



ICD-10-AM/ACHI/ACS

Eighth Edition

Changes Reference Book
2013

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OVERVIEW

The material contained in this *ICD-10-AM/ACHI/ACS Eighth Edition Changes Reference Book* documents the changes in ICD-10-AM/ACHI/ACS Eighth Edition which have been made since ICD-10-AM/ACHI/ACS Seventh Edition.

The document is structured to match the ICD-10-AM chapters, with additional chapters to support intervention specific details. Cross-references have been included to alert the user to significant material in other chapters and to proceed to the alternate section. Items which affect multiple systems have been included in a special chapter called 'Cross-system updates'.

This *Changes Reference Book* is accompanied by a *Changes Workbook*, with questions and answers for a large number of items, designed to familiarise users with new Eighth Edition content.

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GLOSSARY OF ABBREVIATIONS

AACR	Australasian Association of Cancer Registries
ACHI	Australian Classification of Health Interventions
ACS	Australian Coding Standards
CTG	Clinical Technical Group
ICD-10	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification
ICD-O	International Classification of Diseases for Oncology
IHPA	Independent Hospital Pricing Authority
ITG	ICD Technical Group
MBS	Medicare Benefits Schedule
The Commission	Australian Commission on Safety and Quality in Health Care
URC	Update and Revision Committee
WHO	World Health Organization
WHO-FIC	WHO Family of International Classifications
WHO-URC	WHO ICD-10 Update and Revision Committee

1. Infection & parasitic diseases

1.1. Diarrhoea, due to *Clostridium difficile* (Indexing)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

Refer section 11.16 Gastroenteritis and colitis, drug induced or due to *Clostridium difficile* (Indexing) (page 174) for details.

1.2. Food poisoning and gastroenteritis due to food poisoning

Advice was published in *Coding Matters*, June 2010 (Vol. 17, No. 1), regarding the correct code assignment for food poisoning. Consequently the index entry for *Poisoning/food NEC* was amended to default to A05.9 *Bacterial food-borne intoxication, unspecified*.

ALPHABETIC INDEX OF DISEASES

Poisoning (acute) (see also *Table of drugs and chemicals*) T65.9

- food ~~(acute)~~ (bacterial) (diseased) (infected) NEC (see also *Intoxication/food-borne/by agent*) ~~T62.9~~ A05.9
- bacterial (see also *Intoxication, food-borne, by agent*) A05.9
- - noxious or naturally toxic T62.9

1.3. Healthcare associated *Staphylococcus aureus* bacteraemia (SAB)

Minor revisions were made to the Tabular List and wording of ACS 0111 *Healthcare associated Staphylococcus aureus bacteraemia* for Eighth Edition to incorporate classification advice published in the December 2011, Q&A - *Healthcare associated Staphylococcus aureus bacteraemia (HA SAB)* as follows:

- Tabular List: added an 'excludes' note at Y95 *Nosocomial condition*
- ACS: Revised ACS 0111 *Healthcare associated Staphylococcus aureus bacteraemia*

TABULAR LIST OF DISEASES

Y95

Nosocomial condition

Excludes: healthcare associated *Staphylococcus aureus* bacteraemia (U90.0)

AUSTRALIAN CODING STANDARDS

0111 HEALTHCARE ASSOCIATED STAPHYLOCOCCUS AUREUS BACTERAEMIA

Staphylococcus aureus is the most common cause of healthcare associated blood stream infections, causing significant illness and death.

The documentation of healthcare associated *Staphylococcus aureus* bacteraemia in clinical records and subsequent unique code assignment will allow for the collection of an important performance indicator (formulated under the 'Hospital and Related Care' quality and safety heading) under Clause 29 of in the

National Healthcare Agreement (METeOR: 443699) (Australian Institute of Health and Welfare 2012). (*Staphylococcus aureus* (including MRSA) bacteraemia in hospitals). In December 2008, the Australian Health Ministers' Conference (AHMC) endorsed the following recommendations:

1. All hospitals establish Healthcare Associated Infections (HAI) surveillance
2. All hospitals monitor and report *Staphylococcus aureus* (including MRSA) blood stream infection through their relevant jurisdiction into a national data collection

It is anticipated that this indicator will be reported by the Council of Australian Governments (COAG) Reform Council in a report to COAG in March 2011 and each year after that.

1.4. Hepatitis, anicteric (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hepatitis K75.9

- amoebic (see also *Abscess/liver/amoebic*) A06.4
- anicteric, acute (viral) — see *Hepatitis/viral*
- antigen-associated (HAA) (see also *Hepatitis/viral/type/B*) B16.9

1.5. Herpesviral infections

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Herpes, herpetic B00.9

- vulva A60.0† N77.1* - whitlow B00.8† L99.8*
- zoster (see also *condition*) B02.9

TABULAR LIST OF DISEASES

B00 Herpesviral [herpes simplex] infections

- B00.8 Other forms of herpesviral infection
- Herpesviral:
- hepatitis† (K77.0*)
 - whitlow† (L99.8*)

1.6. Infection, due to internal joint prosthesis (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Infection, infected (opportunistic) B99

- Heterophyes B66.8
- hip (joint) NEC M00.95
- - due to internal joint prosthesis T84.5
- - skin NEC L08.9
- Histoplasma (see also *Histoplasmosis*) B39.9
- ...
- jaw (bone) (lower) (upper) K10.2
- joint —see *Arthritis/infectious* NEC M00.9-
- - due to internal joint prosthesis T84.5
- kidney (cortex) (haematogenous) N15.9
- ...

- Klebsiella (K.) pneumoniae NEC A49.8
- - as cause of disease classified elsewhere B96.1
- knee (skin)(joint) NEC ~~L08.9~~M00.96
- joint M00.9-
- - due to internal joint prosthesis T84.5
- - skin NEC L08.9
- Koch's (see also *Tuberculosis*) A16.9
- ...
- shoulder (joint) NEC M00.91
- - due to internal joint prosthesis T84.5
- - skin NEC L08.9
- sinus (accessory) (chronic) (nasal) (see also *Sinusitis*) J32.9

TABULAR LIST OF DISEASES

M00

Pyogenic arthritis

See site codes

Excludes: infection and inflammatory reaction due to internal joint prosthesis (T84.5)

1.7. Infection, Enterococcus (Indexing)

Following receipt of a public submission, an index entry for *Infection/Enterococcus, as a cause of disease classified elsewhere* was added to the Alphabetic Index for ICD-10-AM Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Infection, infected (opportunistic) B99

- Enterobius vermicularis B80
- Enterococcus, as cause of disease classified elsewhere B95.2
- enterovirus NEC B34.1

1.8. Mediterranean fever (Indexing)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Fever R50.9

- Malaria (viral) A92.8
- Mediterranean ~~A23.0~~ A23.9
- - familial E85.0

1.9. Morganella morganii (Indexing)

A public submission requesting an index entry for *Morganella morganii* resulted in the following amendments to the Alphabetic Index for ICD-10-AM Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Infection, infected (opportunistic) B99

- *Monilia* (see also *Candidiasis*) B37.9

...

- *Morganella* (*morganii*) (*sibonii*) NEC A49.8

- - as cause of disease classified elsewhere B96.4

- *Mucor* (see also *Mucormycosis*) B46.5

Morgagni-Turner(-Albright) syndrome Q96.-

Morganella (morganii) (sibonii), as cause of disease classified elsewhere B96.4

Moria F07.0

1.10. MRSA and VRE carriers - ACS flags

A public submission requesting that the ACS symbol for ACS 0112 *Infection with drug resistant microorganisms* be placed in the ICD-10-AM Tabular List at appropriate codes in category B95–B97 *Bacterial, viral and other infectious agents* resulted in the following amendments to the Tabular List for ICD-10-AM Eighth Edition.

TABULAR LIST OF DISEASES

B95

▼0112

Streptococcus and staphylococcus as the cause of diseases classified to other chapters

B96

▼0112

Other bacterial agents as the cause of diseases classified to other chapters

1.11. Sepsis

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

A40

▼0110

Streptococcal sepsis

Includes: streptococcal septicaemia

Use additional code (R57.2) to identify septic shock.

Excludes: during labour (O75.3)

A41

▼0110

Other sepsis

Includes: septicaemia

Use additional code (R57.2) to identify septic shock.

Excludes: bacteraemia NOS (A49.9)

during labour (O75.3)

Following:

• abortion or ectopic or molar pregnancy (O03–O07, O08.0)

• immunisation (T88.0)

• infusion, transfusion or therapeutic injection (T80.2)

sepsis (due to)(in):

• actinomycotic (A42.7)

• anthrax (A22.7)

1.12. Treponematoses (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Treponematoses ~~due to~~

- ~~due to~~

- ~~Treponema pallidum~~ — see *Syphilis*

- ~~Treponema pertenue~~ — see *Yaws*

1.13. Tuberculosis of dura or heart

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Tuberculosis, tubercular, tuberculous (caseous)

(degeneration) (gangrene) (necrosis)

- abscess (respiratory) NEC A16.9

- bone A18.0† M90.09*

...

- Cowper's gland A18.1† N51.8*

- dura (cerebral) (mater) (spinal) A17.8† G04.07*

- epidural (cerebral) (spinal) A17.8† G07*

...

- haemothorax A16.5

- with bacteriological and histological confirmation
A15.6

- heart A18.8† ~~I43.0*~~ I52.0*

- hepatitis A18.8† K77.0*

1.14. Vincent's stomatitis

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Vincent's

- angina A69.1

- gingivitis A69.1

- stomatitis ~~A69.0~~ A69.1

1.15. ACS 0102 HIV/AIDS

During review of ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia*, minor amendments to the wording of ACS 0102 were made for consistency.

AUSTRALIAN CODING STANDARDS

0102 HIV/AIDS

...

HIV CODES ARE AS FOLLOWS:

Documentation of HIV status should always be coded even if the criteria for additional diagnosis is not met when documented.

Refer section 1.16 ACS 0104 Viral hepatitis (page 18) for changes to ACS 0104.

1.16. ACS 0104 Viral hepatitis

A public submission was received with regards to the currency of information about hepatitis C in ACS 0104 *Viral hepatitis*.

Once described as an incurable infection, current advances in antiviral therapy have significantly improved outcomes for patients with hepatitis C and successful treatment is now possible (ie attaining SVR [sustained virological response] which is the absence of HCV RNA in serum 24 weeks after discontinuing therapy).

It was initially proposed to incorporate changes regarding hepatitis C alone; however it was deemed unwise to amend this section of the standard in isolation. Consequently, the entire standard was reviewed in consultation with clinical experts for currency and clinical appropriateness.

Additionally, while reviewing ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia*, minor amendment to the wording of this ACS was made for consistency.

The following amendments were made to ICD-10-AM and ACS for Eighth Edition:

- ICD-10-AM Tabular List:
 - deleted inclusion term at B16.9
 - created ACS reference to ACS 0104 at B94.2 and Z86.18
- ICD-10-AM Alphabetic Index: amendments to ICD-10-AM Tabular List and ACS to support changes
- ACS: updated ACS 0104 *Viral hepatitis* to be clinically current

ALPHABETIC INDEX OF DISEASES

Hepatitis K75.9

- viral, virus B19.9
- - with hepatic coma B19.0
- - acute NEC B17.9
- - - specified NEC B17.8
- - - type
- - - - A B15.9
- - - - - with hepatic coma B15.0
- - - - B B16.9
- - - - - with delta-agent (coinfection) (hepatitis D) (without hepatic coma) B16.1
- - - - - and hepatic coma B16.0
- - - - - hepatic coma (without delta-agent coinfection) B16.2
- - - - C B17.1
- - - - D (coinfection) (hepatitis B with delta-agent) (without hepatic coma) B16.1
- - - - - with hepatic coma B16.0
- - - - E B17.2
- - chronic NEC B18.9
- - - specified NEC B18.8
- - - type
- - - - B B18.1
- - - - - with delta-agent (hepatitis D) B18.0
- - - - C B18.2
- - - - D (hepatitis B with delta-agent) B18.0
- - - - E B18.8
- - complicating pregnancy, childbirth or puerperium O98.4
- - - ...
- - - type
- - - - A B15.9
- - - - - with hepatic coma B15.0
- - - - B B18.1 B16.9
- - - - - with delta-agent (hepatitis D) B18.0
- - - - - acute with B16.9
- - - - - with delta-agent (coinfection) (hepatitis D) (without hepatic coma) B16.1
- - - - - and with hepatic coma B16.0
- - - - - hepatic coma (without delta-agent coinfection) B16.2
- - - - chronic B18.1
- - - - - with delta-agent (hepatitis D) B18.0
- - - - C B18.2 B17.4
- - - - acute B17.1
- - - - chronic B18.2
- - - - D (hepatitis B with delta-agent) B18.0
- - - - acute (coinfection) (without hepatic coma) B16.1
- - - - - with hepatic coma B16.0
- - - - chronic B18.0
- - - - E B17.2
- - - - chronic B18.8
- - - non-A, non-B B17.8

TABULAR LIST OF DISEASES

B16

Acute hepatitis B

...

B16.9 Acute hepatitis B without delta-agent and without hepatic coma
Hepatitis B (acute)(viral) NOS

B94

Sequelae of other and unspecified infectious and parasitic diseases

...

B94.2 Sequelae of viral hepatitis
▼0104

Z86.1

Personal history of infectious and parasitic diseases

...

★Z86.18 Personal history of other infectious and parasitic disease
▼0104

AUSTRALIAN CODING STANDARDS

0104 VIRAL HEPATITIS

DEFINITION

Viral hepatitis

Viral hepatitis is ~~an inflammatory and necrotic disease of liver cells~~ viral infection that results specifically in liver inflammation and injury. Viruses A, B, C, D and E may result in acute viral hepatitis. Acute viral hepatitis infections with viruses B, C, D and ~~DE~~ may progress to chronic viral hepatitis.

