

T42.7 Antiepileptic and sedative-hypnotic drugs, unspecified

Sleeping:

- [draught NOS](#)
- [drug NOS](#)
- [tablet NOS](#)

| | |
|--|-----|
| draught
drug
tablet | NOS |
|--|-----|

T42.8 Antiparkinsonism drugs and other central muscle-tone depressants

Amantadine

...

T70 Effects of air pressure and water pressure

...

T70.2 Other and unspecified effects of high altitude

Other and unspecified effects of low or decreasing ambient atmospheric pressure at high altitude

Alpine sickness

- [Anoxia due to high altitude](#)
- [Barotrauma due to high altitude](#)

| | |
|--|----------------------|
| Anoxia
Barotrauma | due to high altitude |
|--|----------------------|

Hypobaropathy NOS

Mountain sickness

Excludes: polycythaemia due to high altitude (D75.1)

...

T79 Certain early complications of trauma, not elsewhere classified

Excludes: complications of surgical and medical care NEC (T80–T88)
respiratory distress:
• in newborn (P22.-)
• syndrome of adult (J80)
when occurring during or following medical procedures (T80–T88)

...

T79.3 Post traumatic wound infection, not elsewhere classified
▼0050, 1911
1916

~~Burn~~
~~Superficial injury~~ | infected
Infected:
• burn
• superficial injury

Code first site of injury.
Use additional code (B95–B97) to identify infectious agent.
Excludes: open wound with infection (T89.01, T89.02)

...

T80 Complications following infusion, transfusion and therapeutic injection

Includes: perfusion
Excludes: bone marrow transplant rejection (T86.0)

T80.0 Air embolism following infusion, transfusion and therapeutic injection

T80.1 Vascular complications following infusion, transfusion and therapeutic injection

Phlebitis following infusion, transfusion and therapeutic injection
Thromboembolism following infusion, transfusion and therapeutic injection
Thrombophlebitis following infusion, transfusion and therapeutic injection
~~Phlebitis~~ | ~~following infusion,~~
~~Thromboembolism~~ | ~~transfusion and therapeutic~~
~~Thrombophlebitis~~ | ~~injection~~

Excludes: the listed conditions when specified as:
• due to or associated with prosthetic devices, implants and grafts (T82.82, T83.82, T84.82, T85.84)
• postprocedural (T81.7)

...

T81 Complications of procedures, not elsewhere classified

...

T81.3 Disruption of operation wound, not elsewhere classified

Dehiscence of operation wound
Rupture of operation wound
~~Dehiscence~~ | ~~of operation wound~~
~~Rupture~~

Includes: that with prosthetic devices, implants and grafts
Excludes: disruption of:
• caesarean section wound (O90.0)
• perineal obstetric wound (O90.1)

T81.4 Wound infection following a procedure, not elsewhere classified
▼1904

Abcesses:
• ~~intra-abdominal~~
• ~~stitch~~
• ~~subphrenic~~
• ~~wound~~ | postprocedural

Postprocedural:
• abscess:
• [intra-abdominal](#)
• [stitch](#)
• [subphrenic](#)
• [wound](#)
• [infection NOS](#)

~~Postprocedural infection NOS~~

Wound sepsis

Excludes: infection due to:

- infusion, transfusion and therapeutic injection (T80.2)
- prosthetic devices, implants and grafts (T82.6–T82.7-, T83.5–T83.6, T84.5–T84.7, T85.7-)
- obstetric surgical wound infection (O86.0)

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see *Alphabetic Index/Sepsis*.

T81.5 Foreign body accidentally left in body cavity or operation wound following a procedure

Adhesions | ~~due to foreign body accidentally~~
Obstruction | ~~left in operation wound or body~~
Perforation | ~~cavity~~

[Adhesions due to foreign body accidentally left in operation wound or body cavity](#)
[Obstruction due to foreign body accidentally left in operation wound or body cavity](#)
[Perforation due to foreign body accidentally left in operation wound or body cavity](#)

Includes: that with prosthetic devices, implants and grafts

Excludes: obstruction or perforation due to or associated with prosthetic devices and implants intentionally left in body (T82.0–T82.5-, T83.0–T83.4, T84.0–T84.4, T85.0–T85.6-)

...

...

T82

Complications of cardiac and vascular prosthetic devices, implants and grafts

Excludes: specified complications classified elsewhere, such as:

- acute reaction to foreign substance accidentally left during a procedure (T81.6)
- disruption of operation wound (wound dehiscence) (T81.3)
- failure and rejection of transplanted organs and tissues (T86.-)
- foreign body accidentally left in operation wound or body cavity (T81.5)
- postoperative wound infection NEC (superficial) (T81.4)

T82.0 Mechanical complication of heart valve prosthesis

~~Breakdown (mechanical)~~
~~Displacement~~
~~Leakage~~
~~Malposition~~
~~Obstruction, mechanical~~
~~Perforation~~
~~Protrusion~~ | ~~due to heart valve prosthesis~~

Includes: [breakdown \(mechanical\)](#)
[displacement](#)
[leakage](#)
[malposition](#)
[mechanical obstruction](#)
[perforation](#)
[protrusion](#)

...

U54 Individual water sports

...

- U54.4 Surfing and boogie boarding
Excludes: kite wind | surfing (U54.7)
Excludes: wind (kite) surfing (U54.7)

...

U56 Individual athletic activities

U56.0 Aerobics and calisthenics

- U56.00 Aerobics
Aerobics:
 - high impact
 - low impact
 - pump
 - sculpture
 - stepAquarobics
Boxercise
Low impact
Pump
Sculpture
Step
Taibo

...

U56.3 Track and field

Excludes: track and field events in multidiscipline events (U67.-)

...

- U56.37 Throwing events
Discus
Hammer throw
Javelin
[Discus throw](#)
[Hammer throw](#)
[Javelin throw](#)
Shot put

...

U59 Racquet sports

...

- U59.4 Tennis
[Clay court tennis](#)
[Grass court tennis](#)
[Hard court tennis](#)
Clay court tennis
Grass
Hard
- U59.8 Other specified racquet sport
- U59.9 Unspecified racquet sport

U60 Target and precision sports

...

☛U60.6 Firearm shooting
[Clay shooting](#)
[Field shooting](#)
[Pigeon shooting](#)
[Running game shooting](#)
[Skeet shooting](#)
~~Clay~~
~~Field~~
~~Pigeon~~
~~Running game~~
~~Skeet~~

shooting

...

☛U67 **Multidiscipline sports**

☛U67.0 Biathlon, winter

Includes: [cross-country skiing event\(s\)](#)
[shooting event\(s\)](#)

~~Cross-country skiing~~
~~Shooting~~

event(s)

Excludes: summer biathlon (U67.8)

☛U67.1 Decathlon

Includes: [100, 400 and 1500 metre event\(s\)](#)
[110 metre hurdle event\(s\)](#)
[discus throw event\(s\)](#)
[high jump event\(s\)](#)
[javelin throw event\(s\)](#)
[long jump event\(s\)](#)
[pole vault event\(s\)](#)
[shot put event\(s\)](#)

~~100, 400 and 1500 metre~~
~~110 metre hurdles~~
~~Discus throw~~
~~High jump~~
~~Javelin throw~~
~~Long jump~~
~~Pole vault~~
~~Shot put~~

event(s)

☛U67.2 Heptathlon

Includes: [100 metre hurdles event\(s\)](#)
[200 and 800 metre event\(s\)](#)
[high jump event\(s\)](#)
[javelin throw event\(s\)](#)
[long jump event\(s\)](#)
[pole vault event\(s\)](#)
[shot put event\(s\)](#)

~~100 metre hurdles~~
~~200 and 800 metre~~
~~High jump~~
~~Javelin throw~~
~~Long jump~~
~~Pole vault~~
~~Shot put~~

event(s)

☛U67.3 Modern Pentathlon

Includes: [equestrian event\(s\)](#)
[fencing event\(s\)](#)

| | | |
|------------|-----------------------------------|----------|
| | running event(s) | |
| | shooting event(s) | |
| | swimming event(s) | |
| Equestrian | | |
| Fencing | | |
| Running | | event(s) |
| Shooting | | |
| Swimming | | |

...

DEFINITIONS RELATED TO TRANSPORT ACCIDENTS

...

(s) A *railway train or railway vehicle* is any device, with or without cars coupled to it, designed for traffic on a railway.

Includes: interurban:

- [electric car, operated chiefly on its own right-of-way, not open to other traffic](#)
- [streetcar, operated chiefly on its own right-of-way, not open to other traffic](#)

| | | |
|---------------------------|--|--|
| • electric car | | (operated chiefly on its own right- |
| • streetcar | | of way, not open to other traffic) |

railway train, any power [diesel] [electric] [steam]:

- funicular
- monorail or two-rail
- subterranean or elevated

other vehicle designed to run on a railway track

[vehicle operated chiefly on its own right-of-way, not open to other traffic](#)

Excludes: interurban electric cars [streetcars] specified to be operating on a right-of-way that forms part of the public street or highway — see definition (t)

...

CLASSIFICATION AND CODING INSTRUCTIONS FOR TRANSPORT ACCIDENTS

1. If an event is unspecified as to whether it was a traffic or a nontraffic accident, it is assumed to be:

- (a) A traffic accident when the event is classifiable to categories V10–V82 and V87.
- (b) A nontraffic accident when the event is classifiable to categories V83–V86. For these categories the victim is either a pedestrian, or an occupant of a vehicle designed primarily for off-road use.

2. When accidents involving more than one kind of transport are reported, the following order of precedence should be used:

- [aircraft and spacecraft \(V95–V97\)](#)
- [watercraft \(V90–V94\)](#)
- [other modes of transport \(V00–V89, V98–V99\)](#)

3. [Classify the victim as a pedestrian \(categories V00–V09\) where:](#) ~~Where transport accident descriptions do not specify the victim as being a vehicle occupant and the victim is described as:~~

[transport accident descriptions do not specify the victim as being a vehicle occupant](#)

[the victim is described as:](#)

- [crushed](#)
- [dragged](#)
- [hit](#)
- [injured](#)
- [killed](#)
- [knocked down](#)
- [run over](#)

[Includes: injury due to any type of vehicle](#)

| | | | |
|--|--|-------------------------------------|---------------------------------|
| | | by any vehicle including | animal being ridden |
| | | crushed | animal drawn vehicle |
| | | | bicycle |
| | | | bulldozer |
| | | | bus |

dragged
hit
injured
killed:
knocked-down
run-over

car
motorcycle
motorised-tricycle
pick-up (truck)
recreational-vehicle
streetcar
tractor
train
tram
truck
van

~~classify the victim as a pedestrian (categories V00–V09).~~

4. Where transport accident descriptions do not indicate the victim's role, [classify the victim as an occupant or rider of the vehicle mentioned, such as:](#)

[Includes: accident, collision, crash or wreck NOS due to vehicle](#)

| | | |
|----------------------|-----------|-----|
| aeroplane | | |
| bicycle | | |
| boat | | |
| bulldozer | | |
| bus | | |
| car | | |
| motorcycle | | |
| motorised-tricycle | accident | NOS |
| pick-up (truck) | collision | |
| recreational-vehicle | crash, or | |
| spacecraft | wreck | |
| streetcar | | |
| tractor | | |
| train | | |
| tram | | |
| truck | | |
| van | | |
| watercraft | | |

~~classify the victim as an occupant or rider of the vehicle mentioned.~~

If more than one vehicle is mentioned, do not make any assumption as to which vehicle was occupied by the victim unless the vehicles are the same. Instead, code to the appropriate categories V87–V88, V90–V94, V95–V97, taking into account the order of precedence given in note 2 above.

5. Where a transport accident, such as:

vehicle (motor)(nonmotor):

- failing to make curve
- going out of control (due to):
 - burst tyre [blowout]
 - driver falling asleep
 - driver inattention
 - excessive speed
 - failure of mechanical part

resulted in a subsequent collision, classify the accident as a collision. If an accident other than a collision resulted, classify it as a noncollision accident according to the vehicle type involved.

6. Where a transport accident involves ~~ing~~ a vehicle in motion, ~~such as:~~ and results in a subsequent collision, classify the accident as a collision. If an accident other than a collision resulted, classify it as a noncollision accident according to the vehicle type involved.

- Includes:
- accidental poisoning from vehicle exhaust gas
 - breakage of any part of vehicle
 - explosion of any part of vehicle
 - fall, jump or being accidentally pushed from vehicle
 - fire starting in vehicle
 - hit by object thrown into or onto vehicle
 - injured by being thrown against some part of, or object in vehicle
 - injury from moving part of vehicle
 - object falling in or on vehicle

| | |
|---|--------------------------|
| <p>accidental poisoning from exhaust gas generated by
 breakage of any part of
 explosion of any part of
 fall, jump or being accidentally pushed from
 fire starting in
 hit by object thrown into or onto
 injured by being thrown against some part of, or object in
 injury from moving part of
 object falling in or on</p> | <p>vehicle in motion</p> |
|---|--------------------------|

~~resulted in a subsequent collision, classify the accident as a collision. If an accident other than a collision resulted, classify it as a noncollision accident according to the vehicle type involved.~~

7. Land transport accidents described as:

collision (due to loss of control) (on highway) between vehicle and any of the following objects are included in V17.-, V27.-, V37.-, V47.-, V57.-, V67.- and V77.-:

- abutment (bridge) (overpass)
- guard rail or boundary fence
- inter-highway divider
- landslide (not moving)
- object thrown in front of motor vehicle
- safety island
- tree
- traffic sign or marker (temporary)
- utility pole
- wall of cut rock made for road
- other object, fixed, movable or moving

| | |
|--|---|
| <p>abutment (bridge)(overpass)
 fallen stone
 guard rail or boundary fence
 inter-highway divider
 landslide (not moving)
 object thrown in front of motor vehicle
 safety island
 tree
 traffic sign or marker (temporary)
 utility pole
 wall of cut made for road
 other object, fixed, movable or moving</p> | <p>are included in:</p> <p>V17.-
 V27.-
 V37.-
 V47.-
 V57.-
 V67.- and
 V77.-</p> |
|--|---|

overturning (without collision) are included in V18.-, V28.-, V38.-, V48.-, V58.-, V68.- and V78.-

collision with animal (herded)(unattended) are included in V10.-, V20.-, V30.-, V40.-, V50.-, V60.- and V70.-

collision with animal-drawn vehicle or animal being ridden are included in V16.-, V26.-, V36.-, V46.-, V56.-, V66.- and V76.-.

...

MOTORCYCLE RIDER INJURED IN TRANSPORT ACCIDENT (V20–V29)

Includes: moped
motor scooter
motorcycle with sidecar
motorised bicycle

Excludes: three-wheeled motor vehicle (V30–V39)

The following fourth character subdivisions are for use with categories V20 – V28:

- .0 driver injured in nontraffic accident
- .1 passenger injured in nontraffic accident
- .2 unspecified motorcycle rider injured in nontraffic accident
- .3 person injured while boarding or alighting
- .4 driver injured in traffic accident
- .5 passenger injured in traffic accident
- .9 unspecified motorcycle rider injured in traffic accident

The following fifth character subdivisions are for use with subcategories V20.0 – V28.9:

- ⊛ 0 motor-scooter, moped or motorised bicycle
- ⊛ 1 motorcycle designed primarily for on-road use
Road bike
- ⊛ 2 motorcycle designed primarily for off-road use

~~Ag-bike~~
~~Dirt-bike~~ | ~~registrable for on-road use~~
~~Trail-bike~~

Includes: [vehicles registerable for on-road use:](#)

- [ag-bike](#)
- [dirt-bike](#)
- [trail-bike](#)

Excludes: drag racing bike (V86.-0)
special all-terrain or other off-road motorcycle (2-, 3- or 4-wheeled) not registrable for on-road use (V86.-)

- ⊛ 8 other specified motorcycle
- ⊛ 9 unspecified motorcycle

...

CAR OCCUPANT INJURED IN TRANSPORT ACCIDENT (V40–V49)

The following fourth character subdivisions are for use with categories V40–V48:

...

The following fifth character subdivisions are for use with categories V40–V48:

- ⊛ 0 sedan
Convertible:
 - coupe
 - hatch-back
 - sedan-shaped 4-wheel drive
 - sports carStation:
 - sedan
 - wagon

Excludes: [panel van \(V50-V59\)](#)

[ute \(V50-V59\)](#)
[utility \(V50-V59\)](#)

~~Excludes: panel van~~
~~ute~~ (V50-V59)
~~utility~~

- ⊛ 1 all-terrain four-wheel drive
4WD NOS

[All-terrain or:](#)

- [4WD designed primarily for off-road use](#)
- [other off-road motor vehicle registrable for on-road use](#)

~~All terrain or 4WD
designed primarily
for off road use~~
~~All terrain or other
off road motor vehicle
registrable for on road
use~~

such as

~~Honda CR-V,
Mitsubishi Pajero,
Nissan Patrol,
Subaru Forester,
Toyota:
• Landeruiser,
• Prado,
• RAV4~~

~~Excludes: sedan-shaped 4WD not primarily designed for off-road use (.0)
special all-terrain or other off-road motor vehicle not registrable for on-road use
(V86.-2)~~

- ⊛ 2 four-wheeled motorcycles
Four-wheel drive motorcycle
Quad-cycle registrable for on-road use

~~[Excludes: four-wheel drive motorcycle not normally registrable for on-road use \(V86.-2\)](#)
[quad-cycle not normally registrable for on-road use \(V86.-2\)](#)~~

~~Excludes: four wheel
drive
motoreycle
quad cycle~~ ~~not normally registrable for on road use
(V86.-2)~~

- ⊛ 3 passenger vans
'People-mover' or 'minibus' designed to carry up to 10 persons and not requiring a special driver's licence

...

V93 Accident on board watercraft without accident to watercraft, not causing drowning and submersion

See subdivisions

Includes: accidental poisoning by gases or fumes on ship
atomic reactor malfunction in watercraft
crushed by falling object on ship
excessive heat in:

- [boiler room](#)
- [engine room](#)
- [evaporator room](#)
- [fire room](#)

~~• boiler
• engine
• evaporator
• fire~~ room

explosion of boiler on steamship

...

injuries in watercraft caused by:

- [deck machinery](#)
- [engine room machinery](#)
- [galley machinery](#)
- [laundry machinery](#)
- [loading machinery](#)

~~• deck
• engine
room
• galley~~ machinery

• laundry
• loading
localised fire on ship
machinery accident in watercraft

...

V95 Accident to powered aircraft causing injury to occupant

~~**Includes:** collision with any object, fixed, movable or moving
crash
explosion
fire
forced landing~~

of or on (powered) aircraft

Includes: collision with any object, fixed, movable or moving
crash
explosion
fire
forced landing

- V95.0 Helicopter accident injuring occupant
- V95.1 Ultralight, microlight or powered-glider accident injuring occupant
- V95.2 Accident to other private fixed-wing aircraft, injuring occupant
- V95.3 Accident to commercial fixed-wing aircraft, injuring occupant
- V95.4 Spacecraft accident injuring occupant
- V95.8 Other aircraft accidents injuring occupant
- V95.9 Unspecified aircraft accident injuring occupant
Air transport accident NOS
Aircraft accident NOS

V96 Accident to nonpowered aircraft causing injury to occupant

~~**Includes:** collision with any object,
fixed, movable or moving
crash
explosion
fire
forced landing~~

of or on (nonpowered) aircraft

Includes: collision with any object, fixed, movable or moving
crash
explosion
fire
forced landing

- V96.0 Balloon accident injuring occupant
- ...

V98 Other specified transport accidents

Includes: accident to, on or involving:

- cable-car, not on rails:
 - caught or dragged by
 - fall or jump from
 - object thrown from or in
- ice-yacht
- land-yacht
- ski chair-lift
- ski-lift with gondola

~~caught or dragged by
fall or jump from
object thrown from or in~~

cable-car, not on rails

...

W05

Fall involving wheelchair

Includes: ~~electric~~
~~nonpowered~~ | wheelchair
~~NOS~~
~~powered~~

Includes: wheelchair:
• [electric](#)
• [nonpowered](#)
• [NOS](#)
• [powered](#)

Excludes: collision with pedestrian (V00.-)

W06

Fall involving bed

...

⊛W06.6 Fall involving conventional bed

Fall involving:

- bottom bunk
- [double bed](#)
- [king bed](#)
- [queen bed](#)
- [single bed](#)
- ~~double~~ | bed
- ~~king~~
- ~~queen~~
- ~~single~~

⊛W06.8 Fall involving other specified bed

Fall involving:

- [camp bed](#)
- [folding bed](#)
- ~~camp~~ | bed
- ~~folding~~
- futon
- sofa bed
- waterbed

⊛W06.9 Fall involving unspecified bed

Fall involving bed NOS

...

W10

Fall on and from stairs and steps

Includes: fall (on)(from) incline

⊛W10.0 Fall on and from escalator

⊛W10.1 Fall on and from travelator

Fall on and from [travelator](#):

- [flat](#)
- [inclined](#)
- [NOS](#)
- ~~flat~~ | travelator
- ~~inclined~~
- ~~NOS~~

⊛W10.2 Fall on and from ramp

Fall involving ice and snow on ramp

...

...

W16 **Diving or jumping into water causing injury other than drowning or submersion**

Excludes: accidental drowning and submersion (W65–W74)
diving with insufficient air supply (W81)
effects of air pressure from diving (W94)

...

☛W16.9 Other and unspecified contact when diving or jumping into water causing injury other than drowning or submersion

[Diving or jumping into water and striking or hitting:](#)

- [floating object](#)
- [submerged object](#)

~~Diving or jumping into water and striking or hitting:~~

- ~~• floating~~
- ~~• submerged~~ | object

W17 **Other fall from one level to another**

Excludes: fall from, into, out of or through:
• building or structure (W13.-)
• cliff, bank or other natural conformation (W15)
• that stated above while riding horse or other animal (V80.-)
• toilet (W18.1)

...

☛W17.4 Fall into empty swimming-pool

Fall into empty:

- [hot tub NOS](#)
- [Jacuzzi NOS](#)
- [spa NOS](#)

- ~~• hot tub~~
- ~~• Jacuzzi~~ | NOS
- ~~• spa~~

Excludes: fall into swimming pool (W16.1)

...

W25 **Contact with sharp glass**

Contact with broken or shattered glass

Excludes: fall involving glass (W00–W19)
flying glass due to explosion or firearm discharge (W32–W40)
glass embedded in skin (W45.9)

...

☛W25.4 Contact with glass or mirrored glass furniture

Contact with:

- [glass-topped \(coffee\) \(dining\) table](#)

- ~~• glass-topped:~~
- ~~• coffee~~ | table
- ~~• dining~~

- mirrored wardrobe door

☛W25.5 Contact with motor vehicle glass

Contact with vehicle windscreen, windows and mirrors

Excludes: injury caused by transport vehicle being used as a means of transportation (V00–V99)

...

W29**Contact with other powered hand tools and household machinery**

Note: A powered hand tool is a hand-held, portable tool, powered by electricity, petrol engine or other inanimate power source.

- Excludes:** contact with:
- hot:
 - engines, machinery and tools (X17)
 - household appliances (X15)
 - nonpowered household machinery (W27)
 - powered lawnmower (W28)
 - exposure to electric current (W86)

...

⊕W29.1 Contact with powered saw

Contact with:

- circular saw
- jigsaw

- Excludes:** contact with:
- chainsaw (W29.2)
 - industrial saw:
 - [circular \(W31.2\)](#)
 - [compound \(W31.2\)](#)
 - ~~circular~~ | (W31.2)
 - ~~compound~~ |
 - nonpowered saw (W27)

...

⊕W29.8 Contact with other specified powered hand tools and household machinery

Contact with:

- blender
- can opener
- dryer (clothes) (spin)
- edger
- electric fan
- hedge trimmer
- mixer
- powered:
 - [garden tool NOS](#)
 - [household machinery NOS](#)
- ~~garden tool~~ | NOS
- ~~household machinery~~ |

- sewing machine
- washing machine

Excludes: contact with powered lawnmower (W28)

...

W34**Discharge from other and unspecified firearms**

...

⊕W34.3 Accidental small calibre rifle discharge

Accidental discharge of: [≤ .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)
- ~~≤ .22 calibre:~~
- ~~army rifle~~ | (automatic)(pump
- ~~hunting rifle~~ | action)(semiautomatic)
- ~~long gun~~ |

Excludes: sawn-off rifle (W32)

⊕W34.4 Accidental large calibre rifle discharge
 Accidental discharge of: [> .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):
[• army rifle](#)
[• hunting rifle](#)
[• long gun](#)
~~• > .22 calibre:~~
~~• army rifle~~ | ~~(automatic)(pump~~
~~• hunting rifle~~ | ~~action)(semiautomatic)~~
~~• long gun~~
Excludes: sawn-off rifle (W32)

...

W45 Foreign body or object entering through skin

⊕W45.0 Body piercing
 Voluntary body piercing/decoration of:
 • genitalia
 • tongue

⊕W45.9 Foreign body or object entering through skin
 Foreign body or object embedded in skin
[Nail entering through skin](#)
[Splinter entering through skin](#)
~~Nail~~ | ~~entering through skin~~
~~Splinter~~
Excludes: contact with:
 • hand tools (nonpowered)(powered) (W27–W29)
 • hypodermic needle (not embedded in skin) (W46)
 • other sharp object(s) (not embedded in skin) (W26.-)
 • sharp glass (not embedded in skin) (W25.-)
 struck by objects (W20–W22)

...

W61 Contact with bird

~~Bitten~~ | ~~by bird~~
~~Pecked~~
~~Struck~~
[Bitten by bird](#)
[Pecked by bird](#)
[Struck by bird](#)

Includes: injury caused by swooping bird

...

W65 Drowning and submersion while in bath-tub

⊕W65.0 Drowning and submersion while in bath-tub
 Drowning and submersion while in bath-tub with spa jets

⊕W65.1 Drowning and submersion while in indoor spa, Jacuzzi and hot tub
 Drowning and submersion while in:
[• hot tub NOS](#)
[• Jacuzzi NOS](#)
[• spa NOS](#)
~~• hot tub~~ | ~~NOS~~
~~• Jacuzzi~~
~~• spa~~
Excludes: drowning and submersion while in outdoor hot tub, Jacuzzi, spa (W67.1)

...

W78**Inhalation of gastric contents**

Includes: [asphyxia by vomitus \[regurgitated food\]](#)

aspiration and inhalation of vomitus (into respiratory tract) NOS

[choking on vomitus \[regurgitated food\]](#)

[compression of trachea by vomitus in oesophagus](#)

[interruption of respiration by vomitus in oesophagus](#)

[obstruction of respiration by vomitus in oesophagus](#)

[suffocation by vomitus \[regurgitated food\]](#)

~~asphyxia by~~

~~choked on~~

~~suffocation by~~

~~vomitus [regurgitated food]~~

~~compression of trachea~~

~~interruption of respiration~~

~~obstruction of respiration~~

~~by vomitus in oesophagus~~

Excludes: injury, except asphyxia or obstruction of respiratory tract, caused by vomitus (W44)

obstruction of oesophagus by vomitus without mention of asphyxia or obstruction of respiratory tract (W44)

W79**Inhalation and ingestion of food causing obstruction of respiratory tract**

Includes: [asphyxia by food](#)

aspiration and inhalation of food [any] (into respiratory tract) NOS

[bone or seeds](#)

[choking on food](#)

[compression of trachea by food in oesophagus](#)

[interruption of respiration by food in oesophagus](#)

[obstruction of respiration by food in oesophagus](#)

[suffocation by food](#)

~~asphyxia by~~

~~choked on~~

~~suffocation by~~

~~food [including~~

~~bone or seed]~~

~~compression of trachea~~

~~interruption of respiration~~

~~obstruction of respiration~~

~~by food in~~

~~oesophagus~~

obstruction of pharynx by food (bolus)

Excludes: inhalation of vomitus (W78)

injury, except asphyxia or obstruction of respiratory tract, caused by food (W44)

obstruction of oesophagus by food without mention of asphyxia or obstruction of respiratory tract (W44)

W80**Inhalation and ingestion of other objects causing obstruction of respiratory tract**

Includes: [asphyxia by object NEC entering through nose or mouth](#)

aspiration and inhalation of foreign body, ~~except food or vomitus~~ (into respiratory tract) NOS
aspiration NOS

[choking on object NEC entering through nose or mouth](#)

[compression of trachea by foreign body in oesophagus](#)

[interruption of respiration by foreign body in oesophagus](#)

~~asphyxia by
choked on
suffocation
by~~ | ~~any object, except food or vomitus, entering by nose or mouth~~

~~compression of trachea
interruption of respiration
obstruction of respiration~~ | ~~by foreign body in oesophagus~~

foreign object in nose

obstruction of: ~~pharynx by foreign body~~

• [pharynx by foreign body](#)

• [respiration by foreign body in oesophagus](#)

[suffocation by object NEC entering through nose or mouth](#)

Excludes: [aspiration and inhalation of vomitus or food \(W78–W79\)](#)

injury, except asphyxia or obstruction of respiratory tract, caused by foreign body (W44)

obstruction of oesophagus by foreign body without mention of asphyxia or obstruction of respiratory tract (W44)

W80.0 Coin

...

W84**Unspecified threat to breathing**

Includes: [asphyxiation NOS](#)

[suffocation NOS](#)

~~asphyxiation
suffocation~~ | NOS

...

W90**Exposure to other nonionising radiation**

Includes: [infrared radiation](#)

[laser radiation](#)

[radiofrequency radiation](#)

~~infrared
laser
radiofrequency~~ | radiation

W91**Exposure to unspecified type of Radiation**

...

X00**Exposure to uncontrolled fire in building or structure**

Includes: conflagration

[collapse of burning building or structure](#)

[fall from burning building or structure](#)

[fire of fittings, furniture](#)

[hit by object falling from burning building or structure](#)

[jump from burning building or structure](#)

[melting of fittings, furniture](#)

[smouldering of fittings, furniture](#)

~~collapse of
fall from
hit by object falling from
jump from~~ | ~~burning
building
or
structure~~

~~fire
melting~~ | ~~of~~ | ~~fittings, furniture~~

~~smouldering~~ | |

X01 Exposure to uncontrolled fire, not in building or structure

...

X06 Exposure to ignition or melting of other clothing and apparel

Includes: [ignition of plastic jewellery](#)
[melting of plastic jewellery](#)

~~*Includes:* ignition
-melting~~ | ~~of plastic jewellery~~

X08 Exposure to other specified smoke, fire and flames

X09 Exposure to unspecified smoke, fire and flames

Includes: [burning NOS](#)
[incineration NOS](#)
[smoke inhalation NOS](#)

~~*Includes:* burning
incineration
smoke inhalation~~ | ~~NOS~~

...

X21 Contact with spiders

Excludes: spider, nonvenomous (W57)

⊕X21.0 Contact with funnel web spider
Contact with mouse spider

⊕X21.1 Contact with red back spider
Contact with spider:

- [black widow](#)
 - [brown widow](#)
 - [cupboard](#)
 - [katipo](#)
- ~~• black widow~~
~~• brown~~
~~• cupboard~~
~~• katipo~~

⊕X21.2 Contact with white-tailed and other necrotising spider
Contact with spider:

- black house
- fiddleback
- necrotising

...

X25 Contact with other venomous arthropods

Excludes: nonvenomous ant (W57)

...

⊕X25.2 Contact with venomous and urticating caterpillar
Contact with:

- [butterfly \(cocoon\)](#)
 - [moth \(cocoon\)](#)
- ~~• butterfly (cocoon)~~
~~• moth~~

Excludes: caterpillar NOS (W57)

...

X74**Intentional self-harm by other and unspecified firearm discharge**

...

- ⊗X74.3 Intentional self-harm by small calibre rifle discharge
 Intentional self-harm by discharge of ≤ .22 calibre (automatic) (pump action) (semiautomatic):
- [army rifle](#)
 - [hunting rifle](#)
 - [long gun](#)
- ~~• ≤ .22 calibre:~~
- | | | |
|--|--|--|
| <ul style="list-style-type: none"> • army rifle • hunting rifle • long gun | | (automatic)(pump
action)(semiautomatic) |
|--|--|--|
- Excludes:** sawn-off rifle (X72)

- ⊗X74.4 Intentional self-harm by large calibre rifle discharge
 Intentional self-harm by discharge of > .22 calibre (automatic) (pump action) (semiautomatic):
- [army rifle](#)
 - [hunting rifle](#)
 - [long gun](#)
- ~~• > .22 calibre:~~
- | | | |
|--|--|--|
| <ul style="list-style-type: none"> • army rifle • hunting rifle • long gun | | (automatic)(pump
action)(semiautomatic) |
|--|--|--|
- Excludes:** sawn-off rifle (X72)

...

**ASSAULT
(X85–Y09)**

▼2008

Includes: homicide
 injuries inflicted by another person with intent to injure or kill, by any means

Excludes: injuries due to:

- legal intervention (Y35.-)
- operations of war (Y36.-)

The following fifth character subdivisions are for use with categories X85–Y09:

Insert fourth character filler digit '0' for categories X85–X91, X93, X96–X98, Y00–Y01 and Y04–Y09.

This subdivision is used to describe the relationship of the perpetrator to the victim.

Note: Where multiple categories apply, assign the code appearing highest on the list.

- ⊗0 spouse or domestic partner
 Ex-partner
 Ex-spouse

- ⊗1 parent
 Parent ([cohabiting](#)) ([noncohabiting](#)):
- [adoptive](#)
 - [biological](#)
 - [natural](#)
 - [step](#)
- ~~• adoptive~~
~~• natural~~
~~• step~~
- | | |
|--|--|
| | (cohabiting)(noncohabiting) |
|--|--|
- Parent's partner, cohabiting
Excludes: foster parent (.3)
 parent's partner, noncohabiting (.4)

...

X95**Assault by other and unspecified firearm discharge**

...

X95.3**Assault by small calibre rifle discharge**Assault by discharge of [< .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)

~~• < .22 calibre:~~

- ~~• army rifle~~
- ~~• hunting rifle~~
- ~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~*Excludes:* sawn-off rifle (X93.0-)**X95.4****Assault by large calibre rifle discharge**Assault by discharge of [> .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)

~~• > .22 calibre:~~

- ~~• army rifle~~
- ~~• hunting rifle~~
- ~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~*Excludes:* sawn-off rifle (X93.0-)

...

Y24**Other and unspecified firearm discharge, undetermined intent****Y24.3****Small calibre rifle discharge, undetermined intent**Undetermined intent of discharge of [< .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)

~~• < .22 calibre:~~

- ~~• army rifle~~
- ~~• hunting rifle~~
- ~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~*Excludes:* sawn-off rifle (Y22)**Y24.4****Large calibre rifle discharge, undetermined intent**Undetermined intent of discharge of [> .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)

~~• > .22 calibre:~~

- ~~• army rifle~~
- ~~• hunting rifle~~
- ~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~*Excludes:* sawn-off rifle (Y22)

...

LEGAL INTERVENTION AND OPERATIONS OF WAR (Y35–Y36)

Y35

Legal intervention

Includes: injuries inflicted by the police or other law enforcing agents, including:

- military on duty, in the course of arresting or attempting to arrest
 - on lawbreakers, suppressing disturbances, maintaining order, and other legal action
- legal execution

Y35.0

Legal intervention involving firearm discharge

...

Y35.04

Legal intervention involving small calibre rifle discharge

Legal intervention involving discharge of [< .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

• [army rifle](#)

• [hunting rifle](#)

• [long gun](#)

~~• < .22 calibre:~~

~~• army rifle~~

~~• hunting rifle~~

~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~

Excludes: sawn-off rifle (Y35.01)

Y35.05

Legal intervention involving large calibre rifle discharge

Legal intervention involving discharge of [> .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

• [army rifle](#)

• [hunting rifle](#)

• [long gun](#)

~~• > .22 calibre:~~

~~• army rifle~~

~~• hunting rifle~~

~~• long gun~~

~~(automatic)(pump action)(semiautomatic)~~

Excludes: sawn-off rifle (Y35.01)

...

Y35.2

Legal intervention involving gas

[Asphyxiation by gas due to legal intervention](#)

[Injury by tear gas due to legal intervention](#)

[Poisoning by gas due to legal intervention](#)

~~Asphyxiation by gas~~

~~Injury by tear gas~~

~~Poisoning by gas~~

~~due to legal intervention~~

Y35.3

Legal intervention involving blunt objects

Hit, struck by:

• [baton during legal intervention](#)

• [blunt object during legal intervention](#)

• [stave during legal intervention](#)

~~• baton~~

~~• blunt object~~

~~• stave~~

~~during legal intervention~~

Y35.4

Legal intervention involving sharp objects

[Cut during legal intervention](#)

[Injured by bayonet during legal intervention](#)

[Stabbed during legal intervention](#)

~~Cut~~

~~Injured by bayonet~~

~~Stabbed~~

~~during legal intervention~~

Y35.5

Legal execution

...

Y36**Operations of war**

Includes: injuries to military personnel and civilians caused by war and civil insurrection

Note: Injuries due to operations of war occurring after cessation of hostilities are classified to Y36.8.

...

Y36.2 War operations involving other explosions and fragments

Accidental explosion of:

- munitions being used in war
- own weapons

Antipersonnel bomb (fragments)

Explosion (of):

- [artillery shell during war operations](#)
- [breech-block during war operations](#)
- [cannon-block during war operations](#)
- [mortar bomb during war operations](#)

~~• artillery shell~~
~~• breech-block~~
~~• cannon-block~~
~~• mortar bomb~~ | during war operations

Fragments from:

- [artillery shell during war operations](#)
- [bomb during war operations](#)
- [grenade during war operations](#)
- [guided missile during war operations](#)
- [landmine during war operations](#)
- [rocket during war operations](#)
- [shell during war operations](#)
- [shrapnel during war operations](#)
- [Mine NOS during war operations](#)

~~• artillery shell~~
~~• bomb~~
~~• grenade~~
~~• guided missile~~
~~• landmine~~
~~• rocket~~
~~• shell~~
~~• shrapnel~~
~~Mine NOS~~ | during war operations

Y36.3 War operations involving fires, conflagrations and hot substances

~~Asphyxia~~
~~Burns~~
~~Other injury~~ | originating from fire caused directly by a fire-producing device or indirectly by any conventional weapon

[Fire caused directly by a fire-producing device or indirectly by any conventional weapon, resulting in:](#)

- [asphyxia](#)
- [burns](#)
- [other injury](#)

Petrol bomb

Y36.4**War operations involving firearm discharge and other forms of conventional warfare**

...

Y36.44 War operations involving small calibre rifle discharge

War operations involving discharge of [≤ .22 calibre \(automatic\) \(pump action\) \(semiautomatic\)](#):

- [army rifle](#)
- [hunting rifle](#)
- [long gun](#)
- ~~≤ .22 calibre:-~~
~~• army rifle~~
~~• hunting rifle~~
~~• long gun~~ | (automatic)(pump action)(semiautomatic)

Excludes: sawn-off rifle (Y36.41)

⊛Y36.45 War operations involving large calibre rifle discharge
 War operations involving discharge of $\geq .22$ calibre (automatic) (pump action) (semiautomatic):
[• army rifle](#)
[• hunting rifle](#)
[• long gun](#)
~~• $\geq .22$ calibre:~~
~~• army rifle~~ | (automatic)(pump
~~• hunting rifle~~ | action)(semiautomatic)
~~• long gun~~
Excludes: sawn-off rifle (Y36.41)

...

Y47 Sedatives, hypnotics and antianxiety drugs

...

Y47.9 Sedative, hypnotic and antianxiety drug, unspecified
 Sleeping:
[• draught NOS](#)
[• drug NOS](#)
[• tablet NOS](#)
~~• draught~~ | NOS
~~• drug~~
~~• tablet~~

...

Y54 Agents primarily affecting water-balance and mineral and uric acid metabolism

...

Y54.7 Agents affecting calcification
[Bisphosphonates](#)
[Parathyroid hormones and derivatives](#)
[Vitamin D group](#)
~~Bisphosphonates~~ | affecting
~~Parathyroid hormones~~ | calcification
~~and derivatives~~
~~Vitamin D group~~

Y54.8 Agents affecting uric acid metabolism

...

⊛Y92 Place of occurrence

...

⊛Y92.0 Home

...

⊛Y92.00 Driveway to home

⊛Y92.01 Outdoor areas
[Courtyard in private residence](#)
[Garden in private residence](#)
 Private outdoor:
[• entertaining area](#)
[• swimming pool](#)
[• tennis court](#)
~~Courtyard~~ | in private house or
~~Garden~~ | garden
~~Outdoor entertaining~~
~~areas~~
~~Swimming pool~~
~~Tennis court~~
 Yard

...

⊛Y92.07 Indoor living areas, not elsewhere classified

~~Dining~~
~~Family~~
~~Living~~ room
~~Lounge~~
~~Rumpus~~

[Dining room](#)
[Family room](#)
Indoor living areas NOS
[Living room](#)
[Lounge room](#)
[Rumpus room](#)

⊛Y92.3 Sports and athletics area

...

⊛Y92.33 Racetrack and racecourse

[Racetrack or racecourse:](#)

• [bicycle](#)

• [car](#)

• [dog](#)

• [horse](#)

• [motorcycle](#)

~~Bicycle~~

~~Car~~

~~Dog~~

~~Horse~~

~~Motorcycle~~

racetrack or racecourse

⊛Y92.34 Equestrian facility

Riding school

...

⊛Y92.6 Industrial and construction area

⊛Y92.60 Construction area

[Building under construction](#)

[Home \(unoccupied\) under construction](#)

[Tunnel under construction](#)

~~Building~~

~~Home (not yet occupied)~~

~~Tunnel~~

under
construction

⊛Y92.61 Demolition site

Derelict building or house for demolition

⊛Y92.8 Other specified place of occurrence

...

⊛Y92.84 Forest

[Bush in forest](#)

[Hiking trail in forest](#)

[National park in forest](#)

[Path in forest](#)

[Scrub in forest](#)

[Timber plantation in forest](#)

[Track in forest](#)

~~Bush~~

~~Hiking trail~~

~~National park~~

~~Path~~

~~Scrub~~

~~Timber plantation~~

~~Track~~

in forest

✪Y92.85 Desert
[Hiking trail in desert](#)
[Path in desert](#)
[Track in desert](#)
~~Hiking trail~~
~~Path~~ | in-desert
~~Track~~

...

✪Y92.88 Other specified place of occurrence
~~Campsite~~
~~Caravan site~~ | NOS
~~Dock~~
[Campsite NOS](#)
[Caravan site NOS](#)
[Dock NOS](#)
 Military training ground
 Park:
 • amusement
 • NOS
 • public
 Public place NOS
 Railway line
 Zoo

...

Z03 Medical observation and evaluation for suspected diseases and conditions

...

Z03.2 Observation for suspected mental and behavioural disorders
 Observation for:
 • [dissocial behaviour without manifest psychiatric disorder](#)
 • [fire-setting without manifest psychiatric disorder](#)
 • [gang activity without manifest psychiatric disorder](#)
 • [shop lifting without manifest psychiatric disorder](#)
~~dissocial behaviour~~
~~fire-setting~~
~~gang activity~~ | without manifest psychiatric disorder
~~shop lifting~~

Z03.3 Observation for suspected nervous system disorder
Excludes: newborn (Z03.72)

...

✪Z06 Resistance to antimicrobial drugs

...

✪Z06.6 Resistance to other antibiotics

▼0050

Use additional code (B95–B96) to identify infectious agents resistant to antibiotics if applicable.

...

✪Z06.67 Resistance to multiple antibiotics
~~Multi-resistant antibiotics~~
~~Resistance to multiple antibiotics~~ | NOS
[Multi-resistant antibiotics NOS](#)
[Resistance to multiple antibiotics NOS](#)

Note: This code should only be assigned when an infectious agent is resistant to two or more antibiotics but the type of antibiotics are not specified. Where multiple resistant antibiotics are specified, code each resistant antibiotic separately.

...

Z11**Special screening examination for infectious and parasitic diseases**

▼0052

Note: Screening is the testing for disease or disease precursors in asymptomatic individuals so that early detection and treatment can be provided for those who test positive for the disease.

...

Z11.8 Special screening examination for other infectious and parasitic diseases

[Chlamydial diseases](#)[Rickettsial diseases](#)[Spirochaetal diseases](#)[Mycoses diseases](#)

~~Chlamydial~~
~~Rickettsial~~
~~Spirochaetal~~
~~Mycoses~~ | diseases

Z11.9 Special screening examination for infectious and parasitic diseases, unspecified

...

Z30**Contraceptive management**

...

Z30.1 Insertion of contraceptive device

Insertion of:

- intrauterine contraceptive device (IUCD)
- subdermal:

• [contraceptive implant](#)• [hormone implant](#)

~~• contraceptive~~
~~• hormone~~ | implant

...

Z30.5 Surveillance of contraceptive device

Checking, reinsertion or removal of:

- intrauterine contraceptive device (IUCD)
- subdermal:

• [contraceptive implant](#)• [hormone implant](#)

~~• contraceptive~~
~~• hormone~~ | implant

Z30.8 Other contraceptive management

Postvasectomy sperm count

...

Z45**Adjustment and management of drug delivery or implanted device**

Excludes: malfunction or other complications of device — see Alphabetic Index
 presence of prosthetic and other devices (Z95–Z97)

...

Z45.1 Adjustment and management of drug delivery device

Adjustment and management of [infusion device or pump](#):• [external](#)• [implantable spinal](#)

~~• external~~
~~• implantable spinal~~ | ~~infusion device or pump~~

Note: A drug delivery device is an (external) infusion pump that is attached to a vascular access device or venous, spinal or other catheter to infuse substances over long periods of time.

Excludes: that for pharmacotherapy for neoplasm (Z51.1)

...

Z97**Presence of other devices**

▼0050

Excludes: complications of internal prosthetic devices, implants and grafts (T82–T85)
 fitting and adjustment of prosthetic and other devices (Z44–Z46)
 presence of cerebrospinal fluid drainage device (Z98.2)

...

Z97.5

Presence of contraceptive device

Presence of:

- intrauterine contraceptive device (IUCD)
- subdermal:
 - [contraceptive implant](#)
 - [hormone implant](#)

~~• contraceptive~~ | ~~implant~~
~~• hormone~~

Excludes: checking, reinsertion or removal of contraceptive device (Z30.5)
 insertion of contraceptive device (Z30.1)

...

CHAPTER 22**CODES FOR SPECIAL PURPOSES
(U00–U49, U78–U88)****U87****Diseases of the genitourinary system**

U87.1

Chronic kidney disease, stage 3–5

Chronic kidney:

- [failure, stage 3–5](#)
- [injury, stage 3–5](#)

~~• failure~~ | ~~stage 3–5~~
~~• injury~~

...

ICD-10-AM Alphabetic Index

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

...

- broad ligament [NEC](#) (see also *Disease/pelvis/inflammatory*) N73.2

- - [acute N73.0](#)

- Brodie's (chronic) (localised) M86.8-

...

- parametric, parametrium [NEC](#) (see also *Disease/pelvis/inflammatory*) N73.2

- - [acute N73.0](#)

- parapharyngeal J39.0

...

- wound, [postprocedural](#) T81.4

...

Anomaly, anomalous (congenital) (unspecified type) Q89.9

...

- ureter ([pelviureteric junction](#)) ([pyeloureteric junction](#)) Q62.8

- - [with pyelonephritis \(chronic\) N11.1](#)

- - obstructive Q62.30

- - - specified NEC Q62.39

- urethra NEC Q64.79

~~- - [with pyelonephritis \(pelviureteric junction\) \(pyeloureteric junction\) N11.1](#)~~

- - obstructive NEC Q64.32

...

Arachnoiditis (~~acute~~) (~~adhesive~~) (~~basal~~) (~~cerebrospinal~~) (~~see also Meningitis~~) ~~G03.9~~ — see [Meningitis](#)

~~- meningococcal (chronic) A39.0~~

~~- syphilitic (late) (tertiary) A52.1† G01*~~

~~- tuberculous A17.0~~

Arachnophobia F40.2

...

Barodontalgia ~~T70.2~~

- due to

- - [diving T70.3](#)

- - [high altitude T70.2](#)

Baron Münchhausen syndrome F68.1

Barosinusitis T70.1

Barotitis T70.0

Barotrauma NEC T70.9

- aural T70.0

- diving T70.3

- due to

- - [diving T70.3](#)

- - [high altitude T70.2](#)

~~- odontalgia~~

~~- due to~~

~~- - [diving T70.3](#)~~

~~- - [high altitude T70.2](#)~~

- otitic T70.0

- postprocedural T70.-

- pulmonary T70.3

- sinus T70.1

Barraquer(-Simons) disease or syndrome E88.1

...

Boil (see also *Abscess/by site*) L02.9

- Aleppo B55.1

- [auricle, ear H60.0](#)

- Baghdad B55.1

- corpus cavernosum N48.2

- Delhi B55.1

- [external auditory canal H60.0](#)

- eyelid H00.0

- lacrimal

...

Cancer (M8000/3) — *see also Neoplasm/malignant*

Note: The term 'cancer', when modified by an adjective or adjectival phrase indicating a morphological type, should be coded in the same manner as 'carcinoma' with that adjective or phrase. Thus, 'squamous cell cancer' should be coded in the same manner as 'squamous cell carcinoma', which appears in the list under 'Carcinoma'.

- [disseminated NEC \(see also Neoplasm/malignant/secondary\) C79.9](#)
- [generalised NEC \(see also Neoplasm/malignant/secondary\) C79.9](#)
- hereditary non-polyposis colorectal (HNPCC) — *see Neoplasm/malignant*
- [multiple secondary NEC C79.9](#)
- screening (for) — *see Screening/neoplasm*
- [unspecified site C80.9](#)

Cancer(o)phobia F45.2

...

Candidiasis, candidal B37.9

...

- neonatal P37.50
- - gastrointestinal P37.51
- - [generalised P37.52](#)
- - invasive ~~(generalised) (pulmonary) (systemic)~~ P37.52
- - [pulmonary P37.52](#)
- - sepsis P37.52
- - specified NEC P37.59
- - [systemic P37.52](#)
- - topical (mucocutaneous) (oral) (perineal) P37.51
- oesophagitis B37.81

...

Carcinoma (M8010/3) — *see also Neoplasm/malignant*

...

- undifferentiated (M8020/3)
- [unspecified site C80.9](#)
- urothelial (M8120/3)

...

Comatose ([see also Coma](#)) R40.2

...

Deformity Q89.9

...

- diaphragm (congenital) (hemidiaphragm) Q79.10
- - acquired J98.6
- - specified NEC Q79.19
- [digestive organ\(s\) or tract NEC \(see also Anomaly, anomalous/digestive organ\(s\) or tract\) Q45.9](#)
- duodenal bulb K31.88

...

Dermatitis L30.9

...

- eczematous NEC L30.9
- - [eyelid — see Dermatitis/eyelid](#)
- escharotica — *see Burn*

...

Deviation

...

- [ureter, or ureteric opening or orifice \(congenital\)](#)
- - with drainage via
- - - bladder neck Q62.61
- - - seminal vesicles Q62.66
- - - specified site NEC Q62.69
- - - unspecified site Q62.60
- - - urethra Q62.62
- - - vagina Q62.63
- - - vas deferens Q62.65
- - - vulva Q62.64

...

Disease, diseased — *see also Syndrome*

...

- nervous system G98
- - autonomic G90.9
- - central G96.9
- - - specified NEC G96.8
- - [congenital NEC Q07.9](#)
- - in pregnancy, childbirth or puerperium O99.3
- - parasympathetic G90.9
- - specified NEC G98
- - sympathetic G90.9
- - vegetative G90.9

...

Ectopic, ectopia (congenital)

...

- ureter [or ureteric opening or orifice](#)
- - with drainage via
- - - bladder neck Q62.61
- - - seminal vesicles Q62.66
- - - specified site NEC Q62.69
- - - unspecified site Q62.60
- - - urethra Q62.62
- - - vagina Q62.63
- - - vas deferens Q62.65
- - - vulva Q62.64

...

Encephalomyelitis (*see also Encephalitis*) G04.9

- acute disseminated (postimmunisation) G04.0
- - postinfectious G04.0
- - benign myalgic G93.3
- - due to or resulting from vaccination (any) G04.0
- - equine Venezuelan A92.2† G05.1*
- - myalgic, benign G93.3
- - postchickenpox B01.1
- - [postimmunisation G04.0](#)
- - postinfectious NEC G04.8
- - postmeasles B05.0
- - postvaccinal G04.0
- - postvaricella B01.1
- - rubella B06.0† G05.1*
- - specified NEC G04.8
- - Venezuelan equine A92.2† G05.1*

...

Fibrosis, fibrotic

...

- lung (atrophic) (capillary) (chronic) (confluent) (massive) (perialveolar) (peribronchial) J84.1

...

- - tuberculous [NEC](#) — (*see also Tuberculosis/pulmonary*) [A16.2](#)

...

Gastroenteritis (acute) (*see also Enteritis*) A09.9

...

- infectious ([haemorrhagic](#)) (*see also Enteritis/infectious*) A09.0
- - nonbacterial, of infancy A08.5
- - noninfectious K52.9
- - - specified NEC K52.8
- - rotaviral A08.0
- - salmonella A02.0
- - septic ([haemorrhagic](#)) A09.0
- - toxic NEC K52.1

...

Haemorrhage, haemorrhagic R58

- ...
- subarachnoid (nontraumatic) I60.9
- - fetus or newborn P52.5
- - - birth trauma P10.3
- - from
- - - anterior communicating artery I60.2
- - - basilar artery I60.4
- - - carotid siphon and bifurcation I60.0
- - - cavernous sinus I60.8
- - - [cerebral artery I60.7](#)
- - - [communicating artery I60.7](#)
- - - intracranial artery I60.7
- - - - specified NEC I60.6
- ...

Hemiplegia G81.9

- alternans facialis G83.89
- ascending NEC G81.9
- - spinal G95.8
- congenital (cerebral) G80.8
- - spastic G80.02
- embolic (current episode) I63.4
- [facial — see Paralysis/facial](#)
- flaccid G81.0
- hysterical F44.4
- ...

Hepatitis K75.9

- ...
- fulminant (~~viral~~) (with hepatic failure) NEC — (see [also Hepatitis/viral](#)) [K72.9](#)
- ...

Hernia, hernial (acquired) (recurrent) K46.9

Note: The following fifth character subdivision is for use with K40:

- 0 not specified as recurrent
- 1 recurrent

- with
- - gangrene (and obstruction) [NEC](#) (see also *Hernia/by site/with/gangrene*) K46.1
- - obstruction [NEC](#) (see also *Hernia/by site/with/obstruction*) K46.0
- ...
- double (~~inguinal~~) — [see Hernia/inguinal/bilateral K40.2-](#)
- - with
- - - gangrene (and obstruction) [K40.1-](#)
- - - obstruction [K40.0-](#)
- epigastric K43.9
- ...
- femoral ([unilateral](#)) K41.9
- - with
- - - gangrene (and obstruction) K41.4
- - - - [bilateral K41.1](#)
- - - obstruction K41.3
- - - - [bilateral K41.0](#)
- - bilateral K41.2
- ~~— with~~
- ~~— gangrene (and obstruction) K41.1~~
- ~~— obstruction K41.0~~
- ~~— unilateral K41.9~~
- ~~— with~~
- ~~— gangrene (and obstruction) K41.4~~
- ~~— obstruction K41.3~~
- foramen magnum G93.5
- ...

- inguinal (direct) (external) (funicular) (indirect) (internal) (oblique) (scrotal) (sliding) ([unilateral](#)) K40.9-
- - with
- - - gangrene (and obstruction) K40.4-
- - - - [bilateral K40.1-](#)
- - - obstruction K40.3-
- - - - [bilateral K40.0-](#)
- - bilateral K40.2-
- - - ~~with~~
- - - - ~~gangrene (and obstruction) K40.1-~~
- - - - ~~obstruction K40.0-~~
- - - - ~~unilateral K40.9-~~
- - - - ~~with~~
- - - - ~~gangrene (and obstruction) K40.4-~~
- - - - ~~obstruction K40.3-~~
- interstitial — see *Hernia/abdomen*
- ...

Hydrocephalus (acquired) (external) (internal) (malignant) (recurrent) G91.9

- ...
- congenital (external) (internal) Q03.9
- - with spina bifida (*see also Spina bifida/with hydrocephalus*) Q05.4-
- - - cervical Q05.0-
- - - dorsal Q05.1-
- - - - [dorsolumbar Q05.1-](#)
- - - lumbar Q05.2-
- - - lumbosacral Q05.2-
- - - sacral Q05.3-
- - - thoracic Q05.1-
- - - thoracolumbar Q05.1-
- - communicating Q03.81
- - specified NEC Q03.89
- ...

Implantation

- anomalous — see *Anomaly/by site*
- - ureter [or ureteric opening or orifice \(congenital\)](#)
- - - with drainage via
- - - - bladder neck Q62.61
- - - - seminal vesicles Q62.66
- - - - specified site NEC Q62.69
- - - - unspecified site Q62.60
- - - - urethra Q62.62
- - - - vagina Q62.63
- - - - vas deferens Q62.65
- - - - vulva Q62.64
- ...

Injury (*see also specified injury type*) T14.9

- ...
- scapular region S49.9
- - specified type NEC ~~S40.88~~[S49.8](#)
- sclera S05.8
- ...

Inversion

- ...
- sleep rhythm G47.2
- ~~nonorganic origin F51.2~~
- - [psychogenic F51.2](#)
- testis (congenital) Q55.29
- ...

Leptomeningitis (~~chronic~~) (~~circumscribed~~) (~~haemorrhagic~~) (~~nonsuppurative~~) (~~see also Meningitis~~) G03.9 — [see Meningitis](#)

~~- tuberculous A17.0~~

Leptomeningopathy NEC G96.1

...

Lymphoma (malignant) (M9590/3) C85.9

...

- nodal marginal [zone](#) (M9699/3) C83.0

...

- T-cell NEC (M9702/3) C84.4

- - adult (leukaemia/lymphoma) (M9827/3) C91.5-

- - angiocentric (M9719/3) C86.0

- - angioimmunoblastic (M9705/3) C86.5

- - cutaneous (CTCL) (primary) (M9709/3) C84.8

- - - CD4-positive small/medium (M9709/3) C84.5

- - - CD8-positive aggressive epidermotropic cytotoxic (M9709/3) C84.5

- - - CD30-positive large (M9718/3) C86.6

- - - gamma-delta (M9726/3) C84.4

- - enteropathy

- - - associated (M9717/3) C86.2

- - - type (intestinal) (M9717/3) C86.2

- - hepatosplenic (alpha-beta and gamma-delta types) (M9716/3) C86.1

- - large, primary cutaneous CD30-positive (M9718/3) C86.6

- - lymphoblastic (M9729/3) C83.5

- - mature NEC (M9702/3) C84.4

- - panniculitis-like, subcutaneous (M9708/3) C86.3

- - peripheral (M9702/3) C84.4

- - - angioimmunoblastic lymphadenopathy with dysproteinaemia (AILD) (M9705/3) C86.5

- - - large cell (M9702/3) C84.4

- - - pleomorphic (medium and large cell) (small cell) (M9702/3) C84.4

- - [rich diffuse large B-cell C83.3](#)

- - subcutaneous panniculitis-like (M9708/3) C86.3

...

Malignancy (M8000/3) — [see also Neoplasm/malignant](#)

- [disseminated NEC \(see also Neoplasm/malignant/secondary\) C79.9](#)

- [generalised NEC \(see also Neoplasm/malignant/secondary\) C79.9](#)

Malignant — [see condition](#)

...

Obstruction, obstructed, obstructive

...

- artery ([see also Embolism/artery](#)) I74.9

- - basilar (complete) (partial) ([see also Occlusion/artery/basilar](#)) I65.1

- - carotid (complete) (partial) ([see also Occlusion/artery/carotid](#)) I65.2

- - [cerebellar \(see also Occlusion/artery/cerebellar\) I66.3](#)

- - [cerebral \(see also Occlusion/artery/cerebral\) I66.9](#)

- - precerebral ([see also Occlusion/artery/precerebral](#)) I65.9

- - renal N28.0

- - retinal NEC H34.2

- - - central H34.1

- - - transient H34.0

- - vertebral (complete) (partial) ([see also Occlusion/artery/vertebral](#)) I65.0

...

Odontalgia K08.88

- [due to](#)

- - [diving T70.3](#)

- - [high altitude T70.2](#)

Odontoameloblastoma (M9311/0) D16.5

...

Osteitis (see also *Osteomyelitis*) M86.9-

- alveolar K10.3
- condensans M85.3-
- deformans (see also *Paget's disease/bone*) M88.9
- - in (due to)
- - - malignant neoplasm of bone (M8000/3) C41.9† M90.6-*
- - - neoplastic disease NEC (M8000/1) (see also *Neoplasm*) D48.9† M90.6-*
- - skull M88.0
- - specified NEC M88.8-
- due to yaws ([gummatous](#)) A66.6† M90.2-*
- fibrosa NEC M85.6-

...

Pachymeningitis (~~adhesive~~) (~~basal~~) (~~cerebral~~) (~~spinal~~) (~~see also Meningitis~~) G03.9 — see [Meningitis](#)

...

Paresis (see also *Paralysis*) G83.9

- accommodation H52.5

- Bernhardt's G57.1

...

Perforation, perforated (nontraumatic)

...

- tympanum, [tympanic](#) (membrane) (persistent post traumatic) (postinflammatory) H72.9

- - attic H72.1
- - central H72.0
- - marginal NEC H72.2
- - multiple H72.8
- - pars flaccida H72.1
- - specified NEC H72.8
- - total H72.8
- - traumatic S09.2

...

Periostitis (circumscribed) (diffuse) (infective) (see also *Osteomyelitis*) M86.9-

- with osteomyelitis M86.8-
- - acute M86.1-
- - chronic NEC M86.6-
- - subacute M86.2-
- alveolar K10.3
- alveolodental K10.3
- gonorrhoeal A54.4† M90.1-*
- jaw (lower) (upper) K10.2
- monomelic M86.9-
- orbital H05.0
- syphilitic A52.7† M90.1-*
- - congenital (early) A50.0† M90.1-*
- - secondary A51.4† M90.1-*
- tuberculous (see also *Tuberculosis/bone*) A18.0† M90.0-*
- yaws (early) ([gummatous](#)) (hypertrophic) (late) A66.6† M90.1-*

...

Regurgitation

- aortic (valve) (see also *Insufficiency/aortic*) I35.1
- - syphilitic A52.0† I39.1*
- food (see also *Vomiting*) R11
- - with reswallowing — see *Rumination*
- - newborn P92.1
- gastric contents (see also *Vomiting*) R11
- heart — see *Endocarditis*
- mitral (valve) — see [also](#) *Insufficiency/mitral*
- - congenital Q23.3

...

Senescence (without mention of psychosis) ([see also Senile](#)) R54

...

Spondylosis M47.9-

- with

...

- sacral, sacrococcygeal M47.88

- specified NEC M47.8-

- [thoracic M47.84](#)

- traumatic M48.3-

...

Tear, torn (traumatic) (*see also Wound, open*) T14.1

- capsule, ~~joint~~ — *see Sprain*

- ~~joint~~ — *see Sprain*

- [lens, accidental during procedure H59.13](#)

- cartilage — *see also Sprain*

...

- knee cartilage

- - articular (current) S83.3

- - old M23.2-

- [lens capsule, accidental during procedure H59.13](#)

- ligament — *see also Sprain*

...

Weak, weakness (generalised) R53

- arches (acquired) M21.4

- - congenital Q66.5

- bladder (sphincter) R32

- [facial](#) — *see Paralysis/facial*

- foot (double) — *see Weak/arches*

- heart, cardiac (*see also Failure/heart*) I50.9

External Causes of Injury Alphabetic Index

Asphyxia, asphyxiation ([mechanical](#)) (*see also Suffocation*) W84

- by
- - any object, except food or vomitus NEC (*see also Foreign body/aspiration/with asphyxia, obstruction of respiratory passage, suffocation/by type of object*) W80.9
- - chemical in war operations Y36.7
- - food (bone) (seed) W79
- - fumes in war operations (chemical weapons) Y36.7
- - gas (accidental) (*see also Table of drugs and chemicals*) X47.-
- - - in war operations (chemical weapons) Y36.7
- - - intentional self-poisoning X67.-
- - - legal
- - - - execution Y35.5
- - - - intervention Y35.2
- - - undetermined intent Y17.-
- ~~mechanical means (*see also Suffocation*) W84~~
- - vomitus W78
- ...

