NOTE: Transmittal 1996, dated July 2, 2010, is being rescinded and replaced by Transmittal 2017, dated August 4, 2010, because the table attachments (new diagnosis codes, new procedure codes, invalid diagnosis codes, invalid procedure codes, revised diagnosis codes, and revised procedure codes) that were released to the Medicare contractors on July 2, 2010, have been revised. All other information remains the same.

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

I. SUMMARY OF CHANGES: This instruction is CMS" annual reminder to the Medicare contractors of the ICD-9-CM update that is effective for the dates of service on and after October 1, 2010. This Recurring Update Notification applies to Chapter 23, Section 10.2.

EFFECTIVE DATE: *October 1, 2010
IMPLEMENTATION DATE: October 4, 2010

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

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-Only One Per Row.

<table>
<thead>
<tr>
<th>R/N/D</th>
<th>CHAPTER / SECTION / SUBSECTION / TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

III. FUNDING:
For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:
No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined
in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENT:

Recurring Update Notification

*Unless otherwise specified, the effective date is the date of service.*
NOTE: Transmittal 1996, dated July 2, 2010, is being rescinded and replaced by Transmittal 2017, dated August 4, 2010, because the table attachments (new diagnosis codes, new procedure codes, invalid diagnosis codes, invalid procedure codes, revised diagnosis codes, and revised procedure codes) that were released to the Medicare contractors on July 2, 2010, have been revised. All other information remains the same.

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

Effective Date: October 1, 2010

Implementation Date: October 4, 2010

I. GENERAL INFORMATION

A. Background:

Effective October 1, 2003 an ICD-9-CM code is required on all paper and electronic claims billed to Medicare carriers/A/B MACs with the exception of ambulance claims (specialty type 59).

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

B. Policy:

This instruction serves as a reminder to A/B MACs/Carriers/FIs that the annual ICD-9-CM coding update is effective for dates of service on or after October 1, 2010 (effective for discharges on or after October 1, 2010 for institutional providers).

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

The CMS posts the new, revised, and discontinued ICD-9-CM diagnosis codes on the CMS Web site at http://www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/07_summarytables.asp#TopOfPage on an annual basis. The updated diagnosis codes are effective for dates of service/discharges on and after October 1. Providers can view the new updated codes at this site in June. Providers can also visit the National Center for Health Statistics (NCHS) Web site at http://www.cdc.gov/nchs/icd.htm. The NCHS will post the new ICD-9-CM Addendum on their web in June. Providers are also encouraged to purchase a new ICD-9-CM book or CD-ROM on an annual basis.
II. BUSINESS REQUIREMENTS TABLE  
*Use “Shall” to denote a mandatory requirement*

<table>
<thead>
<tr>
<th>Numbe r</th>
<th>Requirement</th>
<th>Responsibility (place an “X” in each applicable column)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>A / M A C</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A / M A C</td>
</tr>
<tr>
<td>7006.1</td>
<td>Contractors shall install and accept the new and revised Fiscal Year 2011 ICD-9-CM codes in order to process claims with dates of service on or after October 1, 2010.</td>
<td>X</td>
</tr>
<tr>
<td>7006.2</td>
<td>For institutional providers, FI/MACs shall accept the new and revised codes for claims with discharges on or after October 1, 2010.</td>
<td>X</td>
</tr>
<tr>
<td>7006.3</td>
<td>Contractors shall review reason codes and local edits that contain ICD-9-CM codes and update if necessary.</td>
<td>X</td>
</tr>
<tr>
<td>7006.4</td>
<td>Contractors shall review local edits that contain ICD-9-CM codes and update if necessary.</td>
<td>X</td>
</tr>
</tbody>
</table>

III. PROVIDER EDUCATION TABLE

<table>
<thead>
<tr>
<th>Numbe r</th>
<th>Requirement</th>
<th>Responsibility (place an “X” in each applicable column)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>A / M A C</td>
</tr>
<tr>
<td>7006.5</td>
<td>A provider education article related to this instruction will be available at <a href="http://www.cms.hhs.gov/MLNMattersArticles/">http://www.cms.hhs.gov/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established &quot;MLN Matters&quot; listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly</td>
<td>X</td>
</tr>
<tr>
<td>Number</td>
<td>Requirement</td>
<td>Responsibility (place an “X” in each applicable column)</td>
</tr>
<tr>
<td>--------</td>
<td>-------------</td>
<td>--------------------------------------------------------</td>
</tr>
</tbody>
</table>

scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.

IV. SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements, use the box below:

*Use "Should" to denote a recommendation.*

<table>
<thead>
<tr>
<th>X-Ref Requirement Number</th>
<th>Recommendations or other supporting information:</th>
</tr>
</thead>
<tbody>
<tr>
<td>7006.1</td>
<td>If needed, A/B MACs &amp; Carriers can refer to CR 6798 (MCS Changes Needed to Automate the Annual Update to the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)) for information about the MCS creation of the ICD-9-CM automated file.</td>
</tr>
</tbody>
</table>

Section B: For all other recommendations and supporting information, use this space:

Grouper 28, Medicare Code Editor v27, and Integrated Outpatient Code Editor v11.3.

Dependencies: Two attachments: the tables and the Addendum.

V. CONTACTS

**Pre-Implementation Contact(s):** April Billingsley, [april.billingsley@cms.hhs.gov](mailto:april.billingsley@cms.hhs.gov), 410-786-0140 (carrier), Sarah Shirey-Losso, [sarah.shirey-losso@cms.hhs.gov](mailto:sarah.shirey-losso@cms.hhs.gov), 410-786-0187 (FI), and Tracey Herring, [tracey.herring@cms.hhs.gov](mailto:tracey.herring@cms.hhs.gov), 410-786-7169 (DMEPOS claims processing issues)

**Post-Implementation Contact(s):** Appropriate Project Officer

VI. FUNDING

**Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.
Section B: For Medicare Administrative Contractors (MACs), include the following statement:

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Attachments: (9)
NEW DIAGNOSIS CODES
Effective October 1, 2010

The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC’s webpage at: www.cdc.gov/nchs/icd9.htm

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>237.73</td>
<td>Schwannomatosis</td>
</tr>
<tr>
<td>237.79*</td>
<td>Other neurofibromatosis</td>
</tr>
<tr>
<td>275.01</td>
<td>Hereditary hemochromatosis</td>
</tr>
<tr>
<td>275.02</td>
<td>Hemochromatosis due to repeated red blood cell transfusions</td>
</tr>
<tr>
<td>275.03</td>
<td>Other hemochromatosis</td>
</tr>
<tr>
<td>275.09</td>
<td>Other disorders of iron metabolism</td>
</tr>
<tr>
<td>276.61</td>
<td>Transfusion associated circulatory overload</td>
</tr>
<tr>
<td>276.69</td>
<td>Other fluid overload</td>
</tr>
<tr>
<td>278.03</td>
<td>Obesity hypoventilation syndrome</td>
</tr>
<tr>
<td>287.41</td>
<td>Posttransfusion purpura</td>
</tr>
<tr>
<td>287.49</td>
<td>Other secondary thrombocytopenia</td>
</tr>
<tr>
<td>315.35*</td>
<td>Childhood onset fluency disorder</td>
</tr>
<tr>
<td>447.70</td>
<td>Aortic ectasia, unspecified site</td>
</tr>
<tr>
<td>447.71</td>
<td>Thoracic aortic ectasia</td>
</tr>
<tr>
<td>447.72</td>
<td>Abdominal aortic ectasia</td>
</tr>
<tr>
<td>447.73</td>
<td>Thoracoabdominal aortic ectasia</td>
</tr>
<tr>
<td>488.01*</td>
<td>Influenza due to identified avian influenza virus with pneumonia</td>
</tr>
<tr>
<td>488.02*</td>
<td>Influenza due to identified avian influenza virus with other respiratory manifestations</td>
</tr>
<tr>
<td>488.09*</td>
<td>Influenza due to identified avian influenza virus with other manifestations</td>
</tr>
<tr>
<td>488.11*</td>
<td>Influenza due to identified novel H1N1 influenza virus with pneumonia</td>
</tr>
<tr>
<td>488.12*</td>
<td>Influenza due to identified novel H1N1 influenza virus with other respiratory manifestations</td>
</tr>
<tr>
<td>488.19*</td>
<td>Influenza due to identified novel H1N1 influenza virus with other manifestations</td>
</tr>
<tr>
<td>560.32</td>
<td>Fecal impaction</td>
</tr>
<tr>
<td>724.03</td>
<td>Spinal stenosis, lumbar region, with neurogenic claudication</td>
</tr>
<tr>
<td>752.31</td>
<td>Agenesis of uterus</td>
</tr>
<tr>
<td>752.32</td>
<td>Hypoplasia of uterus</td>
</tr>
<tr>
<td>752.33</td>
<td>Unicornuate uterus</td>
</tr>
<tr>
<td>752.34</td>
<td>Bicornuate uterus</td>
</tr>
<tr>
<td>752.35</td>
<td>Septate uterus</td>
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<tr>
<td>752.36</td>
<td>Arcuate uterus</td>
</tr>
<tr>
<td>752.39</td>
<td>Other anomalies of uterus</td>
</tr>
<tr>
<td>752.43</td>
<td>Cervical agenesis</td>
</tr>
<tr>
<td>752.44</td>
<td>Cervical duplication</td>
</tr>
<tr>
<td>752.45</td>
<td>Vaginal agenesis</td>
</tr>
<tr>
<td>752.46</td>
<td>Transverse vaginal septum</td>
</tr>
<tr>
<td>752.47</td>
<td>Longitudinal vaginal septum</td>
</tr>
<tr>
<td>780.33</td>
<td>Post traumatic seizures</td>
</tr>
<tr>
<td>780.66</td>
<td>Febrile nonhemolytic transfusion reaction</td>
</tr>
<tr>
<td>Diagnosis Code</td>
<td>Description</td>
</tr>
<tr>
<td>----------------</td>
<td>-------------</td>
</tr>
<tr>
<td>784.52*</td>
<td>Fluency disorder in conditions classified elsewhere</td>
</tr>
<tr>
<td>784.92</td>
<td>Jaw pain</td>
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<tr>
<td>786.30</td>
<td>Hemoptysis, unspecified</td>
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<tr>
<td>786.31</td>
<td>Acute idiopathic pulmonary hemorrhage in infants [AIPHI]</td>
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<tr>
<td>786.39</td>
<td>Other hemoptysis</td>
</tr>
<tr>
<td>787.60</td>
<td>Full incontinence of feces</td>
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<tr>
<td>787.61</td>
<td>Incomplete defecation</td>
</tr>
<tr>
<td>787.62</td>
<td>Fecal smearing</td>
</tr>
<tr>
<td>787.63</td>
<td>Fecal urgency</td>
</tr>
<tr>
<td>799.51</td>
<td>Attention or concentration deficit</td>
</tr>
<tr>
<td>799.52</td>
<td>Cognitive communication deficit</td>
</tr>
<tr>
<td>799.53</td>
<td>Visuospatial deficit</td>
</tr>
<tr>
<td>799.54</td>
<td>Psychomotor deficit</td>
</tr>
<tr>
<td>799.55</td>
<td>Frontal lobe and executive function deficit</td>
</tr>
<tr>
<td>799.59</td>
<td>Other signs and symptoms involving cognition</td>
</tr>
<tr>
<td>970.81</td>
<td>Poisoning by cocaine</td>
</tr>
<tr>
<td>970.89</td>
<td>Poisoning by other central nervous system stimulants</td>
</tr>
<tr>
<td>999.60</td>
<td>ABO incompatibility reaction, unspecified</td>
</tr>
<tr>
<td>999.61</td>
<td>ABO incompatibility with hemolytic transfusion reaction not specified as acute or delayed</td>
</tr>
<tr>
<td>999.62</td>
<td>ABO incompatibility with acute hemolytic transfusion reaction</td>
</tr>
<tr>
<td>999.63</td>
<td>ABO incompatibility with delayed hemolytic transfusion reaction</td>
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<tr>
<td>999.69</td>
<td>Other ABO incompatibility reaction</td>
</tr>
<tr>
<td>999.70</td>
<td>Rh incompatibility reaction, unspecified</td>
</tr>
<tr>
<td>999.71</td>
<td>Rh incompatibility with hemolytic transfusion reaction not specified as acute or delayed</td>
</tr>
<tr>
<td>999.72</td>
<td>Rh incompatibility with acute hemolytic transfusion reaction</td>
</tr>
<tr>
<td>999.73</td>
<td>Rh incompatibility with delayed hemolytic transfusion reaction</td>
</tr>
<tr>
<td>999.74</td>
<td>Other Rh incompatibility reaction</td>
</tr>
<tr>
<td>999.75</td>
<td>Non-ABO incompatibility reaction, unspecified</td>
</tr>
<tr>
<td>999.76</td>
<td>Non-ABO incompatibility with hemolytic transfusion reaction not specified as acute or delayed</td>
</tr>
<tr>
<td>999.77</td>
<td>Non-ABO incompatibility with acute hemolytic transfusion reaction</td>
</tr>
<tr>
<td>999.78</td>
<td>Non-ABO incompatibility with delayed hemolytic transfusion reaction</td>
</tr>
<tr>
<td>999.79</td>
<td>Other non-ABO incompatibility reaction</td>
</tr>
<tr>
<td>999.80</td>
<td>Transfusion reaction, unspecified</td>
</tr>
<tr>
<td>999.83</td>
<td>Hemolytic transfusion reaction, incompatibility unspecified</td>
</tr>
<tr>
<td>999.84</td>
<td>Acute hemolytic transfusion reaction, incompatibility unspecified</td>
</tr>
<tr>
<td>999.85</td>
<td>Delayed hemolytic transfusion reaction, incompatibility unspecified</td>
</tr>
<tr>
<td>E000.2</td>
<td>Volunteer activity</td>
</tr>
<tr>
<td>V11.4</td>
<td>Personal history of combat and operational stress reaction</td>
</tr>
<tr>
<td>V13.23</td>
<td>Personal history of vaginal dysplasia</td>
</tr>
<tr>
<td>V13.24</td>
<td>Personal history of vulvar dysplasia</td>
</tr>
<tr>
<td>Diagnosis Code</td>
<td>Description</td>
</tr>
<tr>
<td>----------------</td>
<td>-------------</td>
</tr>
<tr>
<td>V13.62</td>
<td>Personal history of other (corrected) congenital malformations of genitourinary system</td>
</tr>
<tr>
<td>V13.63</td>
<td>Personal history of (corrected) congenital malformations of nervous system</td>
</tr>
<tr>
<td>V13.64</td>
<td>Personal history of (corrected) congenital malformations of eye, ear, face and neck</td>
</tr>
<tr>
<td>V13.65</td>
<td>Personal history of (corrected) congenital malformations of heart and circulatory system</td>
</tr>
<tr>
<td>V13.66</td>
<td>Personal history of (corrected) congenital malformations of respiratory system</td>
</tr>
<tr>
<td>V13.67</td>
<td>Personal history of (corrected) congenital malformations of digestive system</td>
</tr>
<tr>
<td>V13.68**</td>
<td>Personal history of (corrected) congenital malformations of integument, limbs, and musculoskeletal systems</td>
</tr>
<tr>
<td>V15.53</td>
<td>Personal history of retained foreign body fully removed</td>
</tr>
<tr>
<td>V25.11</td>
<td>Encounter for insertion of intrauterine contraceptive device</td>
</tr>
<tr>
<td>V25.12</td>
<td>Encounter for removal of intrauterine contraceptive device</td>
</tr>
<tr>
<td>V25.13</td>
<td>Encounter for removal and reinsertion of intrauterine contraceptive device</td>
</tr>
<tr>
<td>V49.86</td>
<td>Do not resuscitate status</td>
</tr>
<tr>
<td>V49.87*</td>
<td>Physical restraints status</td>
</tr>
<tr>
<td>V62.85</td>
<td>Homicidal ideation</td>
</tr>
<tr>
<td>V85.41</td>
<td>Body Mass Index 40.0-44.9, adult</td>
</tr>
<tr>
<td>V85.42</td>
<td>Body Mass Index 45.0-49.9, adult</td>
</tr>
<tr>
<td>V85.43</td>
<td>Body Mass Index 50.0-59.9, adult</td>
</tr>
<tr>
<td>V85.44</td>
<td>Body Mass Index 60.0-69.9, adult</td>
</tr>
<tr>
<td>V85.45</td>
<td>Body Mass Index 70 and over, adult</td>
</tr>
<tr>
<td>V88.11</td>
<td>Acquired total absence of pancreas</td>
</tr>
<tr>
<td>V88.12</td>
<td>Acquired partial absence of pancreas</td>
</tr>
<tr>
<td>V90.01</td>
<td>Retained depleted uranium fragments</td>
</tr>
<tr>
<td>V90.09</td>
<td>Other retained radioactive fragments</td>
</tr>
<tr>
<td>V90.10</td>
<td>Retained metal fragments, unspecified</td>
</tr>
<tr>
<td>V90.11</td>
<td>Retained magnetic metal fragments</td>
</tr>
<tr>
<td>V90.12</td>
<td>Retained nonmagnetic metal fragments</td>
</tr>
<tr>
<td>V90.2</td>
<td>Retained plastic fragments</td>
</tr>
<tr>
<td>V90.31</td>
<td>Retained animal quills or spines</td>
</tr>
<tr>
<td>V90.32</td>
<td>Retained tooth</td>
</tr>
<tr>
<td>V90.33</td>
<td>Retained wood fragments</td>
</tr>
<tr>
<td>V90.39</td>
<td>Other retained organic fragments</td>
</tr>
<tr>
<td>V90.81</td>
<td>Retained glass fragments</td>
</tr>
<tr>
<td>V90.83</td>
<td>Retained stone or crystalline fragments</td>
</tr>
<tr>
<td>V90.89</td>
<td>Other specified retained foreign body</td>
</tr>
<tr>
<td>V90.9</td>
<td>Retained foreign body, unspecified material</td>
</tr>
<tr>
<td>V91.00</td>
<td>Twin gestation, unspecified number of placenta, unspecified number of amniotic sacs</td>
</tr>
<tr>
<td>V91.01</td>
<td>Twin gestation, monochorionic/monoamniotic (one placenta, one amniotic sac)</td>
</tr>
<tr>
<td>V91.02</td>
<td>Twin gestation, monochorionic/diamnionic (one placenta, two amniotic sacs)</td>
</tr>
<tr>
<td>V91.03</td>
<td>Twin gestation, dichorionic/diamniotic (two placentae, two amniotic sacs)</td>
</tr>
</tbody>
</table>
## NEW DIAGNOSIS CODES  
**Effective October 1, 2010**

