



Using the ICD-10-CM

Choosing the Correct Code

To find the correct ICD-10-CM code, follow these steps:

Step 1: Look up the term in the Alphabetic Index, which is an alphabetical list of terms and their corresponding code or category

Step 2: Verify the code in the Tabular List, which is a structured list of codes divided into chapters based on body system or condition

Alphabetic Index

The Alphabetic Index helps you decide which section to refer to in the Tabular List. It doesn't always supply the full code. The Alphabetic Index has 2 parts:

- 1) **Index to Diseases and Injuries**
- 2) **External Causes of Injury Index**

It also contains a Table of Neoplasms and a Table of Drugs and Chemicals.

Table of Neoplasms

To properly code a neoplasm, you must analyze documentation in the medical record to determine if it states that the neoplasm:

- Is malignant, primary
- Is malignant, secondary
- Is Carcinoma in situ (confined or noninvasive)
- Is benign
- Has uncertain behavior
- Has an unspecified behavior

Table of Drugs and Chemicals

The Table of Drugs and Chemicals lists combination codes that include the substance taken as well the intent. It also lists industrial solvents, corrosive gases, noxious plants, pesticides, and other toxic agents. You should use this table to name poisonings and external causes of adverse effects.



Main Terms and Subterms

The Alphabetic Index sequences main terms alphabetically. Main terms are often associated with documentation in medical records. Always search for a code in the Alphabetical Index by main terms, which are based on:

- Diagnosis
- Symptom
- Condition

Tabular List

The Tabular List is presented in code number order. Since all ICD-10-CM codes start with a letter, all subcategories and codes within a category are in alphanumeric order, according to the first characters. This chart supplies the Tabular List chapters, category ranges, and corresponding body systems or conditions.

Tabular List Chapters

Chapter	Categories	Description
1	A00-B99	Certain infectious and parasitic diseases
2	C00-D49	Neoplasms
3	D50-D89	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
4	E00-E89	Endocrine, nutritional and metabolic diseases
5	F01-F99	Mental, behavioral and neurodevelopmental disorders
6	G00-G99	Diseases of the nervous system
7	H00-H59	Diseases of the eye and adnexa
8	H60-H95	Diseases of the ear and mastoid process
9	I00-I99	Diseases of the circulatory system
10	J00-J99	Diseases of the respiratory system
11	K00-K95	Diseases of the digestive system
12	L00-L99	Diseases of the skin and subcutaneous tissue
13	M00-M99	Diseases of the musculoskeletal system and connective tissue
14	N00-N99	Diseases of the genitourinary system
15	O00-O9A	Pregnancy, childbirth and the puerperium
16	P00-P96	Certain conditions originating in the perinatal period
17	Q00-Q99	Congenital malformations, deformations and chromosomal abnormalities
18	R00-R99	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified



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Chapter	Categories	Description
19	S00-T88	Injury, poisoning and certain other consequences of external causes
20	V00-Y99	External causes of morbidity
21	Z00-Z99	Factors influencing health status and contact with health services
22	U00-U85	Codes for special purposes

ICD-10-CM Coding Conventions

The conventions for ICD-10-CM are the general rules for use of the classification independent of the guidelines. These conventions are incorporated within the Alphabetic Index and Tabular List of ICD-10-CM as instructional notes.

7th Character

Certain ICD-10-CM categories have applicable 7th characters. You must use the applicable 7th character for all ICD-10-CM codes within the category or as notes in the Tabular List instruct. The 7th character must always be the 7th character in the data field. When it applies, codes missing this character are invalid.

7th Character Encounter Coding

7th Character	Encounter Description	Examples
A	Initial Encounter: Starts at first treatment (visit) and continues for as long as the patient is getting active treatment for the condition.	Surgical treatment, emergency department encounter, and evaluation and continuing treatment by the same or a different physician.
D	Subsequent Encounter: After the patient has completed active treatment of the condition and is getting routine care for the condition during the healing or recovery phase.	Cast change or removal, an x-ray to check healing status of fracture, removal of external or internal fixation device, medication adjustment, other aftercare and follow up visits following treatment of the injury or condition.
S	Sequela: Complications or conditions that arise as a direct result of the condition.	Scar formation after a burn.

Note: For aftercare of injury, assign an acute injury code with 7th character D for the subsequent encounter.