Contact (accidental)

- with
- ...
- - bumble bee X23.31
- - [butterfly \(cocoon\) X25.2](#)
- - can
- ...
- - mobile elevated work platform (MEWP) W31.8
- - - stationary W17.5
- - [moth \(cocoon\) X25.2](#)
- - motor vehicle glass W25.5
- ...

Place of occurrence of external cause Y92.9

- ...
- water [NEC Y92.88](#)
- - bank Y92.83
- - bay Y92.82
- - beach Y92.83
- - brook Y92.81
- - canal Y92.81
- - creek Y92.81
- - dam Y92.80
- - flooded area Y92.81
- - foreshore Y92.83
- - ice, natural (in) Y92.80
- - - bay Y92.82
- - - lake Y92.82
- - - ocean Y92.82
- - - sea Y92.82
- - - stream Y92.81
- - lake Y92.82
- - marsh Y92.80
- - ocean Y92.82
- - pond Y92.80
- - pool Y92.80
- - river Y92.81
- - rivulet Y92.81
- - sea Y92.82
- - shore Y92.83
- - still Y92.80
- - stream Y92.81
- - swamp Y92.80
- - trickle Y92.81



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**Removal of braces (|)
Part 2 ACHI**

Introduction/Rationale:

This addenda proposal was created to address the issue of braces (|) in ICD-10-AM and ACHI Tabular Lists. This convention derives from ICD-10.

The inclusion of braces in ICD-10-AM and ACHI is problematic as the relevant terms require manual formatting in postproduction. This action adds to the postproduction burden, and increases the likelihood of error.

ACCD proposes to remove or replace all braces in ICD-10-AM and ACHI to avoid the above issues.

Reference to braces will also be deleted from the Conventions.

Formatting 'tidy up' of some sections of the Tabular List and Alphabetic Index is also proposed.

For ease of review, this addenda proposal is split into two documents:

- Part 1 ICD-10-AM
- Part 2 ACHI

ACCD PROPOSAL

ACHI TABULAR LIST

INTRODUCTION

... CONVENTIONS USED IN THE ACHI TABULAR LIST OF INTERVENTIONS

...

PUNCTUATION

...

~~Braces are used to enclose a series of terms, each of which is modified by the statement appearing at the right of the brace.~~

...

Includes note

...

EXAMPLE 4:

30394-00 [987] — *Drainage of intra-abdominal abscess, haematoma or cyst*

Includes:

| | | |
|------------------|--|----------------------------------|
| appendiceal | | abscess,
haematoma or
cyst |
| iliac fossa | | |
| intraperitoneal | | |
| pelvic | | |
| pouch of Douglas | | |
| subhepatic | | |
| subphrenic | | |
| peritonitis | | |

EXAMPLE 5:

306 Other procedures on external ear

Includes: auricle
external auditory canal

...

3**Insertion of intracranial cerebrospinal fluid devices**[Replacement of cerebrospinal fluid devices](#)[Revision of cerebrospinal fluid devices](#)~~Replacement
Revision~~ | ~~of cerebrospinal fluid devices~~

39015-00 Insertion of external ventricular drain

...

10**Postoperative reopening of craniotomy or craniectomy site**

39721-00 Postoperative reopening of craniotomy or craniectomy site

▼0039

Decompression of oedema postoperative

[Postoperative drainage or removal:](#)• [abscess](#)• [haematoma](#)• [haemorrhage](#)• [infection](#)~~Drainage of:~~• ~~haemorrhage~~• ~~infection~~~~Removal of:~~• ~~abscess~~• ~~haematoma~~

| postoperative

Includes: removal of skull flap
that via osteoplastic flap

...

16**Other intracranial excision***Excludes:* excision by skull base surgery (39640-00, 39642-00, 39646-00, 41581-00, 39650-00, 39653-00, 39658-00, 39660-02, 39662-02, 90032-00 [17])

39718-00 Removal of brain cyst

[Marsupialisation of brain cyst](#)[Removal of arachnoidal cyst](#)~~Marsupialisation of brain~~~~Removal of arachnoidal~~

| cyst

...

17**Skull base surgery for lesion***Includes:* any associated reparative or reconstructive surgery
that for vascular lesions

...

90032-00 Removal of lesion involving posterior cranial fossa

Includes: via:• ~~translabyrinth~~• ~~transmastoid~~• ~~transoral~~

| approach

• [translabyrinth approach](#)• [transmastoid approach](#)• [transoral approach](#)

39653-00 Removal of lesion of petroclivus and clivus

Includes: via:• ~~infratentorial~~• ~~supratentorial~~

| approach

• [infratentorial approach](#)• [supratentorial approach](#)

39658-00 Excision of lesion of clivus
Includes: via:
~~• transmaxillary~~ | ~~approach~~
~~• transoral~~
 • [transmaxillary approach](#)
 • [transoral approach](#)

39660-02 Excision of lesion of cavernous sinus
Includes: with intracranial carotid artery exposure

39662-02 Excision of lesion of foramen magnum
Includes: via:
~~• far lateral suboccipital~~ | ~~approach~~
~~• transcondylar~~
 • [far lateral suboccipital approach](#)
 • [transcondylar approach](#)

...

23

Cranioplasty

Reconstructive cranioplasty

Includes: fat graft

Code also when performed:

- excision of skull lesion (39700-00 [13])
- procurement of fat for graft via separate incision (45018-04 [1666])

Excludes: that of skull fracture (39606, 39609-01, 39609-02, 39612 [25])
 that with intracranial procedure – omit cranioplasty code

...

40600-02 Cranioplasty with skull flap
 Repair of skull with bone flap
[Replacement of skull flap](#)
[Revision of skull flap](#)
~~Replacement~~ | ~~of skull flap~~
~~Revision~~

40600-03 Other cranioplasty
~~Cranial osteoplasty~~ | ~~NOS~~
~~Cranioplasty~~
~~Repair of skull~~

...

28

Other procedures on skull, meninges or brain

...

90007-02 Other procedures on brain or cerebral meninges
 Choroid plectomy
 Curettage of brain or cerebral meninges
 Debridement of brain or cerebral meninges
 Decortication of cerebral meninges
[Excision of:](#)
 • [brain or cerebral meninges NOS](#)
 • [lesion of brain NOS](#)
~~Excision of:~~
~~• brain or cerebral meninges~~ | ~~NOS~~
~~• lesion of brain~~
 Incision of brain NOS
 Lobotomy of brain
 Lysis of cortical adhesions
 Repair of brain NOS
 Tractotomy of brain

...

41 Insertion and removal of spinal cerebrospinal fluid drain

▼0634

Excludes: cerebrospinal fluid shunt (40006-00, 40009-05 [42], 40009-02 [56])

40018-00 Insertion of lumbar cerebrospinal fluid drain

Insertion of external lumbar drain

[Replacement of lumbar cerebrospinal fluid drain](#)

[Revision of lumbar cerebrospinal fluid drain](#)

~~Replacement~~ | ~~of lumbar cerebrospinal fluid drain~~
~~Revision~~

...

42 Insertion and removal of spinal cerebrospinal fluid shunt

Excludes: lumbar cerebrospinal fluid drain (40018-00, 90008-00 [41])
revision of spinal shunt (40009-02 [56])

40006-00 Insertion of spinal shunt

▼0634

Insertion of lumboperitoneal shunt

Excludes: that with laminectomy (40342-00 [42])

40342-00 Insertion of cerebrospinal fluid shunt with laminectomy

Procedure performed for syringomyelia and hydromyelia

~~Includes: syringoperitoneal~~ | ~~shunt~~
~~syringopleural~~

[Includes: syringoperitoneal shunt](#)

[syringopleural shunt](#)

40009-05 Removal of spinal shunt

43 Insertion, replacement or removal of epidural electrodes

Note: Performed for pain relief

39130-00 Percutaneous insertion of epidural electrodes

[Percutaneous:](#)

• [burying of epidural electrodes](#)

• [threading of epidural electrodes](#)

• [tunnelling of epidural electrodes](#)

~~Percutaneous:~~

~~• burying~~

~~• threading~~

~~• tunnelling~~

| ~~of epidural electrodes~~

Includes: intraoperative test stimulation

39139-00 Insertion of epidural electrodes by laminectomy

[Replacement of epidural electrodes by open approach](#)

[Revision of epidural electrodes by open approach](#)

~~Replacement~~ | ~~of epidural electrodes by open approach~~
~~Revision~~

Includes: intraoperative test stimulation

...

51 Discectomy for recurrent disc lesion

[Discectomy for recurrent disc lesion via:](#)

- [laminectomy](#)
- [laminotomy](#)

[Excision of intervertebral disc for recurrent disc lesion](#)

~~Discectomy via:~~

- ~~laminectomy~~
 - ~~laminotomy~~
- ~~Excision of intervertebral disc~~ | ~~for recurrent disc lesion~~

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

Excludes: that with intervertebral disc prosthesis (see block [59])

...

55 Repair of spinal canal or spinal cord structures

...

...

90011-02 Other repair on spinal canal or spinal cord structures

Repair of:

- [spinal cord NOS](#)
- [spinal meninges NOS](#)

- ~~spinal cord~~
 - ~~spinal meninges~~
- | NOS

...

56 Revision procedures on spinal canal or spinal cord structures

...

40009-02 Revision of spinal shunt

▼0634

[Replacement of spinal shunt](#)

[Revision of lumboperitoneal shunt](#)

- ~~Replacement of spinal~~
 - ~~Revision of lumboperitoneal~~
- | shunt

Excludes: revision of distal peritoneal site (90330-00 [1001])

...

59 Other procedures on spinal canal or spinal cord structures

...

90011-01 Other procedures on spinal canal or spinal cord structures

Curettage of spinal cord or spinal meninges

Debridement of spinal cord or spinal meninges

Exploration of [spinal](#):

- [canal NOS](#)
- [nerve root NOS](#)

- ~~spinal canal~~
 - ~~spinal nerve root~~
- | NOS

Removal of foreign body from spinal canal

...

65 Administration of therapeutic agent around sympathetic nervous system

[Chemical:](#)

- [ablation of sympathetic chain](#)
- [sympathectomy](#)

[Sympathetic nervous system block](#)

Includes: that with anaesthetic or sympatholytic agent

~~Chemical ablation of sympathetic chain~~
~~Chemical sympathectomy~~
~~Sympathetic nervous system block~~ | ~~with anaesthetic or~~
~~sympatholytic agent~~

...

66

Administration of neurolytic agent into sympathetic nervous system

Chemical:

- [ablation of sympathetic chain with neurolytic agent](#)
- [sympathectomy with neurolytic agent](#)

Sympathetic nervous system block with neurolytic agent

~~Chemical ablation of sympathetic chain~~
~~Chemical sympathectomy~~
~~Sympathetic nervous system block~~ | ~~with neurolytic agent~~

...

81

Surgical sympathectomy

Division of sympathetic nerve

Neurectomy of sympathetic nerve

~~Division~~
~~Neurectomy~~ | ~~of sympathetic nerve~~

Excludes: reoperation for previous surgical sympathectomy (35006-00, 35009-00, 90015-00 [85])

...

85

Reoperation for previous sympathectomy

Includes: that following previous chemical sympathectomy
that for previous incomplete surgical sympathectomy

...

90015-00 Other surgical sympathectomy, reoperation

Reoperation:

- [periarterial surgical sympathectomy](#)
- [sphenopalantine surgical ganglionectomy](#)
- [sympathetic surgical ganglionectomy](#)

~~Periarterial surgical sympathectomy~~
~~Sphenopalantine surgical ganglionectomy~~
~~Sympathetic surgical ganglionectomy~~ | ~~reoperation~~

...

111

Incision procedures on thyroid

90047-01 Incision of thyroid

~~Drainage of haematoma~~
~~Exploration of thyroid~~ | ~~by incision~~

Drainage of haematoma

Exploration of thyroid

Removal of foreign body

Thyroidotomy NOS

Excludes: postoperative exploration (90047-02 [111])
removal of haematoma by aspiration (90047-00 [110])

...

114

Thyroidectomy

...

30297-02 Thyroidectomy following previous thyroid surgery

Thyroidectomy following previous thyroid surgery:

- [completion](#)
- [subtotal](#)
- [total](#)
- [with removal of substernal thyroid](#)

Unilateral total thyroid lobectomy, following previous thyroid surgery

~~Completion thyroidectomy~~

Subtotal thyroidectomy
 Thyroidectomy with removal of substernal thyroid
 Total:
 • thyroid lobectomy, unilateral
 • thyroidectomy

following previous thyroid surgery

90046-02 Thyroidectomy with removal of substernal thyroid

Removal of substernal thyroid with:

- subtotal thyroid lobectomy (bilateral) (unilateral)
- total thyroidectomy (bilateral) (unilateral)

~~Subtotal thyroid (bilateral) (unilateral) lobectomy~~
~~Total (bilateral) (unilateral) thyroidectomy~~

with removal of substernal thyroid

Includes: that via:

...

...

124 Biopsy of pituitary gland

30075-05 Biopsy of pituitary gland, transfrontal approach

30075-06 Biopsy of pituitary gland, transsphenoidal approach

~~Includes: transthemoidal~~
~~transnasal~~ approach

Includes: transthemoidal approach
transnasal approach

125 Other excision procedures on pituitary gland

...

39715-01 Partial excision of pituitary gland, transsphenoidal approach

Removal of lesion of pituitary gland via transsphenoidal approach

~~Includes: transthemoidal~~
~~transnasal~~ approach

Includes: transthemoidal approach
transnasal approach

Excludes: that for removal of craniopharyngioma (39712-02 [125])

...

128 Removal of thymus

Removal of thymoma
 Thymectomy

90049-01 Endoscopic thymectomy

Mediastinoscopic thymectomy

Thoracoscopic thymectomy

Video assisted thoracoscopic surgery [VATS] thymectomy

~~Mediastinoscopic~~
~~Thoracoscopic~~
~~Video assisted thoracoscopic~~
~~surgery [VATS]~~ thymectomy

Excludes: that with transcervical thymectomy (38448-02 [128])

...

161 Excision procedures on eyeball

...

42515-00 Evisceration of eyeball with insertion of implant

~~Includes: cartilaginous~~
~~intrascleral ball~~ implant

Includes: cartilaginous implant
intrascleral ball implant

...

42509-00 Enucleation of eyeball with insertion of implant

~~Includes: hydroxy apatite (coralline)
integrated sphere~~ | implant

Includes: hydroxy apatite (coralline) implant
integrated implant
sphere implant

200 Extraction of crystalline lens

Code also when performed:

- insertion of intraocular lens (see block [193])

...

42731-01 Extraction of crystalline lens with removal of vitreous

Limbal:

• capsulectomy with vitrectomy

• lensectomy with vitrectomy

Pars plana lensectomy with vitrectomy

~~Limbal:~~

~~• capsulectomy~~

~~• lensectomy~~

~~Pars plana lensectomy~~

| with vitrectomy

Includes: division of vitreal bands

removal of epiretinal membranes

...

206 Destruction procedures on aqueous or vitreous

42791-03 Destruction procedures on aqueous or vitreous

Aqueous or vitreous:

• fibrinolysis

• vitrealysis

~~Fibrinolysis~~

~~Vitreolysis~~

| of aqueous or vitreous

Includes: that by laser

...

217 Other repair of extraocular muscle

42854-00 Repair of ruptured extraocular muscle

Freeing of entrapped extraocular muscle

Lysis of extraocular muscle adhesions

~~Freeing of entrapped~~

~~Lysis of adhesions of~~

| extraocular muscle

Repair of laceration of:

- extraocular muscle or tendon
- Tenon's capsule

...

221 Application, insertion or removal procedures on orbit

42824-00 Retrobulbar administration of alcohol or other drug

90606-02 Removal of orbital implant

~~Includes: alloplastic~~

~~silastic~~

~~synthetic (artificial)~~

| implant

(patch)

Includes: alloplastic implant (patch)

silastic implant (patch)

synthetic (artificial) implant (patch)

Excludes: that from anophthalmic orbit (42518-04 [164])

...

387 Maxillary antrostomy

...

41713-00 Radical maxillary antrostomy with transantral ethmoidectomy

Transantral ethmoidectomy with:

- Caldwell-Luc antrostomy
- radical maxillary antrectomy

~~Caldwell-Luc antrostomy~~ | ~~with transantral ethmoidectomy~~
~~Radical maxillary antrectomy~~

41713-01 Radical maxillary antrostomy with transantral vidian neurectomy

Transantral vidian neurectomy with:

- Caldwell-Luc antrostomy
- radical maxillary antrectomy

~~Caldwell-Luc antrostomy~~ | ~~with transantral vidian neurectomy~~
~~Radical maxillary antrectomy~~

...

397 Excision procedures on salivary gland or duct

...

30255-00 Removal of submandibular ducts

Submandibular duct(s):

- diversion
- relocation

~~Diversion~~ | ~~of submandibular ducts~~
~~Relocation~~

Note: Performed for control of drooling

...

398 Repair procedures on salivary gland or duct

...

41910-00 Transposition of duct of major salivary gland

~~Includes: parotid~~ | ~~gland~~
~~sublingual~~
~~submandibular~~

Includes: parotid gland
sublingual gland
submandibular gland

...

401 Incision procedures on mouth, palate or uvula

...

96215-00 Incision and drainage of lesion in oral cavity

Drainage of oral cavity:

- abscess
- cyst

~~abscess~~ | ~~in oral cavity~~
~~cyst~~

...

451 Dental radiological examination and interpretation

...

97025-00 Intraoral occlusal radiography, per exposure

~~Includes: mandibular~~ | ~~view~~
~~maxillary~~

Includes: mandibular view
maxillary view

...

466 **Tooth-coloured restoration**

~~Direct restoration, using adhesive technique~~ | with tooth-coloured material
~~Indirect restoration~~

~~Includes: compomer composite resin glass ionomer polymer glass resin composite~~ | restoration

Includes: compomer restoration using:
• composite resin
• glass ionomer
• polymer glass
• resin composite

sealing of non carious pits, fissures or cracks in enamel of molar or premolar tooth

...

531 **Other procedures on larynx**

...

90160-00 Other procedures on larynx
Closure of laryngeal fistula
Suture of laryngeal laceration
~~Closure of fistula~~ | of larynx
~~Suture of laceration~~

...

543 **Examination procedures on bronchus**

Includes: bronchial lavage
electromagnetic navigation
fluoroscopic guidance
that using:
• fiberoptic bronchoscope
• rigid bronchoscope
~~• fiberoptic~~ | bronchoscope
~~• rigid~~

Excludes: that with:
• argon plasma coagulation (lesion) (tissue):
...

...

544**Endoscopic biopsy, broncho-alveolar lavage or removal of foreign body from bronchus**

Includes: bronchial lavage
 bronchoscopy
 electromagnetic navigation
 fluoroscopic guidance

41898-04 Endoscopic [needle] biopsy of bronchus
 Bronchoscopy with (needle) biopsy of bronchus

Includes: that with:

- [fibreoptic bronchoscope](#)
 - [linear bronchoscope](#)
 - [rigid bronchoscope](#)
- ▲ fibreoptic
 ▲ linear
 ▲ rigid
- |
- bronchoscope

41898-02 Endoscopic broncho-alveolar lavage [BAL]
 Bronchoscopy (fibreoptic) with broncho-alveolar lavage [BAL]

41895-02 Endoscopic removal of foreign body from bronchus
 Bronchoscopy with removal of foreign body from bronchus

Includes: that with:

- [fibreoptic bronchoscope](#)
 - [linear bronchoscope](#)
 - [rigid bronchoscope](#)
- ▲ fibreoptic
 ▲ linear
 ▲ rigid
- |
- bronchoscope

...

549**Incision procedures on lung or pleura**

...

38418-04 Incision of lung
[Drainage of lung cyst or abscess](#)
[Pneumonotomy with exploration of lung](#)
 Drainage of cyst or abscess
 Pneumonotomy with exploration

|

of lung

...

551**Partial resection of lung**

...

38438-00 Segmental resection of lung
[Partial lobectomy of lung](#)
[Segmentectomy of lung](#)
 Partial lobectomy
 Segmentectomy

|

of lung

...

562**Destruction procedures on chest wall, mediastinum or diaphragm**

38656-01 Reopening of thoracotomy or sternotomy site
 ▼0039

Control of postoperative intrathoracic haemorrhage
 Postoperative reopening of:

- [sternotomy site](#)
 - [thoracotomy site](#)
- ▲ sternotomy
 ▲ thoracotomy
- |
- site

...

563 **Excision procedures on chest wall, mediastinum or diaphragm**

96216-00 Percutaneous [needle] biopsy of chest wall, mediastinum or diaphragm
Percutaneous fine needle:
[• aspiration of chest wall, mediastinum or diaphragm](#)
[• biopsy of chest wall, mediastinum or diaphragm](#)
▲aspiration | chest wall, mediastinum or
▲biopsy | diaphragm

...

566 **Other repair procedures on chest wall, mediastinum or diaphragm**

...

43915-00 Plication of diaphragm
Includes: that via:
[• abdominal approach](#)
[• thoracic approach](#)
▲abdominal | approach
▲thoracic

Note: Performed for eventration

...

90178-00 Other repair of diaphragm
[Closure of diaphragm fistula](#)
[Suture of diaphragm laceration](#)
Closure of fistula | of diaphragm
Suture of laceration

...

568 **Airway management**

▼1006

Note: The codes relating to management alone include installation of saline or suction clearance of the airway

...

90179-05 Management of nasopharyngeal intubation
Management of:
[• choanal atresia stent](#)
[• nasopharyngeal stent](#)
▲choanal atresia | stent
▲nasopharyngeal

Excludes: management with:
• initiation of nasopharyngeal intubation (90179-02 [568])
• repair of choanal atresia (45645-00, 45646-00 [1681])
• replacement of nasopharyngeal device (96190-01 [568])
• ventilatory support (92209 [570])

96190-01 Replacement of nasopharyngeal device
Replacement of:
[• choanal atresia stent](#)
[• nasopharyngeal stent](#)
▲choanal atresia | stent
▲nasopharyngeal

Includes: irrigation and suction

96190-02 Removal of nasopharyngeal device
Removal of:
[• choanal atresia stent](#)
[• nasopharyngeal stent](#)
▲choanal atresia | stent
▲nasopharyngeal

Code also when performed:

- debridement of wound (90686-01 [1628])
- pharyngoscopy (nasopharyngoscopy) (41764-02 [416])

Excludes: that with replacement (96190-01 [568])

...

569 Ventilatory support

▼1006, 1615

Bi-level positive airway pressure [BiPAP] [airway pressure release ventilation] [pressure control ventilation] by endotracheal tube/tracheostomy

Continuous positive airway pressure [CPAP] by endotracheal tube/tracheostomy

Intermittent mandatory ventilation [IMV]

[Invasive ventilation](#)

[Mechanical ventilation](#)

Invasive
Mechanical | ventilation

Positive end expiratory pressure [PEEP]

Pressure support ventilation [PSV]

Synchronous intermittent mandatory ventilation [SIMV]

...

642 Myocardial preservation

...

22075-00 Deep hypothermia with circulatory arrest

[Deep hypothermic cardiac arrest](#)

[Hypothermic arrest](#)

Deep hypothermic cardiac
Hypothermic | arrest

Excludes: that performed in conjunction with cardiac surgery – omit code

...

650 Insertion of cardiac pacemaker generator

▼0936

38353-00 Insertion of cardiac pacemaker generator

Insertion of:

- biventricular pacemaker

- cardiac:

- pacemaker device
- resynchronisation therapy [CRT] device

- [dual chamber pacemaker](#)

- [single chamber pacemaker](#)

- [triple chamber pacemaker](#)

• dual
• single
• triple | chamber pacemaker

...

▼0936

90203-00 Adjustment of transvenous electrode for cardiac pacemaker

[Transvenous electrode for cardiac pacemaker:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)
- [stabilisation](#)

~~Repair
Repositioning
Revision
Stabilisation~~ | of transvenous electrode for cardiac pacemaker

Excludes: that:

- of left ventricle via thoracotomy, sternotomy or subxyphoid approach (90203-02 [654])
- with defibrillator functionality (90203-08 [654])

90203-08 Adjustment of transvenous electrode for cardiac defibrillator

[Transvenous electrode for cardiac defibrillator:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)
- [stabilisation](#)

~~Repair
Repositioning
Revision
Stabilisation~~ | of transvenous electrode for cardiac defibrillator

Excludes: that of left ventricle via thoracotomy, sternotomy or subxyphoid approach (90203-09 [654])

90203-02 Adjustment of left ventricular electrode for cardiac pacemaker via thoracotomy, sternotomy or subxyphoid approach

Excludes: that with defibrillator functionality (90203-09 [654])

90203-09 Adjustment of left ventricular electrode for cardiac defibrillator via thoracotomy, sternotomy or subxyphoid approach

38456-21 Adjustment of epicardial electrode for cardiac pacemaker

[Epicardial electrode for cardiac pacemaker:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)
- [stabilisation](#)

~~Repair
Repositioning
Revision
Stabilisation~~ | of epicardial electrode for cardiac pacemaker

Includes: that via:

- sternotomy
- subxyphoid approach
- thoracotomy

Excludes: that with defibrillator functionality (38456-28 [654])

38456-28 Adjustment of epicardial electrode for cardiac defibrillator

[Epicardial electrode for cardiac defibrillator:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)
- [stabilisation](#)

~~Repair
Repositioning
Revision
Stabilisation~~ | of epicardial electrode for cardiac defibrillator

Includes: that via:

- sternotomy

- subxyphoid approach
- thoracotomy

655 Adjustment, replacement or removal of cardiac pacemaker generator

▼0936

90203-05 Adjustment of cardiac pacemaker generator

[Cardiac pacemaker generator:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)

~~Repair~~
~~Repositioning~~ | ~~of cardiac pacemaker generator~~
~~Revision~~

Includes: revision or relocation of skin pocket
 testing of implanted cardiac pacemaker or defibrillator

Excludes: revision or relocation of skin pocket alone (90219-00 [663])

656 Adjustment, replacement or removal of cardiac defibrillator generator

▼0936

90203-06 Adjustment of cardiac defibrillator generator

[Cardiac defibrillator generator:](#)

- [repair](#)
- [repositioning](#)
- [revision](#)

~~Repair~~
~~Repositioning~~ | ~~of cardiac defibrillator generator~~
~~Revision~~

Includes: revision or relocation of skin pocket
 testing of implanted cardiac pacemaker or defibrillator

Excludes: revision or relocation of skin pocket alone (90219-00 [663])

...

690 Closure of patent ductus arteriosus

~~*Includes:* clipping~~
~~division~~ | ~~of patent ductus arteriosus~~
~~ligation~~

[Includes: clipping](#)
[division](#)
[ligation](#)

...

700 Endarterectomy

Includes: closure by suture

Excludes: coronary artery endarterectomy (38505-00 [669])
 that with arterial bypass to prepare site for anastomosis (33554-00 [701])

...

33539-00 Endarterectomy of extremities

Endarterectomy of:

- [common femoral artery](#)
- [superficial femoral artery](#)

~~• common~~
~~• superficial~~ | femoral artery

Excludes: extended endarterectomy of deep femoral artery (33542-00 [700])

...

717**Repair procedures on pulmonary artery for congenital heart disease**

...

38733-00 Creation of systemic pulmonary shunt

Creation of shunt:

- [ascending aorta to pulmonary artery](#)
- [descending aorta to pulmonary artery](#)
- [subclavian to pulmonary artery](#)

- ~~ascending aorta~~
- ~~descending aorta~~
- ~~subclavian~~

to pulmonary artery

...

727**Interruption of varicose veins of lower limb****Includes:** division

- excision
- injection
- ligation
- stripping

Excludes: banding or cuffing of saphenous vein (34824-00 [721])
 endovenous interruption of veins (32520-00 [728])

32508-00 Interruption of varicose veins of great (long) and/or small (short) saphenous veins

Interruption of:

- ~~sapheno-femoral~~
- ~~sapheno-femoral and sapheno-popliteal~~
- ~~sapheno-popliteal~~

junction varicose veins

- [sapheno-femoral junction varicose veins](#)
- [sapheno-femoral and sapheno-popliteal junction varicose veins](#)
- [sapheno-popliteal junction varicose veins](#)

- varicose veins of lower limb NOS

32504-00 Interruption of varicose veins of multiple tributaries

Stab:

- [avulsions of varicose veins](#)
- [phlebectomy of varicose veins](#)

- ~~avulsions~~
- ~~phlebectomy~~

of varicose veins

Includes: interruption of perforator veins**Excludes:** that with:

- endovenous interruption of varicose veins (32520-00 [728])
- interruption of varicose veins of great or small saphenous veins (32508-00 [727])
- subfascial interruption of perforator veins (32507-01 [727])

...

728**Other destruction procedures on veins**

32520-00 Endovenous interruption of veins

Endovenous:

- [laser therapy \[ELT\] of varicose veins](#)
- [radiofrequency ablation \[ERFA\] of varicose veins](#)

- ~~laser therapy [ELT]~~
- ~~radiofrequency ablation [ERFA]~~

of varicose veins

...

742**Other application, insertion or removal procedures on other vascular sites**

45027-02 Administration of agent into vascular lesion
 Destruction of vascular anomaly by injection
 Injection of agent (sclerosing) (sclerotherapy) [into head or neck](#):

• [vessels](#)

• [vascular malformation](#)

~~• vessels~~

~~• vascular malformation~~

~~of head or neck~~

Includes: that for:

- angioma
- false aneurysm
- haemangioma
- lymphangioma
- starburst vessels
- telangiectases

...

754**Transluminal balloon angioplasty**

Includes: transcatheter infusion of thrombolytic or other agent

Excludes: peripheral laser angioplasty (see block [758])
 that for coronary arteries (see blocks [670] and [671]):

- with atherectomy (see block [669])

35303-06 Percutaneous transluminal balloon angioplasty

[Percutaneous transluminal balloon angioplasty for:](#)

• [correction of arteriovenous fistula](#)

• [revision of arteriovenous fistula](#)

~~Correction of arteriovenous fistula stenosis by percutaneous~~

~~Revision transluminal balloon angioplasty~~

...

35303-07 Open transluminal balloon angioplasty

[Open transluminal balloon angioplasty for:](#)

• [correction of arteriovenous fistula stenosis](#)

• [revision of arteriovenous fistula stenosis](#)

~~Correction of arteriovenous fistula stenosis by open transluminal~~

~~Revision balloon angioplasty~~

...

764**Procedures for external arteriovenous shunt**

...

34500-01 Replacement of external arteriovenous shunt

[External arteriovenous shunt:](#)

• [removal and reinsertion](#)

• [revision](#)

~~Removal and reinsertion~~

~~Revision~~

~~of external arteriovenous shunt~~

...

765 Procedures for surgically created arteriovenous fistula

...

34518-00 Repair of surgically created arteriovenous fistula

[Correction of stenosis of arteriovenous fistula NOS](#)
[Revision of arteriovenous fistula NOS](#)
[Superficialisation of arteriovenous fistula NOS](#)

~~Correction of stenosis~~
~~Revision~~
~~Superficialisation~~ | ~~of arteriovenous fistula NOS~~

Includes: patch graft

Excludes: that by:

- thrombectomy (34515-00 [765])
- transluminal balloon angioplasty:
 - open (35303-07 [754])
 - percutaneous (35303-06 [754])
- that for prosthetic (graft) arteriovenous access device (34518-01 [765])

34518-01 Repair of prosthetic (graft) arteriovenous access device

[Correction of stenosis of prosthetic \(graft\) arteriovenous access device NOS](#)
[Revision of prosthetic \(graft\) arteriovenous access device NOS](#)

~~Correction of stenosis~~
~~Revision~~ | ~~of prosthetic (graft) arteriovenous access device NOS~~

Includes: patch graft

Excludes: that by transluminal balloon angioplasty:

- open (35303-07 [754])
- percutaneous (35303-06 [754])

...

768 Transcatheter embolisation of blood vessels

...

35321-05 Transcatheter embolisation of blood vessels, abdomen

Transcatheter embolisation of [vessels](#):

[• coeliac](#)
[• gastrointestinal](#)
[• hepatic](#)
[• mesenteric](#)
[• renal](#)
[• splenic](#)

~~• coeliae~~
~~• gastrointestinal~~
~~• hepatic~~
~~• mesenteric~~
~~• renal~~
~~• splenic~~ | ~~vessels~~

Excludes: (rapid) (resuscitative) endovascular balloon occlusion of the aorta (35321-11 [768])

35321-06 Transcatheter embolisation of blood vessels, pelvis

Transcatheter embolisation of [vessels](#):

[• iliac](#)
[• ovarian](#)
[• uterine](#)
[• vaginal](#)
[• vesical](#)

~~• iliac~~
~~• ovarian~~
~~• uterine~~
~~• vaginal~~
~~• vesical~~ | ~~vessels~~

...

812 Other procedures on lymphatic structures

...

90284-01 Laparoscopic removal of lymphocele

Laparoscopic:

- [drainage of lymphocele](#)
- [marsupialisation of lymphocele](#)

• drainage | of lymphocele
 • marsupialisation

90284-02 Removal of lymphocele

- [Drainage of lymphocele](#)
- [Marsupialisation of lymphocele](#)

Drainage | of lymphocele
 Marsupialisation

90283-00 Other procedures on lymphatic structures

- Anastomosis
 - Dilation
 - Ligation
 - Obliteration
 - Reconstruction
 - Repair
 - Transplantation
- | of peripheral lymphatics

Correction of lymphoedema of limb NOS

[Peripheral lymphatic:](#)

- [anastomosis](#)
- [dilation](#)
- [ligation](#)
- [obliteration](#)
- [reconstruction](#)
- [repair](#)
- [transplantation](#)

Excludes: excision of lymphoedematous tissue (45048 [1667])

...

851 Endoscopic administration of agent into lesion of oesophagus

30476-04 Endoscopic administration of agent into lesion or tissue of oesophagus

Endoscopic injection of agent (sclerosing) (sclerotherapy) into lesion of oesophagus

Includes: that for:

- oesophageal
 - oesophagogastric junction
- | varices

Includes: that for:

- [oesophageal varices](#)
- [oesophagogastric junction varices](#)

...

870 Application, insertion or removal procedures on stomach

30478-07 Endoscopic administration of agent into lesion of stomach or duodenum

Endoscopic injection of sclerosing agent (sclerotherapy) into lesion of stomach or duodenum

Includes: that for:

- duodenal
 - gastric
- | varices

Includes: that for:

- [duodenal varices](#)
- [gastric varices](#)

Excludes: lesion(s) of oesophagogastric junction (30476-04 [851])

...

...

30511-13 Laparoscopic gastric banding
 Laparoscopic:
 • [adjustable gastric banding \(LAGB\)](#)
 • [nonadjustable gastric banding \(fixed\) \(LNGB\)](#)
 • ~~adjustable (LAGB)~~
 • ~~nonadjustable (fixed) (LNGB)~~ | gastric banding

Includes: diaphragmatic (crural) (hiatus hernia) repair
 gastric ring reinforcement
 insertion of gastric band reservoir
 mesh (marlex)

Excludes: that with replacement (30511-11 [889])

...

30512-03 Laparoscopic gastric bypass
 Laparoscopic [gastric bypass](#):
 • [banded \(ring\)](#)
 • [loop](#)
 • [mini](#)
 • [Roux-en-Y \(LRYGB\)](#)
 • ~~banded (ring)~~
 • ~~loop~~
 • ~~mini~~
 • ~~Roux-en-Y (LRYGB)~~ | gastric bypass

Includes: anastomosis
 diaphragmatic (crural) (hiatus hernia) repair
 dilation of gastro-enteral stricture

Note: may be performed as the second stage of a two-stage surgery

Code also when performed:

- gastro-enterostomy (30515-00 [881])
- revision procedure for obesity (30514-01 [889])

Excludes: that with biliopancreatic diversion (30512-01 [889])

30512-00 Gastric bypass
[Gastric bypass](#):
 • [banded \(ring\)](#)
 • [loop](#)
 • [mini](#)
 • [Roux-en-Y \(LRYGB\)](#)
 • ~~Banded (ring)~~
 • ~~Loop~~
 • ~~Mini~~
 • ~~Roux-en-Y (RYGB)~~ | gastric bypass

Includes: anastomosis
 diaphragmatic (crural) (hiatus hernia) repair
 dilation of gastro-enteral stricture

Note: may be performed as the second stage of a two-stage surgery

Code also when performed:

- gastro-enterostomy (30515-00 [881])
- revision procedure for obesity (30514-01 [889])

Excludes: that with biliopancreatic diversion (30512-02 [889])

...

90950-02 Endoscopic insertion of device into stomach
 Insertion of:
 • [gastric balloon or bubble](#)
 • [intra-gastric balloon or bubble](#)
 • ~~gastric~~
 • ~~intra-gastric~~ | balloon or bubble

Excludes: with replacement of device (90950-04 [889])

90950-04 Endoscopic revision of device in stomach
Endoscopic:
[• adjustment of gastric balloon or bubble](#)
[• replacement \(removal and reinsertion\) of gastric balloon or bubble](#)
[• repositioning of gastric balloon or bubble](#)
▲ adjustment
▲ replacement (removal and reinsertion)
▲ repositioning | balloon or bubble

90950-03 Endoscopic removal of device from stomach
Removal of:
[• gastric balloon or bubble](#)
[• intragastric balloon or bubble](#)
▲ gastric
▲ intragastric | balloon or bubble

Excludes: removal of gastric band (90942-02 [889])
with replacement of device (90950-04 [889])

30511-11 Laparoscopic revision of gastric band
Laparoscopic:
[• adjustment of gastric band](#)
[• replacement \(removal and reinsertion\) of gastric band](#)
[• repositioning of gastric band](#)
▲ adjustment
▲ replacement (removal and reinsertion)
▲ repositioning | gastric band

Includes: diaphragmatic (crural) (hiatus hernia) repair

Excludes: adjustment of gastric band by addition or removal of fluid via reservoir (port) (31587-00 [1895])

30511-12 Revision of gastric band
[Adjustment of gastric band via laparotomy](#)
[Replacement \(removal and reinsertion\) of gastric band via laparotomy](#)
[Repositioning of gastric band via laparotomy](#)
Adjustment
Replacement (removal and reinsertion)
Repositioning | gastric band via laparotomy

Includes: diaphragmatic (crural) (hiatus hernia) repair

Excludes: adjustment of gastric band by addition or removal of fluid via reservoir (port) (31587-00 [1895])

90942-00 Removal of gastric band
Removal of ~~gastric band~~:
[• adjustable gastric band via laparotomy](#)
[• nonadjustable \(fixed\) gastric band via laparotomy](#)
▲ adjustable
▲ nonadjustable (fixed) | via laparotomy

Includes: removal of (implanted) gastric band reservoir/port

Excludes: that with replacement (30511-12 [889])

31590-00 Revision of gastric band reservoir
[Implanted gastric band reservoir/port:](#)
[• adjustment](#)
[• repair](#)
[• replacement](#)
[• repositioning](#)
Adjustment
Repair
Replacement
Repositioning | of implanted reservoir/port

Excludes: adjustment of gastric band by addition or removal of fluid via reservoir (port) (31587-00 [1895])

...

906 Application, insertion or removal procedures on large intestine

...

32023-01 Endoscopic replacement of colonic prosthesis

Endoscopic [colonic stent](#):

• [replacement](#)

• [revision](#)

▲ ~~replacement~~

▲ ~~revision~~

| ~~colonic stent~~

...

911 Fibreoptic colonoscopy with excision

32084-01 Fibreoptic colonoscopy to hepatic flexure, with biopsy

Colonoscopy to hepatic flexure, with multiple biopsies

[Flexible sigmoidoscopy with biopsy](#)

[Short colonoscopy with biopsy](#)

~~Flexible sigmoidoscopy~~

~~Short colonoscopy~~

| ~~with biopsy~~

32087-00 Fibreoptic colonoscopy to hepatic flexure, with polypectomy

Colonoscopy to hepatic flexure, with multiple polypectomies

[Flexible sigmoidoscopy with polypectomy](#)

[Short colonoscopy with polypectomy](#)

~~Flexible sigmoidoscopy~~

~~Short colonoscopy~~

| ~~with~~

~~polypectomy~~

Includes: polypectomy by or using:

- bipolar cautery
- hot biopsy forceps
- mucosal resection
- snare technique

...

913 Colectomy

...

32003-00 Limited excision of large intestine with anastomosis

[Caecectomy with anastomosis](#)

[Local excision of colon with anastomosis](#)

[Sigmoid colectomy with anastomosis](#)

[Sigmoidectomy with anastomosis](#)

~~Caecectomy~~

~~Local excision of colon~~

~~Sigmoide colectomy~~

~~Sigmoidectomy~~

| ~~with anastomosis~~

Includes: resection of splenic flexure

32003-02 Laparoscopic limited excision of large intestine with anastomosis

Laparoscopic:

• [caecectomy with anastomosis](#)

• [local excision of colon with anastomosis](#)

• [sigmoid colectomy with anastomosis](#)

• [sigmoidectomy with anastomosis](#)

▲ ~~caecectomy~~

▲ ~~local excision of colon~~

▲ ~~sigmoide colectomy~~

▲ ~~sigmoidectomy~~

| ~~with anastomosis~~

Includes: resection of splenic flexure

32000-00 Limited excision of large intestine with formation of stoma

[Caecectomy with formation of stoma](#)
[Local excision of colon with formation of stoma](#)
[Sigmoid colectomy with formation of stoma](#)
[Sigmoidectomy with formation of stoma](#)

Caecectomy
 Local excision of colon
 Sigmoid colectomy
 Sigmoidectomy

with formation of stoma

Includes: resection of splenic flexure

32000-02 Laparoscopic limited excision of large intestine with formation of stoma

Laparoscopic:

• [caecectomy with formation of stoma](#)
 • [local excision of colon with formation of stoma](#)
 • [sigmoid colectomy with formation of stoma](#)
 • [sigmoidectomy with formation of stoma](#)

Caecectomy
 Local excision of colon
 Sigmoid colectomy
 Sigmoidectomy

with formation of stoma

Includes: resection of splenic flexure

...

32006-00 Left hemicolectomy with anastomosis

Includes: resection of:

• [descending colon](#)
 • [sigmoid colon](#)
 • [splenic flexure](#)

Descending
 Sigmoid
 Splenic flexure

| colon

32006-02 Laparoscopic left hemicolectomy with anastomosis

Includes: resection of:

• [descending colon](#)
 • [sigmoid colon](#)
 • [splenic flexure](#)

Descending
 Sigmoid
 Splenic flexure

| colon

32006-01 Left hemicolectomy with formation of stoma

Includes: resection of:

• [descending colon](#)
 • [sigmoid colon](#)
 • [splenic flexure](#)

Descending
 Sigmoid
 Splenic flexure

| colon

32006-03 Laparoscopic left hemicolectomy with formation of stoma

Includes: resection of:

• [descending colon](#)
 • [sigmoid colon](#)
 • [splenic flexure](#)

Descending
 Sigmoid
 Splenic flexure

| colon

32005-00 Subtotal colectomy with anastomosis

Includes: resection of:

• [ascending colon](#)
 • [descending colon](#)
 • [hepatic flexure](#)
 • [splenic flexure](#)

- [transverse colon](#)
 - ~~ascending~~
 - ~~descending~~
 - ~~transverse~~
 - ~~hepatic~~
 - ~~splenic~~
- | colon
- | flexure

32005-02 Laparoscopic subtotal colectomy with anastomosis

Includes: resection of:

- [ascending colon](#)
 - [descending colon](#)
 - [hepatic flexure](#)
 - [splenic flexure](#)
 - [transverse colon](#)
 - ~~ascending~~
 - ~~descending~~
 - ~~transverse~~
 - ~~hepatic~~
 - ~~splenic~~
- | colon
- | flexure

32004-00 Subtotal colectomy with formation of stoma

Includes: formation of mucous fistula

resection of:

- [ascending colon](#)
 - [descending colon](#)
 - [hepatic flexure](#)
 - [splenic flexure](#)
 - [transverse colon](#)
 - ~~ascending~~
 - ~~descending~~
 - ~~transverse~~
 - ~~hepatic~~
 - ~~splenic~~
- | colon
- | flexure

32004-02 Laparoscopic subtotal colectomy with formation of stoma

Includes: formation of mucous fistula

resection of:

- [ascending colon](#)
 - [descending colon](#)
 - [hepatic flexure](#)
 - [splenic flexure](#)
 - [transverse colon](#)
 - ~~ascending~~
 - ~~descending~~
 - ~~transverse~~
 - ~~hepatic~~
 - ~~splenic~~
- | colon
- | flexure

...

924 Procedures for exomphalos

...

43873-01 Creation of prosthetic pouch for exomphalos

Creation of:

- [silastic pouch for exomphalos](#)
 - [silo for exomphalos](#)
 - ~~silastic pouch~~
 - ~~silo~~
- | for exomphalos

...

929 Application, insertion or removal procedures on rectum or anus

...

32023-04 Endoscopic replacement of rectal prosthesis

Endoscopic:

• [replacement of rectal stent](#)

• [revision of rectal stent](#)

• ~~replacement~~ | ~~rectal stent~~
• ~~revision~~

...

933 Excision of lesion or tissue of rectum or anus

...

90341-00 Other excision of lesion of rectum

[Excision of perirectal lesion or tissue](#)

[Trans-sphincteric excision of lesion or tissue](#)

~~Excision of perirectal~~ | ~~lesion or tissue~~
~~Trans-sphincteric excision~~

Excludes: per anal excision of lesion of rectum (32099-00 [933])

polypectomy via:

• colonoscopy (32087-00, 32093-00 [911])

• rectoscopy (32099-00 [933])

• sigmoidoscopy:

• flexible (32087-00 [911])

• rigid (32078-00, 32081-00 [910])

...

934 Rectosigmoidectomy or proctectomy

...

32060-00 Restorative proctectomy

Mucosal proctectomy

~~Includes: closure of existing~~ | ~~ileostomy~~
~~defunctioning [covering]~~

[Includes: closure of existing ileostomy](#)
[defunctioning \[covering\] ileostomy](#)

formation of ileal reservoir

ileo-anal anastomosis

isolation and resection of bowel

mucosectomy

rectal resection

Excludes: restoration of bowel continuity following Hartmann's procedure (32033-00 [917])

43993-01 Definitive intestinal resection and pull-through anastomosis

[Duhamel-retrorectal pull-through procedure](#)

[Soave endorectal pull-through procedure](#)

~~Duhamel-retrorectal~~ | ~~pull-through procedure~~
~~Soave-endorectal~~

Includes: closure of existing stoma

formation of stoma (defunctioning) (diverting) (protective) (temporary)

multiple frozen section biopsies

Note: Performed for Hirschsprung's disease [colonic aganglionosis] [congenital megacolon]. There are a number of pull-through techniques - the most common are the Duhamel and Soave procedures. The Duhamel procedure (and modifications) is a retrorectal pull-through with a side-to-side anastomosis. The anastomosis forms a rectal vault composed of an aganglionic anterior wall and a normally ganglionated posterior wall.

The Soave procedure (and modifications) involves resection of the aganglionic bowel, with the exception of the most distal rectum where only the mucosa is removed. The mucosa of the rectum is removed through the anus and the ganglionic colon is 'pulled through' the remaining cuff of rectal muscle to a point just above the anus (dentate line) where it is sewn into place. In some cases of total

colonic aganglionosis the intestinal resection may extend to the ileum and involve an ileo-anal pull-through procedure with side-to-side ileocolic anastomosis.

This procedure may be performed in one stage. It may also be the second stage of a two stage procedure, where the first stage procedure performed was a colostomy (sometimes termed a 'levelling' colostomy).

Excludes: restorative proctocolectomy with ileal reservoir (32051 [936])

...

940 Other repair procedures on rectum or anus

...

32221-00 Revision of artificial bowel sphincter

[Artificial bowel sphincter:](#)

• [adjustment](#)

• [replacement](#)

~~Adjustment~~
~~Replacement~~ | of artificial bowel sphincter

...

963 Incision of gallbladder, biliary tract or sphincter of Oddi

30440-01 Percutaneous biliary drainage

Includes: ~~transhepatic~~
~~transjejunal~~ | cholangiography

Includes: [transhepatic cholangiography](#)
[transjejunal cholangiography](#)

...

966 Resection of hepatic duct or porta hepatis

Includes: anastomosis to:

- biliary tract
- intestine

...

30464-00 Radical resection of hepatic ducts with resection of segment of liver

[Radical resection of:](#)

• [common hepatic duct with partial or total resection of liver segment](#)

• [left and right hepatic ducts partial or total resection of liver segment](#)

~~Radical resection of:~~

~~• common hepatic duct~~

~~• left and right hepatic ducts~~

| with partial or total resection of segment of liver

...

987 Other incision procedures on abdomen, peritoneum or omentum

...

30394-02 Other closed drainage of intra-abdominal abscess, haematoma or cyst

Includes: [transgluteal approach](#)
[transrectal approach](#)

~~Includes:~~ ~~transgluteal~~
~~transrectal~~ | approach

30394-00 Drainage of intra-abdominal abscess, haematoma or cyst

Includes: [drainage of abscess, haematoma or cyst \(of\):](#)

- [appendiceal](#)
- [iliac fossa](#)
- [intraperitoneal](#)
- [pelvic](#)
- [pouch of Douglas](#)
- [subhepatic](#)
- [subphrenic](#)
- [peritonitis](#)

Includes: appendiceal
iliac fossa
intraperitoneal
pelvic
pouch of Douglas
subhepatic
subphrenic
peritonitis

abscess, haematoma or cyst

Code also when performed:

- appendicectomy (30571-00 [926])

Excludes: abscess, haematoma or cyst of specified intra-abdominal or pelvic sites classified elsewhere (see Alphabetic Index: Drainage/abscess/by site; Drainage/haematoma/by site; Drainage/cyst/by site) drainage of:

- intra-abdominal abscess, haematoma or cyst:
- closed NEC (30394-02 [987])
- laparoscopic (30394-01 [987])
- percutaneous (30224-01 [987])
- pouch of Douglas via colpotomy (35572-00 [1280])
- hydatid cyst of:
- abdominal cavity organ NEC (30434-02, 30436-02 [1002])
- liver (30434-00, 30436-00, 30438-00 [955])
- peritoneum (30434-01, 30436-01 [1002])
- retroperitoneal abscess, haematoma or cyst (30402-00, 30224-02 [987])

...

990

Repair of inguinal hernia

[Correction of hydrocele in child under 12 years of age \(infantile\)](#)

[Repair of hydrocele in child under 12 years of age \(infantile\)](#)

Correction | ~~hydrocele in child under 12 years of age (infantile)~~

Repair | ~~age (infantile)~~

Includes: graft
prosthesis

Excludes: excision of hydrocele (— see Alphabetic Index: *Excision/hydrocele*)
repair (correction) of hydrocele with:

- [eversion of sac](#) — see Alphabetic Index: *Excision/hydrocele*
- [involvement of tunica vaginalis](#) — see Alphabetic Index: *Excision/hydrocele*
- [Jaboulay procedure](#) — see Alphabetic Index: *Excision/hydrocele*

~~• eversion of sac~~
~~• involvement of tunica vaginalis~~
~~• Jaboulay procedure~~

(see Alphabetic Index: *Excision/hydrocele*)

that for incarcerated (obstructed)(strangulated) hernia (30615-00 [997])

...

998 Repair of diaphragmatic hernia

Repair of:

- hiatus hernia
- oesophageal hiatus

Excludes: repair of diaphragmatic (hiatus) hernia with:

- fundoplasty (30527-01, 30527-03, 30527-05, 30527-06 [886])
- obesity procedure(s) (30511, 30512 [889])

...

43837-02 Repair of diaphragmatic hernia with use of body wall flap or insertion of prosthetic patch

[Includes: abdominal approach](#)
[thoracic approach](#)
[thoraco-abdominal approach](#)

~~Includes: abdominal~~ | ~~approach~~
~~thoracic~~
~~thoraco-abdominal~~

Note: Performed for repair of congenital diaphragmatic hernia

...

1005 Panendoscopy

▼0024

Includes: double balloon enteroscopy

11820-00 Panendoscopy via camera capsule

[Camera pill endoscopy](#)
[Capsule endoscopy](#)
[Gastrointestinal camera capsule endoscopy](#)

~~Camera pill~~ | ~~endoscopy~~
~~Capsule~~
~~Gastrointestinal camera capsule~~

...

1006 Panendoscopy with removal of foreign body

▼0024

Includes: double balloon enteroscopy

30478-00 Panendoscopy to duodenum with removal of foreign body

[Removal of foreign body via:](#)

- [duodenoscopy](#)
- [gastroscopy](#)
- [oesophagogastroduodenoscopy \[EGD\]](#)

~~Duodenoscopy~~ | ~~with removal of foreign body~~
~~Gastroscopy~~
~~Oesophagogastroduodenoscopy [EGD]~~

Excludes: that with rigid oesophagoscope (41825-00 [852])

...

1011 Other procedures on digestive system

90334-00 Transjugular intrahepatic portosystemic shunt [TIPS]

90343-00 Endoscopic procedure proceeding to open procedure

▼0019

[Endoscopic procedure NEC proceeding to open procedure](#)
[Minimally invasive procedure NEC proceeding to open procedure](#)

~~Endoscopic~~ | ~~procedure NOS proceeding to open procedure~~
~~Minimally invasive~~

Includes: minimal access approach (via):

...

1055 Other excision procedures on kidney

36558-00 Laparoscopic excision of renal cyst
[Laparoscopic:](#)
• [marsupialisation of renal cyst](#)
• [unroofing of renal cyst](#)
~~Marsupialisation~~ | ~~of renal cyst via laparoscopy~~
~~Unroofing~~

36558-01 Excision of renal cyst
[Marsupialisation of renal cyst](#)
[Unroofing of renal cyst](#)
~~Marsupialisation~~ | ~~of renal cyst~~
~~Unroofing~~

...

1066 Endoscopic ureteric catheterisation

Includes: cystoscopy
urethral dilation

...

36818-00 Endoscopic ureteric catheterisation with fluoroscopic imaging of upper urinary tract, unilateral
[Cystoscopy with unilateral retrograde pyelogram](#)
[Ureteroscopy with unilateral retrograde pyelogram](#)
~~Cystoscopy~~ | ~~with unilateral retrograde pyelogram~~
~~Ureteroscopy~~

36818-01 Endoscopic ureteric catheterisation with fluoroscopic imaging of upper urinary tract, bilateral
[Cystoscopy with bilateral retrograde pyelogram](#)
[Ureteroscopy with bilateral retrograde pyelogram](#)

~~Cystoscopy~~ | ~~with bilateral retrograde pyelogram~~
~~Ureteroscopy~~

...

1073 Other incision procedures on ureter

...

36825-00 Endoscopic incision of pelviureteric junction or ureteric stricture
Includes: cystourethroscopy
[removal or replacement of ureteric stent](#)
~~removal~~ | ~~of ureteric stent~~
~~replacement~~

...

1127 Incision procedures on other sites of urinary system

90369-00 Exploration of perivesical tissue
Division of perivesical adhesions
[Excision of perivesical tissue](#)
[Incision of perivesical tissue](#)
~~Excision~~ | ~~of perivesical tissue~~
~~Incision~~

...

1163 Closed biopsy of prostate or seminal vesicle

37218-00 Needle biopsy of prostate or seminal vesicle

Prostate or seminal vesicle:

- [percutaneous aspiration](#)
- [transperineal \(grid\) biopsy](#)
- [transrectal biopsy](#)

~~Percutaneous aspiration~~

~~Transperineal (grid) biopsy~~

~~Transrectal biopsy~~

of prostate or seminal vesicle

...

1171 Application, insertion or removal procedures on scrotum or tunica vaginalis

...

96227-00 Insertion of testicular prosthesis, unilateral

Includes: exploration of scrotal contents

that via:

• [inguinal approach](#)

• [scrotal approach](#)

~~• inguinal~~

~~• scrotal~~

approach

96227-01 Insertion of testicular prosthesis, bilateral

Includes: exploration of scrotal contents

that via:

• [inguinal approach](#)

• [scrotal approach](#)

~~• inguinal~~

~~• scrotal~~

approach

...

1173 Biopsy of scrotum or tunica vaginalis

37604-18 Percutaneous biopsy of scrotum or tunica vaginalis

37604-02 Exploration of scrotal contents with biopsy, unilateral

Biopsy of tunica vaginalis, unilateral

Incision and drainage of:

• [scrotum with biopsy, unilateral](#)

• [tunica vaginalis with biopsy, unilateral](#)

~~• scrotum~~

~~• tunica vaginalis~~

with biopsy, unilateral

Excludes: percutaneous biopsy (37604-18 [1173])

that with:

• biopsy of:

• seminal vesicle (37218-00 [1163], 37212-00 [1164])

• spermatic cord, epididymis, vas deferens (30644-06 [1180])

• testis (30644-04, 30644-05 [1180])

• fixation of testis (37604 [1175])

• orchidopexy for undescended testis (37803 [1186], 37809 [1188])

37604-03 Exploration of scrotal contents with biopsy, bilateral
 Biopsy of tunica vaginalis, bilateral
 Incision and drainage of:
 • [scrotum with biopsy, bilateral](#)
 • [tunica vaginalis with biopsy, bilateral](#)

| | | |
|---|--|------------------------|
| <ul style="list-style-type: none"> ▲ scrotum ▲ tunica vaginalis | | with biopsy, bilateral |
|---|--|------------------------|

Excludes: percutaneous biopsy (37604-18 [1173])
 that with:
 • biopsy of:
 • seminal vesicle (37218-00 [1163], 37212-00 [1164])
 • spermatic cord, epididymis, vas deferens (30644-06 [1180])
 • testis (30644-04, 30644-05 [1180])
 • fixation of testis (37604 [1175])
 • orchidopexy for undescended testis (37803 [1186], 37809 [1188])

...

1175 Repair procedures on scrotum or tunica vaginalis

37604-09 Laparoscopic fixation of testis, unilateral
 Laparoscopic:
 • [detorsion of testis with fixation, unilateral](#)
 • [orchidopexy, unilateral](#)

| | | |
|--|--|------------|
| <ul style="list-style-type: none"> ▲ detorsion of testis with fixation ▲ orchidopexy | | unilateral |
|--|--|------------|

Includes: exploration of scrotal contents
 that for undescended testis
Excludes: revision (37604-13 [1188])

37604-10 Fixation of testis, unilateral
[Detorsion of testis with fixation, unilateral](#)
[Orchidopexy, unilateral](#)

| | | |
|--|--|------------|
| <ul style="list-style-type: none"> Detorsion of testis with fixation Orchidopexy | | unilateral |
|--|--|------------|

Includes: exploration of scrotal contents
 that for undescended testis
Excludes: revision (37604-14 [1188])

37604-11 Laparoscopic fixation of testis, bilateral
 Laparoscopic:
 • [detorsion of testis with fixation, bilateral](#)
 • [orchidopexy, bilateral](#)

| | | |
|--|--|-----------|
| <ul style="list-style-type: none"> ▲ detorsion of testis with fixation ▲ orchidopexy | | bilateral |
|--|--|-----------|

Includes: exploration of scrotal contents
 that for undescended testis
Excludes: revision (37604-15 [1188])

37604-12 Fixation of testis, bilateral
[Detorsion of testis with fixation, bilateral](#)
[Orchidopexy, bilateral](#)

| | | |
|--|--|-----------|
| <ul style="list-style-type: none"> Detorsion of testis with fixation Orchidopexy | | bilateral |
|--|--|-----------|

Includes: exploration of scrotal contents
 that for undescended testis
Excludes: revision (37604-16 [1188])

...

1179 Destruction procedures on testis, vas deferens, epididymis or spermatic cord

30644-02 Ligation of vas deferens
[Crushing of vas deferens](#)
[Division of vas deferens](#)
~~Crushing~~ | ~~of vas deferens~~
~~Division~~

...

1187 Other repair procedures on testis, vas deferens, epididymis or spermatic cord

...

30644-10 Other repair of vas deferens and epididymis
Removal of:
[ligature from vas deferens](#)
[valve from vas deferens](#)
~~ligature~~ | ~~from vas deferens~~
~~valve~~
Suture of laceration of vas deferens and epididymis
Excludes: repair of spermatic cord and epididymis (30644-11 [1187])

...

1241 Incision procedures on ovary

35637-07 Laparoscopic rupture of ovarian cyst or abscess
[Laparoscopic:](#)
[incision of ovarian cyst](#)
[marsupialisation of ovarian cyst](#)
~~Incision~~ | ~~of ovarian cyst via laparoscopy~~
~~Marsupialisation~~

35713-02 Rupture of ovarian cyst or abscess
[Incision of ovarian cyst](#)
[Marsupialisation of ovarian cyst](#)
~~Incision~~ | ~~of ovarian cyst via laparotomy~~
~~Marsupialisation~~

...

1257 Procedures for female sterilisation

35688-00 Laparoscopic sterilisation
Laparoscopy with:
[application of Filshie clips](#)
[ligation of fallopian tube\(s\)](#)
[occlusion of fallopian tube\(s\)](#)
~~application of Filshie clips~~
~~ligation~~ | ~~of fallopian tubes~~
~~occlusion~~
Sterilisation NOS
Excludes: that by electrodestruction (35688-03 [1257])

...

35688-02 Sterilisation via open abdominal approach
Laparotomy with:
[application of Filshie clips](#)
[ligation of fallopian tube\(s\)](#)
[occlusion of fallopian tube\(s\)](#)
~~application of Filshie clips~~
~~ligation~~ | ~~of fallopian tubes~~
~~occlusion~~
Excludes: that by electrodestruction (35688-04 [1257])

1283 Repair of prolapse of uterus, pelvic floor or enterocele

Includes: that with prosthesis

...

35577-00 Repair of pelvic floor prolapse

[Donald-Fothergill procedure](#)

[Le-Fort procedure](#)

[Manchester procedure](#)

~~Donald-Fothergill~~
~~Le-Fort~~
~~Manchester~~ | procedure

Includes: excision of cervix

...

1333 Analgesia and anaesthesia during labour and delivery procedure

...

92506-XX Neuraxial block during labour

[Injection/infusion during labour:](#)

• [caudal](#)

• [epidural](#)

• [spinal](#)

~~Caudal~~
~~Epidural~~
~~Spinal~~ | ~~injection/infusion during labour~~

Code also when performed:

- continuing (postprocedural) infusion of neuraxial block (92516-00 [1912])

Excludes: that continued for anaesthesia during delivery procedure (92507 [1333])

92507-XX Neuraxial block during labour and delivery procedure

[Injection/infusion during labour and delivery procedure:](#)

• [caudal](#)

• [epidural](#)

• [spinal](#)

~~Caudal~~
~~Epidural~~
~~Spinal~~ | ~~injection/infusion during labour and delivery procedure~~

Includes: that for:

- caesarean section
- removal of retained placenta
- repair of obstetric laceration

Note: This code is to be assigned for those patients who have a neuraxial block for pain relief in labour and the neuraxial block is continued for anaesthesia during delivery procedure.

Code also when performed:

- continuing (postprocedural) infusion of neuraxial block (92516-00 [1912])

Excludes: neuraxial block administered for anaesthesia for delivery procedure (92508 [1909])

...

1337 Forceps rotation and delivery

Code also when performed:

- episiotomy (90472-00 [1343])

Excludes: that for breech delivery (90470-02, 90470-04 [1339])

90468-00 Low forceps delivery

[Outlet forceps delivery](#)

[Wrigley's forceps delivery](#)

~~Outlet~~
~~Wrigley's~~ | forceps delivery

90468-01 Mid-cavity forceps delivery

[Keilland's forceps delivery](#)

[Neville-Barnes forceps delivery](#)

~~Keilland's~~
~~Neville-Barnes~~ | forceps delivery

...

1343 Other procedures associated with delivery

▼1551

...

90476-00 Procedures on fetus to facilitate delivery

Cleidotomy

[Decapitation of fetus](#)

[Destruction of fetus](#)

~~Decapitation~~
~~Destruction~~ | of fetus

Needling of hydrocephalic head

...

