



2024 coding
guidelines
included

Professional

ICD-10-CM Professional for Hospitals

The complete official code set
Codes valid from October 1, 2023
through September 30, 2024

SAMPLE

2024

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This data file can be accessed at the following:

<https://www.optumcoding.com/ProductUpdates/>
 Title: "2023 ICD-10-CM for Hospital Edits Data File"
 Password: Inpatient23

Note: The following icons are placed at the end of the code description.

Age Edits

N Newborn Age: 0

These diagnoses are intended for newborns and neonates and the patient's age must be 0 years.

N47.0 Adherent prepuce, newborn N

P Pediatric Age: 0-17

These diagnoses are intended for children and the patient's age must be between 0 and 17 years.

L21.1 Seborrheic infantile dermatitis P

M Maternity Age: 9-64

These diagnoses are intended for childbearing patients between the age of 9 and 64 years.

O02.9 Abnormal product of conception, unspecified M

A Adult Age: 15-124

These diagnoses are intended for patients between the age of 15 and 124 years.

R54 Age-related physical debility A
 Frailty
 Old age
 Senescence
 Senile asthenia
 Senile debility
EXCLUDES1 *age-related cognitive decline (R41.81)*
sarcopenia (M62.84)
senile psychosis (F03)
senility NOS (R41.81)

Sex Edits

♂ Male diagnosis only

Q98.0 Klinefelter syndrome karyotype 47, XXY ♂

♀ Female diagnosis only

N35.12 Postinfective urethral stricture, not elsewhere classified, female ♀

H1 - H14 Hospital Acquired Condition (HAC)

These codes identify conditions that are high cost or high volume or both, are either a complication or comorbidity (CC) or major complication or comorbidity (MCC) that as a secondary diagnosis results in assignment of a case to a higher-paying MS-DRG. These conditions are reasonably preventable through the application of evidence-based guidelines. If the condition is not present on admission (meaning it developed during the hospital admission), the case will not group to the higher-paying MS-DRG based solely upon the reporting of the HAC code. Many of these HACs are conditional, and are based on reporting the specific diagnosis code(s) in combination with certain procedure codes.

Note: Hospital-acquired conditions do not impact MS-LTC-DRG assignment.

The comprehensive list of HAC tables that coincide with these icon numbers appears in appendix G of this book.

N15.1 Renal and perinephric abscess MCC H6

CC Condition

This symbol designates a complication or comorbidity diagnosis that may affect DRG assignment. A complication or comorbidity diagnosis, CC condition, is defined as a significant acute disease, an advanced or end-stage chronic disease, or a chronic disease associated with systemic physiological decompensation and debility that have consistently greater impact on hospital resources.

A comprehensive list of ICD-10-CM codes considered a CC appears in appendix E of this book.

G90.59 Complex regional pain syndrome I of other specified site CC

MCC Condition

This symbol designates a major complication or comorbidity diagnosis that may affect DRG assignment. An MCC condition meets the same criteria as a CC condition but is associated with a higher acuity level and hospital resource consumption is expected to be higher than that for a CC condition. There are fewer conditions that meet the criteria as an MCC than those for a CC condition.

A comprehensive list of ICD-10-CM codes considered an MCC appears in appendix D of this book.

S35.238 Other injury of inferior mesenteric artery MCC

Note: The assignment of an MS-DRG or MS-LTC-DRG often depends on the presence or absence of a secondary diagnosis code that is designated as an MCC or CC. However, in some instances the MCC or CC designation for that secondary diagnosis code is negated due to its relationship with the principal diagnosis; this is referred to as CC exclusion. The ICD-10 MS-DRG Definitions Manual included with the IPPS final rule provides a list of all principal diagnosis codes that would render ineffective the MCC/CC designation for a particular ICD-10-CM code when used as a secondary diagnosis. Optum has provided this CC exclusion list in an easily searchable data file, which can be accessed at the following:

<https://www.optumcoding.com/ProductUpdates/>
 Title: "2023 ICD-10-CM for Hospitals CC Excludes Data File"
 Password: Inpatient23

UNS Unspecified Site

Identifies codes that are considered an MCC or CC but lack specificity in regard to their anatomical location. The medical record documentation should be reviewed carefully, to ensure that no other code within the same category or subcategory can be assigned for greater specificity.

G81.00 Flaccid hemiplegia affecting unspecified side CC UNS HCC

UPD Unacceptable Principal Diagnosis

This symbol identifies codes that should not be assigned as principal diagnosis for inpatient admissions. Codes with an unacceptable principal diagnosis edit are considered supplementary — describing circumstances that influence an individual's health status or an additional code — identifying conditions that are not specific manifestations but may be due to an underlying cause.

T48.5X5 Adverse effect of other anti-common-cold drugs UPD

HIV HIV-related Condition

This symbol indicates that the condition is considered a major HIV-related diagnosis. When the condition is coded in combination with a diagnosis of human immunodeficiency virus (HIV), code B20, the case will move from MS-DRG/MS-LTC-DRG 977 to MS-DRGs/MS-LTC-DRGs 974-976.

G96.9 Disorder of central nervous system, unspecified HIV

Appendixes

The additional resources described below have been included as appendixes for the *ICD-10-CM Expert for Hospitals*. These resources further instruct the professional coder on the appropriate application of the ICD-10-CM code set.

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

The user may consult this table to confirm that no further specificity, such as the use of 4th, 5th, 6th, or 7th characters or placeholders (X), is necessary. All ICD-10-CM codes that are valid at the three-character level are listed.

Appendix B: Pharmacology List 2023

This reference is a comprehensive but not all-inclusive list of pharmacological agents used to treat acute and/or chronic conditions. Drugs are listed in alphabetical order by their brand and/or generic names along with their drug action and indications for which they may commonly be prescribed. Some drugs have also been mapped to their appropriate long-term drug use Z code.

Appendix C: Z Codes for Long-Term Drug Use with Associated Drugs

This resource correlates Z codes that are used to identify current long-term drug use with a list of drugs that are typically categorized to that class of drug.

Note: These tables are not all-inclusive but list some of the more commonly used drugs.

Appendix D: Major Complication and Comorbidity (MCC) Code List

This is a full listing of conditions considered to be major complications and/or comorbidities that when present as a secondary diagnosis may affect DRG assignment under the Medicare Severity DRG (MS-DRG) system.

Note: This resource provides the most current MCC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix E: Complication and Comorbidity (CC) Code List

This is a full listing of conditions considered to be complications and/or comorbidities that when present as a secondary diagnosis may affect DRG assignment under the MS-DRG system.

Note: This resource provides the most current CC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix F: Present on Admission (POA) Tutorial

This tutorial walks the coder through the process of assigning the appropriate present-on-admission (POA) indicator for inpatient codes

based on the POA reporting guidelines. Detailed scenarios for a variety of situations are provided and discussed.