7th Character Fracture Coding

7th Character	Description
A	Initial encounter for closed fracture
B	Initial encounter for open fracture
D	Subsequent encounter for fracture with routine healing
G	Subsequent encounter for fracture with delayed healing
K	Subsequent encounter for fracture with nonunion
P	Subsequent encounter for fracture with malunion
S	Sequela

Character X Used as a Placeholder in Certain Codes

ICD-10-CM uses a character X as a placeholder in certain codes to:

- Allow for future expansion
- Fill in other empty characters when a code less than 6 characters in length needs a 7th character

When a code has less than 6 characters and a seventh character is required, an X is assigned for all characters less than 6 as a placeholder to fill in the empty characters.

Default Codes

When the ICD-10-CM Alphabetic Index lists a code next to a main term, it's called a default code, which:

- Is the condition most commonly associated with the main term
- Shows that it's the unspecified code for the condition

Assign a default code if a condition is documented in the medical record without any other information, such as acute or chronic.

Abbreviations

- Alphabetic Index abbreviations
 - **NEC (Not Elsewhere Classifiable)** - Is "other specified." When a specific code isn't available for a condition, the Alphabetic Index directs you to the "other specified" code in the Tabular List.
 - **NOS (Not Otherwise Specified)** - Is the equivalent of unspecified.



- Tabular List abbreviations
 - **NEC (Not Elsewhere Classifiable)** - Is “other specified”. When a specific code isn’t available for a condition, the Tabular List includes an NEC entry under a code to identify the code as the “other specified” code.
 - **NOS (Not Otherwise Specified)** - Is the equivalent of “unspecified.”

Punctuation

The official guidelines include these 3 punctuation symbols:

1) () Parentheses

Used in both the Alphabetic Index and the Tabular List to enclose supplementary words that may be present or absent in the statement of a disease or procedure without affecting the code number to which it’s assigned. Nonessential modifiers are the terms within the parentheses.

2) [] Brackets

Used in the Tabular List to enclose synonyms, alternative wording, or explanatory phrases. Used in the Alphabetic Index to name manifestation codes.

3) : Colons

Used in the Tabular List after an incomplete term that requires 1 or more of the modifiers following the colon to make it assignable to a given category.

Other ICD-10-CM Coding Conventions

And

Interpret as “and” or ”or” when used in a code title.

Includes Notes

Appears immediately under a 3-character code title to further define, clarify, or give examples of the content of a code category.

Inclusion Terms

List of terms included under certain codes to show some of the conditions for which that code number may be used. The inclusion terms aren't necessarily exhaustive.

See/See Also

- The “see” instruction following a main term in the Alphabetic Index indicates that another term should be referenced. It’s necessary to go to the main term referenced with the see note to locate the correct code.



- A “see also” instruction following a main term in the Alphabetic Index instructs that there’s another main term that may also be referenced that may provide additional Alphabetic Index entries that may be useful. It’s not necessary to follow the “see also” note when the original main term provides the necessary code.

Syndromes

- Follow the Alphabetic Index guidance when coding syndromes
- In the absence of Alphabetic Index guidance, assign codes for the documented manifestations of the syndrome

7th characters and placeholder X

- For codes less than 6 characters that require a 7th character, assign a placeholder X for all characters less than 6
- The 7th character must always be the 7th character of a code
- Examples:
 - S13.180 (6 characters) Requires 7th character to be valid -> S13.180A
 - No placeholder needed
 - Adding the 7th character only makes a valid code

Versus

- T75.4. (4 characters) Requires 7th character to be valid -> T75.4XXA
- 2 placeholders needed plus the 7th character to make a valid code

ICD-10-CM Features

Laterality

Some ICD-10-CM codes show laterality, specifying whether the condition occurs on the left, right, or is bilateral.

Obstetric codes that name trimester instead of episode of care

You may report the current trimester of pregnancy although the condition can occur in more than 1 trimester. Where applicable, the final character of the code reflects the trimester.

Combination codes for certain conditions and common associated symptoms and manifestations

ICD-10-CM includes combination codes for certain conditions and common associated symptoms and manifestations.

Combination codes for poisonings and their associated external cause

ICD-10-CM features combination codes for poisonings and their associated external cause. These codes name both the substance that was taken and the intent.



Character X is used as a placeholder in certain codes

ICD-10-CM uses a character X as a placeholder in certain codes to:

- Allow for future expansion
- Fill in other empty characters when a code less than 6 characters in length requires a 7th character

Instructional Notes in the Tabular List

Includes

The word 'Includes' appears immediately under certain categories to further define, or give examples of, the content of the category.

