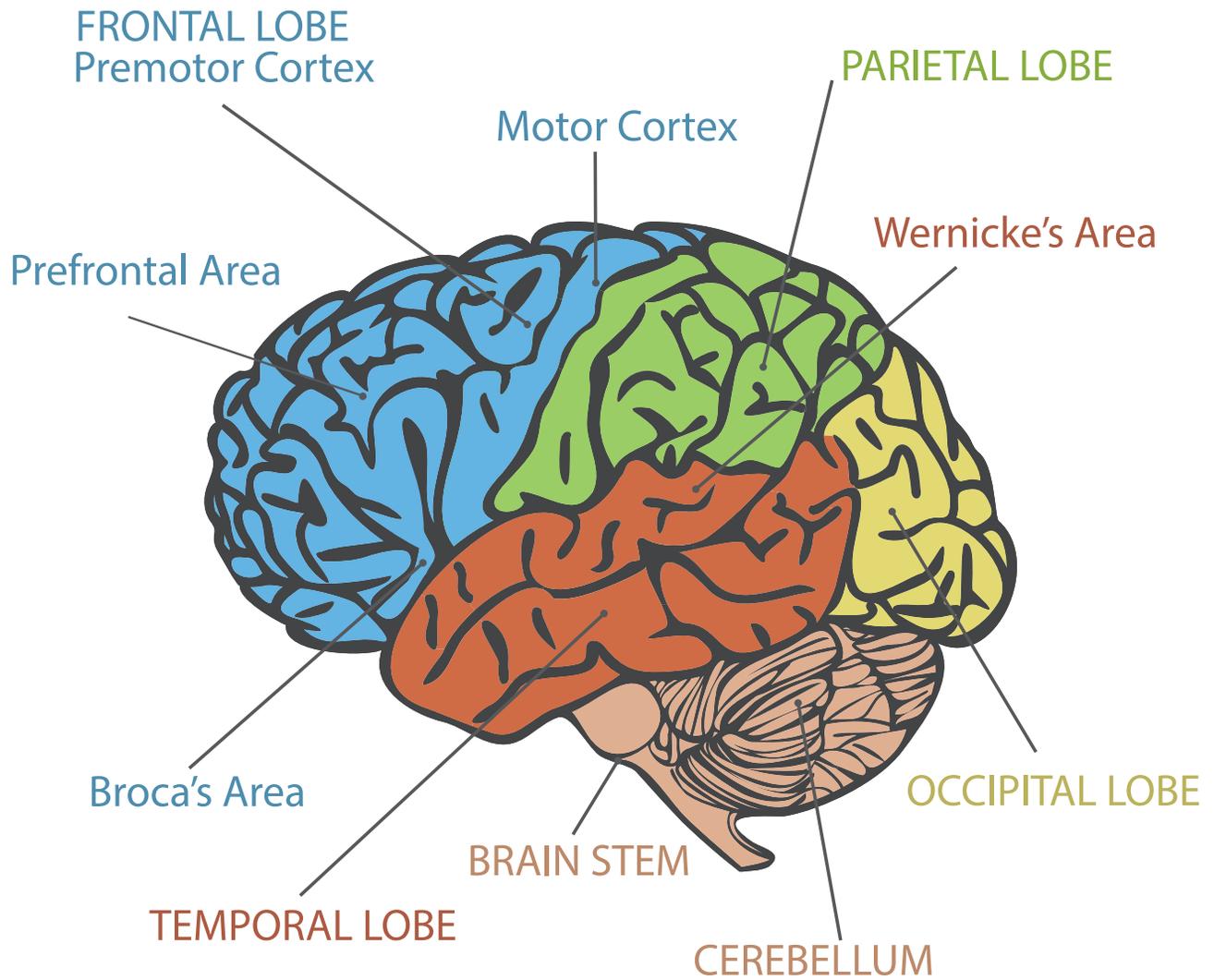


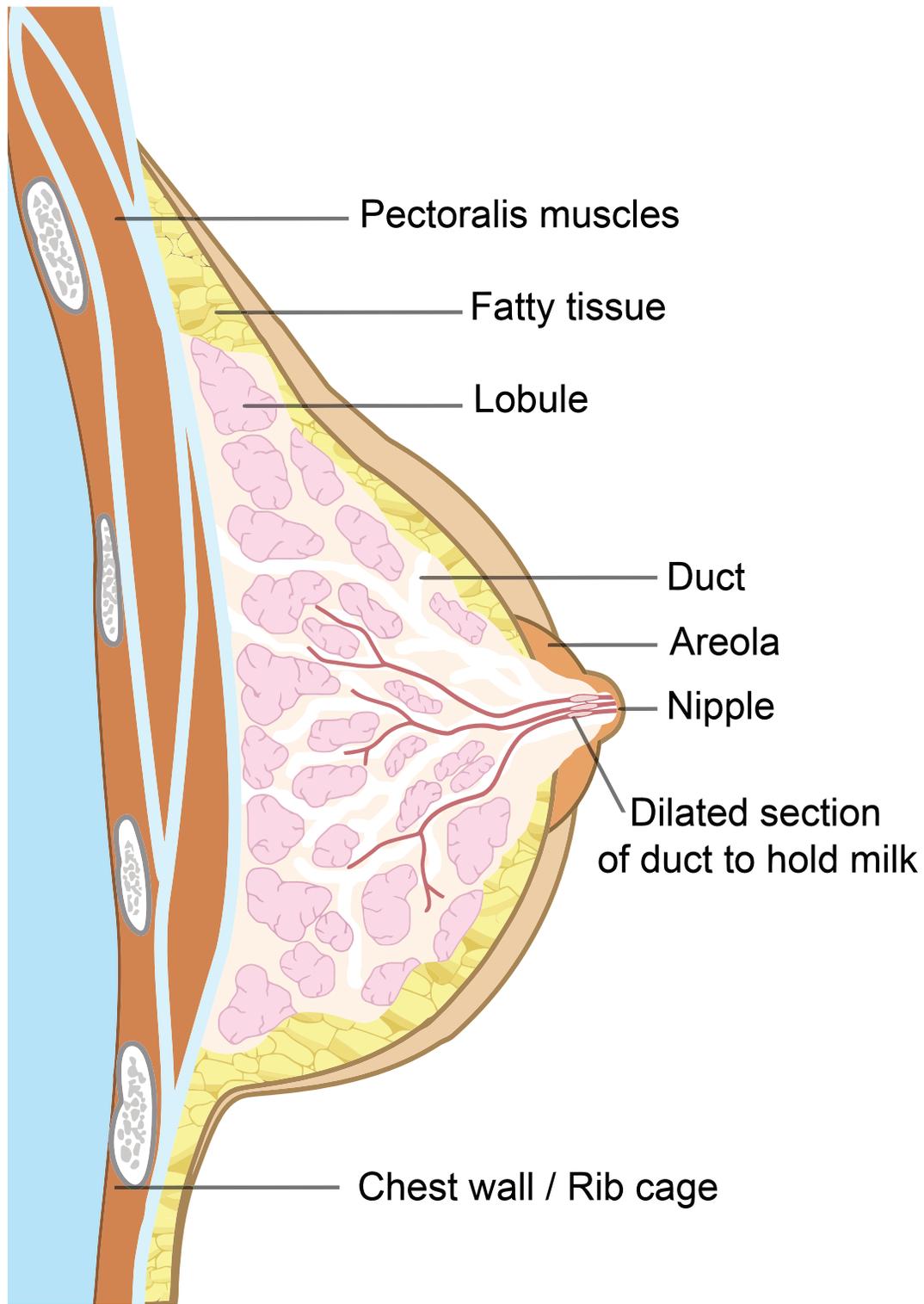
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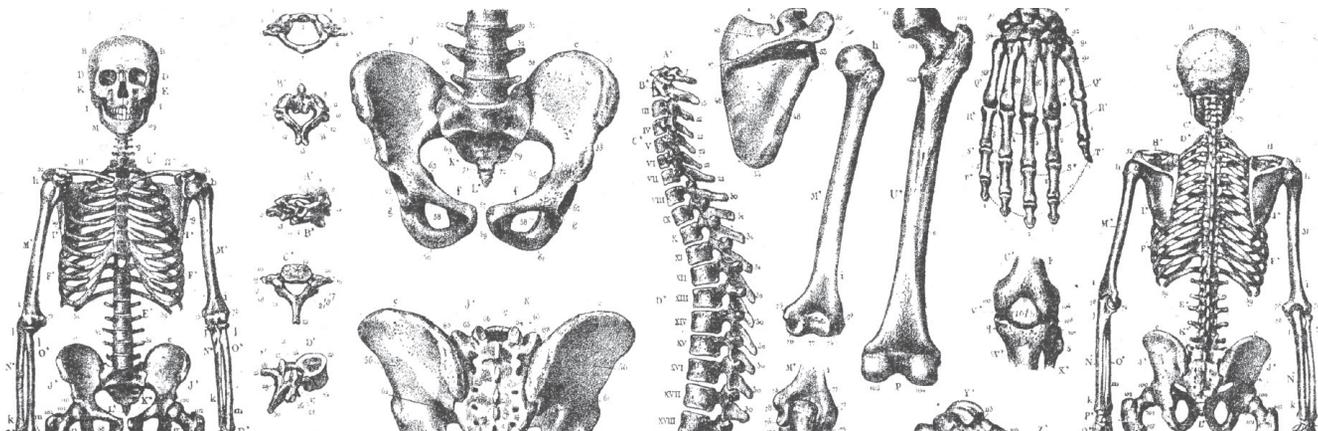
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BRAIN FUNCTION



BREAST ANATOMY





Since 1979, the U.S. has used the International Classification of Diseases, Ninth Revision, Clinical Modifications (ICD-9-CM) to identify diagnoses related to morbidity and mortality. Twenty five years later, we will transition from ICD-9-CM to ICD-10-CM, on or after Oct. 2015.

We have become very familiar with ICD-9-CM; and, it is all many providers and coders have ever known for diagnosis coding. As we transition from this long used code set, let's take a quick look back to see what has brought us to where we are today.

A LONG-TIME GOAL

Efforts to catalogue and classify disease reach back at least 400 years and burgeoned during the 18th Century. Responding to an 1853 request of the newly formed International Statistical Congress, English medical statistician William Farr and Swiss physician Marc d'Espine each prepared a uniform classification of causes of death to present to the International Statistical Congress in Paris. The resulting hybrid system of classification was never internationally adopted but we derive the principle of categorizing diseases by anatomical site from these attempts.