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V91.09</td>
<td>Twin gestation, unable to determine number of placenta and number of amniotic sacs</td>
</tr>
<tr>
<td>V91.10</td>
<td>Triplet gestation, unspecified number of placenta and unspecified number of amniotic sacs</td>
</tr>
<tr>
<td>V91.11</td>
<td>Triplet gestation, with two or more monochorionic fetuses</td>
</tr>
<tr>
<td>V91.12</td>
<td>Triplet gestation, with two or more monoamniotic fetuses</td>
</tr>
<tr>
<td>V91.19</td>
<td>Triplet gestation, unable to determine number of placenta and number of amniotic sacs</td>
</tr>
<tr>
<td>V91.20</td>
<td>Quadruplet gestation, unspecified number of placenta and unspecified number of amniotic sacs</td>
</tr>
<tr>
<td>V91.21</td>
<td>Quadruplet gestation, with two or more monochorionic fetuses</td>
</tr>
<tr>
<td>V91.22</td>
<td>Quadruplet gestation, with two or more monoamniotic fetuses</td>
</tr>
<tr>
<td>V91.29</td>
<td>Quadruplet gestation, unable to determine number of placenta and number of amniotic sacs</td>
</tr>
<tr>
<td>V91.90</td>
<td>Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs</td>
</tr>
<tr>
<td>V91.91</td>
<td>Other specified multiple gestation, with two or more monochorionic fetuses</td>
</tr>
<tr>
<td>V91.92</td>
<td>Other specified multiple gestation, with two or more monoamniotic fetuses</td>
</tr>
<tr>
<td>V91.99</td>
<td>Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs</td>
</tr>
</tbody>
</table>

**Notes:**  
* These diagnosis codes were discussed at the March 9-10, 2010 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. However, they will be implemented on October 1, 2010. Please note that new code 237.78, Other neurofibromatosis, that was listed as a new diagnosis code in the proposed rule has been modified to new code 237.79. New code 799.50, Unspecified signs and symptoms involving cognition, that was listed in the proposed rule as a new code has been deleted and will not be implemented on October 1, 2010.  
**The code title has changed from the proposed rule.**
NEW PROCEDURE CODES  
Effective October 1, 2010

The final addendum which describes all changes to the procedure part of ICD-9-CM is posted on CMS’ webpage at: www.cms.hhs.gov/ICD9ProviderDiagnosticCodes

<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00.60</td>
<td>Insertion of drug-eluting stent(s) of superficial femoral artery</td>
</tr>
<tr>
<td>01.20*</td>
<td>Cranial implantation or replacement of neurostimulator pulse generator</td>
</tr>
<tr>
<td>01.29*</td>
<td>Removal of cranial neurostimulator pulse generator</td>
</tr>
<tr>
<td>17.71*</td>
<td>Non-coronary intra-operative fluorescence vascular angiography [IFVA]</td>
</tr>
<tr>
<td>32.27</td>
<td>Bronchoscopic bronchial thermoplasty, ablation of airway smooth muscle</td>
</tr>
<tr>
<td>35.97*</td>
<td>Percutaneous mitral valve repair with implant</td>
</tr>
<tr>
<td>37.37*</td>
<td>Excision or destruction of other lesion or tissue of heart, thoracoscopic approach</td>
</tr>
<tr>
<td>38.97*</td>
<td>Central venous catheter placement with guidance</td>
</tr>
<tr>
<td>39.81</td>
<td>Implantation or replacement of carotid sinus stimulation device, total system</td>
</tr>
<tr>
<td>39.82</td>
<td>Implantation or replacement of carotid sinus stimulation lead(s) only</td>
</tr>
<tr>
<td>39.83</td>
<td>Implantation or replacement of carotid sinus stimulation pulse generator only</td>
</tr>
<tr>
<td>39.84</td>
<td>Revision of carotid sinus stimulation lead(s) only</td>
</tr>
<tr>
<td>39.85</td>
<td>Revision of carotid sinus stimulation pulse generator</td>
</tr>
<tr>
<td>39.86</td>
<td>Removal of carotid sinus stimulation device, total system</td>
</tr>
<tr>
<td>39.87</td>
<td>Removal of carotid sinus stimulation lead(s) only</td>
</tr>
<tr>
<td>39.88</td>
<td>Removal of carotid sinus stimulation pulse generator only</td>
</tr>
<tr>
<td>39.89</td>
<td>Other operations on carotid body, carotid sinus and other vascular bodies</td>
</tr>
<tr>
<td>81.88</td>
<td>Reverse total shoulder replacement</td>
</tr>
<tr>
<td>84.94*</td>
<td>Insertion of sternal fixation device with rigid plates</td>
</tr>
<tr>
<td>85.55*</td>
<td>Fat graft to breast</td>
</tr>
<tr>
<td>86.87*</td>
<td>Fat graft of skin and subcutaneous tissue</td>
</tr>
<tr>
<td>86.90*</td>
<td>Extraction of fat for graft or banking</td>
</tr>
</tbody>
</table>

Notes:
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INVALID DIAGNOSIS CODES
Effective October 1, 2010

The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC’s webpage at: www.cdc.gov/nchs/icd9.htm

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>275.0</td>
<td>Disorders of iron metabolism</td>
</tr>
<tr>
<td>276.6</td>
<td>Fluid overload</td>
</tr>
<tr>
<td>287.4</td>
<td>Secondary thrombocytopenia</td>
</tr>
<tr>
<td>488.0*</td>
<td>Influenza due to identified avian influenza virus</td>
</tr>
<tr>
<td>488.1*</td>
<td>Influenza due to identified novel H1N1 influenza virus</td>
</tr>
<tr>
<td>752.3</td>
<td>Other anomalies of uterus</td>
</tr>
<tr>
<td>786.3</td>
<td>Hemoptysis</td>
</tr>
<tr>
<td>787.6</td>
<td>Incontinence of feces</td>
</tr>
<tr>
<td>970.8</td>
<td>Poisoning by other specified central nervous system stimulants</td>
</tr>
<tr>
<td>999.6</td>
<td>ABO incompatibility reaction</td>
</tr>
<tr>
<td>999.7</td>
<td>Rh incompatibility reaction</td>
</tr>
<tr>
<td>V25.1</td>
<td>Encounter for insertion of intrauterine contraceptive device</td>
</tr>
<tr>
<td>V85.4</td>
<td>Body Mass Index 40 and over, adult</td>
</tr>
</tbody>
</table>

Notes:
These diagnosis codes were discussed at the March 9-10, 2010 ICD-9-CM Coordination and Maintenance Committee meeting and were not finalized in time to include in the proposed rule. However, they will be deleted on October 1, 2010.
INVALID PROCEDURE CODES
Effective October 1, 2010

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<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>39.8</td>
<td>Operations on carotid body, carotid sinus and other vascular bodies</td>
</tr>
</tbody>
</table>
The final addendum providing complete information on changes to the diagnosis part of ICD-9-CM is posted on CDC’s webpage at: www.cdc.gov/nchs/icd9.htm

<table>
<thead>
<tr>
<th>Diagnosis Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>307.0*</td>
<td>Adult onset fluency disorder</td>
</tr>
<tr>
<td>629.81</td>
<td>Recurrent pregnancy loss without current pregnancy</td>
</tr>
<tr>
<td>646.30</td>
<td>Recurrent pregnancy loss, unspecified as to episode of care or not applicable</td>
</tr>
<tr>
<td>646.31</td>
<td>Recurrent pregnancy loss, delivered, with or without mention of antepartum condition</td>
</tr>
<tr>
<td>646.33</td>
<td>Recurrent pregnancy loss, antepartum condition or complication</td>
</tr>
<tr>
<td>724.02</td>
<td>Spinal stenosis, lumbar region, without neurogenic claudication</td>
</tr>
<tr>
<td>781.8</td>
<td>Neurologic neglect syndrome</td>
</tr>
<tr>
<td>E017.0</td>
<td>Roller coaster riding</td>
</tr>
<tr>
<td>V07.51*</td>
<td>Use of selective estrogen receptor modulators (SERMs)</td>
</tr>
<tr>
<td>V07.52*</td>
<td>Use of aromatase inhibitors</td>
</tr>
<tr>
<td>V07.59*</td>
<td>Use of other agents affecting estrogen receptors and estrogen levels</td>
</tr>
<tr>
<td>V07.8*</td>
<td>Other specified prophylactic or treatment measure</td>
</tr>
<tr>
<td>V07.9*</td>
<td>Unspecified prophylactic or treatment measure</td>
</tr>
<tr>
<td>V13.61</td>
<td>Personal history of (corrected) hypospadias</td>
</tr>
<tr>
<td>V13.69</td>
<td>Personal history of other (corrected) congenital malformations</td>
</tr>
<tr>
<td>V26.35</td>
<td>Encounter for testing of male partner of female with recurrent pregnancy loss</td>
</tr>
</tbody>
</table>

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REVISED PROCEDURE CODE TITLES
Effective October 1, 2010

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<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00.55</td>
<td>Insertion of drug-eluting stent(s) of other peripheral vessel(s)</td>
</tr>
<tr>
<td>35.96*</td>
<td>Percutaneous balloon valvuloplasty</td>
</tr>
<tr>
<td>37.34*</td>
<td>Excision or destruction of other lesion or tissue of heart, endovascular approach</td>
</tr>
<tr>
<td>81.02*</td>
<td>Other cervical fusion of the anterior column, anterior technique</td>
</tr>
<tr>
<td>81.03*</td>
<td>Other cervical fusion of the posterior column, posterior technique</td>
</tr>
<tr>
<td>81.04*</td>
<td>Dorsal and dorsolumbar fusion of the anterior column, anterior technique</td>
</tr>
<tr>
<td>81.05*</td>
<td>Dorsal and dorsolumbar fusion of the posterior column, posterior technique</td>
</tr>
<tr>
<td>81.06*</td>
<td>Lumbar and lumbosacral fusion of the anterior column, anterior technique</td>
</tr>
<tr>
<td>81.07*</td>
<td>Lumbar and lumbosacral fusion of the posterior column, posterior technique</td>
</tr>
<tr>
<td>81.08*</td>
<td>Lumbar and lumbosacral fusion of the anterior column, posterior technique</td>
</tr>
<tr>
<td>81.32*</td>
<td>Refusion of other cervical spine, anterior column, anterior technique</td>
</tr>
<tr>
<td>81.33*</td>
<td>Refusion of other cervical spine, posterior column, posterior technique</td>
</tr>
<tr>
<td>81.34*</td>
<td>Refusion of dorsal and dorsolumbar spine, anterior column, anterior technique</td>
</tr>
<tr>
<td>81.35*</td>
<td>Refusion of dorsal and dorsolumbar spine, posterior column, posterior technique</td>
</tr>
<tr>
<td>81.36*</td>
<td>Refusion of lumbar and lumbosacral spine, anterior column, anterior technique</td>
</tr>
<tr>
<td>81.37*</td>
<td>Refusion of lumbar and lumbosacral spine, posterior column, posterior technique</td>
</tr>
<tr>
<td>81.38*</td>
<td>Refusion of lumbar and lumbosacral spine, anterior column, posterior technique</td>
</tr>
<tr>
<td>81.80</td>
<td>Other total shoulder replacement</td>
</tr>
<tr>
<td>83.21*</td>
<td>Open biopsy of soft tissue</td>
</tr>
<tr>
<td>86.11*</td>
<td>Closed biopsy of skin and subcutaneous tissue</td>
</tr>
<tr>
<td>88.59*</td>
<td>Intra-operative coronary fluorescence vascular angiography</td>
</tr>
<tr>
<td>99.14</td>
<td>Injection or infusion of immunoglobulin</td>
</tr>
</tbody>
</table>