Appendix G: Hospital Acquired Conditions

This comprehensive table displays codes that identify conditions that are considered reasonably preventable when occurring during the hospital admission and may prevent the case from grouping to a higher-paying MS-DRG. Many of these HACs are conditional and are based on reporting the specific diagnosis code(s) in combination with certain procedure codes, which are also noted in this table.

Note: This resource provides the most current HAC information that was available at the time of publication using the proposed, version 40, MS-DRG grouper software and Definitions Manual files published with the fiscal 2023 IPPS proposed rule.

Appendix H: Centers for Medicare & Medicaid Services (CMS) Hierarchical Condition Categories (HCC) (CMS-HCC)

This resource provides the framework behind CMS's Medicare Advantage (MA) program, a risk-adjustment model developed as a means of compensating health care plans with large numbers of Medicare Part C beneficiaries. It includes a brief synopsis of the evolution of the program from its inception; insight into the various elements needed to predict risk, including the principles used to develop the hierarchical condition categories (HCCs), one of the fundamental components of the risk adjustment model; and a description of the audit process used to ensure the accuracy of payments made to MA plans.

Appendix I: Long-term Care Hospital Prospective Payment System Overview

The long-term care hospital prospective payment system (LTCH PPS) provides payment rates for LTCH facilities certified by Medicare as LTCH with an average length of stay (LOS) of 25 days or longer. This resource summarizes the certification qualifications for LTCH facilities, payment methodology, and current fiscal year PPS updates.

Appendix J: Long-Term Care Hospital Quality Reporting Program

The LTCH QRP is a mandatory reporting component for LTCH facilities certified by Medicare as LTCH with an average LOS of 25 days or longer. Much of the current QRP for LTCH, like other post-acute care providers, is based upon the requirements of the 2014 IMPACT Act. This resource summarizes the current QRP requirements for facilities certified as LTCH under Medicare, including required data set items and market-basket payment impact.

Illustrations

This section includes illustrations of normal anatomy with ICD-10-CM-specific terminology.

Note: The list below gives the code number for neoplasms by anatomical site. For each site there are six possible code numbers according to whether the neoplasm in question is malignant, benign, in situ, of uncertain behavior, or of unspecified nature. The description of the neoplasm will often indicate which of the six columns is appropriate; e.g., malignant melanoma of skin, benign fibroadenoma of breast, carcinoma in situ of cervix uteri. Where such descriptors are not present, the remainder of the Index should be consulted where guidance is given to the appropriate column for each morphological (histological) variety listed; e.g., Mesonephroma — see Neoplasm, malignant; Embryoma — see also Neoplasm, uncertain behavior; Disease, Bowen's — see Neoplasm, skin, in situ. However, the guidance in the Index can be overridden if one of the descriptors mentioned above is present; e.g., malignant adenoma of colon is coded to C18.9 and not to D12.6 as the adjective "malignant" overrides the Index entry "Adenoma — see also Neoplasm, benign, by site." Codes listed with a dash -, following the code have a required additional character for laterality. The tabular list must be reviewed for the complete code.

	Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified Behavior
Neoplasm, neoplastic						
abdomen,	C80.1	C79.9	D09.9	D36.9	D48.9	D49.9
abdominal cavity	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
organ	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
viscera	C76.2	C79.8-✓	D09.8	D36.7	D48.7	D49.89
wall — see also Neoplasm, abdomen, wall, skin	C44.509	C79.2	D04.5	D23.5	D48.5	D49.2
connective tissue	C49.4	C79.8-✓	—	D21.4	D48.1	D49.2
skin	C44.509	—	—	—	—	—
basal cell carcinoma specified type NEC	C44.519	—	—	—	—	—
squamous cell carcinoma	C44.529	—	—	—	—	—
abdominopelvic accessory sinus — see Neoplasm, sinus	C76.8	C79.8-✓	—	D36.7	D48.7	D49.89
acoustic nerve adenoid (pharynx) (tissue)	C72.4-✓	C79.49	—	D33.3	D43.3	D49.7
adipose tissue — see also Neoplasm, connective tissue	C11.1	C79.89	D00.08	D10.6	D37.05	D49.0
adnexa (uterine)	C49.4	C79.89	—	D21.9	D48.1	D49.2
adrenal	C57.4	C79.89	D07.39	D28.7	D39.8	D49.59
capsule	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
cortex	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
gland	C74.9-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
medulla	C74.1-✓	C79.7-✓	D09.3	D35.0-✓	D44.1-✓	D49.7
ala nasi (external) — see also Neoplasm, skin, nose	C44.301	C79.2	D04.39	D23.39	D48.5	D49.2
alimentary canal or tract NEC	C26.9	C78.80	D01.9	D13.9	D37.9	D49.0
alveolar mucosa	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
ridge or process	C41.1	C79.51	—	D16.5	D48.0	D49.2
carcinoma	C03.9	C79.8-✓	—	—	—	—
lower	C03.1	C79.8-✓	—	—	—	—
upper	C03.0	C79.8-✓	—	—	—	—
lower	C41.1	C79.51	—	D16.5	D48.0	D49.2
mucosa	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.1	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C41.0	C79.51	—	D16.4	D48.0	D49.2
sulcus	C06.1	C79.89	D00.02	D10.39	D37.09	D49.0
alveolus	C03.9	C79.89	D00.03	D10.39	D37.09	D49.0
lower	C03.1	C79.89	D00.03	D10.39	D37.09	D49.0
upper	C03.0	C79.89	D00.03	D10.39	D37.09	D49.0
ampulla of Vater	C24.1	C78.89	D01.5	D13.5	D37.6	D49.0
ankle NEC	C76.5-✓	C79.89	D04.7-✓	D36.7	D48.7	D49.89
anorectum, anorectal (junction)	C21.8	C78.5	D01.3	D12.9	D37.8	D49.0
antecubital fossa or space	C76.4-✓	C79.89	D04.6-✓	D36.7	D48.7	D49.89
Neoplasm, neoplastic						
— continued						
antrum (Highmore) (maxillary)	C31.0	C78.39	D02.3	D14.0	D38.5	D49.1
pyloric	C16.3	C78.89	D00.2	D13.1	D37.1	D49.0
typanicum	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
anus, anal	C21.0	C78.5	D01.3	D12.9	D37.8	D49.0
canal	C21.1	C78.5	D01.3	D12.9	D37.8	D49.0
cloacogenic zone	C21.2	C78.5	D01.3	D12.9	D37.8	D49.0
margin — see also Neoplasm, anus, skin	C44.500	C79.2	D04.5	D23.5	D48.5	D49.2
overlapping lesion with rectosigmoid junction or rectum	C21.8	—	—	—	—	—
skin	C44.500	C79.2	D04.5	D23.5	D48.5	D49.2
basal cell carcinoma specified type NEC	C44.510	—	—	—	—	—
squamous cell carcinoma	C44.520	—	—	—	—	—
sphincter	C21.1	C78.5	D01.3	D12.9	D37.8	D49.0
aorta (thoracic)	C49.3	C79.89	—	D21.3	D48.1	D49.2
abdominal	C49.4	C79.89	—	D21.4	D48.1	D49.2
aortic body	C75.5	C79.89	—	D35.6	D44.7	D49.7
aponeurosis	C49.9	C79.89	—	D21.9	D48.1	D49.2
palmar	C49.1-✓	C79.89	—	D21.1-✓	D48.1	D49.2
plantar	C49.2-✓	C79.89	—	D21.2-✓	D48.1	D49.2
appendix	C18.1	C78.5	D01.0	D12.1	D37.3	D49.0
arachnoid	C70.9	C79.49	—	D32.9	D42.9	D49.7
cerebral	C70.0	C79.32	—	D32.0	D42.0	D49.7
spinal	C70.1	C79.49	—	D32.1	D42.1	D49.7
areola	C50.0-✓	C79.81	D05-✓	D24-✓	D48.6-✓	D49.3
arm NEC	C76.4-✓	C79.89	D04.6-✓	D36.7	D48.7	D49.89
artery — see Neoplasm, connective tissue						
aryepiglottic fold	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
hypopharyngeal aspect	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
laryngeal aspect	C32.1	C78.39	D02.0	D14.1	D38.0	D49.1
marginal zone	C13.1	C79.89	D00.08	D10.7	D37.05	D49.0
arytenoid (cartilage)	C32.3	C78.39	D02.0	D14.1	D38.0	D49.1
fold — see Neoplasm, aryepiglottic						
associated with transplanted organ	C80.2	—	—	—	—	—
atlas	C41.2	C79.51	—	D16.6	D48.0	D49.2
atrium, cardiac	C38.0	C79.89	—	D15.1	D48.7	D49.89
auditory canal (external) (skin)	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
internal	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
nerve	C72.4-✓	C79.49	—	D33.3	D43.3	D49.7
tube	C30.1	C78.39	D02.3	D14.0	D38.5	D49.1
opening	C11.2	C79.89	D00.08	D10.6	D37.05	D49.0
auricle, ear — see also Neoplasm, skin, ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
auricular canal (external) — see also Neoplasm, skin, ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
internal	C30.1	C78.39	D02.3	D14.0	D38.5	D49.2
autonomic nerve or nervous system NEC (see Neoplasm, nerve, peripheral)	C76.1	C79.89	D09.8	D36.7	D48.7	D49.89
axilla, axillary fold — see also Neoplasm, skin, trunk	C44.509	C79.2	D04.5	D23.5	D48.5	D49.2
back NEC	C76.8	C79.89	D04.5	D36.7	D48.7	D49.89
Bartholin's gland	C51.0	C79.82	D07.1	D28.0	D39.8	D49.59
basal ganglia	C71.0	C79.31	—	D33.0	D43.0	D49.6
basis pedunculi	C71.7	C79.31	—	D33.1	D43.1	D49.6
bile or biliary (tract)	C24.9	C78.89	D01.5	D13.5	D37.6	D49.0