1402 Reduction of dislocation of clavicle, scapula or shoulder

47003-00 Closed reduction of dislocation of clavicle

Closed reduction of dislocation of:

• [acromioclavicular joint](#)

• [sternoclavicular joint](#)

▲ ~~acromioclavicular~~
▲ ~~sternoclavicular~~ | joint

47006-00 Open reduction of dislocation of clavicle

Open reduction of dislocation of:

• [acromioclavicular joint](#)

• [sternoclavicular joint](#)

▲ ~~acromioclavicular~~
▲ ~~sternoclavicular~~ | joint

...

1413 Closed reduction of fracture of humerus or elbow

...

47456-00 Closed reduction of fracture of distal humerus

~~Includes: condylar~~
~~supracondylar~~ | of humerus

Includes: [condylar of humerus](#)
[supracondylar of humerus](#)

47456-01 Closed reduction of fracture of distal humerus with internal fixation

~~Includes: condylar~~
~~supracondylar~~ | of humerus

Includes: [condylar of humerus](#)
[supracondylar of humerus](#)

...

1427 Closed reduction of fracture of radius

...

47363-00 Closed reduction of fracture of distal radius

~~Includes: Barton's
Colles'
Smith's~~ fracture

Includes: [Barton's fracture](#)
[Colles' fracture](#)
[Smith's fracture](#)

47363-02 Closed reduction of fracture of distal radius with internal fixation

~~Includes: Barton's
Colles'
Smith's~~ fracture

Includes: [Barton's fracture](#)
[Colles' fracture](#)
[Smith's fracture](#)

...

1462 Arthroplasty of interphalangeal joint of hand

[Hemiarthroplasty of phalangeal joint of hand](#)

Total:

- [arthroplasty of phalangeal joint of hand](#)
- [joint replacement of phalangeal joint of hand](#)

~~Hemiarthroplasty
Total arthroplasty
Total joint replacement~~ of phalangeal joint of hand

Includes: synovectomy
tendon transfer or realignment

...

1479 Fixation of fracture of pelvis or femur

...

47519-00 Internal fixation of fracture of trochanteric or subcapital femur

Includes: ~~fracture:~~
~~• neck (of)~~
~~• pertrochanteric~~
~~• proximal~~
~~• subtrochanteric~~ femur

fracture:
• [neck \(of\) femur](#)
• [pertrochanteric femur](#)
• [proximal femur](#)
• [subtrochanteric femur](#)
reduction of fracture

...

1480 Release of hip contracture

Lengthening of:

- adductor brevis
- adductor longus

Psoas:

- at the lesser trochanter
- over the brim (POTB)

Includes: [division of obturator nerve](#)
[phenol to obturator nerve](#)

~~Includes: division
phenol~~ of obturator nerve

that via anterior or medial approach

1486 Reduction of fracture of pelvis or femur

...

47531-00 Closed reduction of fracture of femur with internal fixation

Includes: cross fixation
intramedullary fixation

Excludes: that of:

- [neck \(of\) femur \(47519-00 \[1479\]\)](#)
- [proximal femur \(47519-00 \[1479\]\)](#)
- [subcapital femur \(47519-00 \[1479\]\)](#)
- [trochanteric \(pertrochanteric\) \(subtrochanteric\) \(47519-00 \[1479\]\)](#)

- ~~neck (of)~~
- ~~proximal~~
- ~~subcapital~~
- ~~trochanteric~~
(~~pertrochanteric~~)
(~~subtrochanteric~~)

femur
(47519-00 [1479])

47528-00 Open reduction of fracture of femur

47528-01 Open reduction of fracture of femur with internal fixation

Includes: cross fixation
intramedullary fixation

Excludes: that of:

- [neck \(of\) femur \(47519-00 \[1479\]\)](#)
- [proximal femur \(47519-00 \[1479\]\)](#)
- [subcapital femur \(47519-00 \[1479\]\)](#)
- [trochanteric \(pertrochanteric\) \(subtrochanteric\) \(47519-00 \[1479\]\)](#)

- ~~neck (of)~~
- ~~proximal~~
- ~~subcapital~~
- ~~trochanteric~~
(~~pertrochanteric~~)
(~~subtrochanteric~~)

femur
(47519-00 [1479])

...

1489 Arthroplasty of hip

...

90607-00 Resurfacing of hip, unilateral

[Birmingham hip resurfacing, unilateral](#)
[Metal hip resurfacing, unilateral](#)

~~Birmingham~~ | ~~hip resurfacing, unilateral~~
~~Metal~~

Includes: bone graft
procurement of graft material through same incision

Code also when performed:

- procurement of graft material through separate incision (47726-00 [1563])

Excludes: arthroplasty:

- partial (49315-00 [1489])
- total (49318-00 [1489])

90607-01 Resurfacing of hip, bilateral

[Birmingham hip resurfacing, bilateral](#)
[Metal hip resurfacing, bilateral](#)

~~Birmingham~~ | ~~hip resurfacing, bilateral~~
~~Metal~~

Includes: bone graft
procurement of graft material through same incision

...

1509 Closed reduction of fracture of shaft of tibia or fibula

...

47566-04 Closed reduction of fracture of fibula with internal fixation

Closed reduction [with internal fixation](#) of fracture of fibula:

- [head](#)
- [NOS](#)
- [proximal](#)
- [shaft](#)

| | | |
|--|--|------------------------|
| <ul style="list-style-type: none"> ▲ head ▲ NOS ▲ proximal ▲ shaft | | with internal fixation |
|--|--|------------------------|

Excludes: distal fibula (47600-00, 47603-00 [1537])

...

1510 Open reduction of fracture of shaft of tibia or fibula

...

47566-05 Open reduction of fracture of fibula with internal fixation

Open reduction [with internal fixation](#) of fracture of fibula:

- [head](#)
- [NOS](#)
- [proximal](#)
- [shaft](#)

| | | |
|--|--|------------------------|
| <ul style="list-style-type: none"> ▲ head ▲ NOS ▲ proximal ▲ shaft | | with internal fixation |
|--|--|------------------------|

Excludes: distal fibula (47600-01, 47603-01 [1539])

...

1542 Repair of tendon or ligament of ankle or foot

...

49718-01 Repair of Achilles' tendon

Achillotenotomy

[Division of Achilles' tendon](#)

[Incision of Achilles' tendon](#)

| | | |
|--|--|---------------------|
| <ul style="list-style-type: none"> Division Incision | | of Achilles' tendon |
|--|--|---------------------|

...

1554 Other application, insertion or removal procedures on other musculoskeletal sites

...

50309-00 Adjustment of ring fixator or similar device

| | | |
|--|--|-----------------|
| <ul style="list-style-type: none"> Includes: insertion removal | | of fixation pin |
|--|--|-----------------|

Includes: [insertion of fixation pin](#)
[removal of fixation pin](#)

...

1572 Other repair procedures on tendon of other musculoskeletal sites

- Excludes:* repair of:
- Achilles' tendon (major ankle tendon) (49718-01 [1542])
 - tendon of foot (49809-01 [1544])

...

47972-00 Open procedure on tendon sheath, not elsewhere classified

Tendon sheath:

- exploration NOS
- incision NOS
- release NOS
- suture NOS

| | |
|-------------|----------------------|
| Exploration | |
| Incision | |
| Release | of tendon sheath NOS |
| Suture | |

Excludes: incision or release of tendon sheath of hand (46363-00 [1440])

...

1579 Other procedures for other musculoskeletal sites

...

90609-00 Destruction of bone

Destruction of bone lesion

Includes: laser radiofrequency ablation

| | |
|------------------------------------|----------------|
| Laser destruction | |
| Radiofrequency ablation | of bone lesion |

...

1612 Destruction of lesion of skin or cartilage

- Excludes:* that by excision (31205-00, 31230, 31235 [1620]) warts:
- anal (32177-00, 90315 [933])
 - palmar (30186-00 [1619])
 - penile (36815-00 [1195], 30189-01 [1619])
 - plantar (30186-00 [1619])
 - specified site NEC (30189 [1619])
 - urethral (36815-01 [1116], 30189-01 [1619])
 - vaginal (35507-00 [1281])
 - vulval (35507-01 [1289])

...

30190-00 Laser to lesion of face or neck

Laser to face or neck:

- angiofibroma
- capillary (cherry) angioma
- trichoepithelioma
- tumour NOS

| | |
|---------------------------------------|-----------------|
| angiofibroma | |
| capillary (cherry) angioma | |
| trichoepithelioma | of face or neck |
| tumour NOS | |

...

30195-06 Electrotherapy of lesion of skin, single lesion

Diathermy
Electrodesiccation | of lesion of skin, single
Fulguration | lesion
Galvanocautery

Includes: that by:

- [diathermy](#)
- [electrodesiccation](#)
- [fulguration](#)
- [galvanocautery](#)

Code also when performed:

- administration of antineoplastic agent for electrochemotherapy (see block [1920])

Excludes: cauterisation of vascular anomaly (45027-00 [743])
diathermy of telangiectases of head or neck (30213-00 [743])

30195-07 Electrotherapy of lesion of skin, multiple lesions

Diathermy
Electrodesiccation | of lesion of skin, multiple
Fulguration | lesions
Galvanocautery

Includes: that by:

- [diathermy](#)
- [electrodesiccation](#)
- [fulguration](#)
- [galvanocautery](#)

Code also when performed:

- administration of antineoplastic agent for electrochemotherapy (see block [1920])

Excludes: cauterisation of vascular anomaly (45027-00 [743])
diathermy of telangiectases of head or neck (30213-00 [743])

...

1640 Allograft, xenograft or synthetic skin graft

▼0030

...

90670-01 Allograft to burn

Allogeneic temporary biological dressing to burn
Homogeneous temporary biological dressing to burn

Split skin:

- [allograft to burn](#)
- [homograft to burn](#)

Split skin:

- allograft | to burn
- homograft

...

90671-01 Xenograft to burn

Heterogeneous temporary biological dressing to burn

Split skin:

- [heterograft](#)
- [xenograft](#)

Split skin:

- heterograft | to burn
- xenograft

Xenogeneic temporary biological dressing to burn

...

1641 Split skin graft to granulating burn site

▼0030

Includes: [debridement of granulating burn of same site](#)
[dressing of granulating burn of same site](#)
[excision of:](#)
• [granulating burn of same site](#)
• [skin for graft](#)
~~-debridement~~ | ~~of granulating burn of same site~~
~~dressing~~
~~excision~~
~~excision of skin for graft~~
repair of secondary defect by suture

Code also when performed:
• repair of secondary defect by graft
(see blocks [1645] and [1646])

...

1643 Split skin graft to burn of specific sites

▼0030

Split skin autograft to burn of specific sites

Includes: [debridement of burn of same site](#)
[dressing of burn of same site](#)
[excision of:](#)
• [burn of same site](#)
• [skin for graft](#)
~~-debridement~~ | ~~of burn of same site~~
~~dressing~~
~~excision~~
~~excision of skin for graft~~
repair of secondary defect by suture

Code also when performed:
• removal of graft:
• allograft (90666-01 [1629])
• synthetic skin graft (90668-01 [1629])
• xenograft (90667-01 [1629])
• repair of secondary defect by graft
(see blocks [1645] and [1646])

Excludes: allograft to burn (90670-01 [1640])
synthetic skin graft to burn (90672-01 [1640])
that for granulating burn (45400-01, 45403-01 [1641])
xenograft to burn (90671-01 [1640])

...

1644 Split skin graft to burn of other sites

▼0030

Split skin autograft to burn of other sites

Includes: [debridement of burn of same site](#)
[dressing of burn of same site](#)
[excision of:](#)
• [burn of same site](#)
• [skin for graft](#)
~~-debridement~~ | ~~of burn of same site~~
~~dressing~~
~~excision~~
~~excision of skin for graft~~
repair of secondary defect by suture

Code also when performed:
• removal of graft:

- allograft (90666-01 [1629])
 - synthetic skin graft (90668-01 [1629])
 - xenograft (90667-01 [1629])
 - repair of secondary defect by graft (see blocks [1645] and [1646])
- Excludes:** allograft to burn (90670-01 [1640])
synthetic skin graft to burn (90672-01 [1640])
that for granulating burn (45400-01, 45403-01 [1641])
xenograft to burn (90671-01 [1640])

...

1648 Full thickness skin graft to burn

▼0030

Wolfe graft to burn

- Includes:** [debridement of burn of same site](#)
[dressing of burn of same site](#)
[excision of:](#)
- [burn of same site](#)
 - [skin for graft](#)
- ~~debridement~~ | ~~of burn of same site~~
~~dressing~~
~~excision~~
~~excision of skin for graft~~
repair of secondary defect by suture

...

1656 Revision of burn scar or contracture

45519-00 Revision of burn scar or burn contracture

- [Burn scar or burn contracture:](#)
- [division](#)
 - [excision](#)
 - [freeing](#)
 - [release](#)
 - [Z-plasty](#)
- ~~Division~~ | ~~of burn scar or burn contracture~~
~~Excision~~
~~Freeing~~
~~Release~~
~~Z-plasty~~

- Excludes:** escharotomy (45054-00 [1607])
laser to burn scar (45025, 45026-00 [1615])

...

1657 Revision of other scar of skin

- [Scar:](#)
- [excision](#)
 - [freeing](#)
 - [release](#)
 - [Z-plasty](#)
- ~~Excision~~ | ~~of scar~~
~~Freeing~~
~~Release~~
~~Z-plasty~~

- Excludes:** administration of agent into scar (90660-00, 30207-00 [1602])
laser to scar (45025, 45026-00 [1615])
release of contracture (45515-01 [1607], 45519-00 [1656])
removal of scar incidental to other procedure – omit code that for burn scar (45519-00 [1656])

1662 **Excision, eyelid**

45617-00 Reduction of upper eyelid
[Excision of redundant skin of upper eyelid](#)
[Restoration of symmetry of upper eyelid](#)
~~Excision of redundant skin~~ | ~~of upper eyelid~~
~~Restoration of symmetry~~
Upper eyelid rhytidectomy
Code also when performed:
• browlift (45587-01, 45588-01 [**1675**])
• facelift (45587-00, 45588-00 [**1675**])
• necklift (45588-02 [**1675**])

...

1669 **Composite graft**

[Chondrocutaneous graft](#)
[Chondromucosal graft](#)
~~Chondrocutaneous~~ | ~~graft~~
~~Chondromucosal~~

...

1673 **Island flap**

Flap using transferred tissue completely separated from the surrounding and underlying tissue, except for a pedicle containing arteries and veins. Tissue is tunnelled under skin and brought out at the recipient site (with pedicle remaining under skin and attached to donor site)

Includes: [fasciocutaneous island flap](#)
[fasciomyocutaneous island flap](#)
[muscle island flap](#)
[myocutaneous island flap](#)
~~Includes: fasciocutaneous~~ | ~~island flap~~
~~fasciomyocutaneous~~
~~muscle~~
~~myocutaneous~~

Excludes: free flap (see block [**1674**])
that for reconstruction of breast (45530-02 [**1756**])

...

1675 **Facelift, necklift and browlift**

45587-00 Facelift, unilateral
Unilateral:
• [cheek lift \(meloplasty\)](#)
• [correction of facial soft tissue asymmetry](#)
• [facial rhytidectomy](#)
~~Cheek lift (meloplasty)~~ | ~~unilateral~~
~~Correction of facial soft~~
~~tissue asymmetry~~
~~Facial rhytidectomy~~

Includes: necklift

...

45588-00 Facelift, bilateral
Bilateral:
• [cheek lift \(meloplasty\)](#)
• [facial rhytidectomy](#)
~~Cheek lift (meloplasty)~~ | ~~bilateral~~
~~Facial rhytidectomy~~

Includes: necklift

Code also when performed:
• browlift (45587-01, 45588-01 [**1675**])
• eyelid reduction (45617-00, 45620-00 [**1662**])

45587-01 Browlift, unilateral

Unilateral:

- [browplasty \(endoscopic\)](#)
- [eyebrow lift](#)
- [forehead lift](#)
- [repair of eyebrow ptosis](#)

~~Browplasty (endoscopic)~~
~~Eyebrow lift~~
~~Forehead lift~~
~~Repair of eyebrow ptosis~~

~~unilateral~~

Code also when performed:

- eyelid reduction (45617-00, 45620-00 [1662])
- facelift (45587-00, 45588-00 [1675])
- necklift (45588-02 [1675])

45588-01 Browlift, bilateral

Bilateral:

- [browplasty \(endoscopic\)](#)
- [eyebrow lift](#)
- [forehead lift](#)
- [repair of eyebrow ptosis](#)

~~Browplasty (endoscopic)~~
~~Eyebrow lift~~
~~Forehead lift~~
~~Repair of eyebrow ptosis~~

~~bilateral~~

Code also when performed:

- eyelid reduction (45617-00, 45620-00 [1662])
- facelift (45587-00, 45588-00 [1675])
- necklift (45588-02 [1675])

...

1680 Other repair of nose

...

45714-01 Closure of other nasal fistula

Nasolabial fistulectomy

Nasopharyngeal fistulectomy

~~Nasolabial~~
~~Nasopharyngeal~~ | ~~fistulectomy~~

Repair of nasal fistula NOS

Includes: flap repair
revision of flap

...

1681 Repair of pharynx

45645-00 Closed repair of choanal atresia

Closed correction of nasopharyngeal atresia

Includes: [insertion of nasopharyngeal stent](#)
[irrigation and suction of nasopharyngeal stent](#)

~~insertion~~
~~irrigation and suction~~ | ~~of nasopharyngeal stent~~
puncture and dilation

45646-00 Open repair of choanal atresia

Open correction of nasopharyngeal atresia

Includes: [insertion of nasopharyngeal stent](#)
[irrigation and suction of nasopharyngeal stent](#)

~~insertion~~
~~irrigation and suction~~ | ~~of nasopharyngeal stent~~
removal of bone

1686 Revision of free flap and associated procedures

Includes: muscle free flap
myocutaneous free flap

~~Includes:~~ muscle | free flap
myocutaneous

...

1687 Revision of other plastic procedures on soft tissue

45625-00 Revision of levator sutures following previous correction of blepharoptosis

Adjustment of levator sutures following previous correction of blepharoptosis
Correction of eyelid height following previous correction of blepharoptosis

~~Adjustment of levator sutures | following previous correction of~~
~~Correction of eyelid height | blepharoptosis~~

...

1697 Fixation of transcutaneous abutment (osseointegration procedure)

▼1220

Attachment of framework to titanium fixture for osseointegration
Connection of percutaneous abutment for osseointegration

~~Attachment of framework to titanium fixture | for~~
~~Connection of percutaneous abutment | osseointegration~~

Osseointegration for attachment of prosthetic replacement, second stage

Includes: exposure of titanium fixture
skin graft of fixture site
thinning of skin flap over fixture site

Excludes: intraoral osseointegration procedure (45845-00 [400])

...

1709 Midfacial osteotomies

3 or more osteotomies (osteoplasties) of midface

Osteotomy (osteoplasty):

- Le Fort II
- Le Fort III
- modified Le Fort III (malar-maxillary) (nasomalar)

~~Le Fort II |~~
~~Le Fort III |~~
~~Modified Le Fort III (malar-maxillary) (nasomalar) | osteotomy (osteoplasty)~~

Includes: bone graft
transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (47726-00 [1563])

...

1716 Reconstruction of orbital cavity

Includes: orbital floor
orbital wall
reduction of prolapsed or entrapped orbital contents

Excludes: correction of:
• hypertelorism (45767, 45770-00 [1711])
• orbital dystopia (45776-00, 45779-00 [1711])
• Treacher Collins syndrome (45773-00 [1711])
frontal bone advancement (45782, 45785 [1710])

45590-00 Reconstruction of orbital cavity

45590-01 Reconstruction of orbital cavity with implant

Includes: [alloplastic implant \(patch\)](#)
[silastic implant \(patch\)](#)
[synthetic \(artificial\) implant \(patch\)](#)

Includes: ~~alloplastic~~
~~silastic~~ | ~~implant (patch)~~
~~synthetic (artificial)~~

45593-00 Reconstruction of orbital cavity with cartilage graft

45593-01 Reconstruction of orbital cavity with implant and cartilage graft

Includes: [alloplastic implant \(patch\)](#)
[silastic implant \(patch\)](#)
[synthetic \(artificial\) implant \(patch\)](#)

Includes: ~~alloplastic~~
~~silastic~~ | ~~implant (patch)~~
~~synthetic (artificial)~~

45593-02 Reconstruction of orbital cavity with bone graft

45593-03 Reconstruction of orbital cavity with implant and bone graft

Includes: [alloplastic implant \(patch\)](#)
[silastic implant \(patch\)](#)
[synthetic \(artificial\) implant \(patch\)](#)

Includes: ~~alloplastic~~
~~silastic~~ | ~~implant (patch)~~
~~synthetic (artificial)~~

...

1717 Reconstruction of other skull and facial bones

Excludes: correction of:

- hypertelorism (45767, 45770-00 [1711])
 - orbital dystopia (45776-00, 45779-00 [1711])
 - Treacher Collins syndrome (45773-00 [1711])
- frontal bone advancement (45782, 45785 [1710])

45788-00 Reconstruction of glenoid fossa, zygomatic arch and temporal bone
Obwegeser technique

45785-03 Total cranial vault reconstruction
Cranial vault reshaping involving surgery to a combination of frontal, temporoparietal and occipital regions
Transcranial repositioning of craniofacial bones

Includes: [advancement of cranial bones](#)
[osteotomy \(repositioning\) of cranial bones](#)
[recession of cranial bones](#)

Includes: ~~advancement~~
~~osteotomy (repositioning)~~ | ~~of cranial bones~~
~~recession~~

...

1743 Biopsy of breast

Includes: localisation (stereotactic) of lesion of breast

31548-00 Core biopsy of breast

[Breast biopsy:](#)

• [percutaneous \[closed\]](#)

• [tru-cut](#)

~~Percutaneous [closed]~~ | ~~tru-cut~~ biopsy of breast

Excludes: biopsy of breast:

- excisional (31500-00 [1744])
- fine needle (31533-00 [1743])
- open (31500-01 [1743])

31500-01 Open biopsy of breast

[Breast biopsy:](#)

• [incisional](#)

• [open surgical](#)

~~Incisional~~ | ~~Open surgical~~ biopsy of breast

Excludes: excisional biopsy of breast (31500-00 [1744])

...

1744 Excision of lesion of breast

Includes: localisation of lesion of breast
with or without frozen section biopsy

Code also when performed:

- excision of axillary lymph nodes (30300-00, 30332-00, 30335-00, 30336-00 [808])

31500-00 Excision of lesion of breast

Advanced breast biopsy instrumentation [ABBI]

[Complete local excision \[CLE\] of breast lesion](#)

[Excisional biopsy of breast lesion](#)

[Local excision \(wide\) of breast lesion](#)

~~Complete local excision [CLE]~~ | ~~Excisional biopsy~~ | ~~Local excision (wide)~~ of breast lesion

Lumpectomy

Partial mastectomy

Quadrantectomy

[Segmental resection of breast](#)

~~Segmental resection~~ | ~~Segmentectomy~~ of breast

Tylectomy

Excludes: re-excision of lesion of breast (31515-00 [1744])

...

1756 Reconstruction procedures on breast

45539-00 Reconstruction of breast with insertion of tissue expander

45530-02 Reconstruction of breast using flap

Includes: ~~deep inferior epigastric:~~
~~• artery [DIEA]~~
~~• perforator [DIEP]~~
~~free trans rectus abdominus~~
~~myocutaneous [TRAM]~~
~~inferior gluteal artery~~
~~myocutaneous~~
~~omental~~
~~pedicle~~
~~subcutaneous tissue and fat~~
~~superior gluteal artery~~ flap

deep inferior epigastric:
• artery [DIEA] flap
• perforator [DIEP] flap
free trans rectal abdominus myocutaneous [TRAM] flap
gluteal artery flap (inferior) (superior)
myocutaneous flap
omental flap
pedicle flap
repair of secondary cutaneous defect by suture
subcutaneous tissue and fat flap

Code also when performed:

- insertion of prosthesis (45527 [1753])
- microsurgical anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])
- reconstruction of nipple or areola (45545 [1757])
- repair of secondary defect:
 - abdominal wall (muscle) (30403-05 [1000])
 - by graft (see Alphabetic Index: Graft/by site or type)
 - muscle, by flap (45009-01 [1672])
 - noncutaneous, by suture (see Alphabetic Index: Suture/by site)

...

1822 Assessment of personal care and other activities of daily/independent living

▼0534

...

96024-00 Assessment of need for assistive or adaptive device, aid or equipment

Includes: measurement
prescription

Measurement | ~~for assistive or adaptive device,~~
Prescription | ~~aid or equipment~~

Note: For list of assistive and adaptive devices, aids or equipment see block [1870]

...

96030-00 Situational/occupational/vocational/environmental assessment

Assessment of a client's environment to determine productivity, accessibility, suitability or the client's ability to function within that environment

Includes: assessment (of):

- carer
- driving
- employment
- ergonomic
- home environment

- [housing/accommodation](#)
- [legal situation](#)
- [leisure](#)
- [play](#)
- [school environment](#)
- [transport](#)
- [work environment](#)

Includes: carer
 driving
 employment
 ergonomic
 home environment
 housing/accommodation
 legal situation
 leisure
 play
 school environment
 transport
 work environment

assessment

Excludes: assessment of client's ability to function socially within their environment (96032-00 [1823])
 financial management assessment (96029-00 [1822])
 home management assessment (96028-00 [1822])

...

1824 Other assessment, consultation, interview, examination or evaluation

...

96037-00 Other assessment, consultation or evaluation

[Assessment NOS](#)
[Consultation NOS](#)
[Evaluation NOS](#)
[Interview NOS](#)

~~Assessment~~
~~Consultation~~
~~Evaluation~~
~~Interview~~ | NOS

...

1830 Other diagnostic neurological tests, measures or investigations

...

39131-02 Testing of implanted neurostimulator

[Implanted neurostimulator:](#)
 • [adjustment](#)
 • [reprogramming](#)

~~Adjustment~~
~~Reprogramming~~ | of implanted neurostimulator

...

1849 Other measurement of respiratory function

...

11506-00 Other measurement of respiratory function

[Respiratory function test NOS](#)
[Spirometry NOS](#)

~~Respiratory function test~~
~~Spirometry~~ | NOS

...

1868 Psychosocial counselling

▼0534

96081-00 Relationship counselling

[Couples counselling](#)
[Family counselling](#)
[Marriage counselling](#)

~~Couples~~
~~Family~~
~~Marriage~~ | counselling

Excludes: that using a behavioural, cognitive behavioural, interpersonal or insight oriented approach in:
• couples therapy (96178-00 [1873])
• family/carer- focussed therapy (96102-00 [1873])
• interpersonal psychotherapy (96177-00 [1873])

...

1869 Other counselling or education

...

96090-00 Other counselling or education

[Counselling NOS](#)
[Education NOS](#)

~~Counselling~~
~~Education~~ | NOS

...

1873 Psychological/psychosocial therapies

...

96001-00 Psychological skills training

Includes: Skills training in:
• activity scheduling
• anger management
• assertiveness
• conflict resolution
• coping
• goal planning
• impulse control
• limit setting
• problem solving
• relaxation techniques NOS
• role playing
• self esteem
• social skills NOS
• [stress management](#)
• [time management](#)

~~stress~~
~~time~~ | management

Excludes: interpersonal psychotherapy (96177-00 [1873])
that as a technique of:
• cognitive and/or behavioural therapy (96101-00 [1873])
• insight oriented therapy (96100-00 [1873])

...

96101-00 Cognitive and/or behavioural therapy [CBT]

...

Includes: that using ([approach/technique](#)):
• [cognitive restructuring](#)
• [desensitisation \(graded exposure\) \(exposure therapy\)](#)
• [dialectical behaviour](#)
• [hyperventilation control](#)

- [motivational interviewing](#)
- [problem solving](#)
- [rational emotive therapy](#)
- [relapse-prevention](#)
- [relaxation](#)
- [response-prevention](#)
- [role play/rehearsal](#)
- [structured problem solving](#)
- [treatment adherence](#)
- ~~cognitive restructuring~~
- ~~desensitisation (graded exposure)(exposure therapy)~~
- ~~dialectical behaviour~~
- ~~hyperventilation control~~
- ~~motivational interviewing~~
- ~~problem solving~~
- ~~rational emotive therapy~~
- ~~relapse-prevention~~
- ~~relaxation~~
- ~~response-prevention~~
- ~~role play/rehearsal~~
- ~~structured problem solving~~
- ~~treatment adherence~~

approach/technique

Excludes: cognitive and/or behavioural approach in:

- couples therapy (96178-00 [**1873**])
- family/carer-focussed therapy (96102-00 [**1873**])
- sex therapy (96179-00 [**1873**])

...

96178-00 Couples therapy

Couples therapy is a systematic effort to produce change in a relationship by introducing changes into the patterns of partner interactions. The aim of couples therapy is to identify the presence of distress and dissatisfaction in the relationship and to improve or alleviate the presenting symptoms and restore the relationship to a more effective and healthier level of functioning.

Marriage therapy

Includes: that using:

- [cognitive and/or behavioural approach](#)
- [ego analytical approach](#)
- [interpersonal approach](#)
- [object relations approach](#)
- [psychoanalytical approach](#)
- ~~cognitive and/or behavioural~~
- ~~ego-analytical~~
- ~~interpersonal~~
- ~~object relations~~
- ~~psychoanalytical~~

approach

96102-00 Family/carer-focussed therapy

Family/carer-focussed therapy is defined as therapeutic processes which promote, improve and sustain the effective functioning of the family/carer, and/or work with the family/carer to achieve improvement in the mental health status of the client. The scope of interventions is limited to family/carers. It should be noted that in this context, family/carers include people who have a significant emotional connection to the client, such as friends and partners, and those who have a formal role as the client's carer.

Family/carer-focussed therapy can comprise a number of different processes which have in common a focus on changing the knowledge, skills, interactions or capacity of the family. These may include:

- assisting family/carer and client to see things from other's perspective and to develop shared understandings
- assisting family/carer to understand: the nature of the client's mental health problem; their roles and the role of others in the care plan; how the mental health problem may impact on the client's thinking, behaviour, relationships and educational/vocational functioning; factors which may assist or impair recovery; and warning signs of deterioration
- developing new skills and techniques to support positive family interactions and relationships
- enhancing the capacity of family/carers to anticipate and solve problems
- promoting effective parenting/carer strategies relevant to the client's age, developmental needs and family circumstances

- supporting the family/carer to navigate the mental health care system and to maintain their own health and well-being.

Interventions provided to family/carers, with or without the client present, is classified as 'Family/carer-focussed therapy'.

Includes: counselling

crisis management

problem solving

skills training

that using:

• [cognitive and/or behavioural approach](#)

• [interpersonal approach](#)

• [psychodynamic approach](#)

~~• cognitive and/or behavioural~~

~~• interpersonal~~

~~• psychodynamic~~

| approach

96179-00 Sex therapy

Includes: that using:

• [cognitive and/or behavioural approach](#)

• [interpersonal approach](#)

• [psychodynamic approach](#)

~~• behavioural~~

~~• cognitive and/or behavioural~~

~~• interpersonal~~

~~• psychodynamic~~

| approach

...

1905 Therapeutic interventions on musculoskeletal system

96159-00 Range of movement/muscle testing with specialised equipment

Isokinetic testing

50115-00 Manipulation/mobilisation of joint, not elsewhere classified

Manipulation involves the forceful passive movement of a joint beyond its active limit of motion.

Mobilisation involves freeing body part(s) with the aim of increasing movement

[Manual rupture of joint NOS](#)

[Release or stretching of joint NOS](#)

~~Manual rupture~~

~~Release or stretching~~

| of joint NOS

...

1906 Implantation of hormone or living tissue

▼0030

14203-00 Direct subdermal hormone implantation

[Insertion of subdermal implant:](#)

• [contraceptive](#)

• [hormone](#)

~~Insertion of subdermal:~~

~~• contraceptive~~

~~• hormone~~

| implant

Includes: implantation:

• oestrogen

• progesterone

incision

suture

...

1909 Conduction anaesthesia

▼0031

See extension codes

Note: Emergency modifier '0' is not valid for use with ASA score 6.

92508-XX Neuraxial block

Injection/infusion:

- caudal
- epidural
- spinal

| | | |
|---------------------|--|--------------------|
| Caudal | | injection/infusion |
| Epidural | | |
| Spinal | | |

Code also when performed:

- continuing (postprocedural) infusion of neuraxial block (92516-00 [1912])

Excludes: that during:

- labour (92506 [1333])
- labour and delivery procedure (92507 [1333])

...

1920 Administration of pharmacotherapy

...

96205-XX Other administration of pharmacological agent

~~Administration of pharmacological agent via orifice~~
~~Intradermal injection of pharmacological agent~~

Administration pharmacological agent:

- topical
- transdermal
- via orifice

Intradermal injection

Iontophoresis

| | | |
|------------------------|--|---|
| Topical | | administration of pharmacological agent |
| Transdermal | | |

Excludes: administration of pharmacological agent via mouth (96203 [1920])

...

1923 Technology-assisted interventions

Code first:

- procedure(s) performed

Excludes: computer-assisted image:

- guidance — see Alphabetic Index
- intensifier — see Alphabetic Index
- stereotactic localisation — see Alphabetic Index

| | | |
|--------------------------------------|--|------------------------|
| computer-assisted image: | | (see Alphabetic Index) |
| • guidance | | |
| • intensifier | | |
| stereotactic localisation | | |

...

2009 Localised bone nuclear medicine imaging study

Includes: blood:

- flow study
- pool study

| | | |
|-------------------|--|-------|
| • flow | | study |
| • pool | | |

Excludes: that of joint (61446-01, 61449-01 [2010])

...

2010 Localised joint nuclear imaging study

Includes: blood:

- [flow study](#)
- [pool study](#)

~~• flow~~ | study
~~• pool~~

...

2011 Whole body bone nuclear medicine imaging study

61421-00 Whole body bone study

Includes: blood:

- [flow study](#)
- [pool study](#)

~~• flow~~ | study
~~• pool~~

61425-00 Whole body bone study with single photon emission computerised tomography [SPECT]

Includes: blood:

- [flow study](#)
- [pool study](#)

~~• flow~~ | study
~~• pool~~

ACHI Alphabetic Index

Ablation — *see also Destruction/by site*

- arrhythmia circuit or focus — *see Ablation/cardiac*
- cardiac
- - arrhythmia circuit or focus, involving
- - - open approach NEC 38287-03 [601]
- - - - atrioventricular 38287-03 [601]
- - - - both atrial chambers 38290-02 [601]
- - - - left atrial chamber 38287-04 [601]
- - - - right atrial chamber 38287-03 [601]
- - - percutaneous catheter approach NEC 38287-01 [601]
- - - - atrioventricular 38287-01 [601]
- - - - both atrial chambers 38290-01 [601]
- - - - left atrial chamber 38287-02 [601]
- - - - right atrial chamber 38287-01 [601]
- - - muscle, ventricular 38518-00 [609]
- - myocardial septal (percutaneous transluminal) 38748-01 [616]
- [chemical, nerve](#) — *see Administration/specified site/nerve/by site*
- cord, umbilical (percutaneous) 90463-00 [1330]

...

Administration (around) (into) (local) (of) (therapeutic agent) NEC — *code to block [1920] with extension -19*

Note: Terms listed under the lead term 'Administration' are split by three main subterms; Administration/indication, Administration/specified site and Administration/type of agent.

- indication — *see also Administration/specified site OR Administration/type of agent*

...

- - varices (endoscopic)
- - - [duodenum 30478-07 \[870\]](#)
- - - gastric 30478-07 [870]
- - - oesophageal (oesophagogastric junction) 30476-04 [851]

...

- specified site
- ...
- - caudal (region) — *see also Administration/specified site/spinal/caudal*
- - - [for](#)
- - - - [labour 92506 \[1333\]](#)
- - - - and delivery procedure 92507 [1333]
- - - - [operative anaesthesia 92508 \[1909\]](#)
- - costotransverse joint (corticosteroid) (local anaesthetic) 39013-01 [31]

...

Arrest (of)

- bleeding — *see Arrest/haemorrhage*
- bone growth — *see Epiphysiodesis*
- cardiac, ~~induced 22075-00 [642]~~
- - [deep hypothermic 22075-00 \[642\]](#)
- - [induced 22075-00 \[642\]](#)
- circulatory, induced 22075-00 [642]
- epiphyseal — *see Epiphysiodesis*
- haemorrhage
- ...
- - vein NEC 30058-01 [777]
- - - via surgical peripheral catheterisation — *see Embolisation/blood vessel, transcatheter/by site*
- [hypothermic 22075-00 \[642\]](#)

...

Arthroplasty (*see also Repair/joint*) 50127-00 [1571]

...

- metatarsophalangeal
- - for joint replacement 49857-00 [1544]
- [phalangeal, hand](#) — *see Arthroplasty/interphalangeal/hand*
- radio-ulnar, distal (ligamentous)

...

Capsulectomy

...

- lens 90077-00 [203]
- - with vitrectomy (anterior approach) (limbal approach) (pars plana approach) 42731-01 [200]
- [limbal, with vitrectomy 42731-01 \[200\]](#)

Capsulorrhaphy

...

Endarterectomy

...

- extremities 33539-00 [700]
- femoral ([common](#)) ([superficial](#)) NEC 33539-00 [700]
- - deep, extended (profunda femoris) 33542-00 [700]
- iliac 33518-00 [700]

...

Excision — see also Removal

...

- burn (< 10% body surface area) 30017-01 [1627]
- - with graft — see *Graft/skin/for burn/by site*
- - ≥ 10% body surface area 30020-00 [1627]
- - [contracture 45519-00 \[1656\]](#)
- - scar 45519-00 [1656]

...

Extraction

...

- lens (crystalline) NEC 42698-05 [200]
- - with ~~removal of vitreous 42731-01 [200]~~
- - - [implantation of trans-trabecular drainage device \(iStent\) \(microstents\) 42705-00 \[200\]](#)
- - - [removal of vitreous \(vitrectomy\) 42731-01 \[200\]](#)

...

Fixation

...

- bone — see also *Fixation/bone/external AND Fixation/bone/internal*

...

- - internal

...

- - - femur, femoral
- - - - condyle, fracture 47537-00 [1500]
- - - - - intra-articular 47534-00 [1500]
- - - - - with repair of ligament (reconstruction) 47588-00 [1521]
- - - - - with tibial articular surface fracture 47591-00 [1521]
- - - - neck 47519-00 [1479]
- - - - [pertrochanteric 47519-00 \[1479\]](#)
- - - - proximal 47519-00 [1479]
- - - - shaft
- - - - - intramedullary (cross) 47531-00 [1486]
- - - - subcapital 47519-00 [1479]
- - - - [subtrochanteric 47519-00 \[1479\]](#)
- - - - trochanteric 47519-00 [1479]

...

Freeing

- adhesions — see *Division/adhesions*

- [burn contracture 45519-00 \[1656\]](#)

- entrapped muscle

- - extraocular 42854-00 [217]

- scar — see [also](#) *Revision/scar*

- - [burn 45519-00 \[1656\]](#)

Freshen, freshening

...

Hemiarthroplasty

- ...
- metacarpophalangeal (1 joint) (hemi) (total) 46309-01 [1463]
- - 2 joints 46312-01 [1463]
- - 3 joints 46315-01 [1463]
- - 4 joints 46318-01 [1463]
- - ≥ 5 joints 46321-01 [1463]
- [phalangeal, hand](#) — *see Hemiarthroplasty/interphalangeal/hand*
- shoulder 48915-00 [1404]

...

Incision

- ...
- ovary ([cyst](#))
- - laparoscopic 35637-07 [1241]
- - via laparotomy 35713-02 [1241]

...

Insertion

- ...
- device — *see also Insertion/by type of device*
- ...
- stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) (*see also Banding/gastric, for obesity*) 90950-02 [889]
- ...
- gastric
- - balloon, for obesity ([bubble](#)) (endoscopic) 90950-02 [889]
- - band, for obesity — *see Banding/gastric, for obesity*
- ...
- intragastric balloon, for obesity ([bubble](#)) (endoscopic) 90950-02 [889]

...

Interview — (*see also Assessment*) [96037-00 \[1824\]](#)

...

Lensectomy — *see Extraction/cataract/lens*

...

Lobectomy

- ...
- thyroid — *see also Thyroidectomy*
- - with removal of substernal thyroid (subtotal) (total) 90046-02 [114]
- - bilateral (complete or total excision of both lobes) 30296-01 [114]
- - - with removal of substernal thyroid (subtotal) (total) 90046-02 [114]
- - - following previous thyroid surgery 30297-02 [114]
- - - partial (subtotal) 30308-00 [114]
- - - - following previous thyroid surgery 30297-02 [114]
- - unilateral (complete or total excision of 1 lobe) 30306-01 [114]
- - - with removal of substernal thyroid (subtotal) (total) 90046-02 [114]
- - - following previous thyroid surgery 30297-02 [114]
- - - partial (subtotal) 30310-00 [114]
- - - with total lobectomy of the other lobe 30308-00 [114]
- - - - following previous thyroid surgery 30297-02 [114]

...

Management (of)

- ...
- block
- ...
- [choanal atresia stent 90179-05 \[568\]](#)
- circulatory support device 13851-00 [1890]
- ...
- haemorrhage
- - postpartum 16567-00 [1347]
- - - by suture of uterus (B-Lynch) (compression) 96228-00 [1347]
- [nasopharyngeal stent 90179-05 \[568\]](#)
- rupture of thoracic aorta 38572-00 [693]

...

Pharyngotomy (lateral) 41779-00 [418]
- with
-- glossectomy, total 41779-01 [392]
-- pharyngectomy (partial) 41782-00 [420]
--- with glossectomy (partial) 41785-00 [420]
---- total 41785-01 [420]

Phlebectomy (stab)

- varicose veins, lower limb 32504-00 [727]

Phlebography 59718-00 [1990]

...

Reduction

...

- fracture (bone) (with cast) (with splint)

...

-- femur (closed) 47516-01 [1486]
--- with internal fixation (cross) (intramedullary) 47531-00 [1486]

---- neck 47519-00 [1479]

---- [pertrochanteric 47519-00 \[1479\]](#)

---- proximal 47519-00 [1479]

---- subcapital 47519-00 [1479]

---- [subtrochanteric 47519-00 \[1479\]](#)

---- trochanteric 47519-00 [1479]

--- epiphysis (capital) (slipped) 47525-00 [1493]

--- open 47528-00 [1486]

--- with internal fixation (cross) (intramedullary) 47528-01 [1486]

--- epiphysis (capital) (slipped) 47525-01 [1493]

...

-- humerus

--- [condylar region — see Reduction/fracture/humerus/distal](#)

--- distal (closed) 47456-00 [1413]

--- with internal fixation 47456-01 [1413]

--- open 47459-00 [1414]

--- with internal fixation 47459-01 [1414]

--- proximal (closed) 47426-00 [1413]

--- with internal fixation 47426-01 [1413]

--- open 47429-00 [1414]

--- with internal fixation 47429-01 [1414]

--- intra-articular 47432-00 [1414]

--- with internal fixation 47432-01 [1414]

--- shaft (closed) 47447-00 [1413]

--- with internal fixation (intramedullary) 47451-00 [1413]

--- open 47450-00 [1414]

--- with internal fixation (intramedullary) 47450-01 [1414]

--- [supracondylar region — see Reduction/fracture/humerus/distal](#)

...

Release

...

- joint [NEC 50115-00 \[1905\]](#)

- capsule — see *Release/capsule/joint*

- knee

--- lateral, arthroscopic (closed) 49560-02 [1501]

--- with

---- chondroplasty 49561-00 [1514]

---- and

----- implant (carbon fibre) 49562-00 [1514]

----- multiple drilling 49562-00 [1514]

----- debridement 49561-00 [1514]

----- and

----- implant (carbon fibre) 49562-00 [1514]

----- multiple drilling 49562-00 [1514]

----- osteoplasty 49561-00 [1514]

----- and

----- implant (carbon fibre) 49562-00 [1514]

----- multiple drilling 49562-00 [1514]

...

Removal — see also *Excision*

...

- cervical ligature (cerclage material) (suture) 16512-00 [1274]

- choanal atresia stent 96190-02 [568]

- - with replacement 96190-01 [568]

- cholesteatoma — see *Clearance/cholesteatoma*

- concha bullosa (bulla ethmoidalis) — see *Ethmoidectomy*

...

- device — see also *Removal/by type of device*

...

- - stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) (see also *Removal/gastric/band*) 90950-03 [889]

...

- gastric

- - balloon, for obesity ([bubble](#)) (endoscopic) 90950-03 [889]

- - band (adjustable) (fixed) (nonadjustable) (open) ([via laparotomy](#)) 90942-00 [889]

...

- haematoma — see *Drainage/haematoma OR Evacuation/haematoma*

...

- intragastric balloon, for obesity ([bubble](#)) (endoscopic) 90950-03 [889]

...

- stent

- - bile duct

- - - endoscopic 30451-03 [960]

- - - - with replacement 30451-02 [960]

- - - open 30451-01 [960]

- - - - with replacement 30451-00 [960]

- - - percutaneous 30492-02 [960]

- - - - with replacement 30492-01 [960]

- - bronchus 41905-08 [546]

- - - with replacement 41905-07 [546]

- - choanal atresia 96190-02 [568]

- - - with replacement 96190-01 [568]

- - colonic (endoscopic) (metal) (plastic) (Wallstent) 32023-02 [906]

...

Repair

...

- labrum

- - hip, arthroscopic 96225-00 [1491]

- - shoulder, with arthroscopic stabilisation 48957-00 [1404]

- labyrinth NEC 90117-00 [3321]

- laceration — see also *Suture/by site AND Repair/wound*

...

Replacement

...

- choanal atresia stent 96190-01 [568]

- clasp on removable orthodontic appliance 97876-00 [483]

...

- joint (total) 50127-00 [1571]

...

- - metatarsophalangeal 49857-00 [1544]

- - phalangeal, hand — see *Replacement/joint/interphalangeal/hand*

- - radio-ulnar, distal (ligamentous) 46345-00 [1469]

...

- stent

- - biliary

- - - endoscopic 30451-02 [960]

- - - open 30451-00 [960]

- - - percutaneous 30492-01 [960]

- - bronchus 41905-07 [546]

- - choanal atresia 96190-01 [568]

- - colonic (endoscopic) (metal) (plastic) (Wallstent) 32023-01 [906]

...

Resection — see also *Excision*

...

- duct(s)
- - hepatic, radical (common bile duct) ([left and right](#)) 30463-00 [966]
- - - with resection of segment of liver ([partial](#)) ([total](#)) 30464-00 [966]
- ...
- hepatic duct(s), radical (common bile duct) ([left and right](#)) 30463-00 [966]
- - with resection of segment of liver ([partial](#)) ([total](#)) 30464-00 [966]

...

Revision

- shunt
- - arteriovenous (external) 34500-01 [764]
- - cerebrospinal fluid
- - - cisternal (cisternoatrial) (cisternoperitoneal) (cisternopleural) 40009-01 [24]
- - - - distal site
- - - - - atrial 90200-00 [605]
- - - - - peritoneal 90330-00 [1001]
- - - - - pleural 90174-00 [557]
- - - lumboperitoneal 40009-02 [56]
- - - - distal site 90330-00 [1001]
- - - spinal 40009-02 [56]
- - - - distal site 90330-00 [1001]
- - - ventricular (ventriculoatrial) (ventriculoperitoneal) (ventriculopleural) 40009-00 [24]
- - - - distal site
- - - - - atrial 90200-00 [605]
- - - - - peritoneal 90330-00 [1001]
- - - - - pleural 90174-00 [557]
- - - cisternal — see [Revision/shunt/cerebrospinal fluid/cisternal](#)
- - lumboperitoneal — see [Revision/shunt/cerebrospinal fluid/lumboperitoneal](#)
- - spinal — see [Revision/shunt/cerebrospinal fluid/spinal](#)
- - ventricular — see [Revision/shunt/cerebrospinal fluid/ventricular](#)
- skin pocket, for

...

Rupture

- cyst
- - ovary
- - - laparoscopic 35637-07 [1241]
- - - via laparotomy 35713-02 [1241]
- [joint, manual 50115-00 \[1905\]](#)
- membranes, artificial
- - after onset of labour (surgical augmentation) 90466-01 [1335]
- - - with medical augmentation of labour 90466-02 [1335]
- - before onset of labour (surgical induction) 90465-03 [1334]
- - - with medical induction of labour 90465-05 [1334]

...

Stretching

- foreskin 92132-00 [1904]
- [joint 50115-00 \[1905\]](#)

Strictureplasty

...

Thyroidectomy

- with removal of substernal thyroid (~~subtotal~~) (~~total~~) 90046-02 [114]
- - [following previous thyroid surgery 30297-02 \[114\]](#)
- bilateral (complete or total excision of both lobes) 30296-01 [114]
- ...
- near total 30296-01 [114]
- [subtotal, following previous thyroid surgery 30297-02 \[114\]](#)
- [total, following previous thyroid surgery 30297-02 \[114\]](#)
- unilateral (complete or total excision of 1 lobe) 30306-01 [114]

...

Ventilation

- bilevel positive airway pressure (BiPAP) (nonintubated) — *see block [570]*
- - combined with continuous ventilatory support, for neonates — *see block [571]*
- - via endotracheal tube or tracheostomy (with continuous ventilatory support) — *see block [569]*
- continuous
 - - mechanical — *see block [569]*
 - - - combined with noninvasive ventilatory support, for neonates — *see block [571]*
 - - negative pressure
 - - - breathing (CNPB) 92041-00 [568]
 - - - ventilation (CNPV) 92041-00 [568]
 - - positive airway pressure (CPAP) (nonintubated)
 - *see block [570]*
 - - - combined with continuous ventilatory support, for neonates — *see block [571]*
 - - - via endotracheal tube or tracheostomy (with continuous ventilatory support) — *see block [569]*
- intermittent positive pressure
 - - breathing (IPPB) — *see block [570]*
 - - - combined with continuous ventilatory support, for neonates — *see block [571]*
 - - ventilation (IPPV) — *see block [570]*
 - - - combined with continuous ventilatory support, for neonates — *see block [571]*
- [invasive — *see Ventilation/mechanical, continuous*](#)
- mechanical, continuous
 - - combined with noninvasive ventilatory support, for neonates — *see block [571]*
 - - endotracheal respiratory assistance — *see block [569]*
 - - intermittent mandatory ventilation (IMV) — *see block [569]*
 - - positive and expiratory pressure (PEEP) — *see block [569]*
 - - pressure support ventilation (PSV) — *see block [569]*
- nonintubated — *see block [570]*
- noninvasive
 - - combined with continuous ventilatory support, for neonates — *see block [571]*
 - - mask ventilation (NIMV) — *see block [570]*
 - - pressure ventilation (NIPV) — *see block [570]*
- via endotracheal tube or tracheostomy (with continuous ventilatory support) — *see block [569]*

...

Z-plasty — *see also Flap/skin*

- for Dupuytren's contracture (hand) 46384-00 [1467]
 - contracture (skin) 45515-01 [1607]
 - - burn 45519-00 [1656]
 - scar (skin) — *see also Revision/scar*
 - - [burn 45519-00 \[1656\]](#)
- ## Zygote intrafallopian transfer (ZIFT) 13215-02 [1297]



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**Review of the ICD-10-AM Conventions
and terminology issues**

Introduction/Rationale:

This document contains amendments to terminology:

- Tabular List of Diseases -> ICD-10-AM Tabular List
- Alphabetic List of Diseases -> ICD-10-AM Alphabetic Index

Amendments are also proposed to create consistency between ICD-10-AM Tabular List and Alphabetic Index Conventions and ACHI Tabular List and Alphabetic Index Conventions.

See also TN1181 Review of the ACHI Conventions and terminology issues.

THE INTERNATIONAL STATISTICAL CLASSIFICATION
OF DISEASES AND RELATED HEALTH PROBLEMS,
TENTH REVISION, AUSTRALIAN MODIFICATION

ICD-10-AM

TABULAR LIST OF DISEASES

~~Tenth~~ Eleventh Edition
1 July 2019~~7~~

...

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The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) —~~Tabular List of Diseases~~.

...

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ISBN xxx ICD-10-AM Alphabetic Index ~~of Diseases~~
ISBN xxx ACHI Tabular List ~~of Interventions~~
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...

TABLE OF CONTENTS

PREFACE.....

...

ACKNOWLEDGMENTS.....

...

INTRODUCTION.....

...

Development of ICD-10.....

Updates.....

Development of ICD-10-AM, ACHI and ACS.....

Conventions used in the ICD-10-AM ~~Tabular List of Diseases~~.....

INTRODUCTION

DEVELOPMENT OF ICD-10

...

In addition to the technical contributions provided by many specialist groups and individual experts, a large number of comments and suggestions were received from WHO Member States and Regional Offices as a result of the global circulation of draft proposals for revision in 1984 and 1986. From the comments received, it was clear that many users wished the ICD to encompass types of data other than the 'diagnostic information' (in the broadest sense of the term) that it has always covered. In order to accommodate the perceived needs of these users, the concept arose of a 'family' of classifications centred on the traditional ICD with its familiar form and structure. The ICD itself would thus meet the requirement for diagnostic information for general purposes, while a variety of other classifications would be used in conjunction with it and would deal either with different approaches to the same information or with different information (notably medical and surgical ~~procedures~~ [interventions](#), and ~~disablement~~ [disability and functioning](#)).

...

DEVELOPMENT OF ICD-10-AM, ACHI AND ACS

An Australian modification of the World Health Organization's (WHO) *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision* (ICD-10) and the development of an accompanying Australian ~~procedure~~ [interventions](#) classification was unanimously endorsed by the Australian Health Ministers' Advisory Council (AHMAC) for introduction as the Australian standard for morbidity coding in health services from 1 July 1998.

...

Content summary

ICD-10-AM Tabular List of Diseases. The [ICD-10-AM](#) Tabular List ~~of Diseases~~ contains the disease classification ~~itself~~ at the three, four and five character levels. A listing of the three character categories is included, as are four appendices:

| | |
|------------|---|
| Appendix A | Morphology of neoplasms |
| Appendix B | Special tabulation lists for mortality and morbidity |
| Appendix C | Unacceptable principal diagnosis codes |
| Appendix D | Classification of hospital acquired diagnoses (CHADx) |

ICD-10-AM Alphabetic Index of Diseases. The [ICD-10-AM](#) Alphabetic Index ~~of Diseases~~ is used to locate diagnostic terms to be coded. The [ICD-10-AM](#) Alphabetic Index contains many diagnostic terms ~~which that~~ do not appear in the [ICD-10-AM](#) Tabular List. [The ICD-10-AM Alphabetic Index contains three sections:](#)

| | |
|-----------------------------|---|
| Section I | Alphabetic index of diseases and nature of injury |
| Section II | External causes of injury |
| Section III | Table of drugs and chemicals |

ACHI Tabular List of Interventions. ~~The Tabular List of Interventions contains the procedure classification itself. Appendices included are:~~

| | |
|-----------------------|---|
| Appendix A | Mapping table for MBS items not included in ACHI |
| Appendix B | ACHI Code List |

ACHI Alphabetic Index of Interventions. ~~The Alphabetic Index of Interventions is used to locate procedural terms to be coded. The Alphabetic Index of Interventions contains many procedural terms which do not appear in the Tabular List.~~

Australian Coding Standards. The *Australian Coding Standards* contains the national standards maintained by the ACCD, which provide guidance in the application of ICD-10-AM and ACHI ~~codes~~.

~~The Disease Classification of~~ ICD-10-AM Tabular List and Alphabetic Index

In the development of ICD-10-AM, a number of classification principles were followed:

...

The ICD-10-AM Alphabetic Index ~~of Diseases~~ conforms to Australian spelling conventions. The WHO ICD-10 disease index has been extended in the development of the ICD-10-AM Editions to include additional disease codes. However, clinical coders must still use the ICD-10-AM Tabular List to ~~consult~~ refer to Inclusion terms, Excludes notes and other *Instructional* notes/terms in order to allocate the correct code.

Reviewing the ICD-10-AM Tabular List is also the best way to become familiar with the structure of the classification. Both the ICD-10-AM Tabular List and Alphabetic Index ~~and Tabular List~~ are ~~meant~~ intended to be used together. Tabular browsing without the use of the ~~index~~ Alphabetic Index in the first instance is not recommended practice.

...

CONVENTIONS USED IN THE ICD-10-AM TABULAR LIST OF DISEASES

MULTIPLE CONDITION CODING

In Australia, multiple condition coding (meaning that multiple conditions may be assigned in an episode of care) is used to provide the necessary specificity to fully describe the episode of care. This does not mean multiple codes are assigned to describe a single condition (unless otherwise instructed).

It is unnecessary for conditions to be explicit in a code title or *Inclusion* term to be correctly classified. Do not assign an additional code to further classify a condition unless directed by an *Instructional* note/term in the Tabular List or an Australian Coding Standard.

If, by following the ICD-10-AM Alphabetic Index, a residual code is assigned (ie other or unspecified), do not assign an additional code to further classify the condition unless directed by an *Instructional* note/term in the ICD-10-AM Tabular List or an Australian Coding Standard.

EXAMPLE 1:

Diagnosis: Intussusception of appendix

Index: **Intussusception** (bowel) (colon) (intestine) (rectum) K56.1
- appendix K38.8
- congenital Q43.89
- ureter (with obstruction) N13.5

Assign: K38.8 *Other specified diseases of appendix*

In classifying a condition with an underlying cause, if the ICD-10-AM Alphabetic Index (see Example 2) or an *Excludes* note (see Example 18) results in a code for one of the clinical concepts not being assigned, follow the guidelines in ACS 0001 *Principal diagnosis/Problems and underlying conditions* or ACS 0002 *Additional diagnoses/Problems and underlying conditions*, and assign codes for both the condition and the underlying cause.

EXAMPLE 2:

Diagnosis: ~~Leg ulcer due to venous insufficiency~~ Neurogenic bladder due to cauda equina syndrome

Index: ~~Ulc~~
- lower limb ... L97.9
- venous
- due to venous insufficiency I87.2
Assign: L97.9 ~~Ulc~~ *Ulc of lower limb, unspecified*
I87.2 ~~Ulc~~ *Venous insufficiency (chronic) (peripheral)*

Index: Neurogenic — see also condition
- bladder (see also *Dysfunction/bladder/neuromuscular*) N31.9
- - cauda equina syndrome G83.4

-- detrusor sphincter N31.8

Assign: [N31.9 Neuromuscular dysfunction of bladder, unspecified](#)
[G83.4 Cauda equina syndrome](#)

* Sequence codes as per the guidelines in ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*.

There are a number of special conventions employed in the ICD-10-AM Tabular List ~~which~~ [that](#) need to be understood by clinical coders and those interpreting statistics based on ICD-10-AM codes.

AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM)

Codes for aetiology (underlying cause) are annotated by a dagger (†) symbol and manifestation codes by an asterisk (*) symbol.

When a condition classified using the dagger and asterisk system is reported as the principal diagnosis, follow the guidelines in ACS 0001 *Principal diagnosis* to determine the sequence. In cases where a morphology code is required, assign the morphology code after the neoplasm (C00–D48) code (see also ACS 0233 *Morphology*).

EXAMPLE 3:

Diagnosis: Fracture to femur due to bony metastases from adenocarcinoma of prostate.

Index entry: — **Fracture/metastatic C79.5† M90.7***

Tabular Assign: **M90.75*** *Fracture of bone in neoplastic disease, pelvic region and thigh*
C79.5 *Secondary malignant neoplasm of bone and bone marrow*
M8140/6 *Adenocarcinoma, metastatic NOS*
C61 *Malignant neoplasm of prostate*
M8140/3 *Adenocarcinoma NOS*

The rubrics in which dagger-marked terms appear may take one of three different forms:

- 1a.** If the dagger (†) symbol and the alternative asterisk code both appear in the rubric heading, all terms classifiable to that rubric are subject to dual classification and all have the same alternative asterisk code.

EXAMPLE 4:

B37.3† Candidiasis of vulva and vagina (N77.1*)
Candidal vulvovaginitis
Monilial vulvovaginitis
Vaginal thrush

- 2b.** If the dagger (†) symbol appears in the rubric heading but the alternative asterisk code does not, all terms classifiable to that rubric are subject to dual classification but they have different alternative codes (which are listed for each term).

EXAMPLE 5:

A18.0† Tuberculosis of bones and joints
Tuberculosis of:
• hip (M01.15*)
• knee (M01.16*)
• vertebral column (M49.0-*)
Tuberculous:
• arthritis (M01.1-*)
• mastoiditis (H75.0*)
• necrosis of bone (M90.0-*)
• osteitis (M90.0-*)
• osteomyelitis (M90.0-*)

- synovitis (M68.0-*)
- tenosynovitis (M68.0-*)

3e. If neither the dagger (†) symbol nor the alternative asterisk code appear in the title, the rubric as a whole is not subject to dual classification but individual inclusion terms may be. If so, these terms will be marked with the symbol and their alternative codes given.

EXAMPLE 6:

A54.8 Other gonococcal infections
 Gonococcal:
 ...
 • peritonitis† (K67.1*)
 • pneumonia† (J17.0*)
 • sepsis
 • skin lesions

(~~See~~ *See also* ICD-10-AM Alphabetic Index: *Introduction/Conventions and General arrangement of the ICD-10-AM Alphabetic Index of Diseases/Code numbers*).

FORMAT

The format of ICD-10-AM is largely the same as the format of the WHO ICD-10 with the exception of the spelling conventions (see *ICD-10-AM Tabular List/Introduction/Development of ICD-10*). ICD-10-AM uses an overall block format for ease of reference, with an indented format applying to all *Inclusion* terms and *Instructional* notes/terms exceeding one line of text.

INCLUSION TERMS

~~Within the three and four character rubrics, there are usually listed a number of other diagnostic terms. These are known as 'inclusion terms' and are given, in addition to the title, as examples of the diagnostic statements to be classified to that rubric. Inclusion terms are diagnostic terms listed under a block heading, Glossary description/definition or code.~~

~~Their purpose is to demonstrate examples of clinical concepts classified to that rubric. They may refer to different conditions, or be synonyms, but they are not a subclassification of the rubric. Inclusion terms are listed primarily as a guide to the content of the rubrics. Many of the items listed relate to important or common terms belonging to the rubric. Others are borderline conditions or sites listed to distinguish the boundary between one subcategory and another. The lists of inclusion terms are by no means exhaustive and alternative names of diagnostic entities are included in the Alphabetic Index, which should be referred to first when coding a given diagnostic statement.~~

Inclusion terms are not exhaustive. Never code directly from the ICD-10-AM Tabular List. Reference first the ICD-10-AM Alphabetic Index, as it contains many more clinical concepts than the ICD-10-AM Tabular List.

EXAMPLE 7:

H50.5 Heterophoria
 Alternating hyperphoria
 Esophoria
 Exophoria

~~It is sometimes~~ *In some instances, it is* necessary to read *Inclusion* terms in conjunction with *code* titles. This usually occurs when the *Inclusion* terms are *elaborating* lists of sites or pharmaceutical products, ~~where~~ *where* appropriate, ~~words/terms~~ *words/terms* from the preceding *code or category* titles (eg “~~m~~ *Malignant neoplasm of ...*”, “~~i~~ *Injury to ...*”, “~~p~~ *Poisoning by ...*”) need to be *read and* understood.

EXAMPLE 8:

D21 Other benign neoplasms of connective and other soft tissue

D21.3 Connective and other soft tissue of thorax
Axilla
Diaphragm
Great vessels

In this example, the *Inclusion* terms represent 'benign neoplasms' of those sites (ie benign neoplasm of the axilla, diaphragm and great vessels).

INSTRUCTIONAL NOTES/TERMS

Instructional notes/terms appear throughout the ICD-10-AM Tabular List:

Chapter Applies to the codes classified to the chapter

First level – Block Applies to the codes classified to the block

Second level – Category Applies to the codes classified to the category

Third level – Code Applies to the code

Instructional notes/terms are listed in the following order:

Glossary description/Definition

Includes

Note

See

Code also/Code first/Use additional code

Excludes

~~There are situations, other than in the dagger and asterisk system that permit two ICD-10-AM codes to be used to describe fully a person's condition. *Instructional* terms such as 'Code also...', 'Use additional code ...' and 'Note...', identify many of these situations (see also ACS-0002 *Additional diagnoses/Multiple coding*).~~

Glossary descriptions/Definitions

Glossary descriptions/Definitions are formal statements of the meaning of a term or code. They define the content of a block, category or code. For example, in Chapter 5 *Mental and behavioural disorders*, they are listed because the terminology of mental disorders varies greatly, particularly between different countries, and the same term may be used to describe different conditions.