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Tabular

Revise code title 00.55 Insertion of drug-eluting peripheral vessel stent(s) of other peripheral vessel(s)

Add exclusion term Excludes: insertion of drug-eluting stent(s) of superficial femoral artery (00.60)

Revise exclusion term that for aneurysm repair that for other endovascular procedure (39.71-39.79)

New code 00.60 Insertion of drug-eluting stent(s) of superficial femoral artery
Code also any:
- angioplasty or atherectomy of other non-coronary vessel(s)
  (39.50)
- non-drug-eluting peripheral stents (39.90)
- number of vascular stents inserted (00.45-00.48)
- number of vessels treated (00.40-00.43)
- procedure on vessel bifurcation (00.44)
Excludes:
- insertion of drug-eluting stent(s) of other peripheral vessel (00.55)
- that for other endovascular procedure (39.71-39.79)

New code 01.20 Cranial implantation or replacement of neurostimulator pulse generator
Code also any associated lead implantation (02.93)
Excludes: implantation or replacement of subcutaneous neurostimulator pulse generator (86.94 -86.98)

New code 01.29 Removal of cranial neurostimulator pulse generator

01.59 Other excision or destruction of lesion or tissue of brain
Add inclusion term Amygdalohippocampectomy

02.93 Implantation or replacement of intracranial neurostimulator lead(s)
Revise code also note: Code also any:

- insertion of cranial implantation or replacement of neurostimulator pulse generator (01.20)
- insertion of subcutaneous neurostimulator pulse generator (86.94-86.98)

04.92 Implantation or replacement of peripheral neurostimulator lead(s)
Add exclusion term: Excludes: implantation or replacement of carotid sinus stimulation lead(s) (39.82)

07 Operations on other endocrine glands
Excludes: operations on:
Revise exclusion term: aortic and carotid bodies (39.81-39.89)

New code: 17.71 Non-coronary intra-operative fluorescence vascular angiography [IFVA]
Intraoperative laser arteriogram
SPY arteriogram
SPY arteriography
Excludes: intra-operative coronary fluorescence vascular angiography (88.59)

32.26 Other and unspecified ablation of lung lesion or tissue
Add exclusion term: Excludes: bronchoscopic bronchial thermoplasty, ablation of smooth airway muscle (32.27)

New code: 32.27 Bronchoscopic bronchial thermoplasty, ablation of airway smooth muscle

Revise inclusion term: Transbronchoscopic needle aspiration [TBNA] of bronchus
Add exclusion term: Excludes: mini-bronchoalveolar lavage [mini-BAL] (33.29)

33.27 Closed endoscopic biopsy of lung
Add inclusion term: Transbronchoscopic needle aspiration [TBNA] of
Add exclusion term

33.29 Other diagnostic procedures on lung and bronchus
Excludes: bronchoalveolar lavage [BAL] (33.24)

Add inclusion term

33.73 Endoscopic insertion or replacement of bronchial valve(s), multiple lobes
Add inclusion term Endobronchial airflow redirection valve
Add inclusion term Intrabronchial airflow redirection valve

Add exclusion term

35.24 Other replacement of mitral valve
Excludes: percutaneous repair with implant or leaflet clip (35.97)

Revise code title

35.96 Percutaneous balloon valvuloplasty
Delete inclusion term
Add inclusion term Balloon dilation of valve
Add exclusion term Excludes: mitral valve repair with implant (35.97)

New code

35.97 Percutaneous mitral valve repair with implant

Endovascular mitral valve repair
Implantation of mitral valve leaflet clip
Transcatheter mitral valve repair

Code also any transesophageal echocardiography [TEE] (88.72)
Excludes: percutaneous balloon valvuloplasty (35.96)

Revise code also note

37.3 Pericardiectomy and excision of lesion of heart
Code also cardiopulmonary bypass [extracorporeal circulation] [heart-lung machine], if performed (39.61)

Revise inclusion term

37.33 Excision or destruction of other lesion or tissue of heart, open approach
Ablation or incision of heart tissue (cryoablation)
(electrocautery) (laser) (microwave)
(radiofrequency) (resection) (ultrasound), open chest approach

Delete inclusion term
Add inclusion term Modified maze procedure, transthoracic approach
That by median sternotomy

That by median sternotomy
Add inclusion term

That by thoracotomy without use of thoracoscope

Excludes: ablation, excision, or destruction of lesion or tissue of heart:

Add exclusion term

thoracoscopic approach (37.37)

Revise code title

37.34 Excision or destruction of other lesion or tissue of heart, other endovascular approach

Revise inclusion term

Ablation of heart tissue (cryoablation) (electrocautery) (laser) (microwave) (radiofrequency) (resection) (ultrasound), via peripherally inserted catheter

Revise inclusion term

Modified maze procedure, endovascular percutaneous approach

Add exclusion term

Excludes: ablation, excision or destruction of lesion of tissue of heart:

open approach (37.33)

thoracoscopic approach (37.37)

New code

37.37 Excision or destruction of other lesion or tissue of heart, thoracoscopic approach

Ablation or incision of heart tissue (cryoablation) (electrocautery) (laser) (microwave) (radiofrequency) (resection) (ultrasound), via thoracoscope

Modified maze procedure, thoracoscopic approach

That via thoracoscopically-assisted approach (without thoracotomy) (with port access) (with sub-xiphoid incision)

Excludes: ablation, excision or destruction of lesion or tissue of heart:

open approach (37.33)

endovascular approach (37.34)

thoracoscopic excision or destruction of left atrial appendage [LAA] (37.36)

37.62 Insertion of temporary non-implantable extracorporeal circulatory assist device

Delete inclusion term

Acute circulatory support device

Delete inclusion term

Short-term circulatory support (up to six hours)

38.93 Venous catheterization, not elsewhere classified
Add exclusion term
Excludes: that with guidance (electrocardiogram) (fluoroscopy) (ultrasound) (38.97)

New code
38.97 Central venous catheter placement with guidance
Includes guidance by:
electrocardiogram
fluoroscopy
ultrasound

New category
39.8 Operations on carotid body, carotid sinus and other vascular bodies
Delete inclusion term
Chemodectomy
Delete inclusion term
Denervation of:
aortic body
carotid body
Delete inclusion term
Electronic stimulator
Delete inclusion term
Glomectomy, carotid
Delete inclusion term
Implantation or replacement of carotid sinus baroreflex activation device
Delete excludes term
Excludes: replacement of carotid sinus lead(s) only (04.92)

New code
39.81 Implantation or replacement of carotid sinus stimulation device, total system
Carotid sinus baroreflex activation device
Implantation of carotid sinus stimulator and lead(s)
Includes: carotid explorations
Excludes: implantation or replacement of carotid sinus stimulation lead(s) only (39.82)
implantation or replacement of carotid sinus stimulation pulse generator only (39.83)

New code
39.82 Implantation or replacement of carotid sinus stimulation lead(s) only
Excludes: implantation or replacement of carotid sinus stimulation device, total system (39.81)

New code
39.83 Implantation or replacement of carotid sinus stimulation pulse generator only
Excludes: implantation or replacement of carotid sinus stimulation device, total system (39.81)
| New code | 39.84 | Revision of carotid sinus stimulation lead(s) only  
|          |      | Repair of electrode [removal with re-insertion]  
|          |      | Repositioning of lead(s) [electrode]  
|          | 39.85 | Revision of carotid sinus stimulation pulse generator  
|          |      | Debridement and reforming pocket (skin and subcutaneous tissue)  
|          |      | Relocation of pocket [creation of new pocket]  
|          |      | Repositioning of pulse generator  
|          |      | Revision of carotid sinus stimulation pulse generator pocket  
| 39.86   | Removal of carotid sinus stimulation device, total system  
|          | 39.87 | Removal of carotid sinus stimulation lead(s) only  
|          | 39.88 | Removal of carotid sinus stimulation pulse generator only  
|          | 39.89 | Other operations on carotid body, carotid sinus and other vascular bodies  
|          |      | Chemodectomy  
|          |      | Denervation of:  
|          |      | aortic body  
|          |      | carotid body  
|          |      | Glomectomy, carotid  
|          |      | Excludes: excision of glomus jugulare (20.51)  
|          | 40.11 | Biopsy of lymphatic structure  
|          |      | Transbronchoscopic needle aspiration [TBNA] of lymph node  
|          | 53.59 | Repair of other hernia of anterior abdominal wall  
|          |      | That by laparoscopic approach  
|          | 78.5  | Internal fixation of bone without fracture reduction  
|          |      | Excludes: insertion of sternal fixation device with rigid plates (84.94)  

Add inclusion term  
Transbronchoscopic needle aspiration [TBNA] of lymph node  

Add inclusion term  
That by laparoscopic approach  

Add exclusion term  
insertion of sternal fixation device with rigid plates (84.94)
81.0  Spinal fusion

Add note

Note: Spinal fusion is classified by the anatomic portion (column) fused and the technique (approach) used to perform the fusion.

For the anterior column, the body (corpus) of adjacent vertebrae are fused (interbody fusion). The anterior column can be fused using an anterior, lateral, or posterior technique.

For the posterior column, posterior structures of adjacent vertebrae are fused (pedicle, lamina, facet, transverse process, or “gutter” fusion). A posterior column fusion can be performed using a posterior, posterolateral, or lateral transverse technique.

Revise code title

81.02  Other cervical fusion of the ; anterior column, anterior technique
Arthrodesis of C2 level or below:
  anterior (interbody technique) fusion

Revise inclusion term

Revise code title

81.03  Other cervical fusion of the ; posterior column, posterior technique
Arthrodesis of C2 level or below; posterolateral technique

Delete inclusion term

Delete inclusion term

Revise code title

81.04  Dorsal and dorsolumbar fusion of the ; anterior column, anterior technique
Arthrodesis of thoracic or thoracolumbar region:
  anterior (interbody technique) fusion
  Extracavitary technique

Add inclusion term

Revise code title

81.05  Dorsal and dorsolumbar fusion of the ; posterior column, posterior technique
Arthrodesis of thoracic or thoracolumbar region:
  posterolateral technique
  posterior (interbody technique)
  posterolateral technique
Revise code title 81.06 Lumbar and lumbosacral fusion of the \( \tau \), anterior column, anterior technique

Arthrodesis of lumbar or lumbosacral region:

- anterior \( \text{interbody technique} \) fusion

Revise inclusion term Add inclusion term retroperitoneal
Add inclusion term transperitoneal
Add inclusion term Direct lateral interbody fusion [DLIF]
Add inclusion term Extreme lateral interbody fusion [XLIF]

Revise code title 81.07 Lumbar and lumbosacral fusion of the \( \tau \), posterior column, posterior or lateral transverse process technique

Add inclusion term Facet fusion
Add inclusion term Posterolateral technique
Add inclusion term Transverse process technique

Revise code title 81.08 Lumbar and lumbosacral fusion of the \( \tau \), anterior column, posterior technique

Arthrodesis of lumbar or lumbosacral region:

- posterior \( \text{interbody technique} \) fusion
- posterolateral technique

Revise inclusion term Delete inclusion term Axial lumbar interbody fusion [AxiaLIF]
Add inclusion term

Add note

Note: Spine fusion is classified by the anatomic portion (column) fused and the technique (approach) used to perform the fusion.

For the anterior column, the body (corpus) of adjacent vertebrae are fused (interbody fusion). The anterior column can be fused using an anterior, lateral, or posterior technique.

For the posterior column, posterior structures of adjacent vertebrae are fused (pedicle, lamina, facet, transverse process, or “gutter” fusion). A posterior column fusion can be performed using a posterior, posterolateral, or lateral transverse technique.

Revise code title 81.32 Refusion of other cervical spine, anterior column,
anterior technique
Arthrodesis of C2 level or below:

Revise inclusion term
anterior (interbody technique) fusion

Revise code title 81.33
Refusion of other cervical spine, posterior column, posterior technique
Revise inclusion term
Arthrodesis of C2 level or below: posterolateral technique
Delete inclusion term
Poster (interbody technique)
Delete inclusion term
Posterolateral technique

Revise code title 81.34
Refusion of dorsal and dorsolumbar spine, anterior column, anterior technique
Revise inclusion term
Arthrodesis of thoracic or thoracolumbar region:
Add inclusion term
Extracavitary technique

Revise code title 81.35
Refusion of dorsal and dorsolumbar spine, posterior column, posterior technique
Revise inclusion term
Arthrodesis of thoracic or thoracolumbar region: posterolateral technique
Delete inclusion term
posterolateral technique
Delete inclusion term
posterolateral technique

Revise code title 81.36
Refusion of lumbar and lumbosacral spine, anterior column, anterior technique
Revise inclusion term
Arthrodesis of lumbar or lumbosacral region:
Add inclusion term
retroperitoneal
transperitoneal
Add inclusion term
Direct lateral interbody fusion [DLIF]
Add inclusion term
Extreme lateral interbody fusion [XLIF]

Revise code title 81.37
Refusion of lumbar and lumbosacral spine, posterior column, posterior or lateral transverse process technique
Add inclusion term
Facet fusion
Add inclusion term
Posterolateral technique
Add inclusion term
Transverse process technique

Revise code title 81.38
Refusion of lumbar and lumbosacral spine, anterior
column, posterior technique

Revise inclusion term
Arthrodesis of lumbar or lumbosacral region:
posterior (interbody) technique fusion
posterior lateral technique

Add inclusion term
Axial lumbar interbody fusion [AxiaLIF]

Revise code title
81.80 Other total shoulder replacement
Add exclusion term
Excludes: reverse total shoulder replacement (81.88)

81.83 Other repair of shoulder
Delete inclusion term
Revision of arthroplasty of shoulder

New code
81.88 Reverse total shoulder replacement
Reverse ball-and-socket of the shoulder
Excludes: conversion of prior (failed) total shoulder replacement (arthroplasty) to reverse total shoulder replacement (81.97)

81.97 Revision of joint replacement of upper extremity
Add inclusion term
Revision of arthroplasty of shoulder

Revise code title
83.21 Open biopsy of soft tissue
Revise exclusion term
Excludes: closed biopsy of skin and subcutaneous tissue (86.11)