Viral hepatitis that lasts for more than six months is generally defined as 'chronic'. A diagnosis of chronic hepatitis is based on positive serologic and virologic tests and a demonstrated, or likely, duration of infection of greater than six months. ~~Viral hepatitis that lasts for more than six months is generally defined as 'chronic'. However, this definition is arbitrary. Chronic viral hepatitis is a variable progressive disease that ultimately results in cirrhosis and hepatic failure. The diagnosis of chronic viral hepatitis can only be determined following a liver biopsy.~~

~~Patients with chronic viral hepatitis often have abnormal liver function tests. An indication of chronic viral hepatitis is a raised level of alanine transaminase, although this may also be due to other causes such as alcohol. Generally, patients with chronic viral hepatitis are followed up biannually with blood tests and ultrasounds. Neonates of mothers who have chronic hepatitis B or are hepatitis B carriers are at risk of transmission and should be immunised soon after birth (within 24 hours), whereas there is no equivalent vaccination available for neonates of mothers who have chronic hepatitis C or are hepatitis C carriers. These neonates have approximately 5% risk of infection.~~

~~Generally, after recovery from an infection with an organism, a person will develop antibodies to the pathogenic organism. Antibodies to certain infectious diseases can also be produced by vaccination. In these vaccinated people, future blood tests demonstrating the antibodies will indicate past infection or immunisation. Such people are not regarded as 'carriers'. A carrier is a person who has hepatitis B, C or D virus and/or antibodies in his or her blood and does not manifest symptoms but harbours the organism and may infect others. Because the virus is present in the blood, it can be transmitted to others. It is important to understand the distinction between a person who is a carrier of an infectious disease (an infection risk) and a person whose antibody results indicate past infection or immunisation to an infectious disease (not an infection risk). The role of antibody tests in distinguishing between carrier status and past infection varies depending on the infection.~~

Hepatitis A

Hepatitis A is a disease which is quite contagious and is transmitted enterically (faecal-oral route). Transmission within families is common. In developing countries, the usual source of infection is faecal contamination of drinking water.

The hepatitis A virus (HAV) is detected by two antibody tests:

1. IgM antibody: positive result indicates recent infection.
2. IgG antibody (anti-HA): positive result indicates past infection (previous exposure to HAV) or immunity through vaccination.

The hepatitis A virus (HAV) is *never* a chronic infection. There is no known carrier state and HAV plays no role in chronic active hepatitis or cirrhosis.

Hepatitis B

Hepatitis B may manifest as an acute illness and may progress to a chronic infection. The hepatitis B virus (HBV) is transmitted by infected bodily fluids/secretions such as blood and blood products, sexual fluids (semen and cervical secretions), transplanted tissue and blood products, and rarely saliva, urine, semen and cervical secretions. Most adults make a full recovery and are left with immunity for life. However, in up to 10% of cases, following on from the acute infection, patients will become asymptomatic carriers of HBV or develop chronic active viral hepatitis (5%). There are estimated to be about 300 million HBV carriers worldwide.

Hepatitis C

Hepatitis C rarely may manifest as an acute illness and may commonly progress to a chronic infection. The hepatitis C virus (HCV) is usually acquired/transmitted parenterally (eg transfusions, injecting drug abuse, blood products, medical procedures (usually overseas), or through occupational exposure to blood or blood products). Hepatitis C may rarely be transmitted from mother to baby at birth, or sexual contact with infected individuals. Recovery rates from hepatitis C virus (HCV) infection are much lower than in hepatitis B virus infection. Generally it is known that up to 90% will progress to a chronic infection.

Hepatitis C differs from hepatitis B in that a patient with hepatitis C will have the virus for the rest of their lives as either an acute or chronic infection or as an asymptomatic carrier.

A positive hepatitis C antibody test indicates hepatitis C infection. A polymerase chain reaction (PCR) assay can also be conducted; a positive result supports the diagnosis of chronic hepatitis C infection. However, a negative PCR result does not necessarily mean that there is no chronic infection, as the virus may still be present in small amounts and not detected in the blood sample.

Hepatitis D

The hepatitis D virus (HDV) can only occur in the presence of HBV, never alone. It occurs as either a coinfection with acute hepatitis B (most likely to resolve in adults) or a super infection in established chronic hepatitis B (most likely to become chronic). The HDV is spread mainly parenterally (eg by needles and blood). It is also referred to as the delta agent.

Hepatitis E

The hepatitis E virus (HEV) is transmitted enterically (faecal-oral route) and causes acute hepatitis, clinically similar to hepatitis A. It is endemic in South East Asia, countries of the Soviet region, India, mid-east Africa and Central America. Large epidemics with person to person spread have been known to occur. The normal course of infection seems to be acute and a relatively benign illness, except in pregnancy.

HEV is *never* a chronic infection. There is no known carrier state and HEV plays no role in chronic active hepatitis or cirrhosis. HEV generally does not develop into a chronic infection. However, it has been recently recognised that hepatitis E may result in chronic infection, particularly in immunosuppressed individuals such as organ transplant recipients (Kamar et al. 2012, p. 6).

CLASSIFICATION

Viral hepatitis or hepatitis carrier status should always be coded even if the criteria for additional diagnosis are not met when documented except when hepatitis C is documented with terms such as 'cured', 'cleared'

or ‘with SVR’, see 4. *Cured/cleared hepatitis C* below. The following table provides guidance in the application of hepatitis A, B, C, D and E codes:

When documentation is unclear or ambiguous terms such as ‘hepatitis B’, ‘hepatitis C’, ‘hepatitis D’, ‘hepatitis B positive’, ‘hepatitis C positive’ or ‘hepatitis D positive’ are documented, verify with the clinician if the disease is at the acute or chronic stage.

Where consultation is not possible, assign the following code for:

- hepatitis B: B18.1 *Chronic viral hepatitis B without delta-agent*
- hepatitis C: B18.2 *Chronic viral hepatitis C*
- hepatitis D: B18.0 *Chronic viral hepatitis B with delta-agent*

1. Past history of hepatitis

- A past history code may be assigned for hepatitis A or hepatitis E when the history meets ACS 2112 *Personal history*.
- When a past history of hepatitis B, hepatitis C or hepatitis D is documented, assign:
 - hepatitis B: B18.1 *Chronic viral hepatitis B without delta-agent*
 - hepatitis C: B18.2 *Chronic viral hepatitis C* (except when documented with terms such as ‘cured’, ‘cleared’ or ‘with SVR’ – see 4. *Cured/cleared hepatitis C* below)
 - hepatitis D: B18.0 *Chronic viral hepatitis B with delta-agent*

The concept of ‘carrier (state) of viral hepatitis’ is no longer clinically correct; therefore, Z22.51 *Carrier of viral hepatitis B*, Z22.52 *Carrier of viral hepatitis C* and Z22.59 *Carrier of other specified viral hepatitis* should never be assigned.

2. Hepatitis complicating pregnancy, childbirth or the puerperium

When viral hepatitis complicates pregnancy, childbirth or the puerperium, assign O98.4 *Viral hepatitis complicating pregnancy, childbirth and the puerperium* and a code for the specific type of hepatitis.

The following table summarises general classification guidelines for hepatitis A, B, C, D and E (see also 3. *Manifestations of hepatitis* and 4. *Cured/cleared hepatitis C* below):

CLASSIFICATION			
VIRAL HEPATITIS/TYPE	CODE/DESCRIPTION		GENERAL GUIDELINES/ISSUES
Hepatitis A	B15.0	<i>Hepatitis A with hepatic coma</i>	<ul style="list-style-type: none"> • Neither a past history of hepatitis A nor a carrier status is coded may be assigned when the history meets ACS 2112 <i>Personal history</i>. • O98.4 is assigned where hepatitis A complicates the pregnancy, childbirth or puerperium, assign O98.4 (along with an additional code of either B15.0 or B15.9 to specify the type of hepatitis).
	B15.9	<i>Hepatitis A without hepatic coma</i>	
	O98.4	<i>Viral hepatitis complicating pregnancy, childbirth and the puerperium</i>	
	Z86.18	<i>Personal history of other infectious and parasitic disease</i>	
Hepatitis B	B16.-	<i>Acute hepatitis B</i>	<ul style="list-style-type: none"> • When ‘history of hepatitis B’ is documented, it should not be assumed that the patient is a carrier of hepatitis B and therefore Z22.51 is not coded. • When documentation is unclear or ambiguous terms such as ‘hepatitis B’, ‘hepatitis B positive’ or ‘past history of hepatitis B’ are documented, verify with the clinician if the disease is at the acute or chronic stage. ‘hepatitis B carrier’ without any indication of an infectious process should be coded to Z22.51. Where consultation is not possible, assign the code for chronic viral hepatitis B (B18.1). • Concept of ‘carrier (state) of viral hepatitis’ is no longer clinically correct; therefore, Z22.51 <i>Carrier of viral hepatitis B</i> should never be assigned. • O98.4 is assigned where acute or chronic hepatitis B complicates the pregnancy, childbirth or puerperium.
	B18.0	<i>Chronic viral hepatitis B with delta-agent</i>	
	B18.1	<i>Chronic viral hepatitis B without delta-agent</i>	
	O98.4	<i>Viral hepatitis complicating pregnancy, childbirth and the puerperium</i>	
	Z22.51	<i>Carrier of viral hepatitis B</i>	

CLASSIFICATION		
VIRAL HEPATITIS/TYPE	CODE/DESCRIPTION	GENERAL GUIDELINES/ISSUES
		assign O98.4 (along with and an additional code from B16 or B18, to specify the type of hepatitis). If the obstetric patient is a carrier assign Z22.51.
Hepatitis C	B17.1 <i>Acute hepatitis C</i>	<ul style="list-style-type: none"> When 'history of hepatitis C' is documented, coders should check with the clinician to determine if the patient still has signs of the disease. Where consultation is not possible, assign the code for carrier of viral hepatitis C (Z22.52). When documentation is unclear or ambiguous terms such as 'hepatitis C' or 'hepatitis C positive' are documented, recorded and the patient has symptoms of hepatitis C, coders should check/verify with the clinician to determine if the disease is at the acute or chronic stage. Where consultation is not possible, assign the code for chronic viral hepatitis C (B18.2). When 'past history of hepatitis C' is documented, assign the code for chronic viral hepatitis C (B18.2) except when documented with terms such as 'cured', 'cleared' or 'with SVR' – see 4. <i>Cured/cleared hepatitis C</i> below. When the patient is asymptomatic and ambiguous terms such as 'hepatitis C' or 'hepatitis C positive' are recorded, assign the code for carrier of viral hepatitis C (Z22.52). Concept of 'carrier (state) of viral hepatitis' is no longer clinically correct; therefore, Z22.52 <i>Carrier of viral hepatitis C</i> should never be assigned. O98.4 is assigned wWhere acute or chronic hepatitis C complicates the pregnancy, childbirth or puerperium, assign O98.4 (along with either and an additional code of B17.1 or B18.2, to specify the type of hepatitis). If the obstetric patient is a carrier assign Z22.52.
	B18.2 <i>Chronic viral hepatitis C</i>	
	O98.4 <i>Viral hepatitis complicating pregnancy, childbirth and the puerperium</i>	
	Z22.52 <i>Carrier of viral hepatitis C</i>	
Hepatitis D (with acute HBV)	B16.0 <i>Acute hepatitis B with delta-agent (coinfection) with hepatic coma</i>	<ul style="list-style-type: none"> When documentation is unclear or ambiguous terms such as 'hepatitis D', 'hepatitis D positive' or 'past history of hepatitis D' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign the code for chronic viral hepatitis B with delta-agent (B18.0).
	B16.1 <i>Acute hepatitis B with delta-agent (coinfection) without hepatic coma</i>	
Hepatitis D (with chronic HBV)	B18.0 <i>Chronic viral hepatitis B with delta-agent</i>	<ul style="list-style-type: none"> O98.4 is assigned wWhere acute or chronic hepatitis D complicates the pregnancy, childbirth or puerperium, assign O98.4 (along with and an additional code from B16, B17 or B18, to specify the type of hepatitis). If the obstetric patient is a carrier assign Z22.59.
	B17.0 <i>Acute delta-(super)infection of hepatitis B carrier</i>	
Hepatitis D	O98.4 <i>Viral hepatitis complicating pregnancy, childbirth and the puerperium</i>	<ul style="list-style-type: none"> Concept of 'carrier (state) of viral hepatitis' is no longer clinically correct; therefore, Z22.59 <i>Carrier of other specified viral hepatitis</i> should never be assigned. Z22.59 should be assigned only when there is no sign of active hepatitis D disease (hepatitis D carrier state).
	Z22.59 <i>Carrier of other specified viral hepatitis</i>	
Hepatitis E	B17.2 <i>Acute hepatitis E</i>	<ul style="list-style-type: none"> A past history or carrier of hepatitis E is not coded may be assigned when the history meets ACS 2112 <i>Personal history</i>. O98.4 is assigned wWhere hepatitis E complicates the pregnancy, childbirth or puerperium, assign O98.4 (along with and an additional code of B17.2 or B18.8, to specify the type of hepatitis).
	B18.8 <i>Other chronic viral hepatitis</i>	
	O98.4 <i>Viral hepatitis complicating pregnancy, childbirth and the puerperium</i>	
	Z86.18 <i>Personal history of other infectious and parasitic disease</i>	

3. Manifestations of hepatitis

When manifestation(s) of viral hepatitis are documented, assign code(s) for the manifestation(s) according to ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*, in addition to the code(s) for the viral hepatitis.

EXAMPLE 1:

Patient admitted for treatment of cirrhosis of liver due to hepatitis C.

Codes:	K74.6	<i>Other and unspecified cirrhosis of liver</i>
	B18.2	<i>Chronic viral hepatitis C</i>

EXAMPLE 2:

Patient admitted for treatment of liver failure due to hepatitis C cirrhosis.

Codes:	K72.9	<i>Hepatic failure, unspecified</i>
	K74.6	<i>Other and unspecified cirrhosis of liver</i>
	B18.2	<i>Chronic viral hepatitis C</i>

4. Cured/cleared hepatitis C

Antiviral therapy is used to treat patients with HCV infection, with the aim of virological cure. Therapy is for a defined time period, usually 24 or 48 weeks. HCV infection is considered to be successfully treated when SVR (sustained virological response) is attained. SVR is defined as the absence of HCV RNA in serum 24 weeks after discontinuing therapy (Ghany et al. 2009, p. 1341).

Spontaneous viral clearance after acute HCV infection occurs without treatment in 30–40% of people, usually within the first 6 months after infection.

When terms such as ‘cured hepatitis C’, ‘cleared hepatitis C’ or ‘hepatitis C with SVR’ are documented and the patient has:

- **manifestations:** assign code(s) for the manifestation(s) and B94.2 *Sequelae of viral hepatitis* when the manifestation(s) meet criteria for coding as per ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses* (see also 3. *Manifestations of hepatitis* above).
- **no manifestations:** assign Z86.18 *Personal history of other infectious and parasitic disease* when the history meets ACS 2112 *Personal history*.

EXAMPLE 3:

Patient with cured hepatitis C (achieved SVR on combined therapy of pegylated interferon and ribavirin) admitted for treatment of cirrhosis of liver caused by HCV.