The *Glossary description/Definition* is not intended for use by clinical coders.

Includes note

The *Includes* note further defines the content of a chapter, block, category or code. They are ~~G~~general diagnostic descriptions common to various levels throughout the ICD-10-AM Tabular List. ~~eg chapter, category or code.~~

EXAMPLE 9:

C50 Malignant neoplasm of breast

Includes: connective tissue of breast

EXAMPLE 10:

CHAPTER 16

**CERTAIN CONDITIONS
ORIGINATING IN THE
PERINATAL PERIOD**

(P00–P96)

Includes: conditions that have their origin in the perinatal period even though death or morbidity occurs later

Note

The *Note* [clarifies the use of a code or codes](#), ~~can be used as an explanation that clarifies the use of a code or codes.~~

EXAMPLE 11:

DERMATITIS AND ECZEMA (L20–L30)

Note: In this block the terms dermatitis and eczema are used synonymously and interchangeably.

The *Note* may also further define certain terms used in block, category or code descriptions.

EXAMPLE 12:

ISCHAEMIC HEART DISEASES (I20–I25)

Note: For morbidity, duration as used in categories I21, I22, I24 and I25 refers to the interval elapsing between onset of the ischaemic episode and admission to care. For mortality, duration refers to the interval elapsing between onset and death.

See

The *See* instruction ~~al term~~ is a cross-reference to another section of the classification. [Follow the cross-reference](#) ~~See notes should be followed~~ to ensure correct code selection.

EXAMPLE 132:

K26 Duodenal ulcer
See subdivisions

EXAMPLE 143:

M71 Other bursopathies
See site code

Code first

The *Code first* instruction assists ~~the correct~~ [with](#) sequencing of codes. This instruction appears under codes that must *never* be assigned alone.

EXAMPLE 154:

☛S91.81 Open wound (of any part of ankle and foot) communicating with a fracture
Code first the fracture (S82.-, S92.-).

Code also/Use additional code/code also

~~The Use additional code and Code also~~ [These](#) instructions indicate that an additional code ~~should be~~ [is](#) assigned [if applicable](#), to fully describe the ~~condition or injury~~ [clinical concept](#) ~~(see also ACS 0002 Additional diagnoses/Multiple coding).~~

EXAMPLE 165:

~~K08.81 Pathological fracture of tooth~~

~~Code also any predisposing dental disease (K00–K10).~~

S22.5 Flail chest

Code also:

- rib fractures (S22.4-).
- sternal fracture (S22.2).

EXAMPLE 176:

N34 Urethritis and urethral syndrome

Use additional code (B95–B97) to identify infectious agent.

Excludes notes

Excludes notes are listed at the chapter, block, category and code level found at various levels in the Tabular List. (eg chapter, category or code level). Some are a guide to redirect users in the Tabular List from an incorrect code to a correct code (see Example 187), and some support mortality coding (see Example 198).

EXAMPLE 187:

Diagnosis: Intussusception of appendix

Tabular List: K56.1 Intussusception
Intussusception or invagination of:

- bowel
- colon
- intestine
- rectum

Excludes: intussusception of appendix (K38.8)

Assign: K38.8 *Other specified diseases of appendix*

In Australia, multiple condition coding (meaning that multiple conditions or health related problems may be assigned classified in an episode of care) is used to provide the necessary specificity to fully describe the episode of care. This does not mean multiple codes are assigned to describe a single condition (unless otherwise instructed).

It is unnecessary for conditions to be explicit in a code title or *Inclusion* term to be correctly classified. **Do not assign an additional code to further classify a condition unless directed by an Instructional note/term in the Tabular List or an Australian Coding Standard.**

If, by following the ICD-10-AM Alphabetic Index, a residual code is assigned (ie other or unspecified), **do not assign an additional code to further classify the condition unless directed by an Instructional note/term in the ICD-10-AM Tabular List or an Australian Coding Standard** (see Example 1).

In classifying a problem with an underlying cause, if the ICD-10-AM Alphabetic Index (see Example 2) or an Excludes note (see Example 18) results in a code for one of the clinical concepts not being assigned, follow the guidelines in ACS 0001 *Principal diagnosis/Problems and underlying conditions* or ACS 0002 *Additional diagnoses/Problems and underlying conditions*, and assign codes for both the problem and the underlying cause.

EXAMPLE 198:

Diagnosis: Osteoporosis due to vitamin D deficiency

Tabular List: **E55** Vitamin D deficiency

Excludes: adult osteomalacia (M83.-)
osteoporosis (M80–M81)
sequelae of rickets (E64.3)

Assign: M81.99 *Osteoporosis, unspecified, site unspecified*
E55.9 *Vitamin D deficiency, unspecified*

Glossary descriptions

Glossary descriptions are formal statements of the meaning of a term or code. For example, in Chapter 5 *Mental and Behavioural Disorders*, glossary descriptions are used to indicate the content of rubrics. This device is used because the terminology of mental disorders varies greatly, particularly between different countries, and the same name may be used to describe quite different conditions. **The glossary descriptions are not intended for use by clinical coders.**

TEXT BOXES

Black reverse text boxes are used for three character codes. They are NOT VALID and CANNOT be assigned, as additional fourth and/or fifth characters are required.

EXAMPLE 20:

I12 Hypertensive kidney disease

Grey reverse text boxes are used for four character codes. They are NOT VALID and CANNOT be assigned, as additional fifth characters are required.

EXAMPLE 21:

C95.0 Acute leukaemia of unspecified cell type

A **box outline** is used for VALID three character codes.

EXAMPLE 22:

I10 Essential (primary) hypertension

TYPE FACE

Bold Bold type face is used for all category titles in the ICD-10-AM Tabular List.

Bold, Italics Bold and italicised type face is used for *Includes*, *Excludes* and *Note*.

Italics Italicised type face is used for *Instructional notes/terms: Code also...*, *Code first...*, *See...* and *Use additional code*.

PUNCTUATION

Parentheses ()

Parentheses are used to **enclose in four ways**:

1. **nonessential modifiers (NEM)** ie supplementary terms that follow a diagnostic term, but do not affect the code number to which it is assigned. **Parentheses are used to enclose supplementary words, which may follow a diagnostic term without affecting the code number to which the words outside the parentheses would be assigned. This is known as a nonessential modifier.**

EXAMPLE 2319:

I12 Hypertensive kidney disease

[V 1438](#)

Includes: any condition in N00–N07, N18.-, N19 or N26 due to hypertension
arteriosclerosis of kidney
arteriosclerotic nephritis (chronic)(interstitial)
hypertensive nephropathy
nephrosclerosis

Excludes: secondary hypertension (I15.-)

In the includes note at I12 *Hypertensive kidney disease* the line 'arteriosclerotic nephritis (chronic) (interstitial)' means that I12 is the code number for the term 'arteriosclerotic nephritis' alone or when qualified by one of the words 'chronic' or 'interstitial' (or both).

2. ~~code(s) in Excludes notes and other Instructional notes/terms~~ Parentheses are also used to enclose the code(s) to which an *Excludes* note refers.

EXAMPLE 240:

J02.8 Acute pharyngitis due to other specified organisms

Use additional code (B95–B97) to identify infectious agent.

Excludes pharyngitis (due to):

- enteroviral vesicular (B08.5)
- herpesviral [herpes simplex] (B00.2)
- infectious mononucleosis (B27.-)
- influenza virus:
 - identified (J09, J10.1)
 - not identified (J11.1)

~~I88~~ **Nonspecific lymphadenitis**

~~Excludes:~~ acute lymphadenitis, except mesenteric (L04.-)

~~enlarged lymph nodes NOS (R59.-)~~

~~I88 Nonspecific lymphadenitis excludes 'acute lymphadenitis, except mesenteric' (L04. Acute lymphadenitis) and 'enlarged lymph nodes NOS' (R59. Enlarged lymph nodes)~~

3. ~~Parentheses are used in the block titles in the Tabular List to enclose~~ the range of three character codes of ~~categories~~ included in ~~that~~ a chapter or block.

EXAMPLE 251:

CHAPTER 9

**DISEASES OF THE
CIRCULATORY SYSTEM
(100–199)**

**HYPERTENSIVE DISEASES
(110–115)**

4. ~~Parentheses are used to enclose~~ the dagger code in an asterisk category or the asterisk code following a dagger term.

EXAMPLE 262:

A32.1† Listerial meningitis and meningoencephalitis

Listerial:

- meningitis (G01*)
- meningoencephalitis (G05.0*)

G01* Meningitis in bacterial diseases classified elsewhere

Meningitis (in):

- anthrax (A22.8†)
- gonococcal (A54.8†)
- leptospirosis (A27.-†)
- listerial (A32.1†)

...

SQUARE BRACKETS []

Square brackets are used to enclose: ~~synonyms, alternative words, explanatory phrases or valid characters.~~

1. ~~For enclosing synonyms or alternative terms~~

EXAMPLE 273:

A30 **Leprosy [Hansen's disease]**

2. ~~For explanatory phrases/terms-~~

EXAMPLE 284:

☛S06.02 Loss of consciousness of brief duration [less than 30 minutes]

3. ~~For valid characters/abbreviations~~

EXAMPLE 295:

~~M19.0—Primary arthrosis of other joints~~

~~[1-4, 7-9]~~

HUMAN IMMUNODEFICIENCY VIRUS [HIV]

DISEASE

(B20–B24)

4. valid characters

EXAMPLE 30:

M19.0 Primary arthrosis of other joints

[1-4, 7-9] Primary arthrosis NOS

COLON :

~~A colon is used in listings of *Inclusion* terms and *Excludes* notes when the words that precede it are not complete terms for assignment to that rubric. A colon is used in *Inclusion* terms and *Excludes* notes, when the terms preceding the colon require one or more modifiers (qualifying terms) for assignment to the rubric. They require one or more of the modifying or qualifying words indented under them before they can be assigned to the rubric.~~

EXAMPLE 3126:

K36 **Other appendicitis**

Appendicitis:

- chronic
- recurrent

~~In K36 *Other appendicitis*, the diagnosis 'appendicitis' is to be classified there only if qualified by the words 'chronic' or 'recurrent'. In this example, appendicitis is classified to K36 when qualified by the terms 'chronic' or 'recurrent'.~~

Colons are used in *Includes* notes to avoid repetition of terms.

EXAMPLE 32:

Q22.6 Hypoplastic right heart syndrome

Includes: hypoplasia of:

- pulmonary:
 - artery
 - valve
- tricuspid valve
- underdevelopment of right ventricle

In this example, the colon is used here to avoid duplication of the terms 'hypoplasia of', and 'pulmonary'.

Colons are also used to separate certain *Instructional* notes/terms (ie *Includes*, *Note*, *Code also*, *Excludes*), and the diagnostic terms that follow (see Examples 9–12, 16 and 18).

BRACE

A brace is used in listings of *Inclusion* terms and *Excludes* notes to indicate that neither the words that precede it nor the words after it are complete terms. Any of the terms before the brace should be qualified by one or more of the terms that follow it.

EXAMPLE 27:

| | | |
|-------|--|-------------|
| O71.6 | <i>Obstetric damage to pelvic joints and ligaments</i> | |
| | Avulsion of inner symphyseal cartilage | } obstetric |
| | Damage to coccyx | |
| | Traumatic separation of symphysis (pubis) | |

NOS

The letters NOS are an abbreviation for 'not otherwise specified', meaning 'unspecified' or 'unqualified'.

EXAMPLE 33:

A04.9 Bacterial intestinal infection, unspecified
Bacterial enteritis NOS

Sometimes an unqualified term is nevertheless classified to a rubric for a more specific type of the condition. This is because, in medical terminology, the most common form of a condition is often known by the name of the condition itself and only the less common types are qualified.

EXAMPLE 28:

Mitral stenosis is commonly used to mean 'rheumatic mitral stenosis'.

These inbuilt assumptions have to be taken into account in order to avoid incorrect classification. Careful inspection of *Inclusion* terms will reveal where an assumption of cause has been made. **Clinical coders** should be careful not to code a term as unqualified unless it is quite clear that no information is available that would permit a more specific assignment elsewhere.

Data analysts should similarly be aware that some conditions assigned to an apparently specified category will not have been so specified on the clinical record that was coded. When comparing trends over time and interpreting statistics, it is important to be aware that assumptions may change from one revision of the ICD to another. For example, before the Eighth Revision, an unqualified aortic aneurysm was assumed to be due to syphilis.

NOT ELSEWHERE CLASSIFIED (NEC)

The words 'not elsewhere classified', when used in a three character category title, serve as a warning that certain specified variants of the listed conditions may appear in other parts of the classification.

The terms 'not elsewhere classified' in code titles indicate that certain specified variants of that condition are classified in other parts of ICD-10-AM.

EXAMPLE 34:

E21.1 Secondary hyperparathyroidism, not elsewhere classified
Excludes: secondary hyperparathyroidism of renal origin (N25.8)

The abbreviation 'NEC' is used in the ICD-10-AM Tabular List in *Inclusion* terms, *Includes* and *Excludes* notes.

NEC code options are only assigned when there is insufficient information to assign the clinical concept to a more specific code.

EXAMPLE 35:

B17.8 Other specified acute viral hepatitis
Hepatitis non-A non-B (acute)(viral) NEC

EXAMPLE 36:

K45 Other abdominal hernia

Includes: hernia:

- abdominal, specified site NEC

...

EXAMPLE 37:

O99.8 Other specified diseases and conditions in pregnancy, childbirth and the puerperium

Excludes: acute kidney failure in the puerperium (O90.4)

kidney disorders in pregnancy, childbirth and the puerperium NEC (O26.81)

...

However, note that sometimes an unqualified term is classified to a rubric for a more specific type of the condition. This is because, in medical terminology, the most common form of a condition is often known by the name of the condition itself and only the less common types are qualified.

These inbuilt assumptions have to be taken into account in order to avoid incorrect classification. Careful inspection of *Inclusion* terms will reveal where an assumption of cause has been made. **Clinical coders** should be careful not to code a term as unqualified unless it is quite clear that no information is available that would permit a more specific assignment elsewhere.

Data analysts should similarly be aware that some conditions assigned to an apparently specified category will not necessarily have been so specified on the clinical record that was coded. When comparing trends over time and interpreting statistics, it is important to be aware that assumptions may change from one revision of the ICD to another. For example, before the Eighth Revision, an unqualified aortic aneurysm was assumed to be due to syphilis.

EXAMPLE 38:

'Mitral stenosis' is assumed by the ICD to mean 'rheumatic mitral stenosis' unless another specified cause is documented.

EXAMPLE 29:

J16 — *Pneumonia due to other infectious organisms, not elsewhere classified*

This category includes J16.0 *Chlamydial pneumonia* and J16.8 *Pneumonia due to other specified infectious organisms*. Many other categories are provided in Chapter 10 *Diseases of the Respiratory System* and other chapters for pneumonias due to specified infectious organisms (eg J09–J15 and P23–). J18 *Pneumonia, organism unspecified*, accommodates pneumonias for which the infectious

~~agent is not stated.~~

'AND' IN CODE TITLES

The term 'And' stands for in code titles means 'and/or'. For example, in the rubric A18.0† Tuberculosis of bones and joints, are to be classified cases of 'tuberculosis of bones', 'tuberculosis of joints' and 'tuberculosis of bones and joints'.

EXAMPLE 39:

A18.0† Tuberculosis of bones and joints

In this example, 'and' in the code title means that A18.0 classifies 'tuberculosis of bones', 'tuberculosis of joints', and 'tuberculosis of bones and joints'.

SPECIAL SIGNS/ANNOTATIONS

The following special signs are used in the ICD-10-AM Tabular List:

- † The dagger symbol denotes a code describing the aetiology or underlying cause of a disease-condition and should-is always be assigned together with the appropriate manifestation (*) code.
- * The asterisk symbol denotes a code describing the manifestation of a disease-condition and should-is always be assigned together with the appropriate aetiology (†) code.
- ∇ This symbol denotes that an Australian Coding Standard applies to a particular code or group of codes (category or block) and therefore, reference to the standard should-be-checked-is essential before the code(+) is assigned. The relevant standard number(s) is shown under or beside the symbol.
- ⊕ This symbol denotes an Australian code.

TEXT BOXES

A **black reverse text box** indicates codes at the third character level which are NOT VALID and CANNOT be assigned because the code requires an additional character(s) (see code I12 in the example below).

~~I12 — Hypertensive kidney disease~~

~~Includes: any condition in N00–N07, N18., N19., or N26. due to hypertension~~

~~arteriosclerosis of kidney~~

~~arteriosclerotic nephritis (chronic)(interstitial)~~

~~hypertensive nephropathy~~

~~nephrosclerosis~~

~~Excludes: secondary hypertension (I15.–)~~

A **grey reverse text box** indicates codes at the fourth character level which are NOT VALID and CANNOT be assigned because the code requires an additional character (see code C95.0 in the example below).

~~C95.0 — Acute leukaemia of unspecified cell type~~

~~Acute:~~

~~• bilineal~~

~~• mixed lineage~~

~~Biphenotypic acute~~

leukaemia

- ~~———— Stem cell leukaemia of unclear lineage~~
- ~~———— **Excludes:** — secondary hypertension (I15.-)~~

A **box outline** is used to indicate codes at the third character level which are **VALID** (see code I10 in the example below):

- I10** Essential (primary) hypertension
- ~~———— High blood pressure~~
- ~~———— Hypertension (arterial)(benign)(essential)(malignant)(primary)(systemic)~~
- ~~———— **Excludes:** — involving vessels of:~~
 - ~~———— • brain (I60-I69)~~
 - ~~———— • eye (H35.0)~~

TYPE FACE

Bold ————— Bold type face is used for all block titles in the Tabular List of Diseases.

Bold, Italics ————— Bold and italicised type face is used for the *Instructional* text of **Includes**, **Excludes** and **Note**.

Italics ————— Italicised type face is used for the instructional text of *Code also...*, *Code first...*, *See...* and *Use additional code*.

FORMAT

ICD-10-AM uses an overall block format for ease of reference with an indented format applying to all *Inclusion* terms and *Instructional* notes/terms exceeding one line of text.

'OTHER' AND 'UNSPECIFIED' CODES

'Other' and 'unspecified' ~~or~~ (ie 'residual' codes) are ~~normally used~~ assigned for conditions ~~which~~ that are specifically indexed to those codes.

At the fourth character level, the hierarchy is generally as follows:

- 0–7 specific conditions (~~in the injury chapter, 7 is often used for 'multiple' injuries~~)
- 8 specific conditions that are not classified elsewhere (~~or~~ ie the 'other' category)
- 9 unspecified conditions

Note:

- In Chapter 19 Injury, poisoning and certain other consequences of external causes, fourth character .7 is often used for 'multiple' injuries
- In Chapter 2 Neoplasms, fourth character .8 is often used for 'overlapping' lesions

EXAMPLE 4030: — FOURTH CHARACTER STRUCTURE

| | | |
|--------------|---------------------------------------|---|
| L50 | <i>Urticaria</i> | Category |
| L50.0 | <i>Allergic urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.1 | <i>Idiopathic urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.2 | <i>Urticaria due to cold and heat</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.3 | <i>Dermatographic urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.4 | <i>Vibratory urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.5 | <i>Cholinergic urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |
| L50.6 | <i>Contact urticaria</i> | Specifi <u>ede</u> <u>type of urticaria</u> |

| | |
|--|--|
| L50.8 <i>Other urticaria</i> | Other-Specified type of urticaria, not <u>elsewhere</u> classified elsewhere

Urticaria:
• chronic
• recurrent periodic |
| L50.9 <i>Urticaria, unspecified</i> | Unspecified <u>urticaria</u> |

Occasionally, both 'other' and 'unspecified' (ie residual) conditions are classified to the same code. the two residual codes '8' and '9' are combined into one code to include both 'other' and 'unspecified' conditions.

EXAMPLE 41:

B67.9 *Echinococcosis, other and unspecified*

EXAMPLE 42:

I44.3 *Other and unspecified atrioventricular block*

At the fifth character level, the hierarchy is as follows:

- 0 unspecified conditions
- 1–8 specific conditions
- 9 specific conditions that are not classified elsewhere (ie the 'other' conditions category)

EXAMPLE 43: FIFTH CHARACTER STRUCTURE

| | |
|--|--|
| G47 <i>Sleep disorders</i> | Category |
| G47.3 <i>Sleep apnoea</i> | 'Specified' fourth character category |
| G47.30 <i>Sleep apnoea, unspecified</i> | Unspecified sleep apnoea |
| G47.31 <i>Central sleep apnoea syndrome</i> | <u>Specified type of sleep apnoea</u> |
| G47.32 <i>Obstructive sleep apnoea syndrome</i> | <u>Specified type of sleep apnoea</u> |
| G47.33 <i>Sleep hypoventilation syndrome</i> | <u>Specified type of sleep apnoea</u> |
| G47.39 <i>Other sleep apnoea</i> | Other-Specified type of sleep apnoea, not <u>elsewhere</u> classified able elsewhere |

~~The residual codes should not be used to 'dump' diagnoses which~~ **DO NOT** assign residual codes to 'dump' diagnoses that do not appear to be categorised anywhere. Use the ICD-10-AM Alphabetic Index to locate the correct code. DO NOT browse through the ICD-10-AM Tabular List.

~~Use the Index to find the correct code assignment. Do not browse through the Tabular List.~~

When a clinician uses terminology that is not listed in ICD-10-AM Alphabetic Index, seek clarification for alternative terms that are listed in ICD-10-AM. ~~which cannot be found in ICD 10 AM, seek clarification for alternative terms which are available in ICD 10 AM.~~ If no alternate description is provided, utilise one of the following strategies: ~~other description is provided then one of the following strategies should be employed:~~

EXAMPLE 44:

Diagnosis: Polyp of oesophagus.

Code Assign: K22.8 *Other specified diseases of oesophagus*

~~In this example the main term *Polyp* in the index does not include a subterm of 'oesophagus'. To find the correct code assignment, next search the index for *Disease/oesophagus/specified*, which indicates code K22.8 *Other specified diseases of oesophagus*.~~ In this example, refer to

Disease/oesophagus/specified NEC and assign K22.8 as there is no subterm for oesophagus under the lead term Polyp in the ICD-10-AM Alphabetic Index.

EXAMPLE 4533:

Diagnosis: ~~67-year-old male with s~~ubluxed cataract.

Code Assign: H26.9 *Cataract, unspecified*

In this example, H26.9 is assigned as there is no subterm '*subluxed*' under the lead term *Cataract* in the Alphabetic Index; nor any synonymous term or specified NEC option. ~~and no '*specified NEC*' entry, therefore the correct code assignment is H26.9.~~

THE INTERNATIONAL STATISTICAL CLASSIFICATION
OF DISEASES AND RELATED HEALTH PROBLEMS,
TENTH REVISION, AUSTRALIAN MODIFICATION

ICD-10-AM
ALPHABETIC INDEX
~~OF DISEASES~~

...

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The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) —~~Alphabetic Index of Diseases~~.

...

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TABLE OF CONTENTS

PREFACE.....

INTRODUCTION.....

~~General arrangement of the Alphabetic Index of diseases.....~~

~~Conventions used in the Alphabetic Index of Diseases.....~~

[Conventions and general arrangement of the ICD-10-AM Alphabetic Index.....](#)

PREFACE

...

The Tenth Edition of the ICD-10-AM Alphabetic Index ~~of Diseases~~ is contained herein.

INTRODUCTION

~~The Alphabetic Index of Diseases of~~ *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) [Alphabetic Index](#) is an alphabetic index to the [ICD-10-AM](#) Tabular List ~~of Diseases.~~*

The ICD-10-AM Alphabetic Index ~~of Diseases~~ conforms to Australian spelling conventions. The World Health Organization's (WHO) ICD-10 disease index has been extended in the development of the ICD-10-AM Editions to include additional disease codes.

...

CONVENTIONS AND GENERAL ARRANGEMENT OF THE ICD-10-AM ALPHABETIC INDEX ~~OF DISEASES~~

~~MAIN~~ SECTIONS

The [ICD-10-AM](#) Alphabetic Index is arranged in three sections:

- **Section I [Alphabetic index of diseases and nature of injury](#)** – lists all the terms classifiable to Chapters 1–19 and Chapter 21–22, except drugs and ~~other~~ chemicals.
- **Section II [External causes of injury](#)** ~~is the index of External Causes of Injury and contains – lists~~ all the terms classifiable to Chapter 20, except drugs and ~~other~~ chemicals.
- **Section III [Table of drugs and chemicals](#)** – lists codes for poisoning and/or adverse effects of substances classifiable to Chapter 19 and Chapter 20, ~~the Table of Drugs and Chemicals, lists for each substance the codes for poisonings and adverse effects of drugs classifiable to Chapter 19, and the Chapter 20 codes that indicate adverse effects of a correct substance properly administered and whether the poisoning was accidental, deliberate (self harm) or undetermined.~~

STRUCTURE (LEAD TERMS AND SUBTERMS)

Lead terms

The ICD-10-AM Alphabetic Index is organised by 'lead terms', in **bold** type face.

Lead terms start at the extreme left of a column, with hyphens used to indicate levels of indentation for subterms (modifiers). Therefore, a complete index term may be composed of several lines, which may be widely separated.

EXAMPLE 1:

Ectasia, ectasis

- aorta (see also [Aneurysm/aorta](#)) I71.9
- breast N60.4
- capillary I78.8
- cornea H18.7
- gastric antral vascular (GAVE) K31.81
- - with haemorrhage K31.82

In this example, the last line lists the code for 'gastric antral vascular ectasia with haemorrhage'.

Lead terms mainly identify the name of a disease or pathological condition, rather than the anatomic site involved.

EXAMPLE 2:

Diagnosis: Tuberculosis of the abdomen

- Index: **Tuberculosis, tubercular, tuberculous** (caseous) (degeneration) (gangrene) (necrosis) A16.9
- abdomen (lymph gland) A18.3

Occasionally an anatomical site is indexed as a lead term, when it is part of the name of a disease. This applies mainly to Latin expressions for some conditions.

EXAMPLE 3:

Abdomen, abdominal — *see also condition*

- acute R10.0

- apron E65

Ankle — *see condition*

Cor

- biloculare Q20.89

Subterms (essential and nonessential modifiers)

Subterms (ie terms indented beneath lead terms (modifiers)) refer to:

- varieties of a condition
- anatomical sites affected by a condition
- circumstances that affect the coding of a condition.

Essential modifiers are subterms that *effect* the code selection. These subterms form individual line entries.

Nonessential modifiers are terms in parentheses following a lead term or subterm. They *do not affect* code selection.

An index entry may list the adjectival or noun form of a condition, or both. If only the noun form is listed, the clinical coder must make the necessary translation.

As it is not feasible to index a complete list of the various combinations of subterms that apply to a lead term, some types of subterms have priority over others.

EXAMPLE 4:

A number of anatomical sites are indexed under the lead term *Abscess*. ‘Tuberculous’ abscesses are not classified to *Abscess/by site*, but to the codes for tuberculosis of these sites. Instead of listing a subterm for ‘tuberculous’ under each anatomical site, the index lists one single subterm:

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

- tuberculous — *see Tuberculosis/abscess*

ICD-10-AM Section I – priority is given to subterms indicating that a disease or condition is:

- infectious or parasitic
- malignant or neoplastic
- psychogenic or hysterical
- congenital
- traumatic
- complicating or affecting the management of pregnancy, childbirth or the puerperium
- affecting the fetus or newborn

Section I also includes lead terms and subterms to classify circumstances where a patient may encounter health services but was not necessarily ill, or a health status (ie. codes in Chapter 21 *Factors influencing health status and contact with health services*). These terms indicate the type of problem, or circumstances of the encounter. For example:

- counselling
- examination
- history
- observation
- pregnancy

- [problem](#)
- [screening](#)
- [status](#)
- [vaccination.](#)

ICD-10-AM Section II – the key lead terms are:

- [Complication\(s\) \(for medical and surgical interventions \(procedures\)\)](#)
- [Sequelae](#)
- [Suicide](#)
- [Assault](#)
- [Legal intervention](#)
- [War operations.](#)

Note: In both Sections I and II, the key terms listed above may be used instead of, or in addition to the standard indexing for certain conditions, or circumstances where terminology is diverse and reported descriptions might not easily be found in the index, or where the normal method of indexing might be misleading. For example, obstetric complications, are indexed under the specific condition (eg *Haemorrhage/complicating/delivery*). However, the complication may be listed under the lead term 'Labour', 'Pregnancy', 'Puerperal' or 'Maternal condition, affecting fetus or newborn'.

SEQUENCE

Lead terms are ~~usually~~ sequenced alphabetically.

EXAMPLE 51:

~~Bee-sting~~
~~Beer-drinker's heart~~

~~Descemetocoele~~
~~Descemet's membrane~~

~~Fibromyxosarcoma~~
~~Fibro-odontoma, ameloblastic~~

[Laryngitis](#)
[Laryngocele](#)

Spaces, Hyphens, symbols and numbers precede alphabetic sequence. Numbers (Arabic or Roman) are sequenced numerically before alphabetic characters.

EXAMPLE 62:

~~Pregnancy~~
~~-duration~~
~~- < 5 completed weeks O09.0~~
~~- 5-13 completed weeks O09.1~~
~~- 14-19 completed weeks O09.2~~
~~- 20-25 completed weeks O09.3~~
~~- 26-33 completed weeks O09.4~~
~~- 34- <37 completed weeks O09.5~~
~~- unspecified duration of pregnancy O09.9~~

[Preterm \(infant\) NEC P07.30](#)
[- 28 completed weeks or more but less than 32 completed weeks P07.31](#)
[- 32 completed weeks or more but less than 37 completed weeks P07.32](#)
[- extremely](#)
[- - 24 completed weeks or more but less than 28 completed weeks P07.22](#)
[- - less than 24 completed weeks P07.21](#)

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, [they always](#) take precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

EXAMPLE 73:

Accessory (congenital)

- chromosome(s) (nonsex) NEC Q92.9
- - with complex rearrangements NEC Q92.5
- - - seen only at prometaphase Q92.4
- - 13 — *see Trisomy/13*
- - 18 — *see Trisomy/18*
- - 21 — *see Trisomy/21*
- - partial Q92.9
- - sex
- - - female phenotype Q97.8
- - - male phenotype Q98.8

EXAMPLE 84:

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

- with
- - diverticular disease (intestine) — *see Diverticula/intestine*
- - lymphangitis — *code by site under Abscess*
- abdomen, abdominal
- - cavity K65.0
- - wall L02.2
- abdominopelvic K65.0

[In this example, 'abdominopelvic abscess with diverticular disease' is not classified to K65.0 as the index entries listed under 'with' take precedence over the alphabetic subterm 'abdominopelvic'.](#)

[When multiple prepositional terms are listed, they are sequenced in alphabetic order.](#)

EXAMPLE 9:

Diabetes, diabetic (controlled) (mellitus) (without complication) E1-.9

- [for stabilisation E1-.65](#)
- [with](#)
- - [abnormal sweating \(gustatory\) E1-.43](#)

IN (DUE TO)

[The indexing of a condition with the subterm *in \(due to\)* in the ICD-10-AM Alphabetic Index implies a cause and effect relationship between two conditions. Even though 'in' is a preposition, it is not one of the prepositional subterms listed in the ICD-10-AM Conventions and general arrangement of the ICD-10-AM Alphabetic Index \(and therefore does not take precedence over other terms\).](#)

[Where the ICD-10-AM Alphabetic Index links two conditions using the subterms *in \(due to\)*, follow this index entry **except** where a specific cause for the condition is indicated in the clinical record.](#)

EXAMPLE 10:

Diagnosis: [Pyelonephritis with sepsis.](#)

Index: [Pyelonephritis \(see also Nephritis/tubulo-interstitial\) N12](#)

- in (due to)

- - sepsis NEC A41.-† N16.0*

Assign: A41.-

Other sepsis

N16.0

Renal tubulo-interstitial disorders in infectious and parasitic diseases classified elsewhere

In this example, the above codes are assigned if a patient has pyelonephritis and sepsis during the same episode of care, **unless** documentation identifies that the pyelonephritis is definitively due to another cause. That is, the causal relationship between pyelonephritis and sepsis is assumed unless otherwise indicated.

Note: The classification of diabetes mellitus is governed by the specific guidelines in ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia* – see *General classification rules for DM and IH* and in particular *Rule 3*. See also ACS Chapter 15 *Pregnancy, childbirth and the puerperium* for classification guidelines regarding conditions in (due to) pregnancy, childbirth and the puerperium.

~~In the above example, abdominal abscess with diverticular disease should be coded using the index entry *Diverticula/intestine* and not coded to K65.0 as indicated by the index entry *Abscess/abdomen, abdominal/cavity*.~~

STRUCTURE

To avoid unnecessary repetition, the index is organised in the form of lead terms, which start at the extreme left of a column, and various levels of indentation, which start progressively further right. Therefore a complete index term may be composed of several lines, sometimes quite widely separated.

EXAMPLE 5:

Erythroblastosis (fetalis) (newborn) P55.9

—due to

—ABO (antibodies) (incompatibility) (isoimmunisation) P55.1

—Rh (antibodies) (incompatibility) (isoimmunisation) P55.0

In the above entry, the last line stands for 'Erythroblastosis due to Rh antibodies, incompatibility or isoimmunisation'.

Usually, the lead term is the name of a disease or pathological condition, while the terms indented beneath it (the 'modifiers') refer either to varieties of the condition, to the anatomical sites affected by it, or to circumstances that affect its coding. Users should therefore look up the disease or condition as a lead term and then find the variety, anatomical site, etc, indented beneath it. Thus 'tuberculosis of hip' is under the letter T and not under H, and stomach ulcer is under U, not under S. Only occasionally are anatomical sites indexed as the lead term. Usually, after the name of the anatomical site there will be a cross reference to the disease, eg Ankle —see condition.⁽⁴⁾

In some diagnostic statements, the disease condition is expressed in adjectival form. Sometimes, the index lists both forms but often only the noun form will be found and the clinical coder must make the necessary transformation.

Among the indented modifiers, it is not always feasible to include a complete listing of the various combinations of modifiers that could apply to a given term. In such circumstances, some types of modifiers tend to have priority in assignment over others. For instance, under the lead term 'Abscess' are indented a large number of anatomical sites and their appropriate codes. However, tuberculous abscesses are not classified to these codes but to the codes for tuberculosis of these sites. Instead of inserting an indent 'tuberculous' under each anatomical site, the index uses one single indent 'tuberculous — see *Tuberculosis/abscess*' under the lead term 'Abscess'. In general, the types of modifiers that tend to have priority in Section I are those indicating that a disease or condition is infectious or parasitic, malignant, neoplastic, psychogenic, hysterical, congenital, traumatic, complicating or affecting the management of pregnancy, childbirth or the puerperium, or affecting the fetus or newborn, or that the disease was reported in circumstances where the patient was looking for health advice but was not necessarily sick (codes in Chapter 21). In Section II, the priority modifiers are those indicating transport accidents, complications of medical and surgical procedures, intentional self-harm, assault, legal intervention, or war operations.

Section I incorporates an index of the categories to be used with Chapter 21 for terms relating to problems or circumstances rather than diseases or injuries. Some special lead terms, or 'key' words, are used for these, indicating the type of problem or circumstances. The main key words are 'Counselling', 'Examination', 'History', 'Observation', 'Pregnancy', 'Problem', 'Screening', 'Status', and 'Vaccination'.

In both Sections I and II, this key word form of lead term is also used instead of, or in addition to, the standard method for certain conditions or circumstances where terminology is diverse and reported descriptions might not easily be found in the index, or where the normal method of indexing might be misleading. Some obstetric complications, especially the more common ones, are indexed under the specific condition, eg Haemorrhage/complicating/delivery. However, the complication may instead be listed under the lead term 'Labour', 'Pregnancy', 'Puerperal' or 'Maternal condition affecting fetus or newborn'.

In Section II, key words are 'Complication' (for medical and surgical procedures), 'Sequelae', 'Suicide', 'Assault', 'Legal intervention' and 'War operations'. Users should remember the presence of these special lists whenever they have difficulty locating index entries for the relevant conditions, problems or circumstances; by scrutinizing the indented terms, guidance can be found as to the code numbers of all the relevant categories even if not reported in precisely the same words.

(1) The name of an anatomical site appears as a lead term when it is part of the name of the disease, eg 'Abdomen/acute R10.0'. This does not occur frequently in English, and in the English language version applies mainly to Latin expressions for some conditions eg 'Cor biloculare'.

CODE NUMBERS

The code numbers that follow the terms in the [ICD-10-AM Alphabetic Index](#) are those of the three, four or five character codes/categories to which the [clinical concept terms](#) are classified. In some cases, the fourth or fifth character is replaced by a dash, eg [Burn/ankle \(and foot\) T25.-](#). This indicates that a fourth and possibly a fifth character exists and should be used, and that it will be found either in a note in the index (eg the fourth character subdivisions common to many sites of burns are given in a note under the lead term 'Burn') or by reference to the [Tabular List](#).

EXAMPLE 11:

[Burn \(electricity\) \(flame\) \(hot gas, liquid or object\) \(steam\) \(thermal\) T30.0](#)
[- ankle \(and foot\) T25.-](#)

[- extent \(percentage of body surface\)](#)

[-- < 10 percent T31.0-](#)

The dash at the fourth or fifth character position indicates that an additional character is required for a valid code. The additional characters are located either in a *Note* in the [ICD-10-AM Alphabetic Index](#) or by reference to the [ICD-10-AM Tabular List](#).

EXAMPLE 12:

[Burn \(electricity\) \(flame\) \(hot gas, liquid or object\) \(steam\) \(thermal\) T30.0](#)

Note: The following fourth character subdivisions are for use with categories T20–T25 and T30:

[.0 Unspecified thickness](#)

[.1 Erythema](#)

[First degree](#)

[.2 Partial thickness \[blisters, epidermal loss\]](#)

[Second degree](#)

[.3 Full thickness](#)

[Deep necrosis of underlying tissue](#)

[Third degree](#)

EXAMPLE 13:

T31 Burns classified according to extent of body surface involved

▽ 1911

Note: This category must be used as a supplementary code with categories T20–T25, T29.

The following fifth character subdivisions are for use with subcategories T31.0–T31.9 to indicate the percent of body surface with full thickness burn. Valid fifth characters are in [brackets] under each code:

- ★ 0 less than 10% or unspecified
- ★ 1 10–19%
- ★ 2 20–29%
- ★ 3 30–39%
- ★ 4 40–49%
- ★ 5 50–59%
- ★ 6 60–69%
- ★ 7 70–79%
- ★ 8 80–89%
- ★ 9 90% or more of body surface

When a set of fourth characters is applicable to a group of categories, the common fourth characters may be presented in a *Note* or, in the case of pregnancies with abortive outcome, in a table in order to facilitate their application to different types of complete or incomplete abortion and to molar pregnancies. In some cases, common fourth characters may be listed in a table (eg complications of pregnancy with abortive outcome: *Abortion/complicated*; *External causes of injury: Table of Land Transport Accidents*). In other cases, the complication or main manifestation is listed in the index with a cross reference to the entire group of categories, with specification of the fourth character. eg ~~Syndrome/dependence — code to F10–F19 with fourth character .2.~~

EXAMPLE 14:

Syndrome NEC (see also Disease) U91
- dependence — code to F10–F19 with fourth character .2

Dagger/asterisk codes

Where an index term is one of the diagnostic statements for which there is a dual classification according to the aetiology and manifestation convention (dagger and asterisk):

- assign code combinations as specified in the Alphabetic Index, or as per the discrete code ranges listed in the Tabular List
- sequence codes as per the guidelines in ACS 0001 *Principal diagnosis/Aetiology and manifestation convention (the 'dagger and asterisk' system)*.

EXAMPLE 156:

Index: **Syndrome – NEC (see also Disease) U91**
- brain stem stroke ~~NEC~~ I67.9† G46.3*

Code Tabular List: G46.3* Brain stem stroke syndrome (I60–I67†)

In this example, the above index entry, lists I67.9† is listed as the default dagger code, however G46.3* may be assigned with any of the codes listed in the discrete code range I60–I67† in the Tabular List.

EXAMPLE 167:

Index: **Anaemia D64.9**
- Diphyllbothrium (Dibothriocephalus) B70.0† D63*

- due to
- - myxoedema E03.9† D63*
- hookworm B76.9† D63*
- malarial (*see also Malaria*) B54† D63*

Syphilis, syphilitic

- anaemia (late) A52.7† D63*

Code Tabular List: D63* Anaemia in chronic diseases classified elsewhere

In this example, Aa number of different dagger codes are listed with D63* in the Alphabetic Index. In the Tabular List D63* does not list a range of applicable dagger codes, therefore only assign dagger codes with D63* as specified in the Alphabetic Index (Note: the above index examples are not exhaustive).

TYPE FACE

Bold Bold type face is used for all lead terms in the ICD-10-AM Alphabetic Index.

Bold, *Italics* Bold and italicised type face is used for drug brand names

Italics Italicised type face is used for and *Instructional* notes/terms: *code.... see..., see also...*

PUNCTUATION

Parentheses ()

Parentheses are used in the ICD-10-AM Alphabetic Index to enclose:

- nonessential modifiers
- brand names in the Table of Drugs and Chemicals
- morphology codes
- *Instructional* notes/terms
- expanded abbreviations

EXAMPLE 17:

Kyphoscoliosis, kyphoscoliotic (acquired) (*see also Scoliosis*) M41.9-

EXAMPLE 18:

Sildenafil (*Viagra*)

EXAMPLE 19:

Adenomyoma (atypical polypoid) (M8932/0) — *see also Neoplasm/benign*

EXAMPLE 20:

HELLP (haemolysis, elevated liver enzymes and low platelet count) syndrome (with severe pre-eclampsia) O14.2

NEC (NOT ELSEWHERE CLASSIFIED)

NEC is listed in the ICD-10-AM Alphabetic Index after terms classified to residual or unspecified codes, and to terms that are ill-defined, as a warning that specified forms of the conditions are classified differently. If the clinical record includes more precise information, modify the coding accordingly.

EXAMPLE 21:

Anomaly, anomalous (congenital) (unspecified type) Q89.9

- aorta (arch) NEC Q25.40

Atresia, atretic

- aorta (arch) (ring) Q25.2

In this example, the term 'anomaly of aorta' is classified to Q25.40 **only** if no more precise description appears on the clinical record. If a more precise term is documented (eg atresia of aorta), locate that lead term instead (ie *Atresia, atretic/aorta*).

CROSS REFERENCES

To avoid unnecessary duplication of indexed terms, cross references are listed in the ICD-10-AM Alphabetic Index to refer users to alternate lead terms or subterms. Slashes are used to separate lead terms and subterms in cross references.

See/see also

See and *see also* cross references provide possible modifiers for a term or its synonyms.

1. '*see*' is an explicit direction to instruct the user to go to alternate indexed terms.

EXAMPLE 22:

Haemorrhage, haemorrhagic R58

- bronchus — *see Haemorrhage/lung*

2. '*see also*' directs the user to alternate indexed terms where there are further options that may provide more specificity.

EXAMPLE 23:

Paralysis, paralytic (complete) (incomplete) (*see also Paresis*) G83.9

- shaking (*see also Parkinsonism*) G20

EXAMPLE 24:

Enlargement, enlarged — *see also Hypertrophy*

3. '*see condition*' is an explicit direction, usually listed with anatomical sites and very general adjectival modifiers, to instruct the user to an alternate index pathway.

EXAMPLE 25:

Bladder — *see condition*

Hereditary — *see also condition*

Code to

The cross reference '*code to*' refers the user directly to the ICD-10-AM Tabular List to determine code assignment from a specific block or category.

EXAMPLE 26:

Dependence

- syndrome — *code to F10–F19 with fourth character .2*

MULTIPLE DIAGNOSES

The [ICD-10-AM](#) Tabular List includes a number of categories for the classification of two or more conditions, jointly reported, eg '[Influenza with pneumonia](#)' (J11.0), '[Acute appendicitis with generalised peritonitis](#)' (K35.2). Such combinations of conditions, which are specifically classified in the [ICD-10-AM](#) Tabular List, also appear in the index.

EXAMPLE 27:

Diagnosis: [Influenza with pneumonia](#).

Index: [Pneumonia \(acute\) \(double\) \(migratory\) \(purulent\) \(septic\) \(unresolved\) J18.9](#)
- with
- - [influenza virus \(not identified\) J11.0](#)

Assign: [J11.0 Influenza with pneumonia, virus not identified](#)

EPONYMS

Eponyms are conditions named after people and are listed in the ICD-10-AM Alphabetic Index as lead terms, and as subterms to other lead terms (eg [Disease](#), [Syndrome](#)).

EXAMPLE 28:

Kaschin-Beck disease M12.1-

Syndrome NEC (see also Disease) U91
- [Arnold-Chiari Q07.0](#)

SPELLING

The spelling conventions ~~of~~ [in](#) ICD-10-AM comply with the *Macquarie Dictionary* 6th Edition (2013) as recommended by the Australian government *Style Manual*, 6th edition (2002). Australian-English spelling of medical terms is used. Terms appear in alphabetical order according to the preferred Australian spelling.

SPECIAL SIGNS/ANNOTATIONS

[The following special signs are used in the ICD-10-AM Alphabetic Index, attached to certain code numbers or indexed terms:](#)

- [†](#) [The dagger symbol denotes a code describing the aetiology or underlying cause of a condition and is always assigned with an appropriate manifestation \(*\) code](#)
- [*](#) [The asterisk symbol denotes a code describing the manifestation of a condition and is always assigned with an appropriate aetiology \(†\) code](#)
- [#/#](#) [These symbols are attached to certain subterms \(sites\) under the lead term 'Neoplasm' to refer the user to Notes 3 and 4, respectively, at the beginning of that list.](#)

CONVENTIONS USED IN THE ALPHABETIC INDEX OF DISEASES

PARENTHESES

In the Alphabetic Index, as in the Tabular List, parentheses have a special meaning which the user must bear in mind. A term that is followed by other terms in parentheses is classified to the given code number whether any of the terms in parentheses are reported or not.

EXAMPLE 6:

~~Abcess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic)
-brain (any part) G06.0~~

~~Brain abcess is classified to G06.0 regardless of the part of the organ affected and whether or not the abcess is described as embolic, infective, metastatic, multiple, pyogenic, or septic.~~

Parentheses are also used to enclose:

- ~~brand names in the Table of Drugs and Chemicals — eg Disodium/pamidronate (*Aredia*)~~

- morphology codes—eg Adenocarcinoma/pseudomucinous (M8470/3)
- instructional notes—eg Laceration NEC (*see also Wound, open*)

CROSS REFERENCES

Some categories, particularly those subject to notes linking them with other categories, require rather complex indexing arrangements. To avoid repeating this arrangement for each of the inclusion terms involved, a cross reference is used. This may take a number of forms, as in the following examples:

EXAMPLE 7:

Inflammation

—bone—*see Osteomyelitis*

This indicates that the term 'Inflammation, bone' is classified in the same way as the term 'Osteomyelitis'. On looking up the latter term, the user will find listed various forms of osteomyelitis: acute, acute haematogenous, chronic, etc.

When a term has a number of modifiers which might be listed beneath more than one term, the cross-reference (*see also...*) is used:

EXAMPLE 8:

Paralysis

—shaking (*see also Parkinsonism*) G20

This means that if 'shaking paralysis' is the only term documented in the clinical record, the code is G20. If other information is present which is not found indented below, the user should look up 'Parkinsonism', where alternative codes will be found for the condition if further or otherwise qualified, for example, due to drugs or syphilitic.

EXAMPLE 9:

Enlargement, enlarged—*see also Hypertrophy*

If the site of the enlargement among indentations beneath 'Enlargement, enlarged' is not found, the user should look among the indentations beneath 'Hypertrophy' where a more complete list of sites is given.

EXAMPLE 10:

Bladder—*see condition*

Hereditary—*see condition*

As stated previously, anatomical sites and very general adjectival modifiers are not usually used as lead terms in the index and the user is instructed to look up the disease or injury reported on the clinical record and under that term to find the site or adjectival modifier.

EXAMPLE 11:

Abdomen, abdominal—*see also condition*

—acute R10.0

—apron E65

—convulsive equivalent G40.8

—muscle deficiency syndrome Q79.4

—overhang E65

—testicle NEC Q53.93

—bilateral Q53.23

—unilateral Q53.13

The term 'acute abdomen' is coded to R10.0; 'abdominal apron' is coded to E65; 'abdominal convulsive equivalent' is coded to G40.8; 'abdominal muscle deficiency syndrome' is coded to Q79.4; 'abdominal overhang' is coded to E65; 'abdominal testicle NEC' is coded to Q53.93; 'bilateral abdominal testicle' is coded to Q53.23 and 'unilateral abdominal testicle' is coded to Q53.13. For other abdominal conditions, the user should look up the disease or injury reported.

Prior to ICD-10-AM Eighth Edition cross references in the Alphabetic Index used commas to separate lead terms and subterms in an alternate index pathway. From Eighth Edition these commas have been replaced with slashes as follows:

EXAMPLE 12:

Haemorrhage, haemorrhagic

—bronchus — *see Haemorrhage, lung*

is shown as:

Haemorrhage, haemorrhagic

—bronchus — *see Haemorrhage/lung*

NEC

The letters NEC stand for 'not elsewhere classified'. They are added after terms classified to residual or unspecific categories and to terms in themselves ill defined as a warning that specified forms of the conditions are classified differently. If the clinical record includes more precise information the coding should be modified accordingly:

EXAMPLE 13:

Anomaly, anomalous (congenital) (unspecified type) Q89.9

—aorta (arch) NEC Q25.40

The term 'anomaly of aorta' is classified to Q25.40 only if no more precise description appears on the clinical record. If a more precise term eg atresia of aorta, is recorded, this term should be looked up for the appropriate code.

SPECIAL SIGNS/ANNOTATIONS

The following special signs will be found attached to certain code numbers or index terms:

- †/* — Used to designate the aetiology code and the manifestation code respectively, for terms subject to dual classification. *See under 'Code numbers'.*
- #/◆ — Attached to certain terms in the list of sites under 'Neoplasm' to refer the user to Notes 3 and 4, respectively, at the start of that list.

AUSTRALIAN CODING STANDARDS FOR ICD-10-AM AND ACHI

THE INTERNATIONAL STATISTICAL CLASSIFICATION
OF DISEASES AND RELATED HEALTH PROBLEMS,
TENTH REVISION, AUSTRALIAN MODIFICATION

THE AUSTRALIAN CLASSIFICATION OF HEALTH INTERVENTIONS

~~TENTH~~ELEVENTH EDITION
1 JULY 2019~~7~~

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Australian Coding Standards for:

The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) — Tabular List ~~of Diseases~~ and ICD-10-AM Alphabetic Index ~~of Diseases~~, and

The *Australian Classification of Health Interventions* (ACHI) — Tabular List ~~of Interventions~~ and ACHI Alphabetic Index ~~of Interventions~~.

...

ISBN xxx ICD-10-AM Tabular List ~~of Diseases~~

ISBN xxx ICD-10-AM Alphabetic Index ~~of Diseases~~

ISBN xxx ACHI Tabular List ~~of Interventions~~

ISBN xxx ACHI Alphabetic Index ~~of Interventions~~

ISBN xxx Australian Coding Standards

ISBN xxx ICD-10-AM/ACHI/ACS Hardcopy set of all 5 volumes

...

INTRODUCTION

...

Basic structure and principles of the ~~disease classification of~~ ICD-10-AM

The 'core' ~~disease classification~~ structure of ICD-10-AM is the three character code, which is the mandatory level of coding for international reporting to the World Health Organization (WHO) for general international comparisons. This core set of codes has been expanded to four and five character codes so that important specific disease entities can be identified, while also maintaining the ability to present data in broad groups to enable useful and understandable information to be obtained.

The ICD-10-AM is a variable-axis classification. Its structure is designed principally to facilitate epidemiological analysis. Diseases are organised in the following groups:

- epidemic diseases
- constitutional or general diseases
- local disease arranged by site
- developmental diseases
- injuries

The first two, and the last two, of these groups comprise 'special groups', which bring together conditions that would be inconveniently arranged for epidemiological study were they to be scattered, for instance, in a classification arranged primarily by anatomical site. The remaining group, 'local disease arranged by site', includes the ICD-10-AM chapters for each of the main body systems.

The distinction between the 'special groups' chapters and the 'body systems' chapters has practical implications for understanding the structure of the classification, for coding to it, and for interpreting statistics based on it. It has to be remembered that, in general, conditions are primarily classified to one of the 'special groups' chapters. Where there is any doubt as to where a condition should be positioned, the 'special groups' chapters take priority.

ICD-10-AM Tabular List of Diseases

Most of the ICD-10-AM Tabular List is composed of taken-up-with the main disease classification and is composed of 22 chapters. The first character of the ICD-10-AM code is a letter, and each letter is associated with a particular chapter, except for the letter D, which spans both Chapter 2 *Neoplasms* and Chapter 3 *Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism*, and the letter H, which is used in both Chapter 7 *Diseases of the eye and adnexa* and Chapter 8 *Diseases of the ear and mastoid process*. Chapters 1, 2, 19 and 20 use more than one letter in the first position of their codes.

0001 PRINCIPAL DIAGNOSIS

...

EXAMPLE 1:

Diagnoses as listed on the front sheet:

Diabetes mellitus

Coronary artery disease

Myocardial infarction

History of present illness:

Patient experienced severe chest pain on the morning of admission and was transported by ambulance to hospital and admitted to the coronary care unit.

In this example, the information from the clinical record indicates that myocardial infarction is the principal diagnosis.

The circumstances of inpatient admission will always govern the selection of principal diagnosis. In determining principal diagnosis, the coding directives in the ICD-10-AM manuals take precedence over all other guidelines (see ICD-10-AM Tabular List: *Conventions used in the ICD-10-AM Tabular List of Diseases* and ICD-10-AM Alphabetic Index: *Conventions and general arrangement used in of the ICD-10-AM Alphabetic Index-of Diseases*).



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**Review of the ACHI Conventions
and terminology issues**

Introduction/Rationale:

This document contains amendments to terminology:

- Tabular List of Interventions -> ACHI Tabular List
- Alphabetic List of Interventions -> ACHI Alphabetic List

The term 'procedure' has also been replaced with 'intervention' throughout the Conventions. Note that the term 'procedure' has not been replaced in ACHI Tabular List and Alphabetic Index, as this would require thousands of amendments, many of which would require ECL amendments to code titles.

Amendments are also proposed to create consistency between ICD-10-AM Tabular List and Alphabetic Index Conventions and ACHI Tabular List and Alphabetic Index Conventions.

See also TN1181 Review of the ICD-10-AM and ACS Conventions and terminology issues.

AUSTRALIAN CLASSIFICATION OF HEALTH INTERVENTIONS

ACHI

TABULAR LIST OF INTERVENTIONS

~~Tenth~~-Eleventh Edition
1 JULY 20197

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The *Australian Classification of Health Interventions* (ACHI); Tabular List ~~of Interventions~~.

...

- ISBN xxx ICD-10-AM Tabular List ~~of Diseases~~
- ISBN xxx ICD-10-AM Alphabetic Index ~~of Diseases~~
- ISBN xxx ACHI Tabular List ~~of Interventions~~
- ISBN xxx ACHI Alphabetic Index ~~of Interventions~~
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TABLE OF CONTENTS

PREFACE.....

ACKNOWLEDGMENTS

INTRODUCTION

Conventions used in the ACHI Tabular List ~~of Interventions~~.....

Guidance in the use of ACHI

...

ACKNOWLEDGMENTS

Australian Classification of Health Interventions (ACHI) ~~Tenth~~-Eleventh Edition has been developed by the Australian Consortium for Classification Development (ACCD).

Assistance and support in the preparation of the *Australian Classification of Health Interventions (ACHI)*- Tabular List and ACHI Alphabetic Index, was provided to the ACCD by the Independent Hospital Pricing Authority (IHPA).

...

INTRODUCTION

At the tenth *International Statistical Classification of Diseases and Related Health Problems* Conference, the World Health Organization (WHO) Heads of Collaborating Centres recommended that there should be no revision of the *International Classification of Procedures in Medicine (ICPM)* in conjunction with the Tenth Revision of the ICD, due to the rapid advancement in the field of procedures. Consequently, the WHO ICD-10 is a disease classification without an accompanying WHO intervention classification.

In 2006 the WHO – Family of Classifications (WHO-FIC) Network revisited the need for an intervention classification and ~~has~~ initiated a work program to develop the *International Classification of Health Interventions (ICHI)*. A beta draft was released in 2018, and development work continues on the ICHI.

In June 1994, the former National Coding Centre (NCC) produced an options paper on the future use of ICD-9-CM in Australian hospitals. This paper proposed the adoption of the WHO ICD-10 and an accompanying interventions~~procedure~~ classification in Australia.

In December 1994, an evaluation of potential procedure-interventions classifications was undertaken by the NCC. The four classifications assessed were:

- 3M Health Information Systems Procedure Coding System – USA
- Classification of Surgical Operations and Procedures, Fourth Revision (OPCS4) – UK
- Physicians' Current Procedural Terminology, Fourth Version (CPT '94) – USA
- Medicare Benefits Schedule for Fees (MBS) – Australia

The Australian Casemix Implementation Project Board considered the options and recommended to the then Commonwealth Department of Human Services and Health that the new procedure-interventions classification, ACHI, be based on the Commonwealth Medicare Benefits Schedule (MBS) and that it be introduced with the Australian Modification of ICD-10 (ICD-10-AM) for morbidity coding from July 1998.

Subsequently, the Australian Health Ministers' Advisory Council endorsed the introduction of ICD-10 for morbidity coding accompanied by a new intervention classification from July 1998. Responsibility for the development, introduction and maintenance of the *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM)* was given to the NCC (subsequently, the National Centre for Classification in Health [NCCH]). The then Commonwealth Department of Health and Family Services also contracted the NCCH to develop a new Australian interventions classification based on the MBS. This new interventions classification was called *MBS-Extended*. With the third edition of ICD-10-AM, the interventions~~procedure~~ classification was renamed the *Australian Classification of Health Interventions (ACHI)*. ACHI is the Australian national standard for ~~procedure and~~ intervention coding in Australian hospitals.

In 2013, the Australian Consortium for Classification Development (ACCD), led by the National Centre for Classification in Health (NCCH), University of Sydney, in collaboration with the Western Sydney University (WSU) and KPMG was contracted by the Independent Hospital Pricing Authority (IHPA) to develop and support ICD-10-AM/ACHI – and the accompanying Australian Coding Standards (ACS).

Specifications for the *Australian Classification of Health Interventions (ACHI)* are:

1. *Australian Classification of Health Interventions (ACHI)* published as the ACHI Tabular List ~~of Interventions~~ and the ACHI Alphabetic Index ~~of Interventions~~ in tandem with the ICD-10-AM and the *Australian Coding Standards*.

2. ~~The intervention classification captures procedures and~~ [ACHI classifies](#) interventions performed in public and private hospitals, day centres and ambulatory settings. Allied health interventions, dental services and ~~procedures other interventions~~ performed outside the operating theatre are [also](#) included.
3. ~~The intervention classification~~ [ACHI has been](#) ~~includes content from based on~~ the Commonwealth Medicare Benefits Schedule (MBS) (with some exceptions) [and the Australian Schedule of Dental Services and Glossary \(ADA\)](#).
A two digit extension number ~~has been~~ [is](#) attached to each MBS item number to represent individual ~~procedural~~ [interventional](#) concepts (eg 36564-00).
[The 97000 range of codes is used to represent dental interventions \(based upon the ADA item numbers\) with a two digit extension number attached to represent individual intervention concepts \(eg 97324-05\)](#).
Other ACHI ~~procedures and interventions concepts which that~~ are not represented in MBS [or ADA](#) are allocated a code number from the [remainder of the](#) 90000 series. ~~Note: 97000 codes are reserved for dental services.~~
4. The structure of the intervention classification is based on anatomy rather than surgical specialty. Chapters closely follow the chapter headings of the WHO ICD-10 to maintain parity with the disease classification.
5. Nonsurgical ~~procedures~~ [interventions](#) are listed separately from the surgical ~~procedures~~ [interventions](#), whenever feasible.
6. The ~~procedures~~ [interventions](#) in ~~the intervention classification~~ [ACHI](#) are provider neutral. That is, the same code ~~should be~~ [is](#) assigned for a specific intervention regardless of which health professional performs the intervention.

Content summary

[ACHI Tabular List](#). The ACHI Tabular List contains the interventions classification. Appendices included are:

[Appendix A Mapping table for MBS items not included in ACHI](#)

[Appendix B ACHI Code List](#)

[ACHI Alphabetic Index](#). The ACHI Alphabetic Index is used to locate interventional terms to be coded. The [ACHI Alphabetic Index](#) contains many interventional terms that do not appear in the ACHI Tabular List.

[Australian Coding Standards](#). The *Australian Coding Standards* contain the national standards maintained by the ACCD, which provide guidance in the application of ICD-10-AM and ACHI

CONVENTIONS USED IN THE ACHI TABULAR LIST OF INTERVENTIONS

FORMAT

First level – anatomical site axis

ACHI ~~has been~~is structured with a principal axis of anatomical site. Within each chapter the anatomical site ~~has been~~is structured by a 'superior' to 'inferior' (head-to-toe) approach.

Second level – ~~procedural~~intervention type axis

The secondary axis is ~~procedure~~intervention type, beginning with the least invasive ~~procedure~~intervention through to the most invasive ~~procedure~~intervention. Standardised ~~interventional~~procedural axes are:

Examination

Application, Insertion, Removal

Incision

Destruction

Excision

Reduction (only applicable to [Chapter 15 Procedures on Musculoskeletal ~~chapter~~system](#))

Repair

Reconstruction

Revision

Reoperation

Other procedures

Third level – block axis

~~Medicare Benefits Schedule (MBS) is a fee schedule, and has been structured according to specialty. As~~ ACHI is based on item numbers in the MBS, and ~~is~~ structured on an anatomical basis, the ~~refore~~ code numbers ([particularly those based on MBS item numbers](#)) do not always appear in numerical order within the ACHI Tabular List. ~~Therefore, A~~ a third level axis, called a **block**, ~~has been introduced~~is utilised. Blocks are numbered sequentially in the ACHI Tabular List to assist users in locating a specific code, and have titles that relate specifically to the codes contained within the block.

There are certain chapters that are ~~an~~exceptions to the general format:

- **Chapter 6 Dental services**

This chapter is based on ~~'The Australian Schedule of Dental Services and Glossary, 10th/Twelfth Edition'~~ ([Australian Dental Association 2017, The Australian Schedule of Dental Services and Glossary, Australian Dental Association, Sydney, https://www.ada.org.au/Dental-Professionals/Publications/Schedule-and-Glossary/The-Australian-Schedule-of-Dental-Services-and-\(1\)/Australian-Schedule-and-Dental-Glossary-2015-FA2-W](#)), ~~published by the Australian Dental Association (ADA) Incorporated. Copies of this publication can be obtained from the ADA, PO Box 520, St Leonards NSW 1590 Australia or from the ADA's website (<http://www.ada.org.au/Publications/schedule.aspx>).~~ ~~The Dental Services chapter is structured on a service~~ This chapter is structured on a service basis, (for example, diagnostic services, preventative services, periodontics, oral surgery), ~~etc.~~ Secondary axes, in most instances, relate to ~~procedure~~intervention type. Following closure of the Medicare Chronic Disease Dental Scheme, all MBS dental items were removed from the MBS as of 1 December 2012. Consequently Appendix C: *Mapping Table for MBS Dental Items* was removed in ~~the Ninth Edition of~~ ACHI [Ninth Edition](#).

- **Chapter 14 Obstetric procedures**

This chapter has a principal axis relating to the pregnancy cycle, (for example, antepartum procedures, procedures associated with labour, delivery), ~~etc.~~ Secondary axes relate to ~~procedure~~intervention type.

