ICD-10-CM Expert for SNF, IRF, and LTCH
The complete official code set
Codes valid from October 1, 2018 through September 30, 2019
# Contents

**Preface** ................................................................. iii
- ICD-10-CM Official Preface ................................................... iii
- Characteristics of ICD-10-CM ................................................... iii

**What’s New for 2019** ................................................. iv
- Official Updates ............................................................. iv
- Proprietary Updates ..................................................... vii

**Introduction** .............................................................. ix
- History of ICD-10-CM ..................................................... ix

**How to Use ICD-10-CM Expert for Skilled Nursing Facilities, Inpatient Rehabilitation Services, and Inpatient Hospice 2019** ........................................ X
- Use of Official Sources .................................................. X
- Steps to Correct Coding ................................................ X
- Organization ........................................................................ X
  - Introduction .................................................................... X
  - Official ICD-10-CM Conventions and Guidelines .................... x
  - Alphabetic Index to Diseases ............................................ x
  - Neoplasm Table .................................................................. x
  - Table of Drugs and Chemicals ........................................... x
  - Index to External Causes ................................................ xi
  - Tabular List of Diseases .................................................. xi
  - Appendixes ........................................................................ xi
  - Illustrations ....................................................................... xi

**Overview of ICD-10-CM Official Conventions** ................... xii
- Format .............................................................................. xii
- Punctuation .......................................................................... xii
- Abbreviations ........................................................................ xii
  - NEC .............................................................................. xii
  - NOS ............................................................................... xii
- Typeface .............................................................................. xii
- General Notes ........................................................................ xii
  - Includes Notes .................................................................... xii
  - Inclusion Terms .................................................................. xii
  - Excludes Notes .................................................................... xii
  - Note .................................................................................... xii
  - Default Codes ..................................................................... xii
  - Syndromes .......................................................................... xii
  - And .................................................................................... xii
  - With ................................................................................... xii
  - See and See Also .................................................................. xii
  - Instructional Notes Used in the Tabular List ......................... xiii
  - Code Assignment and Clinical Criteria ................................ xiii

**Additional Annotations** ........................................... xiv
- Code-Level Notations ........................................................ xiv
- Italic ................................................................................... xiv
- Color Coding/Symbols ...................................................... xiv
- Footnotes ............................................................................. xvi
- Chapter-Level Notations ................................................... xvi
- Chapter-Specific Guidelines with Coding Examples ............. xvi
- Muscle Tendon Table ......................................................... xvi
- Index Notations ..................................................................... xvi
- Following References ....................................................... xvi

**ICD-10-CM Official Guidelines for Coding and Reporting 2017** ........................................ Coding Guidelines–1