The Legacy of ICD-9-CM

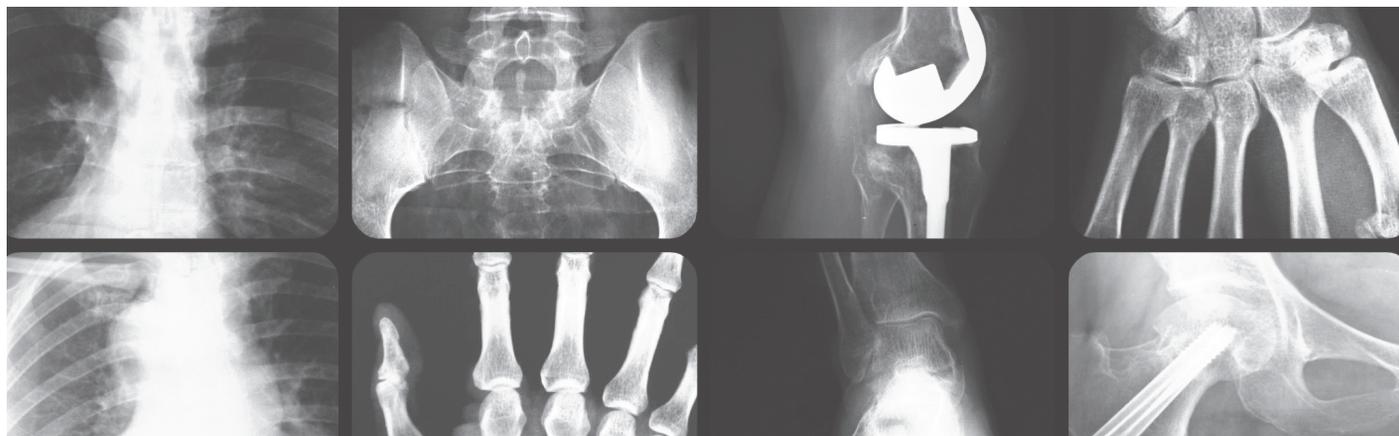
The prototype International Classification of Disease (ICD) was adopted in 1893 by the International Statistical Institute. By 1938, the classification system would undergo five revisions. International interest led to a sixth revision by the newly created World Health Organization (WHO)

in 1948. The seventh and eighth revisions followed in 1955 and 1965. The ninth revision, released in 1975, forms the basis of our current codes.

The National Center for Health Statistics applied clinical modifications (CM) to ICD-9 in 1977. The code set provided for a wide variety of signs, symptoms, abnormal findings, complaints, social circumstances, and procedures. ICD-9-CM was adopted nationally in 1979.

ADVENT OF ICD-10

WHO member states began adopting the tenth revision of the ICD in 1994. Compared to ICD-9-CM, ICD-10 provides for greater specificity, promising to enhance the clarity of shared patient data. AAPC provides the following crosswalk of the most reported ICD-9-CM diagnoses to ICD-10-CM codes for a number of specialties.



1982

ICD-9-CM became the driver of the new Diagnosis Related Group (DRG) reimbursement system. This facility inpatient payment system relies largely on the diagnoses and procedures documented for a patient by using ICD-9-CM codes.

1991

The nomenclature for Human Immunodeficiency Virus (HIV) was clarified, adding the 042-V044 series of categories.

1996

The Health Insurance Portability and Accountability Act's (HIPAA) Title II administration simplifications clause make ICD-9-CM one of the official codesets to be used in all healthcare transactions.

2001

The September 11 terror attacks resulted in a new set of U codes to describe mortality and morbidity related to terror attacks. And E999, which was used previously to denote the late effects of war operations, was modified to include late effects of terrorism in 2001.

2006

Present on Admissions rules were added to the ICD-9-CM Guidelines Oct. 1, 2006.

2009

The prevalence of traumatic brain injury (TBI) suffered by soldiers falling victim to improvised explosive devices in the Iraq War motivated the U.S. Department of Defense to request new codes for sequela related to TBI (799.21-799.29), as well as codes for TBI screening (V80.01) and personal history of traumatic brain injury (V15.52). The new codes joined ICD-9-CM in October 2009.

2013

With conversion to ICD-10-CM and ICD-10-PCS near, 2013 brings no changes to the diagnostic codes and one new code in Vol. 3.

1986

An interim classification characterizing the causative agent of AIDS was added.

1988

The Catastrophic Coverage Act of made the use of the ICD-9-CM system on all Medicare claims mandatory.

1994

042 becomes the single code for HIV disease and V08 is added for *Asymptomatic HIV infection*. HIV-specific guidelines are added to assist coders in selection and sequencing of HIV-related illness.

2000

Worries about a computer-crushing "Millennium Bug" prompted the federal government to freeze ICD-9-CM for the 2000 code year. No new codes were implemented in October 1999 but updates resumed the following year when fears passed.

2003

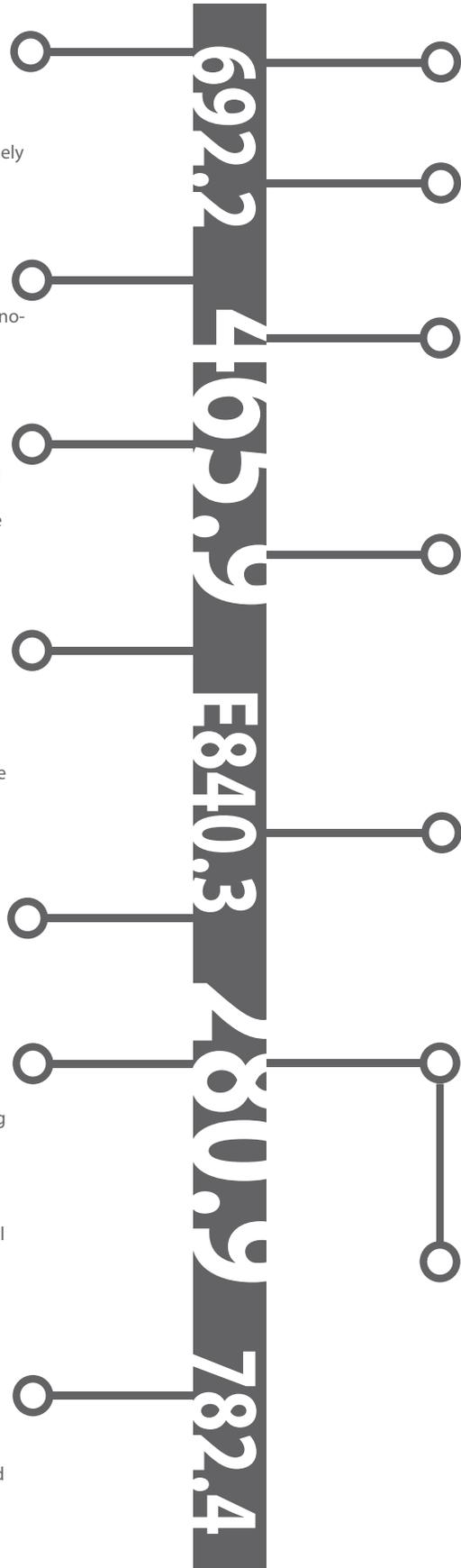
Severe Acute Respiratory Syndrome (SARS) virus in 2003 prompted the addition of both 480.31 *Pneumonia due to SARS-associated coronavirus* and V01.82 *Exposure to SARS-associated coronaviruss*

2009

The emergence of "swine flu" (2009 H1N1) led to the creation of a new diagnosis code in 2009. Several years later, the influenza codes were once again overhauled to allow reporting of novel influenza A virus.

2009

E codes reflecting new exercise and sporting activities such as boogie boarding and windsurfing (E002.7); bungee jumping (E004.3); and Pilates (E010.3) were added in 2009. Other activity E codes for knitting and crocheting (E012.0); laundry (E013.1); vacuuming (E013.2); ironing (E013.3); and floor mopping and cleaning (E013.4) also made their ICD-9-CM debut in 2009.



The following crosswalks were developed by AAPC based on the ICD-10 Fast Forward crosswalking quick reference tools. If you'd like to purchase a laminated Fast Forward for your specialty, please go to www.aapc.com.

Anesthesia

- ICD-9 722.52**
- ICD-10 M51.37** Other intervertebral disc degeneration, lumbosacral region
- ICD-9 721.3**
- ICD-10 M47.817** Spondylosis without myelopathy or radiculopathy, lumbosacral region
- ICD-9 724.2**
- ICD-10 M54.5** Low back pain
- ICD-9 724.4**
- ICD-10 M54.14** Radiculopathy, thoracic region
- M54.17** Radiculopathy, lumbosacral region
- ICD-9 724.02**
- ICD-10 M48.06** Spinal stenosis, lumbar region
- ICD-9 720.2**
- ICD-10 M46.1** Sacroiliitis, not elsewhere classified
- ICD-9 724.8**
- ICD-10 R29.898** Other symptoms and signs involving the musculoskeletal system
- ICD-9 721.42**
- ICD-10 M47.16** Other spondylosis with myelopathy, lumbar region
- ICD-9 723.1**
- ICD-10 M54.2** Cervicalgia
- ICD-9 729.1**
- ICD-10 M79.1** Myalgia
- M79.7** Fibromyalgia
- M60.9** Myositis, unspecified
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- M60.811** Other myositis, right shoulder
- M60.822** Other myositis, left shoulder
- M60.819** Other myositis, unspecified shoulder
- M60.821** Other myositis, right upper arm
- M60.822** Other myositis, left upper arm
- M60.829** Other myositis, unspecified upper arm
- M60.831** Other myositis, right forearm
- M60.832** Other myositis, left forearm
- M60.839** Other myositis, unspecified forearm
- M60.841** Other myositis, right hand
- M60.842** Other myositis, left hand
- M60.849** Other myositis, unspecified hand
- M60.851** Other myositis, right thigh
- M60.852** Other myositis, left thigh
- M60.859** Other myositis, unspecified thigh
- M60.861** Other myositis, right lower leg
- M60.862** Other myositis, left lower leg
- M60.869** Other myositis, unspecified lower leg
- M60.871** Other myositis, right ankle and foot
- M60.872** Other myositis, left ankle and foot
- M60.879** Other myositis, unspecified ankle and foot
- ICD-9 722.6**
- ICD-10 M51.34** Other intervertebral disc degeneration, thoracic region
- M51.35** Other intervertebral disc degeneration, thoracolumbar region
- M51.36** Other intervertebral disc degeneration, lumbar region
- M51.37** Other intervertebral disc degeneration, lumbosacral region
- ICD-9 715.00**
- ICD-10 M15.0** Primary generalized (osteo)arthritis
- M15.4** Erosive (osteo)arthritis
- M15.8** Other polyosteoarthritis
- M15.9** Polyosteoarthritis, unspecified
- ICD-9 726.5**
- ICD-10 M70.60** Trochanteric bursitis, unspecified hip
- M70.61** Trochanteric bursitis, right hip
- M70.62** Trochanteric bursitis, left hip
- M70.70** Other bursitis, unspecified hip
- M70.71** Other bursitis, right hip
- M70.72** Other bursitis, left hip
- ** Use additional external cause code to identify activity causing disorder (Y93-)
- M76.10** Psoas tendinitis, unspecified hip
- M76.11** Psoas tendinitis, right hip
- M76.12** Psoas tendinitis, left hip
- M76.20** Iliac crest spur, unspecified hip
- M76.21** Iliac crest spur, right hip
- M76.22** Iliac crest spur, left hip
- ICD-9 726.19**
- ICD-10 M75.80** Other shoulder lesions, unspecified shoulder
- M75.81** Other shoulder lesions, right shoulder
- M75.82** Other shoulder lesions, left shoulder