Two types of Excludes Notes

ICD-10-CM has 2 types of Excludes Notes: Excludes1 and Excludes2. Each note has a different definition for use; however, they are similar because they both show that codes excluded from each other are independent of each other.

1. Excludes1 Note

A type 1 Excludes note is a pure excludes. It means 'NOT CODED HERE!' An Excludes1 note shows that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when 2 conditions can't occur together, such as a congenital form versus an acquired form of the same condition.

2. Excludes2 Note

A type 2 excludes note means 'Not included here'. An Excludes2 note shows that the condition excluded isn't part of the condition it's excluded from, but a patient may have both conditions at the same time. When an Excludes2 note appears under a code, it's acceptable to use both the code and the excluded code together.

Code First/Use Other Code

Certain conditions have both an underlying etiology and multiple body system manifestations due to the underlying etiology. The ICD-10-CM coding convention for these conditions requires that the underlying condition is sequenced first, followed by the manifestation. There's a use additional code note at the etiology code and a code first note at the manifestation code. These instructional notes show the proper sequencing order of the codes: etiology followed by manifestation.

In most cases, the manifestation codes will include "in diseases classified elsewhere" in the title. Codes with this title are a component of the etiology/manifestation convention. The code title shows that it's a manifestation code. Don't use "in diseases classified elsewhere" codes as first listed or principal diagnosis codes. These codes must be used in conjunction with an underlying condition code and listed following the underlying condition.



Code Also

Two codes may be required to fully describe a condition, but the sequencing of the 2 codes is discretionary depending on the circumstances of the encounter.

7th characters and placeholder X

For codes less than 6 characters that require a 7th character, assign a placeholder X assigned for all characters less than 6. The 7th character must always be the 7th character of a code.

These 6 examples explain how to determine a correct ICD-10-CM code.

Coding Example 1

Diagnosis: Iron deficiency anemia

Step 1: Look up the term for the diagnosis in the Alphabetic Index.

Anemia (essential) (general) (hemoglobin deficiency) (infantile) (primary) (profound) D64.9

- with (due to) (in)
- disorder of
- iron D50.9
- secondary to blood loss (chronic) D50.0
- nutritional D53.9
- with
- poor iron absorption D50.8
- specified deficiency NEC D53.8

D50.9 is listed as the code for iron deficiency anemia. Next, verify this code in the Tabular List.

Step 2: Verify the code D50.9 in the Tabular List.

D50.9 Iron deficiency anemia, unspecified

D50.9 is shown as the code for Iron deficiency anemia, unspecified.

Code Assignment for this Diagnosis: D50.9



Coding Example 2

Diagnosis: Type I Diabetes Mellitus with Diabetic Nephropathy

Step 1: Look up the term for the diagnosis in the Alphabetic Index.

Diabetes, diabetic (mellitus) (sugar) E11.9

- type 1 E10.9

- - with

- - - nephropathy E10.21

The term includes a subterm indicating Type 1 diabetes with specific codes for diabetes-related conditions. ICD-10-CM lists the code for Type 1 diabetes mellitus with diabetic nephropathy as E10.21.

Step 2: Verify the code E10.21 in the Tabular List.

E10 Type 1 diabetes mellitus

E10.2 Type 1 diabetes mellitus with kidney complications

E10.21 Type 1 diabetes mellitus with diabetic nephropathy

Type 1 diabetes mellitus with intercapillary glomerulosclerosis

Type 1 diabetes mellitus with intracapillary glomerulonephrosis

Type 1 diabetes mellitus with Kimmelstiel-Wilson disease

Code E10.21 is shown for Type 1 diabetes mellitus with diabetic nephropathy.

Code Assignment for this Diagnosis: E10.21

Coding Example 3

Diagnosis: Acute cystitis with hematuria

Step 1: Look up the term for the diagnosis in the Alphabetic Index.

Cystitis (exudative) (hemorrhagic) (septic) (suppurative) N30.90

- acute N30.00

- - with hematuria N30.01

Code N30.01 is shown as the code for acute cystitis with hematuria. Next, verify this code in the Tabular List.

Step 2: Verify the code N30.01 in the Tabular List.