**ICD-10-CM Index to Diseases and Injuries** ....................... 1

**ICD-10-CM Neoplasm Table** ........................................ 331

**ICD-10-CM Table of Drugs and Chemicals** ....................... 349

**ICD-10-CM Index to External Causes** ............................. 397

**ICD-10-CM Tabular List of Diseases and Injuries** ............. 433

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Title</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Certain Infectious and Parasitic Diseases (A00-B99)</td>
<td>433</td>
</tr>
<tr>
<td>2</td>
<td>Neoplasms (C00-D49)</td>
<td>457</td>
</tr>
<tr>
<td>3</td>
<td>Diseases of the Blood and Blood-forming Organs and Certain Disorders Involving the Immune Mechanism (D50-D89)</td>
<td>495</td>
</tr>
<tr>
<td>4</td>
<td>Endocrine, Nutritional and Metabolic Diseases (E00-E89)</td>
<td>505</td>
</tr>
<tr>
<td>5</td>
<td>Mental, Behavioral, and Neurodevelopmental Disorders (F01-F99)</td>
<td>525</td>
</tr>
<tr>
<td>6</td>
<td>Diseases of the Nervous System (G00-G99)</td>
<td>549</td>
</tr>
<tr>
<td>7</td>
<td>Diseases of the Eye and Adnexa (H00-H59)</td>
<td>569</td>
</tr>
<tr>
<td>8</td>
<td>Diseases of the Ear and Mastoid Process (H60-H99)</td>
<td>605</td>
</tr>
<tr>
<td>9</td>
<td>Diseases of the Circulatory System (I00-I99)</td>
<td>617</td>
</tr>
<tr>
<td>10</td>
<td>Diseases of the Respiratory System (J00-J99)</td>
<td>657</td>
</tr>
<tr>
<td>11</td>
<td>Diseases of the Digestive System (K00-K95)</td>
<td>673</td>
</tr>
<tr>
<td>12</td>
<td>Diseases of the Skin and Subcutaneous Tissue (L00-L99)</td>
<td>695</td>
</tr>
<tr>
<td>13</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)</td>
<td>715</td>
</tr>
<tr>
<td>14</td>
<td>Diseases of the Genitourinary System (N00-N99)</td>
<td>803</td>
</tr>
<tr>
<td>15</td>
<td>Pregnancy, Childbirth and the Puerperium (O00-O9A)</td>
<td>821</td>
</tr>
<tr>
<td>16</td>
<td>Certain Conditions Originating in the Perinatal Period (P00-P96)</td>
<td>857</td>
</tr>
<tr>
<td>17</td>
<td>Congenital Malformations, Deformations and Chromosomal Abnormalities (Q00-Q99)</td>
<td>869</td>
</tr>
<tr>
<td>18</td>
<td>Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified (R00-R99)</td>
<td>887</td>
</tr>
<tr>
<td>19</td>
<td>Injury, Poisoning and Certain Other Consequences of External Causes (S00-T88)</td>
<td>907</td>
</tr>
<tr>
<td>20</td>
<td>External Causes of Morbidity (V00-Y99)</td>
<td>1115</td>
</tr>
<tr>
<td>21</td>
<td>Factors Influencing Health Status and Contact With Health Services (Z00-Z99)</td>
<td>1177</td>
</tr>
</tbody>
</table>

**Appendixes** .......................................................... Appendixes–1

- Appendix A: 10 Steps to Correct Coding ................................ Appendixes–1
- Appendix B: Valid 3-character ICD-10-CM Codes .............................. Appendixes–3
- Appendix C: Pharmacology List 2018 ........................................ Appendixes–5
- Appendix D: Z Codes for Long-Term Drug Use with Associated Drugs ................................ Appendixes–21
- Appendix E: Z Codes Only as Principal/First-Listed Diagnosis .......................... Appendixes–24
- Appendix F: Hospice Criteria for Medicare Coverage of Noncancer Hospice Care .......................... Appendixes–25
Chapter 3. Diseases of the Blood and Blood-forming Organs

D63–D68.311

D63 Anemia in chronic diseases classified elsewhere

D63.0 Anemia in neoplastic disease

Code first neoplasm (C00-D49)

FAVOURABLE: anemia due to antineoplastic chemotherapy (D64.81)

Aplastic anemia due to antineoplastic chemotherapy (D61.1)

FAVOURABLE: anemia due to antineoplastic chemotherapy (D64.81)

D63.1 Anemia in chronic kidney disease

Erythropoietin resistant anemia (EPO resistant anemia)

Code first underlying chronic kidney disease (CKD) (N18.-)

D63.2 Anemia in other chronic diseases classified elsewhere

Code first underlying disease, such as:

- diphtheria (B70.0)
- hookworm disease (B76.8-B76.9)
- hypothyroidism (E00.0-E03.9)
- malaria (B58.0-B54)
- symptomatic late syphilis (A52.79)
- tuberculosis (A18.89)

D64 Other anemias

REFRACTORY ANEMIA (D46.-)

Refactory anemia with excess blasts in transformation
(RAEB T) (C92.2)

D64.0 Hereditary sideroblastic anemia

Sideroblastic anemia NOS

Pyridoxine-responsive sideroblastic anemia

D64.1 Secondary sideroblastic anemia due to disease

Code first underlying disease

D64.2 Secondary sideroblastic anemia due to drugs and toxins

Code first poisoning due to drug or toxin, if applicable (T36-T65) with fifth or sixth character 5

Use additional code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)

D64.3 Other sideroblastic anemias

Sideroblastic anemia NOS

D64.4 Congenital dyserythropoietic anemia

Dyserythropoietic anemia (congenital)