- ICD-9 719.41**
- ICD-10 M25.511** Pain in right shoulder
- M25.512** Pain in left shoulder
- M25.519** Pain in unspecified shoulder
- ICD-9 719.45**
- ICD-10 M25.551** Pain in right hip
- M25.552** Pain in left hip
- M25.559** Pain in unspecified hip
- ICD-9 722.4**
- ICD-10 M50.30** Other cervical disc degeneration, unspecified cervical region
- M50.31** Other cervical disc degeneration, occipito-atlanto-axial region
- M50.32** Other cervical disc degeneration, mid-cervical region
- M50.33** Other cervical disc degeneration, cervicothoracic region
- ICD-9 719.40**
- ICD-10 M25.50** Pain in unspecified joint
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- M25.511** Pain in right shoulder
- M25.512** Pain in left shoulder
- M25.519** Pain in unspecified shoulder
- M25.521** Pain in right elbow
- M25.522** Pain in left elbow
- M25.529** Pain in unspecified elbow
- M25.531** Pain in right wrist
- M25.532** Pain in left wrist
- M25.539** Pain in unspecified wrist
- M25.551** Pain in right hip
- M25.552** Pain in left hip
- M25.559** Pain in unspecified hip
- M25.561** Pain in right knee
- M25.562** Pain in left knee
- M25.569** Pain in unspecified knee
- M25.571** Pain in right ankle and joints of the right foot
- M25.572** Pain in left ankle and joints of the left foot
- M25.579** Pain in unspecified ankle
- ICD-9 162.9**
- ICD-10 C34.90** Malignant neoplasm of unspecified part of unspecified bronchus or lung
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- C34.00** Malignant neoplasm of unspecified main bronchus
- C34.01** Malignant neoplasm of right main bronchus
- C34.02** Malignant neoplasm of left main bronchus
- C34.10** Malignant neoplasm of upper lobe, unspecified bronchus or lung
- C34.11** Malignant neoplasm of upper lobe, right bronchus or lung
- C34.12** Malignant neoplasm of upper lobe, left bronchus or lung
- C34.2** Malignant neoplasm of middle lobe, bronchus or lung
- C34.30** Malignant neoplasm of lower lobe, unspecified bronchus or lung
- C34.31** Malignant neoplasm of lower lobe, right bronchus or lung
- C34.32** Malignant neoplasm of lower lobe, left bronchus or lung
- C34.80** Malignant neoplasm of overlapping sites of unspecified bronchus or lung
- C34.81** Malignant neoplasm of overlapping sites of right bronchus or lung
- C34.82** Malignant neoplasm of overlapping sites of left bronchus or lung
- C34.91** Malignant neoplasm of unspecified part of right bronchus or lung
- C34.92** Malignant neoplasm of unspecified part of left bronchus or lung
- ICD-9 721.0**
- ICD-10 M47.812** Spondylosis without myelopathy or radiculopathy, cervical region
- ICD-9 337.22**
- ICD-10 G90.529** Complex regional pain syndrome I of unspecified lower limb
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- G90.521** Complex regional pain syndrome I of right lower limb
- G90.522** Complex regional pain syndrome I of left lower limb
- G90.523** Complex regional pain syndrome I of lower limb, bilateral
- ICD-9 722.10**
- ICD-10 M51.26** Other intervertebral disc displacement, lumbar region
- ICD-9 338.4**
- ICD-10 G89.4** Chronic pain syndrome
- * Code also related psychological factors associated with pain (G54.42-)
- ICD-9 724.6**
- ICD-10 M53.3** Sacroccygeal disorders, not elsewhere classified
- M43.28** Fusion of spine, sacral and sacroccygeal region

- M53.2x8** Spinal instabilities, sacral and sacroccygeal region
- ICD-9 355.8**
- ICD-10 G57.90** Unspecified mononeuropathy of unspecified lower limb
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- G57.91** Unspecified mononeuropathy of right lower limb
- G57.92** Unspecified mononeuropathy of left lower limb
- G57.80** Other specified mononeuropathies of unspecified lower limb
- G57.81** Other specified mononeuropathies of right lower limb
- G57.82** Other specified mononeuropathies of left lower limb
- ICD-9 337.29**
- ICD-10 G90.59** Complex regional pain syndrome I of other specified site
- ICD-9 789.03**
- ICD-10 R10.31** Right lower quadrant pain
- ICD-9 738.4**
- ICD-10 M43.10** Spondylolisthesis, site unspecified
- M43.11** Spondylolisthesis, occipito-atlanto-axial region
- M43.12** Spondylolisthesis, cervical region
- M43.13** Spondylolisthesis, cervicothoracic region
- M43.14** Spondylolisthesis, thoracic region
- M43.15** Spondylolisthesis, thoracolumbar region
- M43.16** Spondylolisthesis, lumbar region
- M43.17** Spondylolisthesis, lumbosacral region
- M43.18** Spondylolisthesis, sacral and sacroccygeal region
- M43.19** Spondylolisthesis, multiple sites in spine
- ICD-9 723.4**
- ICD-10 M54.12** Radiculopathy, cervical region
- M54.13** Radiculopathy, cervicothoracic region
- ICD-9 354.2**
- ICD-10 G56.20** Lesion of ulnar nerve, unspecified upper limb
- G56.21** Lesion of ulnar nerve, right upper limb
- G56.22** Lesion of ulnar nerve, left upper limb
- ICD-9 722.51**
- ICD-10 M51.34** Other intervertebral disc degeneration, thoracic region
- M51.35** Other intervertebral disc degeneration, thoracolumbar region
- M51.36** Other intervertebral disc degeneration, lumbar region
- M51.37** Other intervertebral disc degeneration, lumbosacral region
- ICD-9 346.00**
- ICD-10 G43.109** Migraine with aura, not intractable, without status migrainosus
- ** Code also any associated seizure (G40-, R56.9)
- ICD-9 726.60**
- ICD-10 M70.50** Other bursitis of knee, unspecified knee
- M70.51** Other bursitis of knee, right knee
- M70.52** Other bursitis of knee, left knee
- ** Use additional external cause code to identify activity causing disorder (Y93-)
- M76.50** Patellar tendinitis, unspecified knee
- M76.51** Patellar tendinitis, right knee
- M76.52** Patellar tendinitis, left knee
- ICD-9 322.9**
- ICD-10 G03.9** Meningitis, unspecified
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- G00.0** Hemophilus meningitis
- G00.1** Pneumococcal meningitis
- G00.2** Streptococcal meningitis
- G00.3** Staphylococcal meningitis
- Use additional code to further identify organism (B96.61-B95.8)
- G00.8** Other bacterial meningitis
- Use additional code to further identify organism (B96-)
- G00.9** Bacterial meningitis, unspecified
- G01** Meningitis in bacterial diseases classified elsewhere
- ** Code first underlying disease
- G02** Meningitis in other infectious and parasitic diseases classified elsewhere
- ** Code first underlying disease, such as: poliovirus infection (A80-)
- G03.0** Nonpyogenic meningitis
- G03.1** Chronic meningitis
- G03.2** Benign recurrent meningitis (Mollaret)
- G03.8** Meningitis due to other specified causes
- ICD-9 170.9**
- ICD-10 C41.9** Malignant neoplasm of bone and articular cartilage, unspecified
- ** There are more specific code choice selections available in ICD-10-CM. These include:
- C41.0** Malignant neoplasm of bones of skull and face
- C41.1** Malignant neoplasm of mandible
- C41.2** Malignant neoplasm of vertebral column
- C41.3** Malignant neoplasm of ribs, sternum and clavicle
- C41.4** Malignant neoplasm of pelvic bones, sacrum and coccyx
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hard tissue formation in pulp 522.3
head movement 781.0
heart
rate
fetus, affecting liveborn infant

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 before the onset of labor
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 during labor 763.82
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 onset 763.83
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 before the onset of labor
 763.81
 during labor 763.82
 unspecified as to time of
 onset 763.83
 newborn
 before the onset of labor
 763.81
 during labor 763.82
 unspecified as to time of
 onset 763.83
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 sounds NEC 785.3
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 appetite 783.6
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 affecting fetus or newborn
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 grade squamous
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 796.72
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 malignancy 796.76
 high grade squamous
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 (HGSIL) 796.74
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 intraepithelial lesion
 (LGSIL) 796.73
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 specified finding NEC 796.79
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 with
 atypical squamous cells
 cannot exclude high
 grade squamous
 intraepithelial
 lesion (ASC-H)
 795.02
 of undetermined
 significance (ASC-
 US) 795.01
 cytologic evidence of
 malignancy 795.06
 high grade squamous
 intraepithelial lesion
 (HGSIL) 795.04
 low grade squamous
 intraepithelial lesion
 (LGSIL) 795.03
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 795.09
 other site 796.9
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 with
 atypical squamous cells
 cannot exclude high
 grade squamous
 intraepithelial
 lesion (ASC-H)
 795.12
 of undetermined
 significance (ASC-
 US) 795.11
 cytologic evidence of
 malignancy 795.16
 high grade squamous
 intraepithelial lesion
 (HGSIL) 795.14

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 (LGSIL) 795.13
 glandular 795.10
 specified finding NEC
 795.19
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 affecting fetus or newborn
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 newborn 763.1
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 head 793.0
 image test inconclusive due
 to excess body fat 793.91
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 kidney 794.4
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 lung 794.2
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 gastrin 251.5
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 acid phosphatase 790.5
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 cornea 743.41
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 affecting fetus or newborn
 763.89
 causing obstructed labor
 660.2 ⁵
 affecting fetus or
 newborn 763.1
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 756.0
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 653.5 ⁵
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 756.0
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 (excessive) (odor)
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Abnormal - Abortion

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 affecting fetus or newborn 762.6
 complicating delivery 663.9 ^{5th}
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 affecting fetus or newborn 763.89
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 incompatibility (due to transfusion of blood or blood products)
 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
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 unspecified time after transfusion 999.61
 reaction 999.60
 specified NEC 999.69

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 affecting fetus or newborn 761.8
 observation in current pregnancy 646.3 ^{5th}

Abortion (complete) (incomplete) (inevitable) (with retained products of conception) 637.9 ^{5th}

Note: Use the following fifth-digit subclassification with categories 634-637:

- 0 unspecified
- 1 incomplete
- 2 complete

with
 complication(s) (any) following previous abortion - *see* category 639 ^{4th}
 damage to pelvic organ (laceration) (rupture) (tear) 637.2 ^{5th}
 embolism (air) (amniotic fluid) (blood clot) (pulmonary) (pyemic) (septic) (soap) 637.6 ^{5th}
 genital tract and pelvic infection 637.0 ^{5th}
 hemorrhage, delayed or excessive 637.1 ^{5th}
 metabolic disorder 637.4 ^{5th}
 renal failure (acute) 637.3 ^{5th}
 sepsis (genital tract) (pelvic organ) 637.0 ^{5th}
 urinary tract 637.7 ^{5th}
 shock (postoperative) (septic) 637.5 ^{5th}
 specified complication NEC 637.7 ^{5th}
 toxemia 637.3 ^{5th}
 unspecified complication(s) 637.8 ^{5th}
 urinary tract infection 637.7 ^{5th}