Codes:	K74.6	<i>Other and unspecified cirrhosis of liver</i>
	B94.2	<i>Sequelae of viral hepatitis</i>

1.17. ACS 0112 Infection with drug resistant microorganisms

Refer section 21.3 Resistance to antimicrobial and antineoplastic drugs (page 272) for details of changes to ACS 0112 Infection with drug resistant microorganisms.

2. Neoplasms

2.1. Adult T-cell leukaemia/lymphoma

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

C91 Lymphoid leukaemia

C91.5 Adult T-cell leukaemia/lymphoma [(HTLV-1-associated)]

Acute	}	
Chronic	}	variant
Lymphomatoid	}	
Smouldering	}	

✧C91.50 Adult T-cell leukaemia/lymphoma [(HTLV-1-associated)], without mention of remission

✧C91.51 Adult T-cell leukaemia/lymphoma [(HTLV-1-associated)], in remission

2.2. Angiocentric immunoproliferative lesion

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Lesion (nontraumatic)

- alveolar process K08.9
- angiocentric immunoproliferative (M9766/3) ~~C83.8~~ C86.0
- anorectal K62.9

2.3. Benign neoplasm of bone and articular cartilage

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

D16 Benign neoplasm of bone and articular cartilage

~~Keratocystic odontogenic tumour~~

Excludes: connective tissue of:

- ear (D21.0)
- eyelid (D21.0)
- larynx (D14.1)
- nose (D14.0)
- synovia (D21.-)

2.4. Cervical intraepithelial lesion (low/high grade)

The WHO released updates for ICD-O for implementation from 1 January 2012. These updates introduced new morphology codes for squamous intraepithelial neoplasia, low grade (M8077/0) and squamous intraepithelial neoplasia, high grade (M8077/2) of the cervix which have been included in ICD-10-AM for Eighth Edition. A public submission was also received requesting this change.

ALPHABETIC INDEX OF DISEASES

Hexadactylism Q69.9

HGSIL (high grade squamous intraepithelial lesion)

— see *Lesion/cervix/intraepithelial/squamous/high grade*

Hibernoma (M8880/0) — see *Lipoma*

Lesion (nontraumatic)

- cerebrovascular I67.9
- cervical (nerve) root NEC G54.2
- cervix (uteri)
 - - intraepithelial, squamous (cell)
 - - - high grade (HGSIL) (HSIL) (M8077/2) D06.9
 - - - - endocervix D06.0
 - - - - exocervix D06.1
 - - - - specified NEC D06.7
 - - low grade (LGSIL) (LSIL) N87.0
- chiasmal H47.4

Leydig-Sertoli cell tumour (M8631/0)

- ...
- - male D29.2

LGSIL (low grade squamous intraepithelial lesion)

N87.0

Liar, pathologic F60.2

Neoplasia

- intraepithelial
- - anal
- ...
- - cervix (CIN) (uteri) N87.9
- - - adenocarcinoma in situ (M8148/2) D06.9
- ...
- - - grade III (severe dysplasia) (M8077/2) D06.9
- - - - endocervix D06.0
- - - - exocervix D06.1
- - - - specified NEC D06.7
- - - squamous (cell)
 - - - - high grade (HGSIL) (HSIL) (M8077/2) D06.9
 - - - - - endocervix D06.0
 - - - - - exocervix D06.1
 - - - - - specified NEC D06.7
- - - - low grade (LGSIL) (LSIL) N87.0
- - conjunctival H11.8
- - ductal, grade 3 (DIN 3) (M8500/2) D05.1
- - glandular, grade III (M8148/2) D07.5
- - prostatic (PIN)
 - - - grade I N42.3
 - - - grade II D07.5
 - - - grade III (PIN III) (M8148/2) D07.5
- - - squamous, grade III (M8077/2) — see *Neoplasm/in situ*
- - vagina (VAIN) N89.3

TABULAR LIST OF DISEASES

N87

Dysplasia of cervix uteri

N87.0

Mild cervical dysplasia
Cervical intraepithelial neoplasia [CIN], grade I
Low grade squamous intraepithelial lesion (LGSIL)

D06

Carcinoma in situ of cervix uteri

Includes: cervical intraepithelial neoplasia [CIN], grade III, with or without mention of severe dysplasia
high grade squamous intraepithelial lesion (HGSIL)

Excludes: melanoma in situ of cervix (D03.5)
severe dysplasia of cervix NOS (N87.2)

2.5. Chemotherapy wafer insertion, brain

Advice was published in *Coding Matters*, September 2007 (Vol. 14, No. 2) regarding the correct code assignment for chemotherapy wafer insertion into the brain. Chemotherapy wafers, often known by the brand name Gliadel® Wafers, are an increasingly popular approach for delivery of local chemotherapeutic agents into the brain in a controlled-release form. Numerous studies have indicated that the use of

chemotherapy wafers for the treatment of gliomas have shown improved survival with no marked increase in adverse effects. The coding advice has been incorporated into the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Implant, implantation — *see also Insertion*

- bone conduction hearing device 41557-02 [321]
- brain wafer, chemotherapy 96201-00 [1920]
- cardioverter, generator (automatic) (with pacemaker functionality) 38393-00 [653]

...

- ureter — *see also Reimplantation/ureter*
- - stimulator, electronic 90355-00 [1069]
- wafer, chemotherapy, intracerebral 96201-00 [1920]

Impression

Insertion

...

- bowel sphincter, artificial 32220-00 [940]
- brain wafer, chemotherapy 96201-00 [1920]
- button

...

- ventricular assist device
- - left 38615-00 [608]
- - - and right 38618-00 [608]
- - right 38615-01 [608]
- - - and left 38618-00 [608]
- wafer, chemotherapy, intracerebral 96201-00 [1920]
- wire or pin (orthopaedic) 47921-00 [1554]

2.6. Choroid plexus carcinoma (Indexing) (TN325)

A public submission was received highlighting that there was no index entry for choroid plexus carcinoma in ICD-10-AM. Consequently, the following change was included in the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Carcinoma (M8010/3) — *see also Neoplasm/malignant*

- chorionic (M9100/3)
- - specified site — *see Neoplasm/malignant*
- - unspecified site
- - - female C58
- - - male C62.9
- choroid plexus (lateral ventricle) (third ventricle) (M9390/3) C71.5
- - fourth ventricle C71.7
- chromophobe (M8270/3)

2.7. Coccygeal body or glomus neoplasm

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- coccygeal					
- - body or glomus	C49.575-5	C79.88	—	D21.535-6	D48.144-7
- - vertebra ♦	C41.4	C79.5	—	D16.8	D48.0
- coccyx ♦	C41.4	C79.5	—	D16.8	D48.0
...					
- glomus					
- - coccygeal	C49.575-5	C79.88	—	D21.535-6	D48.144-7
- - jugularis	C75.5	C79.88	—	D35.6	D44.7

2.8. Dermatofibrosarcoma (protuberans)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Dermatofibrosarcoma (protuberans) (M8832/3) — *see also* Neoplasm/skin/malignant
— protuberans (M8832/3)
- — pigmented (M8833/3) — *see* Neoplasm/skin/malignant
Dermatographia L50.3

2.9. Electrochemotherapy

Advice was published in *Coding Matters*, March 2010 (Vol. 16, No. 4) regarding the correct code assignment for *electrochemotherapy*. This advice has been incorporated into ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Destruction

- lesion (tumour)
...
- - skin (subcutaneous tissue) NEC 30192-00 [1612]
...
- - - diathermy
- - - - multiple lesions 30195-07 [1612]
- - - - single lesion 30195-06 [1612]
- - - electrochemotherapy — *see*
 Electrochemotherapy/skin lesion(s)
- - - electrodesiccation

Electrocardiography (ECG)

...
- signal averaged 11713-00 [1855]
Electrochemotherapy — *code to block [1920] with extension -00*
- skin lesion(s)
- - multiple 30195-07 [1612]
- - single 30195-06 [1612]
Electrocoagulation — *see* Coagulation, electrocoagulation

TABULAR LIST OF INTERVENTIONS

1612 Destruction of lesion of skin or cartilage

30195-06 Electrotherapy of lesion of skin, single lesion
Diathermy }
Electrodesiccation } of lesion of skin, single lesion
Fulguration }
Galvanocautery }

Code also when performed:

• administration of antineoplastic agent for electrochemotherapy (see block [1920])

Excludes: cauterisation of vascular anomaly (45027-00 [743])
diathermy of telangiectases of head or neck (30213-00 [743])

30195-07 Electrotherapy of lesion of skin, multiple lesions
Diathermy }
Electrodesiccation } of lesion of skin, multiple lesions
Fulguration }
Galvanocautery }

Code also when performed:

• administration of antineoplastic agent for electrochemotherapy (see block [1920])

Excludes: cauterisation of vascular anomaly (45027-00 [743])
diathermy of telangiectases of head or neck (30213-00 [743])

1920 Administration of pharmacotherapy

▼0042, 0044, 0102, 1316, 1615, 1923

-00 Antineoplastic agent
Agents used in the treatment of neoplasms and/or neoplasm related conditions

Code also when performed:• electrotherapy for skin lesion(s) (30195-06, 30195-07 [**1612**])*Excludes:* surgical catheterisation with administration of chemotherapeutic agent (see block [**741**])**2.10. Eyeball/intraocular neoplasm**

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- eye NEC	C69.9	C79.4	D09.2	D31.9	D48.7
- eyeball	C69.94	C79.4	D09.2	D31.94	D48.7
- eyebrow	C44.3	C79.2	D04.3	D23.3	D48.5
...					
- intracranial NEC	C71.9	C79.3	—	D33.2	D43.2
- intraocular	C69.94	C79.4	D09.2	D31.94	D48.7
- intraorbital	C69.6	C79.4	D09.2	D31.6	D48.7

TABULAR LIST OF DISEASES**C69 Malignant neoplasm of eye and adnexa**

C69.4 Ciliary body
~~Eyeball~~

C69.9 Eye, unspecified
~~Eyeball~~

D31 Benign neoplasm of eye and adnexa

D31.4 Ciliary body
~~Eyeball~~

D31.9 Eye, unspecified
~~Eyeball~~

2.11. Hodgkin lymphoma

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

C81 Hodgkin lymphoma

▼0222

C81.1 Nodular sclerosis (classical) Hodgkin lymphoma

C81.2 Mixed cellularity (classical) Hodgkin lymphoma

C81.3 Lymphocyte depleted (classical) Hodgkin lymphoma

C81.4 Lymphocyte-rich (classical) Hodgkin lymphoma

Excludes: nodular lymphocytic predominant Hodgkin lymphoma (C81.0)

C81.7 Other (classical) Hodgkin lymphoma
Classic Hodgkin lymphoma, type not specified

2.12. Insertion of seeds/fiducial markers into prostate

Following receipt of several queries and a public submission, amendments were made to ACHI to clarify and improve the coding of insertion of fiducial markers into the prostate.

Further to this update, the Medicare Benefits Schedule (MBS) released a new item number for the insertion of gold fiducial seeds into the prostate as markers for image guided radiotherapy (IGRT).

Image guided radiotherapy uses imaging to direct the radiation treatment to the appropriate anatomy and is a form of external radiation. Fiducial markers are implantable devices used as a tool in image-guided radiotherapy (IGRT). The markers may be called fiducial markers or gold seed markers. Gold seeds are the most frequently used markers. The seeds are inserted into the prostate via a needle using transrectal ultrasound. Several days after insertion of the seeds treatment is commenced.

A new code has been created in ACHI for insertion of fiducial markers into the prostate for radiotherapy: 37217-00 [1160] *Implantation of fiducial marker, prostate*. Where radiotherapy is delivered in the same episode, it should be coded as an additional diagnosis.

Image-guided radiotherapy (IGRT) is a different treatment to brachytherapy. Brachytherapy is a form of internal radiotherapy where the radiation source is placed inside the body, either in or near to the tumour.

There are two types of brachytherapy used for prostate cancer: low dose rate brachytherapy and high dose rate brachytherapy.

Low dose rate (LDR) brachytherapy is a permanent implantation of radioactive seeds into the prostate. The needles or catheters are firstly inserted through the perineum into the prostate to deliver the radioactive seeds into the prostate. The needles are then removed leaving the seeds in place. Once the radioactive seeds are in place, they slowly release low dose radiation to the surrounding prostate tissue. After a few months the seeds gradually become inactive but remain in place permanently.

High dose rate (HDR) brachytherapy is a technique using an intensive source of radiation to deliver radiation directly into a prostate tumour. Treatment is initiated in the operating theatre where the needles or implant tubes are inserted into the prostate similar to LDR brachytherapy. Patients are then later transferred to the radiation oncology department where the needles/tubes are connected to an automated remote-controlled loading machine which starts radiation. The total irradiation time is usually only 5-10 minutes and patients require multiple treatments. In most instances, patients will come back one or two weeks later to have external beam radiotherapy to prevent microscopic cancer spread.

Brachytherapy, both low dose and high dose rate, therefore embraces two components and requires two codes to be accurately classified: the applicator insertion and the radiation. In low dose rate (LDR) the radiation from radioactive seeds starts immediately following the needle insertion, while in high dose rate (HDR) the applicator insertion and radiation are separate procedures but usually performed in the same admission. Therefore, two codes are required to classify brachytherapy using either technique: 37227-00 [1160] *Implantation of brachytherapy applicator, prostate* and 15338-00 [1792] *Brachytherapy*.

As gold seeds can be inserted for either external radiotherapy or internal low dose rate brachytherapy, they are not always radioactive. Whether or not they are radioactive will depend on their purpose. When they are being used for low dose brachytherapy they will be radioactive. When they are being used as 'fiducial markers' for radiotherapy planning, they will not be radioactive.