- C7A.1 Malignant poorly differentiated neuroendocrine tumors** CC HCC
 Malignant poorly differentiated neuroendocrine tumor NOS
 Malignant poorly differentiated neuroendocrine carcinoma, any site
 High grade neuroendocrine carcinoma, any site
- C7A.8 Other malignant neuroendocrine tumors** CC HCC
 AHA: 2019,3Q,7

Secondary neuroendocrine tumors (C7B)

- √4th **C7B Secondary neuroendocrine tumors**
 Use additional code to identify any functional activity
- √5th **C7B.0 Secondary carcinoid tumors**
 AHA: 2019,3Q,7
 DEF: Specific type of slow-growing neuroendocrine tumors. Carcinoid tumors occur most commonly in the hormone producing cells of the gastrointestinal tracts and can also occur in the pancreas, testes, ovaries, or lungs.
- C7B.00 Secondary carcinoid tumors, unspecified site** HCC
- C7B.01 Secondary carcinoid tumors of distant lymph nodes** CC HCC
- C7B.02 Secondary carcinoid tumors of liver** CC HCC
- C7B.03 Secondary carcinoid tumors of bone** CC HCC
- C7B.04 Secondary carcinoid tumors of peritoneum** CC HCC
 Mesentery metastasis of carcinoid tumor
- C7B.09 Secondary carcinoid tumors of other sites** CC HCC
- C7B.1 Secondary Merkel cell carcinoma** HCC
 Merkel cell carcinoma nodal presentation
 Merkel cell carcinoma visceral metastatic presentation
- C7B.8 Other secondary neuroendocrine tumors** CC HCC
 AHA: 2019,3Q,7

Malignant neoplasms of ill-defined, other secondary and unspecified sites (C76-C80)

- √4th **C76 Malignant neoplasm of other and ill-defined sites**
 EXCLUDES 1 malignant neoplasm of female genitourinary tract NOS (C57.9)
 malignant neoplasm of male genitourinary tract NOS (C63.9)
 malignant neoplasm of lymphoid, hematopoietic and related tissue (C81-C96)
 malignant neoplasm of skin (C44.-)
 malignant neoplasm of unspecified site NOS (C80.1)
- C76.0 Malignant neoplasm of head, face and neck** HCC
 Malignant neoplasm of cheek NOS
 Malignant neoplasm of nose NOS
- C76.1 Malignant neoplasm of thorax** HCC
 Intrathoracic malignant neoplasm NOS
 Malignant neoplasm of axilla NOS
 Thoracic malignant neoplasm NOS
- C76.2 Malignant neoplasm of abdomen** HCC
- C76.3 Malignant neoplasm of pelvis** HCC
 Malignant neoplasm of groin NOS
 Malignant neoplasm of sites overlapping systems within the pelvis
 Rectovaginal (septum) malignant neoplasm
 Rectovesical (septum) malignant neoplasm
- √5th **C76.4 Malignant neoplasm of upper limb**
C76.40 Malignant neoplasm of unspecified upper limb HCC
- C76.41 Malignant neoplasm of right upper limb** HCC
- C76.42 Malignant neoplasm of left upper limb** HCC
- √5th **C76.5 Malignant neoplasm of lower limb**
C76.50 Malignant neoplasm of unspecified lower limb HCC
- C76.51 Malignant neoplasm of right lower limb** HCC
- C76.52 Malignant neoplasm of left lower limb** HCC
- C76.8 Malignant neoplasm of other specified ill-defined sites** HCC
 Malignant neoplasm of overlapping ill-defined sites