Abortion — *continued*

accidental - *see* Abortion, spontaneous
 artificial - *see* Abortion, induced
 attempted (failed) - *see* Abortion, failed
 criminal - *see* Abortion, illegal
 early - *see* Abortion, spontaneous
 elective - *see* Abortion, legal
 failed (legal) 638.9
 with
 damage to pelvic organ (laceration) (rupture) (tear) 638.2
 embolism (air) (amniotic fluid) (blood clot) (pulmonary) (pyemic) (septic) (soap) 638.6
 genital tract and pelvic infection 638.0
 hemorrhage, delayed or excessive 638.1
 metabolic disorder 638.4
 renal failure (acute) 638.3
 sepsis (genital tract) (pelvic organ) 638.0
 urinary tract 638.7
 shock (postoperative) (septic) 638.5
 specified complication NEC 638.7
 toxemia 638.3
 unspecified complication(s) 638.8
 urinary tract infection 638.7
 fetal indication - *see* Abortion, legal
 fetus 779.6
 following threatened abortion - *see* Abortion, by type
 habitual or recurrent (care during pregnancy) 646.3 ^{5th}
 with current abortion (*see also* Abortion, spontaneous) 634.9 ^{5th}
 affecting fetus or newborn 761.8
 without current pregnancy 629.81
 homicidal - *see* Abortion, illegal
 illegal 636.9 ^{5th}
 with
 damage to pelvic organ (laceration) (rupture) (tear) 636.2 ^{5th}
 embolism (air) (amniotic fluid) (blood clot) (pulmonary) (pyemic) (septic) (soap) 636.6 ^{5th}
 genital tract and pelvic infection 636.0 ^{5th}
 hemorrhage, delayed or excessive 636.1 ^{5th}
 metabolic disorder 636.4 ^{5th}
 renal failure 636.3 ^{5th}
 sepsis (genital tract) (pelvic organ) 636.0 ^{5th}
 urinary tract 636.7 ^{5th}
 shock (postoperative) (septic) 636.5 ^{5th}
 specified complication NEC 636.7 ^{5th}

Abortion — *continued*

toxemia 636.3 ^{5th}
 unspecified complication(s) 636.8 ^{5th}
 urinary tract infection 636.7 ^{5th}
 fetus 779.6
 induced 637.9 ^{5th}
 illegal - *see* Abortion, illegal
 legal indications - *see* Abortion, legal
 medical indications - *see* Abortion, legal
 therapeutic - *see* Abortion, legal
 late - *see* Abortion, spontaneous
 legal (legal indication) (medical indication) (under medical supervision) 635.9 ^{5th}
 with
 damage to pelvic organ (laceration) (rupture) (tear) 635.2 ^{5th}
 embolism (air) (amniotic fluid) (blood clot) (pulmonary) (pyemic) (septic) (soap) 635.6 ^{5th}
 genital tract and pelvic infection 635.0 ^{5th}
 hemorrhage, delayed or excessive 635.1 ^{5th}
 metabolic disorder 635.4 ^{5th}
 renal failure (acute) 635.3 ^{5th}
 sepsis (genital tract) (pelvic organ) 635.0 ^{5th}
 urinary tract 635.7 ^{5th}
 shock (postoperative) (septic) 635.5 ^{5th}
 specified complication NEC 635.7 ^{5th}
 toxemia 635.3 ^{5th}
 unspecified complication(s) 635.8 ^{5th}
 urinary tract infection 635.7 ^{5th}
 fetus 779.6
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 mental hygiene problem - *see* Abortion, legal
 missed 632
 operative - *see* Abortion, legal
 psychiatric indication - *see* Abortion, legal
 recurrent - *see* Abortion, spontaneous
 self-induced - *see* Abortion, illegal
 septic - *see* Abortion, by type, with sepsis
 spontaneous 634.9 ^{5th}
 with
 damage to pelvic organ (laceration) (rupture) (tear) 634.2 ^{5th}
 embolism (air) (amniotic fluid) (blood clot) (pulmonary) (pyemic) (septic) (soap) 634.6 ^{5th}
 genital tract and pelvic infection 634.0 ^{5th}

Abortion - Abscess**Abortion** — *continued*

hemorrhage, delayed or excessive 634.1 ^{5th}
 metabolic disorder 634.4 ^{5th}
 renal failure 634.3 ^{5th}
 sepsis (genital tract) (pelvic organ) 634.0 ^{5th}
 urinary tract 634.7 ^{5th}
 shock (postoperative) (septic) 634.5 ^{5th}
 specified complication NEC 634.7 ^{5th}
 toxemia 634.3 ^{5th}
 unspecified complication(s) 634.8 ^{5th}
 urinary tract infection 634.7 ^{5th}
 fetus 761.8
 threatened 640.0 ^{5th}
 affecting fetus or newborn 762.1
 surgical - *see* Abortion, legal therapeutic - *see* Abortion, legal
 threatened 640.0 ^{5th}
 affecting fetus or newborn 762.1
 tubal - *see* Pregnancy, tubal voluntary - *see* Abortion, legal

Abortus fevers 023.9

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Abrachia 755.20

Abrachiatism 755.20

Abrachiocephalia 759.89

Abrachiocephalus 759.89

Abrami's disease (acquired hemolytic jaundice) 283.9

Abramov-Fiedler myocarditis (acute isolated myocarditis) 422.91

Abrasion - *see also* Injury, superficial, by site
 cornea 918.1
 dental 521.20
 extending into dentine 521.22
 pulp 521.23
 generalized 521.25
 limited to enamel 521.21
 localized 521.24
 teeth, tooth (dentifrice) (habitual) (hard tissues) (occupational) (ritual) (traditional) (wedge defect) (*see also* Abrasion, dental) 521.20

Abrikosov's tumor (M9580/0) - *see also* Neoplasm, connective tissue, benign malignant (M9580/3) - *see* Neoplasm, connective tissue, malignant

Abrism 988.8

Abruption, placenta - *see* Placenta, abruptio

Abruptio placentae - *see* Placenta, abruptio

Abscess (acute) (chronic) (infectional) (lymphangitic) (metastatic) (multiple) (pyogenic) (septic) (with lymphangitis) (*see also* Cellulitis) 682.9

Abscess — *continued*

abdomen, abdominal cavity 567.22
 wall 682.2
 abdominopelvic 567.22
 accessory sinus (chronic) (*see also* Sinusitis) 473.9
 adrenal (capsule) (gland) 255.8
 alveolar 522.5
 with sinus 522.7
 amebic 006.3
 bladder 006.8
 brain (with liver or lung abscess) 006.5
 liver (without mention of brain or lung abscess) 006.3
 with
 brain abscess (and lung abscess) 006.5
 lung abscess 006.4
 lung (with liver abscess) 006.4
 with brain abscess 006.5
 seminal vesicle 006.8
 specified site NEC 006.8
 spleen 006.8
 anaerobic 040.0
 ankle 682.6
 anorectal 566
 antecubital space 682.3
 antrum (chronic) (Highmore) (*see also* Sinusitis, maxillary) 473.0
 anus 566
 apical (tooth) 522.5
 with sinus (alveolar) 522.7
 appendix 540.1
 areola (acute) (chronic) (nonpuerperal) 611.0
 puerperal, postpartum 675.1 ^{5th}
 arm (any part, above wrist) 682.3
 artery (wall) 447.2
 atheromatous 447.2
 auditory canal (external) 380.10
 auricle (ear) (staphylococcal) (streptococcal) 380.10
 axilla, axillary (region) 682.3
 lymph gland or node 683
 back (any part) 682.2
 Bartholin's gland 616.3
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 abortion - *see* Abortion, by type, with sepsis
 ectopic pregnancy (*see also* categories 633.0 ^{5th} -633.9 ^{5th}) 639.0
 molar pregnancy (*see also* categories 630-632) 639.0
 complicating pregnancy or puerperium 646.6 ^{5th}
 following
 abortion 639.0
 ectopic or molar pregnancy 639.0
 bartholinian 616.3
 Bezold's 383.01
 bile, biliary, duct or tract (*see also* Cholecystitis) 576.8
 bilharziasis 120.1

Abscess — *continued*

bladder (wall) 595.89
 amebic 006.8
 bone (subperiosteal) (*see also* Osteomyelitis) 730.0 ^{5th}
 accessory sinus (chronic) (*see also* Sinusitis) 473.9
 acute 730.0 ^{5th}
 chronic or old 730.1 ^{5th}
 jaw (lower) (upper) 526.4
 mastoid - *see* Mastoiditis, acute
 petrous (*see also* Petrositis) 383.20
 spinal (tuberculous) (*see also* Tuberculosis) 015.0 ^{5th} [730.88]
 nontuberculous 730.08
 bowel 569.5
 brain (any part) 324.0
 amebic (with liver or lung abscess) 006.5
 cystic 324.0
 late effect - *see* category 326
 otogenic 324.0
 tuberculous (*see also* Tuberculosis) 013.3 ^{5th}
 breast (acute) (chronic) (nonpuerperal) 611.0
 newborn 771.5
 puerperal, postpartum 675.1 ^{5th}
 tuberculous (*see also* Tuberculosis) 017.9 ^{5th}
 broad ligament (chronic) (*see also* Disease, pelvis, inflammatory) 614.4
 acute 614.3
 Brodie's (chronic) (localized) (*see also* Osteomyelitis) 730.1 ^{5th}
 bronchus 519.19
 buccal cavity 528.3
 bulbourethral gland 597.0
 bursa 727.89
 pharyngeal 478.29
 buttock 682.5
 canaliculus, breast 611.0
 canthus 372.20
 cartilage 733.99
 cecum 569.5
 with appendicitis 540.1
 cerebellum, cerebellar 324.0
 late effect - *see* category 326
 cerebral (embolic) 324.0
 late effect - *see* category 326
 cervical (neck region) 682.1
 lymph gland or node 683
 stump (*see also* Cervicitis) 616.0
 cervix (stump) (uteri) (*see also* Cervicitis) 616.0
 cheek, external 682.0
 inner 528.3
 chest 510.9
 with fistula 510.0
 wall 682.2
 chin 682.0
 choroid 363.00
 ciliary body 364.3
 circumtonsillar 475
 cold (tuberculous) - *see also* Tuberculosis, abscess
 articular - *see* Tuberculosis, joint

Abscess — *continued*

colon (wall) 595.89
 colostomy or enterostomy 569.61
 conjunctiva 372.00
 connective tissue NEC 682.9
 cornea 370.55
 with ulcer 370.00
 corpus
 cavernosum 607.2
 luteum (*see also* Salpingo-oophoritis) 614.2
 Cowper's gland 597.0
 cranium 324.0
 cul-de-sac (Douglas') (posterior) (*see also* Disease, pelvis, inflammatory) 614.4
 acute 614.3
 dental 522.5
 with sinus (alveolar) 522.7
 dentoalveolar 522.5
 with sinus (alveolar) 522.7
 diaphragm, diaphragmatic 567.22
 digit NEC 681.9
 Douglas' cul-de-sac or pouch (*see also* Disease, pelvis, inflammatory) 614.4
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 Dubois' 090.5
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 elbow 682.3
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 entamebic - *see* Abscess, amebic
 enterostomy 569.61
 epididymis 604.0
 epidural 324.9
 brain 324.0
 late effect - *see* category 326
 spinal cord 324.1
 epiglottis 478.79
 epiploon, epiploic 567.22
 erysipelatous (*see also* Erysipelas) 035
 esophagostomy 530.86
 esophagus 530.19
 ethmoid (bone) (chronic) (sinus) (*see also* Sinusitis, ethmoidal) 473.2
 external auditory canal 380.10
 extradural 324.9
 brain 324.0
 late effect - *see* category 326
 spinal cord 324.1
 extraperitoneal - *see* Abscess, peritoneum
 eye 360.00
 eyelid 373.13
 face (any part, except eye) 682.0
 fallopian tube (*see also* Salpingo-oophoritis) 614.2
 fascia 728.89
 fauces 478.29
 fecal 569.5

Table of Drugs and Chemicals

INDEX TO POISONING AND EXTERNAL CAUSES OF ADVERSE

EFFECTS OF DRUGS AND OTHER CHEMICAL SUBSTANCES

This table contains a classification of drugs and other chemical substances to identify poisoning states and external causes of adverse effects.