N30 Cystitis

Use additional code to name infectious agent (B95-97)

N30.0 Acute cystitis

N30.00 Acute cystitis without hematuria

N30.01 Acute cystitis with hematuria

Code N30.01 is shown for acute cystitis with hematuria.

Code Assignment for this Diagnosis: N30.01

Coding Example 4

Diagnosis: Pneumonia

Step 1: Look up the term for this diagnosis in the Alphabetic Index.

Pneumonia (acute) (double) (migratory) (purulent) (septic) (unresolved) J18.9

Next, verify this code in the Tabular List.

Step 2: Verify the code J18.9 in the Tabular List.

J18 Pneumonia, unspecified organism

J18.9 Pneumonia, unspecified organism

J18.9 is shown as the code for pneumonia, unspecified organism.

Code Assignment for this Diagnosis: J18.9

Coding Example 5

Diagnosis: Fracture of left wrist, initial encounter

Step 1: Look up the term for the diagnosis in the Alphabetic Index.

Fracture, traumatic (abduction) (adduction) (separation) – see also Fracture, pathological T14.8

- wrist, S62.10–

-- carpal – see Fracture, carpal bone

S62.10– is shown as the code for a wrist fracture. The code features a dash (–) which shows that other characters are required. Next, verify this code in the Tabular List.



Step 2: Verify the code S62.10– in the Tabular List.

S62 Fracture at wrist and hand level

Note: A fracture not shown as displaced or nondisplaced should be coded to displaced
A fracture not shown as open or closed should be coded to closed

Add the appropriate 7th character to each code from category S62.

- A initial encounter for closed fracture
- B initial encounter for open fracture
- D subsequent encounter for fracture with routine healing
- G subsequent encounter for fracture with delayed healing
- K subsequent encounter for fracture with nonunion
- P subsequent encounter for fracture with malunion
- S sequela

S62.10 Fracture of unspecified carpal bone

Fracture of wrist NOS

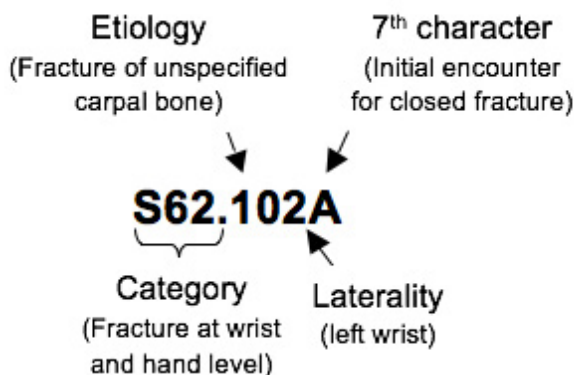
S62.101 Fracture of unspecified carpal bone, right wrist

S62.102 Fracture of unspecified carpal bone, left wrist

S62.109 Fracture of unspecified carpal bone, unspecified wrist

The Tabular List shows S62.102 i as the code for fracture of unspecified carpal bone, left wrist. Per the instructional note, the appropriate 7th character is A, initial encounter for closed fracture, because the fracture isn't shown as open or closed.

Code Assignment for this Diagnosis: S62.102A





Coding Example 6

Now, let's review an external cause code example. Providers are encouraged to voluntarily report external cause codes, even in the absence of a reporting mandate.

Diagnosis: Injury sustained from falling down ice-covered steps, initial encounter

Step 1: Look up the term for the diagnosis in the External Cause of Injuries Index, which is part of the Alphabetic Index.

Fall, falling (accidental) W19

- from, off, out of
- - stairs, steps W10.9
- - - due to ice or snow W00.1

The index shows W00.1 for the code for falling from steps due to ice or snow. Next, verify this code in the Tabular List.

Step 2: Verify the code W00.1 in the Tabular List.

W00 Fall due to ice and snow

Includes: pedestrian on foot falling (slipping) on ice and snow

Add the appropriate 7th character is to be added to each code from category W00.

- A – initial encounter
- D – subsequent encounter
- S – sequela

W00.1 Fall from stairs and steps due to ice and snow

The Tabular List shows W00.1 as the code for fall from stairs and steps due to ice and snow. Since W00.1 only has 4 characters and A must appear in the 7th character position to show initial encounter, this is an example of a situation when you should use character X as a placeholder. Insert X twice to create 6 characters and then add the 7th character, A, at the end of the code.



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Code Assignment for this Diagnosis: W00.1XXA