Blackfan-Diamond syndrome (D61.81)

Di Giuglielmo's disease (C94.8)

D64.8 Other specified anemias

D64.8.1 Anemia due to antineoplastic chemotherapy

Antineoplastic chemotherapy induced anemia

FAVOURABLE: aplastic anemia due to antineoplastic chemotherapy (D61.1)

FAVOURABLE: anemia in neoplastic disease (D63.0)

AHA: 2014, 4Q, 22

DEF: Reversible adverse effect of chemotherapy causing inhibition of bone marrow production; decrease in red blood cell production prevents adequate oxygenation of the tissues and organs causing fatigue, SOB, and exacerbation of other medical conditions.

D64.8.9 Other specified anemias

Infantile pancytopenia

AHA: 2017, 1Q, 7

Coagulation defects, purpura and other hemorrhagic conditions (D65–D69)

D65 Disseminated intravascular coagulation [defibrination syndrome]

A fibrinogenemia, acquired

Consumption coagulopathy

Diffuse or disseminated intravascular coagulation [DIC]

Fibrinolytic hemorrhage, acquired

Fibrinolytic purpura

Purpura fulminans

FAVOURABLE: disseminated intravascular coagulation (complicating): abortion or ectopic or molar pregnancy (O88.0, O88.1) in newborn (P68) pregnancy, childbirth and the puerperium (O45.8, O46.8, O67.8, O72.3)

D66 Hereditary factor VIII deficiency

Classical hemophilia

Deficiency factor VIII (with functional defect)

Hemophilia A

Hemophilia NOS

FAVOURABLE: factor VIII deficiency with vascular defect (D68.8)

DEF: Hereditary, sex-linked lack of antihemophilic globulin (AHG) (factor VIII); causes abnormal coagulation characterized by increased bleeding, large bruises of skin, bleeding in mouth, nose, gastrointestinal tract; hemorrhages into joints, resulting in swelling and impaired function.

D67 Hereditary factor IX deficiency

Christmas disease

Factor IX deficiency (with functional defect)

Hemophilia B

Plasma thromboplastin component [PTC] deficiency

D68 Other coagulation defects

FAVOURABLE: abnormal coagulation profile (R79.1)

Coagulation defects complicating abortion or ectopic or molar pregnancy (O88.0, O88.1)

Coagulation defects complicating pregnancy, childbirth and the puerperium (O45.8, O46.8, O67.8, O72.3)

AHA: 2016, 1Q, 14

TIP: Do not assign to identify routine therapeutic anticoagulation effects; assign only for documented adverse effects.

D68.8 Von Willebrand's disease

Angiohemophilia

Factor VIII deficiency with vascular defect

Vascular hemophilia

FAVOURABLE: capillary fragility (hereditary) (D69.8)

Factor VIII deficiency NOS (D66)

Factor VIII deficiency with functional defect (D66)

DEF: Abnormal blood coagulation caused by deficient blood factor VIII; congenital; symptoms include excess or prolonged bleeding.

D68.1 Hereditary factor XI deficiency

Deficiency of factor XI (hemophilia A Christmas disease)

Hypoproconvertinemia

Hemophilia C

Incidental factor XI deficiency

Hemophilia D

D68.2 Hereditary deficiency of other clotting factors

AC globulin deficiency

Congenital afibrinogenemia

Deficiency of factor I (fibrinogen)

Deficiency of factor II (prothrombin)

Deficiency of factor V (album)

Deficiency of factor VII (stable)

Deficiency of factor X (Stuart-Prower)

Deficiency of factor XII (Hageman)

Deficiency of factor XIII (fibrin stabilizing)

Deficiency of factor XIII (fibrin stabilizing)

Dysfibrinogenemia (congenital)

Hypoproconvertinemia

Owen’s disease

Proacelerin deficiency

D68.3 Hemorrhagic disorder due to circulating anticoagulants

D68.31 Hemorrhagic disorder due to intrinsic circulating anticoagulants, antibodies, or inhibitors