Each of the listed substances in the table is assigned a code according to the poisoning classification (960-989). These codes are used when there is a statement of poisoning, overdose, wrong substance given or taken, or intoxication.

The table also contains a listing of external causes of adverse effects. An adverse effect is a pathologic manifestation due to ingestion or exposure to drugs or other chemical substances (e.g., dermatitis, hypersensitivity reaction, aspirin gastritis). The adverse effect is to be identified by the appropriate code found in Section 1, Index to Diseases and Injuries. An external cause code can then be used to identify the circumstances involved. The table headings pertaining to external causes are defined below:

Accidental poisoning (E850-E869)—accidental overdose of drug, wrong substance given or taken, drug taken inadvertently, accidents in the usage of drugs and biologicals in medical and surgical procedures, and to show external causes of poisonings classifiable to 980-989.

Therapeutic use (E930-E949)—a correct substance properly administered in therapeutic or prophylactic dosage as the external cause of adverse effects.

Suicide attempt (E950-E952)—instances in which self-inflicted injuries or poisonings are involved.

Assault (E961-E962)—injury or poisoning inflicted by another person with the intent to injure or kill.

Undetermined (E980-E982)—to be used when the intent of the poisoning or injury cannot be determined whether it was intentional or accidental.

The American Hospital Formulary Service (AHFS) list numbers are included in the table to help classify new drugs not identified in the table by name. The AHFS list numbers are keyed to the continually revised AHFS (American Hospital Formulary Service, 2 vol. Washington, D.C.: American Society of Hospital Pharmacists, 1959-). These listings are found in the table under the main term **Drug**.

Excluded from the table are radium and other radioactive substances. The classification of adverse effects and complications pertaining to these substances will be found in Index to Diseases and Injuries, and Index to External Causes of Injuries.

Although certain substances are indexed with one or more subentries, the majority are listed according to one use or state. It is recognized that many substances may be used in various ways, in medicine and in industry, and may cause adverse effects whatever the state of the agent (solid, liquid, or fumes arising from a liquid). In cases in which the reported data indicate a use or state not in the table, or which is clearly different from the one listed, an attempt should be made to classify the substance in the form which most nearly expresses the reported facts.

1-propanol - Albumin

1-propanol - Albumin

TABLE OF DRUGS AND CHEMICALS

| | External Cause (E-Code) | | | | | |
|---|-------------------------|----------|-----------------|-----------------|---------|--------------|
| | Poisoning | Accident | Therapeutic Use | Suicide Attempt | Assault | Undetermined |
| 1-propanol | 980.3 | E860.4 | - | E950.9 | E962.1 | E980.9 |
| 2-propanol | 980.2 | E860.3 | - | E950.9 | E962.1 | E980.9 |
| 2,4-D (dichlorophen- oxyacetic acid) | 989.4 | E863.5 | - | E950.6 | E962.1 | E980.7 |
| 2,4-toluene diisocyanate | 983.0 | E864.0 | - | E950.7 | E962.1 | E980.6 |
| 2,4,5-T (trichloro- phenoxyacetic acid) | 989.2 | E863.5 | - | E950.6 | E962.1 | E980.7 |
| 14-hydroxydihydro- morphinone | 965.09 | E850.2 | E935.2 | E950.0 | E962.0 | E980.0 |
| ABOB | 961.7 | E857 | E931.7 | E950.4 | E962.0 | E980.4 |
| Abrus (seed) | 988.2 | E865.3 | - | E950.9 | E962.1 | E980.9 |
| Absinthe | 980.0 | E860.1 | - | E950.9 | E962.1 | E980.9 |
| beverage | 980.0 | E860.0 | - | E950.9 | E962.1 | E980.9 |
| Acenocoumarin , acenocoumarol | 964.2 | E858.2 | E934.2 | E950.4 | E962.0 | E980.4 |
| Acepromazine | 969.1 | E853.0 | E939.1 | E950.3 | E962.0 | E980.3 |
| Acetal | 982.8 | E862.4 | - | E950.9 | E962.1 | E980.9 |
| Acetaldehyde (vapor) | 987.8 | E869.8 | - | E952.8 | E962.2 | E982.8 |
| liquid | 989.89 | E866.8 | - | E950.9 | E962.1 | E980.9 |
| Acetaminophen | 965.4 | E850.4 | E935.4 | E950.0 | E962.0 | E980.0 |
| Acetaminosalol | 965.1 | E850.3 | E935.3 | E950.0 | E962.0 | E980.0 |
| Acetanilid(e) | 965.4 | E850.4 | E935.4 | E950.0 | E962.0 | E980.0 |
| Acetarsol , acetarson | 961.1 | E857 | E931.1 | E950.4 | E962.0 | E980.4 |
| Acetazolamide | 974.2 | E858.5 | E944.2 | E950.4 | E962.0 | E980.4 |
| Acetic | | | | | | |
| acid | 983.1 | E864.1 | - | E950.7 | E962.1 | E980.6 |
| with sodium acetate (ointment) | 976.3 | E858.7 | E946.3 | E950.4 | E962.0 | E980.4 |
| irrigating solution | 974.5 | E858.5 | E944.5 | E950.4 | E962.0 | E980.4 |
| lotion | 976.2 | E858.7 | E946.2 | E950.4 | E962.0 | E980.4 |
| anhydride | 983.1 | E864.1 | - | E950.7 | E962.1 | E980.6 |
| ether (vapor) | 982.8 | E862.4 | - | E950.9 | E962.1 | E980.9 |
| Acetohexamide | 962.3 | E858.0 | E932.3 | E950.4 | E962.0 | E980.4 |
| Acetomenaphihone | 964.3 | E858.2 | E934.3 | E950.4 | E962.0 | E980.4 |
| Acetomorphine | 965.01 | E850.0 | E935.0 | E950.0 | E962.0 | E980.0 |
| Acetone (oils) (vapor) | 982.8 | E862.4 | - | E950.9 | E962.1 | E980.9 |
| Acetophenazine (maleate) | 969.1 | E853.0 | E939.1 | E950.3 | E962.0 | E980.3 |
| Acetophenetidin | 965.4 | E850.4 | E935.4 | E950.0 | E962.0 | E980.0 |
| Acetophenone | 982.0 | E862.4 | - | E950.9 | E962.1 | E980.9 |
| Acetorphine | 965.09 | E850.2 | E935.2 | E950.0 | E962.0 | E980.0 |
| Acetosulfone (sodium) | 961.8 | E857 | E931.8 | E950.4 | E962.0 | E980.4 |
| Acetrizate (sodium) | 977.8 | E858.8 | E947.8 | E950.4 | E962.0 | E980.4 |
| Acetylcarbromal | 967.3 | E852.2 | E937.3 | E950.2 | E962.0 | E980.2 |
| Acetylcholine (chloride) | 971.0 | E855.3 | E941.0 | E950.4 | E962.0 | E980.4 |
| Acetylcysteine | 975.5 | E858.6 | E945.5 | E950.4 | E962.0 | E980.4 |
| Acetyldigitoxin | 972.1 | E858.3 | E942.1 | E950.4 | E962.0 | E980.4 |
| Acetyldihydrocodeine | 965.09 | E850.2 | E935.2 | E950.0 | E962.0 | E980.0 |
| Acetyldihydrocodeinone | 965.09 | E850.2 | E935.2 | E950.0 | E962.0 | E980.0 |
| Acetylene (gas) (industrial) | 987.1 | E868.1 | - | E951.8 | E962.2 | E981.8 |
| incomplete combustion of—see Carbon monoxide, fuel, utility | | | | | | |
| tetrachloride (vapor) | 982.3 | E862.4 | - | E950.9 | E962.1 | E980.9 |
| Acetyliodosalicylic acid | 965.1 | E850.3 | E935.3 | E950.0 | E962.0 | E980.0 |
| Acetylphenylhydrazine | 965.8 | E850.8 | E935.8 | E950.0 | E962.0 | E980.0 |
| Acetylsalicylic acid | 965.1 | E850.3 | E935.3 | E950.0 | E962.0 | E980.0 |
| Achromycin | 960.4 | E856 | E930.4 | E950.4 | E962.0 | E980.4 |
| ophthalmic preparation | 976.5 | E858.7 | E946.5 | E950.4 | E962.0 | E980.4 |
| topical NEC | 976.0 | E858.7 | E946.0 | E950.4 | E962.0 | E980.4 |
| Acidifying agents | 963.2 | E858.1 | E933.2 | E950.4 | E962.0 | E980.4 |