- √4th **C77 Secondary and unspecified malignant neoplasm of lymph nodes**
 EXCLUDES 1 malignant neoplasm of lymph nodes, specified as primary (C81-C86, C88, C96.-)
 mesentery metastasis of carcinoid tumor (C7B.04)
 secondary carcinoid tumors of distant lymph nodes (C7B.01)
- C77.0 Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck** CC HCC
 Secondary and unspecified malignant neoplasm of supraclavicular lymph nodes
- C77.1 Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes** CC HCC
- C77.2 Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes** CC HCC
- C77.3 Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes** CC HCC
 Secondary and unspecified malignant neoplasm of pectoral lymph nodes
- C77.4 Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes** CC HCC
- C77.5 Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes** CC HCC
- C77.8 Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions** CC HCC
- C77.9 Secondary and unspecified malignant neoplasm of lymph node, unspecified** CC HCC
- √4th **C78 Secondary malignant neoplasm of respiratory and digestive organs**
 EXCLUDES 1 secondary carcinoid tumors of liver (C7B.02)
 secondary carcinoid tumors of peritoneum (C7B.04)
 EXCLUDES 2 lymph node metastases (C77.0)
- √6th **C78.0 Secondary malignant neoplasm of lung**
 AHA: 2019,10,16
- C78.00 Secondary malignant neoplasm of unspecified lung** CC HCC
- C78.01 Secondary malignant neoplasm of right lung** CC HCC
- C78.02 Secondary malignant neoplasm of left lung** CC HCC
- C78.1 Secondary malignant neoplasm of mediastinum** CC HCC
- C78.2 Secondary malignant neoplasm of pleura** CC HCC
- √5th **C78.3 Secondary malignant neoplasm of other and unspecified respiratory organs**
C78.30 Secondary malignant neoplasm of unspecified respiratory organ CC HCC
- C78.39 Secondary malignant neoplasm of other respiratory organs** CC HCC
- C78.4 Secondary malignant neoplasm of small intestine** CC HCC
- C78.5 Secondary malignant neoplasm of large intestine and rectum** CC HCC
- C78.6 Secondary malignant neoplasm of retroperitoneum and peritoneum** CC HCC
 AHA: 2017,2Q,12
- C78.7 Secondary malignant neoplasm of liver and intrahepatic bile duct** CC HCC
- √5th **C78.8 Secondary malignant neoplasm of other and unspecified digestive organs**
C78.80 Secondary malignant neoplasm of unspecified digestive organ CC HCC
- C78.89 Secondary malignant neoplasm of other digestive organs** CC HCC
 Code also exocrine pancreatic insufficiency (K86.81)
- √4th **C79 Secondary malignant neoplasm of other and unspecified sites**
 EXCLUDES 1 secondary carcinoid tumors (C7B.-)
 secondary neuroendocrine tumors (C7B.-)
- √5th **C79.0 Secondary malignant neoplasm of kidney and renal pelvis**
C79.00 Secondary malignant neoplasm of unspecified kidney and renal pelvis CC HCC
- C79.01 Secondary malignant neoplasm of right kidney and renal pelvis** CC HCC
- C79.02 Secondary malignant neoplasm of left kidney and renal pelvis** CC HCC
- √5th **C79.1 Secondary malignant neoplasm of bladder and other and unspecified urinary organs**
C79.10 Secondary malignant neoplasm of unspecified urinary organs CC HCC

Chapter 4. Endocrine, Nutritional and Metabolic Diseases (E00–E89)

Chapter-specific Guidelines with Coding Examples

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

a. Diabetes mellitus

The diabetes mellitus codes are combination codes that include the type of diabetes mellitus, the body system affected, and the complications affecting that body system. As many codes within a particular category as are necessary to describe all of the complications of the disease may be used. They should be sequenced based on the reason for a particular encounter. Assign as many codes from categories E08–E13 as needed to identify all of the associated conditions that the patient has.

Patient is seen for poorly controlled diabetes, type 2, with diabetic polyneuropathy and diabetic retinopathy with macular edema

E11.65 Type 2 diabetes mellitus with hyperglycemia

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

E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy

Explanation: Use as many codes to describe the diabetic complications as needed. Many are combination codes that describe more than one condition. Code first the reason for the encounter. “Poorly controlled” is described as “with hyperglycemia.” Diabetes documented as “uncontrolled” is not assumed to be hyperglycemic but can be classified to either hyperglycemia or hypoglycemia. If documentation is not clear, the provider must be queried so that the appropriate code can be reported.

1) Type of diabetes

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

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

E10.9 Type 1 diabetes mellitus without complications

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

2) Type of diabetes mellitus not documented

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

H & P lists diabetes and hypertension on patient problem list

E11.9 Type 2 diabetes mellitus without complications

I10 Essential (primary) hypertension

Explanation: Since the type of diabetes was not documented and no complications were noted, the default code is E11.9.

3) Diabetes mellitus and the use of insulin, oral hypoglycemics, and injectable non-insulin drugs

If the documentation in a medical record does not indicate the type of diabetes but does indicate that the patient uses insulin, code E11.-, Type 2 diabetes mellitus, should be assigned. Additional code(s) should be assigned from category Z79 to identify the long-term (current) use of insulin, oral hypoglycemic drugs, or injectable non-insulin antidiabetic, as follows:

If the patient is treated with both oral **hypoglycemic drugs** and insulin, both code Z79.4, Long term (current) use of insulin, and code Z79.84, Long term (current) use of oral hypoglycemic drugs, should be assigned.

If the patient is treated with both insulin and an injectable non-insulin antidiabetic drug, assign codes Z79.4, Long term (current) use of insulin, and **Z79.85, Long-term (current) use of injectable non-insulin antidiabetic drugs.**

If the patient is treated with both oral hypoglycemic drugs and an injectable non-insulin antidiabetic drug, assign codes Z79.84, Long term (current) use of oral hypoglycemic drugs, and **Z79.85, Long-term (current) use of injectable non-insulin antidiabetic drugs.**

Code Z79.4 should not be assigned if insulin is given temporarily to bring a type 2 patient's blood sugar under control during an encounter.

Type 2 diabetic patient on daily metformin and Victoza is admitted in ketoacidosis, insulin given to stabilize blood sugars and discontinued at discharge

E11.10 Type 2 diabetes mellitus with ketoacidosis without coma

Z79.84 Long term (current) use of oral hypoglycemic drugs

Z79.85 Long term (current) use of injectable non-insulin anti-diabetic drugs

Explanation: Documentation indicates the patient is on an oral antidiabetic medication (metformin) and an injectable noninsulin antidiabetic medication (Victoza). Although insulin was given to the patient during the encounter, it was discontinued at discharge, indicating that the patient does not regularly use insulin. A Z code representing long-term use of the oral drug and long-term use of the injectable medication can be applied. Applying code Z79.4 to represent long-term use of insulin would be inappropriate.