Acquired hemophilia

Autoimmune hemophilia

Autoimmune inhibitors to clotting factors

Secondary hemophilia

ICD-10-CM 2019
G71.12 Myotonia congenita
Acetazolamide responsive myotonia congenita
Dominant myotonia congenita [Thomsen disease]
Myotonia levis
Recessive myotonia congenita [Becker disease]

G71.13 Myotonic chondrodystrophy
Chondrodystrophic myotonia
Congenital myotonic chondrodystrophy
Schwartz-Jampel disease

G71.14 Drug induced myotonia
Use additional code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)

G71.19 Other specified myotonic disorders
Myotonia fluctuans
Myotonia permanens
Neuromyotonia [Isaacs]
Paramyotonia congenita (of von Eulenburg)
Pseudomyotonia
Symptomatic myotonia

G71.2 Congenital myopathies
Central core disease
Fiber-type disproportion
Minicore disease
Multicore disease
Myotubular (centronuclear) myopathy
Nemaline myopathy

G71.3 Mitochondrial myopathy, not elsewhere classified
Kearns-Sayre syndrome (H49.81)
Leber's disease (H47.21)
Leigh's encephalopathy (G31.82)
mitochondrial myopathy (E88.4-)
Roye's syndrome (G93.7)

G71.8 Other primary disorders of muscles
Primary disorder of muscle, unspecified
Hereditary myopathy NOS

G72 Other and unspecified myopathies
Arthrogryposis multiplex congenita (Q74.3)
dermatopolymyositis (M33.1-)
myotubular (centronuclear) myopathy
polymyositis (M05.2-)

G72.8 Drug-induced myopathy
Use additional code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)

G72.1 Alcoholic myopathy
Use additional code to identify alcoholism (F18.-)

G72.2 Myopathy due to other toxic agents
Code first (T51-T65) to identify toxic agent

G72.3 Periodic paralysis
Familial periodic paralysis
Hyperkalemic periodic paralysis (familial)
Hyopokalemic periodic paralysis (familial)
Myotonic periodic paralysis (familial)
Normokalemic periodic paralysis (familial)
Potassium sensitive periodic paralysis

G72.4 Inflammatory and immune myopathies, not elsewhere classified
Inclusion body myositis (IBM)
Other inflammatory and immune myopathies, not elsewhere classified

G72.7 Other specified myopathies

G72.8 Other specified myopathies
Critical illness myopathy
Acute necrotizing myopathy
Acute quadriplegic myopathy
Intensive care (ICU) myopathy
Myopathy of critical illness

G72.9 Myopathy, unspecified

G73 Disorders of myoneurial junction and muscle in diseases classified elsewhere

G73.1 Lambert-Eaton syndrome in neoplastic disease
Code first underlying neoplasm (C08-D49)
Lambert-Eaton syndrome not associated with neoplasm (G70.80-G70.81)

G73.3 Myasthenic syndromes in other diseases classified elsewhere
Code first underlying disease, such as:
neoplasm (C08-D49)
thyrotoxicosis (E85.-)

G73.7 Myopathy in diseases classified elsewhere
Code first underlying disease, such as:
hyperparathyroidism (E21.8, E21.3)
hypoparathyroidism (E20.-)
glycogen storage disease (E74.8)
lipid storage disorders (E75.-)
myopathy in:
rheumatoid arthritis (M05.4-)
sarcoidosis (D86.87)
scleroderma (M34.82)
sicca syndrome [Sjögren] (M35.03)
systemic lupus erythematosus (M32.19)

Cerebral palsy and other paralytic syndromes (G80-G83)

G80 Cerebral palsy

G80.0 Flaccid hemiplegia

G80.8 Spastic quadriplegic cerebral palsy
Congenital spastic paralyses (cerebral)