The following amendments were made to ACHI for Eighth Edition:

- Tabular List: revised and created codes in block [1160] *Application, insertion or removal procedures on prostate or seminal vesicle*
- Alphabetic Index: amended to support the above changes

ALPHABETIC INDEX OF INTERVENTIONS

Brachytherapy

- with implantation of
- - permanent implant
- ...
- - radioactive seed
- - - intravascular 15360-00 [1792]
- - - prostate 37227-00 [1160]
- - removable plane, planes

Implant, implantation — see also Insertion

- device
- - cardiac
- ...
- - neurostimulator — see *Implant, implantation/neurostimulator*
- - prostate NEC 90409-00 [1160]
- - prosthetic — see *Implant, implantation/prosthesis, prosthetic device*
- ...
- expander (skin) (soft tissue) (subcutaneous tissue)
- see *Insertion/tissue expander*
- fiducial marker(s), prostate (fiducial seed) (fiduciary marker) (gold fiducial marker) 37217-00 [1160]
- generator

Insertion

- device — see also *Insertion/by type of device*
- - for female sterilisation (bilateral) (hysteroscopic) (microcoil) (unilateral) 35688-01 [1257]
- ...
- - erection, artificial (inflatable) 37426-01 [1191]
- - - noninflatable 37426-00 [1191]
- - - pump 37429-00 [1191]
- - - - with pressure regulating reservoir 37429-00 [1191]
- - fiducial marker(s), prostate (fiducial seed) (fiduciary marker) (gold fiducial marker) 37217-00 [1160]
- - fixation, internal
- ...
- - peritoneal access (port-catheter) 90376-00 [983]
- - - with replacement 90376-01 [983]
- - prostate NEC 90409-00 [1160]
- - silastic implant, thyroid cartilage 90150-00 [531]
- ...
- fibrin sealant (biological) (glue)
- - anorectal 90344-00 [929]
- ...
- - vesicovaginal 90447-00 [1284]
- fiducial marker(s), prostate (fiducial seed) (fiduciary marker) (gold fiducial marker) 37217-00 [1160]
- filter

TABULAR LIST OF INTERVENTIONS

1160

Application, insertion or removal procedures on prostate or seminal vesicle

37227-00 Implantation of brachytherapy applicator, prostate
Insertion of catheters (needles) into prostate for brachytherapy

Includes: cystoscopy
ultrasound

Note: Radioactive (gold) seeds for brachytherapy

Code also: ~~when performed:~~

- brachytherapy, prostate (15338-00 [1792])

Excludes: that for radiotherapy planning (37217-00 [1160])

37217-00 Implantation of fiducial marker, prostate

Note: Marker for radiotherapy planning

Excludes: that for brachytherapy (37227-00 [1160])

90409-00 Implantation of other device(s), prostate

2.13. Kimura disease

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Disease, diseased — *see also Syndrome*

- kidney (functional) (pelvis) N28.9

- - with

...

- tubular (*see also Nephritis/tubulointerstitial*) N12

- Kimura (M9120/0) D21.9

- kissing B27.9

Kimmelstiel-Wilson disease or syndrome (diabetic glomerulosclerosis) E1-.22

- with end-stage kidney disease (ESKD) E1-.22

Kimura disease (M9120/0) D21.9

- *specified site* — *see Neoplasm/connective tissue/benign*

Kink

2.14. Klatskin tumour

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Kissing spine M48.2-

Klatskin tumour (M8162/3) C22.4C24.0

Tumour (M8000/1) — *see also Neoplasm/uncertain behaviour*

- Klatskin (M8162/3) C22.4C24.0

2.15. Lymphoid/Lymphomatoid granulomatosis

The WHO 2008 leukaemia/lymphoma updates to Seventh Edition reclassified *lymphoid/lymphomatoid granulomatosis* from D47.7 *Other specified neoplasm of uncertain or unknown behaviour* to C83.8 *Other non-follicular lymphoma*. Following clinical advice, the morphology code was reclassified from M9766/1 *Angiocentric immunoproliferative lesion* to M9766/3 *Angiocentric immunoproliferative lesion*.

In ICD-10-AM Seventh Edition, the morphology code (M9766/3) was included in the index for *lymphomatoid granulomatosis*. However, it was not included in the ICD-10-AM Tabular List - *Appendix A: Morphology of neoplasms*. As a result, this code was not included in the Electronic Code List (ECL) and its use created an error when assigned.

The following changes have been made to the ICD-10-AM Tabular List for Eighth Edition – *Appendix A: Morphology of neoplasms*.

TABULAR LIST OF DISEASES

APPENDIX A

MORPHOLOGY OF NEOPLASMS

M976

Immunoproliferative diseases

M9766/43

Angiocentric immunoproliferative lesion

2.16. Lymphomatoid papulosis

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASE

Papule(s) R23.8

...

- pinta (primary) A67.0

Papulosis, lymphomatoid (M9718/3) ~~L41.2~~ C86.6

Papyraceous fetus P95

TABULAR LIST OF DISEASE

C86 Other specified types of T/NK-cell lymphoma

▼0222, 0233

C86.6 Primary cutaneous CD30-positive T-cell proliferations

Lymphomatoid papulosis

Primary cutaneous:

- anaplastic large cell } lymphoma
- CD30-positive large T-cell }

L41 Parapsoriasis

~~L41.2 Lymphomatoid papulosis~~

▼0233

Includes: ~~morphology code M9718 with behaviour code /3~~

Note: ~~Lymphomatoid papulosis is now classified in ICD-O Third Edition as a malignant neoplasm of the skin with a morphology code of M9718/3. The code L41.2 will continue to be used (although it is located in the chapter Diseases of the skin and subcutaneous tissue).~~

2.17. Malignant immunoproliferative disease

In 2009 and 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meetings in Seoul and Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

C88 ~~Other B-cell lymphoma [m~~ **Malignant immunoproliferative diseases]**

C88 Other B-cell lymphoma [m **Malignant immunoproliferative diseases]**

▼0222

The following fifth character subdivisions are for use with subcategories ~~C88.0-C88.9~~:

- ✱ 0 without mention of remission
- ✱ 1 in remission

C92.1 Chronic myeloid leukaemia [CML], BCR/ABL-positive

Chronic myelogenous leukaemia:

- Philadelphia chromosome (Ph1) positive

- t(9;22) (q34;q11)
- with crisis of blast cells

Excludes: atypical chronic myeloid leukaemia, BCR/ABL-negative (C92.2)
chronic myelomonocytic leukaemia (C93.1-)
unclassified myeloproliferative disease (D47.1)

AUSTRALIAN CODING STANDARDS

0245 REMISSION IN MALIGNANT IMMUNOPROLIFERATIVE DISEASES AND LEUKAEMIA

This standard is provided to assist in determining when to assign the fifth characters for ‘in remission’ and ‘without mention of remission’ for categories C88 ~~Other B-cell lymphoma from~~ *Malignant immunoproliferative diseases*, C90 *Multiple myeloma and malignant plasma cell neoplasms* and C91–C95 *Leukaemia*. It also provides guidance in the distinction between the concepts of ‘in remission’ and ‘history of’ in relation to these conditions. A definite cure, and therefore assignment of a ‘history’ code, may vary greatly from disease to disease and can only be applied retrospectively. The distinction therefore, after clinical consultation, is made on the basis of continuing treatment of the malignancy, rather than a set time-frame.

...

CLASSIFICATION

This standard relates only to the following categories:

- C88.- ~~Other B-cell lymphoma from~~ *Malignant immunoproliferative diseases*
C90.- *Multiple myeloma and malignant plasma cell neoplasms*

2.18. Mature B-cell leukaemia Burkitt-type

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASE

C91.8 Mature B-cell leukaemia Burkitt-type

Excludes: Burkitt lymphoma with little or no bone marrow infiltration (C83.7)

2.19. Monoclonal macroglobulinaemia (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASE

Macroglobulinaemia (idiopathic) (primary) C88.0-
- monoclonal (essential) D47.2
- Waldenström (M9761/3) C88.0-

2.20. Neoplasm Index Table – Point 4

A query was received regarding discrepancies in the flags for note 4 of the Neoplasm Table. The sites indexed under *bone* are flagged, however when looking up *marrow*, *temporal*, *bone*, and *vomer* in their own right under the main term of *Neoplasm*, they are not flagged for note 4.

Consequently, the symbol '◆' as per point 4 of the note at the Neoplasm Table of the Alphabetic Index has been added at the index entries below for ICD-10-AM Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- jaw	C76.0	C79.88	D09.7	D36.7	D48.7
- - bone ◆	C41.1	C79.5	—	D16.5	D48.0
- - - lower ◆	C41.1	C79.5	—	D16.5	D48.0
- - - upper ◆	C41.02	C79.5	—	D16.42	D48.0
- - carcinoma (any type) (lower) (upper)	C76.0	C79.88	—	—	—
...					
- malar (<i>see also</i> Neoplasm/cheek) ◆	C41.02	C79.5	—	D16.42	D48.0
- mammary gland — <i>see</i> Neoplasm/breast					
- mandible ◆	C41.1	C79.5	—	D16.5	D48.0
- - alveolar					
- - - carcinoma (mucosa)	C03.1	C79.88	—	—	—
- - - mucosa	C03.1	C79.88	D00.0	D10.3	D37.0
- - - ridge or process ◆	C41.1	C79.5	—	D16.5	D48.0
- marrow (bone) ◆	C96.9	C79.5	—	—	D47.9
- mastoid (air cell) (antrum) (cavity)	C30.1	C78.3	D02.3	D14.0	D38.5
- - bone or process ◆	C41.01	C79.5	—	D16.41	D48.0
- maxilla, maxillary (superior) ◆	C41.02	C79.5	—	D16.42	D48.0
- - alveolar					
- - - carcinoma (mucosa)	C03.0	C79.88	—	—	—
- - - mucosa	C03.0	C79.88	D00.0	D10.3	D37.0
- - - ridge or process ◆	C41.02	C79.5	—	D16.42	D48.0
- - antrum	C31.0	C78.3	D02.3	D14.0	D38.5
...					
- temporal					
- - bone ◆	C41.01	C79.5	—	D16.41	D48.0
- - pole or lobe	C71.2	C79.3	—	D33.0	D43.0
...					
- vocal cord (true)	C32.0	C78.3	D02.0	D14.1	D38.0
- - false	C32.1	C78.3	D02.0	D14.1	D38.0
- vomer ◆	C41.02	C79.5	—	D16.42	D48.0
- vulva	C51.9	C79.82	D07.1	D28.0	D39.7

2.21. Neoplasm of urethrovaginal septum (Indexing)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- urethra, urethral (gland)	C68.0	C79.1	D09.1	D30.4	D41.3
- - orifice, internal	C67.5	C79.1	D09.0	D30.3	D41.4
- urethrovaginal (septum)	C57.9	C79.82	D07.3	D28.9	D39.7
- - septum	C57.9	C79.82	D07.3	D28.9	D39.7
- urinary organ or system NEC	C68.9	C79.1	D09.1	D30.9	D41.9

.....					
- vesicovaginal	C57.9	C79.82	D07.3	D28.9	D39.7
- - septum	C57.9	C79.82	D07.3	D28.9	D39.7
- vessel (blood) — see <i>Neoplasm/connective tissue</i>					

2.22. Neoplastic disease, generalised (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Disease, diseased — see also *Syndrome*

- neoplastic (malignant), generalised (M8000/6) C79.9

— primary site

— not indicated C80.9

— unknown, so stated C80.0

- nerve — see *Disorder/nerve*

2.23. Non-small cell lung carcinoma (*Indexing*)

A public submission was received regarding indexing of *non-small cell lung carcinoma* (NSCLC). NSCLC can be further divided into adenocarcinoma, squamous cell carcinoma and large cell carcinoma histologies. Sometimes the phrase 'non-small cell lung carcinoma' is used generically, usually when a more specific diagnosis cannot be made. Consequently, the following amendment was made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Carcinoma (M8010/3) — see also *Neoplasm/malignant*

- noninfiltrating (M8010/2)

- - intracystic (M8504/2) — see *Neoplasm/in situ*

...

- - lobular (M8520/2)

- - - breast D05.0

- - - specified site NEC — see *Neoplasm/in situ*

- - - unspecified site D05.0

- non-small cell NEC (M8046/3) — see *Neoplasm/lung/malignant*

- oat cell (M8042/3)

2.24. Peritonectomy/cytoreduction surgery (CRS)

A public submission requested a new ACHI code for the classification of peritonectomy/cytoreduction surgery performed for treatment of disseminated carcinoma.

Refer section 11.31 Peritonectomy/cytoreduction surgery (CRS) (page 193) for further details.

2.25. Phaeochromocytoma (*Spelling inconsistency*)

Some instances of American spelling were highlighted in the ICD-10-AM Alphabetic Index. For consistency the following terms have been corrected from American to English spelling in ICD-10-AM Eighth Edition:

- Pheochromoblastoma to Phaeochromoblastoma
- Pheochromocytoma to Phaeochromocytoma
- Pheohyphomycosis to Phaeohyphomycosis
- Pheomycosis to Phaeomycosis

ALPHABETIC INDEX OF DISEASE

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (primary) (systemic) I10

- due to
 - endocrine disorders I15.2
 - kidney disorder NEC I15.1
 - arterial I15.0
 - phaeochromocytoma I15.2
 - renovascular disorders I15.0

- ...
- secondary NEC I15.9
 - due to
 - endocrine disorders I15.2
 - kidney disorders NEC I15.1
 - arterial I15.0
 - phaeochromocytoma I15.2
 - renovascular disorders I15.0

Pfeiffer's disease B27.0

Phaeochromoblastoma (M8700/3)

- in situ (M8700/2)
- specified site — *see Neoplasm/malignant*
- uncertain or unknown behaviour (M8700/1)
- unspecified site C74.1

Phaeochromocytoma (M8700/0)

- in situ (M8700/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- malignant (M8700/3)
- - specified site — *see Neoplasm/malignant*
- - unspecified site C74.1
- specified site — *see Neoplasm/benign*
- uncertain or unknown behaviour (M8700/1) D44.1

- unspecified site D35.0

Phaeohyphomycosis (*see also Chromomycosis*) B43.9

Phaeomycosis — *see Chromomycosis*

Phagedaena (dry) (moist) (*see also Gangrene*) R02

Phenylketonuria E70.1

- classical E70.0
- maternal E70.1

Pheochromoblastoma (M8700/3)

- specified site — *see Neoplasm/malignant*
- unspecified site C74.1

Pheochromocytoma (M8700/0)

- malignant (M8700/3)
- - specified site — *see Neoplasm/malignant*
- - unspecified site C74.1
- - specified site — *see Neoplasm/benign*
- - unspecified site D35.0

Phaeohyphomycosis (*see also Chromomycosis*) B43.9

Phaeomycosis — *see Chromomycosis*

Phimosis (congenital) (due to infection) N47

Secretion

- catecholamine, by phaeochromocytoma E27.5
- hormone
 - by
 - carcinoid tumour E34.0
 - phaeochromocytoma E27.5
 - antidiuretic, inappropriate (syndrome) E22.2

2.26. Plasma cell myeloma (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Myeloma (multiple) (M9732/3) C90.0-

- monostotic (M9731/3) C90.3-
- - plasma cell (M9732/3) ~~C90.3~~ C90.0-
- plasma cell (M9732/3) C90.0-

2.27. Removal of nasopharyngeal tumour

The description of MBS item 41767 was amended to expand the range of surgical approaches that may be used for removal of nasopharyngeal tumours. These changes have been included in ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Excision — *see also Removal*

- lesion(s) — *see also Excision/tumour AND Excision/cyst AND Excision/polyp*

- - with panendoscopy (to duodenum) 30478-04 [1008]

...