New code
84.94 Insertion of sternal fixation device with rigid plates
Excludes: insertion of sternal fixation device for internal fixation of fracture (79.39)
internal fixation of bone without fracture reduction (78.59)

Add exclusion term
85.51 Unilateral injection into breast for augmentation
Excludes: injection of fat graft of breast (85.55)

Add exclusion term
85.52 Bilateral injection into breast for augmentation
Excludes: injection of fat graft of breast (85.55)
New code
85.55  Fat graft to breast
  Includes: extraction of fat for autologous graft
  Autologous fat transplantation or transfer
  Fat graft to breast NOS
  Fat graft to breast with or without use of
  enriched graft
  Micro-fat grafting
  Excludes: that with reconstruction of breast (85.70 –
85.79)

85.92  Injection of therapeutic agent into breast
Revise exclusion term
Excludes: that for augmentation of breast (85.51-85.52, 85.55)

Revise code title
86.11  Closed Biopsy of skin and subcutaneous tissue

86.83  Size reduction plastic operation
Add exclusion term
Excludes: liposuction to harvest fat graft (86.90)

New code
86.87  Fat graft of skin and subcutaneous tissue
  Includes: extraction of fat for autologous graft
  Autologous fat transplantation or transfer
  Fat graft NOS
  Fat graft of skin and subcutaneous tissue with or
  without use of enriched graft
  Micro-fat grafting
  Excludes: fat graft to breast (85.55)

New code
86.90  Extraction of fat for graft or banking
  Harvest of fat for extraction of cells for future use
  Liposuction to harvest fat graft
  Excludes: that with graft at same operative episode
  (85.55, 86.87)

86.94  Insertion or replacement of single array neurostimulator
       pulse generator, not specified as rechargeable
Add exclusion term
Excludes: cranial implantation or replacement of neurostimulator
       pulse generator (01.20)

86.95  Insertion or replacement of dual array neurostimulator
       pulse generator, not specified as rechargeable
Add exclusion term
Excludes: cranial implantation or replacement of neurostimulator
86.96 Insertion or replacement of other neurostimulator pulse generator
Add exclusion term
Excludes: cranial implantation or replacement of neurostimulator pulse generator (01.20)

86.97 Insertion or replacement of single array rechargeable neurostimulator pulse generator
Add exclusion term
Excludes: cranial implantation or replacement of neurostimulator pulse generator (01.20)

86.98 Insertion or replacement of dual array rechargeable neurostimulator pulse generator
Add exclusion term
Excludes: cranial implantation or replacement of neurostimulator pulse generator (01.20)

Revise code title
88.59 Intra-operative coronary fluorescence vascular angiography

Revise code title
99.14 Injection or infusion of gamma globulin immunoglobulin
Add inclusion term
Injection or infusion of gamma globulin

Index
Ablation
lesion
heart
maze procedure (Cox-maze)
endovascular approach 37.34
open (trans-thoracic) approach 37.33
Revise subterm
thoracoscopic approach 37.37
Add subterm
thoracoscopic approach 37.33
Delete term
trans-thoracic approach 37.33
Add subterm
lungs 32.26
Add subterm
bronchoscopic thermoplasty 32.27

Acromioplasty 81.83
Revise subterm
total replacement, NEC 81.80
<table>
<thead>
<tr>
<th>Add subterm</th>
<th>other 81.80</th>
<th>reverse 81.88</th>
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<tbody>
<tr>
<td>Add term</td>
<td>Amygdalohippocampectomy 01.59</td>
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<td>Revise subterm</td>
<td>Angiocardiography (selective) 88.50</td>
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<tr>
<td>Revise subterm</td>
<td>intra-operative coronary fluorescence vascular 88.59</td>
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<td>SPY, coronary 88.59</td>
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<tr>
<td>Add subterm</td>
<td>Angiography (arterial) – see also Arteriography 88.40</td>
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<td>Add subterm</td>
<td>by magnetic resonance – see Imaging, magnetic resonance, by site</td>
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<tr>
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<td>non-coronary, intra-operative fluorescence 17.71</td>
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<td>Revise subterm</td>
<td>Arteriography (contrast) (fluoroscopic) (retrograde) 88.40</td>
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<td>SPY, coronary 88.59</td>
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<td>Arthrodesis (compression) (extra-articular) (intra-articular) (with bone graft) (with fixation device) 81.20</td>
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<td>lumbosacral, lumbar NEC 81.08</td>
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<td>Revise indent/subterm</td>
<td>anterior column (interbody)</td>
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<tr>
<td>Revise indent/subterm</td>
<td>anterolateral (anterior) technique 81.06</td>
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<tr>
<td>Revise indent/subterm</td>
<td>posterior (interbody), posterolateral technique 81.08</td>
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<td>Add subterm</td>
<td>axial lumber interbody fusion [AxiaLIF®] 81.08</td>
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<td>direct lateral interbody fusion [DLIF®] 81.06</td>
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<td>extreme lateral interbody fusion [XLIF®] 81.06</td>
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<td>Add subterm</td>
<td>facet 81.07</td>
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<tr>
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<td>Arthroplasty (with fixation device) (with traction) 81.96</td>
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<tr>
<td>Add subterm</td>
<td>shoulder 81.83</td>
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<td>Add subterm</td>
<td>prosthetic replacement (partial) 81.81</td>
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<tr>
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<td>total, NEC 81.80</td>
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<tr>
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<td>other 81.80</td>
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<td>reverse 81.88</td>
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<tr>
<td>Revise subterm</td>
<td>Biopsy</td>
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<td>Add subterm</td>
<td>soft tissue NEC 83.24, 86.11</td>
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<td>Add subterm</td>
<td>closed (needle) (punch) 86.11</td>
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<tr>
<td>Add subterm</td>
<td>open 83.21</td>
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</tbody>
</table>
Revise term  
Chemodectomy 39.89

Creation – see also Formation conduit  
apical-aortic (AAC) 35.93

Add subterm  

Denervation  
aortic body 39.89  
carotid body 39.89

Add subterm  

Destruction  
lesion  
heart  
by thoracoscopic approach 37.37  
tissue of heart -see Excision, lesion, heart

Add subterm  

Embolization (transcatheter)  
artery (selective) 38.80  
by  
endovascular approach 39.79  
head and neck vessels 39.72  
coil, endovascular 39.79  
head and neck 39.75

Add subterm  

Excision  
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lesion  
heart 37.33 37.34  
Cox-maze, open 37.33  
maze, modified, endovascular 37.34  
maze, modified, open 37.33  
open 37.33  
other approach, closed 37.34

Add subterm  

Exploration  
carotid body 39.89

Add subterm  

Extraction  
fat for graft or banking 86.90
Fixation
bone
internal (without fracture reduction) 78.50
thorax (ribs) (sternum) 78.51
Add subterm sternal fixation device with rigid plates 84.94

Formation
conduit
Add subterm apical-aortic (AAC) 35.93

Fusion
Revise subterm spinal, NOS (with graft) (with internal fixation) (with instrumentation) 81.00
Add subterm axial lumber interbody fusion [AxiaLIF®] 81.08
cervical (C2 level or below) NEC 81.02
Revise subterm anterior column (interbody), anterolateral (anterior) technique 81.02
Revise subterm posterior column (interbody), posterolateral (posterior) technique 81.03
Add subterm direct lateral interbody fusion [DLIF] 81.06
dorsal, dorsolumbar NEC 81.05
Revise subterm anterior column (interbody), anterolateral (anterior) (extracavitary) technique 81.04
Revise subterm posterior column (interbody), posterolateral (posterior) technique 81.05
Add subterm extreme lateral interbody fusion [XLIF®] 81.06
Add subterm facet 81.07
Revise subterm lumbar, lumbosacral NEC 81.08
Revise subterm anterior column (interbody);
Revise indent/subterm anterolateral (anterior) technique 81.06
Revise indent/subterm posterior (interbody), posterolateral technique 81.08
Revise indent for pseudarthrosis 81.38
Add subterm posterior column, posterior (posterolateral) (transverse process) technique 81.07

Glenoplasty, shoulder 81.83
with
Revise subterm total replacement, NEC 81.80
Add subterm other 81.80
Add subterm reverse 81.88
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<tr>
<th>Procedure</th>
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<tr>
<td>Graft, grafting</td>
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<tr>
<td>breast <em>(see also Mammoplasty)</em> 85.89</td>
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<td>Add subterm</td>
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<td>fat graft 85.55</td>
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<td>skin (partial-thickness) (split-thickness) 86.69</td>
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<td>Add subterm</td>
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<td>fat 86.87</td>
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<td>Harvesting</td>
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<td>fat for grafting or banking 86.90</td>
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<td>Implant, implantation</td>
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<td>chemotherapeutic agent 00.10 device</td>
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<td>MitraClip® percutaneous mitral valve leaflet clip 35.97</td>
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<td>sternal fixation device with rigid plates 84.94</td>
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<td>Revise subterm carotid sinus 39.82</td>
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<td>with synchronous pulse generator implantation (total system) 39.81</td>
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<td>electronic stimulator</td>
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<td>with synchronous lead(s) implantation (total system) 39.81</td>
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<td>joint (prosthesis) (silastic) (Swanson type) NEC 81.96</td>
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<td>shoulder (partial) 81.81</td>
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<td>total replacement, NEC 81.80</td>
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<td>other 81.80</td>
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<td>neurostimulator electrodes</td>
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<td>Revise subterm pulse generator (subcutaneous) 86.96</td>
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<td>cranial 01.20</td>
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<td>pacemaker</td>
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<td>Revise subterm carotid sinus 39.89</td>
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<tr>
<td>prosthesis, prosthetic device</td>
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<td>shoulder (partial) 81.81</td>
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<td>Revise subterm total, NEC 81.80</td>
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<td>other 81.80</td>
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<td>Add subterm</td>
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<tr>
<td>reverse 81.88</td>
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</tbody>
</table>
Revise subterm

Rheos™ carotid sinus baroreflex activation device 39.81 stimulator

Add subterm

electrodes

Revise subterm/indent

carotid sinus (baroreflex activation device) 39.8

39.82

Add subterm

with synchronous pulse generator implantation

(total system) 39.81

Add subterm

pulse generator

Add subterm

carotid sinus (baroreflex activation device) 39.83

Add subterm

with synchronous electrode(s) implantation (total system) 39.81

Incision (and drainage)

carotid body 39.89

Infusion (intra-arterial) (intravenous)

Add subterm

IgG (immunoglobulin) 99.14

Add subterm

immunoglobulin (IgG) (IVIG) (IVIg) 99.14

Add subterm

IVIG (immunoglobulin) (IVIg) 99.14

Injection (into) (hypodermically) (intramuscularly) (intravenously) (acting locally or systemically)

Add subterm

IgG (immunoglobulin) 99.14

Add subterm

immunoglobulin (IgG) (IVIG) (IVIg) 99.14

Add subterm

IVIG (immunoglobulin) (IVIg) 99.14

Insertion

catheter

central venous NEC 38.93

Add subterm

with guidance 38.97

device

Add subterm

MitraClip® mitral leaflet clip 35.97

Add subterm

sternal fixation device with rigid plates 84.94

pacemaker

Revise subterm

carotid 39.89

prosthesis, prosthetic device

shoulder

Revise subterm

total, NEC 81.80

Add subterm

other 81.80

Add subterm

reverse 81.88

stent(s) (stent graft)

artery (bare) (bonded) (drug-coated) (non-drug-eluting)
Add subterm femoral artery, superficial 39.90
Add subterm drug-eluting 00.60
Add subterm non-drug-eluting 39.90
Add subterm non-coronary vessel
Add subterm femoral artery, superficial 39.90
Add subterm drug-eluting 00.60
Add subterm non-drug-eluting 39.90
Add subterm peripheral 39.90
Add subterm femoral artery, superficial, drug-eluting 00.60
Add subterm sternal fixation device with rigid plates 84.94

Lavage bronchus NEC 96.56
Revise subterm diagnostic (endoscopic) bronchoalveolar lavage (BAL) 33.24
Add subterm bronchoalveolar lavage (BAL) 33.24
Add subterm mini-bronchoalveolar lavage (mini-BAL) 33.29

Add term Maze procedure
Add subterm Cox-maze, open 37.33
Add subterm maze, modified, endovascular 37.34
Add subterm maze, modified, open 37.33

Add term MitraClip® mitral valve leaflet clip 35.97

Operation
Revise subterm aortic body NEC 39.89
Revise subterm carotid body or gland NEC 39.89
maze procedure (ablation or destruction of heart tissue)
Add subterm by median sternotomy 37.33
Add subterm by thoracotomy without thoracoscope 37.33
Delete subterm trans-thoracic approach 37.33

Refusion spinal, NOS 81.30
Add subterm axial lumber interbody fusion [AxiaLIF®] 81.38
cervical (C2 level or below) NEC 81.32
Revise subterm anterior column (interbody), anterolateral (anterior) technique 81.32
Revise subterm posterior column (interbody), posterolateral (posterior) technique 81.33
Add subterm direct lateral interbody fusion [DLIF] 81.36
<table>
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<th>Action</th>
<th>Term</th>
<th>Code</th>
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<tr>
<td>Revise subterm</td>
<td>dorsal, dorsolumbar NEC</td>
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<td>posterior column (interbody), posterolateral (posterior) technique</td>
<td>81.35</td>
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<td>Add subterm</td>
<td>extreme lateral interbody fusion [XLIF®]</td>
<td>81.36</td>
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<td>facet</td>
<td>81.37</td>
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<tr>
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<td>lumbar, lumbosacral NEC</td>
<td>81.38</td>
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<td>anterior column (interbody)</td>
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<td>anterolateral (anterior) technique</td>
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<td>posterior (interbody), posterolateral technique</td>
<td>81.38</td>
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<td>posterior column, posterior (posterolateral) (transverse process) technique</td>
<td>81.37</td>
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**Removal** – *see also* Excision electrodes

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<th>Action</th>
<th>Term</th>
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<tr>
<td>Revise subterm</td>
<td>carotid sinus</td>
<td>04.93-39.87</td>
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<td>Add subterm</td>
<td>with synchronous pulse generator removal (total system)</td>
<td>39.86</td>
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<tr>
<td>Revise subterm</td>
<td>with synchronous replacement</td>
<td>04.92-39.82</td>
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<td>neurostimulator electrodes</td>
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<tr>
<td>Delete subterm</td>
<td>carotid sinus</td>
<td>04.93</td>
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<td>Delete subterm</td>
<td>with synchronous replacement</td>
<td>04.92</td>
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<td>pulse generator (subcutaneous single array, dual array)</td>
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<td>pulse generator</td>
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<tr>
<td>Add subterm</td>
<td>with synchronous electrode removal (total system)</td>
<td>39.86</td>
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<td>with synchronous replacement</td>
<td>39.83</td>
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**Repair**