4) Diabetes mellitus in pregnancy and gestational diabetes

See Section I.C.15. Diabetes mellitus in pregnancy.

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

5) Complications due to insulin pump malfunction

(a) Underdose of insulin due to insulin pump failure

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

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

T85.614A Breakdown (mechanical) of insulin pump, initial encounter

T38.3X6A Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, initial encounter

E10.65 Type 1 diabetes mellitus with hyperglycemia

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

(b) Overdose of insulin due to insulin pump failure

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

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

T85.614A Breakdown (mechanical) of insulin pump, initial encounter

T38.3X1A Poisoning by insulin and oral hypoglycemic [antidiabetic] drugs, accidental (unintentional), initial encounter

E10.641 Type 1 diabetes mellitus with hypoglycemia with coma

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

Chapter 9. Diseases of the Circulatory System (I00-I99)

EXCLUDES 2 certain conditions originating in the perinatal period (P04-P96)
 certain infectious and parasitic diseases (A00-B99)
 complications of pregnancy, childbirth and the puerperium (O00-O9A)
 congenital malformations, deformations, and chromosomal abnormalities (Q00-Q99)
 endocrine, nutritional and metabolic diseases (E00-E88)
 injury, poisoning and certain other consequences of external causes (S00-T88)
 neoplasms (C00-D49)
 symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R94)
 systemic connective tissue disorders (M30-M36)
 transient cerebral ischemic attacks and related syndromes (G45.-)

This chapter contains the following blocks:

I00-I02	Acute rheumatic fever
I05-I09	Chronic rheumatic heart diseases
I10-I16	Hypertensive diseases
I20-I25	Ischemic heart diseases
I26-I28	Pulmonary heart disease and diseases of pulmonary circulation
I30-I5A	Other forms of heart disease
I60-I69	Cerebrovascular diseases
I70-I79	Diseases of arteries, arterioles and capillaries
I80-I89	Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified
I95-I99	Other and unspecified disorders of the circulatory system

Acute rheumatic fever (I00-I02)

DEF: Rheumatic fever: Inflammatory disease that can follow a throat infection by group A streptococci. Complications can involve the joints (arthritis), subcutaneous tissue (nodules), skin (erythema marginatum), heart (carditis), or brain (chorea).

I00 Rheumatic fever without heart involvement

INCLUDES arthritis, rheumatic, acute or subacute

EXCLUDES 1 rheumatic fever with heart involvement (I01.0-I01.9)

√4th I01 Rheumatic fever with heart involvement

EXCLUDES 1 chronic diseases of rheumatic origin (I05-I09) unless rheumatic fever is also present or there is evidence of reactivation or activity of the rheumatic process

I01.0 Acute rheumatic pericarditis

Any condition in I00 with pericarditis

Rheumatic pericarditis (acute)

EXCLUDES 1 acute pericarditis not specified as rheumatic (I30.-)

I01.1 Acute rheumatic endocarditis

Any condition in I00 with endocarditis or valvulitis

Acute rheumatic valvulitis

I01.2 Acute rheumatic myocarditis

Any condition in I00 with myocarditis

I01.8 Other acute rheumatic heart disease

Any condition in I00 with other or multiple types of heart involvement

Acute rheumatic pancarditis

I01.9 Acute rheumatic heart disease, unspecified

Any condition in I00 with unspecified type of heart involvement

Rheumatic carditis, acute

Rheumatic heart disease, active or acute

√4th I02 Rheumatic chorea

INCLUDES Sydenham's chorea

chorea NOS (G25.5)

EXCLUDES 1 Huntington's chorea (G10)

I02.0 Rheumatic chorea with heart involvement

Chorea NOS with heart involvement

Rheumatic chorea with heart involvement of any type classifiable under I01.-

I02.9 Rheumatic chorea without heart involvement

Rheumatic chorea NOS

Chronic rheumatic heart diseases (I05-I09)**√4th I05 Rheumatic mitral valve diseases**

INCLUDES conditions classifiable to both I05.0 and I05.2-I05.9, whether specified as rheumatic or not

EXCLUDES 1 mitral valve disease specified as nonrheumatic (I34.-)
 mitral valve disease with aortic and/or tricuspid valve involvement (I08.-)

I05.0 Rheumatic mitral stenosis

Mitral (valve) obstruction (rheumatic)

I05.1 Rheumatic mitral insufficiency

Rheumatic mitral incompetence

Rheumatic mitral regurgitation

EXCLUDES 1 mitral insufficiency not specified as rheumatic (I34.0)

I05.2 Rheumatic mitral stenosis with insufficiency

Rheumatic mitral stenosis with incompetence or regurgitation

I05.8 Other rheumatic mitral valve diseases

Rheumatic mitral (valve) failure

I05.9 Rheumatic mitral valve disease, unspecified

Rheumatic mitral (valve) disorder (chronic) NOS

√4th I06 Rheumatic aortic valve diseases

EXCLUDES 1 aortic valve disease not specified as rheumatic (I35.-)

aortic valve disease with mitral and/or tricuspid valve involvement (I08.-)

I06.0 Rheumatic aortic stenosis

Rheumatic aortic (valve) obstruction

I06.1 Rheumatic aortic insufficiency

Rheumatic aortic incompetence

Rheumatic aortic regurgitation

I06.2 Rheumatic aortic stenosis with insufficiency

Rheumatic aortic stenosis with incompetence or regurgitation

I06.8 Other rheumatic aortic valve diseases**I06.9 Rheumatic aortic valve disease, unspecified**

Rheumatic aortic (valve) disease NOS

√4th I07 Rheumatic tricuspid valve diseases

INCLUDES rheumatic tricuspid valve diseases specified as rheumatic or unspecified

EXCLUDES 1 tricuspid valve disease specified as nonrheumatic (I36.-)

tricuspid valve disease with aortic and/or mitral valve involvement (I08.-)

I07.0 Rheumatic tricuspid stenosis

Tricuspid (valve) stenosis (rheumatic)

I07.1 Rheumatic tricuspid insufficiency

Tricuspid (valve) insufficiency (rheumatic)

I07.2 Rheumatic tricuspid stenosis and insufficiency**I07.8 Other rheumatic tricuspid valve diseases****I07.9 Rheumatic tricuspid valve disease, unspecified**

Rheumatic tricuspid valve disorder NOS

√4th I08 Multiple valve diseases

INCLUDES multiple valve diseases specified as rheumatic or unspecified

EXCLUDES 1 endocarditis, valve unspecified (I38)

multiple valve disease specified as nonrheumatic (I34.-, I35.-, I36.-, I37.-, I38.-, Q22.-, Q23.-, Q24.8-)
 rheumatic valve disease NOS (I09.1)

I08.0 Rheumatic disorders of both mitral and aortic valves

Involvement of both mitral and aortic valves specified as rheumatic or unspecified