| | External Cause (E-Code) | | | | | |
|---|-------------------------|----------|-----------------|-----------------|---------|--------------|
| | Poisoning | Accident | Therapeutic Use | Suicide Attempt | Assault | Undetermined |
| Acids (corrosive) NEC | 983.1 | E864.1 | - | E950.7 | E962.1 | E980.6 |
| Aconite (wild) | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Aconitine (liniment) | 976.8 | E858.7 | E946.8 | E950.4 | E962.0 | E980.4 |
| Aconitum ferox | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Acridine | 983.0 | E864.0 | - | E950.7 | E962.1 | E980.6 |
| vapor | 987.8 | E869.8 | - | E952.8 | E962.2 | E982.8 |
| Acriflavine | 961.9 | E857 | E931.9 | E950.4 | E962.0 | E980.4 |
| Acrisorcin | 976.0 | E858.7 | E946.0 | E950.4 | E962.0 | E980.4 |
| Acrolein (gas) | 987.8 | E869.8 | - | E952.8 | E962.2 | E982.8 |
| liquid | 989.89 | E866.8 | - | E950.9 | E962.1 | E980.9 |
| Actaea spicata | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Acterol | 961.5 | E857 | E931.5 | E950.4 | E962.0 | E980.4 |
| ACTH | 962.4 | E858.0 | E932.4 | E950.4 | E962.0 | E980.4 |
| Acthar | 962.4 | E858.0 | E932.4 | E950.4 | E962.0 | E980.4 |
| Actinomycin (C) (D) | 960.7 | E856 | E930.7 | E950.4 | E962.0 | E980.4 |
| Adalin (acetyl) | 967.3 | E852.2 | E937.3 | E950.2 | E962.0 | E980.2 |
| Adenosine (phosphate) | 977.8 | E858.8 | E947.8 | E950.4 | E962.0 | E980.4 |
| Adhesives | 989.89 | E866.6 | - | E950.9 | E962.1 | E980.9 |
| ADH | 962.5 | E858.0 | E932.5 | E950.4 | E962.0 | E980.4 |
| Adicillin | 960.0 | E856 | E930.0 | E950.4 | E962.0 | E980.4 |
| Adiphenine | 975.1 | E855.6 | E945.1 | E950.4 | E962.0 | E980.4 |
| Adjunct , pharmaceutical | 977.4 | E858.8 | E947.4 | E950.4 | E962.0 | E980.4 |
| Adrenal (extract, cortex or medulla) (glucocorticoids) (hormones) (mineralocorticoids) | 962.0 | E858.0 | E932.0 | E950.4 | E962.0 | E980.4 |
| ENT agent | 976.6 | E858.7 | E946.6 | E950.4 | E962.0 | E980.4 |
| ophthalmic preparation | 976.5 | E858.7 | E946.5 | E950.4 | E962.0 | E980.4 |
| topical NEC | 976.0 | E858.7 | E946.0 | E950.4 | E962.0 | E980.4 |
| Adrenalin | 971.2 | E855.5 | E941.2 | E950.4 | E962.0 | E980.4 |
| Adrenergic blocking agents | 971.3 | E855.6 | E941.3 | E950.4 | E962.0 | E980.4 |
| Adrenergics | 971.2 | E855.5 | E941.2 | E950.4 | E962.0 | E980.4 |
| Adrenochrome (derivatives) | 972.8 | E858.3 | E942.8 | E950.4 | E962.0 | E980.4 |
| Adrenocorticotropic hormone | 962.4 | E858.0 | E932.4 | E950.4 | E962.0 | E980.4 |
| Adrenocorticotropin | 962.4 | E858.0 | E932.4 | E950.4 | E962.0 | E980.4 |
| Adriamycin | 960.7 | E856 | E930.7 | E950.4 | E962.0 | E980.4 |
| Aerosol spray—see Sprays | | | | | | |
| Aerosporin | 960.8 | E856 | E930.8 | E950.4 | E962.0 | E980.4 |
| ENT agent | 976.6 | E858.7 | E946.6 | E950.4 | E962.0 | E980.4 |
| ophthalmic preparation | 976.5 | E858.7 | E946.5 | E950.4 | E962.0 | E980.4 |
| topical NEC | 976.0 | E858.7 | E946.0 | E950.4 | E962.0 | E980.4 |
| Aethusa cynapium | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Afghanistan black | 969.6 | E854.1 | E939.6 | E950.3 | E962.0 | E980.3 |
| Aflatoxin | 989.7 | E865.9 | - | E950.9 | E962.1 | E980.9 |
| African boxwood | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Agar (-agar) | 973.3 | E858.4 | E943.3 | E950.4 | E962.0 | E980.4 |
| Agricultural agent NEC | 989.89 | E863.9 | - | E950.6 | E962.1 | E980.7 |
| Agrypnal | 967.0 | E851 | E937.0 | E950.1 | E962.0 | E980.1 |
| Air contaminant(s), source or type not specified | 987.9 | E869.9 | - | E952.9 | E962.2 | E982.9 |
| specified type—see specific substance | | | | | | |
| Akee | 988.2 | E865.4 | - | E950.9 | E962.1 | E980.9 |
| Akrinol | 976.0 | E858.7 | E946.0 | E950.4 | E962.0 | E980.4 |
| Alantolactone | 961.6 | E857 | E931.6 | E950.4 | E962.0 | E980.4 |
| Albamycin | 960.8 | E856 | E930.8 | E950.4 | E962.0 | E980.4 |
| Albumin (normal human serum) | 964.7 | E858.2 | E934.7 | E950.4 | E962.0 | E980.4 |

Hypertension - heart

| | Malignant | Benign | Unspecified |
|---|-----------|--------|-------------|
| Hypertension, hypertensive (arterial) (arteriolar) (crisis) (degeneration) (disease) (essential) (fluctuating) (idiopathic) (intermittent) (labile) (low renin) (orthostatic) (paroxysmal) (primary) (systemic) (uncontrolled) (vascular) | 401.0 | 401.1 | 401.9 |
| with | | | |
| chronic kidney disease | | | |
| stage I through stage IV, or unspecified | 403.00 | 403.10 | 403.90 |
| stage V or end stage renal disease | 403.01 | 403.11 | 403.91 |
| heart involvement (conditions classifiable to 429.0-429.3, 429.8, 429.9 due to hypertension) (see also Hypertension, heart) | 402.00 | 402.10 | 402.90 |
| with kidney involvement see Hypertension, cardiorenal | | | |
| renal (kidney) involvement (only conditions classifiable to 585, 587) (excludes conditions classifiable to 584) (see also Hypertension, kidney) | 403.00 | 403.10 | 403.90 |
| with heart involvement see Hypertension, cardiorenal failure (and sclerosis) (see also Hypertension, kidney) | 403.01 | 403.11 | 403.91 |
| sclerosis without failure (see also Hypertension, kidney) | 403.00 | 403.10 | 403.90 |
| accelerated (see also Hypertension, by type, malignant) | 401.0 | - | - |
| antepartum see Hypertension, complicating pregnancy, childbirth, or the puerperium | | | |
| borderline | - | - | 796.2 |
| cardiorenal (disease) | 404.00 | 404.10 | 404.90 |
| with | | | |
| chronic kidney disease | | | |
| stage I through stage IV, or unspecified | 404.00 | 404.10 | 404.90 |
| and heart failure | 404.01 | 404.11 | 404.91 |
| stage V or end stage renal disease | 404.02 | 404.12 | 404.92 |
| and heart failure | 404.03 | 404.13 | 404.93 |
| heart failure | 404.01 | 404.11 | 404.91 |
| and chronic kidney disease | 404.01 | 404.11 | 404.91 |
| stage I through stage IV or unspecified | 404.01 | 404.11 | 404.91 |
| stage V or end stage renal disease | 404.03 | 404.13 | 404.93 |
| cardiovascular disease (arteriosclerotic) (sclerotic) | 402.00 | 402.10 | 402.90 |
| with | | | |
| heart failure | 402.01 | 402.11 | 402.91 |
| renal involvement (conditions classifiable to 403) (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.90 |
| cardiovascular renal (disease) (sclerosis) (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.9 |

| | Malignant | Benign | Unspecified |
|--|-----------|--------|-------------|
| Hypertension, hypertensive—<i>continued</i> | | | |
| cerebrovascular disease NEC | 437.2 | 437.2 | 437.2 |
| complicating pregnancy, childbirth, or the puerperium | 642.2 | 642.0 | 642.9 |
| with | | | |
| albuminuria (and edema) (mild) | - | - | 642.4 |
| severe | - | - | 642.5 |
| chronic kidney disease | 642.2 | 642.2 | 642.2 |
| and heart disease | 642.2 | 642.2 | 642.2 |
| edema (mild) | - | - | 642.4 |
| severe | - | - | 642.5 |
| heart disease | 642.2 | 642.2 | 642.2 |
| and chronic kidney disease | 642.2 | 642.2 | 642.2 |
| renal disease | 642.2 | 642.2 | 642.2 |
| and heart disease | 642.2 | 642.2 | 642.2 |
| chronic | 642.2 | 642.0 | 642.0 |
| with pre-eclampsia or eclampsia | 642.7 | 642.7 | 642.7 |
| fetus or newborn | 760.0 | 760.0 | 760.0 |
| essential | - | 642.0 | 642.0 |
| with pre-eclampsia or eclampsia | - | 642.7 | 642.7 |
| fetus or newborn | 760.0 | 760.0 | 760.0 |
| fetus or newborn | 760.0 | 760.0 | 760.0 |
| gestational | - | - | 642.3 |
| pre-existing | 642.2 | 642.0 | 642.0 |
| with pre-eclampsia or eclampsia | 642.7 | 642.7 | 642.7 |
| fetus or newborn | 760.0 | 760.0 | 760.0 |
| secondary to renal disease | 642.1 | 642.1 | 642.1 |
| with pre-eclampsia or eclampsia | 642.7 | 642.7 | 642.7 |
| fetus or newborn | 760.0 | 760.0 | 760.0 |
| transient | - | - | 642.3 |
| due to | | | |
| aldosteronism, primary | 405.09 | 405.19 | 405.99 |
| brain tumor | 405.09 | 405.19 | 405.99 |
| bulbar poliomyelitis | 405.09 | 405.19 | 405.99 |
| calculus | | | |
| kidney | 405.09 | 405.19 | 405.99 |
| ureter | 405.09 | 405.19 | 405.99 |
| coarctation, aorta | 405.09 | 405.19 | 405.99 |
| Cushing's disease | 405.09 | 405.19 | 405.99 |
| glomerulosclerosis (see also Hypertension, kidney) | 403.00 | 403.10 | 403.90 |
| periarteritis nodosa | 405.09 | 405.19 | 405.99 |
| pheochromocytoma | 405.09 | 405.19 | 405.99 |
| polycystic kidney(s) | 405.09 | 405.19 | 405.99 |
| polycythemia | 405.09 | 405.19 | 405.99 |
| porphyria | 405.09 | 405.19 | 405.99 |
| pyelonephritis | 405.09 | 405.19 | 405.99 |
| renal (artery) | | | |
| aneurysm | 405.01 | 405.11 | 405.91 |
| anomaly | 405.01 | 405.11 | 405.91 |
| embolism | 405.01 | 405.11 | 405.91 |
| fibromuscular hyperplasia | 405.01 | 405.11 | 405.91 |
| occlusion | 405.01 | 405.11 | 405.91 |
| stenosis | 405.01 | 405.11 | 405.91 |
| thrombosis | 405.01 | 405.11 | 405.91 |
| encephalopathy | 437.2 | 437.2 | 437.2 |
| gestational (transient) NEC | - | - | 642.3 |
| Goldblatt's | 440.1 | 440.1 | 440.1 |
| heart (disease) (conditions classifiable to 429.0-429.3, 429.8, 429.9 due to hypertension) | 402.00 | 402.10 | 402.90 |

heart - venous

| | Malignant | Benign | Unspecified |
|---|-----------|--------|-------------|
| Hypertension, hypertensive— continued | | | |
| heart — <i>continued</i> | | | |
| with | | | |
| heart failure | 402.01 | 402.11 | 402.91 |
| hypertensive kidney disease (conditions classifiable to 403) (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.90 |
| renal sclerosis (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.90 |
| intracranial, benign | - | 348.2 | - |
| intraocular | - | - | 365.04 |
| kidney | 403.00 | 403.10 | 403.90 |
| with | | | |
| chronic kidney disease | | | |
| stage I through stage IV, or unspecified | 403.00 | 403.10 | 403.90 |
| stage V or end stage renal disease | 403.01 | 403.11 | 403.91 |
| heart involvement (conditions classifiable to 429.0-429.3, 429.8, 429.9 due to hypertension) (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.90 |
| hypertensive heart (disease) (conditions classifiable to 402) (see also Hypertension, cardiorenal) | 404.00 | 404.10 | 404.90 |
| lesser circulation | - | - | 416.0 |
| necrotizing | 401.0 | - | - |
| ocular | - | - | 365.04 |
| pancreatic duct - code to underlying condition | | | |
| with | | | |
| chronic pancreatitis | - | - | 577.1 |
| portal (due to chronic liver disease) | - | - | 572.3 |
| postoperative | | | 997.91 |
| psychogenic | - | - | 306.2 |
| puerperal, postpartum see Hypertension, complicating pregnancy, childbirth, or the puerperium | | | |
| pulmonary (artery) (secondary) | - | - | 416.8 |
| with | | | |
| cor pulmonale (chronic) | - | - | 416.8 |
| acute | - | - | 415.0 |
| right heart ventricular strain/failure | - | - | 416.8 |
| acute | - | - | 415.0 |
| idiopathic | | | 416.0 |
| primary | | | 416.0 |
| of newborn | | | 747.83 |
| secondary | - | - | 416.8 |
| renal (disease) (see also Hypertension, kidney) | 403.00 | 403.10 | 403.90 |
| renovascular NEC | 405.01 | 405.11 | 405.91 |
| secondary NEC | 405.09 | 405.19 | 405.99 |
| due to | | | |
| aldosteronism, primary | 405.09 | 405.19 | 405.99 |
| brain tumor | 405.09 | 405.19 | 405.99 |
| bulbar poliomyelitis | 405.09 | 405.19 | 405.99 |
| calculus | | | |