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<td>valve (cusps) (open heart technique)</td>
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<td>mitral (without replacement)</td>
<td>35.12</td>
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<td>Add subterm</td>
<td>leaflet clip implant</td>
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<td>Add subterm</td>
<td>MitraClip®</td>
<td>35.97</td>
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<td>Add subterm</td>
<td>balloon, percutaneous</td>
<td>35.96</td>
</tr>
<tr>
<td>Add subterm</td>
<td>endovascular repair with implant</td>
<td>35.97</td>
</tr>
</tbody>
</table>
Add subterm  percutaneous with leaflet clip implant 35.97
hernia NEC 53.9
Revise subterm  anterior abdominal wall NEC (laparoscopic without
  graft or prosthesis) 53.59
  inguinal (unilateral) 53.00
  bilateral 53.10
direct
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.11
  direct and indirect
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.13
  indirect
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.12
  direct (unilateral)
  and indirect (unilateral)
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.01
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.01
  indirect (unilateral)
Revise subterm  other and open (laparoscopic without graft or
  prosthesis) 53.02
Revise subterm  ventral (laparoscopic without graft or
  prosthesis) 53.59
  incisional 53.51
Add subterm  (laparoscopic without graft or
  prosthesis) 53.59

Replacement
electrode(s) – see Implant, electrode or lead by site or
  name of device
Revise subterm  carotid sinus 04.92–39.82
Add subterm  with synchronous pulse generator replacement (total
  system) 39.81
Revise subterm  Rheos™ carotid sinus baroreflex activation device 39.81
  shoulder NEC 81.83
Revise subterm  total, NEC 81.80
Add subterm  other 81.80
Add subterm  reverse 81.88
stimulator
Add subterm  electrode(s)
Revise subterm/indent  carotid sinus 39.8  39.82
Add subterm  with synchronous pulse generator replacement (total
Add subterm pulse generator
Add subterm carotid sinus 39.83
Add subterm with synchronous electrode(s) replacement (total system) 39.81

Revision

Add subterm carotid sinus stimulation pulse generator 39.85
Add subterm with initial insertion of pulse generator - omit code
Add subterm stimulator
Add subterm electrode(s)
Add subterm carotid sinus 39.84
Add subterm pulse generator
Add subterm carotid sinus 39.85

Stripping

Revise subterm carotid sinus 39.89

Add term Thermoplasty
Add subterm bronchoscopic, bronchial (lung) 32.27

Valvuloplasty

Revise subterm heart, unspecified (open heart technique) (without valve replacement) 35.10
Add subterm balloon, percutaneous 35.96
Revise subterm mitral valve (35.12)
Add subterm balloon, percutaneous repair 35.96
Add subterm endovascular repair with implant 35.97
Add subterm open, without replacement 35.12
Add subterm percutaneous repair
Add subterm with implant (leaflet clip) 35.97
Add subterm transcatheter repair with implant 35.97
Add subterm open heart technique 35.10

Wang needle aspiration biopsy

Add subterm lung 33.27
1. INFECTIOUS AND PARASITIC DISEASES (001-139)

Revise

Excludes: influenza (487.0-487.8, 488.01-488.19)

008 Intestinal infections due to other organisms

008.8 Other organism, not elsewhere classified

Revise

Excludes: influenza with involvement of gastrointestinal tract (487.8, 488.09, 488.19)

189 Malignant neoplasm of kidney and other and unspecified urinary organs

Revise

Excludes: malignant carcinoid tumor of kidney (209.24)

225 Benign neoplasm of brain and other parts of nervous system

Revise

Excludes: neurofibromatosis (237.70-237.79)

237 Neoplasm of uncertain behavior of endocrine glands and nervous system

Delete von Recklinghausen’s disease

New code 237.73 Schwannomatosis

New code 237.79 Other neurofibromatosis

244 Acquired hypothyroidism

244.2 Iodine hypothyroidism

Add Excludes: hypothyroidism resulting from administration of radioactive iodine (244.1)
251 Other disorders of pancreatic internal secretion

251.3 Postsurgical hypoinsulinemia

Use additional code to identify (any associated):
Revise acquired absence of pancreas (V88.11-V88.12)

275 Disorders of mineral metabolism

275.0 Disorders of iron metabolism

Delete Bronzed diabetes
Delete Hemochromatosis
Delete Pigmentary cirrhosis (of liver)

New code 275.01 Hereditary hemochromatosis
Bronzed diabetes
Pigmentary cirrhosis (of liver)
Primary (hereditary) hemochromatosis

New code 275.02 Hemochromatosis due to repeated red blood cell transfusions
Iron overload due to repeated red blood cell transfusions
Transfusion (red blood cell) associated hemochromatosis

New code 275.03 Other hemochromatosis
Hemochromatosis NOS

New code 275.09 Other disorders of iron metabolism

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

276.6 Fluid overload

Delete Fluid retention

New code 276.61 Transfusion associated circulatory overload
Fluid overload due to transfusion (blood)
(blood components)
TACO

New code 276.69 Other fluid overload
Fluid retention
<table>
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<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>277</td>
<td>Other and unspecified disorders of metabolism</td>
</tr>
<tr>
<td>277.7</td>
<td>Dysmetabolic syndrome X</td>
</tr>
</tbody>
</table>

Use additional code for associated manifestation, such as: obesity (278.00-278.03)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>278</td>
<td>Overweight, obesity and other hyperalimentation</td>
</tr>
<tr>
<td>278.0</td>
<td>Overweight and obesity</td>
</tr>
</tbody>
</table>

**New code** 278.03 Obesity hypoventilation syndrome
Pickwickian syndrome

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>279</td>
<td>Disorders involving the immune mechanism</td>
</tr>
</tbody>
</table>

**Add** Use additional code for associated manifestations

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>285</td>
<td>Other and unspecified anemias</td>
</tr>
<tr>
<td>285.2</td>
<td>Anemia of chronic disease</td>
</tr>
<tr>
<td>285.22</td>
<td>Anemia in neoplastic disease</td>
</tr>
</tbody>
</table>

**Add** Excludes: aplastic anemia due to antineoplastic chemotherapy (284.89)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>287</td>
<td>Purpura and other hemorrhagic conditions</td>
</tr>
<tr>
<td>287.4</td>
<td>Secondary thrombocytopenia</td>
</tr>
</tbody>
</table>

**Delete**
- Posttransfusion purpura
- Thrombocytopenia (due to):
  - dilutional
  - drugs
  - extracorporeal circulation of blood
  - massive blood transfusion
  - platelet alloimmunization

**New code** 287.41 Posttransfusion purpura
Posttransfusion purpura from whole blood (fresh) or blood products
PTP
New code 287.49 Other secondary thrombocytopenia
Thrombocytopenia (due to):
  dilutional drugs
  extracorporeal circulation of blood
  massive blood transfusion
  platelet alloimmunization
  secondary NOS

307 Special symptoms or syndromes, not elsewhere classified

Revise 307.0 Stuttering Adult onset fluency disorder
Add Excludes: childhood onset fluency disorder (315.35)
Revise Stuttering (fluency disorder) due to late effect of cerebrovascular accident (438.14)
Add fluency disorder in conditions classified elsewhere (784.52)

307.7 Encopresis

Revise Excludes: encopresis of unspecified cause (787.60-787.63)

308 Acute reaction to stress

Add Includes: combat and operational stress reaction

315 Specific delays in development

315.3 Developmental speech or language disorder

New code 315.35 Childhood onset fluency disorder
  Cluttering NOS
  Stuttering NOS

  Excludes: adult onset fluency disorder (307.0)
  fluency disorder due to late effect of cerebrovascular accident (438.14)
  fluency disorder in conditions classified elsewhere (784.52)

315.39 Other

Delete Excludes: stammering and stuttering (307.0)
337 Disorders of the autonomic nervous system

337.3 Autonomic dysreflexia

Use additional code to identify the cause, such as:

- Fecal impaction (560.32)

345 Epilepsy and recurrent seizures

Delete Excludes: progressive myoclonic epilepsy (333.2)

360 Disorders of the globe

360.5 Retained (old) intraocular foreign body, magnetic

Add Use additional code to identify foreign body (V90.11)

360.6 Retained (old) intraocular foreign body, nonmagnetic

Add Use additional code to identify foreign body (V90.01-V90.10, V90.12, V90.2-V90.9)

365 Glaucoma

365.4 Glaucoma associated with congenital anomalies, dystrophies, and systemic syndromes

365.44 Glaucoma associated with systemic syndromes

Revise Code first associated disease, as:

- Neurofibromatosis (237.70-237.79)

374 Other disorder of eyelids

374.8 Other disorders of eyelid

374.86 Retained foreign body of eyelid

Add Use additional code to identify foreign body (V90.01-V90.9)
376  Disorder of the orbit

376.6  Retained (old) foreign body following penetrating wound of orbit

Add  Use additional code to identify foreign body (V90.01-V90.9)

382  Suppurative and unspecified otitis media

382.0  Acute suppurative otitis media

382.02  Acute suppurative otitis media in diseases classified elsewhere

Code first underlying disease, as:

Revise  influenza (487.8, 488.09, 488.19)

385  Other disorders of middle ear and mastoid

385.8  Other disorders of middle ear and mastoid

385.83  Retained foreign body of middle ear

Add  Use additional code to identify foreign body (V90.01-V90.9)

403  Hypertensive chronic kidney disease

Revise  any condition classifiable to 585 and 587 with any condition classifiable to 401

416  Chronic pulmonary heart disease

416.0  Primary pulmonary hypertension

Add  Excludes: pulmonary hypertension NOS (416.8)
Add  secondary pulmonary hypertension (416.8)

416.8  Other chronic pulmonary heart diseases

Add  Pulmonary hypertension NOS
422  Acute myocarditis

422.0  Acute myocarditis in diseases classified elsewhere

Code first underlying disease, as:
myocarditis (acute):
  Revise  influenzal (487.8, 488.09, 488.19)

428  Heart failure

428.0  Congestive heart failure, unspecified

  Revise  Excludes: fluid overload NOS (276.69)

438  Late effects of cerebrovascular disease

438.1  Speech and language deficits

  Revise  438.14  Fluency disorder

  Stuttering due to late effect of
cerebrovascular accident

441  Aortic aneurysm and dissection

  Add  Excludes: aortic ectasia (447.70-447.73)

447  Other disorders of arteries and arterioles

  New subcategory

  447.7  Aortic ectasia

  Ectasis aorta

  Excludes: aortic aneurysm and dissection (441.00-441.9)

  New code  447.70  Aortic ectasia, unspecified site

  New code  447.71  Thoracic aortic ectasia

  New code  447.72  Abdominal aortic ectasia

  New code  447.73  Thoracoabdominal aortic ectasia
453 Other venous embolism and thrombosis

453.5 Chronic venous embolism and thrombosis of deep vessels of lower extremity

453.51 Chronic venous embolism and thrombosis of deep vessels of proximal lower extremity
  Add Femoral
  Add Iliac
  Add Popliteal
  Add Thigh
  Add Upper leg NOS

453.52 Chronic venous embolism and thrombosis of deep vessels of distal lower extremity
  Add Calf
  Add Lower leg NOS
  Add Peroneal
  Add Tibial

453.6 Venous embolism and thrombosis of superficial vessels of lower extremity
  Add Use additional code, if applicable, for associated long-term (current) use of anticoagulants (V58.61)

462 Acute pharyngitis

Excludes: that specified as (due to):
  Revise influenza (487.1, 488.02, 488.12)

ACUTE RESPIRATORY INFECTIONS (460-466)

Revise Excludes: pneumonia and influenza (480.0–488.19)
464  Acute laryngitis and tracheitis

Revise  Excludes: that associated with influenza (487.1, 488.02, 488.12)

464.0  Acute laryngitis

Revise  Excludes: influenza laryngitis (487.1, 488.02, 488.12)

465  Acute upper respiratory infections of multiple or unspecified sites

Excludes: upper respiratory infection due to:

Revise  influenza (487.1, 488.02, 488.12)

480  Viral pneumonia

480.8  Pneumonia due to other virus not elsewhere classified

Delete  Excludes: influenza with pneumonia, any form (487.0)

484  Pneumonia in infectious diseases classified elsewhere

Delete  Excludes: influenza with pneumonia, any form (487.0)

486  Pneumonia, organism unspecified

Delete  Excludes: influenza with pneumonia, any form (487.0)

487  Influenza

Revise  Excludes: influenza due to novel 2009 H1N1 [swine] influenza virus (488.11-488.19)

Revise  influenza due to identified avian influenza virus (488.01-488.09)

Revise  influenza due to identified novel H1N1 influenza virus (488.11-488.19)

487.1  With other respiratory manifestations

Add  Influenza NEC
488     Influenza due to certain identified influenza viruses
        
488.0  Influenza due to identified avian influenza virus

New code  
488.01  Influenza due to identified avian influenza virus with pneumonia
        Avian influenzal:
        bronchopneumonia
        pneumonia
        Influenza due to identified avian influenza virus with pneumonia, any form
        Use additional code to identify the type of pneumonia (480.0-480.9, 481, 482.0-482.9, 483.0-483.8, 485)

New code  
488.02  Influenza due to identified avian influenza virus with other respiratory manifestations
        Avian influenzal:
        laryngitis
        pharyngitis
        respiratory infection (acute) (upper)
        Identified avian influenza NOS

New code  
488.09  Influenza due to identified avian influenza virus with other manifestations
        Avian influenza with involvement of gastrointestinal tract
        Encephalopathy due to identified avian influenza
        Excludes: "intestinal flu" [viral gastroenteritis] (008.8)
488.1 Influenza due to identified novel H1N1 influenza virus

New code 488.11 Influenza due to identified novel H1N1 influenza virus with pneumonia
    Influenza due to identified novel H1N1 with pneumonia, any form
    Novel H1N1 influenzal:
    bronchopneumonia
    pneumonia

Use additional code to identify the type of pneumonia
(480.0-480.9, 481, 482.0-482.9, 483.0-483.8, 485)

New code 488.12 Influenza due to identified novel H1N1 influenza virus with other respiratory manifestations
    Novel H1N1 influenza NOS
    Novel H1N1 influenzal:
    laryngitis
    pharyngitis
    respiratory infection (acute) (upper)

New code 488.19 Influenza due to identified novel H1N1 influenza virus with other manifestations
    Encephalopathy due to identified novel H1N1 influenza
    Novel H1N1 influenza with involvement of gastrointestinal tract

Excludes: "intestinal flu" [viral gastroenteritis] (008.8)

514 Pulmonary congestion and hypostasis

Excludes: hypostatic pneumonia due to or specified as a specific type of pneumonia - code to the type of pneumonia (480.0-480.9, 481, 482.0-482.9, 483.0-483.8, 485, 486, 487.0, 488.01, 488.11)
516  Other alveolar and parietoalveolar pneumonopathy