AHA: 2019,2Q,5

I08.1 Rheumatic disorders of both mitral and tricuspid valves**I08.2 Rheumatic disorders of both aortic and tricuspid valves****I08.3 Combined rheumatic disorders of mitral, aortic and tricuspid valves****I08.8 Other rheumatic multiple valve diseases****I08.9 Rheumatic multiple valve disease, unspecified****√4th I09 Other rheumatic heart diseases****I09.0 Rheumatic myocarditis**

EXCLUDES 1 myocarditis not specified as rheumatic (I51.4)

I09.1 Rheumatic diseases of endocardium, valve unspecified

Rheumatic endocarditis (chronic)

Rheumatic valvulitis (chronic)

EXCLUDES 1 endocarditis, valve unspecified (I38)

I09.2 Chronic rheumatic pericarditis

Adherent pericardium, rheumatic

Chronic rheumatic mediastinopericarditis

Chronic rheumatic myopericarditis

EXCLUDES 1 chronic pericarditis not specified as rheumatic (I31.-)

√5th I09.8 Other specified rheumatic heart diseases**I09.81 Rheumatic heart failure**

Use additional code to identify type of heart failure (I50.-)

I09.89 Other specified rheumatic heart diseases

Rheumatic disease of pulmonary valve

- ✓4# J10 Influenza due to other identified influenza virus**

 - [INCLUDES]** influenza A (non-novel)
 - influenza B
 - influenza C
 - [EXCLUDES 1]** influenza due to avian influenza virus (J09.X-)
 - influenza due to swine flu (J09.X-)
 - influenza due to unidentified influenza virus (J11.-)
- ✓5# J10.0 Influenza due to other identified influenza virus with pneumonia**

 - Code also associated lung abscess, if applicable (J85.1)
 - J10.00 Influenza due to other identified influenza virus with unspecified type of pneumonia** **MCC**
 - J10.01 Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia** **MCC**
 - J10.08 Influenza due to other identified influenza virus with other specified pneumonia** **HIV MCC**
 - Code also other specified type of pneumonia
- J10.1 Influenza due to other identified influenza virus with other respiratory manifestations**

 - Influenza due to other identified influenza virus NOS
 - Influenza due to other identified influenza virus with laryngitis
 - Influenza due to other identified influenza virus with pharyngitis
 - Influenza due to other identified influenza virus with upper respiratory symptoms
 - Use additional code for associated pleural effusion, if applicable (J91.8)
 - Use additional code for associated sinusitis, if applicable (J01.-)
 - AHA: 2016,3Q,10-11
- J10.2 Influenza due to other identified influenza virus with gastrointestinal manifestations**

 - Influenza due to other identified influenza virus gastroenteritis
 - [EXCLUDES 1]** "intestinal flu" [viral gastroenteritis] (A08.-)
- ✓5# J10.8 Influenza due to other identified influenza virus with other manifestations**

 - J10.81 Influenza due to other identified influenza virus with encephalopathy**
 - J10.82 Influenza due to other identified influenza virus with myocarditis**
 - J10.83 Influenza due to other identified influenza virus with otitis media**
 - Use additional code for any associated perforated tympanic membrane (H72.-)
 - J10.89 Influenza due to other identified influenza virus with other manifestations**
 - Use additional codes to identify the manifestations
- ✓4# J11 Influenza due to unidentified influenza virus**

 - ✓5# J11.0 Influenza due to unidentified influenza virus with pneumonia**
 - Code also associated lung abscess, if applicable (J85.1)
 - AHA: 2016,3Q,11
 - J11.00 Influenza due to unidentified influenza virus with unspecified type of pneumonia** **MCC**
 - Influenza with pneumonia NOS
 - J11.08 Influenza due to unidentified influenza virus with specified pneumonia** **MCC**
 - Code also other specified type of pneumonia
- J11.1 Influenza due to unidentified influenza virus with other respiratory manifestations**

 - Influenza NOS
 - Influenzal laryngitis NOS
 - Influenzal pharyngitis NOS
 - Influenza with upper respiratory symptoms NOS
 - Use additional code for associated pleural effusion, if applicable (J91.8)
 - Use additional code for associated sinusitis, if applicable (J01.-)
- J11.2 Influenza due to unidentified influenza virus with gastrointestinal manifestations**

 - Influenza gastroenteritis NOS
 - [EXCLUDES 1]** "intestinal flu" [viral gastroenteritis] (A08.-)
- ✓5# J11.8 Influenza due to unidentified influenza virus with other manifestations**

 - J11.81 Influenza due to unidentified influenza virus with encephalopathy**
 - Influenzal encephalopathy NOS
 - J11.82 Influenza due to unidentified influenza virus with myocarditis**
 - Influenzal myocarditis NOS

- J11.83 Influenza due to unidentified influenza virus with otitis media**

 - Influenzal otitis media NOS
 - Use additional code for any associated perforated tympanic membrane (H72.-)
- J11.89 Influenza due to unidentified influenza virus with other manifestations**

 - Use additional codes to identify the manifestations
- ✓4# J12 Viral pneumonia, not elsewhere classified**