G80.9 Cerebral palsy, unspecified

G81 Hemiplegia and hemiparesis

G81.0 Flaccid hemiplegia

G81.8 Spastic hemiplegia

G81.9 Cerebral palsy, unspecified

AHA: 2015, 10, 25

G81.11 Spastic hemiplegia

G81.13 Spastic hemiplegia

G81.8 Flaccid hemiplegia

G81.81 Flaccid hemiplegia affecting unspecified side

G81.82 Flaccid hemiplegia affecting left nondominant side

G81.83 Flaccid hemiplegia affecting right nondominant side

G81.84 Flaccid hemiplegia affecting left nondominant side

G81.10 Spastic hemiplegia

G81.12 Spastic hemiplegia affecting left nondominant side

G81.14 Spastic hemiplegia affecting left nondominant side
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. Chronic obstructive pulmonary disease (COPD) and asthma
   1) Acute exacerbation of chronic obstructive bronchitis and asthma
   The codes in categories J44 and J45 distinguish between uncomplicated cases and those in acute exacerbation. An acute exacerbation is a worsening or a decompensation of a chronic condition. An acute exacerbation is not equivalent to an infection superimposed on a chronic condition, though an exacerbation may be triggered by an infection.

   Patient admitted for continued IV antibiotic administration and physical therapy with diagnoses of MRSA pneumonia with acute exacerbation of COPD. Provider documentation indicates comorbid moderate persistent asthma.

   J15.212 Pneumonia due to methicillin resistant Staphylococcus aureus
   J44.8 Chronic obstructive pulmonary disease with acute lower respiratory infection
   J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation
   J45.40 Moderate persistent asthma, uncomplicated
   245.2 Encounter for adjustment and management of vascular access catheter

   Explanation: ICD-10-CM uses combination codes to create organism-specific classifications for many types of pneumonia. Category J44 distinguishes between COPD that is exacerbated, COPD with acute lower respiratory infection, and COPD without mention of a complication (unspecified). When a lower respiratory infection is present and COPD is diagnosed, two codes would be required, J44.8 and the code for the infection. Sequencing will be dependent on the condition that is the focus of treatment upon admission to the post-acute setting, which in this case is the MRSA pneumonia.

   An acute exacerbation is a worsening or decompensation of a chronic condition and must be specified by the provider as such. When both COPD and asthma are diagnosed and the provider reports an acute exacerbation of COPD, an acute exacerbation of asthma cannot be assumed unless specifically stated by the provider.

   Exacerbation of moderate persistent asthma with status asthmaticus
   J45.42 Moderate persistent asthma with status asthmaticus

   Explanation: Category J45 Asthma includes severity-specific subcategories and fifth-character codes to distinguish between uncomplicated cases, those in acute exacerbation, and those with status asthmaticus.

b. Acute respiratory failure
   1) Acute respiratory failure as principal diagnosis
   A code from subcategory J96.8. Acute respiratory failure, or subcategory J96.2. Acute and chronic respiratory failure, may be assigned as a principal diagnosis when it is the condition established after study to be chiefly responsible for occasioning the admission to the hospital, and the selection is supported by the Alphabetic Index and Tabular List. However, chapter-specific coding guidelines (such as obstetrics, poisoning, HIV, newborn) that provide sequencing direction take precedence.

   2) Acute respiratory failure as secondary diagnosis
   Respiratory failure may be listed as a secondary diagnosis if it occurs after admission, or if it is present on admission, but does not meet the definition of principal diagnosis.

   Acute pneumococcal pneumonia with subsequent development of acute respiratory failure
   J13 Pneumonia due to Streptococcus pneumoniae
   J96.00 Acute respiratory failure, unspecified whether with hypoxia or hypercapnia

   Explanation: Acute respiratory failure may be listed as a secondary diagnosis if it occurs after admission, or if it is present on admission but does not meet the definition of principal diagnosis.

   3) Sequencing of acute respiratory failure and another acute condition
   When a patient is admitted with respiratory failure and another acute condition, (e.g., myocardial infarction, cerebrovascular accident, aspiration pneumonia), the principal diagnosis will not be the same in every situation. This applies whether the other acute condition is a respiratory or nonrespiratory condition. Selection of the principal diagnosis will be dependent on the circumstances of admission. If both the respiratory failure and the other acute condition are equally responsible for occasioning the admission to the hospital, and there are no chapter-specific sequencing rules, the guideline regarding two or more diagnoses that equally meet the definition for principal diagnosis (Section II, C) may be applied in these situations.