- **Chapter 18 Radiation oncology procedures**

This chapter has a principal axis relating to radiation oncology interventions~~procedures~~. Secondary axes relate to the type of radiation; (for example, external beam therapy, brachytherapy, computerised planning); ~~etc.~~

- **Chapter 19 Interventions not elsewhere classified**

This chapter has a principal axis relating to the purpose of the intervention; (for example diagnostic, therapeutic or administrative/clinical/client support and interventions not elsewhere classified). The secondary axis relates to the type of intervention or the body system. For example, in the primary axis of *Diagnostic Interventions*, the secondary axes are *Assessment, Consultation, Interview, Examination, Evaluation or Diagnostic Tests, Measures or Investigations – Eye and Adnexa*. In the primary axis of *Therapeutic Interventions*, secondary axes include *Counselling, Education or Nutritional Support Interventions*, or *Therapeutic Interventions – Cardiovascular System*.

- **Chapter 20 Imaging services**

~~The principal axis within this chapter relates to~~ This chapter has a principal axis relating to the imaging intervention~~service~~ performed; (for example, ultrasound, tomography, radiography); ~~etc.~~ There is no secondary axis within this chapter.

ABBREVIATIONS

~~NEC — Not elsewhere classified. This expression is used in the context of a warning to users that certain specified variants of the listed procedures may appear in other parts of the classification. Codes including 'NEC' within their description are only to be assigned when the user lacks the information necessary to assign the procedural term to a more specific code.~~

~~NOS — Not otherwise specified. This abbreviation is the equivalent of the term 'unspecified'.~~

AND/OR IN CODE TITLES

~~'And' in code titles means 'and'. 'Or' in code titles means 'or'.~~

EXAMPLE 1:

~~48224-00 [1435] Bone graft to radius or ulna~~

~~47393-00 [1431] Open reduction of fracture of shaft of radius and ulna~~

PUNCTUATION

~~[] — Brackets are used to enclose synonyms, alternative wordings or explanatory phrases.~~

~~() — Parentheses are used to enclose supplementary words which may be present or absent in the statement of a procedure without affecting the code number to which it is assigned.~~

~~:~~ — Colons are used in the Tabular List after an incomplete term which needs one or more of the modifiers which follow in order to make it assignable to a given category.

~~{ }~~ — Braces are used to enclose a series of terms, each of which is modified by the statement appearing at the right of the brace.

INCLUSION TERMS

~~Inclusion terms are the procedural-interventional terms listed under a block heading, code- Glossary description/definition or code.~~

~~Their purpose is to give-demonstrate examples of terms-interventions that are classified which are categorised to the code-or block or code. They may refer to different interventions, or synonyms, but they are not a subclassification. Inclusion terms are listed primarily as a guide to the content of the block or code. Many of the items listed relate to important or common terms belonging to the block or code. Others are interventions or sites, listed to distinguish the boundary between one subcategory and another.~~

EXAMPLE 2:

~~90064-01 [173] Refractive keratoplasty
Keratomileusis
Thermokeratoplasty~~

~~Inclusion terms are not exhaustive and clinical coders should never code directly from the Tabular List. The Alphabetic Index should be referenced first, as it contains many more procedural terms than the Tabular List.~~

Inclusion terms are not exhaustive. NEVER code directly from the ACHI Tabular List. Reference first the ACHI Alphabetic Index, as it contains many more interventional terms than the ACHI Tabular List.

EXAMPLE 1:

90064-01 Refractive keratoplasty
Keratomileusis
Thermokeratoplasty

In some instances, it is necessary to read *Inclusion* terms in conjunction with code titles. This usually occurs when the *Inclusion* terms are lists of sites or pharmaceutical products. Where appropriate, terms from the preceding code or category titles need to be read and understood.

EXAMPLE 2:

1920 Administration of pharmacotherapy

-02 Anti-infective agent
Antibacterial
Antibiotic
Antifungal
Antiprotozoal
Antiviral

In this example, the *Inclusion* terms represent 'administration of' those agents (eg administration of antibacterial agent).

INSTRUCTIONAL NOTES/TERMS

Instructional notes/terms appear ~~in certain locations~~ throughout the ACHI Tabular List:

| | | |
|---------------------|---|--|
| Chapter | | instructional notes relates <u>Applies to the codes classified to the chapter</u> |
| First level | – Anatomical site axis | instructional notes relates <u>Applies to the codes classified to the site</u> |
| Second level | – Procedural <u>Intervention</u> type axis | instructional notes relates <u>Applies to the codes classified to the intervention type</u> |
| Third level | – Block axis | instructional note relates <u>Applies to the codes grouped under the block heading</u> |
| Fourth level | – Code | instructional notes relates <u>Applies to the code</u> |

Instructional notations ~~notes/terms~~ are listed in the following order:

Glossary descriptions/Definitions

Includes

Note

Code also when performed (Code also) (Code first)

Excludes

Glossary descriptions/Definitions

Glossary descriptions/Definition are formal statements of the meaning of a term or code. They ~~are used to~~ define the content of a chapter, anatomical site, ~~procedure-intervention~~ type, block or code. This instruction Glossary descriptions are is useful in standardising terminology, and assisting with classification coding quality. **Glossary** The Glossary descriptions/Definition are is not intended for use by clinical coders.

Includes note

~~The Includes notes is used to~~ further define the contents of a chapter, site, ~~procedure-intervention~~ type, block or code. ~~In some instances, the Includes note refers to procedural components or equipment used that is inherent in the description of a code or block heading. They refer to intervention components or equipment used, that is inherent in a code or block.~~

EXAMPLE 3:

~~36503-00 [1058] Kidney transplantation~~

~~Includes: vascular anastomosis~~

36503-00 Kidney transplantation

Includes: vascular anastomosis

EXAMPLE 4:

41867-01 Reoperation arytenoidectomy

Includes: that by laser

In other instances, the ~~Includes instructional~~ note further defines the site.

EXAMPLE 4:

~~30394-00 [987] Drainage of intra-abdominal abscess, haematoma or cyst~~

~~Includes~~ appendiceal

~~±~~

~~iliac fossa~~

~~intraperitoneal~~

~~pelvic~~

~~pouch of Douglas~~

~~subhepatic~~

~~subphrenic~~

~~peritonitis~~

~~-abscess, haematoma or cyst~~

EXAMPLE 5:

306 Other procedures on external ear

Includes: auricle

external auditory canal

Note

~~The Note can be used as an explanation that clarifies the use of a code or codes. In many instances, the Note provides an example of a diagnostic term for which the procedure may be performed (ie the Note is not exhaustive).~~

The Note clarifies the use of a code or codes. In some instances, the Note provides an example of a diagnostic term for which the intervention may be performed (the Note is not exhaustive).

EXAMPLE 65:

~~39806-00 [11] — Clipping of intracranial proximal artery~~

~~————— *Note:* — Performed for aneurysm or arteriovenous malformation~~

39806-00 Clipping of intracranial proximal artery

————— *Note:* — Performed for aneurysm or arteriovenous malformation

The *Note* ~~can also be used to~~ may also further define certain terms used in code or block descriptions, ~~within the block.~~

EXAMPLE 76:

~~[712] — Arterial bypass graft using synthetic material~~

~~————— *Note:* — Synthetic material can include polyester (woven or knitted) or polytetrafluorethylene [PTFE] grafts~~

712 Arterial bypass graft using synthetic material

————— *Note:* — Synthetic material can include polyester (woven or knitted) or polytetrafluorethylene [PTFE] grafts

See

The term *see* is listed within other *Instructional* notes/terms, as a cross-reference to another section of the classification. Follow the cross-references to ensure correct code selection.

EXAMPLE 8:

90011-00 Other diagnostic procedures on spinal canal or spinal cord structures

————— *Note:* — For nonsurgical diagnostic interventions see Chapter 19

EXAMPLE 9:

43801-00 Correction of malrotation of intestine

Ladd operation

————— *Excludes:* — that with resection of intestine — see Alphabetic Index

Code also/Code also when performed

This instruction is used throughout the Tabular List to advise the user that an additional code is to be assigned when certain associated procedures are performed or certain equipment is used.

Example 7:

~~41548-00 [323] — Obliteration of mastoid cavity~~

~~————— *Code also when performed:*~~

~~————— • meatoplasty (41512-00 [305])~~

Code first

The *Code first* instructions assist ~~the user in the correct~~ with sequencing of codes. This instruction appears under codes that *must never* be assigned alone.

EXAMPLE 108:

~~15012-00 [1794] — Brachytherapy, eye~~

~~————— *Code first:*~~

~~————— • implantation of brachytherapy applicator, eye (42801-00 [177])~~

15012-00 [Brachytherapy, eye](#)
Code first:
• [implantation of brachytherapy applicator, eye \(42801-00 \[177\]\)](#)

Code also/Code also when performed

These instructions indicate that an additional code is assigned when certain associated interventions are performed, or equipment is used.

EXAMPLE 11:

41548-00 [Obliteration of mastoid cavity](#)
Code also when performed:
• [meatoplasty \(41512-00 \[305\]\)](#)

Excludes note

~~Terms following the word 'Excludes' are to be coded elsewhere as indicated in each case.~~

~~Codes are not listed within the 'Excludes' note in numerical order. Rather they are ordered sequentially by block number.~~

Excludes notes are listed at the chapter, block and code level. Interventions listed in Excludes notes are classified elsewhere in ACHI.

Note: Codes are not listed within the Excludes note in numerical order; they are ordered sequentially by block number.

EXAMPLE 12:

~~[8] [Intracranial drainage](#)
Excludes: cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])~~
8 [Intracranial drainage](#)
Excludes: cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])

Codes ~~can~~ may be listed in Excludes notes with or without their extensions (see ~~above~~ Example 12; 40003 [5] and 40012 [19]). When the extensions are not ~~used~~ listed, the Excludes note applies to **all** the two digit extensions of that code: ~~(ie in the above~~ Example 12, there are two extensions to code 40012 [19] ~~(below~~ see Example 13):

EXAMPLE 13:

40012-00 [19] *Endoscopic third ventriculostomy*
40012-01 [19] *Third ventriculostomy*

BLACK REVERSE TEXT BOXES

Black reverse text boxes are used for all block title numbers. They are NOT VALID codes and CANNOT be assigned ~~They DO NOT indicate valid codes and CANNOT be assigned.~~ For example:

~~**1340** [Caesarean section](#)~~

EXAMPLE 14:

1340 [Caesarean section](#)

TYPE FACE

Bold Bold type face is used for all block titles in the ACHI Tabular List ~~of Interventions~~.

Bold, *Italics* Bold and italicised type face is used for ~~the instructional text of~~ *Includes, Excludes* and *Note*.
Italics Italicised type face is used for *Instructional notes/terms*; ~~the instructional text of~~ *Code also... Code also when performed, and Code first, See... and Use additional code.*

PUNCTUATION

Parentheses ()

Parentheses are used to enclose:

1. nonessential modifiers (NEM) ie supplementary terms that follow an interventional term, but do not affect the code number to which it is assigned

EXAMPLE 15:

43912-02 Other open excision of bronchus
Excision of (lesion) (tissue) bronchus NEC

2. the code(s) in *Excludes* notes and other *Instructional notes/terms*

EXAMPLE 16:

5 Irrigation, insertion or removal of intracranial cerebrospinal fluid shunt

Code also when performed:

- neuroendoscopy (40903-00 [1])

Excludes: insertion of external ventricular drain (39015-00 [3])
revision of cerebrospinal fluid shunt (40009-00, 40009-01 [24])

3. the block ranges listed at the beginning of a chapter

EXAMPLE 17:

CHAPTER 1

PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1–86)

SQUARE BRACKETS []

Square brackets are used to enclose:

1. synonyms or alternative terms

EXAMPLE 18:

235 Canthoplasty

Includes: excision of tarsal cartilage [tarsectomy]

2. explanatory terms

EXAMPLE 19:

90047-00 Aspiration of thyroid
Percutaneous [needle] drainage of thyroid

3. abbreviations

EXAMPLE 20:

57362-00 [Computerised tomography of temporo-mandibular joint \[TMJ\]](#)

4. [block numbers](#)

EXAMPLE 21:

90396-00 [Excision of lesion of tunica vaginalis](#)

Excludes: [excision of hydrocele \(30631-00 \[1182\]\)](#)

COLON :

A colon is used in *Inclusion* terms and *Excludes* notes, when the terms preceding the colon require one or more modifiers (qualifying terms) for assignment to the code or block.

EXAMPLE 22:

37604-17 [Percutaneous aspiration or drainage of scrotum or tunica vaginalis](#)

[Percutaneous aspiration of:](#)

- [hydrocele](#)
- [spermatocele](#)

[Tapping of hydrocele](#)

[In this example, the code classifies percutaneous aspiration of hydrocele and percutaneous aspiration of spermatocele.](#)

[Colons are used in *Includes* notes to avoid repetition of terms.](#)

EXAMPLE 23:

37209-00 [Radical prostatectomy](#)

[Total prostatectomy NOS](#)

Includes: [excision of:](#)

- [seminal vesicles](#)
- [vas deferens](#)

[In this example, the colon is used here to avoid duplication of the terms 'excision of'.](#)

[Colons are also used to separate certain *Instructional* notes/terms \(ie *Includes*, *Note*, *Code also/Code first/Code also when performed*, *Excludes*\), and the *Interventional* terms that follow \(see Examples 3–12\).](#)

NOS

NOS is an abbreviation for 'not otherwise specified', meaning 'unspecified' or 'unqualified'.

EXAMPLE 24:

90468-06 [Forceps delivery, unspecified](#)

[Forceps delivery NOS](#)

NOT ELSEWHERE CLASSIFIED (NEC)

[The terms 'not elsewhere classified' indicate that certain specified variants of that intervention are classified in other parts of ACHI.](#)

EXAMPLE 25:

43987-02 [Excision of neuroblastoma, not elsewhere classified](#)

Excludes: [intra-abdominal neuroblastoma \(43987-01 \[989\]\)](#)
[intrathoracic neuroblastoma \(43987-00 \[563\]\)](#)

The abbreviation 'NEC' is used in the ACHI Tabular List in *Inclusion* terms and *Excludes* notes.

NEC code options are only assigned when there is insufficient information to assign the interventional term to a more specific code.

EXAMPLE 26:

90319-04 Other closed procedures on liver
Percutaneous procedures on liver NEC

In this example, the code is assigned when there is insufficient information to permit assignment of a more specific percutaneous/closed procedure on the liver.

AND/OR IN CODE TITLES

The term: ~~'And' in code titles means 'and'. 'Or' in code titles means 'or'.~~

- 'and' in code titles means 'and'
- 'or' in code titles means 'or'.

EXAMPLE 27:

48224-00 [1435] Bone graft to radius or ulna
47393-00 [1431] Open reduction of fracture of shaft of radius and ulna

SPECIAL SIGNS/ANNOTATIONS

- ▽ This symbol denotes that an Australian Coding Standard applies to ~~for~~ a particular code or group of codes (category or block) and therefore, is an Australian Coding Standard that should be checked ~~reference to the standard is essential~~ before the code(+) is assigned. The relevant standard number(s) is shown under or beside the symbol.

ACHI

ALPHABETIC INDEX ~~OF INTERVENTIONS~~

~~Tenth~~^{Eleventh} Edition
1 July 201~~9~~⁷

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- ISBN xxx ICD-10-AM Tabular List ~~of Diseases~~
- ISBN xxx ICD-10-AM Alphabetic Index ~~of Diseases~~
- ISBN xxx ACHI Tabular List ~~of Interventions~~
- ISBN xxx ACHI Alphabetic Index ~~of Interventions~~
- ISBN xxx Australian Coding Standards
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TABLE OF CONTENTS

PREFACE

INTRODUCTION

[Conventions and general arrangement of the ACHI Alphabetic Index.....](#)

~~Conventions used in the Alphabetic Index of Interventions.....~~

...

INTRODUCTION

The ~~Alphabetic Index of Interventions of the~~ Australian Classification of Health Interventions (ACHI) Alphabetic Index is an alphabetic index to the ACHI Tabular List ~~of Interventions~~.

The ACHI Alphabetic Index of Interventions is important because it contains many more procedural-interventional terms than those appearing in the ACHI Tabular List ~~of Interventions~~.

Both the ACHI Tabular List and Alphabetic Index ~~and Tabular List~~ are meant to be used together. It is not recommended that the ACHI Tabular List or ACHI Alphabetic Index ~~or Tabular List~~ be used in isolation of each other. After locating a code in the index, refer to that code in the Tabular List for important instructions, such as 'Includes' and 'Excludes' notes. These instructions provide guidance on the use of additional codes, sequencing and exclusion notes ~~which that~~ indicate rules such as when an intervention procedure would is be coded elsewhere.

CONVENTIONS AND GENERAL ARRANGEMENT OF ~~USED IN~~ THE ACHI ALPHABETIC INDEX ~~OF INTERVENTIONS~~

STRUCTURE (LEAD TERMS AND SUBTERMS)

LEAD TERMS

~~The Alphabetic Index of Interventions is organised by 'lead terms' which are printed in bold type face for ease of reference. Lead terms usually identify the type of procedure performed, rather than the anatomic site involved. Lead terms start at the extreme left of a column, with various levels of indentation, which start progressively further right. Therefore a complete index term may be composed of several lines, sometimes quite widely separated.~~

Lead terms

The ACHI Alphabetic Index is organised by 'lead terms', in bold type face.

Lead terms start at the extreme left of a column, with hyphens used to indicate levels of indentation for subterms (modifiers). Therefore, a complete index term may be composed of several lines, which may be widely separated.

EXAMPLE 1:

Hemicolectomy

- left (with anastomosis) 32006-00 [913]
- - with formation of stoma 32006-01 [913]
- - - via laparoscopy 32006-03 [913]
- - via laparoscopy 32006-02 [913]

In this example, the last line lists the code for 'laparoscopic left hemicolectomy with anastomosis'.

Lead terms mainly identify the type of intervention performed, rather than the anatomic site involved.

EXAMPLE 2:

Intervention: Abdominal wall biopsy

Index: **Biopsy** (brush) (with brushing(s)) (with washing(s) for specimen collection)
- abdomen wall (open) 30075-17 [988]

Occasionally an anatomical site is indexed as a lead term, when it is part of the name of an intervention.

EXAMPLE 3:

Cheek lift (bilateral) 45588-00 [1675]

Subterms (essential and nonessential modifiers)

Subterms (ie terms indented beneath lead terms (modifiers)) refer to:

- anatomical sites applicable to the intervention
- diagnostic terms
- device(s) or (surgical) techniques.

Essential modifiers are subterms that *effect* the code selection. These subterms form individual line entries.

Nonessential modifiers are terms in parentheses following a lead term or subterm. They *do not affect* code selection.

EXAMPLE 4:

Bronchoscopy (electromagnetic navigation) (with bronchial lavage) (with fluoroscopic guidance) 41889-05 **[543]**

- with

- - Argon plasma coagulation — see *Coagulation, electrocoagulation/by site*

- - biopsy (brush) (needle) (with brushing(s)) (with washing(s) for specimen collection) — see *Biopsy/by site*

- - broncho-alveolar lavage (BAL) 41898-02 **[544]**

- - destruction — see *Destruction/by site*

- - dilation (stricture) 41904-00 **[546]**

- - excision of lesion — see *Excision/lesion/by site*

- - insertion of bronchial device (stent) (valve) 41905-06 **[546]**

- - removal of

- - - bronchial device (stent) (valve) 41905-08 **[546]**

- - - foreign body 41895-02 **[544]**

- - - lesion — see *Excision/lesion/by site*

- - replacement of bronchial device (stent) (valve) 41905-07 **[546]**

SEQUENCE

Lead terms are sequenced alphabetically.

EXAMPLE 5:

Abbe procedure

Abdominoplasty

Debanding

Debridement

Kimura procedure

Klockoff's tests

Spaces, hyphens, symbols and numbers precede alphabetic sequence. Numbers (Arabic or Roman) are sequenced numerically *before* alphabetic characters.

EXAMPLE 6:

Electroconvulsive therapy (ECT) (unspecified laterality or brevity) 14224-00 **[1907]**

- > 21 treatments 14224-06 **[1907]**

- bilateral 14224-04 **[1907]**

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, it takes precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

EXAMPLE 7:

Angiography

- by
- digital subtraction technique (DSA) (regional) NEC 59970-01 [1998]
- limb
- lower (≤ 3 data acquisition runs) (unilateral) 60048-00 [1996]
- with aortography 60060-00 [1997]
- 4–6 data acquisition runs 60051-00 [1996]
- with aortography 60063-00 [1997]
- 7–9 data acquisition runs 60054-00 [1996]
- with aortography 60066-00 [1997]
- ≥ 10 data acquisition runs 60057-00 [1996]
- with aortography 60069-00 [1997]
- bilateral (≤ 3 data acquisition runs) 60048-01 [1996]

EXAMPLE 8:

Formation

- fistula
- arteriovenous
- with
- graft, vein 34512-00 [765]
- prosthesis (Gore-tex) 34512-01 [765]
- limb (extremity)
- lower 34509-00 [765]
- upper 34509-01 [765]

In this example, 'formation of an arteriovenous fistula of the lower limb with vein graft' is classified to 34512-00 [765], not 34509-00 [765], as the entries listed under 'with' take precedence over the alphabetic subterm of 'limb'.

When multiple prepositional terms are listed, they are sequenced in alphabetic order.

EXAMPLE 9:

Orbitotomy (exploratory) 42533-00 [222]

- for
- decompression, by removal of
- bone (with replacement) — see *Orbitotomy/with/removal of/bone*
- intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- dysthyroid eye disease, by
- fenestration of ≥ 2 walls 42545-00 [227]
- removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- with
- biopsy 42533-01 [224]
- drainage 42533-00 [222]
- excision of lesion 42542-00 [224]

CODE NUMBERS

The code numbers that follow the terms in the ACHI Alphabetic Index are the codes to which the terms are classified (see also *Blocks* below). In some cases, codes are indexed **without** their two digit extensions. When the extensions are not listed, the indexed code applies to **all** the two digit extensions of that code.

EXAMPLE 10:

Pharmacotherapy (systemic effect) 96206 [1920]

BLOCKS

MBS is a fee schedule and has been structured according to specialty. As the *Australian Classification of Health Interventions* is based on item numbers in the MBS and is structured on an anatomical basis, the code numbers do not always appear in numerical order within the Tabular List of Interventions. A third level axis, called a **block**, has been introduced. Blocks are numbered sequentially in the Tabular List of Interventions to assist in locating a specific code. Block numbers in the index appear in bold and are located to the right of the code, separated from the code by square brackets. Use the block number to assist in locating a code in the ACHI Tabular List.

SEQUENCE

Lead terms are sequenced alphabetically.

Spaces, symbols and numbers precede alphabetic letters. Numbers, whether Arabic or Roman, are sequenced numerically *before* alphabetic characters.

EXAMPLE 1:

Test, testing (for) NEC (see also *Investigation*) 92204 00 [1866]

—absorption

—radioactive B₁₂

—1 isotope 12512 00 [1863]

—2 isotopes 12515 00 [1863]

Hyphens appear in the Alphabetic Index of Interventions to indicate levels of indentation of sub-entries in the Index.

EXAMPLE 2:

Hypothermia

—deep 22075 00 [642]

—with

—cardiac arrest, induced 22075 00 [642]

—cerebral perfusion (antegrade) (retrograde) 38577 00 [642]

—circulatory arrest, induced 22075 00 [642]

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, they always take precedence over symbols, numbers and the alphabetic sequence of subterms:

•—as

•—by

•—for

•—with

•—without

EXAMPLE 3:

Flap (repair)

—gingival (≤ 8 teeth) 97232 00 [456]

- for crown lengthening 97238-00 [456]
- with alveolar osseous procedure (\leq 8 teeth) 97233-00 [456]
- > 8 teeth 97233-01 [456]
- > 8 teeth 97232-01 [456]

EXAMPLE 4:

Formation

- fistula
- arteriovenous
- with
- graft, vein 34512-00 [765]*
- prosthesis (Gore-tex) 34512-01 [765]
- limb (extremity)
- lower 34509-00 [765]**
- upper 34509-01 [765]

In the above example, 'formation of an arteriovenous fistula of the lower limb with graft' would be assigned code 34512-00 [765]* rather than code 34509-00 [765]** because entries under 'with' take precedence over the alphabetic subterm of 'limb'.

When multiple prepositional references are present, they are listed in alphabetic sequence.

EXAMPLE 5:

Orbitotomy (exploratory) 42533-00 [222]

- for
- decompression, by removal of
- bone (with replacement) — *see Orbitotomy/with/removal of/bone*
- intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- dysthyroid eye disease, by
- fenestration of \geq 2 walls 42545-00 [227]
- removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- with
- biopsy 42533-01 [224]
- drainage 42533-00 [222]
- excision of lesion (anterior aspect) 42542-00 [224]
- retrobulbar aspect 42543-00 [224]

MODIFIERS

A lead term or subterm may be followed by a series of terms in parentheses. The presence or absence of these parenthetical terms in the procedure description has *no effect* upon the selection of the code. These are called *nonessential modifiers*.

EXAMPLE 6:

Bronchoscopy (electromagnetic navigation)(with bronchial lavage)(with fluoroscopic guidance) 41889-05 [543]

- with
- Argon plasma coagulation — *see Coagulation, electrocoagulation/by site*
- biopsy (brush) (needle) (with brushing(s)) (with washing(s) for specimen collection) — *see Biopsy/by site*
- broncho-alveolar lavage (BAL) 41898-02 [544]
- destruction — *see Destruction/by site*
- dilation (stricture) 41904-00 [546]
- excision of lesion — *see Excision/lesion/by site*
- insertion of bronchial device (stent) (valve) 41905-06 [546]

- removal of
- bronchial device (stent) (valve) 41905-08 [546]
- foreign body 41895-02 [544]
- lesion — see *Excision/Lesion/by site*
- replacement of bronchial device (stent) (valve) 41905-07 [546]

A term may also be followed by a list of subterms which *do have an effect* upon the selection of the appropriate code for a given procedure. These are called *essential modifiers*. These subterms form individual line entries and describe essential differences in site or surgical technique.

EXAMPLE 7:

Clipping

- artery 34106-14 [697]
- axillary 34103-11 [697]
- for aneurysm 33070-00 [714]
- ruptured 33175-00 [714]
- brachial 34106-10 [697]
- for aneurysm 33070-00 [714]
- ruptured 33175-00 [714]
- cardiac collateral (open) 38700-03 [691]
- percutaneous (closed) 38700-02 [691]

TYPE FACE

Bold Bold type face is used for all lead terms in the ACHI Alphabetic Index.

Italics Italicised type face is used for *Instructional* notes/terms: *omit code..., see..., see also...*

PUNCTUATION

Parentheses ()

Parentheses are used in the ACHI Alphabetic Index to enclose:

- nonessential modifiers
- *Instructional* notes/terms
- expanded abbreviations

EXAMPLE 11:

BiPAP (bilevel positive airway pressure) (nonintubated) — see block [570]

EXAMPLE 12:

Consultation (see also Assessment) 96037-00 [1824]

NEC (NOT ELSEWHERE CLASSIFIED) (NEG)

NEC is listed in the ACHI Alphabetic Index after terms classified to unspecific codes, and to terms that are ill-defined, as a warning that specified forms of the intervention are classified differently. If the clinical record includes more precise information, modify the coding accordingly.

NEC is used for two purposes which can only be determined by referring to the Tabular List of Interventions:

1. With ill-defined terms as a warning that specified forms of the procedure are classified differently. The codes given for such terms should be used only if more precise information is not available.
2. Terms for which a more specific category is not provided in the Tabular List, and no amount of additional information will alter the selection of the code.

EXAMPLE 13:

Procedure

- adenoids NEC 90146-00 [415]

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

- adenoid 30075-25 [411]

In this example, the unspecified intervention on the adenoids is classified to 90146-00 [415] *Other procedures on tonsils or adenoids*. If a more precise term is documented (eg biopsy of adenoid), locate that lead term instead (ie *Biopsy/adenoid*).

CROSS REFERENCES/INSTRUCTIONAL REFERENCES

~~Prior to ACHI Eighth Edition cross references in the Alphabetic Index used commas to separate lead terms and subterms in an alternate index pathway. From Eighth Edition these commas have been replaced with slashes as follows:~~

To avoid unnecessary duplication of indexed terms, cross references are listed in ACHI Alphabetic Index to refer users to alternate lead terms or subterms. Slashes are used to separate lead terms and subterms in cross references.

EXAMPLE 8:

Ablation

~~—arrhythmia circuit or focus — see Ablation, cardiac~~

is shown as:

Ablation

~~—arrhythmia circuit or focus — see Ablation/cardiac~~

See/see also

~~See and see also cross references provide the user with possible modifiers for a term or its synonyms. They are used to avoid unnecessary duplication of terms in the index. There are three types of cross references:~~

- ~~1. 'see' is an explicit direction to look elsewhere. It is used to force instruct the user to an alternate indexed terms pathway.~~

EXAMPLE 149:

CAT (computerised axial tomography) — see *Tomography/computerised*

- ~~2. 'see also' directs the user to another alternate indexed terms pathway where there are further options that may provide more specificity.~~

EXAMPLE 1510:

Adhesiolysis — see also *Division/adhesions*

- epidural (peridural) 39140-00 [32]

EXAMPLE 161:

Radiography (diagnostic) 90909-00 [1988]

- bone — see also *Radiography/by specific site*

- ~~3. 'see block [xxx]' directs the user to the Tabular List for further information or specific site references.~~

EXAMPLE 12:

Assistance

~~—endotracheal respiratory — see block [569]~~

See block

The cross reference '[see block \[xxxx\]](#)' refers the user directly to the ACHI Tabular List to determine code assignment.

EXAMPLE 17:

Assistance, assisted

- endotracheal respiratory — [see block \[569\]](#)

Omit code

~~The *omit code* instruction can apply to terms which identify incisions that are listed as lead terms in the Alphabetic Index of Interventions. If the incision was made only for the purpose of performing further surgery, the instruction *omit code* is given. *Omit code* instructions apply to certain interventions that, when performed with other interventions, are not coded (eg [intervention components](#)).~~

EXAMPLE 18:

Arthrotomy (with lavage) 50103-00 [1555]

- as operative approach — *omit code*
- ankle 49706-00 [1529]
- elbow 49100-00 [1410]
- hip 49303-00 [1481]

[In this example, a code for arthrotomy \(ie incision of joint\) is not assigned when it is inherent in another intervention \(as the operative approach\).](#)

~~*Omit code* instructions can also apply to certain procedures which, when performed with other procedures, should not be coded.~~

EXAMPLE 19:

Cardioversion 13400-00 [1890]

- in conjunction with cardiac surgery — *omit code*

[In this example, a code for cardioversion is not assigned when it is performed in conjunction with cardiac surgery.](#)

Code specific procedure(s) performed

This instruction ~~is rarely used in the Alphabetic Index. It appears~~ [is listed in those instances](#) where it is necessary to code each individual component of an ~~procedure-intervention, and~~ [but these interventions](#) are not specifically listed at the ~~is~~ lead term.

EXAMPLE 20:

Amputation

- ear — *code specific procedure(s) performed*
- nose — *code specific procedure(s) performed*

EPONYMS

~~Procedures~~ Eponyms are interventions named after people. ~~(eponyms) are~~ They are listed both as lead terms ~~in their appropriate alphabetic sequence~~ and as subterms under the lead term 'PProcedure'. A description of the ~~procedure~~ intervention or anatomic site affected usually follows the eponym (in parentheses).

EXAMPLE 216:

Darrach procedure (osteotomy of ulna) 48406-04 [1424]

- with internal fixation 48409-04 [1424]

Procedure

- Darrach (osteotomy of ulna) 48406-04 [1424]

- - with internal fixation 48409-04 [1424]

SPELLING

The spelling conventions in ACHI comply with the *Macquarie Dictionary* 6th Edition (2013) as recommended by the Australian government *Style Manual*, 6th edition (2002). Australian-English spelling of medical terms is used. Terms appear in alphabetical order according to the preferred Australian spelling.



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

See Alphabetic Index

Introduction/Rationale:

Across ICD-10-AM & ACHI Tabular Lists there is inconsistent use of long dashes, braces, italics, and semi colons in regards to cross references to ‘see Alphabetic Index’.

ACCD proposes to review and amend (where required) all existing ‘see Alphabetic Index’ cross references into a standardised format across all volumes of ICD-10-AM, ACHI and ACS.

Template:

Excludes: xxx — see Alphabetic Index

Excludes: xxx — code to xxx — see Alphabetic Index

Use additional code xxx — see Alphabetic Index: Lead term/subterm

Code first xxx — see Alphabetic Index: Lead term/subterm

Code first/also when performed:

• xxx — see Alphabetic Index: *Lead term/subterm*

ACS: xxx — see Alphabetic Index: *Lead term/subterm*

ACCD PROPOSAL

ICD-10-AM Tabular List

D11 Benign neoplasm of major salivary glands

Excludes: benign neoplasms of: ~~minor salivary glands NOS (D10.3)~~
• [minor salivary glands NOS \(D10.3\)](#)
• [specified minor salivary glands – see Alphabetic Index: Neoplasm/by site/benign](#)
~~benign neoplasms of specified minor salivary glands which are classified according to their anatomical location~~
~~—see Alphabetic Index~~

...

★E09.5 Intermediate hyperglycaemia with peripheral angiopathy

Intermediate hyperglycaemia with peripheral arterial disease

Excludes: venous conditions — [see Alphabetic Index](#) ~~—see Alphabetic Index~~

...

☛E10.51 Type 1 diabetes mellitus with peripheral angiopathy, without gangrene
Type 1 diabetes mellitus with peripheral arterial disease, without gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

☛E10.52 Type 1 diabetes mellitus with peripheral angiopathy, with gangrene
Type 1 diabetes mellitus with peripheral arterial disease, with gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

...

☛E11.51 Type 2 diabetes mellitus with peripheral angiopathy, without gangrene
Type 2 diabetes mellitus with peripheral arterial disease, without gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

☛E11.52 Type 2 diabetes mellitus with peripheral angiopathy, with gangrene
Type 2 diabetes mellitus with peripheral arterial disease, with gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

...

☛E13.51 Other specified diabetes mellitus with peripheral angiopathy, without gangrene
Other specified diabetes mellitus with peripheral arterial disease, without gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

☛E13.52 Other specified diabetes mellitus with peripheral angiopathy, with gangrene
Other specified diabetes mellitus with peripheral arterial disease, with gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

...

☛E14.51 Unspecified diabetes mellitus with peripheral angiopathy, without gangrene
Unspecified diabetes mellitus with peripheral arterial disease, without gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

☛E14.52 Unspecified diabetes mellitus with peripheral angiopathy, with gangrene
Unspecified diabetes mellitus with peripheral arterial disease, with gangrene

Excludes: venous conditions — [see Alphabetic Index](#)—~~see Alphabetic Index~~

...

E34.3 Short stature, not elsewhere classified
Short stature:

- constitutional
- Laron-type
- NOS
- psychosocial

Excludes: progeria (E34.8)

Russell-Silver syndrome (Q87.15)

short stature:

- achondroplastic (Q77.4)
- hypochondroplastic (Q77.4)
- in congenital malformation syndromes (Q87.1-)
- in specific dysmorphic syndromes — code to syndrome — [see Alphabetic Index](#)(~~see Alphabetic~~

~~Index~~)

- nutritional (E45)
- pituitary (E23.0)
- renal (N25.0)

short-limbed stature with immunodeficiency (D82.2)

...

L89

Pressure injury

Excludes: decubitus (trophic) ulcer of cervix (uteri) (N86)

mucosal membrane pressure injury (ulcer) — [see Alphabetic Index](#)~~see Alphabetic Index~~. Ulcer/by site

...

O02 Other abnormal products of conception

...

O02.9 Abnormal product of conception, unspecified

The following fourth character subdivisions are for use with categories O03–O06:

Subdivisions .0–.4 are assigned for incomplete abortion ie where there are retained products of conception following abortion.

Subdivisions .5–.9 are assigned for complete abortion ie where there is no documentation of retained products of conception.:

.0 incomplete, complicated by genital tract and pelvic infection

With conditions in O08.0

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

...

.5 complete or unspecified, complicated by genital tract and pelvic infection

With conditions in O08.0

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

...

O07.0 Failed medical abortion, complicated by genital tract and pelvic infection

With conditions in O08.0

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

...

O07.5 Other and unspecified failed attempted abortion, complicated by genital tract and pelvic infection

With conditions in O08.0

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

...

O08.0 Genital tract and pelvic infection following abortion and ectopic and molar pregnancy

~~Endometritis~~

~~Oophoritis~~

~~Parametritis~~

~~Pelvic peritonitis~~

~~Salpingitis~~

~~Salpingo-oophoritis~~

~~following conditions
classifiable to O00–O07~~

Use additional code (Chapter 1) to identify sepsis, if applicable — see Alphabetic Index: Sepsis

Use additional code (B95–B97) to identify infectious agent

Use additional code (R65.1) to identify severe sepsis OR (R57.2) to identify septic shock, if applicable

Code also specific type of infection, if known

...

O08.2 Embolism following abortion and ectopic and molar pregnancy

Embolism:

~~air~~

- amniotic fluid
- blood clot (pulmonary)
- NOS
- pyaemie
- soap

following conditions
classifiable to O00–O07

Use additional code (Chapter 1) to identify sepsis, if applicable — see [Alphabetic Index: Sepsis](#)
[Code also site of embolism, if known](#)

...

O21 Excessive vomiting in pregnancy

▽ 1521

Excludes: vomiting in pregnancy due to a specified cause classified elsewhere — code condition — see [Alphabetic Index](#) (~~see Alphabetic Index~~)

...

O75.3 Other infection during labour

Use additional code (Chapter 1) to identify sepsis, if applicable — see [Alphabetic Index: Sepsis](#)
Use additional code (B95–B97) to identify infectious agent.
Code also specific type of infection, if known.

...

O85 Puerperal sepsis

▽ 0110

- Puerperal:
- endometritis
 - peritonitis

Use additional code (Chapter 1) to identify sepsis, if applicable — see [Alphabetic Index: Sepsis](#)
Use additional code (B95–B97) to identify infectious agent in localised infection.
Use additional code to identify localised infection:

- endometritis (N71.-).
- peritonitis (N73.3, N73.5).

Excludes: obstetric pyaemic and septic embolism (O88.3)
sepsis during labour (O75.3)

...

O88 Obstetric embolism

▽ 1904

Includes: embolism in pregnancy, childbirth or the puerperium

Code also site of embolism, if known — see [Alphabetic Index: Embolism/by site](#)

Excludes: embolism complicating abortion or ectopic or molar pregnancy (O00–O07, O08.2)
traumatic embolism classified to Chapter 19 — see [Alphabetic Index](#); ~~see Alphabetic Index:~~
Embolism

...

R23.4 Changes in skin texture

▽ 1810

- [Delicate skin](#)
- [Desquamation of skin](#)
- [Fragile skin](#)
- [Frail skin](#)
- [Friable skin](#)
- [Induration of skin](#)

Scaling skin

~~Delicate~~

~~Desquamation~~

~~Fragile~~

~~Frail~~

(of) skin

~~Friable~~

~~Induration~~

~~Scaling~~

Skin tear:

- incidental
- nontraumatic

Excludes: epidermal thickening NOS (L85.9)
traumatic skin tear — code to open wound — [see Alphabetic Index](#) (~~see Alphabetic Index~~)
...

R52.0 Acute pain, not elsewhere classified

Excludes: acute pain classifiable to an organ or body region — [see Alphabetic Index](#); ~~see Alphabetic Index/Pain~~

...

R57.2 Septic shock

▽ 0050, 0110

Code first the type of sepsis (Chapter 1, P36.-, P37.52) — see Alphabetic Index; Sepsis
Use additional code(s) to identify specific acute organ failure.

...

R65.1 Severe sepsis

Code first the type of sepsis (Chapter 1, P36.-, P37.52) — see Alphabetic Index; Sepsis
Use additional code(s) to identify type of acute organ failure.

...

(T36–T50)

▽ 1901, 1903

Includes: overdose of these substances
wrong substance given or taken in error

Excludes: adverse effects [“hypersensitivity”, “reaction”, etc] of correct substance properly administered; such cases are to be classified according to the nature of the adverse effect, such as:

- aspirin gastritis — [see Alphabetic Index](#); (~~see Alphabetic Index: Gastritis~~)
- blood disorders (D50–D76)
- dermatitis:
- contact (L23–L25)
- due to substances taken internally (L27.-)
- nephropathy (N14.0–N14.2)
- unspecified adverse effect of drug (T88.7)

drug reaction and poisoning affecting the fetus and newborn (P00–P96)

intoxication meaning inebriation (F10–F19)

nondependence-producing substance use disorder (F55)

pathological drug intoxication (F10–F19)

...

T80.2 Infections following infusion, transfusion and therapeutic injection

▽ 1904

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see Alphabetic Index; Sepsis

Excludes: hepatitis, post-transfusion (B16–B19)
the listed conditions when specified as:

- due to or associated with prosthetic devices, implants and grafts (T82.6–T82.7-, T83.5–T83.6, T84.5–T84.7, T85.7-)
- postprocedural (T81.4)

...

T81.4 Wound infection following a procedure, not elsewhere classified

▽ 1904

Abcesses:

- ~~intra-abdominal~~
- ~~stitch~~
- ~~subphrenic~~
- ~~wound~~

postprocedural

Postprocedural infection NOS

Postprocedural:

- abscess:
 - intra-abdominal
 - stitch
 - subphrenic
 - wound
- infection NOS

Wound sepsis

Excludes: infection due to:

- infusion, transfusion and therapeutic injection (T80.2)
- prosthetic devices, implants and grafts (T82.6–T82.7-, T83.5–T83.6, T84.5–T84.7, T85.7-)
- obstetric surgical wound infection (O86.0)

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

...

T82.6 Infection and inflammatory reaction due to cardiac valve prosthesis

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

...

T83.5 Infection and inflammatory reaction due to prosthetic device, implant and graft in urinary system

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

T83.6 Infection and inflammatory reaction due to prosthetic device, implant and graft in genital tract

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

...

T84.5 Infection and inflammatory reaction due to internal joint prosthesis

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

T84.6 Infection and inflammatory reaction due to internal fixation device [any site]

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

T84.7 Infection and inflammatory reaction due to other internal orthopaedic prosthetic devices, implants and grafts

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

...

T85.7 Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): Sepsis

....

T88 Other complications of surgical and medical care, not elsewhere classified

Excludes: accidental puncture or laceration during a procedure — see [Alphabetic Index](#): ~~see Alphabetic Index:~~ *Complication(s)/accidental puncture or laceration during procedure*

complications following:

- infusion, transfusion and therapeutic injection (T80.-)
- procedure NEC (T81.-)

specified complications classified elsewhere, such as:

- complications of devices, implants and grafts (T82–T85)
- dermatitis due to drugs and medicaments (L23.3, L24.4, L25.1, L27.0–L27.1)
- poisoning and toxic effects of drugs and chemicals (T36–T65)

T88.0 Infection following immunisation

Use additional code (Chapter 1, P36.-, P37.52) to identify sepsis, if applicable — see [Alphabetic Index](#): ~~Sepsis~~

...

Z33 Pregnant state, incidental

▽ 0050, 1521

Pregnant state NOS

Excludes: supervision of normal pregnancy (Z34.-)

with any condition classified to Chapter 15 — see [Alphabetic Index](#): ~~see Alphabetic Index~~

...

Z34 Supervision of normal pregnancy

▽ 1521, 1550

Excludes: false labour (O47.-)

incidental pregnant state (Z33)

preterm contractions without delivery (O60.0)

with any condition classified to Chapter 15 — see [Alphabetic Index](#): ~~see Alphabetic Index~~

...

Z39.0 Postpartum care and examination immediately after delivery

▽ 1548

Care and observation in the period of 42 days following delivery (including delivery of placenta)

Excludes: admission for postpartum complications after the puerperal period — see [Alphabetic Index](#): ~~see Alphabetic Index~~

...

Z49.0 Preparatory care for dialysis

Admission for:

- creation of arteriovenous fistula [graft]
- insertion of peritoneal dialysis catheter

Excludes: admission for creation of new fistula due to complication of existing fistula (even when new fistula is created at different site) — see [Alphabetic Index](#): *Complication(s)/dialysis/catheter*

...

Z51.81 Apheresis

▽ 0030

Healthy donor admitted to donate cells for infusion into another person

Allogeneic apheresis

Excludes: autologous apheresis – code to condition — see [Alphabetic Index](#): ~~see Alphabetic Index~~ prophylactic therapy (plasmapheresis) for incompatible organ transplant (Z29.1)

...

U78–U88)

▽ 0003, 0050

Note: Codes from this section are for use in Australia for chronic conditions as supplementary codes only.

The specific terms listed in the Alphabetic Index must be followed to inform code assignment.

Except where otherwise indicated, only assign codes from this section for unspecified/NEC/NOS conditions (eg hypertension NOS) — [see Alphabetic Index: ~~see Alphabetic Index: Supplementary/codes for chronic conditions.~~](#)

ACHI Tabular List

39 Insertion of spinal catheter, infusion device or pump

39125-00 Insertion or replacement of spinal catheter

Insertion or replacement of catheter:

- caudal
- epidural
- intrathecal
- subarachnoid

Excludes: that with:

- administration of therapeutic agent — [see Alphabetic Index](#) (~~see Alphabetic Index: Administration/specified site/spinal~~)
- insertion of implantable spinal infusion device or pump 39127-00 [39]

...

987 Other incision procedures on abdomen, peritoneum or omentum

30394-00 Drainage of intra-abdominal abscess, haematoma or cyst

~~**Includes:** appendiceal~~

~~iliac fossa~~

~~intraperitoneal~~

~~pelvic~~

~~pouch of Douglas~~

~~subhepatic~~

~~subphrenic~~

~~peritonitis~~

abscess, haematoma or cyst

Includes: drainage of abscess, haematoma or cyst (of):

• appendiceal

• iliac fossa

• intraperitoneal

• pelvic

• pouch of Douglas

• subhepatic

• subphrenic

peritonitis

Code also when performed:

- appendicectomy (30571-00 [926])

Excludes: abscess, haematoma or cyst of specified intra-abdominal or pelvic sites classified elsewhere — [see Alphabetic Index](#) (~~see Alphabetic Index: Drainage/abscess/by site; Drainage/haematoma/by site; Drainage/cyst/by site~~)

...

989 Other excision procedures on abdomen, peritoneum or omentum

96211-00 Peritonectomy

Cytoreduction surgery (CRS)

Note: Multimodal procedure performed for the treatment of peritoneal neoplasms, with the aim of removing all peritoneal tumours. The combination of surgical procedures required for cytoreduction varies with each patient.

Code also when performed:

- excision of abdominal, peritoneal or pelvic lesion — see [Alphabetic Index](#) (see [Alphabetic Index](#))
- intraperitoneal chemotherapy:
 - early postoperative [EPIC] (96201-00 [1920])
 - heated (intraoperative) [HIPEC] (92178-00 [1880] and 96201-00 [1920])
 - postoperative [IPEC] (96201-00 [1920])
- removal abdominal, peritoneal or pelvic organ — see [Alphabetic Index](#) (see [Alphabetic Index](#))
- repair procedures — see [Alphabetic Index](#) (see [Alphabetic Index](#))
- resection procedures — see [Alphabetic Index](#) (see [Alphabetic Index](#))

...

990 Repair of inguinal hernia

Correction | hydrocele in child under 12 years
of age (infantile)

Repair | [Correction of hydrocele in child under 12 years of age \(infantile\)](#)
[Repair of hydrocele in child under 12 years of age \(infantile\)](#)

Includes: graft
prosthesis

Excludes: excision of hydrocele — see [Alphabetic Index](#) (see [Alphabetic Index](#): *Excision/hydrocele*)
repair (correction) of hydrocele with:

- [eversion of sac](#) — see [Alphabetic Index](#): *Excision/hydrocele*
- [involvement of tunica vaginalis](#) — see [Alphabetic Index](#): *Excision/hydrocele*
- [Jaboulay procedure](#) — see [Alphabetic Index](#): *Excision/hydrocele*

~~• eversion of sac~~
~~• involvement of tunica vaginalis~~ | (see [Alphabetic Index](#): *Excision/hydrocele*)

~~• Jaboulay procedure~~

that for incarcerated (obstructed)(strangulated) hernia (30615-00 [997])

...

1292 Vulvectomy

35548-00 Radical vulvectomy

Code also when performed:

- lymph node dissection — see [Alphabetic Index](#) (see [Alphabetic Index](#): *Excision/lymph node*)

...

1360 Application, insertion or removal procedures of head

52096-00 Insertion of pin or wire into maxilla, mandible or zygoma

Excludes: that with fracture — see [Alphabetic Index](#) (see [Alphabetic Index](#): *Reduction/fracture/by site/with fixation*)

...

1550 Application of external fixation devices to other musculoskeletal sites

Excludes: application of neck support (96092-00 [1870])

50130-00 Application of external fixation device, not elsewhere classified External fixation device applied to bone or joint NOS

Note: This code classifies external fixation devices, not classified elsewhere, that are invasive (ie applied to bone). External fixation devices that are noninvasive are classified elsewhere. Refer to the Alphabetic Index for guidance.

Excludes: intermaxillary wiring of mandible (52420-00 [1361])
that for fractured pelvis (47483-00 [1479])
that with reduction of fracture — see Alphabetic Index (see Alphabetic Index: Reduction/fracture/by site)

...

1559 Incision procedures on other musculoskeletal sites

30224-00 Percutaneous drainage of abscess of soft tissue

Includes: soft tissue abscess of buttock

Excludes: that of:
• skin and subcutaneous tissue (30223-01 [1606])
• specified sites classified elsewhere — see Alphabetic Index (see Alphabetic Index: Drainage/abscess/by site)

...

1651 Local skin flap, single stage

A flap of skin with its own blood supply taken from a donor site adjacent to the defect and transferred to the recipient site, in one stage

Includes: fasciocutaneous flap
repair of secondary cutaneous defect by suture
that for burns

Code also when performed:

- repair of secondary defect:
 - by graft — see Alphabetic Index (see Alphabetic Index: Graft/by site or type)
 - noncutaneous (eg muscle), by suture — see Alphabetic Index (see Alphabetic Index: Suture/by site)

...

1653 Direct distant skin flap

A flap of skin, with its own blood supply, taken from a site distant to the defect and attached directly to the recipient site

Includes: fasciocutaneous flap
repair of secondary cutaneous defect by suture
that for burns

Code also when performed:

- repair of secondary defect:
 - by graft — see Alphabetic Index (see Alphabetic Index: Graft/by site or type)
 - noncutaneous (eg muscle), by suture — see Alphabetic Index (see Alphabetic Index: Suture/by site)

...

1654 Indirect distant skin flap

A flap of skin, with its own blood supply, moved from a donor site distant to the defect, to a recipient site, via an intermediate site

Includes: fasciocutaneous flap
repair of secondary cutaneous defect by suture
that for burns
tubed pedicle

Code also when performed:

- repair of secondary defect:
 - by graft — see Alphabetic Index (see Alphabetic Index: Graft/by site or type)
 - noncutaneous (eg muscle), by suture — see Alphabetic Index (see Alphabetic Index: Suture/by site)

...

1672**Muscle flap**

A flap of muscle taken from a donor site adjacent to the defect and transferred to recipient site with its own blood supply

Code also when performed:

- skin graft of recipient site — see [Alphabetic Index](#) (~~see Alphabetic Index: Graft/skin/by site or type~~)

Excludes: muscle flap:

- free (see block [1674])
 - island (see block [1673])
- myocutaneous flap:
- free (see block [1674])
 - island (see block [1673])
 - NOS (see block [1671])

...

1674**Free flap**

Resected flap of tissue transferred to another site, where vessels within the flap are anastomosed to vessels at the recipient site

Free tissue transfer

Includes: bone

- composite tissue:
- fasciocutaneous
 - fasciomyocutaneous
 - myocutaneous
- intestine
microsurgical anastomosis of blood vessels
muscle
raising and setting of free transfer of tissue
repair of secondary cutaneous defect by suture

Code also when performed:

- repair of secondary defect:
 - by graft — see [Alphabetic Index](#) (~~see Alphabetic Index: Graft/by site or type~~)
 - noncutaneous (eg muscle), by suture — see [Alphabetic Index](#) (~~see Alphabetic Index: Suture/by site~~)

Excludes: revision (see block [1686])

...

1695**Microsurgical anastomosis of blood vessel**

Code also when performed:

- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])

Code first:

- reconstruction procedure(s) — see [Alphabetic Index](#) (~~see Alphabetic Index: Reconstruction~~)

Excludes: that with free flap (45562 [1674])

...

1698

▽ 1220

Implantation of titanium fixture (osseointegration procedure)

Implantation of titanium screw for osseointegration
Osseointegration for attachment of prosthetic replacement, first stage
Placement of titanium fixture for osseointegration

Code also when performed:

- bone graft — see [Alphabetic Index](#) (~~see Alphabetic Index: Graft/bone~~)
- fixation of transcutaneous abutment (45797 [1697])
- flap repair — see [Alphabetic Index](#) (~~see Alphabetic Index: Flap/by site~~)
- reconstruction — see [Alphabetic Index](#) (~~see Alphabetic Index: Reconstruction/by site~~)

Excludes: intraoral osseointegration procedure (45845-00 [400])

...

1756 Reconstruction procedures on breast

45530-02 Reconstruction of breast using flap

Includes: ~~deep inferior epigastric:~~
~~• artery [DIEA]~~
~~• perforator [DIEP]~~
~~free trans rectus abdominus~~
~~myocutaneous [TRAM]~~
~~inferior gluteal artery~~
~~myocutaneous~~ flap
~~omental~~
~~pedicle~~
~~subcutaneous tissue and fat~~
~~superior gluteal artery~~
[deep inferior epigastric:](#)
[• artery \[DIEA\] flap](#)
[• perforator \[DIEP\] flap](#)
[free trans rectal abdominus myocutaneous \[TRAM\] flap](#)
[gluteal artery flap \(inferior\) \(superior\)](#)
[myocutaneous flap](#)
[omental flap](#)
[pedicle flap](#)
 repair of secondary cutaneous defect by suture
[subcutaneous tissue and fat flap](#)

Code also when performed:

- insertion of prosthesis (45527 [1753])
- microsurgical anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])
- reconstruction of nipple or areola (45545 [1757])
- repair of secondary defect:
 - abdominal wall (muscle) (30403-05 [1000])
 - by graft — see [Alphabetic Index](#)(see [Alphabetic Index](#): *Graft/by site or type*)
 - muscle, by flap (45009-01 [1672])
 - noncutaneous, by suture — see [Alphabetic Index](#)(see [Alphabetic Index](#): *Suture/by site*)

...

CHAPTER 19

DIAGNOSTIC INTERVENTIONS

ASSESSMENT, CONSULTATION, INTERVIEW, EXAMINATION, EVALUATION

Assessment involves the gathering, evaluation and recording of information relative to the client's problem, functional status or situation through the use of cognitive skills and simple measurements (eg observation, history taking, anthropometry)

Includes: consultation with other service provider
 development of treatment plans or programmes
 ordering of diagnostic tests
 prescription of medications or assistive/adaptive equipment
 referral to another service provider
 use of aids or devices

Note: Performed for the purpose of diagnosis, screening, monitoring, follow up, review, case management or discharge planning.

Excludes: assessment or consultation with electroconvulsive therapy (see block [1907])
 dental examination (see blocks [450] to [452])
 specific diagnostic tests, measures, investigations or imaging classified elsewhere — see [Alphabetic Index](#)(see [Alphabetic Index](#))

...

1868 Psychosocial counselling

96082-00 Crisis situation/event counselling

Counselling aimed at reversing the state of decompensation or decreasing the level of arousal until the client can return to their normal level of coping after a crisis or critical incident. As soon as this is achieved, responsibility for the problem is handed back to the client and ongoing counselling, problem-solving, or other forms of psychotherapy or psychosocial therapy may then be undertaken.

Crisis intervention counselling
Critical incident stress debriefing [CISD]

Excludes: ongoing counselling following crisis situation counselling — see [Alphabetic Index](#) (see [Alphabetic Index: Counselling/by specified type](#))

...

1870 Interventions involving assistive or adaptive device, aid or equipment

Excludes: application of:

- immobilisation devices for fracture or dislocation — see [Alphabetic Index](#) (see [Alphabetic Index: Immobilisation/fracture or Immobilisation/dislocation](#))
- traction devices classified elsewhere — see [Alphabetic Index](#) (see [Alphabetic Index: Traction](#))
- implantation of prosthetic device of limb — see [Alphabetic Index](#) (see [Alphabetic Index: Implant/prosthesis](#))
- insertion of prosthetic device — see [Alphabetic Index](#) (see [Alphabetic Index: Insertion/prosthesis](#))
- interventions involving assistive or adaptive device, aid or equipment, classified elsewhere:
 - assessment of need for device (96024-00 [1822])
 - assistance with application of device (96165-00 [1914])
 - counselling or education regarding device (96071-00 [1867])
 - measurement of device (96024-00 [1822])
 - prescription for device (96024-00 [1822])
 - review only of device (96025-00 [1822])
 - skills training in use of device (96142-00 [1878])

...

1878 Skills training for personal care and other activities of daily/independent living

96141-00 Skills training in activities related to health maintenance

Skills training in:

- diagnostic testing/monitoring (for conditions such as amputation stumps, asthma, diabetes etc)
- foot/leg care (bunion) (cutting and filing of nonpathological toenails) (ulcer)
- management of medication regimes
- oral hygiene
- postural drainage
- self examination (breasts) (genitalia)
- self injection
- stoma [colostomy] [tracheostomy] care

Excludes: exercise therapy — see [Alphabetic Index](#) (see [Alphabetic Index: Training/skills/movement](#))
management of medication delivery systems (96142-00 [1878])
retraining:

- bladder (96158-00 [1904])
- cardiac (96139-00 [1877])

skills training in use of assistive or adaptive device, aid or equipment (96142-00 [1878])

...

96146-00 Occupational/vocational skills training

Skills training in:

- job acquisition
- job or work performance
- retirement planning
- vocational exploration
- volunteer participation

Excludes: work hardening/conditioning — see [Alphabetic Index](#)(see [Alphabetic Index: Training/skills/movement](#))

...

1880 Therapies using agents, not elsewhere classified

22065-00 Cold therapy

▽ 1615

Cold therapy involves the application of cold in the therapeutic treatment of disease or injury. Hypothermia may be induced by ice packs or compresses, cooling blankets, immersion in cold water (bath or tub) or by extracorporeal cooling of the blood. Hypothermia may also be induced as a protective measure in certain cardiovascular and neurological surgical procedures or as an adjunct to anaesthesia in surgical procedures involving a limb

Hypothermic therapy (therapeutic hypothermia)
Total body hypothermia

Excludes: cryotherapeutic destruction of tissue — see [Alphabetic Index](#)(see [Alphabetic Index: Cryotherapy/by site](#))
deep hypothermia (22075-00 [642])
gastric hypothermia (13500-00 [1899])
hypothermic therapy in conjunction with cardiac or circulatory arrest (22075-00 [642])
that performed in conjunction with surgery – omit code

92178-00 Heat therapy

Heat therapy involves the application of heat in the therapeutic treatment of disease or injury. Hyperthermia may be induced by hot packs or compresses, electric blankets, immersion in hot water (bath or tub), using humidified air or by extracorporeal warming of the blood. Hyperthermia may also be used as an adjunct to radiation therapy or chemotherapy and induced by microwave, ultrasound, low energy radiofrequency conduction or probes

Hyperthermic therapy

Includes: therapeutic treatment with the use of:

- heating pad
- infrared radiation
- microwaves
- shortwaves
- wax

Code also when performed:

- [pharmacotherapy](#) — see [Alphabetic Index](#)(see [Alphabetic Index: Pharmacotherapy](#))
- radiation therapy — see [Alphabetic Index](#)(see [Alphabetic Index: Radiotherapy](#))

Excludes: thermocauterisation — see [Alphabetic Index](#)(see [Alphabetic Index: Thermocauterisation](#))
thermocoagulation — see [Alphabetic Index](#)(see [Alphabetic Index: Neurotomy/by site/radiofrequency](#))
thermokeratoplasty (90064-01 [173])
thermosclerectomy (42746-05 [191])
thermotherapy to prostate by microwaves (37203-04 [1166])

...

1886 Perfusion

96231-00 Machine perfusion for organ transplantation

▽ 0030

Includes: machine perfusion:

- hypothermic
 - normothermic
 - subnormothermic
- normothermic regional perfusion (NRP)

Code first:

- procurement procedure(s) performed – see [Alphabetic Index](#)

...

1900 Nonincisional insertion, replacement and removal of therapeutic device, genital tract

92107-00 Insertion of other vaginal pessary

Excludes: that for induction of:

- abortion (~~see Alphabetic Index: Induction/abortion~~) 90462-01 [1330]
- labour (~~— see Alphabetic Index: Induction/labour/medical~~)
[with:](#)
 - [any other gynaecological intervention — omit code](#)
 - [manual reduction prolapsed uterus \(replacement procidentia\) \(92104-01 \[1273\]\)](#)

...

1905 Therapeutic interventions on musculoskeletal system

92138-00 Removal of foreign body from head or neck without incision
Removal of sutures from head and neck

Excludes: removal of foreign body from eye [— see Alphabetic Index](#) (~~see Alphabetic Index: Removal/foreign body/eye~~)

...

1908 Other therapeutic interventions

92200-00 Removal of sutures, not elsewhere classified

Excludes: removal of sutures from sites elsewhere specified [— see Alphabetic Index](#) (~~see Alphabetic Index: Removal/suture~~)

92201-00 Removal of foreign body without incision, not elsewhere classified

Excludes: removal of:

- foreign body from sites elsewhere specified [— see Alphabetic Index](#) (~~see Alphabetic Index: Removal/foreign body~~)
- suture from sites elsewhere specified [— see Alphabetic Index](#) (~~see Alphabetic Index: Removal/suture~~)

...

1914 Assistance interventions

Interventions where the purpose is to provide assistance only to the client

Excludes: therapeutic treatment such as counselling, education, skills training or exercise therapy [— see Alphabetic Index](#)

...

1920 Administration of pharmacotherapy

▽ 0042, 0044. 0102, 0534, 0943, 1316, 1615, 1923

Administration of pharmacological agent for systemic effect

Excludes: administration of:

- blood and blood products (see block [1893])
- pharmacological agent for:
 - anaesthesia (see blocks [1333], [1909] and [1910])
 - immunisation (see blocks [1881] to [1884])
 - local effect [— see Alphabetic Index](#) (~~see Alphabetic Index: Administration~~)
 - management of ectopic pregnancy (see block [1256])
 - pain management (see blocks [31] to [37] and [60] to [66] and [1552])
 - perfusion (see block [1886])
 - vaccination (see blocks [1881] to [1883])
- surgical administration of chemotherapeutic agent (see block [741])

Note: The following list of extensions is provided for use with the codes in block [1920] *Administration of pharmacotherapy*.

...

96209-XX Loading of drug delivery device

A drug delivery device is an (external) infusion pump that is attached to a vascular access device or venous, spinal or other catheter to infuse substances over long periods of time

Filling of infusion device or pump (external)

Includes: maintenance such as:

- connection
- disconnection
- flushing
- injection of isotope to test pump

Code also when performed:

- administration of agent — see [Alphabetic Index](#) (~~see Alphabetic Index: Pharmacotherapy/by route~~)

Excludes: maintenance (alone) (13942-02 [1922])

...

1923 Technology-assisted interventions

Code first:

- procedure(s) performed

~~Excludes: computer=assisted~~

~~image:~~

~~• guidance~~

~~• intensifier~~

~~stereotactic localisation~~

(see Alphabetic Index)

Excludes: computer-assisted image:

• guidance — see Alphabetic Index

• intensifier — see Alphabetic Index

stereotactic localisation — see Alphabetic Index

...

1949 Other ultrasound

30688-00 Endoscopic ultrasound

Endobronchial ultrasound (EBUS)

Ultrasound in conjunction with endoscopy

Code also:

- endoscopic procedure(s) — see [Alphabetic Index](#) (~~see Alphabetic Index~~)

ACS

0003 SUPPLEMENTARY CODES FOR CHRONIC CONDITIONS

CLASSIFICATION

The supplementary codes for chronic conditions are **only to be assigned** where the condition is part of the **current health status** of the patient (see Example 1 and 2). The U codes represent chronic conditions that may be assumed to be current unless there is documentation that indicates otherwise.