| | Malignant | Benign | Unspecified |
|---|-----------|--------|-------------|
| Hypertension, hypertensive— continued | | | |
| secondary NEC — <i>continued</i> | | | |
| due to — <i>continued</i> | | | |
| calculus — <i>continued</i> | | | |
| kidney | 405.09 | 405.19 | 405.99 |
| ureter | 405.09 | 405.19 | 405.99 |
| coarctation, aorta | 405.09 | 405.19 | 405.99 |
| Cushing's disease | 405.09 | 405.19 | 405.99 |
| glomerulosclerosis (see also Hypertension, kidney) | 403.00 | 403.10 | 403.90 |
| periarteritis nodosa | 405.09 | 405.19 | 405.99 |
| pheochromocytoma | 405.09 | 405.19 | 405.99 |
| polycystic kidney(s) | 405.09 | 405.19 | 405.99 |
| polycythemia | 405.09 | 405.19 | 405.99 |
| porphyria | 405.09 | 405.19 | 405.99 |
| pyelonephritis | 405.09 | 405.19 | 405.99 |
| renal (artery) | | | |
| aneurysm | 405.01 | 405.11 | 405.91 |
| anomaly | 405.01 | 405.11 | 405.91 |
| embolism | 405.01 | 405.11 | 405.91 |
| fibromuscular hyperplasia | 405.01 | 405.11 | 405.91 |
| occlusion | 405.01 | 405.11 | 405.91 |
| stenosis | 405.01 | 405.11 | 405.91 |
| thrombosis | 405.01 | 405.11 | 405.91 |
| transient | - | - | 796.2 |
| of pregnancy | - | - | 642.3 |
| venous, chronic (asymptomatic) (idiopathic) | - | - | 459.30 |
| with | | | |
| complication, NEC | - | - | 459.39 |
| inflammation | - | - | 459.32 |
| with ulcer | - | - | 459.33 |
| ulcer | - | - | 459.31 |
| with inflammation | - | - | 459.33 |
| due to | | | |
| deep vein thrombosis (see also Syndrome, postphlebotic) - | - | - | 459.10 |

Chapter 1: Infectious and Parasitic Diseases (001-139)

Chapter 1 of ICD-9-CM includes a long list of infectious and parasitic diseases. Everything from cholera and bubonic plague to toxoplasmosis has a home here. But as you code, keep in mind that ICD-9-CM may list infections in the chapters for their specific anatomic area instead of in Chapter 1. Each time you code, search the index and then confirm your code choice in the tabular list.

List of Sections

- 001-009: Intestinal Infectious Diseases
- 010-018: Tuberculosis
- 020-027: Zoonotic Bacterial Diseases
- 030-041: Other Bacterial Diseases
- 042: Human Immunodeficiency Virus (HIV) Infection
- 045-049: Poliomyelitis And Other Non-Arthropod-Borne Viral Diseases and Prion Diseases of Central Nervous System
- 050-059: Viral Diseases Accompanied by Exanthem
- 060-066: Arthropod-Borne Viral Diseases
- 070-079: Other Diseases Due to Viruses and Chlamydiae
- 080-088: Rickettsioses and Other Arthropod-Borne Diseases
- 090-099: Syphilis and Other Venereal Diseases
- 100-104: Other Spirochetal Diseases
- 110-118: Mycoses
- 120-129: Helminthiases
- 130-136: Other Infectious And Parasitic Diseases
- 137-139: Late Effects Of Infectious And Parasitic Diseases

Highlights From the ICD-9-CM Official Guidelines for Coding and Reporting

The ICD-9-CM Official Guidelines for Coding and Reporting for Chapter 1 keep the focus on proper coding for HIV, septicemia and related conditions, and MRSA. The information below covers the major points of Section I.C.1 of the guidelines effective Oct. 1, 2011, the most recent version.

Guidelines Provide Crucial Answers for Coders Reporting HIV

The Official Guidelines give you practical coding guidance for a variety of HIV-related scenarios.

First, you must use 042 (Human immunodeficiency virus [HIV] disease) to report only confirmed cases of HIV. A diagnostic statement from the provider that the patient is positive for HIV or has an HIV-related illness counts as confirmation.

Sequencing: Whether you use 042 as the first-listed (or principal) diagnosis depends on the nature of the patient's visit.

Use 042 as the principal diagnosis for a patient admitted for an HIV-related condition (unless the patient is pregnant or recently gave birth, as explained below). You also should report additional diagnoses for the HIV-related conditions documented for the patient.

On the other hand, if the provider admits the patient for a condition unrelated to HIV, you should choose your principal diagnosis based on the reason for admission. Then report 042 and codes for the patient's other HIV-related conditions.

The guidelines indicate the above sequencing rules apply regardless of whether the patient is newly diagnosed or has had previous encounters for HIV-related conditions.

042 Isn't the Only Possibility for HIV Encounters

Asymptomatic: When documentation doesn't record any symptoms, but it does show the patient is HIV positive, you should use V08 (*Asymptomatic human immunodeficiency virus [HIV] infection status*) rather than 042. However, if the provider documents AIDS, treatment for an HIV-related illness, or one or more conditions caused by being HIV-positive, then you should use 042.

Inconclusive serology: When a patient with no definitive diagnosis or manifestations of HIV has an inconclusive HIV serology, you should not use 042. You should use 795.71 (*Nonspecific serologic evidence of human immunodeficiency virus [HIV]*).

Note that you should never use V08 or 795.71 if the patient has ever been diagnosed with an HIV illness that falls under 042. You always should use 042 for patients who have had an HIV-related illness.

Pregnancy, puerperium: When a patient presents with an HIV-related illness during pregnancy, childbirth, or the puerperium, your first-listed (or principal) code must be from the 647.6x range (*Other viral diseases complicating pregnancy childbirth or the puerperium*). Then report 042 and the code or codes for the patient's HIV-related illnesses. Sequence the conditions that ICD-9 indexes to Chapter 15, Certain Conditions Originating in the Perinatal Period (760-779), first.

If the patient's status is asymptomatic HIV, report 647.6x and V08.

HIV Test Codes Vary Based on Circumstances

The codes you report when a patient presents for determination of HIV status depends on the patient's specific case.

- You should use the screening code V73.89 (*Other specified viral diseases*) as the primary code.
- For patients without symptoms who are in a high-risk group for HIV, you should add secondary code V69.8 (*Other problems related to lifestyle*).
- When a patient has an HIV test because of signs, symptoms, or confirmation of an HIV-related illness, you should report the code(s) for the signs, symptoms, or confirmed condition. If the patient has counseling at the same session, report V65.44 (*Human immunodeficiency virus [HIV] counseling*), too.
 - ➡ Code V65.44 is also the appropriate code to use when a patient returns for the test results and learns she is HIV negative. If the test shows the patient is HIV positive, then V65.44 may also be appropriate, but first you should report either V08 for an asymptomatic patient or 042 for a symptomatic patient. For symptomatic patients, you also should add codes for the symptoms or confirmed HIV-related diagnoses.

Sort Through the Definitions for Septicemia, SIRS, and Sepsis

The Official Guidelines include a lengthy section on proper reporting of septicemia, SIRS, sepsis, severe sepsis, and septic shock.

To report 038.xx (*Septicemia*) correctly, you first need to understand how it differs from sepsis. Providers may use these terms interchangeably, so proper coding requires understanding the definitions the ICD-9-CM guidelines provide and possibly querying the provider for clarification if needed.

Definitions: Septicemia is a systemic condition that involves the presence of toxins and pathological microorganisms in the blood. Examples include bacteria, viruses, and fungi, but this is not an exclusive list.

Sepsis is infection-caused systemic inflammatory response syndrome (SIRS). If the patient has acute organ dysfunction associated with the sepsis, this qualifies as severe sepsis. When the patient has acute organ dysfunction related to a medical condition other than sepsis, you should not report severe sepsis.

Remember Sequencing Rules for SIRS, Sepsis, and Severe Sepsis

- Whether you're reporting SIRS, sepsis, or severe sepsis, you must report at least two codes so that the claim identifies both the underlying cause and the SIRS.
 - Sequence the underlying cause code first, and then include a code from 995.9x (*Systemic inflammatory response syndrome [SIRS]*).
- When the diagnosis is sepsis or severe sepsis, you must report a code for the systemic infection along with the code for sepsis (995.91) or severe sepsis (995.92).
- In some cases, the documentation will not specify the organism causing the infection. In that situation, you should report 038.9 (*Unspecified septicemia*).
- Coding for severe sepsis has another rule: report one or more additional codes for the associated acute organ dysfunction.

Documentation tips: You should follow the rules for coding severe sepsis when documentation shows the patient has sepsis with multiple organ dysfunctions.

Also, you may not report SIRS diagnoses from 995.9x unless documentation specifies sepsis or SIRS.

Note: There are separate rules for SIRS related to post procedural infection and to non-infectious processes like trauma and burns.

POA warning: Facility coders who must watch whether a diagnosis is present on admission (POA) should note that it's appropriate to use 995.91 (*Sepsis*) or 995.92 (*Severe sepsis*) as secondary when the condition develops after admission. If you can't tell from the documentation whether the condition was POA, you should ask the provider.

Lock Down Proper Coding When Patient Has Localized Infection, Too

If the provider documents both sepsis, severe sepsis, or SIRS and a localized infection as reasons for admission, you should report at least three codes:

- The systemic infection code, such as 038.xx
- The appropriate sepsis code, 995.91 or 995.92
- The localized infection code.

Urosepsis: When the documentation shows only "urosepsis," you should report 599.0 (*Urinary tract infection site not specified*). If the medical record also shows the organism causing the urosepsis, you should report a code for the organism, as well.

Turn to 038.0 for Bacterial Sepsis and Septicemia

You'll often use 038.0 with 995.9x for bacterial sepsis and septicemia. Two examples of when you'll use 038.0 include streptococcal sepsis and streptococcal septicemia:

- For streptococcal sepsis, you should report 038.0 and then 995.91.
- For streptococcal septicemia, you should report only 038.0 unless querying the provider offers additional information.

Apply This Sequencing for Septic Shock

Septic shock is a kind of acute organ dysfunction because it involves circulatory failure related to severe sepsis. When a patient has septic shock, your codes should follow this order:

- The code for the systemic infection
- 995.92 for severe sepsis; note that documentation does not need to specify "severe" sepsis because septic shock indicates severe sepsis
- 785.52 (*Septic shock*) or 998.02 (*Postoperative septic shock*); note that you may not report septic shock as a principal diagnosis
- Codes for other acute organ dysfunctions.

Note: See Chapter 11 to report sepsis and septic shock connected to pregnancy, birth, and abortion. See Chapter 15 to report newborn sepsis.