   If the documentation is not clear as to whether acute respiratory failure and another condition are equally responsible for occasioning the admission, query the provider for clarification.

c. Influenza due to certain identified influenza viruses
   Code only confirmed cases of influenza due to certain identified influenza viruses (category J09), and due to other identified influenza virus (category J10). This is an exception to the hospital inpatient guideline Section II, H. (Uncertain Diagnosis).

   In this context, “confirmation” does not require documentation of positive laboratory testing specific for avian or other novel influenza A or other identified influenza virus. However, coding should be based on the provider’s diagnostic statement that the patient has avian influenza, or other novel influenza A, or category J09, or has another particular identified strain of influenza, such as H1N1 or H3N2, but not identified as novel or variant, for category J10.

   If the provider records “suspected” or “possible” or “probable” avian influenza, or novel influenza, or other identified influenza, then the appropriate influenza code from category J11, Influenza due to unidentified influenza virus, should be assigned. A code from category J09, Influenza due to certain identified influenza viruses, should not be assigned nor should a code from category J10, Influenza due to other identified influenza virus.

   Influenza due to avian influenza virus with pneumonia
   J09.X1 Influenza due to identified novel influenza A virus with pneumonia

   Explanation: Codes in category J09 Influenza due to certain identified influenza viruses should be assigned only for confirmed cases.

   "Confirmation” does not require positive laboratory testing of a specific influenza virus but does need to be based on the provider’s diagnostic statement, which should not include terms such as “possible,” “probable,” or “suspected.”

d. Ventilator associated pneumonia
   1) Documentation of ventilator associated pneumonia
   As with all procedural or postprocedural complications, code assignment is based on the provider’s documentation of the relationship between the condition and the procedure.

   Code J95.851, Ventilator associated pneumonia, should be assigned only when the provider has documented ventilator associated pneumonia (VAP). An additional code to identify the organism (e.g., Pseudomonas aeruginosa, code B96.5) should also be assigned. Do not assign an additional code from categories J12-J18 to identify the type of pneumonia.

   Code J95.851 should not be assigned for cases where the patient has pneumonia and is on a mechanical ventilator and the provider has not specifically stated that the pneumonia is ventilator-associated pneumonia. If the documentation is unclear as to whether the patient has a pneumonia that is a complication attributable to the mechanical ventilator, query the provider.
Chapter 19. Injury, Poisoning and Certain Other Consequences of External Causes

ICD-10-CM 2019

S05.4 Penetrating wound of orbit with or without foreign body
- S05.40 Penetrating wound of orbit with or without foreign body, unspecified eye
  - S05.41 Penetrating wound of orbit with or without foreign body, right eye
  - S05.42 Penetrating wound of orbit with or without foreign body, left eye

S05.5 Penetrating wound with foreign body of eyeball
- S05.50 Penetrating wound with foreign body of unspecified eyeball
- S05.51 Penetrating wound with foreign body of right eyeball
- S05.52 Penetrating wound with foreign body of left eyeball

S05.6 Penetrating wound without foreign body of eyeball
- S05.60 Penetrating wound without foreign body of unspecified eyeball
- S05.61 Penetrating wound without foreign body of right eyeball
- S05.62 Penetrating wound without foreign body of left eyeball

S05.7 Avulsion of eye
- S05.70 Avulsion of unspecified eye
- S05.71 Avulsion of right eye
- S05.72 Avulsion of left eye

S05.8 Other injuries of eye and orbit
- S05.8X Other injuries of eye and orbit
  - S05.8X1 Other injuries of right eye and orbit
  - S05.8X2 Other injuries of left eye and orbit
  - S05.8X9 Other injuries of unspecified eye and orbit

S05.9 Unspecified injury of eye and orbit
- S05.90 Unspecified injury of unspecified eye and orbit
- S05.91 Unspecified injury of right eye and orbit
- S05.92 Unspecified injury of left eye and orbit

S06 Intracranial injury
- S06.0X Concussion
- S06.1X Traumatic cerebral edema
- S06.2X Diffuse traumatic brain injury

S06.4 Penetrating wound of orbit with or without foreign body
- S06.41 Penetrating wound of orbit with or without foreign body, unspecified eye
  - S06.42 Penetrating wound of orbit with or without foreign body, right eye
  - S06.43 Penetrating wound of orbit with or without foreign body, left eye