The supplementary codes are **not to be assigned**:

- in addition to another chapter code for the same condition (see Example 4)
- for a past history of a condition (see Example 5)
- for an acute condition.

Where it is unclear whether a code from U78.- to U88.- should be assigned, do not assign the code.

Note: The specific terms listed in the Alphabetic Index must be followed to inform code assignment. Except where otherwise indicated, only assign codes from this section for unspecified/NEC/NOS conditions (eg hypertension NOS) — see [Alphabetic Index: —see ~~Alphabetic Index~~/Supplementary/codes for chronic conditions.](#)

0030 ORGAN, TISSUE AND CELL PROCUREMENT AND TRANSPLANTATION

| ALLOGENEIC ORGAN/TISSUE/CELL PROCUREMENT AND TRANSPLANTATION TABLE | | | | | |
|--|--|---------------------------------------|---|---|---|
| ORGAN/
TISSUE | ALLOGENEIC
HARVEST
DIAGNOSIS
CODE | PROCUREMENT EPISODE
PROCEDURE CODE | | TRANSPLANTATION EPISODE
PROCEDURE CODE | |
| Blood
(components)
via apheresis | Z51.81 | Block [1892] | <i>Apheresis</i> | Block [802] | <i>Bone marrow/stem
cell transplantation</i> |
| | | | | Block [1893] | <i>Administration of
blood and blood
products</i> |
| Blood, whole | Z52.00 | 13709-00 [1891] | <i>Collection of blood for
transfusion</i> | 13706-01 [1893] | <i>Administration of
whole blood</i> |
| Blood, other
products | Z52.08 | Block [1891] | <i>Therapeutic collection
and processing of
blood/bone marrow</i> | Block [1893] | <i>Administration of
blood and blood
products</i> |

| | | | | | |
|-------------|-------|----------------|---|---|--|
| Bone | Z52.2 | Block [1563] | <i>Other excision procedures on bone of other musculoskeletal sites</i> | See Alphabetic Index ; See Alphabetic Index of Interventions
— Graft/bone/by site | |
| Bone marrow | Z52.3 | 13700-00 [801] | <i>Procurement of bone marrow for transplantation</i> | Block [802] | <i>Bone marrow/stem cell transplantation</i> |



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Stereo electroencephalography (SEEG)

Introduction/Rationale:

This addenda proposal was created following a written request received from IHPA in April 2018. IHPA requested that this topic be assessed as part of the ICD-10-AM/ACHI Eleventh Edition development program, and be reviewed by the ICD Technical Group.

Stereo electroencephalography (SEEG) is an invasive monitoring intervention using electrodes implanted into brain tissue via multiple, small burr holes. After the electrodes are implanted, they are connected to an electroencephalograph for continuous monitoring, in order to localise areas of the brain where epileptic seizures originate (epileptogenic zones), prior to surgical resection (Iida & Otsubo 2017; Shepard et al. 2015).

In ACHI, stereotactic localisation for SEEG is classified to 40803-00 [1] *Intracranial stereotactic localisation* and implantation of the electrodes for SEEG is classified to 40709-00 [6] *Insertion of intracranial electrode via burr holes*. Electroencephalography is classified to block [1825] *Electroencephalography [EEG]*

ACCD proposes the addition of SEEG to ACHI Eleventh Edition Tabular List and Alphabetic Index, classifiable to the above codes and blocks.

Clinical advice was received that highlighted the following issues:

- Deep brain stimulation (DBS) (currently classified to 'insertion of intracranial electrodes'), should be classified separately, to differentiate DBS from 'monitoring' procedures (such as SEEG). The term 'neuromodulation' was suggested as a general term for 'neurostimulation'
- DBS is performed via burr holes (ie not as an open/via craniotomy procedure)
- Suggested the inclusion of 'subdural grids and strips' (classifiable to 40712-00 [6] *Insertion of intracranial electrode via craniotomy*)

ACCD agrees that DBS is an intervention separate to the electrode insertion. It is noted in the stereo-EEG monitoring for epilepsy protocol (Archer 2017) that 'cortical stimulation' may also be performed (under sedation) during an episode of care for SEEG. In the absence of a specific code for this intervention, it is impossible to differentiate cortical stimulation from the initial insertion of intracranial electrodes. Therefore, creation of a code to classify 'brain neuromodulation using intracranial electrodes' is proposed.

ACCD PROPOSAL

Tabular List

1 Examination of skull, meninges or brain

...

40803-00 Intracranial stereotactic localisation

▼ 0629

Stereotactic localisation for:

- brachytherapy
- intracranial surgery
- radiosurgery

Includes: angiography
application of head frame
computer assisted coordinate determination
computerised tomography [CT]
localisation
magnetic resonance imaging [MRI]
targeting
ventriculography

Code also when performed:

- brachytherapy (90764 [1791])
- burr holes [NEC](#) (39012-00 [7])
- [intracranial electrode:](#)
 - [adjustment \(40709-02 \[6\]\)](#)
 - [insertion \(40709-00 \[6\]\)](#)
 - [replacement \(40709-03 \[6\]\)](#)
- radiosurgery (15600-00, 15600-01 [1789], 90764 [1791])

Code also:

- surgical procedure(s) performed

Excludes: functional stereotactic procedure (40801-00 [27])
stereotactic:

- cingulotomy (40801-00 [27])
- pallidotomy (40801-00 [27])
- thalamotomy (40801-00 [27])

...

6**Other application, insertion or removal procedures on skull, meninges or brain**

47705-00 Insertion of skull caliper
Insertion of skull tongs

Excludes: that for spinal fracture or dislocation (47684-00, 47687-00 [1381], 47690-00, 47693-00 [1387])

40709-00 Insertion of intracranial electrode via burr holes
[▽ 0629](#)

~~Deep brain stimulation~~
Implantation of intracranial electrode(s)

Includes: insertion of extension wire connecting electrodes to neurostimulator
that for:
[• deep brain stimulation \[DBS\]](#)
[• stereo electroencephalography \[SEEG\]](#)

Note: Performed for:

- epilepsy
- multiple sclerosis
- pain control
- Parkinson's disease

Code also when performed:
[• brain neuromodulation \(deep brain stimulation\) \[DBS\] \(40709-04 \[1880\]\)](#)
[• intracranial stereotactic localisation \(40803-00 \[1\]\)](#)
[• stereo electroencephalography \[SEEG\] \(92011-01 \[1825\]\)](#)
[• subcutaneous implantation of neurostimulator \(39134-01 \[1604\]\)](#)

40712-00 Insertion of intracranial electrode via craniotomy
~~Deep brain stimulation~~

Includes: insertion of extension wire connecting electrodes to neurostimulator
[subdural grids and strips](#)

Note: Performed for:

- epilepsy
- multiple sclerosis
- pain control
- Parkinson's disease

40709-02 Adjustment of intracranial electrodes via burr holes
Revision of intracranial electrodes via burr holes

Includes: revision of extension wire connecting electrodes to neurostimulator
that for:
[• deep brain stimulation \[DBS\]](#)
[• stereo electroencephalography \[SEEG\]](#)

Code also when performed:
[• brain neuromodulation \(deep brain stimulation\) \[DBS\] \(40709-04 \[1880\]\)](#)
[• intracranial stereotactic localisation \(40803-00 \[1\]\)](#)

40709-03 Replacement of intracranial electrodes via burr holes

Includes: replacement of extension wire connecting electrodes to neurostimulator
that for:
[• deep brain stimulation \[DBS\]](#)
[• stereo electroencephalography \[SEEG\]](#)

Code also when performed:
[• brain neuromodulation \(deep brain stimulation\) \[DBS\] \(40709-04 \[1880\]\)](#)
[• intracranial stereotactic localisation \(40803-00 \[1\]\)](#)

40712-02 Adjustment of intracranial electrodes via craniotomy
Revision of intracranial electrodes via craniotomy

Includes: revision of extension wire connecting electrodes to neurostimulator

40712-03 Replacement of intracranial electrodes via craniotomy
Includes: replacement of extension wire connecting electrodes to neurostimulator

40709-01 Removal of intracranial electrode via burr holes
Includes: removal of extension wire connecting electrodes to neurostimulator
that for:
• [deep brain stimulation \[DBS\]](#)
• [stereo electroencephalography \[SEEG\]](#)

Excludes: that with replacement (40709-03 [6])

40712-01 Removal of intracranial electrode via craniotomy
Includes: removal of extension wire connecting electrodes to neurostimulator
Excludes: that with replacement (40712-03 [6])

...

1825 Electroencephalography [EEG]

▽ 0042

...

92011-00 Video and radio-telemetered electroencephalographic [EEG] monitoring
Note: ~~Only to be assigned~~ [this code only](#) for monitoring ≥ 24 hours

[92011-01 Stereo electroencephalography \[SEEG\]](#)

▽ 0629

Code also:

- [insertion of intracranial electrodes \(40709-00 \[6\]\)](#)
- [stereotactic localisation \(40803-00 \[1\]\)](#)

...

1880 Therapies using agents, not elsewhere classified

...

96154-00 Therapeutic ultrasound
Excludes: diagnostic ultrasound (see blocks [1940] to [1950])

[40709-04 Brain neuromodulation](#) [Deep brain stimulation \[DBS\]](#) [Neurostimulation of brain:](#)

- [cortical](#)
- [thalamic](#)

Note: Performed for:

- [epilepsy](#)
- [multiple sclerosis](#)
- [pain control](#)
- [Parkinson's disease](#)

Code also when performed:

- *insertion of:*
 - [intracranial electrodes \(40709-00 \[6\]\)](#)
 - [subcutaneously implanted neurostimulator \(39134-01 \[1604\]\)](#)

96155-00 Stimulation therapy, not elsewhere classified
Stimulation therapy involves the therapeutic application of a device (eg electrical, laser or ultrasound) that excites or induces functional activity in a body part with the aim of promoting healing and reducing pain

Therapeutic laser treatment NOS

Includes: electrical neuromuscular nerve stimulation [EMS]
functional electrical stimulation [FES]
interferential therapy [IFT]
transcutaneous electrical nerve stimulation [TENS]

Alphabetic Index

Adjustment

- ...
- electrode(s) (for)
- ...
- - intracranial (via [burr holes](#)) 40709-02 [6]
- ~~--- burr holes 40709-02 [6]~~
- ~~--- craniotomy 40712-02 [6]~~
- ~~--- via craniotomy 40712-02 [6]~~
- - peripheral nerve NEC 39131-01 [67]
- ...

Burr holes

- as operative approach — *omit code*
- for
- - brachytherapy 39012-00 [7]
- - inspection purposes 39012-00 [7]
- - intracranial electrode(s)
- - - adjustment 40709-02 [6]
- - - insertion 40709-00 [6]
- - - replacement 40709-03 [6]
- with [brain biopsy](#) 39703-00 [12]
- ~~--- biopsy of brain 39703-00 [12]~~
- ~~--- placement of intracranial electrode(s) 40709-00 [6]~~
- ~~--- removal of intracranial electrode(s) 40709-01 [6]~~

Bursectomy 30107-01 [1566]

...

Deep **B**rain **S**timulation [[DBS](#)] — *see Insertion/electrode(s) lead(s)/intracranial* [40709-04 \[1880\]](#)

...

Drilling

- ...
- burr holes (skull bone) — *see also* [Burr holes](#)
- - as operative approach — *omit code*
- - for inspection purposes 39012-00 [7]
- ~~--- with~~
- ~~--- biopsy of brain 39703-00 [12]~~
- ~~--- placement of intracranial electrode(s) 40709-00 [6]~~
- ~~--- removal of intracranial electrode(s) 40709-01 [6]~~
- defect
- ...

Electroencephalography (EEG) 11000-00 [1825]

- ≥ 3 hours duration 11003-00 [1825]
- - cortex 11009-00 [1825]
- - temporosphenoidal 11006-00 [1825]
- cortex 11009-00 [1825]
- monitoring (radiographic) (video) 92011-00 [1825]
- [stereo \(SEEG\)](#) 92011-01 [1825]
- temporosphenoidal 11006-00 [1825]
- ...

Insertion

...

- electrode(s) lead(s)

...

- - intracranial ([via burr holes](#)) — ~~see also Insertion/neurostimulator 40709-00 [6]~~

~~--- via~~

~~--- burr holes 40709-00 [6]~~

~~--- craniotomy 40712-00 [6]~~

- - - [via craniotomy 40712-00 \[6\]](#)

- - peripheral nerve NEC 39138-00 [67]

...

- stimulator

- - anal, electrical 32206-00 [940]

- - bladder, electronic 90359-00 [1091]

- - bone growth (by incision) 47920-00 [1554]

- - - noninvasive placement (nonoperative) 92139-00 [1870]

- - intracranial ([brain](#)) (thalamic) — ~~see Insertion/neurostimulator 39134-01 [1604]~~

- - skeletal muscle 90561-00 [1554]

- - spinal — *see Insertion/neurostimulator*

- subcutaneously implanted ~~monitoring device 38285-00 [1604]~~

- - [monitoring device 38285-00 \[1604\]](#)

- - [neurostimulator \(epidural\) \(intracranial\) \(peripheral\) \(sacral\) 39134-01 \[1604\]](#)

- subdermal hormone implant 14203-00 [1906]

...

Neurolysis (open) (peripheral) 39330-00 [77]

- with transposition 39321-00 [83]

- carpal tunnel 39331-01 [76]

- - endoscopic 39331-00 [76]

- interfascicular trunk 39312-00 [77]

- spinal 39330-00 [77]

- - roots 40330-00 [49]

- tarsal tunnel 39330-01 [76]

[Neuromodulation](#) — *see Stimulation*

Neuroplasty — *see also Repair/nerve*

- epidural 39140-00 [32]

[Neurostimulation](#) — *see Stimulation*

Neurotomy

...

Removal — *see also Excision*

...

- electrode(s) lead(s) ([for](#))

...

- - intracranial ([via burr holes](#)) 40709-01 [6]

- - - [with replacement 40709-03 \[6\]](#)

- - - - [via craniotomy 40712-03 \[6\]](#)

- - - [via craniotomy 40712-01 \[6\]](#)

- - - - [with replacement 40712-03 \[6\]](#)

~~--- via~~

~~--- burr holes 40709-01 [6]~~

~~--- with replacement 40709-03 [6]~~

~~--- craniotomy 40712-01 [6]~~

~~--- with replacement 40712-03 [6]~~

- - peripheral nerve NEC 39136-02 [67]

...

Repair

...

- electrode(s) (for)

...

- - intracranial ([via burr holes](#)) 40709-02 [6]

- - - [via craniotomy 40712-02 \[6\]](#)

- - spinal neurostimulator (epidural) (open) (via laminectomy) 39139-00 [43]

- - - percutaneous (closed) 39130-00 [43]

- encephalocele (with excision) 40109-00 [22]

...

Replacement

- ...
- electrode(s) lead(s) [\(for\)](#)
- ...
- - intracranial [\(via burr holes\) 40709-03 \[6\]](#)
- - - via [craniotomy 40712-03 \[6\]](#)
- ~~--- burr holes 40709-03 [6]~~
- ~~--- craniotomy 40712-03 [6]~~
- - peripheral nerve NEC 39137-01 [67]
- - sacral nerve 36664-00 [67]
- - vagus nerve (for obesity) 39137-01 [67]
- ...

Revision (partial) (total)

- ...
- electrode(s) (for)
- ...
- - intracranial [\(via burr holes\) 40709-02 \[6\]](#)
- ~~--- burr holes 40709-02 [6]~~
- ~~--- craniotomy 40712-02 [6]~~
- - - via [craniotomy 40712-02 \[6\]](#)
- - peripheral nerve NEC 39131-01 [67]
- - sacral nerve 36665-00 [67]
- - spinal — see *Revision/electrode(s)/epidural*
- - vagus nerve (for obesity) 39131-01 [67]
- ...

Sedation (gaseous) (inhalational) (intravenous) 92515 [1910]

[SEEG \(stereo electroencephalography\) 92011-01 \[1825\]](#)

Segmentectomy

...

Stenting — see *Insertion/stent*

[Stereotactic electroencephalography \(SEEG\) 92011-01 \[1825\]](#)

Stereotactic (procedure)

- breast ~~(localisation)~~ 90724-00 [1740]
- cingulotomy ~~(intracranial)~~ 40801-00 [27]
- cordotomy ~~(spinal)~~ ~~(percutaneous)~~ 39121-00 [58]
- [electroencephalography \(SEEG\) 92011-01 \[1825\]](#)
- functional
- ...
- localisation [\(for\)](#)
- - breast 90724-00 [1740]
- - intracranial 40803-00 [1]
- - spinal 90011-05 [29]
- pallidotomy ~~(intracranial)~~ 40801-00 [27]
- spinal ~~(localisation) 90011-05 [29]~~
- - functional 39121-00 [58]
- - localisation 90011-05 [29]
- thalamotomy ~~(intracranial)~~ 40801-00 [27]
- tractotomy ~~(spinal)~~ ~~(percutaneous)~~ 39121-00 [58]
- ...

Stimulation — see also *Insertion/device*

- [brain \(cortical\) \(deep\) \(thalamic\) 40709-04 \[1880\]](#)

- carotid sinus 92054-00 [1890]
- central nervous system
- - evoked responses — see *Investigation/central nervous system*
- electrical
- - [brain \(cortical\) \(deep\) \(thalamic\) 40709-04 \[1880\]](#)
- - cardiac, [for restoration of rhythm 13400-00 \[1890\]](#)
- - - [incidental to cardiac surgery — omit code](#)
- ~~--- for restoration of rhythm 13400-00 [1890]~~
- ~~--- incidental to cardiac surgery — omit code~~
- evoked responses, [central nervous system — see Investigation/central nervous system](#)
- ~~--- central nervous system — see Investigation/central nervous system~~
- lesion [of brain, stereotactic 40801-00 \[27\]](#)
- ~~--- brain, stereotactic 40801-00 [27]~~
- phrenic nerve for assessment of phrenic nerve function 11503-06 [1849]
- [therapy \(using electrophysical agent\) NEC 96155-00 \[1880\]](#)

Australian Coding Standards

0042 PROCEDURES NORMALLY NOT CODED

...

CLASSIFICATION

...

12. Monitoring: cardiac, electroencephalography (EEG), vascular pressure

Exception(s): ~~code: radiographic/video EEG monitoring ≥ 24 hours (92011-00 [1825])~~

- [radiographic/video EEG monitoring ≥ 24 hours \(92011-00 \[1825\]\)](#)
- [stereo electroencephalography \[SEEG\] \(92011-01 \[1825\]\)](#)

13. Nasogastric intubation, aspiration and feeding

Exception(s): nasogastric feeding in neonates (96202-07 [1920]) (see ACS 1615 *Specific diseases and interventions related to the sick neonate*)

0629 STEREOTACTIC RADIOSURGERY, RADIOTHERAPY AND LOCALISATION

STEREOTACTIC RADIOSURGERY AND STEREOTACTIC RADIOTHERAPY

Stereotactic radiosurgery (SRS) and stereotactic radiotherapy (SRT) are procedures performed for the treatment of brain lesions (generally tumours) and require the skills of both neurosurgeons and radiotherapists.

Types of brain tumours or lesions treated by SRS and SRT:

| Benign | Malignant |
|-----------------------------|----------------------------|
| Arteriovenous malformations | Gliomas |
| Meningiomas | Metastases (in rare cases) |
| Acoustic neuromas | |
| Pituitary tumours | |

The differentiation between stereotactic radiotherapy and stereotactic radiosurgery, is generally based on the type of frame used and the size of the lesion treated.

Stereotactic radiosurgery:

- involves a large, single dose of x-ray
- is performed for smaller tumours, generally less than 3 cm in diameter
- requires intracranial stereotactic localisation involving a head-ring attached to the skull with screws

Stereotactic radiotherapy:

- involves fractionated treatment (using Gamma knife or linear accelerator (LINAC))
- is performed for larger tumours or tumours that are close to a critical structure such as the brain stem, optic chiasm or optic nerves
- requires intracranial stereotactic localisation involving a head-ring affixed to bite block

INTRACRANIAL STEREOTACTIC LOCALISATION (40803-00 [1] *Intracranial stereotactic localisation*)

Intracranial stereotactic localisation enables the determination of the precise position of a lesion to be determined prior to for brachytherapy, radiotherapy, stereo electroencephalography or intracranial surgery, and is always performed before the stereotactic radiotherapy or stereotactic radiosurgery is delivered. Intracranial stereotactic localisation involves several procedural components, the mainstay of which is the application of the headframe. Diagnostic imaging procedures are performed (computerised tomography (CT), magnetic resonance imaging (MRI), angiography, myelography, ventriculography) together with computer assisted coordinate determination, localisation and targeting.

Intracranial stereotactic localisation involves several procedural components (eg application of a headframe, diagnostic imaging procedures (computerised tomography (CT), magnetic resonance imaging (MRI), angiography, myelography, ventriculography) with computer assisted coordinate determination, localisation and targeting.

Intracranial stereotactic localisation is performed prior to:

- intracranial surgery to remove, aspirate or biopsy a brain tumour or lesion
- implantation of electrodes (eg for stereo electroencephalography for epilepsy)
- insertion of Rickham's reservoir
- clipping of aneurysms.

SPINAL STEREOTACTIC LOCALISATION

Spinal stereotactic localisation is performed with spinal procedures, such as stereotactic guided biopsy, aspiration or removal of spinal lesion and spinal fusion. Spinal stereotactic localisation precedes spinal surgery and involves diagnostic imaging procedures (CT, MRI, myelography) with computer assisted coordinate determination, localisation and targeting.

~~Note that these procedural components of intracranial stereotactic localisation are included in the code for intracranial stereotactic localisation and are not coded separately.~~

~~The differentiation between the two terms, stereotactic radiotherapy and stereotactic radiosurgery, is generally based on the type of frame used and the size of the lesion treated.~~

CLASSIFICATION

Intracranial stereotactic localisation

Assign 40803-00 [1] *Intracranial stereotactic localisation* as an additional code (ie with an ACHI code for the stereotactic radiosurgery, stereotactic radiotherapy, intracranial surgery, insertion of intracranial electrodes).

EXAMPLE 1:

Patient admitted with intractable epilepsy (complex partial seizures) for stereo electroencephalography (SEEG). Intracranial electrodes inserted (via burr holes) using stereotactic localisation (GA ASA2). Patient connected to monitoring equipment the following day for the SEEG, and discharged one week later. Electrodes removed (under sedation) one day prior to discharge.

| | | |
|--------|-----------------|---|
| Codes: | G40.21 | <u><i>Localisation-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, with intractable epilepsy</i></u> |
| | 40709-00 [6] | <u><i>Insertion of intracranial electrode via burr holes</i></u> |
| | 40803-00 [1] | <u><i>Intracranial stereotactic localisation</i></u> |
| | 92514-29 [1910] | <u><i>General anaesthesia, ASA 29</i></u> |
| | 92011-01 [1825] | <u><i>Stereo electroencephalography [SEEG]</i></u> |
| | 40709-01 [6] | <u><i>Removal of intracranial electrode via burr holes</i></u> |
| | 92515-99 [1910] | <u><i>Sedation, ASA 99</i></u> |

STEREOTACTIC RADIOSURGERY

- ~~• large single dose of x rays~~
- ~~• used for smaller tumours, generally less than 3 cm in diameter~~
- ~~• intracranial stereotactic localisation involves a head ring screwed to skull~~

Stereotactic radiosurgery

Assign ~~codes:~~ 15600-00 [1789] *Stereotactic radiation treatment, single dose*
40803-00 [1] *Intracranial stereotactic localisation*

STEREOTACTIC RADIOTHERAPY

- ~~• fractionated treatment (using Gamma knife or linear accelerator (LINAC))~~
- ~~• used for larger tumours or when close to a critical structure such as the brain stem, optic chiasm or optic nerves~~
- ~~• intracranial stereotactic localisation involves a head ring affixed to bite block~~

Stereotactic radiotherapy

Assign ~~codes:~~ 15600-01 [1789] *Stereotactic radiation treatment, fractionated*
40803-00 [1] *Intracranial stereotactic localisation*

~~Intracranial stereotactic localisation can also be performed before intracranial surgery to remove, aspirate or biopsy a brain tumour or lesion. Other examples of intracranial stereotactic surgical procedures are implantation of electrodes for epilepsy, insertion of Rickham's reservoir and clipping of aneurysms. In these instances, the intracranial stereotactic localisation will be assigned as an additional code to the relevant code for the intracranial surgery.~~

EXAMPLE 1:

~~Stereotactic guided brain biopsy.~~

~~39703-00 [12] *Biopsy of brain via burr holes*~~

~~40803-00 [1] *Intracranial stereotactic localisation*~~

Spinal stereotactic localisation (90011-05 [29] *Spinal stereotactic localisation*)

~~Is now being performed with spinal surgery, such as stereotactic guided biopsy, aspiration or removal of spinal lesion and spinal fusion. As with intracranial procedures, spinal stereotactic localisation precedes the spinal surgery and involves diagnostic imaging procedures (CT, MRI, myelography) together with computer assisted coordinate determination, localisation and targeting. While stereotactic localisation frames have been designed for the spine, they are rarely used.~~

Spinal stereotactic localisation

~~Assign 90011-05 [29] *Spinal stereotactic localisation* should be assigned as an additional code after the (eg with a code for the spinal procedure performed) code to which it relates.~~

~~See also ACS 0633 *Stereotactic neurosurgery/Stereotactic spinal surgery.*~~

EXAMPLE 2:

~~Patient admitted for stereotactic guided removal of malignant spinal meningioma (GA).~~

~~Codes: C70.1 *Malignant neoplasm of spinal meninges*~~

~~M9530/3 *Meningioma, malignant*~~

~~40312-00 [53] *Removal of spinal intradural lesion*~~

~~90011-05 [29] *Spinal stereotactic localisation*~~

~~92514-99 [1910] *General anaesthesia, ASA 99*~~

EXAMPLE 2:

~~Stereotactic guided removal of spinal meningioma.~~

~~40312-00 [53] *Removal of spinal intradural lesion*~~

~~90011-05 [29] *Spinal stereotactic localisation*~~



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Stretta procedure

Introduction/Rationale:

This addenda proposal is a result of a query (Q3069) as the procedure is not classified in ACHI.

Stretta procedure is a minimally invasive endoscopic treatment for gastro-oesophageal reflux disease (GORD) to strengthen the gastro-oesophageal sphincter. It is performed by applying radiofrequency heat via a Stretta® catheter to inflict wounds on the lower oesophageal sphincter, which contract and thicken as they heal (ASERNIP-S, n.d.). The thickened sphincter prevents stomach acid and contents from flowing back up to the oesophagus and eliminating GORD symptoms.

Stretta procedure is slightly different from the Halo procedure, where radiofrequency ablation is performed through a catheter to eliminate the intestinal metaplasia or Barrett's oesophagus. The HALO ablation procedure specifically targets only the layer of Barrett's tissue in the oesophagus without harming the healthy structures underneath it.

ACCD proposes to make amendments in ACHI Tabular List and the Alphabetic Index to classify Stretta procedure and improve the indexing of Halo ablation procedure.

ACCD PROPOSAL

Tabular List

856 Destruction procedures on oesophagus

- 30478-22 Endoscopic destruction of lesion or tissue of oesophagus
Endoscopic (oesophagoscopy with) destruction of lesion or tissue of oesophagus (by):
- ~~ablation (Halo) (radiofrequency)~~
 - coagulation (Argon plasma) (heater probe)
 - diathermy
 - laser
 - [radiofrequency ablation \(Halo procedure\) \(Stretta procedure\)](#)

Alphabetic Index

Destruction (ablation) (cauterisation) (coagulation) (cryotherapy) (diathermy) (HIFUS) (irreversible electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)

...

- fetus, to facilitate delivery 90476-00 **[1343]**

- [gastro-oesophageal junction, endoscopic \(Stretta procedure\) 30478-22 \[856\]](#)

- haemangioma — see *Destruction/vascular anomaly*

...

- lesion (tissue) (tumour) — see also *Destruction/by site*

...

- - oesophagus, endoscopic (Argon plasma) ([Halo procedure](#)) (heater probe) ([Stretta procedure](#)) 30478-22 [856]

- - oral cavity, by endoscopic laser 52035-00 [419]

...

- nerve — see also *Neurotomy*

- - by injection of neurolytic agent — see *Administration/specified site/nerve/by site/neurolytic agent*
- [oesophagogastric junction, endoscopic \(Stretta procedure\)](#) 30478-22 [856]

- [oesophagus, endoscopic \(Argon plasma\) \(Halo procedure\) \(heater probe\) \(Stretta procedure\)](#) 30478-22 [856]

- palate, bony (hard) 90141-00 [403]

- pharynx (by cauterisation) (by diathermy) 41674-02 [419]

Haemorrhoidectomy NEC (see also *Procedure/for/haemorrhoids*) 32138-00 [941]

[Halo ablation procedure \(endoscopic\) \(oesophagus\) \(radiofrequency\)](#) 30478-22 [856]

Hamilton-Russell traction (traction of fracture of pelvis) 47480-00 [1476]

Hartmann's procedure (rectosigmoidectomy) (with formation of stoma) 32030-00 [934]

Oesophagoscopy (flexible) 30473-03 [850]

- with

- - ablation of lesion ([Halo procedure](#)) ([Stretta procedure](#)) (tissue) 30478-22 [856]

- - administration of tattooing agent 30473-07 [1005]

- - biopsy 30473-04 [861]

....

- - polypectomy 30478-13 [861]

- - radiofrequency (~~Halo~~) ablation ([Halo procedure](#)) ([Stretta procedure](#)) 30478-22 [856]

- - removal of foreign body 30478-10 [852]

Procedure

...

- Grice (subtalar arthrodesis) (with bone graft) 50118-00 [1543]

- [Halo ablation \(for Barrett's oesophagus\)](#) 30478-22 [856]

- Hamilton-Russell traction (traction of fracture of pelvis) 47480-00 [1476]

...

- Strassman (laparoscopic) (repair of bicornuate uterus) 35680-00 [1272]

- - via laparotomy 35680-01 [1272]

- [Stretta](#) 30478-22 [856]

- Syme (disarticulation through ankle) 44361-00 [1533]

- syndactyly 90673-00 [1655]

Strassman procedure (laparoscopic) (repair of bicornuate uterus) 35680-00 [1272]

- via laparotomy 35680-01 [1272]

Stretching

- foreskin 92132-00 [1904]

- [Stretta procedure](#) 30478-22 [856]

Strictureplasty

- intestine

- - small 30564-00 [901]



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Syndromes

Introduction/Rationale:

ACCD has received multiple public submissions (P7, P8, P9, P47, P174) requesting index entries for particular syndromes. This addenda proposal also incorporates the following tasks:

- TN644 Dyggve Melchior-Clausen syndrome
- TN690 Costello syndrome

The syndromes mentioned in the above public submissions are all rare, complex syndromes that cannot be classified to one individual ICD-10-AM code. The syndromes are therefore, unable to be indexed, and hence the guidelines in ACS 0005 *Syndromes* apply.

Note: reference in the public submissions to “reporting syndromes that cannot be classified to the State Coding Authority” (previously Point 5), was removed in Eighth Edition and as such no longer grounds for a public submission.

Note also that the syndromes highlighted in the public submissions are classified in ICD-11. ACS 0005 *Syndromes* provides guidelines on assigning codes for syndromes where there are multiple manifestations, and to assign Q87.- *Other specified congenital malformation syndromes affecting multiple systems* to indicate that it is a congenital syndrome with no individual code in ICD-10-AM.

ACCD acknowledges that the assignment of a code from category Q87 *Other specified congenital malformation syndromes affecting multiple systems* is not ideal. Assignment of these codes to indicate that a congenital syndrome is not available in one individual ICD-10-AM code disrupts statistical and research data, as there are specific syndromes indexed to these codes.

ACCD proposes to:

- amend ACS 0005 *Syndromes* to include classification guidelines for syndromes where no individual code is available in ICD-10-AM (both congenital and non-congenital).
- create a code U91 *Syndrome, not elsewhere classified* (in Chapter 22), to act as a flag to indicate an individual code is not available in ICD-10-AM. This code will be sequenced directly after the code(s) for appropriate manifestations of the syndrome.
- relocate U90 to Chapter 22 *Codes for special purposes*, from its current location of Chapter 20 *External causes of morbidity and mortality* and reclassify it to U92 for traceability.

ACCD PROPOSAL

Tabular List

...

CHAPTER 20

EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, ~~U90~~, V00–Y98)

▽ 0050, 2001

This chapter contains the following blocks:

U50–U73 Activity

U50–U72 While engaged in sports or leisure

U73 While engaged in other activity

~~U90—Healthcare associated infections~~

V00–X59 Accidents

...

Y90–Y98 Supplementary factors related to causes of morbidity and mortality classified elsewhere

Note: ~~Code U90.0 is to be used as a supplementary code to identify healthcare associated *Staphylococcus aureus* bacteraemia.~~

For codes V00–Y34, assign also place of occurrence (Y92.-) and activity (U50.- –U73.-).

For codes Y35–Y89, assign also place of occurrence (Y92.-).

...

~~HEALTHCARE ASSOCIATED INFECTIONS~~

~~(U90–U90)~~

~~U90—Healthcare associated infections~~

▽ 0111

~~U90.0—Health care associated *Staphylococcus aureus* bacteraemia~~

Note: ~~Assign U90.0 as an additional code to identify healthcare associated *Staphylococcus aureus* bacteraemia~~

...

CHAPTER 22

CODES FOR SPECIAL PURPOSES (U00–U49, U78–U88, U91, U92)

This chapter contains the following blocks:

U00–U49 Provisional assignment of new diseases of uncertain aetiology or emergency use

U78–U88 Supplementary codes for chronic conditions

U91 Syndrome, not elsewhere classified

U92 Healthcare associated *Staphylococcus aureus* bacteraemia

Note: U91 is assigned as a supplementary code to flag manifestations of a syndrome where no single code is listed in ICD-10-AM for all the elements of the syndrome.

U92 is assigned as a supplementary code to identify healthcare associated *Staphylococcus aureus* bacteraemia.

★U91 Syndrome, not elsewhere classified

▽ 0005, 0050 Code first manifestation(s) of syndrome

Includes: congenital syndrome
non-congenital syndrome

★U92 Healthcare associated *Staphylococcus aureus* bacteraemia

▽ 0050, 0111 Code first specific infection or parasitic disease (Chapter 1).

...

Y95 Nosocomial condition

Excludes: healthcare associated *Staphylococcus aureus* bacteraemia (U90-0)

APPENDIX C

UNACCEPTABLE PRINCIPAL DIAGNOSIS CODES

U78–U88 Supplementary codes for chronic conditions

~~U90.0 — Healthcare associated *Staphylococcus aureus* bacteraemia~~

U91 Syndrome, not elsewhere classified

U92 Healthcare associated *Staphylococcus aureus* bacteraemia

V00–X59 Accidents

Section 1 – Alphabetic Index

...

Syndrome NEC U91 — see also Disease

- with

- - ectrodactyly NEC Q87.28

- 5q-minus (M9986/3) D46.6

- 22q11 deletion Q87.87

- 48,XXXX Q97.1

- 49,XXXXX Q97.1

- Aarskog's Q87.19

...

Section 2 – External Causes of Injury

...

Hanging (accidental) W76

...

Healthcare associated *Staphylococcus aureus* bacteraemia ~~U920.0~~

Heat (effects of) (excessive) X30

...

Australian Coding Standards

0005 SYNDROMES

~~If no single code is available to describe all elements of a syndrome, it can be difficult to code all elements separately.~~

~~GUIDELINES FOR SEQUENCING WHEN CODING SYNDROMES~~

- ~~1. Seek clarification from the clinician for any syndrome which does not have a specific code in ICD-10-AM.~~
- ~~2. Once the details of the syndrome are established, apply the principal diagnosis definition rule.~~
- ~~3. If the principal diagnosis definition rule is difficult to apply due to the multiple manifestations of the syndrome, and no one diagnosis is receiving treatment, assign the most severe condition as the principal diagnosis code.~~
- ~~4. If equal severity can be applied to more than one manifestation, assign the chromosomal/genetic condition as the principal diagnosis code.~~
- ~~5. If the syndrome is a congenital one, assign Q87. *Other specified congenital malformation syndromes affecting multiple systems* as an additional diagnosis code to the specified manifestations already coded. The addition of this code acts as an indication that this is a syndrome which does not have a specific code allocation in ICD-10-AM.~~
- ~~6. When assigning multiple codes to represent the syndrome, assign codes only for the manifestations that are relevant for the patient in question — all 'standard' manifestations of a syndrome may not be present in every patient with the syndrome.~~

A syndrome is a group of signs and symptoms resulting from a common cause, or appearing in combination, to present a clear picture of a disease or inherited abnormality (Mosby 2009).

Many rare syndromes are not classified in ICD-10-AM to one single code. Clinical coders may need to research and/or seek clinical clarification to determine the manifestations of unclassified syndromes, to assist with code assignment.

CLASSIFICATION

Where there is **no single** ICD-10-AM code to classify all the elements of a syndrome, assign:

- codes for the manifestations that are relevant for the patient, and meet the criteria in ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*

and

- U91 *Syndrome, not elsewhere classified*, as an additional diagnosis to flag that the manifestations are related to a syndrome

EXAMPLE 1:

A two year old boy admitted with hypertelorism, brachycephaly and polydactyly (little finger left hand) for investigation. Testing revealed a chromosome deletion (short arm of chromosome 17). Principal diagnosis on discharge summary reported as Smith-Magenis syndrome. Patient referred to specialist children's hospital for treatment.

| | | |
|--------|--------|---|
| Codes: | Q75.2 | Hypertelorism |
| | Q75.01 | Coronal craniosynostosis |
| | Q69.0 | Accessory finger(s) |
| | Q93.5 | Other deletions of part of a chromosome |
| | U91 | Syndrome, not elsewhere classified |

...

0111 HEALTHCARE ASSOCIATED STAPHYLOCOCCUS AUREUS BACTERAEMIA

Staphylococcus aureus is the most common cause of healthcare associated blood stream infections, causing significant illness and death.

The documentation of healthcare associated *Staphylococcus aureus* bacteraemia in clinical records and subsequent unique code assignment will allow for the collection of an important performance indicator in the National Healthcare Agreement (~~METeOR: 517636~~) (Australian Institute of Health and Welfare 2014).

DEFINITION

[Synonyms for 'healthcare associated' include 'hospital acquired', 'healthcare associated infection \(HAI\)' and 'nosocomial'. Where 'healthcare associated bacteraemia' is documented without mention of the specific organism in the clinical record, coders may refer to the pathology results to confirm *Staphylococcus aureus* bacteraemia \(see ACS 0010 General abstraction guidelines/Test results\).](#)

Note: These criteria are for use by clinicians, not clinical coders.

Bacteraemia in the strict sense means 'the presence of viable bacteria in the blood'. It may not produce any symptoms in the patient.

“A patient-episode of bacteraemia is defined as a positive blood culture for *Staphylococcus aureus*. For surveillance purposes, only the first isolate per patient is counted, unless at least 14 days has passed without a positive blood culture, after which an additional episode is recorded.

Staphylococcus aureus bacteraemia (SAB) will be considered to be healthcare associated if **EITHER**:

1. the patient's first SAB blood culture was collected more than 48 hours after hospital admission, or less than 48 hours after discharge **OR**
2. the patient's first SAB blood culture was collected less than or equal to 48 hours after hospital admission and one or more of the following key clinical criteria have been met for the patient-episode of SAB.

Clinical criteria:

- SAB is a complication of the presence of an indwelling medical device (eg intravascular line, haemodialysis vascular access, CSF (cerebrospinal fluid) shunt, urinary catheter)
- SAB occurs within 30 days of a surgical procedure where the SAB is related to the surgical site
- An invasive instrumentation or incision related to the SAB was performed within 48 hours
- SAB is associated with neutropenia (neutrophils $<1 \times 10^9/L$) contributed by cytotoxic therapy” (METeOR: 517636) (Australian Institute of Health and Welfare 2014).

CLASSIFICATION

The presence of healthcare associated *Staphylococcus aureus* bacteraemia (HA SAB) must be documented by clinical staff, and meet the criteria in ACS 0001 *Principal diagnosis* or ACS 0002 *Additional diagnoses* in order to assign ~~U90.0~~U92 *Healthcare associated Staphylococcus aureus bacteraemia*.

~~Synonyms for 'healthcare associated' include 'hospital acquired', 'healthcare associated infection (HAI)' and 'nosocomial'. Where the specific type of healthcare associated bacteraemia is not documented in the clinical notes, coders may refer to pathology results to confirm *Staphylococcus aureus* bacteraemia (see ACS 0010 *General abstraction guidelines/Test results*).~~

~~U90.0~~U92 *Healthcare associated Staphylococcus aureus bacteraemia* is a supplementary code. The manifestation of the bacteraemia, such as endocarditis or sepsis, or the bacteraemia if no site is specified, together with any appropriate external cause codes should be coded ~~according to normal coding practice~~ and sequenced before ~~U90.0~~U92 *Healthcare associated Staphylococcus aureus bacteraemia*. See also ACS 0110 *SIRS, sepsis, severe sepsis and septic shock* and ACS 1904 *Procedural complications*.

EXAMPLE 1:

A 64 year old woman was readmitted with a diagnosis of septic arthritis due to a previous internal fixation of bimalleolar left ankle fracture (performed at this facility). Clinical documentation and cultures from joint aspiration and blood samples during this admission confirmed healthcare associated *Staphylococcus aureus* bacteraemia. Vancomycin was started and the patient received treatment for 6 weeks.

| | | |
|--------|-----------------------------|---|
| Codes: | T84.6 | <i>Infection and inflammatory reaction due to internal fixation device [any site]</i> |
| | M00.07 | <i>Staphylococcal arthritis and polyarthritis, ankle and foot</i> |
| | A49.01 | <i>Staphylococcus aureus infection, unspecified site</i> |
| | Y83.1 | <i>Surgical operation with implant of artificial internal device</i> |
| | Y92.24 | <i>Place of occurrence, health service area, this facility</i> |
| | U90.0 <u>U92</u> | <i>Healthcare associated Staphylococcus aureus bacteraemia</i> |



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

Tarlov Cyst

Introduction/Rationale:

This addenda proposal is the result of a public submission (86/09) to create a code for Tarlov cyst.

Research indicates that a Tarlov cyst is a rare condition where there is dilation of the nerve root sheath (usually in the sacral area) causing a cyst sac, which then fills with cerebrospinal fluid (Tarlov Cyst Foundation 2013).

ICD-11 (Beta draft) lists Tarlov cyst as an *Inclusion* term to a residual category (*Other specified disorders of cerebrospinal fluid pressure or flow*). Therefore, ACCD does not consider it necessary to create a unique code for this condition in ICD-10-AM.

After discussion and a consensus at the December 2017 ITG meeting, ACCD proposes that Tarlov cyst (and any synonymous terms) be added to the Alphabetic Index only, classified to G54.8 *Other nerve root and plexus disorders*, for ICD-10-AM Eleventh Edition.

ACCD PROPOSAL

Alphabetic Index

Cyst (colloid) (mucous) (retention) (simple)

...

- synovial M71.3-

- - ruptured M66.1-

- [Tarlov \(perineural\) G54.8](#)

- tarsal H00.1

...

TAR (thrombocytopenia with absent radius) syndrome Q87.26

[Tarlov cyst \(perineural\) G54.8](#)

Tarsal tunnel syndrome G57.5

...



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

TransPyloric shuttle (TPS®)

Introduction/Rationale:

This addenda proposal includes amendments to ACHI resulting from a query (Q3093) on insertion of TransPyloric shuttle (TPS®).

The TransPyloric Shuttle (TPS®) is a device used to treat obesity. The device is inserted endoscopically into the stomach and consists of a large spherical bulb connected by a silicone tether that passes through the pylorus to a smaller cylindrical bulb in the duodenum. The large bulb prevents the device from migrating out of the stomach, and intermittently creates a seal at the pylorus to delay partially digested food and gastric juices from flowing into the duodenum.

Research has indicated that the device would be removed after the desired treatment period. During removal, an endoscope is inserted into the stomach and endoscopic instruments are used to remove the deconstructed TPS® (Marinos et al 2013).

ACCD proposes to classify the insertion, removal, and revision of TPS® in ACHI.

ACCD PROPOSAL

Tabular List

889 Procedures for obesity

...

90950-02 Endoscopic insertion of device into stomach

Insertion of:

- [gastric balloon or bubble](#)
- [intra-gastric balloon or bubble](#)

| | | |
|--|--|------------------------------|
| <ul style="list-style-type: none"> • gastric • intra-gastric | | balloon or bubble |
|--|--|------------------------------|

Excludes: with replacement of device (90950-04 [889])

90950-04 Endoscopic revision of device in stomach

Endoscopic:

- [adjustment of gastric balloon or bubble](#)
- [replacement \(removal and reinsertion\) of gastric balloon or bubble](#)
- [repositioning of gastric balloon or bubble](#)

| | | |
|---|--|------------------------------|
| <ul style="list-style-type: none"> • adjustment | | balloon or bubble |
|---|--|------------------------------|

- ~~replacement (removal and reinsertion)~~
- ~~repositioning~~

90950-03 Endoscopic removal of device from stomach

Removal of:

- [gastric balloon or bubble](#)
- [intra-gastric balloon or bubble](#)

- ~~gastric~~
 - ~~intra-gastric~~
- ~~balloon or bubble~~

Excludes: removal of gastric band (90942-02 [889]) with replacement of device (90950-04 [889])

Alphabetic Index

Adjustment

...

- device

...

-- gastric, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) 90950-04 [889]

-- neurostimulator — *see Adjustment/neurostimulator*

-- ring fixator (or similar device) 50309-00 [1554]

--- with

---- insertion of pin (fixation) 50309-00 [1554]

---- removal of pin (fixation) 50309-00 [1554]

-- stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) 90950-04 [889]

- electrode(s) (for)

...

Insertion

...

- device — *see also Insertion/by type of device*

...

-- fixation, internal

--- bone — *see also Fixation/bone*

---- orthopaedic (pin) (plate) (wire) 47921-00 [1554]

----- with

----- adjustment of ring fixator (or similar device) 50309-00 [1554]

----- reduction of

----- dislocation — *see Reduction/dislocation/by site/with internal fixation*

----- fracture — *see Reduction/fracture/by site/with internal fixation*

----- mandible 52096-00 [1360]

----- maxilla 52096-00 [1360]

----- zygoma 52096-00 [1360]

-- tooth (dental pin) 97575-00 [469]

-- [gastric, for obesity \(balloon\) \(bubble\) \(endoscopic\) \(transpyloric shuttle\) \(see also Banding/gastric, for obesity\) 90950-02 \[889\]](#)

-- hearing

--- bone conduction 41557-02 [321]

...

-- skeletal muscle stimulator 90561-00 [1554]

-- spinal infusion, implantable (epidural) (intrathecal) 39127-00 [39]

- stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) (see also *Banding/gastric, for obesity*) 90950-02 [889]
- ureteral stimulator, electronic 90355-00 [1069]
- vascular access (infusion port) (Port-A-Cath) (subcutaneous reservoir) 34528-02 [766]
- ...

Removal — see also *Excision*

- ...
- device — see also *Removal/by type of device*
- ...
- fixation — see *Removal/fixation device*
- [gastric, for obesity \(balloon\) \(bubble\) \(endoscopic\) \(transpyloric shuttle\) \(see also Removal/gastric/band\)](#) 90950-03 [889]
- gastrointestinal tract NEC 92086-00 [1896]
- genitourinary tract NEC 92116-00 [1900]

- ...
- skeletal muscle stimulator 90566-00 [1554]
- - with replacement 90561-00 [1554]
- specified, therapeutic, NEC 92202-00 [1908]
- stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) (see also *Removal/gastric/band*) 90950-03 [889]
- therapeutic NEC 92202-00 [1908]
- ...

Replacement

- ...
- device — see also *Replacement/by type of device*
- ...
- erection, artificial
- - components
- - - complete 37432-01 [1201]
- - - partial 37432-00 [1201]
- [gastric, for obesity \(balloon\) \(bubble\) \(endoscopic\) \(transpyloric shuttle\)](#) 90950-04 [889]
- intracranial pressure monitoring (ICP) 39015-02 [3]
- intrauterine (contraceptive) (IUD) 35506-00 [1260]

- ...
- stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) 90950-04 [889]
- ureteral stimulator, electronic 90355-00 [1069]
- vascular access (infusion port) (Port-A-Cath) (subcutaneous reservoir) 34530-06 [766]
- ...

Repositioning

- ...
- device
- [gastric, for obesity \(balloon\) \(bubble\) \(endoscopic\) \(transpyloric shuttle\)](#) 90950-04 [889]
- displaced tooth 97384-00 [461]
- electrode(s) (for)

Revision (partial) (total)

- ...
- device — see also *Revision/by type of device*
- arteriovenous — see also *Revision/arteriovenous/access device*

- - - shunt, external 34500-01 **[764]**
- - cardiac event monitor, subcutaneously implanted (ECG) (looping memory) (patient activated) 38285-01 **[1604]**
- - erection, artificial
- - - complete 37432-01 **[1201]**
- - - partial 37432-00 **[1201]**
- - gastric, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) 90950-04 **[889]**
- - infusion, implantable spinal 39126-00 **[56]**
- - intracranial pressure monitoring (ICP) 39015-02 **[3]**
- - neurostimulator — see *Insertion/neurostimulator AND Removal/neurostimulator*
- - peritoneal access (port-catheter) 90376-01 **[983]**
- - stomach, for obesity ([balloon](#)) ([bubble](#)) (endoscopic) ([transpyloric shuttle](#)) 90950-04 **[889]**
- - vascular access (infusion port) (Port-A-Cath) (subcutaneous reservoir) 34530-06 **[766]**
- drain
- - cerebrospinal fluid
- - - lumbar (external) 40018-00 **[41]**

Australian Coding Standards

Not applicable



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

Umbilectomy

Introduction/Rationale:

This addenda proposal is the result of a query (Q3042) as it was identified that there is no intervention code in ACHI for excision of umbilicus.

ACCD proposes the addition of a code for excision of umbilicus (umbilectomy) to ACHI.

ACCD PROPOSAL

Tabular List

989 Other excision procedures on abdomen, peritoneum or omentum

Excludes: hysterectomy with retroperitoneal dissection (35667-00 [1268])

30396-00 Debridement and lavage of peritoneal cavity
Washout for intraperitoneal sepsis

Includes: removal of:
• enteric contents (eg faecal material)
• foreign material

~~43942-00 Excision of epithelial remnant at umbilicus~~

43945-00 Excision of patent vitello intestinal duct

Includes: vitello intestinal cyst

~~43948-00 Excision of umbilical granuloma~~

43948-01 Excision of lesion of umbilicus

Excision of:
• epithelial remnant at umbilicus
• umbilical:
• abscess
• granuloma

43948-02 Excision of umbilicus
Umbilectomy

43987-01 Excision of intra-abdominal neuroblastoma
Excision of peritoneal neuroblastoma

Alphabetic Index

Excision — see also *Removal*

...

- abscess

- - intracranial 39903-00 [14]

- - - postoperative (reopening of craniotomy) 39721-00 [10]

- - pilonidal 30676-01 [1659]

- - spinal

- - - extradural 40309-00 [53]

- - umbilicus 43948-00 [989]

...

- epiglottis with microlaryngoscopy 41864-00 [523]

- epithelial remnant at umbilicus ~~43942-00~~ 43948-01 [989]

- eschar (< 10% body surface area) (burn) 30017-01 [1627]

- - with graft — see *Graft/skin/for burn/by site*

- - ≥ 10% body surface area 30020-00 [1627]

...

- granuloma

- - eye (conjunctiva) 42689-00 [181]

- - middle ear — see *Clearance/granuloma/middle ear*

- - umbilicus 43948-00 [989]

- haemangioma — see *Excision/vascular/anomaly*

...

- lesion(s) — see also *Excision/tumour AND Excision/cyst AND Excision/polyp*

...

- - umbilicus 43948-01 [989]

~~— epithelial remnant 43942-00 [989]~~

~~— granuloma 43948-00 [989]~~

- - ureter 36579-00 [1076]

...

- remnant

- - epithelial, at umbilicus ~~43942-00~~ 43948-01 [989]

- rhinophyma 45653-00 [1634]

- - by laser (carbon dioxide) (erbium) 45652-00 [1617]

- - shaving 45653-00 [1634]

...

- tumour — see also *Excision/lesion(s)*

...

- - granuloma

- - - eye (conjunctiva) 42689-00 [181]

- - - middle ear — see *Clearance/granuloma/middle ear*

- - - umbilicus 43948-00 [989]

- - haemangioma — see *Excision/vascular/anomaly*

...

- ulcer (skin) (subcutaneous tissue) 31205-01 [1630]

- - duodenum, for control of bleeding

- - - by gastric resection (other than wedge resection) 30509-00 [880]

- - - - wedge 30505-00 [874]

- - stomach, for control of bleeding

- - - by gastric resection (other than wedge resection) 30509-00 [880]

- - - - wedge 30505-00 [874]

- - umbilicus (complete) (partial) 43948-02 [989]

- urachus (patent) 37800-00 [1118]

...

Omentoplasty

- with evacuation of hydatid cyst

- - abdominal organ NEC 30436-02 [1002]

- - liver 30436-00 [955]

- - peritoneum 30436-01 [1002]

[Omphalectomy 43948-02 \[989\]](#)

Onlay — see *Inlay*

...

Removal — see also *Excision*

...

- granuloma
- eye (conjunctiva) 42689-00 [181]
- middle ear — see *Clearance/granuloma/middle ear*
- umbilicalus 43948-0001 [989]
- grommet tube 41644-00 [312]

...

- tumour — see *Excision/tumour*
- umbilicus (complete) (partial) 43948-02 [989]
- ureteral stimulator, electronic 90355-01 [1069]

Ultrasound (diagnostic) (scan) 90908-00 [1950]

- for

...

- wrist (bilateral) (unilateral) 55800-00 [1950]

Umbilectomy 43948-02 [989]

Uncinectomy — see *Ethmoidectomy AND Antrostomy/intranasal*

APPENDIX A

MAPPING TABLE FOR MBS ITEMS NOT INCLUDED IN ACHI

...

MBS ItemACHI Code Map

...

| | |
|-----------------------|-----------------------|
| 43939 | 30403 |
| 43942 | 43948 |
| 43951 | 30527 |
| 43954 | 30527 |



ICD-10-AM/ACHI/ACS Eleventh Edition

Addenda Proposal

WHO Updates Manchester 2015 & Tokyo 2016

Introduction/Rationale:

This addenda proposal includes amendments based on the official changes to ICD-10 approved by Heads of Collaborating Centres at the annual meeting in Manchester 2015, and Tokyo 2016). ACCD proposes to include the WHO updates ICD-10-AM Eleventh Edition, where clinical concepts are not already classified in ICD-10-AM Tenth Edition.

ACCD PROPOSAL

Tabular List

LIST OF THREE-CHARACTER CATEGORIES

Intestinal infectious diseases (A00–A09)

| | |
|-----|--|
| A00 | Cholera |
| A01 | Typhoid and paratyphoid fevers |
| A02 | Other salmonella infections |
| A03 | Shigellosis |
| A04 | Other bacterial intestinal infections |
| A05 | Other bacterial food-borne intoxications, not elsewhere classified |
| A06 | Amoebiasis |
| A07 | Other protozoal intestinal diseases |
| A08 | Viral and other specified intestinal infections |
| A09 | Other gastroenteritis and colitis of infectious and unspecified origin |

...

Protozoal diseases (B50–B64)

| | |
|-----------------|--|
| B50 | Plasmodium falciparum malaria |
| B51 | Plasmodium vivax malaria |
| B52 | Plasmodium malariae malaria |
| B53 | Other parasitologically confirmed malaria |
| B54 | Unspecified malaria |
| B55 | Leishmaniasis |
| B56 | African trypanosomiasis |
| B57 | Chagas' disease |
| B58 | Toxoplasmosis |
| B59† | Pneumocystosis (J17.3*) |
| B60 | Other protozoal diseases, not elsewhere classified |
| B64 | Unspecified protozoal disease |

...

Persons encountering health services for examination and investigation (Z00–Z13)

| | |
|-----|---|
| Z00 | General examination and investigation of persons without complaint or reported diagnosis |
| Z01 | Other special examinations and investigations of persons without complaint or reported diagnosis |
| Z02 | Examination and encounter for administrative purposes |
| Z03 | Medical observation and evaluation for suspected diseases and conditions, ruled out |
| Z04 | Examination and observation for other reasons |
| Z06 | Resistance to antimicrobial drugs |
| Z07 | Resistance to antineoplastic drugs |
| Z08 | Follow-up examination after treatment for malignant neoplasms |
| Z09 | Follow-up examination after treatment for conditions other than malignant neoplasms |
| Z10 | Routine general health check-up of defined subpopulation |
| Z11 | Special screening examination for infectious and parasitic diseases |
| Z12 | Special screening examination for neoplasms |
| Z13 | Special screening examination for other diseases and disorders |

A04 Other bacterial intestinal infections

Excludes: food-borne intoxications, elsewhere classified:

- listeriosis (A32.-)
- other bacterial (A05.-)
- salmonella food-borne intoxication and infection (A02.-)
- toxic effect of noxious foodstuffs (T61–T62)
- tuberculous enteritis (A18.3)

...

A04.4 Other intestinal *Escherichia coli* infections
Escherichia coli enteritis NOS

...

A04.8 Other specified bacterial intestinal infections

...

A06 Amoebiasis

Includes: infection due to *Entamoeba histolytica*

Excludes: other protozoal intestinal diseases (A07.-)

A06.0 Acute amoebic dysentery
Acute amoebiasis
Intestinal amoebiasis NOS

A06.1 Chronic intestinal amoebiasis

A06.2 Amoebic nondysenteric colitis

A06.3 Amoeboma of intestine
Amoeboma NOS

A06.4 Amoebic liver abscess
Hepatic amoebiasis

A06.5 Amoebic lung abscess
Amoebic abscess of lung: ~~(and liver)~~
• NOS
• with pneumonia† (J17.3*)

A06.6 Amoebic brain abscess
Amoebic abscess of brain: ~~(and liver)~~(and lung)

A06.7 Cutaneous amoebiasis

A06.8 Amoebic infection of other sites

Amoebic:

- appendicitis
- balanitis† (N51.2*)

A06.9 Amoebiasis, unspecified

A08 Viral and other specified intestinal infections

Excludes: influenza with involvement of gastrointestinal tract (J09, J10.8, J11.8)

A08.0 Rotaviral enteritis

A08.1 Acute gastroenteropathy due to ~~Norwalk agent~~ [Norovirus](#)

[Noroviral enteritis](#)

Small round structured virus enteritis

A08.2 Adenoviral enteritis

...

A09 Other gastroenteritis and colitis of infectious and unspecified origin

▽ 1120

Excludes: due to bacterial, protozoal, viral and other specified infectious agents (A00–A08)
noninfective (noninfectious) diarrhoea:

- neonatal (P78.3)
- NOS (K52.9)

A09.0 Other gastroenteritis and colitis of infectious origin

Catarrh, enteric or intestinal

Diarrhoea:

- acute:
- bloody
- haemorrhagic
- watery
- dysenteric
- epidemic

Infectious:

- diarrhoea NOS
- or septic:

- | | |
|---|-------------------|
| <ul style="list-style-type: none">• colitis• enteritis• gastroenteritis | haemorrhagic, NOS |
|---|-------------------|

A09.9 Gastroenteritis and colitis of unspecified origin

Neonatal diarrhoea NOS

Excludes: [indeterminate colitis \(K52.3\)](#)

A15 Respiratory tuberculosis, bacteriologically and histologically confirmed

A15.0 Tuberculosis of lung, confirmed by sputum microscopy with or without culture

[Tuberculosis of lung, bacteriologically confirmed, with or without culture](#)

[Tuberculosis:](#)

- [bronchiectasis, confirmed bacteriologically, with or without culture](#)
- [fibrosis of lung, confirmed bacteriologically, with or without culture](#)
- [pneumonia, confirmed bacteriologically, with or without culture](#)
- [pneumothorax, confirmed bacteriologically, with or without culture](#)

Excludes: [confirmed by culture only \(A15.1\)](#)

~~[Tuberculosis:](#)~~

- | | |
|---|--|
| <ul style="list-style-type: none">• bronchiectasis• fibrosis of lung | |
|---|--|

| | | |
|---|--|--|
| <ul style="list-style-type: none"> • pneumonia • pneumothorax | | confirmed by sputum
microscopy with or
without culture |
|---|--|--|

A15.1 Tuberculosis of lung, confirmed by culture only

Tuberculous:
 • [bronchiectasis, confirmed by culture only](#)
 • [fibrosis of lung, confirmed by culture only](#)
 • [pneumonia, confirmed by culture only](#)
 • [pneumothorax, confirmed by culture only](#)

Tuberculous:

| | | |
|---|--|---------------------------|
| <ul style="list-style-type: none"> • bronchiectasis • fibrosis of lung • pneumonia • pneumothorax | | confirmed by culture only |
|---|--|---------------------------|

...

A85 Other viral encephalitis, not elsewhere classified

Includes: specified viral:
 • encephalomyelitis NEC
 • meningoencephalitis NEC

Excludes: ~~benign myalgic encephalomyelitis (G93.3)~~
 encephalitis due to:
 • herpesvirus [herpes simplex] (B00.4)
 • measles virus (B05.0)
 • mumps virus (B26.2)
 • poliomyelitis virus (A80.-)
 • zoster (B02.0)
 lymphocytic choriomeningitis (A87.2)
[myalgic encephalomyelitis \(G93.3\)](#)

...

B17 Other acute viral hepatitis

[B17.0](#) ~~Acute delta-(super)infection of hepatitis B carrier~~ [Acute delta-\(super\)infection in chronic hepatitis](#)

B17.1 Acute hepatitis C

B17.2 Acute hepatitis E

B17.8 Other specified acute viral hepatitis
 Hepatitis non-A non-B (acute)(viral) NEC

B17.9 Acute viral hepatitis, unspecified
 Acute

| | | |
|---|--|-----|
| <ul style="list-style-type: none"> • hepatitis • infectious hepatitis | | NOS |
|---|--|-----|

...

B48 Other mycoses, not elsewhere classified

...

B48.3 Geotrichosis
 Geotrichum stomatitis

B48.4 Penicilliosis

[B48.5†](#) [Pneumocystosis \(J17.2*\)](#)
[Pneumonia due to:](#)

- [Pneumocystis:](#)
 - [carinii](#)
 - [jirovecii](#)

- B48.7 Opportunistic mycoses
Mycoses caused by fungi of low virulence that can establish an infection only as a consequence of factors such as the presence of debilitating disease or the administration of immunosuppressive and other therapeutic agents or radiation therapy. Most of the causal fungi are normally saprophytic in soil and decaying vegetation.
- B48.8 Other specified mycoses
Adiaspiromycosis

PROTOZOAL DISEASES

(B50–B64)

Excludes amoebiasis (A06.-)
other protozoal intestinal diseases (A07.-)

...

B59† ~~Pneumocystosis (J17.3*)~~

- Pneumonia due to:*
- ~~*Pneumocystis:*~~
 - ~~*carinii*~~
 - ~~*jirovecii*~~

D56 **Thalassaemia**

...

- D56.1 Beta thalassaemia
Cooley's anaemia
Severe beta thalassaemia
Thalassaemia:
 - intermedia
 - major
- D56.2 Deltabeta thalassaemia
- D56.3 Thalassaemia trait
[Thalassaemia \(beta\) minor](#)
- ...
- D56.9 Thalassaemia, unspecified
Mediterranean anaemia (with other haemoglobinopathy)
Thalassaemia (~~minor~~)(mixed) (with other haemoglobinopathy)

E16 **Other disorders of pancreatic internal secretion**

- E16.0 Drug-induced hypoglycaemia without coma
Use additional external cause code (Chapter 20) to identify drug.
- E16.1 Other hypoglycaemia
Functional nonhyperinsulinaemic hypoglycaemia
Hyperinsulinism:
 - [congenital](#)
 - functional
 - NOS
Hyperplasia of pancreatic islet beta cells NOS
Posthypoglycaemic coma encephalopathy† ([G94.3*](#))

E16.2 Hypoglycaemia, unspecified

...