516.1  Idiopathic pulmonary hemosiderosis

Revise  Code first underlying disease ([275.01-275.09])

Add  Excludes: acute idiopathic pulmonary hemorrhage in infants
      [AIPHI] ([786.31])

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

552.8  Hernia of other specified sites, with obstruction

Delete  Excludes: hernia due to adhesion with obstruction ([560.81])

560  Intestinal obstruction without mention of hernia

560.3  Impaction of intestine

New code  560.32  Fecal impaction

Excludes: constipation ([564.00-564.09])
      incomplete defecation ([787.61])

560.39  Other Fecal impaction

Delete  Fecal impaction

564  Functional digestive disorders, not elsewhere classified

564.0  Constipation

Add  Excludes: fecal impaction ([560.32])

Add  incomplete defecation ([787.61])

569  Other disorders of intestine

569.4  Other specified disorders of rectum and anus

569.43  Anal sphincter tear (healed) (old)

Revise  Use additional code for any associated fecal incontinence
       ([787.60-787.63])
569.49 Other

Add Use additional code for associated fecal incontinence (787.60-787.63)

Delete Excludes: incontinence of sphincter ani (787.6)

572 Liver abscess and sequelae of chronic liver disease

572.3 Portal hypertension

Add Use additional code for any associated complications, such as: portal hypertensive gastropathy (537.89)

583 Nephritis and nephropathy, not specified as acute or chronic

583.6 With lesion of renal cortical necrosis

Revise Nephropathy NOS with (renal) cortical necrosis

618 Genital prolapse

618.0 Prolapse of vaginal walls without mention of uterine prolapse

618.04 Rectocele

Add Use additional code for associated fecal incontinence (787.60-787.63)

621 Disorders of uterus, not elsewhere classified

621.4 Hematometra

Revise Excludes: that in congenital anomaly (752.2-752.39)

626 Disorders of menstruation and other abnormal bleeding from female genital tract

Add Excludes: precocious puberty (259.1)
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>629</td>
<td>Other disorders of female genital organs</td>
</tr>
<tr>
<td>629.8</td>
<td>Other specified disorders of female genital organs</td>
</tr>
<tr>
<td></td>
<td><strong>Revise</strong> 629.81 Habitual aborter Recurrent pregnancy loss without current pregnancy</td>
</tr>
<tr>
<td></td>
<td><strong>Revise</strong> Excludes: habitual aborter recurrent pregnancy loss with current pregnancy (646.3)</td>
</tr>
<tr>
<td>646</td>
<td>Other complications of pregnancy, not elsewhere classified</td>
</tr>
<tr>
<td></td>
<td><strong>Revise</strong> 646.3 Habitual aborter Recurrent pregnancy loss</td>
</tr>
<tr>
<td>649</td>
<td>Other conditions or status of the mother complicating pregnancy, childbirth, or the puerperium</td>
</tr>
<tr>
<td>649.1</td>
<td>Obesity complicating pregnancy, childbirth, or the puerperium</td>
</tr>
<tr>
<td></td>
<td><strong>Revise</strong> Use additional code to identify the obesity (278.00-278.03)</td>
</tr>
<tr>
<td>651</td>
<td>Multiple gestation</td>
</tr>
<tr>
<td></td>
<td><strong>Add</strong> Use additional code to specify placenta status (V91.00-V91.99)</td>
</tr>
<tr>
<td>664</td>
<td>Trauma to perineum and vulva during delivery</td>
</tr>
<tr>
<td></td>
<td><strong>Add</strong> Other specified trauma to perineum and vulva Periurethral trauma</td>
</tr>
<tr>
<td>665</td>
<td>Other obstetrical trauma</td>
</tr>
<tr>
<td>665.5</td>
<td>Other injury to pelvic organs</td>
</tr>
<tr>
<td></td>
<td><strong>Add</strong> Excludes: periurethral trauma (664.8)</td>
</tr>
<tr>
<td>670</td>
<td>Major puerperal infection</td>
</tr>
<tr>
<td>670.2</td>
<td>Puerperal sepsis</td>
</tr>
<tr>
<td></td>
<td><strong>Add</strong> Use additional code to identify severe sepsis (995.92) and any associated acute organ dysfunction, if applicable</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>--------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>671</td>
<td>Venous complications in pregnancy and the puerperium</td>
</tr>
<tr>
<td>671.2</td>
<td>Superficial thrombophlebitis</td>
</tr>
<tr>
<td>Add</td>
<td>Use additional code to identify the superficial thrombophlebitis (453.6, 453.71, 453.81)</td>
</tr>
<tr>
<td>709</td>
<td>Other disorders of skin and subcutaneous tissue</td>
</tr>
<tr>
<td>709.4</td>
<td>Foreign body granuloma of skin and subcutaneous tissue</td>
</tr>
<tr>
<td>Add</td>
<td>Use additional code to identify foreign body (V90.01-V90.9)</td>
</tr>
<tr>
<td>713</td>
<td>Arthropathy associated with other disorders classified elsewhere</td>
</tr>
<tr>
<td>713.0</td>
<td>Arthropathy associated with other endocrine and metabolic disorders</td>
</tr>
<tr>
<td>Revise</td>
<td>Code first underlying disease, as:</td>
</tr>
<tr>
<td></td>
<td>hemochromatosis (275.01-275.09)</td>
</tr>
<tr>
<td>721</td>
<td>Spondylosis and allied disorders</td>
</tr>
<tr>
<td>721.4</td>
<td>Thoracic or lumbar spondylosis with myelopathy</td>
</tr>
<tr>
<td>Delete</td>
<td>Spondylogenic compression of lumbar spinal cord</td>
</tr>
<tr>
<td>724</td>
<td>Other and unspecified disorders of back</td>
</tr>
<tr>
<td>724.0</td>
<td>Spinal stenosis, other than cervical</td>
</tr>
<tr>
<td>Revise</td>
<td>724.02 Lumbar region, without neurogenic claudication</td>
</tr>
<tr>
<td>Add</td>
<td>Lumbar region NOS</td>
</tr>
<tr>
<td>New code</td>
<td>724.03 Lumbar region, with neurogenic claudication</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>-------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>728</td>
<td>Disorders of muscle, ligament, and fascia</td>
</tr>
<tr>
<td>728.8</td>
<td>Other disorders of muscle, ligament, and fascia</td>
</tr>
<tr>
<td>728.82</td>
<td>Foreign body granuloma of muscle</td>
</tr>
<tr>
<td></td>
<td>Add</td>
</tr>
<tr>
<td>729</td>
<td>Other disorders of soft tissues</td>
</tr>
<tr>
<td>729.6</td>
<td>Residual foreign body in soft tissue</td>
</tr>
<tr>
<td></td>
<td>Add</td>
</tr>
<tr>
<td>737</td>
<td>Curvature of spine</td>
</tr>
<tr>
<td>737.4</td>
<td>Curvature of spine associated with other conditions</td>
</tr>
<tr>
<td></td>
<td>Code first associated condition, as:</td>
</tr>
<tr>
<td>742</td>
<td>Other congenital anomalies of nervous system</td>
</tr>
<tr>
<td>742.8</td>
<td>Other specified anomalies of nervous system</td>
</tr>
<tr>
<td></td>
<td>Revise</td>
</tr>
<tr>
<td>748</td>
<td>Congenital anomalies of respiratory system</td>
</tr>
<tr>
<td>748.1</td>
<td>Other anomalies of nose</td>
</tr>
<tr>
<td></td>
<td>Congenital:</td>
</tr>
<tr>
<td></td>
<td>Revise</td>
</tr>
<tr>
<td>751</td>
<td>Other congenital anomalies of digestive system</td>
</tr>
<tr>
<td>751.2</td>
<td>Atresia and stenosis of large intestine, rectum, and anal canal</td>
</tr>
<tr>
<td></td>
<td>Absence:</td>
</tr>
<tr>
<td></td>
<td>Revise</td>
</tr>
<tr>
<td>751.3</td>
<td>Hirschsprung's disease and other congenital functional disorders of colon</td>
</tr>
<tr>
<td></td>
<td>Revise</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>--------</td>
<td>--------------------------------------------------------------</td>
</tr>
<tr>
<td>752.31</td>
<td>Agenesis of uterus</td>
</tr>
<tr>
<td></td>
<td>Congenital absence of uterus</td>
</tr>
<tr>
<td>752.32</td>
<td>Hypoplasia of uterus</td>
</tr>
<tr>
<td>752.33</td>
<td>Unicornuate uterus</td>
</tr>
<tr>
<td></td>
<td>Unicorneate uterus with or without a separate uterine horn</td>
</tr>
<tr>
<td></td>
<td>Uterus with only one functioning horn</td>
</tr>
<tr>
<td>752.34</td>
<td>Bicornuate uterus</td>
</tr>
<tr>
<td></td>
<td>Bicornuate uterus, complete or partial</td>
</tr>
<tr>
<td>752.35</td>
<td>Septate uterus</td>
</tr>
<tr>
<td></td>
<td>Septate uterus, complete or partial</td>
</tr>
<tr>
<td>752.36</td>
<td>Arcuate uterus</td>
</tr>
<tr>
<td>752.39</td>
<td>Other anomalies of uterus</td>
</tr>
<tr>
<td></td>
<td>Aplasia of uterus NOS</td>
</tr>
<tr>
<td></td>
<td>Mülleran anomaly of the uterus, NEC</td>
</tr>
</tbody>
</table>

Excludes: anomaly of uterus due to exposure to diethylstilbestrol [DES] in utero (760.76) didelphic uterus (752.2) doubling of uterus (752.2)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>752.43</td>
<td>Cervical agenesis</td>
</tr>
<tr>
<td></td>
<td>Cervical hypoplasia</td>
</tr>
<tr>
<td>752.44</td>
<td>Cervical duplication</td>
</tr>
<tr>
<td>752.45</td>
<td>Vaginal agenesis</td>
</tr>
<tr>
<td></td>
<td>Agenesis of vagina, total or partial</td>
</tr>
<tr>
<td>752.46</td>
<td>Transverse vaginal septum</td>
</tr>
<tr>
<td>752.47</td>
<td>Longitudinal vaginal septum</td>
</tr>
<tr>
<td></td>
<td>Longitudinal vaginal septum with or without obstruction</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
</tr>
<tr>
<td>752.49</td>
<td>Other anomalies of cervix, vagina, and external female genitalia</td>
</tr>
<tr>
<td>Revise</td>
<td>Absence of cervix, clitoris, vagina, or vulva</td>
</tr>
<tr>
<td>Revise</td>
<td>Agenesis of cervix, clitoris, vagina, or vulva</td>
</tr>
<tr>
<td>Add</td>
<td>Anomalies of cervix, NEC</td>
</tr>
<tr>
<td>Add</td>
<td>Anomalies of hymen, NEC</td>
</tr>
<tr>
<td>Add</td>
<td>Müllerian anomalies of the cervix and vagina, NEC</td>
</tr>
</tbody>
</table>

753 | Congenital anomalies of urinary system |

753.4 | Other specified anomalies of ureter |
| Revise | Deviation of ureter |

759 | Other and unspecified congenital anomalies |

759.6 | Other hamartoses, NEC |
| Revise | Excludes: neurofibromatosis (237.70-237.79) |

763 | Fetus or newborn affected by other complications of labor and delivery |
| Revise | Maternal anesthesia and analgesia |
| Revise | Reactions and intoxications from maternal opiates and tranquilizers during labor and delivery |

771 | Infections specific to the perinatal period |

771.8 | Other infections specific to the perinatal period |
| Revise | Use additional code to identify organism or specific infection (041.00-041.9) |

780 | General symptoms |

780.3 | Convulsions |
| New code | 780.33 | Post traumatic seizures |
| | Excludes: post traumatic epilepsy (345.00-345.91) |
780.6 Fever and other physiologic disturbances of temperature regulation

780.62 Postprocedural fever

Add

Excludes: posttransfusion fever (780.66)

New code

780.66 Febrile nonhemolytic transfusion reaction

FNHTR

Posttransfusion fever

781 Symptoms involving nervous and musculoskeletal systems

Revise

781.8 Neurologic neglect syndrome

Add

Excludes: visuospatial deficit (799.53)

782 Symptoms involving skin and other integumentary tissue

782.3 Edema

Revise

Excludes: fluid retention (276.69)

784 Symptoms involving head and neck

784.5 Other speech disturbance

Revise

Excludes: stammering and stuttering (315.35)

Delete

that of nonorganic origin (307.0, 307.9)

New code

784.52 Fluency disorder in conditions classified elsewhere

Stuttering in conditions classified elsewhere

Code first underlying disease or condition, such as:

Parkinson’s disease (332.0)

Excludes: adult onset fluency disorder (307.0)

childhood onset fluency disorder (315.35)

fluency disorder due to late effect of cerebrovascular accident (438.14)
784.8 Hemorrhage from throat

Revise

Excludes: hemoptysis (786.30-786.39)

784.9 Other symptoms involving head and neck

New code

784.92 Jaw pain
    Mandibular pain
    Maxilla pain

Excludes: temporomandibular joint arthralgia (524.62)

786 Symptoms involving respiratory system and other chest symptoms

786.2 Cough

Revise

Excludes: cough with hemorrhage (786.39)

786.3 Hemoptysis

Delete Cough with hemorrhage
Delete Pulmonary hemorrhage NOS

Delete Excludes: pulmonary hemorrhage of newborn (770.3)

New code

786.30 Hemoptysis, unspecified
    Pulmonary hemorrhage NOS

New code

786.31 Acute idiopathic pulmonary hemorrhage in infants [AIPHI]
    Acute idiopathic pulmonary hemorrhage in infant over 28 days old

Excludes: pulmonary hemorrhage of newborn under 28 days old (770.3)
    von Willebrand's disease (286.4)

New code

786.39 Other hemoptysis
    Cough with hemorrhage
787 Symptoms involving digestive system

787.6 Incontinence of feces

New code 787.60 Full incontinence of feces
             Fecal incontinence NOS

New code 787.61 Incomplete defecation

Excludes: constipation (564.00-564.09)
           fecal impaction (560.32)

New code 787.62 Fecal smearing
           Fecal soiling

New code 787.63 Fecal urgency

796 Other nonspecific abnormal findings

796.0 Nonspecific abnormal toxicological findings

Add Use additional code for retained foreign body, if applicable,
     (V90.01-V90.9)

799 Other ill-defined and unknown causes of morbidity and mortality

New Subcategory 799.5 Signs and symptoms involving cognition

Excludes: amnesia (780.93)
           amnestic syndrome (294.0)
           attention deficit disorder (314.00-314.01)
           late effects of cerebrovascular disease (438)
           memory loss (780.93)
           mild cognitive impairment, so stated (331.83)
           specific problems in developmental delay (315.00-
                                                315.9)
           transient global amnesia (437.7)
           visuospatial neglect 781.8