S06.5 Penetrating wound with foreign body of eyeball
- S06.50 Penetrating wound with foreign body of unspecified eyeball
- S06.51 Penetrating wound with foreign body of right eyeball
- S06.52 Penetrating wound with foreign body of left eyeball

S06.6 Penetrating wound without foreign body of eyeball
- S06.60 Penetrating wound without foreign body of unspecified eyeball
- S06.61 Penetrating wound without foreign body of right eyeball
- S06.62 Penetrating wound without foreign body of left eyeball

S06.7 Avulsion of eye
- S06.70 Avulsion of unspecified eye
- S06.71 Avulsion of right eye
- S06.72 Avulsion of left eye

S06.8 Other injuries of eye and orbit
- S06.8X Other injuries of eye and orbit
  - S06.8X1 Other injuries of right eye and orbit
  - S06.8X2 Other injuries of left eye and orbit
  - S06.8X9 Other injuries of unspecified eye and orbit

S06.9 Unspecified injury of eye and orbit
- S06.90 Unspecified injury of unspecified eye and orbit
- S06.91 Unspecified injury of right eye and orbit
- S06.92 Unspecified injury of left eye and orbit

S06.0X Concussion
- S06.0X9 Concussion without loss of consciousness
- S06.0X8 Concussion with loss of consciousness of 30 minutes or less
- S06.0X1 Concussion with loss of consciousness of unspecified duration

S06.1X Traumatic cerebral edema
- S06.1X0 Traumatic cerebral edema without loss of consciousness
- S06.1X1 Traumatic cerebral edema with loss of consciousness of 30 minutes or less
- S06.1X2 Traumatic cerebral edema with loss of consciousness of 31 minutes to 59 minutes
- S06.1X3 Traumatic cerebral edema with loss of consciousness of 1 hour to 5 hours 59 minutes
- S06.1X4 Traumatic cerebral edema with loss of consciousness of 6 hours to 24 hours
- S06.1X5 Traumatic cerebral edema with loss of consciousness greater than 24 hours
- S06.1X6 Traumatic cerebral edema with loss of consciousness of any duration with death due to other cause prior to regaining consciousness
- S06.1X7 Traumatic cerebral edema with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness
- S06.1X8 Traumatic cerebral edema with loss of consciousness of unspecified duration

S06.2X Diffuse traumatic brain injury
- S06.2X9 Diffuse traumatic brain injury without loss of consciousness
- S06.2X0 Diffuse traumatic brain injury with loss of consciousness of 30 minutes or less
- S06.2X1 Diffuse traumatic brain injury with loss of consciousness of 31 minutes to 59 minutes
- S06.2X2 Diffuse traumatic brain injury with loss of consciousness of 1 hour to 5 hours 59 minutes
- S06.2X3 Diffuse traumatic brain injury with loss of consciousness of 6 hours to 24 hours
- S06.2X4 Diffuse traumatic brain injury with loss of consciousness greater than 24 hours
- S06.2X5 Diffuse traumatic brain injury with loss of consciousness greater than 24 hours with return to pre-existing conscious level
- S06.2X6 Diffuse traumatic brain injury with loss of consciousness greater than 24 hours without return to pre-existing conscious level with patient surviving
- S06.2X7 Diffuse traumatic brain injury with loss of consciousness of any duration with death due to brain injury prior to regaining consciousness
- S06.2X8 Diffuse traumatic brain injury with loss of consciousness of any duration with death due to other cause prior to regaining consciousness

S06.8X Concussion
- S06.8X0 Concussion without loss of consciousness
- S06.8X1 Concussion with loss of consciousness of 30 minutes or less

\* Additional Character Required \* Placeholders Alert \* RUG IV Special Care High Dx \* RUG IV Clinically Complex Dx \* RUG IV Special Care Low Dx \* Manifestation Code \* Unspecified Code

4 Special Care High = With 7th character indicating subsequent encounter
5 Hospice noncancer diagnosis with 7th character indicating subsequent encounter.
Chapter 10. Diseases of the Respiratory System (J00–J99)