F05

Delirium, not induced by alcohol and other psychoactive substances

An aetiologically nonspecific organic cerebral syndrome characterised by concurrent disturbances of consciousness and attention, perception, thinking, memory, psychomotor behaviour, emotion, and the sleep-wake schedule. The duration is variable and the degree of severity ranges from mild to very severe.

- Includes:** acute or subacute:
- brain syndrome
 - confusional state (nonalcoholic)
 - infective psychosis
 - organic reaction
 - psycho-organic syndrome

Excludes: delirium tremens, alcohol-induced or unspecified (F10.4)

F05.0 Delirium not superimposed on dementia, so described

F05.1 Delirium superimposed on dementia

~~Conditions meeting the above criteria but developing in the course of a dementia (F00–F03).~~
[Code also specific type of dementia, if known](#)

F05.8 Other delirium
Delirium of mixed origin

F05.9 Delirium, unspecified

G04

Encephalitis, myelitis and encephalomyelitis

- Includes:** acute ascending myelitis
meningoencephalitis
meningomyelitis

- Excludes:** ~~benign myalgic encephalomyelitis (G93.3)~~
encephalopathy:
 - alcoholic (G31.2)
 - NOS (G93.4)
 - toxic (G92)multiple sclerosis (G35)
[myalgic encephalomyelitis \(G93.3\)](#)
myelitis:
 - acute transverse (G37.3)
 - subacute necrotising (G37.4)

G04.0 Acute disseminated encephalitis

| | | |
|-------------------|--|------------------|
| Encephalitis | | postimmunisation |
| Encephalomyelitis | | |

Use additional external cause code (Chapter 20) to identify vaccine.

G04.1 ~~Tropical spastic paraplegia~~ [Human T-cell lymphotropic virus associated myelopathy](#)
[Tropical spastic paraplegia](#)

G04.2 Bacterial meningoencephalitis and meningomyelitis, not elsewhere classified

...

G12 Spinal muscular atrophy and related syndromes

- G12.0 Infantile spinal muscular atrophy, type I [Werdnig-Hoffman]
- G12.1 Other inherited spinal muscular atrophy
Progressive bulbar palsy of childhood [Fazio-Londe]
Spinal muscular atrophy:
- adult form
 - childhood form, type II
 - distal
 - juvenile form, type III [Kugelberg-Welander]
 - scapuloperoneal form
- G12.2 Motor neuron disease
Familial motor neuron disease
[Kennedy disease](#)
Lateral sclerosis:
- amyotrophic
 - primary
- Progressive:
- bulbar palsy
 - spinal muscular atrophy
- G12.8 Other spinal muscular atrophies and related syndromes

...

G25 Other extrapyramidal and movement disorders

...

- G25.5 Other chorea
Chorea NOS
Excludes: chorea NOS with heart involvement (I02.0)
Huntington's chorea (G10)
rheumatic chorea (I02.-)
Sydenham's chorea (I02.-)
- G25.6 Drug-induced tics and other tics of organic origin
Use additional external cause code (Chapter 20) to identify drug, if drug-induced.
Excludes: de la Tourette's syndrome (F95.2)
tic NOS (F95.9)
- G25.8 Other specified extrapyramidal and movement disorders
Akathisia (drug-induced) (treatment-induced)
Restless legs syndrome
Stiff-[person](#) [[man](#)] syndrome
Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

G93 Other disorders of brain

...

- G93.1 Anoxic brain damage, not elsewhere classified
Excludes: complicating:
- abortion or ectopic or molar pregnancy (O00–O07, O08.8)
 - surgical and medical care (G97.8)
 - neonatal anoxia (P21.9)
- G93.3 Postviral fatigue syndrome
~~Benign m~~Myalgic encephalomyelitis

G93.4 Encephalopathy, unspecified

Excludes: encephalopathy:
• alcoholic (G31.2)
• toxic (G92)

...

G94* **Other disorders of brain in diseases classified elsewhere**

G94.0* Hydrocephalus in infectious and parasitic diseases classified elsewhere (A00–B94.9, B99†)

G94.1* Hydrocephalus in neoplastic disease (C00–D48†)

G94.2* Hydrocephalus in other diseases classified elsewhere

[G94.3*](#) [Encephalopathy in diseases classified elsewhere](#)

G94.8* Other specified disorders of brain in diseases classified elsewhere

H02 **Other disorders of eyelid**

Excludes: congenital malformations of eyelid (Q10.0–Q10.3)

...

H02.4 Ptosis of eyelid

H02.5 Other disorders affecting eyelid function

Ankyloblepharon
Blepharophimosis
Lid retraction

Excludes: blepharospasm (G24.5)
tic ([disorder](#)):
• [drug induced \(G25.6\)](#)
• NOS (F95.9-)
• organic [origin](#) (G25.6)
• psychogenic (F95.-)

H02.6 Xanthelasma of eyelid

...

H18 **Other disorders of cornea**

H18.0 Corneal pigmentations and deposits

Haematocornea
Kayser-Fleischer ring
Krukenberg's spindle
Staepli's line

Use additional codes (T90.4 and Y85–Y89) to identify corneal rust ring.

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

H18.1 Bullous keratopathy

Excludes: [keratopathy \[bullous aphakic\] following cataract surgery \(H59.0\)](#)

H18.2 Other corneal oedema

...

H47 Other disorders of optic [2nd] nerve and visual pathways

- H47.0 Disorders of optic nerve, not elsewhere classified
Compression of optic nerve
[\(Foster-\)Kennedy syndrome](#)
Haemorrhage in optic nerve sheath
Ischaemic optic neuropathy
- H47.1 Papilloedema, unspecified
- H47.2 Optic atrophy
Temporal pallor of optic disc
- ...

HYPERTENSIVE DISEASES

(I10–I15)

Excludes involving coronary vessels (I20–I25)
neonatal hypertension (P29.2)
~~primary~~ pulmonary hypertension (~~I27.0~~):
• [NOS \(I27.2\)](#)
• [primary \(I27.0\)](#)
• [secondary \(I27.2\)](#)

I27 Other pulmonary heart diseases

- I27.0 Primary pulmonary hypertension
- I27.1 Kyphoscoliotic heart disease
- I27.2 Other secondary pulmonary hypertension
[Pulmonary hypertension NOS](#)
Use additional code to identify underlying disease.
- I27.8 Other specified pulmonary heart diseases
Eisenmenger's:
• complex
• syndrome
Excludes: Eisenmenger's defect (Q21.81)
- I27.9 Pulmonary heart disease, unspecified
Chronic cardiopulmonary disease
Cor pulmonale (chronic) NOS

I77 Other disorders of arteries and arterioles

- Excludes:* collagen (vascular) diseases (M30–M36)
hypersensitivity angiitis (M31.0)
pulmonary artery (I28.-)
- ...
- I77.5 Necrosis of artery

- I77.6 Arteritis, unspecified
 Aortitis NOS
 Endarteritis NOS
Excludes arteritis or endarteritis:
- aortic arch [Takayasu] (M31.4)
 - cerebral NEC (I67.7)
 - coronary (I25.8)
 - deformans (I70.-)
 - giant cell (M31.5–M31.6)
 - obliterans (I70.-)
 - senile (I70.-)
 - [granulomatosis with polyangiitis \(M31.3\)](#)
- I77.8 Other specified disorders of arteries and arterioles
- | | |
|---------|-----------|
| Erosion | of artery |
| Ulcer | |
- ...

J16 Pneumonia due to other infectious organisms, not elsewhere classified

- Excludes:* ornithosis (A70)
 pneumocystosis (~~B59~~[B48.5† J17*](#))
 pneumonia:
- congenital (P23.-)
 - NOS (J18.9)
- ...

J99* Respiratory disorders in diseases classified elsewhere

- J99.1* Respiratory disorders in other diffuse connective tissue disorders
 Respiratory disorders in:
- dermatomyositis (M33.0–M33.1†)
 - polymyositis (M33.2†)
 - [granulomatosis with polyangiitis \(M31.3†\)](#)
 - sicca syndrome [Sjögren] (M35.0†)
 - systemic:
 - lupus erythematosus (M32.1†)
 - sclerosis (M34.8†)
 - Wegener's granulomatosis (M31.3†)
- ...

K22 Other diseases of oesophagus

- Excludes:* oesophageal varices (I85.-)
- ...
- K22.1 Ulcer of oesophagus
 Ulcer of oesophagus:
- due to ingestion of:
 - chemicals
 - drugs and medicaments
 - fungal
 - NOS
 - peptic
- Use additional external cause code (Chapter 20) to identify cause.*

K22.2 Oesophageal obstruction
[Oesophageal web \(acquired\) \(NOS\)](#)

| | |
|-------------------------|---------------|
| Compression | of oesophagus |
| Constriction | |
| Stenosis | |
| Stricture | |

Excludes: congenital [oesophageal: stenosis or stricture of oesophagus \(Q39.3\)](#)
• [stenosis or stricture \(Q39.3\)](#)
• [web \(Q39.4\)](#)

K22.3 Perforation of oesophagus
Rupture of oesophagus

Excludes: traumatic perforation of (thoracic) oesophagus (S27.83)

...

K30 Functional dyspepsia

Indigestion

Excludes: dyspepsia:
• nervous (F45.32)
• neurotic (F45.32)
• [NOS \(R10.1\)](#)
• psychogenic (F45.32)
heartburn (R12)

...

K31 Other diseases of stomach and duodenum

Includes: functional disorders of stomach

Excludes diverticulum of duodenum
(K57.0- –K57.1-)
gastrointestinal haemorrhage
(K92.0–K92.2)

...

K31.8 Other specified diseases of stomach and duodenum

☉K31.81 Angiodysplasia of stomach ~~and duodenum~~-without mention of haemorrhage

☉K31.82 Angiodysplasia of stomach ~~and duodenum~~-with haemorrhage

☉K31.88 Other specified diseases of stomach and duodenum
Achlorhydria
Gastroptosis
Hourglass contraction of stomach

K31.9 Disease of stomach and duodenum, unspecified

K52 Other noninfective gastroenteritis and colitis

▽ 1120

...

K52.1 Toxic gastroenteritis and colitis
Drug-induced gastroenteritis and colitis
Use additional external cause code (Chapter 20) to identify drug or toxic agent.

K52.2 Allergic and dietetic gastroenteritis and colitis
Food hypersensitivity gastroenteritis or colitis

K52.3 Indeterminate colitis

Excludes: [colitis of unspecified origin \(A09.9\)](#)

K52.8 Other specified noninfective gastroenteritis and colitis
Collagenous colitis
Eosinophilic gastritis or gastroenteritis
Lymphocytic colitis
Microscopic colitis (collagenous colitis or lymphocytic colitis)

...

K55 Vascular disorders of intestine

Excludes: necrotising enterocolitis of fetus or newborn (P77)

K55.0 Acute vascular disorders of intestine

Acute:

- fulminant ischaemic colitis
- intestinal infarction
- small intestine ischaemia

Mesenteric (artery)(vein):

- embolism
- infarction
- thrombosis

Subacute ischaemic colitis

K55.1 Chronic vascular disorders of intestine

Chronic ischaemic:

- colitis
- enteritis
- enterocolitis

Ischaemic stricture of intestine

Mesenteric:

- atherosclerosis
- vascular insufficiency

K55.2 Angiodysplasia of colon

★K55.21 Angiodysplasia of colon without mention of haemorrhage

~~Angiodysplasia of colon NOS~~

[Angiodysplasia:](#)

- [colon NOS](#)
- [intestine NOS](#)

★K55.22 Angiodysplasia of colon with haemorrhage

K55.3 Angiodysplasia of small intestine

★K55.31 [Angiodysplasia of small intestine, without mention of haemorrhage](#)

★K55.32 [Angiodysplasia of small intestine, with haemorrhage](#)

K55.8 Other vascular disorders of intestine

K55.9 Vascular disorder of intestine, unspecified

Ischaemic:

- colitis
- enteritis
- enterocolitis

NOS

K56**Paralytic ileus and intestinal obstruction without hernia**

Excludes: congenital stricture or stenosis of intestine (Q41–Q42)
 ischaemic stricture of intestine (K55.1)
 meconium ileus in cystic fibrosis
 (E84† P75*)
[newborn intestinal obstruction NEC \(P76.-\)](#)
 obstruction of duodenum (K31.5)
 stenosis of anus or rectum (K62.4)
 with hernia (K40–K46)

K56.0

Paralytic ileus

Paralysis of:

- bowel
- colon
- intestine

Excludes: gallstone ileus (K56.3)
 ileus NOS (K56.7)
 obstructive ileus NOS (K56.6)

K56.1

Intussusception

Intussusception or invagination of:

- bowel
- colon
- intestine
- rectum

Excludes: intussusception of appendix (K38.8)

...

K72**Hepatic failure, not elsewhere classified**[Hepatic encephalopathy NOS† \(G94.3*\)](#)**Includes:** ~~hepatic:~~• ~~coma NOS~~• ~~encephalopathy NOS~~~~hepatitis:~~• ~~fulminant~~• ~~malignant~~~~liver (cell) necrosis with hepatic failure~~~~yellow liver atrophy or dystrophy~~| NEC, with
hepatic failure

Excludes: alcoholic hepatic failure (K70.4)
 hepatic failure complicating abortion or ectopic or molar pregnancy (O00–O07, O08.8)
 icterus of fetus and newborn (P55–P59)
 viral hepatitis (B15–B19)
 with toxic liver disease (K71.1)

K72.0

Acute and subacute hepatic failure

Acute non-viral hepatitis NOS

[Late onset hepatic failure](#)

K72.1

Chronic hepatic failure

K72.9

Hepatic failure, unspecified

K76 Other diseases of liver

Excludes: alcoholic liver disease (K70.-)
amyloid degeneration of liver (E85.-)
cystic disease of liver (congenital) (Q44.6)
hepatic vein thrombosis (I82.0)
hepatomegaly NOS (R16.0)
portal vein thrombosis (I81)
toxic liver disease (K71.-)

...

K76.7 Hepatorenal syndrome

Excludes: following labour and delivery (O90.4)

K76.8 Other specified diseases of liver

[Acquired intrahepatic vascular shunt](#)
Focal nodular hyperplasia of liver
Hepatoptosis
Simple cyst of liver

K76.9 Liver disease, unspecified

L95 Vasculitis limited to skin, not elsewhere classified

Excludes: angioma serpiginosum (L81.7)
[granulomatosis with polyangiitis \(M31.3\)](#)
Henoch(-Schönlein) purpura (D69.0)
hypersensitivity angiitis (M31.0)
panniculitis (of):
• lupus (L93.2)
• neck and back (M54.0-)
• NOS (M79.3-)
• relapsing [Weber-Christian] (M35.6)
polyarteritis nodosa (M30.0)
rheumatoid vasculitis (M05.2-)
serum sickness (T80.6)
urticaria (L50.-)
Wegener's granulomatosis (M31.3)

L95.0 Livedoid vasculitis
Atrophie blanche (en plaque)

...

M24 Other specific joint derangements

See site code

Excludes: current injury — see injury of joint by body region
ganglion (M67.4-)
snapping knee (M23.8-)
temporomandibular joint disorders (K07.6)

...

M24.1 Other articular cartilage disorders

[▽ 1353, 1354](#)

[0-5,7-9]

Excludes: chondrocalcinosis (M11.1- –M11.2-)
internal derangement of knee (M23.-)
metastatic calcification (E83.5)
ochronosis (E70.2)

...

M31 Other necrotising vasculopathies

...

M31.1 Thrombotic microangiopathy
Thrombotic thrombocytopenic purpura

~~M31.2 Lethal midline granuloma~~

M31.3 Wegener's granulomatosis
[Granulomatosis with polyangiitis with:](#)
• [kidney involvement† \(N08.5*\)](#)
• [lung involvement† \(J99.1*\)](#)
Necrotising respiratory granulomatosis

M31.4 Aortic arch syndrome [Takayasu]

...

M34 Systemic sclerosis

Includes: scleroderma

Excludes: scleroderma:
• circumscribed (L94.0)
• neonatal (P83.8)

...

M34.2 Systemic sclerosis induced by drugs and chemicals
Use additional external cause code (Chapter 20) to identify cause.

M34.8 Other forms of systemic sclerosis
Systemic sclerosis with:
• lung involvement† (J99.1*)
• myopathy† (G73.7*)
• [polyneuropathy† \(G63.5*\)](#)

M34.9 Systemic sclerosis, unspecified

M62 Other disorders of muscle

See site code

Excludes: cramp and spasm (R25.2)
myalgia (M79.1-)
myopathy:
• alcoholic (G72.1)
• drug-induced (G72.0)
stiff-[person](#) [[man](#)] syndrome (G25.8)

...

M62.5 Muscle wasting and atrophy, not elsewhere classified

[0-9]

Disuse atrophy NEC
[Sarcopenia](#)

...

M75 **Shoulder lesions**

Excludes: shoulder-hand syndrome (G58.11)

...

M75.4 Impingement syndrome of shoulder

M75.5 Bursitis of shoulder

[M75.6](#) [Tear of labrum of degenerative shoulder joint](#)

[▽ 1353, 1354](#)

M75.8 Other shoulder lesions

[▽ 1353, 1354](#)

M75.9 Shoulder lesion, unspecified

M86 **Osteomyelitis**

See site code

Use additional code (B95–B97) to identify infectious agent.

Excludes: osteomyelitis (of):

- due to salmonella (A01–A02)
- jaw (K10.2)
- vertebra (M46.2-)

...

M86.9 **Osteomyelitis, unspecified**

[0-9]

Infection of bone NOS

Periodontitis ~~without mention of osteomyelitis~~ [NOS](#)

N08* **Glomerular disorders in diseases classified elsewhere**

Includes: nephropathy in diseases classified elsewhere

Excludes: renal tubulo-interstitial disorders in diseases classified elsewhere (N16.-*)

...

N08.2* Glomerular disorders in blood diseases and disorders involving the immune mechanism

Glomerular disorders in:

- cryoglobulinaemia (D89.1†)
- disseminated intravascular coagulation [defibrination syndrome] (D65†)
- haemolytic-uraemic syndrome (D59.3†)
- Henoch(-Schönlein) purpura (D69.0†)
- sickle-cell disorders (D57.-†)

N08.4* Glomerular disorders in endocrine, nutritional and metabolic diseases

Glomerular disorders in:

- amyloidosis (E85.-†)
- Fabry(-Anderson) disease (E75.2†)
- lecithin cholesterol acyltransferase deficiency (E78.6†)

Excludes: glomerular disorders in diabetes mellitus (E1-.22)

N08.5* Glomerular disorders in systemic connective tissue disorders

Glomerular disorders in:

- Goodpasture's syndrome (M31.0†)
- [granulomatosis with polyangiitis \(M31.3†\)](#)
- microscopic polyangiitis (M31.7†)
- systemic lupus erythematosus (M32.1†)
- thrombotic thrombocytopenic purpura (M31.1†)
- Wegener's granulomatosis (M31.3†)

N08.8* Glomerular disorders in other diseases classified elsewhere

Glomerular disorders in subacute bacterial endocarditis (I33.0†)

N22* Calculus of urinary tract in diseases classified elsewhere

▽ 0049, 0050

N22.0* Urinary calculus in schistosomiasis [bilharziasis] (B65.0-†)

N22.8* Calculus of urinary tract in other diseases classified elsewhere

...

INFECTIONS SPECIFIC TO THE PERINATAL PERIOD

(P35–P39)

Includes: infections acquired in utero or during birth

Excludes: asymptomatic human immunodeficiency virus [HIV] infection status (Z21)
congenital:

- gonococcal infection (A54.-)
- pneumonia (P23.-)
- syphilis (A50.-)

human immunodeficiency virus [HIV] disease
(B20–B24)

infectious diseases acquired after birth (A00–B99,
J09–J11)

intestinal infectious diseases (A00–A09)

laboratory evidence of human immunodeficiency virus [HIV] (R75)

maternal infectious disease as a cause of mortality or morbidity in fetus or newborn not itself manifesting the
disease (P00.2)

tetanus neonatorum (A33)

[whooping cough \(A37.-\)](#)

P37 Other congenital infectious and parasitic diseases

Excludes: congenital syphilis (A50.-)
necrotising enterocolitis of fetus or newborn (P77)
neonatal diarrhoea:
• infectious (A00–A09)
• noninfective (P78.3)
ophthalmia neonatorum due to gonococcus (A54.3)
tetanus neonatorum (A33)
[whooping cough \(A37.-\)](#)

P37.0 Congenital tuberculosis

...

P76 Other intestinal obstruction of newborn

[Excludes:](#) [congenital stricture or stenosis of intestine \(Q41–Q42\)](#)

...

P76.1 Transitory ileus of newborn

Excludes: Hirschsprung's disease (Q43.1-)

P76.2 Intestinal obstruction due to inspissated milk

[P76.3](#) [Volvulus of newborn](#)

P76.8 Other specified intestinal obstruction of newborn

~~**Excludes:** intestinal obstruction classifiable to K56.0–K56.5~~

P76.9 Intestinal obstruction of newborn, unspecified

P78 Other perinatal digestive system disorders

Excludes: neonatal gastrointestinal haemorrhages (P54.0–P54.3)

...

P78.2 Neonatal haematemesis and melaena due to swallowed maternal blood

P78.3 Noninfective neonatal diarrhoea

Excludes: neonatal diarrhoea:
• infectious (A09.0)
• NOS (A09.09)

P78.8 Other specified perinatal digestive system disorders

Congenital cirrhosis (of liver)

Neonatal oesophageal reflux

Peptic ulcer of newborn

...

Q13.4 Other and unspecified congenital corneal malformations

...

Q13.5 Blue sclera

Q13.8 Other congenital malformations of anterior segment of eye

[Axenfeld-Rieger syndrome](#)

Rieger ~~→~~ anomaly

Q13.9 Congenital malformation of anterior segment of eye, unspecified

...

Q39 Congenital malformations of oesophagus

...

Q39.2 Congenital oesophageal fistula without atresia

...

Q39.3 Congenital stenosis and stricture of oesophagus

Q39.4 [Congenital](#) ~~o~~esophageal web

Excludes: [oesophageal web \(acquired\) \(NOS\) \(K22.2\)](#)

Q39.5 Congenital dilatation of oesophagus

...

Q41 Congenital absence, atresia and stenosis of small intestine

Includes: congenital obstruction, occlusion and stricture of small intestine or intestine NOS

Excludes: meconium ileus in cystic fibrosis
(E84† P75*)

[intestinal obstruction of newborn \(P76.-\)](#)

...

Q42 Congenital absence, atresia and stenosis of large intestine

Includes: congenital obstruction, occlusion and stricture of large intestine

Excludes: [intestinal obstruction of newborn \(P76.-\)](#)

...

R00 **Abnormalities of heart beat**

Excludes: abnormalities originating in the perinatal period (P29.1)
specified arrhythmias (I47–I49)

R00.0 Tachycardia, unspecified

Rapid heart beat

Tachycardia:

- sinoauricular NOS
- sinus [sinusal] NOS

R00.1 Bradycardia, unspecified

Bradycardia:

- sinoatrial
- sinus
- vagal

Slow heart beat

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

R00.2 Palpitations

Awareness of heart beat

[R00.3](#) [Pulseless electrical activity, not elsewhere classified](#)

Excludes: cardiac arrest (I46.-)

R00.8 Other and unspecified abnormalities of heart beat

SYMPTOMS AND SIGNS INVOLVING THE DIGESTIVE SYSTEM AND ABDOMEN**(R10–R19)**

Excludes: gastrointestinal haemorrhage:

- newborn (P54.0–P54.3)
- NOS (K92.0–K92.2)

intestinal obstruction:

- [due to congenital stricture or stenosis of intestine \(Q41–Q42\)](#)

- newborn (P76.-)

- NOS (K56.-)

pylorospasm:

- congenital or infantile (Q40.0)
- NOS (K31.3)

symptoms and signs involving the urinary system
(R30–R39)

symptoms referable to genital organs:

- female (N94.-)
- male (N48–N50)

R46 **Symptoms and signs involving appearance and behaviour**

...

R46.8 Other symptoms and signs involving appearance and behaviour

Self neglect NOS

Excludes: insufficient intake of food and water (due to self neglect) (R63.6)

R63 Symptoms and signs concerning food and fluid intake

Excludes: bulimia NOS (F50.2)
eating disorders of nonorganic origin (F50.-)
malnutrition (E40–E46)

...

R63.5 Abnormal weight gain

Excludes: excessive weight gain in pregnancy (O26.0)
obesity (E66.-)

R63.6 Insufficient intake of food and water ~~due to self neglect~~

[Insufficient intake of food and water due to self neglect](#)

Excludes: self neglect NOS (R46.8)
starvation due to:
• anorexia (R63.0)
• privation of food (X53)
thirst due to privation of water (X54)

R63.8 Other symptoms and signs concerning food and fluid intake

S43 Dislocation, sprain and strain of joints and ligaments of shoulder girdle

Use additional open wound code S41.82 with subcategories S43.0–S43.3 to identify an open dislocation [open wound communicating with a dislocation].

Excludes: sprain and strain of muscle and tendon at shoulder and upper arm level (S46)

...

S43.2 Dislocation of sternoclavicular joint

S43.3 Dislocation of other and unspecified parts of shoulder girdle

Dislocation of:
• scapula
• shoulder girdle NOS

S43.4 Sprain and strain of shoulder joint

Coracohumeral (ligament)
Rotator cuff capsule
[Injury of labrum of the shoulder joint](#)

S43.5 Sprain and strain of acromioclavicular joint

Acromioclavicular ligament

S43.6 Sprain and strain of sternoclavicular joint

S43.7 Sprain and strain of other and unspecified parts of shoulder girdle

Sprain and strain of shoulder girdle NOS

Z01 Other special examinations and investigations of persons without complaint or reported diagnosis

Includes: routine examination of specific system

Excludes: examination for:
• administrative purposes (Z02.-)
• suspected conditions, ~~ruled out not proven~~ (Z03.-)
special screening examinations (Z11–Z13)

...

Z03 Medical observation and evaluation for suspected diseases and conditions, ruled out

▽ 0012

Persons who present some symptoms or evidence of an abnormal condition which requires study, but who, after examination and observation, show no need for further treatment or medical care

~~*Includes:*—persons who present some symptoms or evidence of an abnormal condition which requires study, but who, after examination and observation, show no need for further treatment or medical care~~

Excludes: person with feared complaint in whom no diagnosis is made (Z71.1)

...

Z22 Carrier of infectious disease

Includes: suspected carrier

Use additional code to identify resistance to antimicrobial drugs (Z06.5-–Z06.7-).

...

⊕ Z22.7 ~~Carrier of~~ Latent tuberculosis

~~Latent tuberculosis~~

Excludes: abnormal result of Mantoux test (R76.1)

...

Z71 Persons encountering health services for other counselling and medical advice, not elsewhere classified

Excludes: contraceptive or procreation counselling (Z30–Z31)
sex counselling (Z70.-)

Z71.0 Person consulting on behalf of another person

Advice or treatment for nonattending third party

Excludes: anxiety (normal) about sick person in family (Z63.79)

Z71.1 Person with feared complaint in whom no diagnosis is made

▽ 0521, 1204

Feared condition not demonstrated

Problem was normal state

'Worried well'

Excludes: medical observation and evaluation for suspected diseases and conditions, ruled out (Z03.-)

Z71.2 Person consulting for explanation of investigation findings

...

Appendix A

MORPHOLOGY OF NEOPLASMS

...

Coded Nomenclature for Morphology of Neoplasms

...

⊕ M8245/9 Adenocarcinoid tumour, malignant, uncertain whether primary or metastatic

⊕ M8246/0 Neuroendocrine tumour, benign

⊕ M8246/1 Neuroendocrine tumour NOS, uncertain whether benign or malignant

⊕ M8246/2 Neuroendocrine carcinoma NOS, in situ

M8246/3 Neuroendocrine carcinoma NOS

⊕ M8246/6 Neuroendocrine carcinoma, metastatic

⊕ M8246/9 Neuroendocrine carcinoma NOS, uncertain whether primary or metastatic

⊕ M8247/2 Merkel cell carcinoma, in situ

...

CHADx

M CHADx 7 Gastrointestinal complications

Rules for CHADx 7:

1. Do not include the codes in CHADx 7 if they are sequenced between codes in the ranges T80–T88 and Y60–Y84. These codes should be counted in CHADx 1 Postprocedural complications.
2. Do not include the codes in CHADx 7 if they are sequenced between an 'EOC' code and Y60–Y84. These codes should be counted in CHADx 1 Postprocedural complications.
3. Codes must be counted if only satisfying the second criteria ie followed by Y60–Y84 but not following T80–T88 or an EOC code.
4. Do not include the codes in CHADx 7, if they are followed immediately by V00–Y59. These codes should be counted in CHADx 2 Adverse drug events or CHADx 3 Accidental injuries.
5. Where a code for infection or infective process is followed by a sepsis code in Class 4.1, count the infection in the relevant class in CHADx 7.

7.1 Gastroenteritis

...

- A080 Rotaviral enteritis
- A081 Acute gastroenteropathy dt ~~Norwalk agent~~ [Norovirus](#)
- A082 Adenoviral enteritis
- A083 Other viral enteritis
- A084 Viral intestinal infection unspecified
- A085 Other specified intestinal infections

...

Alphabetic Index

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

...

- amoebic NEC A06.8
- - brain ~~(and liver or lung abscess)~~ A06.6
- - liver ~~(without mention of brain or lung abscess) (see also Abscess/liver/amoebic)~~ A06.4
- - lung ~~(and liver) (without mention of brain abscess)~~ A06.5
- - spleen A06.8† D77*

...

- brain (any part) G06.0
- - amoebic ~~(with abscess of any other site)~~ A06.6
- - cystic G06.0

...

- liver (cholangitic) (haematogenic) (lymphogenic) (pylephlebitic) K75.0
- - amoebic A06.4

~~with~~

~~brain abscess (and lung abscess) A06.6~~

~~lung abscess A06.5~~

- - due to Entamoeba histolytica ~~(see also Abscess/liver/amoebic)~~ A06.4

...

- lung (miliary) (putrid) J85.2
- - with pneumonia J85.1
- - - due to specified organism — see *Pneumonia/in*
- - amoebic ~~(with liver abscess)~~ A06.5

~~with~~

~~brain abscess A06.6~~

- - - ~~with~~ pneumonia A06.5† [J17.0*](#) [J17.3*](#)

- lymph, lymphatic, gland or node (acute) (see also *Lymphadenitis/acute*) L04.9

...

Acanthosis (acquired) (nigricans) L83

- benign Q82.89
- congenital Q82.89
- glycogenic
- - oesophagus K22.8
- [oral K13.2](#)
- seborrhoeic L82
- tongue K14.3
- ...

Accessory (congenital)

- ...
- lung (lobe) Q33.1
- [Mahaim fibre conduction pathway I45.6](#)
- muscle Q79.81
- ...

Adenocarcinoma (M8140/3) — *see also Neoplasm/malignant*

- ...
- with
- ...
- - mixed subtypes (M8255/3)
- - ~~neuro-endocrine~~ [neuroendocrine](#) differentiation (M8574/3)
- - osseous (and cartilaginous) metaplasia (M8571/3)
- ...

Angiodysplasia (caecum) (colon) ([intestine](#)) K55.21

- with haemorrhage K55.22
- ~~duodenum K31.81~~
- ~~with haemorrhage K31.82~~
- [small intestine K55.31](#)
- - [with haemorrhage K55.32](#)
- stomach K31.81
- - with haemorrhage K31.82
- ...

Anomaly, anomalous (congenital) (unspecified type) Q89.9

- ...
- Axenfeld's Q13.8
- ...
- lung (fissure) (lobe) Q33.9
- [Mahaim fibre conduction pathway I45.6](#)
- May-Hegglin D72.0
- ...
- Rieger's Q13.8
- ...

Arthritis, arthritic (acute) (chronic) (subacute) M13.9-

- ...
- pyogenic or pyaemic (any site, except spine) (*see also Arthritis/in*) M00.9-
- - spine M46.5-
- [reactive M02.9-](#)
- [specified NEC M02.8-](#)
- rheumatic, acute or subacute — *see Fever/rheumatic*
- ...

Axenfeld's

- anomaly or syndrome Q13.8
- degeneration (calcareous) Q13.49
- [Rieger syndrome Q13.8](#)

Bronchitis (15 years of age and above) (diffuse) (fibrinous) (hypostatic) (infective) (membranous) (with tracheitis) J40

- ...
- purulent (chronic) (recurrent) J41.1
- acute or subacute (*see also Bronchitis/acute or subacute*) J20.9
- ~~senile (chronic) J42~~
- septic, acute or subacute (*see also Bronchitis/acute or subacute*) J20.9
- ...

Carcinoma (M8010/3) — *see also Neoplasm/malignant*

- ...
- with
 - - apocrine metaplasia (M8573/3)
 - - cartilaginous (and osseous) metaplasia (M8571/3)
 - - ~~neuro-endocrine~~ [neuroendocrine](#) differentiation (M8574/3)
 - - osseous (and cartilaginous) metaplasia (M8571/3)
 - - osteoclast-like giant cells (M8035/3)
- ...
- ameloblastic (M9270/3) C41.1
- - upper jaw (bone) C41.02
- [- ampullary](#)
- [- - specified site — see Neoplasm/malignant](#)
- [- - unspecified site C24.1](#)
- anaplastic type (M8021/3)
- ...
- large cell (M8012/3)
 - - with rhabdoid phenotype (M8014/3)
 - - ~~neuro-endocrine~~ [neuroendocrine](#) (M8013/3)
 - - small cell (M8045/3)
 - - squamous cell (M8070/3)
- ...
- ~~neuro-endocrine~~ [neuroendocrine](#) (M8246/3) C80.-
 - - large cell (M8013/3)
 - - low grade (M8240/3)
- ...
- small cell (M8041/3)
- ...
- - mixed (M8045/3)
- - ~~neuro-endocrine~~ [neuroendocrine](#) (M8041/3)
- - squamous cell, combined (M8045/3)
- ...
- trabecular (M8190/3)
- transitional (cell) (M8120/3)
 - - in situ — *see Carcinoma in situ/transitional cell*
 - - micropapillary (M8131/3) — *see Neoplasm/bladder/malignant*
 - - noninvasive — *see Carcinoma in situ/transitional cell*
 - - papillary (M8130/3) — *see also Neoplasm/bladder/malignant*
 - - - low malignant potential (M8130/1) D41.4
 - - - noninvasive — *see Carcinoma in situ/transitional cell/papillary*
- sarcomatoid (M8122/3)
- [- - specified site — see Neoplasm/malignant](#)
- - spindle cell (M8122/3)
- [- - unspecified site C68.9](#)
- trichilemmal (M8102/3)
- ...
- undifferentiated (M8020/3)

- urothelial (M8120/2)
- papillary (M8130/2) D09.0
- ~~low malignant potential (M8130/1) D41.4~~
- [low grade \(M8130/2\) D09.0](#)
- [invasive \(M8130/3\) — see also *Neoplasm/bladder/malignant*](#)
- [noninvasive \(M8130/2\) D09.0](#)
- [of low malignant potential \(M8130/1\) D41.4](#)
- verrucous (epidermoid) (squamous cell) (M8051/3)
- ...

Carcinoma in situ (M8010/2) — see also *Neoplasm/in situ*

- with
- ...
- invasion (infiltration) — see *Carcinoma*
- ~~neuro-endocrine~~ [neuroendocrine](#) differentiation (M8574/2)
- osseous (and cartilaginous) metaplasia (M8571/2)
- ...
- large cell (M8012/2)
- with rhabdoid phenotype (M8014/2)
- ~~neuro-endocrine~~ [neuroendocrine](#) (M8013/2)
- small cell (M8045/2)
- ...
- small cell (M8041/2)
- ...
- mixed (M8045/2)
- ~~neuro-endocrine~~ [neuroendocrine](#) (M8041/2)
- squamous cell
- ...
- thymus-like differentiation (M8589/2)
- transitional cell (M8120/2)
- papillary (M8130/2) D09.0
- low malignant potential (M8130/1) D41.4
- sarcomatoid (M8122/2)
- [specified site — see *Neoplasm/in situ*](#)
- spindle cell (M8122/2)
- [unspecified site D09.1](#)
- trichilemmal (M8102/2) — see *Neoplasm/skin/in situ*
- ...
- tubular (M8211/2)
- and infiltrating duct (M8523/2) — see *Neoplasm/breast/in situ*
- urothelial (M8120/2)
- papillary (M8130/2) D09.0
- ~~low malignant potential (M8130/1) D41.4~~
- [low grade \(M8130/2\) D09.0](#)
- [invasive \(M8130/3\) — see also *Neoplasm/bladder/malignant*](#)
- [noninvasive \(M8130/2\) D09.0](#)
- [of low malignant potential \(M8130/1\) D41.4](#)
- verrucous (epidermoid) (squamous cell) (M8051/2)
- ...

Carcinomatosis

- [abdominal \(M8010/3\) C79.88](#)
- [lymphangitis \(M8010/6\) C78.0](#)
- [meninges \(M8010/3\) C79.3](#)
- [peritonei, peritoneum \(M8010/6\) C78.6](#)
- [pleura \(M8010/3\) C78.2](#)
- specified site NEC (M8010/3) — see *Neoplasm/malignant*
- unspecified site (M8010/9) C79.9

Cardiomyopathy (familial) (idiopathic) I42.9

- ...
- stress-induced I42.8
- Tako-Tsubo I42.8
- thyrotoxic E05.-† I43.8*
- ...

Deficiency, deficient

- ...
- sulfite oxidase E72.1
- [surfactant \(lung\) \(newborn\) P22.0](#)
- thiamine, thiaminic (chloride) E51.9
- ...

Dementia ([depressed or paranoid type](#)) (persisting) ([senile](#)) F03

- [with](#)
- [Alzheimer's disease \(see also Alzheimer's disease or sclerosis\) G30.9† F00.9*](#)
- [delirium or acute confusional state F05.1](#)
- alcoholic F10.7
- ~~Alzheimer's type NEC (see also Dementia/in/Alzheimer's disease) G30.9† F00.9*~~
- arteriosclerotic (see also Dementia/vascular) F01.9
- ...
- resulting from HIV disease B22† F02.4*
- ~~senile F03~~
- ~~with acute confusional state F05.1~~
- ~~Alzheimer's type G30.1† F00.1*~~
- ~~depressed or paranoid type F03~~
- uraemic N18.5† F02.8*
- ...

Disease, diseased — see also *Syndrome*

- ...
- Hb (see also Disease/haemoglobin or Hb) D58.2
- heart (organic) ([senile](#)) I51.9
- - with
- - - pulmonary oedema (acute) (see also Failure/ventricular/left) I50.1
- ...
- ~~senile (see also Myocarditis) I51.4~~
- - syphilitic A52.0
- ...
- Katayama B65.2
- [Kennedy G12.2](#)
- Keshan E59
- ...
- lung J98.4
- ...
- - rheumatoid (diffuse) (interstitial) M05.1-
- - [surfactant deficient \(newborn\) P22.0](#)
- Lyme A69.2
- ...

Disorder (of) — see also *Disease*

- ...
- glomerular (in) N05.9
- - amyloidosis E85.4† N08.4*
- - cryoglobulinaemia D89.1† N08.2*
- - disseminated intravascular coagulation D65† N08.2*
- - Fabry's disease E75.2† N08.4*
- - familial lecithin cholesterol acyltransferase deficiency E78.6† N08.4*
- - Goodpasture's syndrome M31.0† N08.5*

- - [granulomatosis with polyangiitis M31.3† N08.5*](#)
- - haemolytic-uraemic syndrome D59.3† N08.2*

...

Distress

...

- respiratory R06.0
- ~~adult J80~~
- - newborn ([no underlying cause](#)) P22.9
- ...
- - - specified NEC P22.8
- - - [underlying cause identified — see condition](#)
- - psychogenic F45.34
- - syndrome (idiopathic) ([RDS](#))(~~newborn~~) P22.0
- - - [acute \(ARDS\) \(child\) \(non-neonate\) J80](#)
- - - adult ([ARDS](#)) J80
- - - [newborn P22.0](#)

Distribution vessel, atypical Q27.9

...

Encephalomyelitis (see also Encephalitis) G04.9

- acute disseminated (postimmunisation) G04.0
- - postinfectious G04.0
- ~~benign myalgic G93.3~~
- due to or resulting from vaccination (any) G04.0
- equine Venezuelan A92.2† G05.1*
- myalgic;(benign) G93.3

...

Encephalopathy (acute) G93.4

- alcoholic G31.2
- [ammonia \(see also Failure/hepatic\) K72.9† G94.3*](#)
- anoxic — see also *Damage/brain/anoxic*
- - ischaemic, neonatal (see also *Encephalopathy/neonatal, ischaemic*) P91.60
- ...
- demyelinating callosal G37.1
- hepatic (see also *Failure/hepatic*) K72.9† [G94.3*](#)
- - [alcoholic K70.4† G94.3*](#)
- - [drug-induced K71.1† G94.3*](#)
- hyperbilirubinaemic, newborn P57.9
- ...
- in (due to)
- - birth trauma P11.1
- - hyperinsulinism E16.1† G94.~~83~~*
- - influenza virus (not identified) J11.8† G94.~~83~~*
- - - identified (seasonal) NEC J10.8† G94.~~83~~*
- - - - A/H5N1 (avian) J09† G94.~~83~~*
- - lack of vitamin (see also *Deficiency/vitamin*) E56.9† [G94.~~32-83~~*](#)
- ...
- - serum (nontherapeutic) (therapeutic) T80.6
- - syphilis A52.1† G94.~~83~~*
- - trauma (postconcussional) F07.2
- ...
- pellagrous E52† G32.8*
- portosystemic (see also *Failure/hepatic*) K72.9† [G94.3*](#)
- postcontusional F07.2
- - current injury — see *Contusion/brain*
- - posthypoglycaemic (coma) E16.1† G94.~~83~~*
- - postradiation G93.8

...

Failure, failed

...

- hepatic K72.9
- - acute or subacute ([with hepatic coma](#)) K72.0
- - alcoholic (acute) (chronic) (subacute) (with or without hepatic coma) K70.4
- - chronic K72.1
- - due to drugs (acute) (chronic) (subacute) K71.1
- - [late-onset \(with hepatic coma\) K72.0](#)
- hepatorenal K76.7

...

Fever R50.9

...

- ~~c~~Central [NEC R50.8](#)
- - Asian haemorrhagic A98.0
- cerebral (*see also Encephalitis*) G04.9

...

Food

...

- lack of T73.0
- - [and water intake \(due to self neglect\) R63.6](#)
- poisoning — *see Poisoning/food*

...

Fossa — *see condition*

- pyriform — *see condition*

[Foster-Kennedy syndrome H47.0](#)

Fothergill's

...

Gastroenteritis (acute) (*see also Enteritis*) A09.9

...

- viral A08.4
- - acute infectious A08.3
- - epidemic A08.1
- - ~~type~~ [due to Norovirus \(Norwalk\)](#) A08.1
- - infantile (acute) A08.3
- - [Norovirus \(Norwalk agent\)](#) A08.1
- - rotaviral A08.0

...

Gastroenteropathy (*see also Gastroenteritis*) A09.9

- acute, due to [Norovirus \(Norwalk agent\)](#) A08.1
- infectious A09.0
- noninfectious K52.9

Glomerulonephritis (*see also Nephritis*) N05.-

...

- in (due to)

...

- - Goodpasture's syndrome M31.0† N08.5*
- - [granulomatosis with polyangiitis M31.3† N08.5*](#)
- - haemolytic-uraemic syndrome D59.3† N08.2*

...

- - Wegener's granulomatosis M31.3† N08.5*

Granuloma L92.9

...

- gangraenescens ~~M31.2~~ (M9719/3) C86.0

...

- lethal midline (facial) ~~M31.2~~ (M9719/3) C86.0

...

- malignant (facial(e)) ~~M31.2~~ (M9719/3) C86.0

...

- midline (lethal) ~~M31.2~~ (M9719/3) C86.0

...

Granulomatosis L92.9

- with polyangiitis M31.3

- - with

- - - kidney involvement M31.3† N08.5*

- - - lung involvement M31.3† J99.1*

- Langerhans-cell (M9751/3) C96.6

...

- specified NEC L92.8

- Wegener's ~~M31.3~~ — see *Granulomatosis/with polyangiitis*

~~— with~~

~~— kidney involvement M31.3† N08.5*~~

~~— lung involvement M31.3† J99.1*~~

Hepatitis K75.9

...

- infectious, infective *NEC — (see also Hepatitis/viral, virus) B19.9*

- - acute (subacute) B17.9

...

- non-viral NEC K75.9

- - acute K72.0

~~— postimmunisation — see Hepatitis/viral/by type~~

- post-transfusion — see *Hepatitis/viral/by type*

...

- viral, virus (*without hepatic coma*) B19.9

- - with hepatic coma B19.0

...

- - type

...

~~— unspecified (without hepatic coma) B19.9~~

~~— with hepatic coma B19.0~~

~~— acute B17.9~~

Hepatoblastoma (M8970/3) C22.2

Human

...

- T-cell lymphotropic virus ~~type 1 (HTLV-1) infection B33.3~~

- - associated myelopathy G04.1

- - type 1 (HTLV-1) infection B33.3

- - as cause of disease classified elsewhere B97.3

- - carrier Z22.6

Humidifier lung or pneumonitis J67.7

Hyperactive, hyperactivity

...

- detrusor muscle N32.8

- - neurogenic N31.8

- gastrointestinal K31.88

...

Hyperinsulinism ([congenital](#)) ([ectopic](#)) (functional) E16.1

- with [coma \(hypoglycaemic\)](#) E15
- ~~- coma (hypoglycaemic) E15~~
- ~~- ectopic E16.1~~
- therapeutic misadventure (from administration of insulin) T38.3
- ...

Hyperkeratosis (*see also* *Keratosis*) L85.9

- ...
- follicularis Q82.89
- - penetrans (in cutem) L87.0
- [oral K13.2](#)
- palmoplantaris climacterica L85.1
- ...

Hypoglycaemia (spontaneous) E16.2

- ...
- in infant of diabetic mother P70.1
- - gestational diabetes P70.0
- infantile ([persistent hyperinsulinaemic](#)) E16.1
- leucine-induced E71.1
- ...

Infarct, infarction (of)

- kidney N28.0
- [lacunar I63.5](#)
- liver K76.3

Infection, infected (opportunistic) (*see also* *Infestation*) B99

- ...
- ~~- human papillomavirus (as cause of disease classified elsewhere) B97.7~~
- ~~- with~~
- ~~- warts~~
- ~~- anogenital (*see also* *Wart(s)/anogenital region*) A63.00~~
- ~~- specified NEC B07~~
- human ~~T-cell lymphotropic virus type 1 (HTLV-1) B33.3~~
- - papillomavirus (as cause of disease classified elsewhere) B97.7
- - T-cell lymphotropic virus
- - - [associated myelopathy G04.1](#)
- - - [type 1 \(HTLV-1\) infection B33.3](#)
- - - - [as cause of disease classified elsewhere B97.3](#)
- - - - [carrier Z22.6](#)
- Hymenolepis (nana) B71.0
- ...
- Pneumocystis (pneumonia)
- - carinii [B59B48.5†](#) J17.23*
- - - resulting from HIV disease B20
- - jirovecii [B59B48.5†](#) J17.23*
- - - resulting from HIV disease B20
- ...

Influenza

- A/H5N1 (avian) J09
- - with
- - - encephalitis J09† ~~G95.1*~~ [G94.3*](#)
- - - myocarditis J09† I41.1*
- - - otitis media J09† H67.1*
- maternal, affecting fetus or newborn P00.2
- summer, of Italy A93.1
- virus

-- identified (respiratory manifestations) (seasonal) NEC (see also *Influenza/A/H5N1*) J10.1
--- with

----- [encephalopathy \(acute\) J10.8† G94.3*](#)

----- myocarditis J10.8† I41.1*

----- A/H5N1 (avian) J09† I41.1*

----- pneumonia J10.0

----- specified manifestations NEC J10.8

-- not identified (respiratory manifestations) NEC J11.1

--- with

----- [encephalopathy \(acute\) J11.8† G94.3*](#)

----- myocarditis J11.8† I41.1*

----- pneumonia J11.0

----- specified manifestations NEC J11.8

...

Injury (see also *specified injury type*) T14.9

...

- labium (majus) (minus) S39.9

- [labral, labrum](#)

- [shoulder joint \(acute\) S43.4](#)

- [degenerative M75.6](#)

- labyrinth, ear S09.9

...

Insufficiency, insufficient

...

- food [NEC](#) T73.0

- [and water intake \(due to self neglect\) R63.6](#)

- gonadal

...

- idiopathic autonomic G90.0

- [intake of food and water \(due to self neglect\) R63.6](#)

- kidney (see also *Impaired, impairment/kidney*) N19

...

Irritable, irritability R45.4

- bladder N32.8

- [neurogenic N31.8](#)

- bowel (syndrome) K58.9

...

Irritation

...

- bladder N32.8

- [neurogenic N31.8](#)

- brachial plexus G54.0

...

Jaundice (yellow) R17

...

- ~~postimmunisation~~ — see *Hepatitis/viral/by type*

- post-transfusion T80.8

...

Keloid, cheloid L91.00

...

Kennedy

- disease G12.2

- syndrome H47.0

- ulcer (terminal) — see *Injury/pressure*

Kennedy ulcer (terminal) — see *Injury/pressure*

Keratectasia H18.7

...

Keratosis L57.0

...

- obturans, external ear (canal) H60.4

- oral K13.2

- palmaris et plantaris (congenital) (inherited) (symmetrical) Q82.89

- - acquired L85.1

...

Lymphoma (malignant) (M9590/3) C85.9

...

- centroblastic (diffuse) (M9680/3) C83.3

- - follicular (M9698/3) ~~C82.2~~ C82.7

...

- follicular (centroblastic-centrocytic) (nodular) (~~with or without diffuse areas~~) (M9690/3) C82.9

...

- nodular (~~with or without diffuse areas~~) (M9690/3) C82.9

...

- non-Burkitt, undifferentiated cell (M9591/3) C83.3

...

Magnesium metabolism disorder E83.4

Mahaim fibre accessory conduction pathway I45.6

Main en griffe (acquired) M21.54

- congenital Q68.19

...

Myelopathy (spinal cord) G95.9

- drug-induced G95.8

- in (due to)

- - degeneration or displacement, intervertebral disc NEC M51.0

- - infection — see *also* *Encephalitis*

- - - human T-cell lymphotropic virus G04.1

- - intervertebral disc disorder M51.0

...

Naevus (M8720/0) D22.9

...

- Spitz (M8770/0) D22.9

~~— uncertain or unknown behaviour (M8770/1)~~

...

Nutrition deficient or insufficient (see also *Malnutrition*) E46

- due to

- - insufficient food T73.0

- - lack of

- - - care T74.8

- - - food T73.0

- - - - and water intake (due to self neglect) R63.6

Nutritional stunting E45

Obstruction, obstructed, obstructive

...

- intestine (mechanical) (paroxysmal) (postinfective) K56.6
- with
- adhesions (intestinal) (peritoneal) K56.5
- hernia — *see Hernia/by site/with obstruction*
- adynamic (*see also Ileus*) K56.0
- congenital (small) Q41.9
- large Q42.9
- specified part NEC Q42.8
- distal (syndrome) (*see also Cystic/fibrosis*) K56.6
- gallstone K56.3
- neurogenic K56.0
- Hirschsprung's disease or megacolon — *see Hirschsprung's disease or megacolon*
- newborn P76.9
- due to
- fecaliths P76.8
- inspissated milk P76.2
- meconium (plug) P76.0
- in cystic fibrosis E84† P75*
- [volvulus P76.3](#)
- specified NEC P76.8
- reflex K56.0
- volvulus K56.2
- [newborn P76.3](#)
- jejunum (*see also Obstruction/intestine*) K56.6

...

Osteophyte M25.7

- facet joint — *see Spondylosis*
- [spine — see Spondylosis](#)

Osteopoikilosis Q78.81

Paraplegia (lower) G82.2-

- ataxic — *see Degeneration/combined*
- congenital (cerebral) G80.8
- spastic G80.09
- flaccid G82.0-
- functional (hysterical) F44.4
- hereditary, spastic G11.4
- [human T-cell lymphotropic virus associated G04.1](#)
- hysterical F44.4
- Pott's A18.0† M49.0-*
- psychogenic F44.4
- spastic G82.1-
- Erb's spinal, syphilitic A52.1
- hereditary G11.4
- tropical G04.1
- syphilitic (spastic) A52.1
- transient R29.88
- traumatic (spinal cord), current episode — *see Injury/spinal cord*
- tropical spastic G04.1

Persistence, persistent (congenital)

...

- ductus arteriosus (botalli) Q25.0
- fetal
- - circulation [P29.3Q25.0](#)
- ...

Pneumocystosis [B59B48.5†](#) J17.23*
 - resulting from HIV disease B20
 ...

Pneumonia (acute) (double) (migratory) (purulent) (septic) (unresolved) J18.9

- ...
- in (due to)
- - actinomycosis A42.0† J17.0*
- - adenovirus J12.0
- - amoebiasis [A06.5† J17.3*](#)
- - anthrax A22.1† J17.0*
- ...
- - pneumocystosis (Pneumocystis carinii) (Pneumocystis jirovecii) [B59B48.5†](#) J17.23*
- ...
- interstitial J84.9
- ...
- - plasma cell [B59B48.5†](#) J17.23*
- ...
- plasma cell (of infants) [B59B48.5†](#) J17.23*
- ...
- Pneumocystis (carinii) (jirovecii) [B59B48.5†](#) J17.23*
- ...

Polyneuropathy (peripheral) G62.9

- ...
- in (due to)
-
- - systemic
- - - connective tissue disorder M35.9† G63.5*
- - - lupus erythematosus M32.1† G63.5*
- - - sclerosis [M34.8† G63.5*](#)
- ...

Pulse

...

[Pulseless electrical activity NEC R00.3](#)

Pulsus alternans or trigeminus R00.8

...

Sarcomatosis

...

[Sarcopenia M62.5-](#)

Sarcosinaemia E72.5

Schwannoma (M9560/0) — *see also Neoplasm/nerve/benign*

- ...
- psammomatous (M9560/0)
- ...
- schwannomatosis — *see Schwannomatosis*
- [Schwannomatosis \(multiple\)\(nonmalignant\) Q85.0](#)
- malignant (M9560/3) — *see Neoplasm/nerve/malignant*
- Schwartz(-Jampel) syndrome** Q78.89

Sclerosis, sclerotic

...

- systemic M34.9
- - with
- - - lung involvement M34.8† J99.1*
- - - myopathy M34.8† G73.7*
- - - [polyneuropathy M34.8† G63.5*](#)
- - drug-induced M34.2
- ...

Shunt

- arteriovenous (dialysis) Z99.2
- - pulmonary (acquired) NEC I28.0
- - - congenital Q25.79
- cerebral ventricle (communicating) in situ Z98.2
- [intrahepatic vascular, acquired K76.8](#)
- surgical, prosthetic, with complications — see *Complication(s)/graft/arterial*

Spitting blood (see also *Haemoptysis*) R04.2

[Spitz naevus \(M8770/0\) D22.9](#)

Splanchnoptosis K63.4

Stiff neck (see also *Torticollis*) M43.6

Stiff-person [man] syndrome G25.8

Stiffness, joint M25.69

...

Stroke (apoplectic) (brain) (paralytic) I64

- epileptic — see *Epilepsy*
- [haemorrhagic \(see also *Haemorrhage/intracerebral*\) I61.9](#)
- heart — see *Disease/heart*
- heat T67.0
- in pregnancy, childbirth or puerperium O99.4
- ischaemic (see also *Infarction/cerebral*) I63.9
- lightning T75.0

Syndrome [NEC](#) — (see also *Disease*) [U91](#)

...

- Axenfeld's Q13.8

- [Axenfeld-Rieger Q13.8](#)

...

- mesenteric

- - artery (superior) K55.1

- - vascular insufficiency K55.1

- [metabolic NEC E88.8](#)

- - with

- - - [diabetes mellitus E1-.72](#)

- - - [intermediate hyperglycaemia E09.72](#)

- Meyer-Schwickerath and Weyers Q87.09

...

- stiff-[person \[man\] G25.8](#)

...

Takayasu's disease or syndrome M31.4

[Takotsubo \(cardiomyopathy\) I42.8](#)

Talcosis (pulmonary) J62.0

Tear, torn (traumatic) (see also *Wound, open*) T14.1

...

- knee cartilage

- - articular (current) S83.3
- - old M23.2-
- [labral, labrum](#)
- - acute — see [Injury/labral, labrum](#)
- - degenerative [shoulder joint M75.6](#)
- ligament — see also *Sprain*

...

Thalassaemia (anaemia) (disease) D56.9

...

- beta (severe) D56.1
- - [minor D56.3](#)
- - sickle-cell D57.2

...

- minor D56.[93](#)

...

Tic (disorder) F95.9

...

- postchoreic G25.6
- [psychogenic F95.-](#)
- salaam R25.8

...

Tracheobronchitis (15 years of age and above) (see also *Bronchitis*) J40

...

- influenzal (see also *Influenza/with/respiratory manifestations*) J11.1
- ~~senile (chronic) J42~~
- under 15 years of age J20.-

...

Tuberculosis, tubercular, tuberculous (caseous) (degeneration) (gangrene) (necrosis) A16.9

- pulmonary (cavitated) (fibrotic) (infiltrative) (nodular) A16.2
- - without mention of bacteriological or histological confirmation A16.2
- - bacteriological and histological examination not done A16.1
- - bacteriologically and histologically negative A16.0
- - childhood type or first infection A16.7
- - - with bacteriological and histological confirmation A15.7
- - confirmed (by)
- - - bacteriologically (~~molecular biological method~~) A15.0
- - - culture only A15.1
- - - histologically A15.2
- - - [nucleic acid amplification test with or without culture A15.0](#)
- - - [polymerase chain reaction with or without culture A15.0](#)
- - sputum microscopy with or without culture A15.0
- - unspecified means A15.3
- - primary (complex) A16.7

...

Tumour (M8000/1) — see also *Neoplasm/uncertain behaviour*

...

- neuro-endocrine (M8246/3) — see also *Carcinoma/~~neuro-endocrine~~[neuroendocrine](#)*

- - [benign \(M8246/0\)](#)
- - grade I (M8240/3)
- - grade II (M8249/3)
- - in situ (M8246/2)
- - [specified site — see Neoplasm/malignant](#)
- - uncertain or unknown behaviour (M8246/1)
- - [unspecified site \(M8246/3\)](#)
- neuroepithelial, dysembryoplastic (M9413/0) — *see Neoplasm/benign*

...

- Volvulus** (bowel) (colon) (intestine) K56.2
- congenital Q43.89
 - fallopian tube N83.5
 - [newborn P76.3](#)
 - oviduct N83.5
 - stomach (due to absence of gastrocolic ligament) K31.88

Web, webbed

- fingers Q70.1
- larynx (glottic) (subglottic) Q31.0
- neck Q18.3
- oesophagus ([acquired](#)) ~~Q39.4~~ [K22.2](#)
- - [congenital Q39.4](#)
- popliteal syndrome Q87.89
- toes Q70.3

Wegener's granulomatosis or syndrome ([see also Granulomatosis/with polyangiitis](#)) M31.3

- ~~with~~
- ~~kidney involvement M31.3† N08.5*~~
- ~~lung involvement M31.3† J99.1*~~

...

Australian Coding Standards

0012 SUSPECTED CONDITIONS

...

**OBSERVATION FOR SUSPECTED DISEASES AND CONDITIONS, [RULED OUT](#)
(Z03.0–Z03.9)**

Codes from category Z03 are assigned as principal diagnoses for admissions to evaluate the patient's condition when there is some evidence to suggest the existence of an abnormal condition or following an accident or other incident that ordinarily results in a health problem, and where no supporting evidence for the suspected condition is found and no treatment is currently required. An observation code is not assigned with additional related codes. If symptoms related to the suspected condition are noted, then the symptom codes are assigned, not Z03.-.

...

0104 VIRAL HEPATITIS

DEFINITION

Viral hepatitis

Viral hepatitis is a viral infection that results specifically in liver inflammation and injury. Viruses A, B, C, D and E may result in acute viral hepatitis. Acute viral hepatitis infections with viruses B, C, D and E may progress to chronic viral hepatitis.

Viral hepatitis that lasts for more than six months is generally defined as 'chronic'. A diagnosis of chronic hepatitis is based on positive serologic and virologic tests and a demonstrated, or likely, duration of infection of greater than six months.

...

CLASSIFICATION

...

The following table summarises general classification guidelines for hepatitis A, B, C, D and E (see also 3. *Manifestations of hepatitis* and 4. *Cured/cleared hepatitis C* below):

| CLASSIFICATION | | |
|--------------------------------|--|--|
| Viral Hepatitis/type | Code/description | General guidelines |
| ... | | |
| Hepatitis D (with acute HBV) | B16.0 <i>Acute hepatitis B with delta-agent (coinfection) with hepatic coma</i> | <ul style="list-style-type: none"> ... Where hepatitis D complicates the pregnancy, childbirth or puerperium, assign O98.4 and an additional code from B16.0, B16.1, B17.0 or B18.0. |
| Hepatitis D (with chronic HBV) | B16.1 <i>Acute hepatitis B with delta-agent (coinfection) without hepatic coma</i> | |
| | B17.0 <i>Acute delta-(super)infection in chronic hepatitis B</i> | |
| Hepatitis D | B18.0 <i>Chronic viral hepatitis B with delta-agent</i> | |
| | O98.4 <i>Viral hepatitis in pregnancy, childbirth and the puerperium</i> | |
| ... | | |

...



**ICD-10-AM/ACHI/ACS
Eleventh Edition
Addenda Proposal**

**WHO Updates (Chapter 19 & 20)
Manchester 2015 & Tokyo 2016**

Introduction/Rationale:

This addenda proposal includes amendments based on the official changes to ICD-10 approved by Heads of Collaborating Centres at the annual meeting in Manchester 2015, and Tokyo 2016). ACCD proposes to include the WHO updates in ICD-10-AM Eleventh Edition, where clinical concepts are not already classified in ICD-10-AM Tenth Edition.

Tabular List

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 20

EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, U90, V00–Y98)

...

Accidents (V00–X59)

...

Other external causes of accidental injury (W00–X59)

...

Exposure to inanimate mechanical forces (W20–W49)

...

W20 Struck by thrown, projected or falling object(s)

...

W22 Striking against or struck by other object(s)

...

W24 Contact with lifting and transmission device(s), not elsewhere classified

...

Accidental poisoning by and exposure to noxious substances (X40–X49)

...

X47 Accidental poisoning by and exposure to [carbon monoxide and](#) other gases and vapours

...

Intentional self-harm (X60–X84)

...

X67 Intentional self-poisoning by and exposure to [carbon monoxide and](#) other gases and vapours

...

Assault (X85–Y09)

...
X88 Assault by [poisoning and exposure to carbon monoxide and other](#) gases and vapours
...

Event of undetermined intent (Y10–Y34)

...
Y17 Poisoning by and exposure to [carbon monoxide and](#) other gases and vapours, undetermined intent
...