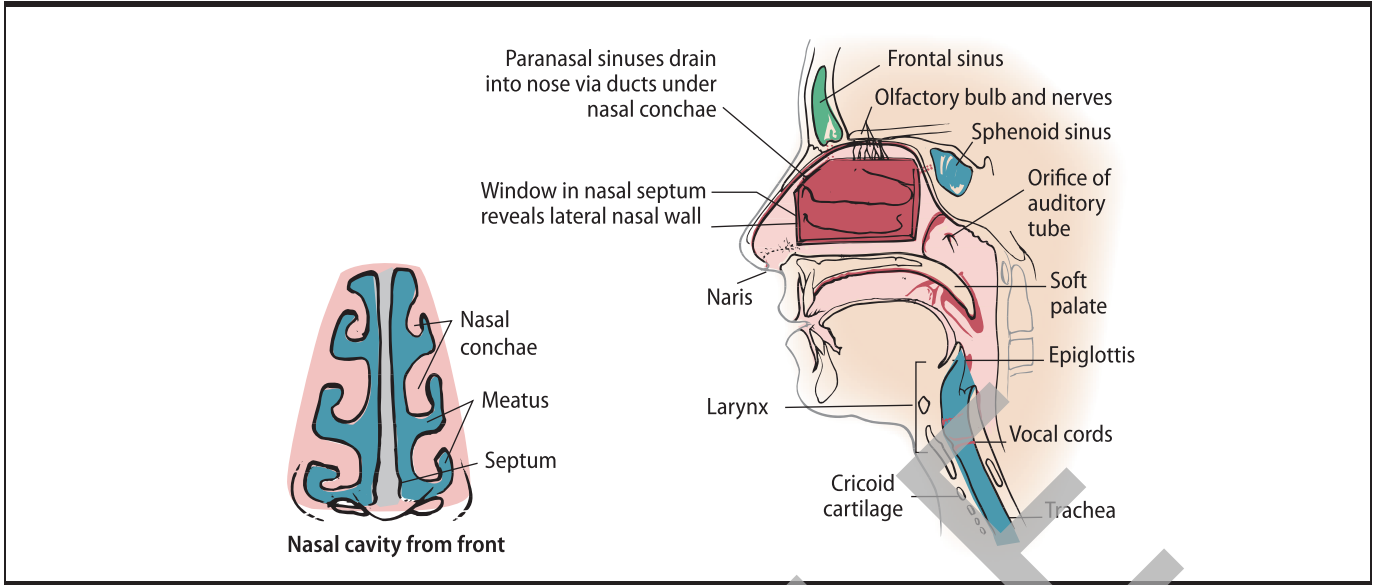
 - [INCLUDES]** bronchopneumonia due to viruses other than influenza viruses
 - Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
 - Code also associated abscess, if applicable (J85.1)
 - [EXCLUDES 1]** aspiration pneumonia due to anesthesia during labor and delivery (O74.0)
 - aspiration pneumonia due to anesthesia during pregnancy (O29)
 - aspiration pneumonia due to anesthesia during puerperium (O89.0)
 - aspiration pneumonia due to solids and liquids (J69.-)
 - aspiration pneumonia NOS (J69.0)
 - congenital pneumonia (P23.0)
 - congenital rubella pneumonitis (P35.0)
 - interstitial pneumonia NOS (J84.9)
 - lipid pneumonia (J69.1)
 - neonatal aspiration pneumonia (P24.-)
 - AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118
 - J12.0 Adenoviral pneumonia** **MCC**
 - J12.1 Respiratory syncytial virus pneumonia** **MCC**
 - RSV pneumonia
 - J12.2 Parainfluenza virus pneumonia** **MCC**
 - J12.3 Human metapneumovirus pneumonia** **HIV MCC**
 - ✓5# J12.8 Other viral pneumonia**
 - J12.81 Pneumonia due to SARS-associated coronavirus** **HIV MCC**
 - Severe acute respiratory syndrome NOS
 - DEF:** Inflammation of the lungs with consolidation, caused by the severe adult respiratory syndrome (SARS)-associated coronavirus or SARS-CoV. This pneumonia should not be confused with that caused by SARS-CoV-2 (COVID-19).
 - J12.82 Pneumonia due to coronavirus disease 2019** **HIV MCC UPD**
 - Pneumonia due to 2019 novel coronavirus (SARS-CoV-2)
 - Pneumonia due to COVID-19
 - Code first COVID-19 (U07.1)
 - AHA: 2021,1Q,25-30,31-49
 - J12.89 Other viral pneumonia** **HIV MCC**
 - AHA: 2021,1Q,33-34; 2020,2Q,8,11; 2020,1Q,34-36
 - J12.9 Viral pneumonia, unspecified** **HIV MCC**
- J13 Pneumonia due to Streptococcus pneumoniae** **HIV MCC HCC**

 - Bronchopneumonia due to S. pneumoniae
 - Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
 - Code also associated abscess, if applicable (J85.1)
 - [EXCLUDES 1]** congenital pneumonia due to S. pneumoniae (P23.6)
 - lobar pneumonia, unspecified organism (J18.1)
 - pneumonia due to other streptococci (J15.3-J15.4)
 - AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118
- J14 Pneumonia due to Hemophilus influenzae** **HIV MCC HCC**

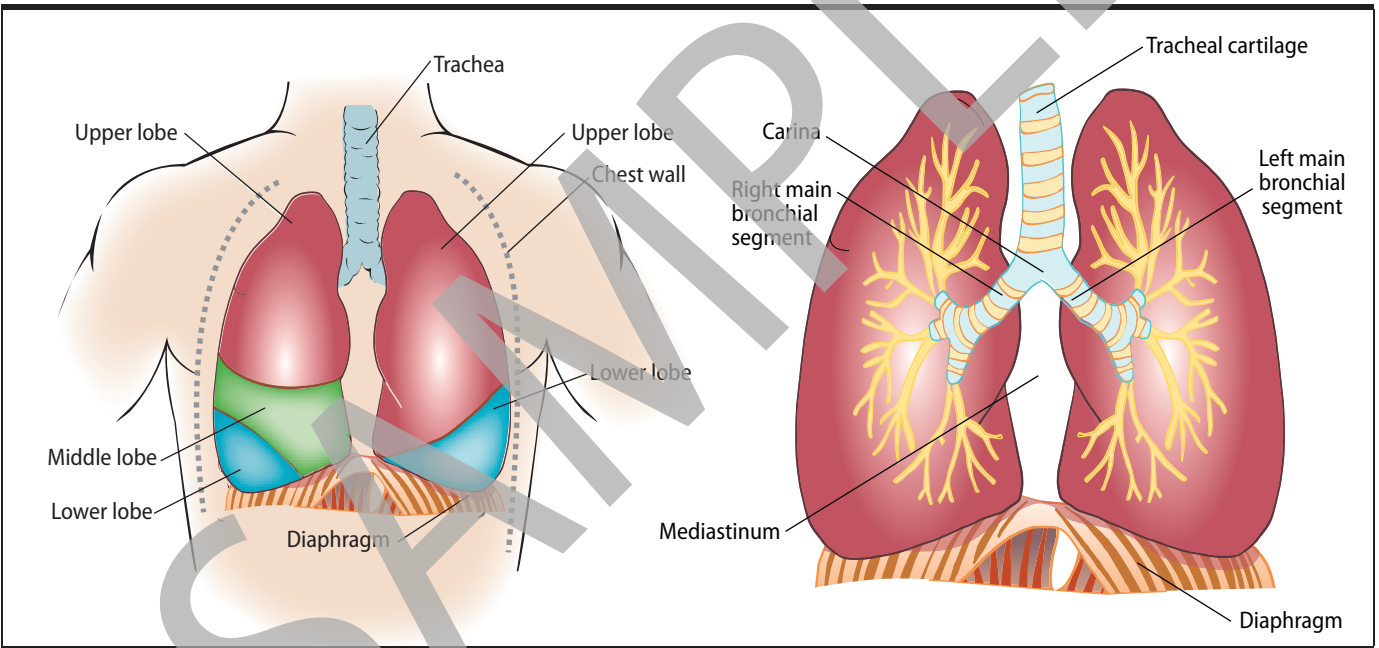
 - Bronchopneumonia due to H. influenzae
 - Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
 - Code also associated abscess, if applicable (J85.1)
 - [EXCLUDES 1]** congenital pneumonia due to H. influenzae (P23.6)
 - AHA: 2020,2Q,28; 2019,1Q,35; 2018,3Q,24; 2016,3Q,15; 2013,4Q,118