New code 799.51 Attention or concentration deficit

New code 799.52 Cognitive communication deficit

New code 799.53 Visuospatial deficit
New code 799.54  Psychomotor deficit
New code 799.55  Frontal lobe and executive function deficit
New code 799.59  Other signs and symptoms involving cognition

799.8  Other ill-defined conditions

799.82  Apparent life threatening event in infant

Add  Code first confirmed diagnosis, if known
Revise  Use additional code(s) for associated signs and symptoms if no confirmed diagnosis established, or if signs and symptoms are not associated routinely with confirmed diagnosis, or provide additional information for cause of ALTE
Delete  Excludes: signs and symptoms associated with a confirmed diagnosis—code to confirmed diagnosis

17. INJURY AND POISONING (800-999)

Add  Use additional code for retained foreign body, if applicable, V90.01-V90.9)

836  Dislocation of knee

836.5  Other dislocation of knee, closed

Revise  836.51  Anterior dislocation of tibia, proximal end
Posterior dislocation of femur, distal end, closed

836.52  Posterior dislocation of tibia, proximal end
Anterior dislocation of femur, distal end, closed

836.6  Other dislocation of knee, open

Add  836.61  Anterior dislocation of tibia, proximal end
Posterior dislocation of femur, distal end, open
836.62 Posterior dislocation of tibia, proximal end
Add Anterior dislocation of femur, distal end, open

SPRAINS AND STRAINS OF JOINTS AND ADJACENT MUSCLES (840-848)

Revise Includes: avulsion of joint capsule, ligament, muscle, tendon
Revise hemarthrosis of joint capsule, ligament, muscle, tendon
Revise laceration of joint capsule, ligament, muscle, tendon
Revise rupture of joint capsule, ligament, muscle, tendon
Revise sprain of joint capsule, ligament, muscle, tendon
Revise strain of joint capsule, ligament, muscle, tendon
Revise tear of joint capsule, ligament, muscle, tendon

970 Poisoning by central nervous system stimulants
970.8 Other specified central nervous system stimulants

New code 970.81 Cocaine
Crack

New code 970.89 Other central nervous system stimulants

TOXIC EFFECTS OF SUBSTANCES CHIEFLY NONMEDICINAL AS TO SOURCE (980-989)

Add Use additional code to identify:
Add personal history of retained foreign body fully removed (V15.53)
Add retained foreign body status, if applicable (V90.01-V90.9)

992 Effects of heat and light
992.0 Heat stroke and sunstroke

Add Use additional code(s) to identify any associated complication of heat stroke, such as:
Add alterations of consciousness (780.01-780.09)
Add systemic inflammatory response syndrome (995.93-995.94)
Certain adverse effects not elsewhere classified

Revise
995.2 Other and unspecified adverse effect of drug, medicinal and biological substance (due) to correct medicinal substance properly administered

Delete
Adverse effect to correct medicinal substance properly administered
Delete
Allergic reaction to correct medicinal substance properly administered
Delete
Hypersensitivity to correct medicinal substance properly administered
Delete
Idiosyncrasy due to correct medicinal substance properly administered
Delete
Drug:
Delete
hypothesis NOS
Delete
reaction NOS

Add
Unspecified adverse effect of unspecified drug, medicinal and biological substance

995.20
Unspecified adverse effect of unspecified medicinal substance properly administered

995.27
Other drug allergy

Add
Allergic reaction NEC (due) to correct medical substance properly administered
Add
Hypersensitivity (due) to correct medical substance properly administered

995.29
Unspecified adverse effect of other drug, medicinal and biological substance

Add
Unspecified adverse effect of medicinal substance NEC properly administered

995.9 Systemic inflammatory response syndrome (SIRS)

995.94 Systemic inflammatory response syndrome due to non-infectious process with acute organ dysfunction

Code first underlying conditions, such as:
Add
heat stroke (992.0)
998 Other complications of procedures, not elsewhere classified

Add Excludes: fluid overload due to transfusion (blood) (276.61)
TACO (276.61)
transfusion associated circulatory overload (276.61)

999 Complications of medical care, not elsewhere classified

Revise 999.6 ABO incompatibility reaction due to transfusion of blood or blood products

Delete Incompatible blood transfusion
Delete Reaction to blood group incompatibility in infusion or transfusion

New code 999.60 ABO incompatibility reaction, unspecified
ABO incompatible blood transfusion NOS
Reaction to ABO incompatibility from transfusion NOS

New code 999.61 ABO incompatibility with hemolytic transfusion reaction not specified as acute or delayed
ABO incompatibility with hemolytic transfusion reaction at unspecified time after transfusion
Hemolytic transfusion reaction (HTR) due to ABO incompatibility

New code 999.62 ABO incompatibility with acute hemolytic transfusion reaction
ABO incompatibility with hemolytic transfusion reaction less than 24 hours after transfusion
Acute hemolytic transfusion reaction (AHTR) due to ABO incompatibility

New code 999.63 ABO incompatibility with delayed hemolytic transfusion reaction
ABO incompatibility with hemolytic transfusion reaction 24 hours or more after transfusion
Delayed hemolytic transfusion reaction (DHTR) due to ABO incompatibility
New code 999.69  Other ABO incompatibility reaction
Delayed serologic transfusion reaction (DSTR) from ABO incompatibility
Other ABO incompatible blood transfusion
Other reaction to ABO incompatibility from transfusion

Revise 999.7  Rh and other non-ABO incompatibility reaction due to transfusion of blood or blood products

Delete Reactions due to Rh factor in infusion or transfusion

New code 999.70  Rh incompatibility reaction, unspecified
Reaction due to Rh factor in transfusion NOS
Rh incompatible blood transfusion NOS
Unspecified reaction due to incompatibility related to Rh antigens (C) (c) (D) (E) (e)
Unspecified reaction to Rh incompatibility

New code 999.71  Rh incompatibility with hemolytic transfusion reaction not specified as acute or delayed
Hemolytic transfusion reaction (HTR) due to Rh incompatibility
HTR due to incompatibility related to Rh antigens (C) (c) (D) (E) (e), not specified as acute or delayed
Rh incompatibility with hemolytic transfusion reaction at unspecified time after transfusion

New code 999.72  Rh incompatibility with acute hemolytic transfusion reaction
Acute hemolytic transfusion reaction (AHTR) due to Rh incompatibility
AHTR due to incompatibility related to Rh antigens (C) (c) (D) (E) (e)
Rh incompatibility with hemolytic transfusion reaction less than 24 hours after transfusion
New code 999.73 Rh incompatibility with delayed hemolytic transfusion reaction  
  Delayed hemolytic transfusion reaction (DHTR) due to Rh incompatibility  
  DHTR due to incompatibility related to Rh antigens (C) (c) (D) (E) (e)  
  Rh incompatibility with hemolytic transfusion reaction 24 hours or more after transfusion

New code 999.74 Other Rh incompatibility reaction  
  Delayed serologic transfusion reaction (DSTR) from Rh incompatibility  
  Other reaction due to incompatibility related to Rh antigens (C) (c) (D) (E) (e)  
  Other reaction to Rh incompatible blood transfusion

New code 999.75 Non-ABO incompatibility reaction, unspecified  
  Non-ABO incompatible blood transfusion NOS  
  Reaction to non-ABO antigen incompatibility from transfusion NOS  
  Unspecified reaction due to incompatibility related to minor antigens (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S)

New code 999.76 Non-ABO incompatibility with hemolytic transfusion reaction not specified as acute or delayed  
  Hemolytic transfusion reaction (HTR) due to non-ABO incompatibility  
  HTR from incompatibility related to minor antigens (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S)  
  Non-ABO incompatibility with hemolytic transfusion reaction at unspecified time after transfusion
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<td>AHTR from incompatibility related to minor antigens (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S)</td>
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<td>Non-ABO incompatibility with hemolytic transfusion reaction less than 24 hours after transfusion</td>
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<td>999.78</td>
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<td>Non-ABO incompatibility with delayed hemolytic transfusion reaction</td>
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<td>DHTR from incompatibility related to minor antigens (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S)</td>
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<td>Other non-ABO incompatible blood transfusion</td>
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<td>Other reaction to non-ABO incompatibility from transfusion</td>
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<tr>
<td>999.8</td>
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<td>Other and unspecified infusion and transfusion reaction</td>
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- **Add** Excludes: ABO incompatibility reactions (999.60-999.69)  
- febrile nonhemolytic transfusion reaction (FNHTR) (780.66)  
- hemochromatosis due to repeated red blood cell transfusions (275.02)  
- non-ABO incompatibility reactions (999.70-999.79)  
- posttransfusion purpura (287.41)  
- Rh incompatibility reactions (999.70-999.74)  
- transfusion associated circulatory overload (TACO) (276.61)
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<td>999.80</td>
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<td>Incompatible blood transfusion NOS</td>
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<td>Reaction to blood group incompatibility in infusion or transfusion NOS</td>
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<td>999.83</td>
<td>Hemolytic transfusion reaction, incompatibility unspecified</td>
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<td>HTR with incompatibility unspecified at unspecified time after transfusion</td>
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<td>999.84</td>
<td>Acute hemolytic transfusion reaction, incompatibility unspecified</td>
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<td>Acute hemolytic transfusion reaction (AHTR) with antigen incompatibility unspecified</td>
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<td>Delayed hemolytic transfusion reaction, incompatibility unspecified</td>
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<td>Delayed hemolytic transfusion reaction (DHTR) with antigen incompatibility unspecified</td>
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<td>DHTR, incompatibility unspecified</td>
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<td>Transfusion reaction NOS</td>
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Delete 999.89

Add

Supplementary Classification of Factors Influencing Health Status and Contact with Health Services (V01-V90)

Revise V07 Need for isolation and other prophylactic or treatment measures

Add Excludes: long-term (current) (prophylactic) use of certain specific drugs (V58.61-V58.69)

Revise V07.5 Prophylactic use of agents affecting estrogen receptors and estrogen levels
Revise V07.51 Prophylactic uUse of selective estrogen receptor modulators (SERMs)

Revise V07.52 Prophylactic uUse of aromatase inhibitors

Revise V07.59 Prophylactic uUse of other agents affecting estrogen receptors and estrogen levels

Revise V07.8 Other specified prophylactic or treatment measure

Revise V07.9 Unspecified prophylactic or treatment measure

V10 Personal history of malignant neoplasm

V10.5 Urinary organs

Add Excludes: personal history of malignant carcinoid tumor (V10.91)
Add personal history of malignant neuroendocrine tumor (V10.91)

V11 Personal history of mental disorder

New code V11.4 Combat and operational stress reaction

V13 Personal history of other diseases

V13.2 Other genital system and obstetric disorders

Revise Excludes: habitual aborter recurrent pregnancy loss (646.3)

New code V13.23 Personal history of vaginal dysplasia

Personal history of conditions classifiable to 623.0

Excludes: personal history of malignant neoplasm of vagina (V10.44)
New code  V13.24  Personal history of vulvar dysplasia  
Personal history of conditions classifiable to  
624.01-624.02  

Excludes:  personal history of malignant neoplasm of vulva  
(V10.44)  

Revise  V13.6  Congenital (corrected) malformations  

Revise  V13.61  Personal history of (corrected)  
Hypospadias  

New code  V13.62  Personal history of other (corrected)  
congenital malformations of genitourinary  
system  

New code  V13.63  Personal history of (corrected) congenital  
malformations of nervous system  

New code  V13.64  Personal history of (corrected) congenital  
malformations of eye, ear, face and neck  
Corrected cleft lip and palate  

New code  V13.65  Personal history of (corrected) congenital  
malformations of heart and circulatory  
system  

New code  V13.66  Personal history of (corrected) congenital  
malformations of respiratory system  

New code  V13.67  Personal history of (corrected) congenital  
malformations of digestive system  

New code  V13.68  Personal history of (corrected) congenital  
malformations of integument, limbs, and  
musculoskeletal systems  

Revise  V13.69  Personal history of other (corrected)  
congenital malformations
V15 Other personal history presenting hazards to health

V15.5 Injury

New code V15.53 Personal history of retained foreign body fully removed

V15.8 Other specified personal history presenting hazards to health

V15.89 Other

Revise Excludes: contact with and (suspected) exposure to other potentially hazardous substances (V87.39)

V23 Supervision of high-risk pregnancy

V23.2 Pregnancy with history of abortion

Revise Excludes: habitual aborter recurrent pregnancy loss:

V25 Encounter for contraceptive management

Revise V25.1 Encounter for insertion or removal of intrauterine contraceptive device

Add Excludes: encounter for routine checking of intrauterine contraceptive device (V25.42)

New code V25.11 Encounter for insertion of intrauterine contraceptive device

New code V25.12 Encounter for removal of intrauterine contraceptive device

New code V25.13 Encounter for removal and reinsertion of intrauterine contraceptive device

V25.4 Surveillance of previously prescribed contraceptive methods
Delete  Excludes: presence of intrauterine contraceptive device as incidental finding (V45.5)

Revise  V25.42 Intrauterine contraceptive device
         Checking, reinsertion, or removal of intrauterine device

Add  Excludes: insertion or removal of intrauterine contraceptive device (V25.11-V25.13)
Add  presence of intrauterine contraceptive device as incidental finding (V45.5)

V26 Procreative management

V26.3 Genetic counseling and testing

V26.32 Other genetic testing of female

Revise  Use additional code to identify habitual aborter recurrent pregnancy loss (629.81, 646.3)

Revise  V26.35 Encounter for testing of male partner of habitual aborter female with recurrent pregnancy loss

V45 Other postprocedural states

V45.0 Cardiac device in situ

V45.01 Cardiac pacemaker

Add  Excludes: cardiac defibrillator with synchronous cardiac pacemaker (V45.02)

Add  V45.02 Automatic implantable cardiac defibrillator
         With synchronous cardiac pacemaker

Add  V45.5 Presence of contraceptive device

Delete  Excludes: checking, reinsertion, or removal of device (V25.42)
         complication from device (996.32)
         insertion of device (V25.1)
V45.51  Intrauterine contraceptive device

Add  Excludes:  checking of device (V25.42)
Add  complication from device (996.32)
Add  insertion and removal of device (V25.11-V25.13)

V45.7  Acquired absence of organ

V45.79  Other acquired absence of organ

Add  Excludes:  acquired absence of pancreas (V88.11-V88.12)

V46  Other dependence on machines and devices

V46.3  Wheelchair dependence

Code first cause of dependence, such as:

Revise

obesity (278.00-278.03)

V49  Other conditions influencing health status

V49.8  Other specified conditions influencing health status

New code  V49.86  Do not resuscitate status

New code  V49.87  Physical restraints status

Excludes:  restraint due to a procedure – omit code

V53  Fitting and adjustment of other device

V53.3  Cardiac device

V53.31  Cardiac pacemaker

Add  Excludes:  automatic implantable cardiac defibrillator with synchronous cardiac pacemaker (V53.32)