- - nasal sinus

...

- - nasopharynx (transpalatal) 41767-00 [421]

- - nerve

TABULAR LIST OF INTERVENTIONS

421 Other excision procedures on pharynx

41767-00 Removal of lesion of nasopharynx, ~~transpalatal approach~~

Includes: transnasal } approach
 transpalatal }

2.28. Resistance to antimicrobial and antineoplastic drugs

Refer section 21.3 Resistance to antimicrobial and antineoplastic drugs (page 272) for further details.

2.29. Secondary malignant neoplasm of bile canal (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- bile or biliary (tract)	C24.9	C78.8	D01.5	D13.5	D37.6
- - canals, interlobular	C22.1	C78.8Z	D01.5	D13.4	D37.6
- - duct or passage (common) (cystic) (extrahepatic)	C24.0	C78.8	D01.5	D13.5	D37.6
- - - interlobular	C22.1	C78.8Z	D01.5	D13.4	D37.6
- - - intrahepatic	C22.1	C78.7	D01.5	D13.4	D37.6
- - - - with extrahepatic	C24.8	C78.8	D01.5	D13.5	D37.6
- bladder (urinary)	C67.9	C79.1	D09.0	D30.3	D41.4
...					
- canaliculi					
- - biliferi	C22.1	C78.8Z	D01.5	D13.4	D37.6
- - intrahepatic	C22.1	C78.7	D01.5	D13.4	D37.6
- canthus (eye) (inner) (outer)	C44.1	C79.2	D04.1	D23.1	D48.5
...					
- choana	C11.3	C79.88	D00.0	D10.6	D37.0
- cholangiole	C22.1	C78.8Z	D01.5	D13.4	D37.6

- choledochal duct	C24.0	C78.8	D01.5	D13.5	D37.6
...					
- Virchow's gland	C77.0	C77.0	—	D36.0	D48.7
- viscera NEC	C76.7	C79.88	—	D36.7	D48.7

2.30. Telangiectatic focal nodular hyperplasia (TFNH) of liver (*Indexing*)

A public submission was received requesting an index entry for telangiectatic focal nodular hyperplasia (TFNH) of the liver. Focal nodular hyperplasia (FNH) is a benign, firm, nodular, highly vascular tumour of the liver, resembling cirrhosis. TFNH is characterised by marked vascular disorders, including sinusoidal dilatation, peliosis, and abnormally enlarged arteries, without significant fibrosis. The ICD-10-AM Alphabetic Index has been updated in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Flutter

...

- ventricular I49.0

FNH (focal nodular hyperplasia), of liver K76.8

- telangiectatic (TFNH) (M8170/0) D13.4

Fochier's abscess — see *Abscess/by site*

Hyperplasia, hyperplastic

- liver (congenital) Q44.79

- - nodular, focal (FNH) K76.8

- - - telangiectatic (TFNH) (M8170/0) D13.4

- lymph gland or node R59.9

Tetrasomy 12p (Pallister mosaic syndrome tetrasomy 12p) Q99.8

TFNH (telangiectatic focal nodular hyperplasia), of liver (M8170/0) D13.4

Thalassaemia (anaemia) (disease) D56.9

2.31. Tumour of uncertain or unknown behaviour of pancreas

A DRG public submission highlighted that neoplasms of uncertain or unknown behaviour of the pancreas were being inappropriately grouped to MDC 06 *Diseases and disorders of the digestive system*. On review it was identified that this was because in ICD-10 neoplasms of uncertain or unknown behaviour of pancreas are classified to D37.7 *Neoplasm of uncertain or unknown behaviour of other digestive organs*.

The following amendments were made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Adenoma (M8140/0) — see also *Neoplasm/benign*
- alpha-cell (M8152/1) — see also *Neoplasm/uncertain behaviour*

- - pancreas D37.71

- - specified site NEC — see *Neoplasm/uncertain behaviour*

- - unspecified site D37.71

- alveolar (M8251/0) D14.3

Gastrinoma (M8153/1)

- specified site — see *Neoplasm/uncertain behaviour*

- unspecified site D37.79

Gastritis (simple) K29.70

Glucagonoma

...

- unspecified site

- - in situ (M8152/2) D01.7

- - malignant (M8152/3) C25.4

- - uncertain or unknown behaviour (M8152/1) D37.71

Insulinoma

- pancreas

...

- - malignant (M8151/3) C25.4

- - uncertain or unknown behaviour (M8151/1) D37.71

- specified site NEC

- unspecified site

- - benign (M8151/0) D13.7

- - in situ (M8151/2) D01.7

- - malignant (M8151/3) C25.4

- - uncertain or unknown behaviour (M8151/1) D37.71

Insuloma (M8151/0) — see *Insulinoma*

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- anorectum, anorectal (junction)	C21.8	C78.5	D01.3	D12.9	D37.79
- antecubital fossa or space #	C76.4	C79.88	D04.6	D36.7	D48.7
- antrum (Highmore) (maxillary)	C31.0	C78.3	D02.3	D14.0	D38.5
- - pyloric	C16.3	C78.8	D00.2	D13.1	D37.1
- - tympanicum	C30.1	C78.3	D02.3	D14.0	D38.5
- anus, anal	C21.0	C78.5	D01.3	D12.9	D37.79
- - canal	C21.1	C78.5	D01.3	D12.9	D37.79
- - margin	C44.5	C79.2	D04.5	D23.5	D48.5
- - skin	C44.5	C79.2	D04.5	D23.5	D48.5
- - sphincter	C21.1	C78.5	D01.3	D12.9	D37.79
- aorta (thoracic)	C49.3	C79.88	-	D21.3	D48.1
...					
- canal					
- - anal	C21.1	C78.5	D01.3	D12.9	D37.79
- - auditory (external)	C44.2	C79.2	D04.2	D23.2	D48.5
- - auricular (external)	C44.2	C79.2	D04.2	D23.2	D48.5
...					
- clivus ♦	C41.01	C79.5	-	D16.41	D48.0
- cloacogenic zone	C21.2	C78.5	D01.3	D12.9	D37.79
- coccygeal					
...					
- cricopharynx	C13.0	C79.88	D00.0	D10.7	D37.0
- crypt of Morgagni	C21.8	C78.5	D01.3	D12.9	D37.79
- cutaneous — see <i>Neoplasm/skin</i>					
...					
- haematopoietic, haemopoietic tissue NEC	C96.9	-	-	-	D47.9
- haemorrhoidal zone	C21.1	C78.5	D01.3	D12.9	D37.79
- hand NEC #	C76.4	C79.88	D04.6	D36.7	D48.7
...					
- insula	C71.0	C79.3	-	D33.0	D43.0
- insular tissue (pancreas)	C25.4	C78.8	D01.7	D13.7	D37.71
- - brain	C71.0	C79.3	-	D33.0	D43.0
- interarytenoid fold	C13.1	C79.88	D00.0	D10.7	D37.0
...					
- intervertebral cartilage or disc ♦	C41.2	C79.5	-	D16.6	D48.0
- intestine, intestinal	C26.0	C78.5	D01.4	D13.9	D37.79
- - large	C18.9	C78.5	D01.0	D12.6	D37.4
...					
- - small	C17.9	C78.4	D01.4	D13.3	D37.2
- - - duodenum	C17.0	C78.4	D01.4	D13.2	D37.2
- - - ileum	C17.2	C78.4	D01.4	D13.3	D37.2
- - - jejunum	C17.1	C78.4	D01.4	D13.3	D37.2
- - tract NEC	C26.0	C78.5	D01.4	D13.9	D37.79
...					
- island of Reil	C71.0	C79.3	-	D33.0	D43.0
- islands or islets of Langerhans	C25.4	C78.8	D01.7	D13.7	D37.71
- isthmus uteri	C54.0	C79.82	D07.3	D26.1	D39.0
...					
- junction					
- - anorectal	C21.8	C78.5	D01.3	D12.9	D37.79
- - cardio-oesophageal	C16.0	C78.8	D00.2	D13.1	D37.1
...					
- Langerhans, islands or islets	C25.4	C78.8	D01.7	D13.7	D37.71
- laryngopharynx	C13.9	C79.88	D00.0	D10.9	D37.0
...					
- oesophagogastric junction	C16.0	C78.8	D00.2	D13.1	D37.1
- oesophagus	C15.9	C78.8	D00.1	D13.0	D37.79
- - abdominal	C15.2	C78.8	D00.1	D13.0	D37.79
- - cervical	C15.0	C78.8	D00.1	D13.0	D37.79
- - distal (third)	C15.5	C78.8	D00.1	D13.0	D37.79
- - lower (third)	C15.5	C78.8	D00.1	D13.0	D37.79
- - middle (third)	C15.4	C78.8	D00.1	D13.0	D37.79
- - proximal (third)	C15.3	C78.8	D00.1	D13.0	D37.79
- - thoracic	C15.1	C78.8	D00.1	D13.0	D37.79

- - upper (third)	C15.3	C78.8	D00.1	D13.0	D37.79
- olfactory nerve or bulb	C72.2	C79.4	—	D33.3	D43.3
...					
- pancreas	C25.9	C78.8	D01.7	D13.6	D37.71
- - body	C25.1	C78.8	D01.7	D13.6	D37.71
- - duct (of Santorini) (of Wirsung)	C25.3	C78.8	D01.7	D13.6	D37.71
- - head	C25.0	C78.8	D01.7	D13.6	D37.71
- - islet cells	C25.4	C78.8	D01.7	D13.7	D37.71
- - neck	C25.7	C78.8	D01.7	D13.6	D37.71
- - tail	C25.2	C78.8	D01.7	D13.6	D37.71
- para-aortic body	C75.5	C79.88	—	D35.6	D44.7
...					
- sphincter					
- - anal	C21.1	C78.5	D01.3	D12.9	D37.79
- - of Oddi	C24.0	C78.8	D01.5	D13.5	D37.6
- spine, spinal (column) ♦	C41.2	C79.5	—	D16.6	D48.0
- - bulb	C71.7	C79.4	—	D33.1	D43.1
...					
- - sacrum ♦	C41.4	C79.5	—	D16.8	D48.0
- spleen, splenic NEC	C26.1	C78.8	—	D13.9	D37.79
- - flexure (colon)	C18.5	C78.5	D01.0	D12.3	D37.4
...					
- windpipe	C33	C78.3	D02.1	D14.2	D38.1
- Wirsung's duct	C25.3	C78.8	D01.7	D13.6	D37.71
- Wolffian (body) (duct)					

Tumour (M8000/1) — see also Neoplasm/uncertain behaviour

- alpha-cell (M8152/1)	
- - malignant (M8152/3)	
- - - pancreas C25.4	
- - - specified site NEC — see <i>Neoplasm/malignant</i>	
- - - unspecified site C25.4	
- - pancreas D37.71	
- - specified site NEC — see <i>Neoplasm/uncertain behaviour</i>	
- - unspecified site D37.71	
- aneurysmal (see also <i>Aneurysm</i>) I72.9	
...	
- G cell (M8153/1)	
- - malignant (M8153/3)	
...	
- - specified site — see <i>Neoplasm/uncertain behaviour</i>	
- - unspecified site D37.79	
- gastrin cell (M8153/1)	
...	
- islet cell (M8150/1) D37.71	
- - benign (M8150/0) D13.7	
...	
- - pancreas	
- - - benign (M8150/0) D13.7	
- - - malignant (M8150/3) C25.4	
- - - uncertain or unknown behaviour (M8150/1) D37.71	
- - specified site NEC	
- - - benign (M8150/0) — see <i>Neoplasm/benign</i>	
- - - malignant (M8150/3) — see <i>Neoplasm/malignant</i>	
- - - uncertain or unknown behaviour (M8150/1) — see <i>Neoplasm/uncertain or unknown behaviour</i>	
- - uncertain or unknown behaviour (M8150/1) D37.71	

--- specified site NEC — see *Neoplasm/uncertain or unknown behaviour*

- juxtaglomerular (M8361/0) D30.0
...
- papillary (M8050/0) — see also <i>Papilloma</i>
- - cystic (M8452/1) D37.71
...
- solid
- - and cystic (M8452/1) D37.71
- - pseudopapillary (M8452/1) D37.71
- somatostatin cell (M8156/1) — see also <i>Neoplasm/uncertain behaviour</i>
- - in situ (M8156/2) — see <i>Neoplasm/in situ</i>
- - malignant (M8156/3) — see <i>Neoplasm/malignant</i>
...
- stromal (M8935/1)
- - with minor sex cord elements (M8593/1) D39.1
- - - in situ (M8593/2) D07.3
- - benign (M8935/0) D26.1
- - epithelial, calcifying nested (M8975/1) D37.6
- - gastrointestinal (GIST) (of uncertain malignant potential) NEC (M8936/1) D37.9
- - - benign (M8936/0) — see <i>Neoplasm/benign</i>
- - - colon D37.4
- - - malignant (M8936/3) — see <i>Neoplasm/malignant</i>
- - - oesophagus D37.79
- - - peritoneum D48.4
- - - rectum D37.5
- - - small intestine D37.2
- - - specified site NEC D37.79
- - - stomach D37.1
- - gonadal (M8590/1)

TABULAR LIST OF DISEASES

D37 Neoplasm of uncertain or unknown behaviour of oral cavity and digestive organs

D37.7 — Other digestive organs

Anal:

- canal
- sphincter

Anus NOS

Intestine NOS

Oesophagus

Excludes: anal:

- margin (D48.5)
- skin (D48.5)
- perianal skin (D48.5)

D37.7

Other digestive organs

☛D37.71 Pancreas

☛D37.79 Other specified digestive organs

Anal:

- canal
- sphincter

Anus NOS

Intestine NOS

Oesophagus

Excludes: anal:

- margin (D48.5)
- skin (D48.5)
- perianal skin (D48.5)

D37.9 Digestive organ, unspecified

D44

Neoplasm of uncertain or unknown behaviour of endocrine glands

Excludes: endocrine pancreas (D37.71)
ovary (D39.1)
testis (D40.1)
thymus (D38.4)

D48

Neoplasm of uncertain or unknown behaviour of other and unspecified sites

D48.5

Skin

Anal:

- margin
- skin

Perianal skin

Skin of breast

Excludes: anus NOS (D37.79)
skin of genital organs (D39.7, D40.7)
vermillion border of lip (D37.0)

2.32. Xanthoma, Xanthomatosis, bone (generalisata) (Indexing)

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Xanthoma(s), xanthomatosis (familial) (hereditary) (primary) E75.5

- bone (generalisata) (M9751/3) C96.5

- cerebrotendinous E75.5

2.33. ACS 0044 Chemotherapy

A public submission was received suggesting that a reference to ACS 0044 *Chemotherapy* be included in ACS 0042 *Procedures normally not coded* to ensure that users refer to this standard and ensure chemotherapy is coded appropriately.