T60 Toxic effect of pesticides

Includes: wood preservatives

T60.0 Organophosphate and carbamate insecticides

T60.1 Halogenated insecticides

Excludes: chlorinated hydrocarbons (T53.-)

T60.2 Other [and unspecified](#) insecticides

T60.3 Herbicides and fungicides

T60.4 Rodenticides

Vacor

Excludes: strychnine and its salts (T65.1)

T60.8 Other pesticides

T60.9 Pesticide, unspecified

W20 Struck by thrown, projected or falling object(s)

Includes: cave-in without asphyxiation or suffocation
collapse of building, except on fire
falling:
• rock
• stone
• tree

Excludes: collapse of burning building (X00)
falling object in:
• cataclysm (X34–X39)
• machinery accident (W24, W28–W31)
• transport accident (V00–V99)
object set in motion by:
• explosion (W35–W40)
• firearm (W32, W34.-)
sports equipment (W21.-)

W22 Striking against or struck by other object(s)

Includes: walked into wall

W23 **Caught, crushed, jammed or pinched in or between objects**

Excludes: injury caused by:

- cutting or piercing instruments (W25–W27)
- lifting and transmission devices (W24)
- machinery (W28–W31)
- nonpowered hand tools (W27)
- transport vehicle being used as a means of transportation (V00–V99) struck by thrown, projected or falling object(s) (W20)

⊕W23.0 **Caught, crushed, jammed or pinched in or between door**

Caught, crushed, jammed or pinched between:

- revolving doors
- sliding door and door-frame

W24 **Contact with lifting and transmission device(s), not elsewhere classified**

Includes: chain hoist
drive belt
pulley (block)
rope
transmission belt or cable
winch
wire

Excludes: fall from stationary mobile elevated work platform (MEWP) (cherry picker) (sky lift) (W17.5)
transport accidents (V00–V99)

W26 **Contact with other sharp object(s)**

Excludes: sharp object(s) embedded in skin (W45.-)

W26.0 **Contact with knife, sword or dagger**

W26.8 **Contact with other sharp object(s), not elsewhere classified**

Edge of stiff paper
Tin can lid

W26.9 **Contact with unspecified sharp object(s)**

X47 **Accidental poisoning by and exposure to carbon monoxide and other gases and vapours**

Excludes: carbon monoxide from smoke and fumes due to fire and flames (X00-X09)
metal fumes and vapours (X49)

⊕X47.0 **Accidental poisoning by and exposure to ~~motor vehicle~~ carbon monoxide from combustion engine exhaust**

Includes: that due to exhaust (gas) from:
• any type of combustion engine
• gas engine
• motor
• pump
• vehicle, not in transit

Excludes: accidental poisoning by and exposure to carbon monoxide from exhaust of motor vehicle while in transit (V01-V99)

- ⊕X47.1 Accidental poisoning by and exposure to [carbon monoxide from utility gas](#)~~liquefied petroleum gas [LPG]~~
~~Accidental poisoning by and exposure to bottled LPG~~

Includes: that due to carbon monoxide from:

- [acetylene](#)
- [gas NOS used for lighting, heating, cooking](#)
- [water gas](#)

- ⊕X47.2 Accidental poisoning by and exposure to [carbon monoxide from other domestic fuels](#)~~other specified utility gas~~

Includes: that due to carbon monoxide from:

- [charcoal](#)
- [coal](#)
- [coke \(in domestic stove, portable grill, barbeque or fireplace \(free standing\)\)](#)
- [kerosene of paraffin](#)
- [wood](#)

[X47.3 Accidental poisoning by and exposure to carbon monoxide from other sources](#)

Includes: that due to carbon monoxide from:

- [blast furnace gas](#)
- [fuels in industrial use](#)
- [kiln vapour](#)

[X47.4 Accidental poisoning by carbon monoxide from unspecified sources](#)

- ⊕X47.8 Accidental poisoning by and exposure to other specified [gases](#) and vapours

~~Accidental poisoning by and exposure to:~~

- ~~carbon monoxide~~
- ~~helium (nonmedicinal) NOS~~
- ~~lacrimogenic gas [tear gas]~~
- ~~nitrogen oxides~~
- ~~sulfur dioxide~~

Includes: that due to:

- [helium \(nonmedicinal\) NOS](#)
- [lacrimogenic gas \[tear gas\]](#)
- [nitrogen oxides](#)
- [sulphur dioxide](#)

Excludes: medicinal helium (X44)

- ⊕X47.9 Accidental poisoning by and exposure to unspecified [gases](#) and vapours

X53

Lack of food

Includes: lack of food as the cause of:

- inanition
- insufficient nourishment
- starvation

Excludes: insufficient intake of food and water (due to self neglect) (R63.6)
neglect or abandonment by others (Y06.0-)
self neglect NOS (R46.8)

X67 Intentional self-poisoning by and exposure to [carbon monoxide and other gases and vapours](#)

Excludes: [carbon monoxide from smoke, fire and flames \(X76\)](#)
[metal fumes and vapours \(X69\)](#)

⊕X67.0 Intentional self-poisoning by and exposure to [carbon monoxide](#) ~~motor from combustion engine vehicle~~ exhaust

Includes: that due to exhaust (gas) from:

- [any type of combustion engine](#)
- [gas engine](#)
- [motor](#)
 - [pump](#)
 - [vehicle, not in transit](#)

Excludes: [accidental poisoning by and exposure to carbon monoxide from exhaust of motor vehicle while in transit \(V01-V99\)](#)

⊕X67.1 Intentional self-poisoning by and exposure to [carbon monoxide from utility gas](#) ~~liquefied petroleum gas [LPG]~~
~~Intentional self-poisoning by and exposure to bottled LPG~~

Includes: that due to carbon monoxide from:

- [acetylene](#)
- [gas NOS used for lighting, heating, cooking](#)
- [water gas](#)

⊕X67.2 Intentional self-poisoning by and exposure to [carbon monoxide from other domestic fuels](#) ~~other specified utility gas~~

Includes: that due to carbon monoxide from:

- [charcoal](#)
- [coal](#)
- [coke \(in domestic stove, portable grill, barbeque or fireplace \(free standing\)\)](#)
- [kerosene or paraffin](#)
- [wood](#)

[X67.3 Intentional self-poisoning by and exposure to carbon monoxide from other sources](#)

Includes: that due to carbon monoxide from:

- [blast furnace gas](#)
- [fuels in industrial use](#)
- [kiln vapour](#)

[X67.4 Intentional self-poisoning by carbon monoxide from unspecified sources](#)

⊕X67.8 Intentional self-poisoning by and exposure to other specified [gases](#) or vapours

Includes: that due to:

- [helium \(nonmedicinal\) NEC](#)
- [lacrimogenic gas \[tear gas\]](#)
- [nitrogen oxides](#)
- [sulfur dioxide](#)

Excludes: [medicinal helium \(X64\)](#)
~~Intentional self-poisoning by and exposure to:~~

- ~~carbon monoxide~~
- ~~helium (nonmedicinal) NOS~~
- ~~lacrimogenic gas [tear gas]~~
- ~~nitrogen oxides~~
- ~~sulfur dioxide~~

⊕X67.9 Intentional self-poisoning by and exposure to unspecified [gases](#) or vapours

ASSAULT

(X85–Y09)

▽ 2008

Includes: homicide
injuries inflicted by another person with intent to injure or kill, by any means

Excludes: injuries due to:
• legal intervention (Y35.-)
• operations of war (Y36.-)

The following fifth character subdivisions are for use with categories X85–Y09:

Insert fourth character filler digit '0' for categories X85–~~X87-X91~~, X89–X91, X93, X96–X98, Y00–Y01 and Y04–Y09.

This subdivision is used to describe the relationship of the perpetrator to the victim.

...

X88 **Assault by poisoning by and exposure to, carbon monoxide and other gases and vapours**

See fifth character subdivisions

Excludes: carbon monoxide from smoke, fire and flames (X97)

X88.0 **Assault by poisoning and exposure to carbon monoxide from combustion engine exhaust**

See fifth character subdivisions

Includes: that due to exhaust (gas) from:
• any type of combustion engine
• gas engine
• motor
• pump
• vehicle, not in transit

Excludes: accidental poisoning by and exposure to carbon monoxide from exhaust of motor vehicle while in transit (V01–V99)

X88.1 **Assault by poisoning and exposure to carbon monoxide from utility gas**

See fifth character subdivisions

Includes: that due to carbon monoxide from:
• acetylene
• gas NOS used for lighting, heating, cooking
• water gas

X88.2 **Assault by poisoning and exposure to carbon monoxide from other domestic fuels**

See fifth character subdivisions

Includes: that due to carbon monoxide from:
• charcoal
• coal
• coke (in domestic stove, portable grill, barbeque or fireplace (free standing))
• kerosene of paraffin
• wood

X88.3 **Assault by poisoning and exposure to carbon monoxide from other sources**

See fifth character subdivisions

Includes: that due to carbon monoxide from:
• blast furnace gas
• fuels in industrial use

- [kiln vapour](#)

X88.4 [Assault by poisoning and exposure to carbon monoxide from unspecified sources](#)

See fifth character subdivisions

X88.8 [Assault by poisoning and exposure to other specified gases and vapours](#)

See fifth character subdivisions

Includes: that due to:

- [helium \(nonmedicinal\) NEC](#)
- [lacrimogenic gas \[tear gas\]](#)
- [nitrogen oxides](#)
- [sulfur dioxide](#)

X88.9 [Assault by poisoning and exposure to unspecified gases and vapours](#)

See fifth character subdivisions

Y17 **Poisoning by and exposure to [carbon monoxide and](#) other gases and vapours, undetermined intent**

Excludes: [carbon monoxide from smoke, fire and flames, undetermined intent \(Y26\)](#)
metal fumes and vapours (Y19)

⚡Y17.0 **Poisoning by and exposure to [carbon monoxide from combustion engine exhaust](#) ~~motor vehicle exhaust~~, undetermined intent**

Includes: that due to exhaust (gas) from:

- [any type of combustion engine](#)
- [gas engine](#)
- [motor](#)
 - [pump](#)
 - [vehicle, not in transit](#)

Excludes: [accidental poisoning by and exposure to carbon monoxide from exhaust of motor vehicle while in transit \(V01-V99\)](#)

⚡Y17.1 **Poisoning by and exposure to [carbon monoxide from utility gas](#) ~~liquefied petroleum gas [LPG]~~, undetermined intent**

~~Undetermined intent of poisoning by and exposure to bottled LPG~~

Includes: that due to carbon monoxide from:

- [acetylene](#)
- [gas NOS used for lighting, heating, cooking](#)
- [water gas](#)

⚡Y17.2 **Poisoning by and exposure to [carbon monoxide from other domestic fuels](#) ~~other specified utility gas~~, undetermined intent**

Includes: that due to carbon monoxide from:

- [charcoal](#)
- [coal](#)
- [coke \(in domestic stove, portable grill, barbeque or fireplace \(free standing\)\)](#)
- [kerosene or paraffin](#)
- [wood](#)

Y17.3 [Poisoning by and exposure to carbon monoxide from other sources, undetermined intent](#)

Carbon monoxide from:

- [blast furnace gas](#)
- [fuels in industrial use](#)
- [kiln vapour](#)

Y17.4 [Poisoning by and exposure to carbon monoxide from unspecified sources, undetermined intent](#)

⚠Y17.8 Poisoning by and exposure to other specified gas~~es~~ or vapours, undetermined intent

~~Undetermined intent of poisoning by and exposure to:~~

- ~~• carbon monoxide~~
- ~~• helium (nonmedicinal) NOS~~
- ~~• lacrimogenic gas [tear gas]~~
- ~~• nitrogen oxides~~
- ~~• sulfur dioxide~~

Includes: that due to:

- [helium \(nonmedicinal\) NEC](#)
- [lacrimogenic gas \[tear gas\]](#)
- [nitrogen oxides](#)
- [sulfur dioxide](#)

Excludes: medicinal helium (Y14)

⚠Y17.9 Poisoning by and exposure to unspecified gas~~es~~ or vapours, undetermined intent

Alphabetic Index

Section II – External Causes of Injury

Assault (by) (homicidal) (in) Y09.0-

...

- gases and vapours (corrosive), except drugs and biological substances X88.~~90~~-

...

- poisoning ([generated by](#)) X90.0-

- - [carbon monoxide NEC X88.4-](#)

- - - [specified source – see Assault/poisoning/gases and vapours](#)

- - - [utility gas X88.1-](#)

- - chemical(s) X90.0-

- - - specified NEC X89.0-

- - drugs or biological substances X85.0-

- - [exhaust gas \(from combustion engine\) X88.0-](#)

- - gases and vapours (corrosive), except drugs and biological substances ([see also Table of drugs and chemicals](#)) X88.~~90~~-

- - - [barbeque X88.2-](#)

- - - [domestic source X88.2-](#)

- - - [fire place X88.2-](#)

- - - [gas engine X88.0-](#)

- - - [industrial use X88.3-](#)

- - - [items used for lighting, heating and cooking NEC X88.1-](#)

- - - [motor \(pump\) \(vehicle\) X88.0-](#)

- - - [portable grill X88.2-](#)

- - noxious substances NEC X90.0-

- - - specified X89.0-

- - [utility gas NEC X88.8-](#)

- puncture, any part of body NEC X99.-

...

Poisoning (accidental) (by) (see also *Table of drugs and chemicals*) X49

- assault – see [Assault/poisoning](#)

- carbon monoxide (generated by) [NEC X47.4](#)

~~– generated by~~

~~– motor vehicle (see also note 6, *Tabular list, Chapter 20*) X47.0~~

~~– intentional self-poisoning X67.0~~

~~– undetermined intent Y17.0~~

~~– watercraft (in transit) (not in transit) V93.-~~

- - combustion engine not in transit X47.0

- - motor vehicle (see also note 6, *Tabular list, Chapter 20*) X47.0

- - - intentional self-poisoning X67.0

- - - undetermined intent Y17.0

- - specified source – see [Poisoning/gases and vapour](#)

- - utility gas X47.1

- - watercraft (in transit) (not in transit) V93.-

- exhaust gas (generated by)

~~– generated by~~

~~– motor vehicle (see also note 6, *Tabular list, Chapter 20*) X47.0~~

~~– intentional self-poisoning X67.0~~

~~– undetermined intent Y17.0~~

~~– watercraft (in transit) (not in transit) V93.-~~

- - combustion engine not in transit X47.0

- - motor vehicle (see also note 6, *Tabular list, Chapter 20*) X47.0

- - - intentional self-poisoning X67.0

- - - undetermined intent Y17.0

- - watercraft (in transit) (not in transit) V93.-

- fumes or smoke due to

- - explosion (see also *Explosion*) W40

- - fire (see also *Exposure/fire*) X09

- - ignition (see also *Ignition*) X09

- gases and vapour (generated by) X47.-9

- - barbeque X47.2

- - domestic stove X47.2

- - fire place X47.2

- - gas engine X47.0

- - in legal intervention Y35.2

- - industrial use X47.3

- - intentional self-poisoning X67.-

- - items used for lighting, heating, cooking [NEC X47.1](#)

- - legal execution Y35.5

- - motor (pump) (vehicle) (see also *Poisoning/exhaust gas/motor vehicle*) X47.0

- - portable grill X47.2

- - undetermined intent Y17.-

- in war operations (chemical weapons) Y36.7

- legal

- - execution Y35.5

- - intervention by gas Y35.2

- plant, thorns, spines or sharp leaves (see also *Table of drugs and chemicals*) X28

- - marine or sea plants (venomous) X26.-

- utility gas [NEC X47.8](#)

Suicide, suicidal (attempted) (by) X84

...

- lying before moving object NEC X81.9

...

- poisoning — see [also](#) *Table of drugs and chemicals*

- - carbon monoxide NEC X67.4

- - - specified source — see *Suicide/poisoning/gases and vapour*

- - - utility gas X67.1

- - exhaust gas (from combustion engine) X67.0

- - gases and vapour

- - - barbeque X67.2

- - - domestic stove X67.2

- - - fire place X67.2

- - - gas engine X67.0

- - - industrial use X67.3

- - - items used for lighting, heating, cooking NEC X67.1

- - - motor (pump) (vehicle) X67.0

- - - portable grill X67.2

- - utility gas NEC X67.8

- puncture (any part of body) — see *Suicide, suicidal/sharp object*

...

Section III - Table of drugs and chemicals

Key: Generic Names (Brand Names)

Note: digits are ignored in the alphabetical sequencing

of terms in this table.

...

| | Chapter 19 | Poisoning | | | Adverse effect in therapeutic use |
|--|----------------|--------------------|-----------------------|---------------------|-----------------------------------|
| | | Accidental | Intentional Self-harm | Undetermined intent | |
| Acetylene (gas) | T59.8 | X47.1 8 | X67.1 8 | Y17.1 8 | - |
| - dichloride..... | T53.6 | X46 | X66 | Y16 | - |
| - industrial..... | T59.8 | X47.3 8 | X67.3 8 | Y17.3 8 | - |
| - tetrachloride | T53.6 | X46 | X66 | Y16 | - |
| ... | | | | | |
| Blast furnace gas (carbon monoxide from)..... | T58 | X47.3 8 | X67.3 8 | Y17.3 8 | - |
| ... | | | | | |
| Butane (distributed in mobile container)..... | T59.8 | X47.8 4 | X67.8 4 | Y17.8 4 | - |
| - <u>combustion (incomplete)</u> | <u>T58</u> | <u>X47.8</u> | <u>X67.8</u> | <u>Y17.8</u> | - |
| - distributed through pipes..... | T59.8 | X47.8 4 | X67.8 4 | Y17.8 4 | - |
| - incomplete combustion | T58 | X47.8 | X67.8 | Y17.8 | - |
| ... | | | | | |
| Carbon | | | | | |
| ... | | | | | |
| - monoxide (from incomplete combustion (<u>incomplete</u>)) | T58 | X47.4 8 | X67.4 8 | Y17.4 8 | - |
| - - motor vehicle exhaust..... | T58 | X47.0 | X67.0 | Y17.0 | - |
| - - <u>specified source NEC</u> | <u>T58</u> | <u>X47.-</u> | <u>X67.-</u> | <u>Y17.-</u> | - |
| ... | | | | | |
| Charcoal | T47.6 | X44 | X64 | Y14 | Y53.6 |
| ... | | | | | |
| - fumes (carbon monoxide) | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| - - industrial..... | T58 | X47.3 8 | X67.3 8 | Y17.3 8 | - |
| ... | | | | | |
| Coal (carbon monoxide from) | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| ... | | | | | |
| Coke fumes or gas (carbon monoxide)..... | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| - industrial use | T58 | X47.3 8 | X67.3 8 | Y17.3 8 | - |

| | | | | | |
|--|-------|--------------------|--------------------|--------------------|-------|
| ... | | | | | |
| Combustion gas | T58 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Corrosive NEC | T54.9 | X49 | X69 | Y19 | - |
| ... | | | | | |
| - fumes NEC | T54.9 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Domestic gas | T58 | X47. 82 | X67. 82 | Y17. 82 | - |
| ... | | | | | |
| Exhaust gas | T58 | X47. 08 | X67. 08 | Y17. 08 | - |
| - motor vehicle | T58 | X47.0 | X67.0 | Y17.0 | - |
| ... | | | | | |
| Formalin (vapour) | T59.2 | X47. 8- | X67. 8- | Y17. 8- | Y56.0 |
| ... | | | | | |
| Fuel | | | | | |
| - automobile | T52.0 | X46 | X66 | Y16 | - |
| - - exhaust gas | T58 | X47.0 | X67.0 | Y17.0 | - |
| - - vapour NEC | T52.0 | X46 | X66 | Y16 | - |
| - gas (domestic use) | T58 | X47.2 | X67.2 | Y17.2 | - |
| - industrial; incomplete (from combustion (incomplete)) | T58 | X47. 38 | X67. 38 | Y17. 38 | - |
| ... | | | | | |
| Fumes (from) | T59.9 | X47.9 | X67.9 | Y17.9 | - |
| - carbon monoxide | T58 | X47. 48 | X67. 48 | Y17. 48 | - |
| - - motor vehicle exhaust | T58 | X47.0 | X67.0 | Y17.0 | - |
| - charcoal (domestic use) | T58 | X47. 28 | X67. 28 | Y17. 28 | - |
| - coke (in domestic stoves, fireplaces) | T58 | X47. 28 | X67. 28 | Y17. 28 | - |
| - corrosive NEC | T59.8 | X47. 89 | X67. 89 | Y17. 89 | - |
| - ether — <i>see Ether</i> | - | - | - | - | - |
| - lead — <i>see Lead</i> | - | - | - | - | - |
| - metal — <i>see Metals OR the specified metal</i> | - | - | - | - | - |
| - motor vehicle exhaust | T58 | X47.0 | X67.0 | Y17.0 | - |
| - specified source NEC | T59.9 | X47. 98 | X67. 98 | Y17. 98 | - |
| ... | | | | | |
| Furnace (coal burning) (domestic), gas from industrial | T58 | X47. 29 | X67. 29 | Y17. 29 | - |
| ... | | | | | |
| Gas | T59.9 | X47.9 | X67.9 | Y17.9 | - |

| | | | | | |
|---|-------|--------------------|--------------------|--------------------|-------|
| - acetylene..... | T59.8 | X47.1 8 | X67.1 8 | Y17.1 8 | - |
| - air contaminants, source or type not specified | T59.9 | X47.9 | X67.9 | Y17.9 | - |
| - anaesthetic..... | T41.0 | X44 | X64 | Y14 | Y48.0 |
| - blast furnace | T58 | X47.3 9 | X67.3 9 | Y17.3 9 | - |
| - butane — <i>see Butane</i> | - | - | - | - | - |
| - carbon monoxide | T58 | X47.4 8 | X67.4 8 | Y17.4 8 | - |
| - - motor vehicle exhaust..... | T58 | X47.0 | X67.0 | Y17.0 | - |
| - chlorine..... | T59.4 | X47.8 | X67.8 | Y17.8 | - |
| - coal..... | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| - combustion (incomplete) NEC | T58 | X47.9 | X67.9 | Y17.9 | - |
| - cyanide..... | T57.3 | X47.8 | X67.8 | Y17.8 | - |
| - dicyanogen..... | T65.0 | X47.8 | X67.8 | Y17.8 | - |
| - domestic..... | T58 | X47.8 2 | X67.8 2 | Y17.8 2 | - |
| - exhaust..... | T58 | X47.0 8 | X67.0 8 | Y17.0 8 | - |
| - - motor vehicle | T58 | X47.0 | X67.0 | Y17.0 | - |
| - from utility (for cooking <u>NEC</u> , heating or lighting) | T58 | X47.1 2 | X67.1 2 | Y17.1 2 | - |
| - from wood- or coal-burning stove or fireplace | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| - fuel (domestic use)..... | T58 | X47.2 8 | X67.2 8 | Y17.2 8 | - |
| - garage | T58 | X47.9 | X67.9 | Y17.9 | - |
| - hydrocarbon NEC | T59.8 | X47.8 | X67.8 | Y17.8 | - |
| - - liquefied — <i>see Butane</i> | - | - | - | - | - |
| - hydrocyanic acid | T59.8 | X47.8 | X67.8 | Y17.8 | - |
| - illuminating | T58 | X47.8 | X67.8 | Y17.8 | - |
| - incomplete combustion, any | T58 | X47.8 | X67.8 | Y17.8 | - |
| - kiln..... | T58 | X47.3 8 | X67.3 8 | Y17.3 8 | - |
| - lacrimogenic..... | T59.3 | X47.8 | X67.8 | Y17.8 | - |
| - liquefied petroleum — <i>see Butane</i> | - | - | - | - | - |
| - marsh | T59.8 | X47.8 | X67.8 | Y17.8 | - |
| - motor | - | - | - | - | - |
| - - exhaust | T58 | X47.0 8 | X67.0 8 | Y17.0 8 | - |
| - - vehicle exhaust..... | T58 | X47.0 | X67.0 | Y17.0 | - |
| - mustard, not in war | T59.8 | X47.8 | X67.8 | Y17.8 | - |
| - natural | T59.8 | X47.8 2 | X67.8 2 | Y17.8 2 | - |
| - nerve, not in war | T59.9 | X47.8 | X67.8 | Y17.8 | - |
| - oil..... | T52.0 | X46 | X66 | Y16 | - |
| - producer..... | T58 | X47.8 9 | X67.8 9 | Y17.8 9 | - |
| - propane — <i>see Propane</i> | - | - | - | - | - |
| - refrigerant (chlorofluorocarbon) | T53.5 | X46 7.8 | X66 7.8 | Y16 7.8 | - |
| - - not chlorofluorocarbon | T59.8 | X47.8 | X67.8 | Y17.8 | - |

| | | | | | |
|--|-------------------------------|---------------------------|---------------------------|---------------------------|------------------|
| - sewer..... | T59.9 | X47. 89 | X67. 89 | Y17. 89 | - |
| - specified source NEC | T59.9 | X47. 98 | X67. 98 | Y17. 98 | - |
| - stove..... | T58 | X47.2 | X67.2 | Y17.2 | - |
| - therapeutic | T41.5 | X44 | X64 | Y14 | Y48.5 |
| - water | T58 | X47. 18 | X67. 18 | Y17. 18 | - |
| ... | | | | | |
| Insecticide NEC | T60. 29 | X48 | X68 | Y18 | - |
| - carbamate | T60.0 | X48 | X68 | Y18 | - |
| - halogenated | T60.1 | X48 | X68 | Y18 | - |
| - mixed..... | T60. 29 | X48 | X68 | Y18 | - |
| - organochlorine | T60.1 | X48 | X68 | Y18 | - |
| ... | | | | | |
| Kiln gas or vapour (carbon monoxide) | T58 | X47. 38 | X67. 38 | Y17. 38 | - |
| ... | | | | | |
| Lung irritant (gas) NEC | T59.8 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Monoxide, carbon | T58 | X47. 48 | X67. 48 | Y17. 48 | - |
| ... | | | | | |
| Motor | T58 | X47.0 | X67.0 | Y17.0 | - |
| - exhaust gas..... | T58 | X47. 08 | X67. 08 | Y17. 08 | - |
| - vehicle exhaust gas | T58 | X47.0 | X67.0 | Y17.0 | - |
| ... | | | | | |
| Natural gas | T59.8 | X47.2 | X67.2 | Y17.2 | - |
| - incomplete combustion (<u>incomplete</u>) | T58 | X47. 18 | X67. 18 | Y17. 18 | - |
| ... | | | | | |
| Oil (of) | | | | | |
| ... | | | | | |
| - fumes | T59.8 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Phenbutrazate | T50.5 | X44 | X64 | Y14 | Y57.0 |
| Phencyclidine | T41.1 <u>T40.9</u> | X40 <u>X42</u> | X60 <u>X62</u> | Y10 <u>Y12</u> | Y48.1 |
| Phendimetrazine | T50.5 | X44 | X64 | Y14 | Y57.0 |
| ... | | | | | |
| Propane (distributed in mobile container) | T59.8 | X47. 84 | X67. 84 | Y17. 84 | - |
| - <u>combustion (incomplete)</u> | <u>T58</u> | <u>X47.8</u> | <u>X67.8</u> | <u>Y17.8</u> | - |
| - distributed through pipes..... | T59.8 | X47. 84 | X67. 84 | Y17. 84 | - |
| - incomplete combustion | T58 | X47.8 | X67.8 | Y17.8 | - |

| | | | | | |
|--------------------------------|------------|--------------------|--------------------|--------------------|---|
| ... | | | | | |
| Sewer gas..... | T59.8 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Smog | T59.1 | X47. 89 | X67. 89 | Y17. 89 | - |
| ... | | | | | |
| Utility gas <u>NEC</u> | T58 | X47. 82 | X67. 82 | Y17. 82 | - |
| - carbon monoxide | <u>T58</u> | <u>X47.1</u> | <u>X67.1</u> | <u>Y17.1</u> | - |
| Vapour (see also Gas) | T59.9 | X47.9 | X67.9 | Y17.9 | - |
| - kiln (carbon monoxide)..... | T58 | X47. 38 | X67. 38 | Y17. 38 | - |
| - lead — see <i>Lead</i> | | | | | |
| - specified source NEC | T59.8 | X47. 98 | X67. 98 | Y17. 98 | - |
| Water | | | | | |
| ... | | | | | |
| - gas | T58 | X47. 18 | X67. 18 | Y17. 18 | - |
| ... | | | | | |

Australian Coding Standards

2008 PERPETRATOR OF ASSAULT, ABUSE AND NEGLECT

In cases of assault the specific injury(ies) should be coded as the principal diagnosis. An external cause code from categories X85–Y09 *Assault* should be assigned, irrespective of the mechanism of the injury (eg stabbing, beating, burning).

The following subcategories for classification of perpetrator are utilised at the fifth character level for codes X85–Y09:

- .0 spouse or domestic partner
- .1 parent
- .2 other family member
- .3 carer
- .4 acquaintance or friend
- .5 official authorities
- .6 person unknown to the victim
- .7 multiple persons unknown to the victim
- .8 other specified person

.9 *unspecified person*

Note: Fourth character filler digit '0' is required for categories X85–~~X87-X91~~, ~~X89-X91~~, X93, X96–X98, Y00–Y01 and Y04–Y09.

The fifth characters are hierarchically listed according to the relationship of the perpetrator to the victim. Assign the fifth character which indicates the closest relationship between the perpetrator and the victim (ie the number highest on the list).

...



ICD-10-AM/ACHI/ACS Eleventh Edition Addenda Proposal

Debridement and management of wounds and burns

Introduction/Rationale:

This addenda proposal is a result of the numerous queries received (Q2880, Q2925, Q2977, Q3001, Q3026, Q3191, Q3244) which requested clarification on different aspects of wound management.

This addenda proposal will include debridement and management of wounds, and burns (including but not limited to dressings) of skin and subcutaneous tissue, and soft tissue. It will not include debridement or curettage of orthopaedic conditions such as fractures, bone, dental or joints.

This addenda proposal also incorporates a review of various ACS in regard to debridement and management of wounds including ACS 1203 *Debridement*.

After clinical advice was received and consideration of the variance in documentation in clinical records, ACCD proposes to remove the terms 'excisional' and 'nonexcisional' in regards to debridement from ACHI and the ACS.

Summary of proposal:

- Removal of the concepts of 'excisional' and 'nonexcisional' from ACHI debridement codes, including those for burns.
- Deletion of the now redundant ACS 1203 *Debridement* with some relevant content relocated to the ACHI Tabular List and Alphabetic Index.
- Deletion of the body surface area (BSA) percentage value within the ACHI codes in blocks **[1600]** *Dressing of burn* and **[1627]** *Debridement of burn*. The BSA percentage value is a diagnostic concept, classifiable in the ICD-10-AM.
- Creation of 96255-00 **[1601]** *Wound management, not elsewhere classified* to classify simple wound washout or irrigation; rename block **[1601]** *Dressing of other wound* to *Wound management*.
- Create codes 90686-02 *Vacuum dressing of burn* and 90686-03 *Vacuum dressing* in blocks **[1600]** *Dressing of burn* and **[1601]** *Wound management* which were previously classified as nonexcisional debridement in blocks **[1627]** and **[1628]**
- Amendments to ACHI Alphabetic Index to address other issues.

ACCD PROPOSAL

Tabular List

LIST OF ACHI BLOCK NUMBERS

Block No. **Block Name**
1601 ~~Dressing of other w~~ [Wound management](#)

568 **Airway management**

▽ 1006

Note: The codes relating to management alone include installation of saline or suction clearance of the airway

...

96190-02 Removal of nasopharyngeal device

Removal of:

- [choanal atresia stent](#)
- [nasopharyngeal stent](#)

- ~~choanal atresia~~ | stent
- ~~nasopharyngeal~~

Code also when performed:

- debridement of wound (~~90686-01~~ [90665-01](#) [1628])
- pharyngoscopy (nasopharyngoscopy) (41764-02 [416])

Excludes: that with replacement (96190-01 [568])

1566 **Excision procedures on other musculoskeletal sites**

31340-00 Excision of muscle, bone or cartilage involved with lesion of skin

...

90575-00 Excision of soft tissue, not elsewhere classified

30023-00 ~~Excisional debridement~~ [Debridement](#) of soft tissue

▽ 1203

~~Excisional debridement of soft tissue for:~~

- ~~infection~~
- ~~ischaemic, necrotic or gangrenous tissue~~
- ~~ulcer~~
- ~~wound~~

Excludes: ~~excisional~~ debridement of:

- burn (30017-~~01~~ [02](#), ~~30020-00~~ [1627])
- open fracture site (90580-00 [1566])
- skin and subcutaneous tissue (90665-~~00~~ [01](#) [1628])
- soft tissue including bone or cartilage (30023-01 [1566])

30023-01 ~~Excisional d~~ [Debridement](#) of soft tissue involving bone or cartilage

~~Excisional d~~ [Debridement](#) of soft tissue, involving bone or cartilage ~~for:~~

- ~~infection~~
- ~~ischaemic, necrotic or gangrenous tissue~~
- ~~ulcer~~
- ~~wound~~

Excludes: ~~excisional~~ debridement of: ~~open fracture site (90580-00 [1566])~~

- [open fracture site \(90580-00 \[1566\]\)](#)
- [sternotomy wound \(38464-00 \[1376\]\)](#)

90580-00 Debridement of open fracture site

...

1600 Dressing of burn

~~∇ 0031, 0042, 1911~~

~~Change of burn dressing~~

~~Dressing of grafted burn~~

~~**Excludes:** debridement of burn of same site
(see block [1627])~~

~~grafting of same site (90670-01, 90671-01, 90672-01 [1640], 45485, 45486, 45488, 45494-00 [1643], 45406-00, 45409-00, 45412-00, 45415-00, 45418-00 [1644])~~

~~30010-00 Dressing of burn, < 10% of body surface area dressed~~

~~30010-01 Dressing of burn~~

~~Burn wound:~~

- ~~• clean out~~
- ~~• dressing~~
- ~~• irrigation~~
- ~~• lavage~~
- ~~• scrubbing~~
- ~~• washout~~

~~**Includes:** trimming of skin~~

~~**Excludes:** debridement of burn of same site (30017-02 [1627])~~

~~excision of same site (30017-02 [1627])~~

~~grafting of burn of same site (see blocks [1640], [1641], [1643], [1644] and [1648])~~

~~that with any other intervention of same site – omit code~~

~~vacuum dressing of burn (90686-02 [1600])~~

~~30014-00 Dressing of burn, ≥ 10% of body surface area dressed~~

~~90686-02 Vacuum dressing of burn~~

~~Suction vacuum dressing of burn~~

~~VAC dressing of burn~~

~~**Note:** This code is assigned once only when performed in an episode of care, unless performed under cerebral anaesthesia.~~

1601 Dressing of other wound management

~~∇ 0042~~

~~30055-00 Dressing of wound~~

~~∇ 0042~~

~~Change of dressing~~

~~Replacement of wound packing or drain~~

~~**Includes:** removal of sutures~~

~~**Excludes:** reinsertion of drainage tube into soft tissue abscess (30225-00 [1554])
that of burn (30010-00, 30014-00 [1600])~~

~~90686-03 Vacuum dressing~~

~~Suction vacuum dressing~~

~~VAC dressing~~

~~**Excludes:** that for burn (90686-02 [1600])~~

96255-00 Wound management, not elsewhere classified

Wound:

- clean out
- dressing
- irrigation
- lavage
- scrubbing
- washout

Excludes: that:

- for burn (30010-01 [1600], 30017-02 [1627])
- with any other intervention of same site – omit code

1627 **Debridement of burn**

▽ 1203, 1911

~~Debridement of eschar~~

~~Escharectomy~~

~~Excision of:~~

~~• burn~~

~~• eschar~~

~~Removal of eschar~~

~~**Includes:** dressing of burn of same site~~

~~**Excludes:** that with grafting of same site
(see blocks [1640], [1641], [1643], [1644] and [1648])~~

~~90686-00 Nonexcisional debridement of burn~~

~~Suction vacuum dressing of burn~~

~~30017-01 Excisional debridement of burn, < 10% of body surface area excised or debrided~~

30017-02 Debridement of burn

Debridement of eschar

Excision of:

• burn

• eschar

Includes: dressing of burn of same site

Excludes: that with grafting of same site (see blocks [1640], [1641], [1643], [1644] and [1648])

~~30020-00 Excisional debridement of burn, ≥ 10% of body surface area excised or debrided~~

1628 **Other debridement of skin and subcutaneous tissue**

▽ 1203

~~**Excludes:** that:~~

~~• by maggot debridement therapy (MDT) (96210-00 [1604])~~

~~• of burn (30017-01, 30020-00, 90686-00 [1627])~~

~~90686-01 Nonexcisional debridement of skin and subcutaneous tissue~~

~~Nonexcisional debridement of:~~

~~• infection~~

~~• ulcer~~

~~• wound~~

~~Removal of devitalised tissue, necrosis and slough by such methods as:~~

~~• brushing~~

~~• irrigation (under pressure)~~

~~• scrubbing~~

~~• washing~~

~~Suction vacuum dressing~~

~~90665-00 Excisional debridement of skin and subcutaneous tissue~~

~~Excisional debridement of skin and subcutaneous tissue for:~~

- ~~• infection~~
- ~~• ischaemic, necrotic or gangrenous tissue~~
- ~~• ulcer~~
- ~~• wound~~

~~**Includes:** incidental excisional debridement of soft tissue~~

~~**Excludes:** excisional debridement of:~~

- ~~• open fracture site (90580-00 [1566])~~
- ~~• soft tissue (30023 [1566])~~

90665-01 Debridement of skin and subcutaneous tissue, not elsewhere classified

Excludes: debridement of:

- burn (30017-02 [1627])
 - open fracture site (90580-00 [1566])
 - soft tissue (30023 [1566])
- that:
- by maggot debridement therapy (MDT) (96210-00 [1604])
 - with repair (suture) of wound of skin and subcutaneous tissue [1635]

1870 Interventions involving assistive or adaptive device, aid or equipment

Includes: adhesive padding
artificial [prosthetic] limb(s)
assistive or adaptive devices, aids or equipment for:
• play/leisure
• productivity
• self care/self maintenance

...

92139-00 Non-invasive placement of bone growth stimulator

Transcutaneous (surface) placement of pads or patches

Note: Performed to stimulate bone healing

96092-00 Application, fitting, adjustment or replacement of other assistive or adaptive device, aid or equipment

Issue of assistive or adaptive device, aid or equipment

Programming of assistive or adaptive device, aid or equipment

Includes: instructions on the use and the care of assistive or adaptive device, aid or equipment

Excludes: application of dressing to:

- burn (see block [1600])
- wound, other than burn (~~30055-00~~ [see block \[1601\]](#))

96093-00 Repair of assistive or adaptive device, aid or equipment

Excludes: adjustment only (96092-00 [1870])

maintenance of:

- drug delivery device (13942-02 [1922])
- vascular access device (13939-02 [1922])

...

Alphabetic Index

Brush, brushing(s) (for specimen collection) — *see also Biopsy*

- skin and subcutaneous tissue ([wound](#)), for debridement — *see Debridement/skin/nonexcisional*

BSG (banded sleeve gastrectomy) — *see Gastrectomy/sleeve/for obesity*

...

Change (of) — see also *Replacement*

- defibrillator (automatic) (cardioverter) (with pacemaker functionality) — see *Replacement/defibrillator*
- dressing (wound) ~~30055-00 [1601]~~ [NEC 96255-00 \[1601\]](#)
- - burn (~~< 10% body surface area dressed~~) ~~30010-0001 [1600]~~
- - - with
- - - - [debridement of same site 30017-02 \[1627\]](#)
- - - - excision of same site [30017-02 \[1627\]](#) — see *Excision/skin/for/burn*
- - - - ~~and grafting — see *Graft/skin/for burn*~~
- - - - grafting of same site — see *Graft/skin/for burn*
- - - - ~~> 10% body surface area dressed (under anaesthesia) 30014-00 [1600]~~
- electrode, cardiac — see *Replacement/electrode(s) lead(s)/cardiac*
- ...

Cleaning

- ...
- prosthesis, dental with reattachment 97669-00 [473]
- wound (~~nonexcisional~~) ~~90686-01 [1628]~~ [NEC 96255-00 \[1601\]](#)
- ~~by maggot debridement therapy (MDT) 96210-00 [1604]~~
- ~~with any other intervention — omit code~~
- ~~excisional 90665-00 [1628]~~

Clearance

- cholesteatoma (middle ear) 41635-00 [312]
- ...

Curettage

- ...
- skin (lesion) (serial) (with cryotherapy) (with diathermy)
- - [for debridement \(wound\) — see *Debridement/skin*](#)
- - multiple lesions 30195-01 [1612]
- - - wart — see *Removal/wart*
- ...

Debridement [\(autolytic\)](#) [\(biosurgery\)](#) [\(chemical\)](#) [\(electrosurgery\)](#) [\(enzymes\)](#) [\(hydrosurgery\)](#) [\(laser\)](#) [\(plasma scalpel\)](#) [\(thermal\)](#) [\(ultrasonic\)](#) [\(water jet or scalpel\)](#) [\(whirlpool\)](#)

- amputation stump
- - skin — see *Debridement/skin*
- - soft tissue — see *Debridement/soft tissue*
- ...
- burn (~~skin~~) [\(excisional\) 30017-02 \[1627\]](#)
- - with grafting of same site — see *Graft/skin/for burn/by site*
- ~~excisional (< 10% body surface area) 30017-01 [1627]~~
- ~~> 10% body surface area 30020-00 [1627]~~
- ~~nonexcisional 90686-00 [1627]~~
- cartilage
- - with
- - - any other orthopaedic procedure — omit code
- - - debridement of soft tissue 30023-01 [1566]
- ...
- cornea (epithelial) 42650-00 [172]
- eschar (~~burn~~) [\(excisional\) 30017-02 \[1627\]](#)
- - with grafting of same site — see *Graft/skin/for burn/by site*
- ~~excisional (< 10% body surface area) 30017-01 [1627]~~
- ~~> 10% body surface area 30020-00 [1627]~~
- ~~nonexcisional 90686-00 [1627]~~
- fascia — see *Debridement/soft tissue*
- fingernail (bed) (fold) 46516-00 [1631]
- ...
- skin [\(excisional\)](#) [\(subcutaneous tissue\) NEC 90665-01 \[1628\]](#)
- - by maggot debridement therapy (MDT) 96210-00 [1604]
- - [burn 30017-02 \[1627\]](#)
- - - [with grafting of same site — see *Graft/skin/for burn/by site*](#)
- ~~excisional 90665-00 [1628]~~
- ~~burn (< 10% body surface area) 30017-01 [1627]~~
- ~~with grafting of same site — see *Graft/skin/for burn/by site*~~
- ~~> 10% body surface area 30020-00 [1627]~~
- - nonexcisional ~~90686-01 [1628]~~ [96255-00 \[1601\]](#)
- ~~by maggot debridement therapy (MDT) 96210-00 [1604]~~
- ~~burn 90686-00 [1627]~~
- - pocket of cardiac generator (defibrillator) (pacemaker) 90219-00 [663]
- ...

- soft tissue, (excisional) NEC 30023-00 [1566]
- - involving bone or cartilage 30023-01 [1566]
- spinal cord (meninges) 90011-01 [59]
- tendon — see *Debridement/soft tissue*
- toenail (bed) (fold) 47906-00 [1632]
- ulcer
- - skin (subcutaneous tissue) — see *Debridement/skin*
- - soft tissue — see *Debridement/soft tissue*
- wound
- - skin (subcutaneous tissue) — see *Debridement/skin*
- - soft tissue, (excisional) (with suture) NEC 30023-00 [1566]
- - - involving bone or cartilage 30023-01 [1566]

...

Dermabrasion — see *Abrasion/skin*

- with
- - abrasive therapy — see *Abrasion/skin*
- - debridement — see *Debridement/skin*

...

Deroofing

- blister NEC 96255-00 [1601]
- - with debridement — see *Debridement/skin*
- - burn — see *Dressing/burn*

- cyst
- - renal (open) 36558-01 [1055]
- - - via laparoscopy (closed) 36558-00 [1055]

...

Dressing (to) NEC 96092-00 [1870]

- and irrigation, root canal system 97455-00 [464]
- - with any other endodontic procedure — *omit code*
- anorectal region, with formalin 90344-02 [929]
- autologous platelet-rich plasma 96255-00 [1601]
- biological (temporary)
- - allogeneic — see *Allograft/skin*
- - heterogenous — see *Xenograft/skin*
- - homogenous — see *Allograft/skin*
- - xenogeneic — see *Xenograft/skin*
- burn (<10% body surface area) 30010-00 [1600]
- - with
- - - debridement of same site 30017-02 [1627]
- - - excision of same site — see *Excision/burn* 30017-02 [1627]
- - - and grafting — see *Graft/skin/for burn/by site*
- - - grafting of same site — see *Graft/skin/for burn/by site*
- - - ≥10% body surface area 30014-00 [1600]
- formalin, to anorectal region 90344-02 [929]
- pressure (Gibney) (Robert Jones) (Shanz) 96092-00 [1870]
- root canal system, with irrigation 97455-00 [464]
- - with any other endodontic procedure — *omit code*
- suction vacuum (VAC) NEC 90686-03 [1601] 90686-04 [1628]
- - for burn 90686-02 [1600] 90686-00 [1627]
- synthetic 90672-00 [1640]
- - for burn 90672-01 [1640]
- vacuum (VAC) NEC 90686-04 90686-03 [1628] 1601
- - for burn 90686-00 90686-02 [1627] 1600
- Velveau 96092-00 [1870]
- wound NEC 30055-00 96255-00 [1601]
- - with any other intervention of same site maggot debridement therapy (MDT) 96210-00 [1604] — *omit code*
- - burn — see *Dressing/burn*

...

Escharectomy (<10% body surface area) 30017-04 [1627]

- ≥10% body surface area 30020-00 [1627]

...

Excision — see also *Removal*

- burn (<10% body surface area) 30017-04 [1627]
- - with grafting of same site — see *Graft/skin/for burn/by site*
- - - ≥10% body surface area 30020-00 [1627]

- - scar 45519-00 [1656]
- ...
- eschar (~~< 10% body surface area~~) (burn) 30017-01 ~~02~~ [1627]
- - with grafting of same site — see *Graft/skin/for burn/by site*
- ~~— ≥ 10% body surface area 30020-00 [1627]~~
- exostosis
- - external ear (auditory meatus) 41518-00 [303]
- - femur 47936-00 [1563]
- ...

Irrigation — see also *Maintenance*

- ...
- ureterostomy 92100-00 [1901]
- wound (~~nonexcisional~~) (skin) (subcutaneous tissue) (under pressure) (whirlpool) NEC ~~90686-01 [1628]~~ 96255-00 [1601]
- - with any other intervention of same site — omit code
- - burn (skin) (subcutaneous tissue) NEC 30010-01 [1600]
- ~~— excisional 90665-00 [1628]~~
- ...

Lavage — see also *Maintenance*

- ...
- trachea, via intubation
- - endotracheal (single lumen) 22007-01 [568]
- - - double lumen 22008-01 [568]
- - tracheostomy 90179-06 [568]
- wound (skin) (subcutaneous tissue) NEC 96255-00 [1601]
- - with any other intervention of same site — omit code
- - burn NEC 30010-01 [1600]

Laying open

- fistula, anal 90338-00 [930]
- ...

Removal — see also *Excision*

- ...
- eschar 30017-02 [1627]
- - with grafting of same site — see *Graft/skin/for burn/by site*
- ~~— excisional (< 10% body surface area) 30017-01 [1627]~~
- ~~— ≥ 10% body surface area 30020-00 [1627]~~
- ~~— nonexcisional 90686-00 [1627]~~
- exostosis — see *Exostectomy*
- ...

Replacement

- ...
- drain — see also *Replacement/tube*
- - for soft tissue abscess 30225-00 [1554]
- - cerebrospinal fluid
- - - lumbar (external) 40018-00 [41]
- - - ventricular (external) 39015-00 [3]
- - lumbar (cerebrospinal fluid) (external) 40018-00 [41]
- - vaginal 92110-00 [1900]
- - ventricular (cerebrospinal fluid) (external) 39015-00 [3]
- - vulval 92110-00 [1900]
- - wound NEC ~~30055-00~~96255-00 [1601]
- ~~— soft tissue abscess 30225-00 [1554]~~
- - with any other intervention of same site — omit code
- electrode(s) lead(s)
- ...
- packing
- ...
- - vulval 92110-00 [1900]
- - wound NEC ~~30055-00~~96255-00 [1601]
- - - with any other intervention of same site — omit code
- patch, for automatic defibrillator (epicardial) (myocardial) (subcutaneous) 38390-03 [654]
- ...
- tube
- - for drainage, soft tissue abscess 30225-00 [1554]
- - biliary (endoscopic) 30451-02 [960]
- - - open 30451-00 [960]
- - cystostomy 36800-02 [1092]

- ~~— drainage, for soft tissue abscess 30225-00 [1554]~~
- - enterostomy
- - - large intestine 92080-00 [1896]
- - - small intestine 92079-00 [1896]
- - gastrostomy, percutaneous endoscopic (PEG) 30482-00 [870]
- - intestine
- - - large 92080-00 [1896]
- - - small 92079-00 [1896]
- - nasogastric 92078-00 [1896]
- - nasolacrimal
- - - bilateral 42615-00 [242]
- - - unilateral 42614-00 [242]
- - nephrostomy 36649-00 [1042]
- - oesophagostomy 92078-00 [1896]
- - pyelostomy 36649-00 [1042]
- - rectum 92066-00 [1894]

~~— soft tissue abscess drainage 30225-00 [1554]~~

- - tracheostomy 92046-00 [568]
- - ureterostomy 90367-00 [1069]
- - wound NEC ~~30055-00~~96255-00 [1601]
- ~~— soft tissue abscess 30225-00 [1554]~~
- - - with any other intervention of same site — omit code
- ulna, distal 90597-00 [1436]

...

Scrotectomy

- partial 37438-00 [1174]

Scrub, scrubbing

- burn NEC 30010-01 [1600]
- - with any other intervention of same site — omit code
- skin (subcutaneous tissue) (ulcer) 96255-00 [1601]
- - with debridement — see *Debridement/skin*
- wound NEC 96255-00 [1601]

Seal, sealing

...

Suction

- curettage, uterus 35640-03 [1265]
- - postpartum (following delivery) 16564-01 [1345]
- vacuum dressing (VAC) ~~90686-01~~90686-03 [46281601]
- - for burn ~~90686-00~~90686-02 [46271600]

Sulcoplasty (open) (oral) 45837-01 [406]

...

Therapy

...

- intradiscal (electrothermal catheter) (percutaneous) (radiofrequency) 90027-00 [31]

- larval 96210-00 [1604]

- laser — see *Laser therapy*
- leech (*hirudo medicinalis*) 96210-00 [1604]
- maggot debridement (MDT) 96210-00 [1604]

...

- narrative 96183-00 [1873]
- nebuliser 92043-00 [1889]
- negative-pressure wound (NPWT) — see *Vacuum dressing*
- nitric oxide (inhalation) 92210-00 [1889]

...

Trimming

...

- osteophyte
- - ankle, arthroscopic (closed) 49703-01 [1531]

- skin

- - with

- - - debridement — see *Debridement/skin*

- - - wound dressing — see *Dressing/wound*

Tripiet flap — see *Flap/eyelid/for reconstruction*

...

Vacuum dressing [NEC 90686-01-90686-03](#) [~~1628~~][1601]

- for burn ~~90686-00-90686-02~~ [~~1627~~1600]

Vaginectomy (partial) 35560-00 [1282]

...

Washing(s) — *see also Lavage AND Irrigation*

- for specimen collection (diagnostic) — *see Biopsy*

- skin and subcutaneous tissue, for debridement — *see Debridement/skin* ~~nonexcisional~~

Washout — ~~*see also Lavage AND Irrigation*~~

- bladder (diagnostic) 11921-00 [1862]

- wound NEC 96255-00 [1601]

- - with any other intervention of same site — *omit code*

- - burn NEC 30010-01 [1600]

Whipple's procedure (pancreaticoduodenectomy) 30584-00 [978]

...

Australian Coding Standards

TABLE OF CONTENTS SPECIALTY STANDARDS

...

12. Skin and subcutaneous tissue

~~1203 Debridement~~

1204 Plastic surgery

1216 Craniofacial surgery

1217 Repair of wound of skin and subcutaneous tissue

1220 Extraoral osseointegrated implants

1221 Pressure injury

...

0042 PROCEDURES NORMALLY NOT CODED

Procedures are normally not coded where they are routine in nature, performed for most patients or are components of another procedure (see also ACS 0016 *General procedure guidelines*). Most importantly, the resources used to perform these procedures are often reflected in the diagnosis or in an associated procedure. That is, for a particular diagnosis or procedure there is a standard treatment that is unnecessary to code. For example:

- x-ray and application of plaster is expected with a diagnosis of Colles' fracture
- intravenous antibiotics are expected with a diagnosis of septicaemia/sepsis
- cardioplegia in cardiac surgery is performed routinely

CLASSIFICATION

Procedures normally not coded are only assigned if:

- cerebral anaesthesia is required in order for the procedure to be performed (*see* ACS 0031 *Anaesthesia*)
- they are the principal reason for admission in same-day episodes of care. This includes patients who are admitted the day before or discharged on the day after a procedure because a same-day admission is not possible or practicable for them (eg elderly patients, those who live in remote locations)
- another specialty standard directs they should be assigned. In such cases, the specialty standard overrides this list and the stated code is assigned.

The procedures listed below are normally not coded:

...

7. Dressings/wound management (eg autologous platelet rich plasma (PRP) dressing)

Exception(s): vacuum (VAC) dressings ([90686-02 \[1600\]](#), [90686-03 \[1601\]](#), ~~([90686-01 \[1628\]](#), [90686-00 \[1627\]](#))~~)

...

1203 DEBRIDEMENT

If 'nonexcisional debridement' is documented or the surgeon confirms that the debridement was 'nonexcisional' assign:

90686-00 [1627] *Nonexcisional debridement of burn* ~~or~~

90686-01 [1628] *Nonexcisional debridement of skin and subcutaneous tissue*

This standard should be interpreted to include the following points:

- ~~most~~ debridements are excisional
- check with the clinician if unsure
- use the nonexcisional code if documentation/clinical advice supports its use

Excisional debridement codes are:

90665-00 [1628] *Excisional debridement of skin and subcutaneous tissue*

30023-00 [1566] *Excisional debridement of soft tissue*

30023-01 [1566] *Excisional debridement of soft tissue involving bone or cartilage*

30017-01 [1627] *Excisional debridement of burn, < 10% of body surface area excised or debrided*

~~or~~

30020-00 [1627] *Excisional debridement of burn, ≥ 10% of body surface area excised or debrided*

(See also ACS 1217 *Repair of wound of skin and subcutaneous tissue* and ACS 1911 *Burns*.)

1911 BURNS

DEFINITION

The description of burns as 'degrees' is not clinically relevant in Australia. The current terminology relates to 'thickness' of the burn ~~ie, that is~~ partial [thickness](#) or full [thickness](#).

As the term 'superficial' may be used clinically to describe cases of both erythema and blistering (partial thickness), ~~clinical coders should check with the~~ [seek](#) clinician ~~before clarification before~~ assigning an erythema code. In the absence of clinical advice, a 'superficial' burn not clearly specified as erythema ~~should be coded~~ [is classified](#) as a partial thickness (blisters, epidermal loss) burn.

CLASSIFICATION

Burns by site

Burns are classified by site in the following blocks:

T20–T25 *Burns of external body surface, specified by site*

T26–T28 *Burns of eye and internal organs*

T29–T30 *Burns of multiple and unspecified body regions*

Sunburn

[Multiple ICD-10-AM codes are required to classify a sunburn.](#) ~~Sunburn requires multiple diagnosis codes to fully describe the injury.~~

Code first:

L55.0 ~~—~~ *Sunburn, erythema*

L55.1 ~~—~~ *Sunburn, partial thickness*

L55.2 ~~—~~ *Sunburn, full thickness*

~~Assign an additional code to indicate the site of sunburn from T20–T25, T29–T30 and a supplementary code from T31. Burns classified according to extent of body surface involved to indicate the percentage body surface area of sunburn.~~

~~Assign an appropriate external cause code to specify the circumstances of the sunburn injury, for example~~

~~X32 Exposure to sunlight, W89 Exposure to man-made visible and ultraviolet light.~~

~~Assign an appropriate place of occurrence code (Y92.-) and activity code (U50–U73).~~

Assign:

- a code from category L55 Sunburn to capture the sunburn
- an additional code to indicate the site of sunburn from T20–T25, T29–T30
- an additional code from category T31 Burns classified according to extent of body surface involved to indicate the percentage of body surface area of sunburn
- an appropriate external cause code to specify the circumstances of the sunburn injury, for example X32 Exposure to sunlight, W89 Exposure to man-made visible and ultraviolet light
- an appropriate place of occurrence code (Y92.-) and activity code (U50–U73).

Sequencing

~~Code first the most severe burn site. For example, a full thickness burn would be sequenced before a partial thickness burn. Even if the partial thickness burn accounts for the greatest body surface area (BSA), the full thickness burn should still be sequenced first.~~

~~If multiple burns of the same thickness exist, then the site accounting for the greatest BSA should be sequenced first.~~

~~Burns requiring grafting should be sequenced ahead of those not requiring grafting.~~

- For multiple burns of variable thickness on different sites of the body, sequence first a code for the most severe burn site. For example, a full thickness burn is sequenced before a partial thickness burn, even if the partial thickness burn accounts for the greatest body surface area (BSA) (see Example 1).
- Burns requiring grafting are sequenced before burns that do not require grafting.
- For multiple burns of the same thickness on different sites of the body, sequence first the site accounting for the greatest BSA (see Example 2).
- Burns of the same site but of variable thickness are classified to the most severe thickness (see Example 3).

Site codes

Burns ~~should be coded~~ are classified to the individual sites whenever possible.

For example, partial thickness burns of the abdominal wall and perineum ~~would be coded~~ to classified to:

- T21.23 *Partial thickness [blisters, epidermal loss] burn of trunk, abdominal wall* **and**
T21.25 *Partial thickness [blisters, epidermal loss] burn of trunk, genitalia [external]* **rather than**
T29.2 *Burns of multiple regions, no more than partial thickness burns mentioned*

~~For example, partial and full thickness burns of the ankle would be coded to:~~

~~T25.3 — Full thickness burn of ankle and foot~~

Multiple burns and injuries

~~When the number of codes for a case exceeds the available number of fields, the multiple burn codes may be used to ensure all significant conditions are coded and accurately grouped to AR-DRGs. If multiple codes are necessary, use them for partial thickness burns with more specific codes for full thickness burns.~~

Body surface area (BSA)

Each burn case assigned a code from T20–T25 *Burns of external body surface, specified by site or T29 Burns of multiple body regions* (ie excluding eye and internal organs) should have a code from category T31 *Burns classified according to extent of body surface involved* assigned to indicate the percentage of body surface area (BSA) involved. The T31 code is important in AR-DRG grouping and ~~should be is~~ sequenced ~~to ensure its inclusion in the grouping process. It will usually be sequenced~~ after the last site code.

The code T31 *Burns classified according to extent of body surface involved* must ~~always~~ have five characters. The fifth character of '0' indicates that there is less than 10% full thickness burn or **where the full thickness component is unspecified**. The fourth character is the total of all the individual areas percentage of body surface. The BSA information should be provided by the clinical staff on the burns chart.

For subsequent admissions for burn dressing, grafting or debridement (see below), assign the BSA code that reflects the area being treated in that episode of care.

EXAMPLE 1:

Patient admitted with full thickness burns to the inner aspect of the right forearm (2% BSA) and partial thickness of the left hand (6% BSA). Burns were due to boiling water from a coffee plunger, at work.

Codes: T22.32 Full thickness burn of shoulder and upper limb, except wrist and hand
T23.2 Partial thickness [blisters, epidermal loss] burn of wrist and hand
T31.00 Burns involving less than 10% of body surface, with less than 10 % or unspecified full thickness burns
X10.0 Contact with hot drink
Y92.9 Unspecified place of occurrence
U73.09 While working for income, unspecified

EXAMPLE 2:

An 82 year old was admitted to hospital from a nursing home with partial thickness burns to multiple areas of her right ankle (5% BSA), and of her lower leg (4% BSA). Burns were due to falling asleep too close to the radiator.

Codes: T25.2 Partial thickness [blisters, epidermal loss] burn of ankle and foot
T24.2 Partial thickness [blisters, epidermal loss] burn of hip and lower limb, except ankle and foot
T31.00 Burns involving less than 10% of body surface, with less than 10% or unspecified full thickness burns

| | |
|---------------|--|
| <u>X16</u> | <u>Contact with hot heating appliances, radiators and pipes</u> |
| <u>Y92.14</u> | <u>Place of occurrence, aged care facilities</u> |
| <u>U73.2</u> | <u>While resting, sleeping, eating or engaging in other vital activities</u> |

EXAMPLE 3:

A 9 year old boy sustained partial and full thickness burns of the right hand (5% BSA) while putting out the fire with his hands. His clothes had caught fire while playing with matches in the garage at home.

| | | |
|---------------|---------------|---|
| <u>Codes:</u> | <u>T23.3</u> | <u>Full thickness burn of wrist and hand</u> |
| | <u>T31.00</u> | <u>Burns involving less than 10% of body surface, with less than 10 % or unspecified full thickness burns</u> |
| | <u>X00</u> | <u>Exposure to uncontrolled fire in building or structure</u> |
| | <u>Y92.02</u> | <u>Place of occurrence, garage</u> |
| | <u>U72</u> | <u>Leisure activity, not elsewhere classified</u> |

Inhalation burns

Any inhalation component of the injury ~~should be coded~~ classified to ~~the~~ category T27 *Burn of respiratory tract*. **Note:** T31 *Burns classified according to extent of body surface involved* cannot be used with codes in categories T27 *Burn of respiratory tract* and T28 *Burn of other internal organs* unless external body surface burns are also present.

The T27–T28 category codes would not normally be sequenced as the principal diagnosis if external burns are present, unless the clinician has clearly documented that the inhalation burn(s) was the most significant diagnosis.

Dressing/debridement of burns

- Dressing of burns is only coded when cerebral anaesthesia is required in order for the procedure to be performed (see ACS 0042 *Procedures normally not coded*).
- Only one code ~~should be~~ assigned for multiple dressings or multiple debridements of burns performed during one operative episode.
- If during the one operative episode, both a dressing(s) and debridement(s) of the same site are performed, code only the debridement. ~~Assign the code which reflects the total body surface area debrided (see block [1627] *Debridement of burn*), except for application of a VAC dressing (which requires an additional ACHI code (90686-02 [1600] *Vacuum dressing of burn*)).~~

If, during the one operative episode:

- ~~one site is debrided and a different site is dressed, assign one code for the debridement and one code for the dressing.~~
- ~~multiple sites are debrided and multiple different sites are dressed, assign one code for the debridement and one code for the dressing.~~
- one burn site is debrided and a different burn site is dressed:
 - assign one code for the debridement **and**
 - one code for the dressing.

- multiple burn sites are debrided and multiple different sites are dressed:
 - assign one code for the debridement and
 - one code for the dressings.

~~The codes assigned are to reflect the total body surface area dressed and the total body surface area debrided (see blocks [1600] Dressing of burn and [1627] Debridement of burn).~~

Admission for change of burn dressing

Assign Z48.0 *Attention to surgical dressings and sutures* for admissions for change of dressing. Assign ~~The appropriate burn codes~~ s should be assigned as an additional diagnosis.

Readmission for burn treatment or for complications

Subsequent admissions for grafting and debridement of burns ~~should be~~ are assigned the appropriate burn code as the principal diagnosis, unless the admission is for treatment of a complication or ~~late effect~~ sequelae, in which case the nature of the complication or ~~sequelae late effect should be~~ is assigned as the principal diagnosis (eg scar contractures).

~~Coding infections~~ Infections in burns patients

~~It is standard clinical practice in managing burns patients to treat infection prophylactically. Therefore, the clinician should always be consulted before an infection code is assigned.~~ When there is documentation of an infected burn, assign T79.3 *Post traumatic wound infection, not elsewhere classified* and a code from B95–B97 *Bacterial, viral and other infectious agents*, to indicate the organism, if known.

EXAMPLE 14:

Patient admitted with full thickness burn to hand (4% BSA) caused by boiling water. Burn became infected on day 10, swabs grew *Staphylococcus aureus*. Wound dressed and patient commenced on antibiotics. Discharged.

| | | |
|--------|--------|--|
| Codes: | T23.3 | <i>Full thickness burn of wrist and hand</i> |
| | T31.00 | <i>Burns involving less than 10% of body surface, less than 10% or unspecified full thickness burn</i> |
| | T79.3 | <i>Post traumatic wound infection, not elsewhere classified</i> |
| | B95.6 | <i>Staphylococcus aureus as the cause of diseases classified to other chapters</i> |
| | X12 | <i>Contact with other hot fluids</i> |
| | Y92.9 | <i>Unspecified place of occurrence</i> |
| | U73.9 | <i>Unspecified activity</i> |

STANDARDS INDEX

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D

Damage

- nerve and tendon
- - with laceration 1908

~~Debridement 1203~~

Defibrillator

- cardiac 0936

...

E

...

Excision

~~by debridement 1203~~

- skin lesions
- - multiple 0020
- tumour
- - face 1216
- wide (with graft)
- - neoplasm site 0236

Exostosis1311

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