Add  V53.32  Automatic implantable cardiac defibrillator

With synchronous cardiac pacemaker
V55  Attention to artificial openings

Revise  Excludes: complications of external stoma (519.00-519.09, 569.60-569.69, 997.4, 997.5)

V58  Encounter for other and unspecified procedures and aftercare

Add  V58.6  Long-term (current) drug use

Add  Long-term (current) prophylactic drug use

Revise  Excludes: prophylactic use of agents affecting estrogen receptors and estrogen levels (V07.51-V07.59)

V62  Other psychosocial circumstances

V62.8  Other psychological or physical stress, not elsewhere classified

New code  V62.85  Homicidal ideation

V76  Special screening for malignant neoplasms

V76.5  Intestine

Add  V76.51  Colon

Add  Screening colonoscopy NOS

V85  Body mass index (BMI)

V85.4  Body Mass Index 40 and over, adult

New code  V85.41  Body Mass Index 40.0-44.9, adult

New code  V85.42  Body Mass Index 45.0-49.9, adult

New code  V85.43  Body Mass Index 50.0-59.9, adult

New code  V85.44  Body Mass Index 60.0-69.9, adult

New code  V85.45  Body Mass Index 70 and over, adult

V87  Other specified personal exposures and history presenting hazards to health

V87.3  Contact with and (suspected) exposure to other potentially hazardous substances

Add  Excludes: personal history of retained foreign body fully removed (V15.53)
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>V88</td>
<td>Acquired absence of other organs and tissue</td>
</tr>
<tr>
<td>New subcategory V88.1</td>
<td>Acquired absence of pancreas</td>
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<tr>
<td>New code</td>
<td>V88.11</td>
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<tr>
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New Section RETAINED FOREIGN BODY (V90)

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<td>V90</td>
<td>Retained foreign body</td>
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<tr>
<td>New Category</td>
<td>Embedded fragment (status)</td>
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<td>Embedded splinter (status)</td>
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<tr>
<td></td>
<td>Retained foreign body status</td>
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</tbody>
</table>

Excludes: artificial joint prosthesis status (V43.60-V43.69)
foreign body accidentally left during a procedure (998.4)
foreign body entering through orifice (930.0-939.9)
in situ cardiac devices (V45.00-V45.09)
organ or tissue replaced by other means (V43.0-V43.89)
organ or tissue replaced by transplant (V42.0-V42.9)
personal history of retained foreign body removed (V15.53)
superficial foreign body (splinter) (categories 910-917 and 919 with 4th character 6 or 7, 918.0)

New subcategory V90.0 Retained radioactive fragment
New code | V90.01 | Retained depleted uranium fragments |
New code | V90.09 | Other retained radioactive fragments |
|         |        | Retained nontherapeutic radioactive fragments |

New subcategory V90.1 Retained metal fragments

Excludes: retained radioactive metal fragments (V90.01-V90.09)

New code | V90.10 | Retained metal fragments, unspecified |
|         |        | Retained metal fragment NOS |
New code | V90.11 | Retained magnetic metal fragments |
New code | V90.12 | Retained nonmagnetic metal fragments |
New code          V90.2  Retained plastic fragments
                   Acrylics fragments
                   Diethylhexylphthalates fragments
                   Isocyanate fragments
New subcategory   V90.3  Retained organic fragments
New code          V90.31 Retained animal quills or spines
New code          V90.32 Retained tooth
New code          V90.33 Retained wood fragments
New code          V90.39 Other retained organic fragments
New subcategory   V90.8  Other specified retained foreign body
New code          V90.81 Retained glass fragments
New code          V90.83 Retained stone or crystalline fragments
                   Retained concrete or cement fragments
New code          V90.89 Other specified retained foreign body
New code          V90.9  Retained foreign body, unspecified material

New Section       MULTIPLE GESTATION PLACENTA STATUS (V91)
New category      V91  Multiple gestation placenta status
                   Code first multiple gestation (651.0-651.9)
New subcategory   V91.0  Twin gestation placenta status
New code          V91.00 Twin gestation, unspecified number of placenta,
                   unspecified number of amniotic sacs
New code          V91.01 Twin gestation, monochorionic/monoamniotic
                   (one placenta, one amniotic sac)
New code          V91.02 Twin gestation, monochorionic/diamniotic (one
                   placenta, two amniotic sacs)
New code          V91.03 Twin gestation, dichorionic/diamniotic (two
                   placentae, two amniotic sacs)
New code          V91.09 Twin gestation, unable to determine number of
                   placenta and number of amniotic sacs
New subcategory   V91.1  Triplet gestation placenta status
New code          V91.10 Triplet gestation, unspecified number of
                   placenta and unspecified number of amniotic
                   sacs
New code          V91.11 Triplet gestation, with two or more
                   monochorionic fetuses
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<th>New code</th>
<th>V91.12</th>
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<td>New code</td>
<td>V91.19</td>
<td>Triplet gestation, unable to determine number of placenta and number of amniotic sacs</td>
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<tr>
<td>New subcategory</td>
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<td>Quadruplet gestation placenta status</td>
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<td>V91.20</td>
<td>Quadruplet gestation, unspecified number of placenta and unspecified number of amniotic sacs</td>
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<td>New code</td>
<td>V91.21</td>
<td>Quadruplet gestation, with two or more monochorionic fetuses</td>
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<td>New code</td>
<td>V91.22</td>
<td>Quadruplet gestation, with two or more monoamniotic fetuses</td>
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<td>Quadruplet gestation, unable to determine number of placenta and number of amniotic sacs</td>
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<td>Placenta status for multiple gestations greater than quadruplets</td>
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<td>V91.90</td>
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<td>V91.91</td>
<td>Other specified multiple gestation, with two or more monochorionic fetuses</td>
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<td>New code</td>
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**E000** External cause status

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Excludes: activity of child or other family member assisting in compensated work of other family member (E000.8)

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<tr>
<td>Delete</td>
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</tr>
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E017 Activities involving roller coasters and other types of external motion

Revise E017.0  Roller coaster riding

TRANSPORT ACCIDENTS (E800-E848)

Definitions and examples related to transport accidents

(q) pedestrian conveyance is any human powered device by which a pedestrian may move other than by walking or by which a walking person may move another pedestrian.

Add Includes: motorized mobility scooter
Revise wheelchair (electric)

Revise PLACE OF OCCURRENCE (E849)

E865 Accidental poisoning from poisonous foodstuffs and poisonous plants

Revise Excludes: anaphylactic shock due to adverse food reaction (995.60-995.69)

E884 Other fall from one level to another

E884.3 Fall from wheelchair
Add Fall from motorized mobility scooter
Add Fall from motorized wheelchair

E885 Fall on same level from slipping, tripping, or stumbling

E885.0 Fall from (nonmotorized) scooter
Add Excludes: fall from motorized mobility scooter (E884.3)
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ABO
incompatibility *(due to transfusion of blood or blood products)* reaction 999.6
  with hemolytic transfusion reaction (HTR) (not specified as acute or delayed) 999.61
    24 hours or more after transfusion 999.63
    acute 999.62
    delayed 999.63
    less than 24 hours after transfusion 999.62
    unspecified time after transfusion 999.61
  reaction 999.60
    specified NEC 999.69

Absence (organ or part) (complete or partial)
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  congenital 752.43
  pancreas (congenital) 751.7
    acquired (postoperative) (posttraumatic) *V88.11*
      partial V88.12
      total V88.11
  uterus (acquired) V88.01
    congenital 752.31
    vagina, congenital 752.45

Accessory (congenital)
cervix 752.44
  external os 752.44

Administration, prophylactic antibiotics, *long-term V58.62*
  short-term use - omit code

Admission (encounter)
for
  adjustment (of)
    cardiac device V53.39
      defibrillator, automatic implantable *(with synchronous cardiac pacemaker)* V53.32
    device, unspecified type V53.90
      cardiac V53.39
        defibrillator, automatic implantable *(with synchronous cardiac pacemaker)* V53.32
        intrauterine contraceptive V25.1
  intrauterine contraceptive device V25.1

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  device, unspecified type V53.90
  intrauterine contraceptive *V25.1*
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    removal V25.12
    and reinsertion V25.13
    replacement V25.13
  intrauterine contraceptive device V25.1
    insertion V25.11
    removal V25.12
    and reinsertion V25.13
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  intrauterine contraceptive device V25.11
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for (cont)
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and reinsertion V25.13
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administration of
antibiotics, long-term V58.62
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device
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defibrillator, automatic implantable cardiac with synchronous cardiac pacemaker V53.32
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AIN II (anal intraepithelial neoplasia II) (histologically confirmed) 569.44
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specified type NEC
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cervix 752.43
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with only one functioning horn 752.33
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Arcuatus uterus 752.36
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  congenital 752.43
  uterus 752.31
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BMI (body mass index)
  adult
    40.0-44.9 and over V85.41
      45.0-49.9 V85.42
      50.0-59.9 V85.43
      60.0-69.9 V85.44
    70 and over V85.45

Body, bodies
  mass index (BMI)
    adult
      40.0-44.9 and over V85.41
      45.0-49.9 V85.42
      50.0-59.9 V85.43
      60.0-69.9 V85.44
      70 and over V85.45

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  with
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  with
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    grippal (see also Influenza) 487.1
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  with grippe or influenza *(see also Influenza)* 487.1
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      anterior abdominal wall \(752.39\)
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    hemolytic reaction, incompatibility unspecified 999.83
      acute 999.84
      delayed 999.85
    incompatibility reaction
      ABO \(999.60\)
        with hemolytic transfusion reaction (HTR) (not specified as acute or delayed) 999.61
          acute 999.62
          delayed 999.63
        specified type NEC 999.69
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          with hemolytic transfusion reaction (HTR) (not specified as acute or delayed) 999.76
            acute 999.77
            delayed 999.78
          specified type NEC 999.79
        Rh \(antigen (C) (c) (D) (E) (e) (factor)* 999.70
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  transfusion... (cont)
    incompatibility reaction (cont)
    Rh... (cont)
      with hemolytic transfusion reaction (HTR) (not specified as acute or delayed) 999.71
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        delayed 999.73
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      specified reaction NEC 999.89

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  reinsertion V25.13
  removal V25.12
    and reinsertion V25.13
    replacement V25.13
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    intrauterine contraceptive device V25.11

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    uterus 752.39
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  cognitive communication 799.52
  concentration 799.51
  executive function 799.55
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  psychomotor 799.54
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      peritoneum (pelvic) 665.5
    trauma (obstetrical) NEC 665.9
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Disease, diseased - see also Syndrome
   iron metabolism (see also Hemochromatosis) 275.03
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   due to or resulting from
   incompatibility
      ABO 999.69
      non-ABO antigen (minor) (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S) 999.79
      Rh antigen (C) (c) (D) (E) (e) 999.74

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      with aneurysm 441.9
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         acute 453.84
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         acute 453.82
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    acute 453.86
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    acute 453.82
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    acute 453.85
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    acute 453.87
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    acute 453.87
ulnar (acute) 453.82
    acute 453.82
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    453.87

Encephalitis…
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    nonhemolytic transfusion reaction (FNHTR) 780.66
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        non-atypical endometrial cells 795.09
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  congenital 752.39
vesicouterine 619.0
  congenital 752.39

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defibrillator, automatic implantable (with synchronous cardiac pacemaker) V53.32
intrauterine contraceptive V25.1
  insertion V25.11
  removal V25.12
  and reinsertion V25.13
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  insertion V25.11
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  animal spines V90.31
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    isotope V90.09
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  diethylhexylphthalates V90.2
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    magnetic V90.11
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Gestation (period) - see also Pregnancy multiple placenta status quadruplet two or more monoamniotic fetuses V91.22 two or more monochorionic fetuses V91.21 unable to determine number of placenta and number of amniotic sacs V91.29 unspecified number of placenta and unspecified number of amniotic sacs V91.20 specified (greater than quadruplets) NEC two or more monoamniotic fetuses V91.92 two or more monochorionic fetuses V91.91 unable to determine number of placenta and number of amniotic sacs V91.99 unspecified number of placenta and unspecified number of amniotic sacs V91.90 triplet two or more monoamniotic fetuses V91.12 two or more monochorionic fetuses V91.11 unable to determine number of placenta and number of amniotic sacs V91.19 unspecified number of placenta, unspecified number of amniotic sacs V91.10 twin dichorionic/diamniotic (two placentae, two amniotic sacs) V91.03 monochorionic/diamniotic (one placenta, two amniotic sacs) V91.02 monochorionic/monoamniotic (one placenta, one amniotic sac) V91.01 unable to determine number of placenta and number of amniotic sacs V91.09 unspecified number of placenta, unspecified number of amniotic sacs V91.00

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endocrine V18.19
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endocrine disease V18.19
multiple neoplasia (MEN) syndrome V18.11
multiple endocrine neoplasia (MEN) syndrome V18.11
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Homicidal ideation V62.85
HTR (hemolytic transfusion reaction)
due to or resulting from incompatibility
  ABO 999.61
    acute 999.62
    delayed 999.63
  non-ABO antigen (minor) (Duffy) (Kell) (Kidd) (Lewis) (M) (N) (P) (S) 999.76
    acute 999.77
    delayed 999.78
  Rh antigen (C) (c) (D) (E) (e) 999.71
    acute 999.72
    delayed 999.73
Hypersensitive, hypersensitiveness, hypersensitivity - see also Allergy
due to correct medical substance properly administered 995.27

Hypertension, hypertensive.................................................................Malignant..... Benign ... Unspecified
  with renal (kidney) involvement (only conditions classifiable to 585
    (only conditions classifiable to 585, 587)
    (excludes conditions classifiable to 584)
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  homicidal V62.85
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Impaction, impacted
  bowel, colon, rectum 560.30
    fecal 560.32
  fecal, feces 560.32
  intestine(s) 560.30
    fecal 560.32
Imperfect
  closure (congenital)
    genitalia, genital organ(s) or system
      female 752.89
        uterus 752.39
    uterus (with communication to bladder, intestine, or rectum) 752.39
Incompatibility

ABO
infusion or transfusion reaction (see also Complications, transfusion) 999.60
blood (group) (Duffy) (E) (K(e)ll) (Kidd) (Lewis) (M) (N) (P) (S) (NEC
infusion or transfusion reaction (see also Complications, transfusion) 999.75
non-ABO (see also Complications, transfusion) 999.75
Rh (antigen) (C) (c) (D) (E) (e) (blood group) (factor)
infusion or transfusion reaction (see also Complications, transfusion) 999.70

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respiratory 519.8
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manifestations NEC 488.09
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Key: Bold – Add; Bold Strikeout – Delete; Bold Underline Italic – Revise