Refer section 26.12 ACS 0042 Procedures normally not coded and ACS 0044 Chemotherapy (page 303) for details of changes to ACS 0042.

2.34. ACS 0219 Mastectomy for malignancy on biopsy (Deleted)

A review of this standard highlighted that it did not provide any additional information to what was already provided in ACS 0236 *Neoplasm coding and sequencing*. Therefore ACS 0219 *Mastectomy for malignancy on biopsy* has been deleted for ACS Eighth Edition.

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

2. Neoplasms

0236	Neoplasm coding and sequencing
0218	Lymphangitis carcinomatosa
0219	Mastectomy for malignancy found on biopsy
0222	Lymphoma

~~0219 — MASTECTOMY FOR MALIGNANCY FOUND ON BIOPSY~~

~~When malignancy is shown on breast biopsy but no malignant cells are found in mastectomy specimen, code to the original diagnosis shown on biopsy.~~

2.35. ACS 0229 Radiotherapy

In response to a query regarding the correct code assignment for radiotherapy performed multiple times during an episode of care, a specific instruction has been incorporated into ACS 0229 *Radiotherapy* for Eighth Edition. ACS 1404 *Admission for Kidney dialysis* has also been updated for consistency of wording and amendments have been made at ACS 0020 *Bilateral/multiple procedures*.

AUSTRALIAN CODING STANDARDS

Refer section 14.13 ACS 1404 Admission for kidney dialysis (page 232) for details of changes to ACS 1404 Admission for kidney dialysis

Refer section 26.6 ACS 0020 Bilateral/multiple procedures (page 295) for overlapping changes to ACS 0020 Bilateral/multiple procedures.

0229 RADIOTHERAPY

SAME-DAY EPISODES OF CARE FOR RADIOTHERAPY

Should there be any same-day radiotherapy admissions (admission and discharge on the same day), assign Z51.0 Radiotherapy session as the principal diagnosis followed by the neoplasm code.

MULTI-DAY EPISODES OF CARE FOR RADIOTHERAPY

Multi-day ~~inpatients~~ episodes of care (ie patients separated on a subsequent date to the admission date) ~~for receiving radiotherapy for malignant conditions neoplasms~~ should have the ~~malignant condition neoplasm~~ sequenced as the principal diagnosis, and the appropriate radiation oncology procedure code from blocks [1786] to [1799] *Radiation oncology procedures*. ~~Should there be any same-day radiotherapy admissions (admission and discharge on the same date), Z51.0 Radiotherapy session will be the principal diagnosis followed by the malignancy and procedure codes.~~

For information on classification of adverse effects of radiotherapy, ~~please refer to ACS 1902 Adverse effects.~~

RADIOTHERAPY PROCEDURE CODING

When a patient receives radiotherapy, without cerebral anaesthesia, a number of times during an episode of care and the same procedure code applies, assign the procedure code once only.

When the radiotherapy is performed under cerebral anaesthesia, the procedure should be coded as many times as it is performed.

0020 BILATERAL/MULTIPLE PROCEDURES

... MULTIPLE PROCEDURES ...

Classification

1. The SAME PROCEDURE repeated during the episode of care at ~~different~~ DIFFERENT visits to theatre

A procedure which is repeated during the episode of care at different visits to theatre should be coded as many times as it is performed.

~~Examples of e~~Exceptions to this rule are:

- procedures included in ACS 0042 *Procedures normally not coded*
- ~~procedures where multiples are included in the code descriptor, such as:~~
 - ~~ECT (see ACS 0533 *Electroconvulsive therapy*)~~
 - ~~removal of renal calculi~~
- ~~dialysis (haemodialysis, peritoneal)~~
- ...
- procedures with specific rules in other coding standards, such as:
 - burn dressings (see ACS 1911 *Burns*)
 - chemotherapy (see ACS 0044 *Chemotherapy*)
 - blood transfusions (see ACS 0302 *Blood transfusions*)
 - allied health interventions (see ACS 0032 *Allied health interventions*)
 - dialysis (see ACS 1404 *Admission for kidney dialysis*)
 - ECT (see ACS 0533 *Electroconvulsive therapy*)
 - radiotherapy (see ACS 0229 *Radiotherapy*)

2.36. ACS 0236 Neoplasm coding and sequencing

Refer section 21.4 ACS 2114 *Prophylactic surgery (New)* (page 276) for changes to ACS 0236 Neoplasm coding and sequencing.

2.37. Appendix A – Morphology of neoplasms

Over the years, there have been many ad hoc requests for the inclusion of certain morphology codes to reflect changes in behaviour that were not listed in the Electronic Code List (ECL) but which are in line with the coding convention which states “the behaviour code should be changed if the other reported information makes this appropriate.” Consequently, a review of the ICD-10-AM Tabular List - *Appendix A: Morphology of neoplasms*, was undertaken in conjunction with the Australasian Association of Cancer Registries (AACR) Coding and Reporting Committee. Consequently over 300 new morphology codes were added to Appendix A.

Other changes to the *Morphology of neoplasms* originated from an update to ICD-O-3 which was released by the World Health Organization (WHO) in November 2011, for implementation from 1 January 2012. Following a clinical review these updates were endorsed for inclusion into ICD-10-AM Eighth Edition by the AACR.

Additionally, advice published in Coding Q&A, December 2011 highlighted that there was an index entry for *Myelodysplastic and myeloproliferative disease NOS* (C94.6) in ICD-10-AM with no corresponding morphology code. The appropriate morphology code has now been included in ICD-10-AM for Eighth Edition.

A public submission was also received regarding indexing of *non-small cell lung carcinoma* (NSCLC). NSCLC can be further divided into adenocarcinoma, squamous cell carcinoma and large cell carcinoma histologies however the phrase ‘non-small cell lung carcinoma’ can be used generically, usually when a more specific diagnosis cannot be made.

The following changes were incorporated into ICD-10-AM for Eighth Edition:

- Added WHO ICD-O-3 updates and clinically valid morphologies approved by the AACR Coding and Reporting Committee to Appendix A: *Morphology of neoplasms*
- Amended Alphabetic Index to support these changes
- Added morphology code ‘M9989/3’ at index entry *Disease/myelodysplastic and myeloproliferative NEC*
- Added ‘NEC’ at index entries *Carcinoma/non-small cell* and *Carcinoma in situ/non-small cell*
- Refined index entries to clarify code assignment and reduce duplication where possible.
- Corrected abbreviations in Appendix A: *Morphology of Neoplasms*.

ALPHABETIC INDEX OF DISEASES

Abnormal, abnormality, abnormalities — see also

Anomaly

- movement (disorder) (see also *Disorder/movement*)
G25.9

- - head R25.0

- - involuntary R25.8

- myelopoiesis, transient (M9898/1) D47.7

- myoglobin (Aberdeen) (Annapolis) R89.-

Adamantinoma (M9310/0) D16.5

- in situ (M9310/2) D09.7

- - long bones (M9261/2) D09.7

- - tibial (M9261/2) D09.7

- jaw (bone) (lower) D16.5

- - upper D16.42

- long bones (M9261/3) C40.9

- malignant (M9310/3) C41.1

- - jaw (bone) (lower) C41.1

- - - upper C41.02

- long bones (M9261/3) — see also

Neoplasm/bone/malignant

- mandible D16.5

- tibial (M9261/3) C40.2

Adenocarcinofibroma — see also

Neoplasm/malignant

- clear cell (M8313/3) C56

- in situ (M8313/2) D07.3

- mucinous (M9015/3)

- in situ (M9015/2) — see *Neoplasm/in situ*

- serous (M9014/3)

- in situ (M9014/2) — see *Neoplasm/in situ*

Adenocarcinoid (tumour) (M8245/3) — see

Neoplasm/malignant

- in situ (M8245/2) — see *Neoplasm/in situ*

Adenocarcinoma (M8140/3) — see also

Neoplasm/malignant

- and

- - carcinoid, combined (mixed) (M8244/3)

- - epidermoid carcinoma, mixed (M8560/3)

- - squamous cell carcinoma, mixed (M8560/3)

- apocrine (M8401/3) C44.9

- breast — see *Neoplasm/breast/malignant*

...

- colloid (M8480/3)

- cribriform comedo-type (M8201/3)

- cylindroid (M8200/3)
- ...
- endocervical type (M8384/3)
- endocrine and exocrine, mixed (M8154/3) C25.
- endometrioid (M8380/3)
- ...
- oxyphilic (M8290/3)
- pancreatobiliary-type (M8163/3) C24.1
- papillary (M8260/3)
- ...
- serous (M8441/3) — *see also Neoplasm/malignant*
- papillary (M8460/3)
- - - specified site — *see Neoplasm/malignant*
- - - unspecified site C56
- serrated (M8213/3)
- signet ring cell (M8490/3)

Adenocarcinoma in situ (M8140/2) — *see also Neoplasm/in situ*

- with
- - apocrine metaplasia (M8573/2)
- - cartilaginous (and osseous) metaplasia (M8571/2)
- - mixed subtypes (M8255/2)
- - neuro-endocrine differentiation (M8574/2)
- - osseous (and cartilaginous) metaplasia (M8571/2)
- - other types of carcinoma, combined (M8255/2)
- - spindle cell metaplasia (M8572/2)
- - squamous metaplasia (M8570/2)
- acidophil (M8280/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- acinar (cell) (M8550/2)
- acinic cell (M8550/2)
- alveolar (M8251/2)
- and
- - carcinoid, combined (M8244/2)
- basal cell (M8147/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D00.0
- basophil (M8300/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- breast D05.9
- bronchiolar (M8250/2)
- bronchiolo-alveolar (M8250/2)
- chief cell (M8321/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- chromophobe (M8270/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- clear cell (mesonephroid) (M8310/2)
- colloid (M8480/2)
- digital papillary (M8408/2) — *see Neoplasm/skin/in situ*
- eccrine (M8413/2) — *see Neoplasm/skin/in situ*
- papillary (M8408/2) — *see Neoplasm/skin/in situ*
- endocervical type (M8384/2)
- endometrioid (M8380/2)
- - ciliated cell variant (M8383/2)
- - secretory variant (M8382/2)
- eosinophil (M8280/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3
- gelatinous (M8480/2)
- granular cell (M8320/2)
- Hürthle cell (M8290/2) D09.3
- in

- adenoma (polypoid) (tubular) (M8210/2)
- - tubulovillous (M8263/2)
- - villous (M8261/2)
- polyp (adenomatous) (M8210/2)
- inflammatory (M8530/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site (female) D05.9
- islet cell with exocrine, mixed (M8154/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D01.7
- mesonephric (M9110/2)
- mucinous (M8480/2)
- - endocervical type (M8482/2)
- mucin-producing (M8481/2)
- mucin-secreting (M8481/2)
- mucoid (M8480/2)
- cell (M8300/2)
- - - specified site — *see Neoplasm/in situ*
- - - unspecified site D09.3
- mucous (M8480/2)
- oncocytic (M8290/2)
- oxyphilic (M8290/2)
- pancreatobiliary-type (M8163/3) D01.5
- papillary (M8260/2)
- - with follicular (M8340/2) D09.3
- - eccrine (M8408/2)
- - follicular variant (M8340/2) D09.3
- - intraductal (noninfiltrating) (M8503/2)
- - serous (M8460/2)
- - - specified site — *see Neoplasm/in situ*
- - - unspecified site D07.3
- scirrhous (M8141/2)
- signet ring cell (M8490/2)
- small cell, combined (M8045/2)
- tubular (M8211/2)
- water-clear cell (M8322/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D09.3

Adenofibroma (M9013/0) — *see also Neoplasm/benign*

- endometrioid (M8381/0) D27
- borderline malignancy (M8381/1) D39.1
- in situ (M8381/2) D07.3
- malignant (M8381/3) C56
- mucinous (M9015/0) — *see also Neoplasm/benign*
- borderline malignancy (M9015/1) — *see Neoplasm/uncertain behaviour*
- in situ (M9015/2) — *see Neoplasm/in situ*
- malignant (M9015/3) — *see Neoplasm/malignant*
- ...
- serous (M9014/0) — *see also Neoplasm/benign*
- borderline malignancy (M9014/1) — *see Neoplasm/uncertain behaviour*
- in situ (M9014/2) — *see Neoplasm/in situ*
- malignant (M9014/3) — *see Neoplasm/malignant*

Adenoma (M8140/0) — *see also Neoplasm/benign*

- basal cell (M8147/0) D11.9
- - uncertain or unknown behaviour (M8147/1) D37.0
- basophil (M8300/0)
- ...
- bronchial (M8140/1) D38.1
- - carcinoid type (M8240/3) — *see Neoplasm/lung/malignant*
- - in situ (M8240/2) — *see Neoplasm/lung/in situ*
- - cylindroid type (M8200/3) — *see Neoplasm/lung/malignant*
- ...