Post Procedural Sepsis Coding Has Variations to Watch

When documentation reveals post procedural sepsis, you should report your codes in the following order:

- The complication code, such as 998.59 (*Other postoperative infection*) or 674.3x (*Other complications of obstetrical surgical wounds*)
- The sepsis code, 995.91 or 995.92
- Codes for any acute organ dysfunction for severe sepsis

Your coding will change a bit if post procedural infection leads to severe sepsis and post procedural septic shock:

- Complication code
- Sepsis codes: systemic infection and 995.92
- 998.02 (*Postoperative shock, septic*)
- Codes for any acute organ dysfunction for severe sepsis

Don't Assume Infection Caused the Sepsis

When the sepsis results from something other than infection, use the following order for your codes:

- The code for the noninfectious condition, such as the appropriate burn or injury code, assuming this condition meets the definition of a principal diagnosis
- The code for the systemic infection
- The sepsis code, 995.91 or 995.92
- Codes for any acute organ dysfunction for severe sepsis.

Note that if the sepsis meets the principal diagnosis requirements, you should report the systemic infection and sepsis/severe sepsis codes followed by the code for the noninfectious condition. You may report either the noninfectious condition or the sepsis as principal if both meet the definition of principal diagnosis.

Caution: When a patient has a noninfectious condition that results in an infection that then leads to sepsis/severe sepsis, you should report 995.91 or 995.92 as appropriate. You should not also report 995.93 (*Systemic inflammatory response syndrome due to noninfectious process without acute organ dysfunction*) or 995.94 (*Systemic inflammatory response syndrome due to noninfectious process with acute organ dysfunction*).

Note: See Chapter 17 to report SIRS related to noninfectious causes. See Chapter 19 to report external cause of injury codes when SIRS is due to trauma.

MRSA Conditions Often Feature Combination Codes

ICD-9-CM offers combination codes for certain methicillin resistant *Staphylococcus aureus* (MRSA) diagnoses. In those cases, you should report the combination code that describes the complete condition rather than reporting the individual elements.

Example 1: The patient has septicemia caused by MRSA. You should report 038.12 (*Methicillin resistant staphylococcus aureus septicemia*).

Example 2: The patient has pneumonia due to MRSA. You should report 482.42 (*Methicillin resistant pneumonia due to staphylococcus aureus*).

Do not report: When combination codes apply, you should not report 041.12 (*Methicillin resistant staphylococcus aureus in conditions classified elsewhere and of unspecified site*). You also should not report V09.0 (*Infection with microorganisms resistant to penicillins*).

Double Up on the Codes When Necessary

You won't always have the option of using a combination code for a current MRSA infection. In those cases, you should report the condition as well as MRSA code 041.12. You shouldn't report V09.0 as an additional code.

Distinguish Between Colonization and Infection

A person may have MRSA or Methicillin susceptible *Staphylococcus aureus* (MSSA) on or in the body without being sick. In these cases, you may see the documentation refer to colonization, carriage, carrier, MRSA screen positive, or MRSA nasal swab positive.

How to code: When documentation shows MSSA colonization, you should report V02.53 (*Carrier or suspected carrier of methicillin susceptible staphylococcus aureus*).

For MSSA colonization, use V02.54 (*Carrier or suspected carrier of methicillin resistant staphylococcus aureus*). When the patient has both MRSA colonization and MRSA infection documented, you may report codes for both.

Chapter 1

Infectious and Parasitic Diseases

INFECTIOUS AND PARASITIC DISEASES (001-139)

Note: Categories for "late effects" of infectious and parasitic diseases are to be found at 137-139.

INCLUDES diseases generally recognized as communicable or transmissible as well as a few diseases of unknown but possibly infectious origin

EXCLUDES: acute respiratory infections (460-466)
carrier or suspected carrier of infectious organism (V02.0-V02.9)
certain localized infections
influenza (487.0-487.8, 488.01-488.19)

INTESTINAL INFECTIOUS DISEASES (001-009)

EXCLUDES: helminthiasis (120.0-129)

4th 001 Cholera

AHA: Q2, 2002; Q4, 2002; Q1, 2005; Q1, 2006; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010

001.0 Due to *Vibrio cholerae*

AHA: Q2, 2002; Q4, 2002; Q1, 2005; Q1, 2006; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2010

001.1 Due to *Vibrio cholerae* el tor

001.9 Cholera, unspecified

4th 002 Typhoid and paratyphoid fevers

002.0 Typhoid fever

Typhoid (fever) (infection) [any site]

002.1 Paratyphoid fever A

002.2 Paratyphoid fever B

002.3 Paratyphoid fever C

002.9 Paratyphoid fever, unspecified

4th 003 Other salmonella infections

INCLUDES infection or food poisoning by *Salmonella* [any serotype]

003.0 *Salmonella gastroenteritis*

Salmonellosis

003.1 *Salmonella septicemia*5th 003.2 Localized salmonella infections

003.20 Localized salmonella infection, unspecified

003.21 *Salmonella meningitis*003.22 *Salmonella pneumonia*003.23 *Salmonella arthritis*003.24 *Salmonella osteomyelitis*

003.29 Other

003.8 Other specified salmonella infections

003.9 *Salmonella* infection, unspecified4th 004 Shigellosis

INCLUDES bacillary dysentery

004.0 *Shigella dysenteriae*

Infection by group A *Shigella* (Schmitz) (Shiga)

004.1 *Shigella flexneri*

Infection by group B *Shigella*

004.2 *Shigella boydii*

Infection by group C *Shigella*

004.3 *Shigella sonnei*

Infection by group D *Shigella*

004.8 Other specified shigella infections

004.9 Shigellosis, unspecified

4th 005 Other food poisoning (bacterial)

EXCLUDES: salmonella infections (003.0-003.9)
toxic effect of:
food contaminants (989.7)
noxious foodstuffs (988.0-988.9)

005.0 Staphylococcal food poisoning

Staphylococcal toxemia specified as due to food

005.1 Botulism food poisoning

Botulism NOS

Food poisoning due to *Clostridium botulinum*

EXCLUDES: infant botulism (040.41)
wound botulism (040.42)

AHA: Q4, 2007

005.2 Food poisoning due to *Clostridium perfringens* [C. welchii]

Enteritis necroticans

005.3 Food poisoning due to other Clostridia

005.4 Food poisoning due to *Vibrio parahaemolyticus*5th 005.8 Other bacterial food poisoning

EXCLUDES: salmonella food poisoning (003.0-003.9)

AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010

005.81 Food poisoning due to *Vibrio vulnificus*

AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010

005.89 Other bacterial food poisoning

Food poisoning due to *Bacillus cereus*

AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010

005.9 Food poisoning, unspecified

4th 006 Amebiasis

INCLUDES infection due to *Entamoeba histolytica*

EXCLUDES: amebiasis due to organisms other than *Entamoeba histolytica* (007.8)

AHA: Q4, 2008

006.0 Acute amebic dysentery without mention of abscess

Acute amebiasis

006.1 Chronic intestinal amebiasis without mention of abscess

Chronic:

amebiasis

amebic dysentery

006.2 Amebic nondysenteric colitis

006.3 Amebic liver abscess

Hepatic amebiasis

006.4 Amebic lung abscess

Amebic abscess of lung (and liver)

4th 4th digit required 5th 5th digit required N Newborn M Maternity P Pediatric A Adult ♀ Female ♂ Male
AHA AHA Coding Clinic® Unspecified Other specified V-1 V code as primary diagnosis

| | |
|--|--|
| <p>006.5 Amebic brain abscess Amebic abscess of brain (and liver) (and lung)</p> <p>006.6 Amebic skin ulceration Cutaneous amebiasis</p> <p>006.8 Amebic infection of other sites <input type="checkbox"/> Amebic: appendicitis balanitis Ameboma Excludes: <i>specific infections by free-living amoebae (136.21-136-29)</i> AHA: Q4, 2008</p> <p>006.9 Amebiasis, unspecified <input type="checkbox"/> Amebiasis NOS</p> <p>4th 007 Other protozoal intestinal diseases INCLUDES: protozoal: colitis diarrhea dysentery AHA: Q4, 2000</p> <p>007.0 Balantidiasis Infection by Balantidium coli</p> <p>007.1 Giardiasis Infection by Giardia lamblia Lambliasis</p> <p>007.2 Coccidiosis Infection by Isospora belli and Isospora hominis Isosporiasis</p> <p>007.3 Intestinal trichomoniasis</p> <p>007.4 Cryptosporidiosis AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>007.5 Cyclosporiasis AHA: Q4, 2000; Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>007.8 Other specified protozoal intestinal diseases <input type="checkbox"/> Amebiasis due to organisms other than Entamoeba histolytica AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>007.9 Unspecified protozoal intestinal disease <input type="checkbox"/> Flagellate diarrhea Protozoal dysentery NOS</p> <p>4th 008 Intestinal infections due to other organisms INCLUDES: <i>any condition classifiable to 009.0-009.3 with mention of the responsible organisms</i> Excludes: <i>food poisoning by these organisms (005.0-005.9)</i></p> <p>5th 008.0 Escherichia coli [E. coli] AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.00 E. coli, unspecified <input type="checkbox"/> E. coli enteritis NOS AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.01 Enteropathogenic E. coli</p> <p>008.02 Enterotoxigenic E. coli</p> <p>008.03 Enteroinvasive E. coli</p> <p>008.04 Enterohemorrhagic E. coli</p> <p>008.09 Other intestinal E. coli infections <input type="checkbox"/></p> | <p>AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.1 Arizona group of paracolon bacilli</p> <p>008.2 Aerobacter aerogenes Enterobacter aerogenes</p> <p>008.3 Proteus (mirabilis) (morganii)</p> <p>5th 008.4 Other specified bacteria <input type="checkbox"/></p> <p>008.41 Staphylococcus Staphylococcal enterocolitis</p> <p>008.42 Pseudomonas</p> <p>008.43 Campylobacter AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.44 Yersinia enterocolitica</p> <p>008.45 Clostridium difficile Pseudomembranous colitis</p> <p>008.46 Other anaerobes <input type="checkbox"/> Anaerobic enteritis NOS Bacteroides (fragilis) Gram-negative anaerobes</p> <p>008.47 Other gram-negative bacteria <input type="checkbox"/> Gram-negative enteritis NOS Excludes: <i>gram-negative anaerobes (008.46)</i> AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.49 Other <input type="checkbox"/> AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.5 Bacterial enteritis, unspecified <input type="checkbox"/></p> <p>5th 008.6 Enteritis due to specified virus AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.61 Rotavirus AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.62 Adenovirus</p> <p>008.63 Norwalk virus Norovirus Norwalk-like agent</p> <p>008.64 Other small round viruses [SRV's] <input type="checkbox"/> Small round virus NOS</p> <p>008.65 Calicivirus</p> <p>008.66 Astrovirus</p> <p>008.67 Enterovirus NEC Coxsackie virus Echovirus Excludes: <i>poliovirus (045.0-045.9)</i></p> <p>008.69 Other viral enteritis <input type="checkbox"/> Torovirus AHA: Q4, 2001; Q4, 2002; Q4, 2004; Q4, 2005; Q4, 2006; Q4, 2007; Q4, 2008; Q4, 2009; Q4, 2010</p> <p>008.8 Other organism, not elsewhere classified <input type="checkbox"/> Viral: enteritis NOS gastroenteritis Excludes: <i>influenza with involvement of gastrointestinal tract (487.8, 488.09, 488.19)</i> AHA: Q4, 2010</p> |
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4th 4th digit required
 5th 5th digit required
 N Newborn
 M Maternity
 P Pediatric
 A Adult
 ♀ Female
 ♂ Male
AHA AHA Coding Clinic®
= Unspecified
 Other specified
V V code as primary diagnosis