026.21	Pregnancy care for patient with recurrent pregnancy loss, first trimester	M ♀	✓ ^{6th} 026.82	Pregnancy related peripheral neuritis	
026.22	Pregnancy care for patient with recurrent pregnancy loss, second trimester	M ♀	026.821	Pregnancy related peripheral neuritis, first trimester	M ♀
026.23	Pregnancy care for patient with recurrent pregnancy loss, third trimester	M ♀	026.822	Pregnancy related peripheral neuritis, second trimester	M ♀
✓ ^{5th} 026.3	Retained intrauterine contraceptive device in pregnancy		026.823	Pregnancy related peripheral neuritis, third trimester	M ♀
026.30	Retained intrauterine contraceptive device in pregnancy, unspecified trimester	M ♀	026.829	Pregnancy related peripheral neuritis, unspecified trimester	M ♀
026.31	Retained intrauterine contraceptive device in pregnancy, first trimester	M ♀	✓ ^{6th} 026.83	Pregnancy related renal disease	
026.32	Retained intrauterine contraceptive device in pregnancy, second trimester	M ♀		Use additional code to identify the specific disorder	
026.33	Retained intrauterine contraceptive device in pregnancy, third trimester	M ♀	026.831	Pregnancy related renal disease, first trimester	CC M ♀
✓ ^{5th} 026.4	Herpes gestationis		026.832	Pregnancy related renal disease, second trimester	CC M ♀
	DEF: Rare skin disorder of unknown origin that appears on the abdomen in the second and third trimester as intensely itchy blisters that spread to other sites.		026.833	Pregnancy related renal disease, third trimester	CC M ♀
026.40	Herpes gestationis, unspecified trimester	M ♀	026.839	Pregnancy related renal disease, unspecified trimester	M ♀
026.41	Herpes gestationis, first trimester	M ♀	✓ ^{6th} 026.84	Uterine size-date discrepancy complicating pregnancy	
026.42	Herpes gestationis, second trimester	M ♀		EXCLUDES1 encounter for suspected problem with fetal growth ruled out (Z03.74)	
026.43	Herpes gestationis, third trimester	M ♀	026.841	Uterine size-date discrepancy, first trimester	M ♀
✓ ^{5th} 026.5	Maternal hypotension syndrome		026.842	Uterine size-date discrepancy, second trimester	M ♀
	Supine hypotensive syndrome		026.843	Uterine size-date discrepancy, third trimester	M ♀
026.50	Maternal hypotension syndrome, unspecified trimester	M ♀	026.849	Uterine size-date discrepancy, unspecified trimester	M ♀
026.51	Maternal hypotension syndrome, first trimester	M ♀	✓ ^{6th} 026.85	Spotting complicating pregnancy	
026.52	Maternal hypotension syndrome, second trimester	M ♀	026.851	Spotting complicating pregnancy, first trimester	M ♀
026.53	Maternal hypotension syndrome, third trimester	M ♀	026.852	Spotting complicating pregnancy, second trimester	M ♀
✓ ^{5th} 026.6	Liver and biliary tract disorders in pregnancy, childbirth and the puerperium		026.853	Spotting complicating pregnancy, third trimester	M ♀
	Use additional code to identify the specific disorder		026.859	Spotting complicating pregnancy, unspecified trimester	M ♀
	EXCLUDES2 hepatorenal syndrome following labor and delivery (O90.4)		026.86	Pruritic urticarial papules and plaques of pregnancy (PUPPP)	M ♀
✓ ^{6th} 026.61	Liver and biliary tract disorders in pregnancy			Polymorphic eruption of pregnancy	
026.611	Liver and biliary tract disorders in pregnancy, first trimester	CC M ♀	✓ ^{6th} 026.87	Cervical shortening	
026.612	Liver and biliary tract disorders in pregnancy, second trimester	CC M ♀		EXCLUDES1 encounter for suspected cervical shortening ruled out (Z03.75)	
026.613	Liver and biliary tract disorders in pregnancy, third trimester	CC M ♀		DEF: Cervix that has shortened to less than 25 mm before the 24th week of pregnancy. A shortened cervix is a warning sign for impending premature delivery and is treated by cervical cerclage placement or progesterone.	
026.619	Liver and biliary tract disorders in pregnancy, unspecified trimester	M ♀	026.872	Cervical shortening, second trimester	CC M ♀
026.62	Liver and biliary tract disorders in childbirth	CC M ♀	026.873	Cervical shortening, third trimester	CC M ♀
026.63	Liver and biliary tract disorders in the puerperium	M ♀	026.879	Cervical shortening, unspecified trimester	CC M ♀
✓ ^{5th} 026.7	Subluxation of symphysis (pubis) in pregnancy, childbirth and the puerperium		✓ ^{6th} 026.89	Other specified pregnancy related conditions	
	EXCLUDES1 traumatic separation of symphysis (pubis) during childbirth (O71.6)			AHA: 2015.3Q,40	
✓ ^{6th} 026.71	Subluxation of symphysis (pubis) in pregnancy		026.891	Other specified pregnancy related conditions, first trimester	M ♀
026.711	Subluxation of symphysis (pubis) in pregnancy, first trimester	M ♀	026.892	Other specified pregnancy related conditions, second trimester	M ♀
026.712	Subluxation of symphysis (pubis) in pregnancy, second trimester	M ♀	026.893	Other specified pregnancy related conditions, third trimester	M ♀
026.713	Subluxation of symphysis (pubis) in pregnancy, third trimester	M ♀	026.899	Other specified pregnancy related conditions, unspecified trimester	M ♀
026.719	Subluxation of symphysis (pubis) in pregnancy, unspecified trimester	M ♀	✓ ^{5th} 026.9	Pregnancy related conditions, unspecified	
026.72	Subluxation of symphysis (pubis) in childbirth	M ♀	026.90	Pregnancy related conditions, unspecified, unspecified trimester	M ♀
026.73	Subluxation of symphysis (pubis) in the puerperium	M ♀	026.91	Pregnancy related conditions, unspecified, first trimester	M ♀
✓ ^{5th} 026.8	Other specified pregnancy related conditions		026.92	Pregnancy related conditions, unspecified, second trimester	M ♀
✓ ^{6th} 026.81	Pregnancy related exhaustion and fatigue		026.93	Pregnancy related conditions, unspecified, third trimester	M ♀
026.811	Pregnancy related exhaustion and fatigue, first trimester	M ♀			
026.812	Pregnancy related exhaustion and fatigue, second trimester	M ♀			
026.813	Pregnancy related exhaustion and fatigue, third trimester	M ♀			
026.819	Pregnancy related exhaustion and fatigue, unspecified trimester	M ♀			

Upper Respiratory System



Lower Respiratory System



Paranasal Sinuses