- lactating (M8204/0) D24
- lipid-rich (M8314/0)
- liver cell (M8170/0) D13.4
- ...
- mucinous (M8480/0)
- - uncertain or unknown behaviour (M8480/1) — see Neoplasm/uncertain behaviour
- mucoid cell (M8300/0)
- ...
- pleomorphic (M8940/0)
- - carcinoma in (M8941/3) — see also Neoplasm/salivary gland or duct/malignant
- - - in situ (M8941/2)
- - - - specified site — see Neoplasm/in situ
- - - - unspecified site D00.0
- - - specified site — see Neoplasm/malignant
- ...
- serous, microcystic (M8441/0)
- serrated (sessile) (traditional) (M8213/0)
- Sertoli cell (M8640/1) — see Neoplasm/uncertain behaviour
- ...
- trabecular (M8190/0)
- traditional serrated (sessile) (M8213/0)
- tubular (M8211/0) — see also Neoplasm/benign
- - adenocarcinoma in (M8210/3) — see Neoplasm/malignant
- - adenocarcinoma in situ (M8210/2) — see Neoplasm/in situ
- - Pick (M8640/1) — see Neoplasm/uncertain behaviour
- tubulopapillary (M8263/0) — see also Neoplasm/benign
- tubulovillous (M8263/0) — see also Neoplasm/benign

Ameloblastoma (M9310/0) D16.5

- in situ (M9310/2) D09.7
- - long bones (M9261/2) D09.7
- - tibial (M9261/2) D09.7
- jaw (bone) (lower) D16.5
- - upper D16.42
- ~~long bones (M9261/3) C40.9~~
- malignant (M9310/3) C41.1
- - jaw (bone) (lower) C41.1
- - - upper C41.02
- - long bones (M9261/3) — see Neoplasm/bone/malignant
- mandible D16.5
- tibial (M9261/3) C40.2

Androblastoma (M8630/1) — see also Neoplasm/uncertain behaviour

- benign (M8630/0)
- - specified site — see Neoplasm/benign
- - unspecified site
- - - female D27
- - - male D29.2
- in situ (M8630/2)
- - specified site — see Neoplasm/in situ
- - unspecified site
- - - female D07.3
- - - male D07.6
- malignant (M8630/3)

Angioblastoma (M9161/1) — see

- Neoplasm/connective tissue/uncertain behaviour
- in situ (M9161/2) D09.7

Angiocholecystitis (see also Cholecystitis/acute) K81.0

Angioendothelioma (M9130/1) — see also Neoplasm/uncertain behaviour

- Ewing (M9260/3) — see Neoplasm/bone/malignant
- - in situ (M9260/2) D09.7
- in situ (M9130/2) — see Neoplasm/in situ
- nervous system (M9130/0) D18.0-

Angiosarcoma (M9120/3) — see also Neoplasm/connective tissue/malignant

- in situ (M9120/2) D09.7
- liver C22.3

Arrhenoblastoma (M8630/1)

- benign (M8630/0)
- - specified site — see Neoplasm/benign
- - unspecified site
- - - female D27
- - - male D29.2
- in situ (M8630/2)
- - specified site — see Neoplasm/in situ
- - unspecified site
- - - female D07.3
- - - male D07.6
- malignant (M8630/3)

Askin's tumour (M9365/3) — see

- Neoplasm/connective tissue/malignant
- in situ (M9365/2) D09.7

Asocial personality F60.2

Astroblastoma (M9430/3)

- in situ (M9430/2) D09.7
- specified site — see Neoplasm/brain/malignant
- unspecified site C71.9

Astrocytoma (cystic) (diffuse) (low grade) (M9400/3)

- anaplastic (M9401/3)
- - in situ (M9401/2) D09.7
- - specified site — see Neoplasm/brain/malignant
- - unspecified site C71.9
- benign (M9400/0) — see Neoplasm/brain/benign
- desmoplastic infantile (M9412/1) — see Neoplasm/brain/uncertain behaviour
- fibrillary (M9420/3)
- - specified site — see Neoplasm/brain/malignant
- - unspecified site C71.9
- gemistocytic (M9411/3)
- - in situ (M9411/2) D09.7
- - specified site — see Neoplasm/malignant
- - unspecified site C71.9
- in situ (M9400/2) D09.7
- infantile, desmoplastic (M9412/1) — see Neoplasm/brain/uncertain behaviour

- ...
- piloid (M9421/3)
- - specified site — see Neoplasm/malignant
- - unspecified site C71.9
- pilomyxoid (M9425/3)
- protoplasmic (M9410/3)
- - in situ (M9410/2) D09.7
- - specified site — see Neoplasm/malignant
- - unspecified site C71.9
- specified site NEC — see Neoplasm/malignant

- subependymal (M9383/1) D43.2
- - giant cell (M9384/1)
- ...
- - unspecified site D43.2
- uncertain or unknown behaviour (M9400/1) — see Neoplasm/uncertain behaviour
- unspecified site C71.9
- Astroglioma** (M9400/3)
- benign (M9400/0)
- - specified site — see Neoplasm/brain/benign
- - unspecified site D33.2
- in situ (M9400/2) D09.7
- specified site — see Neoplasm/brain/malignant
- uncertain or unknown behaviour (M9400/1) D43.2
- - specified site — see Neoplasm/brain/uncertain behaviour
- - unspecified site D43.2
- unspecified site C71.9

- Blastoma** (M8000/3) — see Neoplasm/malignant
- pleuropulmonary (M8973/3)
- - in situ (M8973/2)
- pulmonary (M8972/3) — see Neoplasm/lung/malignant
- - in situ (M8972/2) — see Neoplasm/lung/in situ
- Blastomycosis, blastomycotic** B40.9

Blue

- dot cataract Q12.0
- naevus (M8780/0) D22.9-
- - in situ (M8780/2) D03.-

Brenner

- tumour (benign) (M9000/0) D27
- - borderline malignancy (M9000/1) D39.1
- - in situ (M9000/2) D07.3
- - malignant (M9000/3) C56

- Carcinoid** (tumour) (M8240/3) — see also Neoplasm/malignant

- with struma ovarii (M9091/1) D39.1
- - in situ (M9091/2) D07.3
- and adenocarcinoma, combined (mixed) (M8244/3)
- - in situ (M8244/2)
- appendix (M8240/43) D37.3-C18.1
- argentaffin (M8240/1) — see also Neoplasm/uncertain behaviour
- - malignant (M8241/3) — see Neoplasm/malignant
- atypical (M8249/3)
- - in situ (M8249/2)
- benign (M8240/0) — see also Neoplasm/benign
- bronchial adenoma (M8240/3) — see Neoplasm/lung/malignant
- composite (M8244/3)
- - in situ (M8244/2)
- EC cell (enterochromaffin cell) (M8241/3) — see Carcinoid/enterochromaffin cell
- ECL cell (enterochromaffin-like cell) (M8242/1) — see also Neoplasm/uncertain behaviour Carcinoid/enterochromaffin-like cell
- - malignant (M8242/3) — see Neoplasm/malignant
- enterochromaffin cell (EC cell) (M8241/3)
- - benign (M8241/0)
- - in situ (M8241/2)
- enterochromaffin-like cell (ECL cell) (M8242/1) — see Neoplasm/uncertain behaviour
- - in situ (M8242/2) — see Neoplasm/in situ
- - malignant (M8242/3) — see Neoplasm/malignant

- goblet cell (M8243/3) C18.1
- - in situ (M8243/2) D01.0
- - specified site — see Neoplasm/malignant
- in situ (M8240/2) — see Neoplasm/in situ
- malignant (M8240/3) — see Neoplasm/malignant
- mucinous (M8243/3) C18.1
- - in situ (M8243/2) D01.0
- - specified site — see Neoplasm/malignant
- non argentaffin (M8240/3) — see Neoplasm/malignant
- ...
- serotonin producing (M8241/3)
- - benign (M8241/0)
- - in situ (M8241/2)
- strumal (M9091/1) D39.1
- - in situ (M9091/2) D07.3
- syndrome E34.0
- tubular (M8245/1) — see Neoplasm/uncertain behaviour
- - in situ (M8245/2) — see Neoplasm/in situ
- type bronchial adenoma (M8240/3) — see Neoplasm/lung/malignant

- Carcinoma** (M8010/3) — see also

- Neoplasm/malignant
- acinar (cell) (M8550/3)
- acinar-ductal, mixed (M8552/3) — see Neoplasm/pancreas/malignant
- acinar-endocrine, mixed (M8154/3)
- acinar-endocrine-ductal, mixed (M8154/3) — see Neoplasm/pancreas/malignant
- acinic cell (M8550/3)
- adenocystic (M8200/3)
- adenoid
- - basal (M8098/3) — see Neoplasm/cervix/malignant
- - cystic (M8200/3)
- - squamous cell (M8075/3)
- adenoneuroendocrine, mixed (MANEC) (M8244/3)
- adenosquamous (M8560/3)
- ...
- cribriform (M8201/3)
- - and infiltrating duct (M8523/3) — see Neoplasm/breast/malignant
- - comedo-type (M8201/3)
- - in situ (M8201/2) D05.-
- ...
- intraepithelial (M8010/2) — see also Neoplasm/in situ
- - squamous cell (M8070/2)
- intraosseous, primary (M9270/3) C41.1
- - upper jaw (bone) C41.02
- islet cell (M8150/3)
- ...
- large cell (M8012/3)
- - with rhabdoid phenotype (M8014/3)
- - neuro-endocrine (M8013/3)
- - small cell (M8045/3)
- - squamous cell (M8070/3)
- - - keratinising (M8071/3)
- - - nonkeratinising (M8072/3)
- Leydig cell (testis) (M8650/3)
- - specified site — see Neoplasm/malignant
- - unspecified site
- - female C56
- - male C62.9
- lipid-rich (M8314/3) C50.9
- ...
- metatypical (M8095/3) — see Neoplasm/skin/malignant

- micropapillary (M8265/3)
- morphea, basal cell (M8092/3) — see *Neoplasm/skin/malignant*
- ...
- neuro-endocrine (M8246/3) C80.-
- large cell (M8013/3)
- low grade (M8240/3)
- moderately differentiated (M8249/3)
- primary cutaneous (M8247/3) — see *Neoplasm/skin/malignant*
- small cell (M8041/3)
- specified site NEC — see *Neoplasm/malignant*
- well differentiated (M8240/3)
- nonencapsulated sclerosing (M8350/3) C73
- noninfiltrating (M8010/2)
- intracystic (M8504/2) — see *Neoplasm/in situ*
- ...
- oxyphilic (M8290/3)
- pancreatobiliary-type (M8163/3) C24.1
- papillary (M8050/3)
- ...
- polygonal cell (M8034/3)
- poorly cohesive (M8490/3)
- pseudoglandular, squamous cell (M8075/3)
- ...
- water-clear cell (M8322/3) C75.0
- Wolffian duct (M9110/3)
- Carcinoma in situ** (M8010/2) — see also *Neoplasm/in situ*
- with
- apocrine metaplasia (M8573/2)
- cartilaginous (and osseous) metaplasia (M8571/2)
- neuro-endocrine differentiation (M8574/2)
- osseous (and cartilaginous) metaplasia (M8571/2)
- osteoclast-like giant cells (M8035/2)
- productive fibrosis (M8141/2)
- spindle cell metaplasia (M8572/2)
- squamous metaplasia (M8570/2)
- thymus-like element (M8589/2)
- acidophil (M8280/2)
- specified site — see *Neoplasm/in situ*
- unspecified site D09.3
- acidophil-basophil, mixed (M8281/2)
- specified site — see *Neoplasm/in situ*
- unspecified site D09.3
- acinar (cell) (M8550/2)
- acinar-endocrine, mixed (M8154/2)
- acinic cell (M8550/2)
- adenoneuroendocrine, mixed (M8244/2)
- adenosquamous (M8560/2)
- adnexal (skin) (M8390/2) — see *Neoplasm/skin/in situ*
- alveolar (M8251/2)
- cell (M8250/2)
- ameloblastic (M9270/2) D09.7
- basophil (M8300/2)
- specified site — see *Neoplasm/in situ*
- unspecified site D09.3
- basophil-acidophil, mixed (M8281/2)
- specified site — see *Neoplasm/in situ*
- unspecified site D09.3
- Bellini duct (M8319/2) D09.1
- breast NEC (M8010/2) D05.9
- bronchiolar (M8250/2)
- bronchiolo-alveolar (M8250/2)
- chorionic (M9100/2)
- specified site — see *Neoplasm/in situ*
- unspecified site
- female C58
- male C62.9
- chromophobe (type) (M8270/2)
- renal cell (M8317/2)
- clear cell (mesonephroid) (M8310/2)
- collecting duct (M8319/2) D09.1
- colloid (M8480/2)
- and infiltrating duct (M8523/2) — see *Neoplasm/breast/in situ*
- condylomatous (M8051/2)
- cribriform (M8201/2) D05.7
- and infiltrating duct (M8523/2) — see *Neoplasm/breast/in situ*
- cylindrical cell (M8121/2)
- duct
- with Paget's disease (M8541/2) — see *Neoplasm/breast/in situ*
- Bellini (M8319/2) D09.1
- collecting (M8319/2) D09.1
- desmoplastic type (M8514/2) — see *Neoplasm/breast/in situ*
- ductal (DCIS) (M8500/2) D05.1
- comedo type (M8501/2) D05.7
- cribriform type (M8201/2) D05.7
- papillary (M8503/2) D05.1
- solid type (M8230/2) D05.1
- ductal-endocrine, mixed (M8154/2) — see *Neoplasm/pancreas/in situ*
- embryonal
- and teratoma, mixed (M9081/2)
- combined with choriocarcinoma (M9101/2)
- infantile type (M9071/2)
- polyembryonal type (M9072/2)
- endometrioid (M8380/2)
- specified site — see *Neoplasm/in situ*
- unspecified site
- female D07.3
- male D07.5
- eosinophil (M8280/2) D09.3
- epidermoid (M8070/2) — see also *Carcinoma in situ/squamous cell*
- with
- adenocarcinoma, mixed (M8560/2)
- with questionable stromal invasion (M8076/2) — see *Carcinoma in situ/squamous cell/with questionable stromal invasion*
- cervix D06.9
- endocervix D06.9
- exocervix D06.4
- specified NEC D06.7
- specified site NEC — see *Neoplasm/in situ*
- unspecified site D06.9
- Bowen type (M8081/2) — see *Neoplasm/skin/in situ*
- keratinising (M8071/2)
- large cell, nonkeratinising (M8072/2)
- small cell, nonkeratinising (M8073/2)
- spindle cell (M8074/2)
- verrucous (M8051/2)
- epithelial-myoepithelial (M8562/2)
- follicular (M8330/2) D09.3
- with
- medullary (mixed) (M8346/2)
- papillary (mixed) (M8340/2)
- moderately differentiated (M8332/2)
- oxyphilic cell (M8290/2)
- pure follicle (M8331/2)
- trabecular (M8332/2)
- well differentiated (M8331/2)

- gelatinous (M8480/2)
- glycogen-rich (M8315/2) — *see Neoplasm/breast/in situ*
- granular cell (M8320/2)
- granulosa cell (M8620/2) D07.3
- hepatic (cell) (M8170/2) D01.5
- - sclerosing (M8172/2)
- hepatocellular (M8170/2) D01.5
- - clear cell (type) (M8174/2)
- - fibrolamellar (M8171/2)
- - pleomorphic (M8175/2)
- - sarcomatoid (M8173/2)
- - scirrhous (M8172/2)
- - spindle cell variant (M8173/2)
- Hürthle cell (M8290/2) D09.3
- in
- - adenomatous polyp (M8210/2)
- - pleomorphic adenoma (M8941/2) — *see Neoplasm/salivary gland or duct/in situ*
- - polyp NEC (M8210/2)
- infiltrating
- - duct
- - - with
- - - - colloid (M8523/2)
- - - - cribriform (M8523/2)
- - - - mucinous (M8523/2)
- - - - other types of carcinoma (M8523/2)
- - - - tubular (M8523/2)
- - lobular (M8520/2) — *see Neoplasm/breast/in situ*
- - - mixed with other types of carcinoma (M8524/2)
- inflammatory (M8530/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site (female) D05.9
- intraductal (M8500/2)
- - breast D05.1
- - specified site NEC — *see Neoplasm/in situ*
- - unspecified site D05.1
- intraosseous, primary (M9270/2) D09.7
- islet cell with exocrine, mixed (M8154/2)
- large cell (M8012/2)
- - with rhabdoid phenotype (M8014/2)
- - neuro-endocrine (M8013/2)
- - small cell (M8045/2)
- - squamous cell (M8070/2)
- - - keratinising (M8071/2)
- - - nonkeratinising (M8072/2)
- lipid-rich (M8314/2) D05.9
- liver cell (M8170/2) D01.5
- lobular (LCIS) (M8520/2)
- - with
- - -
- - - unspecified site D05.0
- lymphoepithelial (M8082/2)
- lymphoepithelioma-like (M8082/2)
- matrical (M8110/2) — *see Neoplasm/skin/in situ*
- Merkel cell (M8247/2)
- mesometanephric (M9110/2)
- mesonephric (M9110/2)
- mucinous (M8480/2)
- mucin-producing (M8481/2)
- mucin-secreting (M8481/2)
- mucoid (M8480/2)
- - cell (M8300/2)
- - - specified site — *see Neoplasm/in situ*
- - - unspecified site D09.3
- mucous (M8480/2)
- myoepithelial (M8982/2)
- myoepithelial-epithelial (M8562/2)
- neuroendocrine (M8246/2)
- - large cell (M8013/2)
- - primary cutaneous (M8247/2)
- - small cell (M8041/2)
- non-small cell NEC (M8046/2)
- oat cell (M8042/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D02.2
- odontogenic (M9270/2) D09.7
- oncocytic (M8290/2)
- oxyphilic (M8290/2)
- pancreatobiliary-type (M8163/2) D01.5
- papillary (M8050/2) — *see Neoplasm/in situ*
- pilomatrix (M8110/2) — *see Neoplasm/skin/in situ*
- pituitary (M8272/2) D09.3
- renal (cell) (M8312/2) D09.1
- - chromophobe (type) (M8317/2)
- - collecting duct (type) (M8319/2)
- - cyst-associated (M8316/2)
- - papillary (M8260/2)
- - sarcomatoid (M8318/2)
- - spindle cell (M8318/2)
- Schmincke (M8082/2) — *see Neoplasm/nasopharynx/in situ*
- Schneiderian (M8121/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site D02.3
- scirrhous (M8141/2)
- sclerosing sweat duct (M8407/2) — *see Neoplasm/skin/in situ*
- signet ring cell (M8490/2)
- simplex (M8231/2)
- skin appendage (M8390/2) — *see Neoplasm/skin/in situ*
- small cell (M8041/2)
- - fusiform cell (M8043/2)
- - intermediate cell (M8044/2)
- - large cell (M8045/2)
- - mixed (M8045/2)
- - neuro-endocrine (M8041/2)
- - squamous cell
- - - combined (M8045/2)
- - - nonkeratinising (M8073/2)
- solid pseudopapillary (M8452/2) — *see Neoplasm/pancreas/in situ*
- squamous cell (M8070/2) — *see also Neoplasm/in situ*
- - with questionable stromal invasion (M8076/2)
- - - cervix D06.9
- - -
- - - unspecified site D06.9
- - acantholytic (M8075/2)
- - adenoid (M8075/2)
- - basaloid (M8083/2)
- - clear cell (type) (M8084/2)
- - intraepidermal, Bowen type (M8081/2) — *see Neoplasm/skin/in situ*
- - intraepithelial (M8070/2)
- - keratinising, large cell (M8071/2)
- - large cell, nonkeratinising (M8072/2)
- - microinvasive (M8076/2)
- - nonkeratinising, large cell (M8072/2)
- - papillary (noninvasive) (M8052/2)
- - pseudoglandular (M8075/2)
- - sarcomatoid (M8074/2)
- - small cell
- - - combined small cell-squamous cell (M8045/2)
- - - nonkeratinising (M8073/2)

- - spindle cell (M8074/2)
- - verrucous (M8051/2)
- sweat duct, sclerosing (M8407/2) — *see*
Neoplasm/skin/in situ
- theca cell (M8600/2) D07.3
- thymus-like differentiation (M8589/2)
- transitional cell (M8120/2)
- - sarcomatoid (M8122/2)
- - spindle cell (M8122/2)
- trichilemmal (M8102/2) — *see* *Neoplasm/skin/in situ*
- tubular (M8211/2)
- - and infiltrating duct (M8523/2) — *see*
Neoplasm/breast/in situ
- urothelial (M8120/2)
- verrucous (epidermoid) (squamous cell) (M8051/2)
- warty (M8051/2)
- water-clear cell (M8322/2) D09.3
- Wolffian duct (M9110/2)

Carcinomaphobia F45.2

Carcinosarcoma (M8980/3) — *see*
Neoplasm/malignant

- embryonal (M8981/3) — *see* *Neoplasm/malignant*
- in situ (M8980/2) — *see* *Neoplasm/in situ*
- - embryonal (M8981/2)
- - odontogenic (M9342/2) D09.7
- odontogenic (M9342/3) C41.1

CASTLE (Carcinoma showing thymus-like element)
(M8589/3) — *see* *Neoplasm/malignant*

- in situ (M8589/2) — *see* *Neoplasm/in situ*

Castleman's disease (hyaline vascular type)
(M8000/0) D21.9

Chemical burn — *see also* *Burn/by site*

- following induced abortion O08.6

Chemodectoma (M8693/1) — *see*

Paraganglioma/extra-adrenal/paraneuronal/paraganglionic

Chemoprophylaxis Z29.2

Chondroblastoma (M9230/0) — *see also*

Neoplasm/bone/benign

- in situ (M9230/2) D09.7

- malignant (M9230/3) — *see*

Neoplasm/bone/malignant

Chondrosarcoma (M9220/3) — *see also*

Neoplasm/bone/malignant OR

Neoplasm/cartilage/malignant

- clear cell (M9242/3)

- - in situ (M9242/2) D09.7

- dedifferentiated (M9243/3)

- - in situ (M9243/2) D09.7

- in situ (M9220/2) D09.7

- juxtacortical (M9221/3)

- - in situ (M9221/2) D09.7

- mesenchymal (M9240/3) — *see*

Neoplasm/connective tissue/malignant

- - in situ (M9240/2) D09.7

- myxoid (M9231/3) — *see*

Neoplasm/cartilage/malignant

- - in situ (M9231/2) D09.7

- periosteal (M9221/3)

- - in situ (M9221/2) D09.7

Chordee (nonvenereal) N48.8

Chordoma (M9370/3) — *see also*

Neoplasm/malignant

- chondroid (M9371/3)

- - in situ (M9371/2)

- dedifferentiated (M9372/3)

- - in situ (M9372/2)

- in situ (M9370/2) — *see* *Neoplasm/in situ*

Chorea (gravis) (spasmodic) G25.5

Choriocarcinoma (female) (M9100/3) C58

- combined with

- - embryonal carcinoma (M9101/3) — *see*

Neoplasm/malignant

- - - in situ (M9101/2) — *see* *Neoplasm/in situ*

- - other germ cell elements (M9101/3) — *see*

Neoplasm/malignant

- - - in situ (M9101/2) — *see* *Neoplasm/in situ*

- - teratoma (M9101/3) — *see* *Neoplasm/malignant*

- - - in situ (M9101/2) — *see* *Neoplasm/in situ*

- in situ (M9100/2)

- - specified site — *see* *Neoplasm/in situ*

- - unspecified site

- - - female D07.3

- - - male D07.6

- male C62.9

Chromaffinoma (M8700/0) — *see also*

Neoplasm/benign

- in situ (M8700/2) — *see* *Neoplasm/in situ*

- malignant (M8700/3) — *see* *Neoplasm/malignant*

- uncertain or unknown behaviour (M8700/1) — *see*

Neoplasm/uncertain behaviour

Chromatopsia H53.1

CPNET (central primitive neuroectodermal tumour)

(M9473/3) — *see* *Neoplasm/brain/malignant*

- in situ (M9473/2) D09.7

Crabs, meaning pubic lice B85.3

Cystadenocarcinofibroma — *see also*

Neoplasm/malignant

- clear cell (M8313/3) C56

- - in situ (M8313/2) D07.3

- mucinous (M9015/3)

- - in situ (M9015/2) — *see* *Neoplasm/in situ*

- serous (M9014/3)

- - in situ (M9014/2) — *see* *Neoplasm/in situ*

Cystadenocarcinoma (M8440/3) — *see also*

Neoplasm/malignant

- acinar cell (M8551/3)

- - in situ (M8551/2) — *see* *Neoplasm/in situ*

- bile duct (M8161/3) C22.1

Cystadenofibroma (M9013/0) — *see also*

Neoplasm/benign

- endometrioid (M8381/0) D27

- - borderline malignancy (M8381/1) — *see*

Neoplasm/uncertain behaviour

- - in situ (M8381/2) — *see* *Neoplasm/in situ*

- - malignant (M8381/3) — *see* *Neoplasm/malignant*

- mucinous (M9015/0)

- - borderline malignancy (M9015/1) — *see*

Neoplasm/uncertain behaviour

- - in situ (M9015/2) — *see* *Neoplasm/in situ*

- - malignant (M9015/3) — *see* *Neoplasm/malignant*

- serous (M9014/0)

- - borderline malignancy (M9014/1)

- - in situ (M9014/2) — *see* *Neoplasm/in situ*

- - malignant (M9014/3)

Cystadenoma (M8440/0) — *see also*

- Neoplasm/benign*
- papillary (M8450/0) D27
- ~~borderline malignancy (M8451/1) — *see*~~
Neoplasm/uncertain behaviour
- - with malignant transformation, in situ (M8451/2) —
see Neoplasm/in situ
- - malignancy (M8451/1) — *see Neoplasm/uncertain*
behaviour
- - lymphomatosum (M8561/0)
- ...
- serous (M8441/0)
- - ~~borderline malignancy (M8442/1) — *see*~~
Neoplasm/uncertain behaviour
- - - with malignant transformation (M8442/3) — *see*
Neoplasm/malignant
- - malignancy (M8442/1) — *see Neoplasm/uncertain*
behaviour
- - papillary (M8460/0) D27

Cystosarcoma phyllodes (M9020/1) D48.6

- benign (M9020/0) D24
- in situ (M9020/2) D05.9
- malignant (M9020/3) — *see*
Neoplasm/breast/malignant

Cytopenia

- refractory, ~~with multilineage dysplasia (M9985/3)~~
D46.5
- - with multilineage dysplasia (M9985/3) D46.5
- - of childhood (M9985/3) D46.5

Diktyoma

- benign (M9501/0) D31.-
- in situ (M9501/2) D09.2
- malignant (M9501/3) C69.-

Disease, diseased — *see also Syndrome*

- hand, foot and mouth B08.4
- Hand-Schüller-Christian (~~M9753/4~~ M9751/3) C96.5
- Hartnup's E72.0
- ...
- lymphoproliferative (M9970/1) D47.9
- - systemic EBV positive T-cell, of childhood
(M9724/3) C84.5
- - T-cell, primary cutaneous CD30-positive (M9718/3)
C86.6
- ...
- mycotic B49
- myelodysplastic and myeloproliferative NEC
(M9989/3) C94.6
- myeloproliferative (~~M9975/4~~ (chronic) (M9960/3)
D47.91
- ~~chronic (M9960/3) D47.4~~
- myocardium, myocardial (*see also*
Degeneration/myocardial) I51.5
- ...
- ragpicker's or ragsorter's A22.1
- Recklinghausen's (except of bone) (M9540/1) (*see*
also Neurofibromatosis) Q85.0
- - bone E21.0
- rectum K62.9
- ...
- vocal cord J38.3
- Von Recklinghausen's (except of bone) (M9540/1)
(*see also Neurofibromatosis*) Q85.0
- - bone E21.0
- vulva (noninflammatory) N90.9

Disorder (of) — *see also Disease*

- lung, interstitial, drug-induced J70.4
- - acute J70.2
- - chronic J70.3
- lymphoproliferative (M9970/1) D47.9
- - NK cells, chronic (M9831/3) C91.7-
- - post-transplant (PTLD) (M9971/1) D47.7
- - - polymorphic (M9971/3) C96.7
- lysine and hydroxylysine metabolism E72.3

Dysgerminoma (M9060/3)

- in situ (M9060/2)
- - specified site — *see Neoplasm/in situ*
- - unspecified site
- - - female D07.3
- - - male D07.6
- specified site — *see Neoplasm/malignant*

Ecchondrosis (M9210/1) D48.0

- malignant (M9210/3) — *see*
Neoplasm/bone/malignant

Ecchymosis R58

Elastofibroma (M8820/0) — *see*

- Neoplasm/connective tissue/benign*
- malignant (M8820/3) — *see Neoplasm/connective*
tissue/malignant

Elastoma (juvenile) Q82.82

Embryoma (M9080/1) — *see also*

- Neoplasm/uncertain behaviour*
- kidney (M8960/3) C64
- - in situ (M8960/2) D09.1
- liver (M8970/3) C22.0
- - in situ (M8970/2) D01.5
- malignant (M9080/3) — *see also*
Neoplasm/malignant

Endothelioma, bone (M9260/3) — *see*

- Neoplasm/bone/malignant*
- in situ (M9260/2) D09.7

Endotheliosis (haemorrhagic infectious) D69.8

Enterogastritis — *see Enteritis*

Enteroglucagonoma — *see Glucagonoma* (M8157/1)

- *see also Neoplasm/uncertain behaviour*
 - malignant (M8157/3) — *see Neoplasm/malignant*
- Enterolith, enterolithiasis** (impaction) K56.4

Ependymblastoma (M9392/3)

- in situ (M9392/2) D09.7
- specified site — *see Neoplasm/brain/malignant*
- unspecified site C71.9

Ependymoma (epithelial) (malignant) (M9391/3) —
see also Neoplasm/brain/malignant

- anaplastic (M9392/3)
- - in situ (M9392/2) D09.7
- cellular (M9391/3)
- clear cell (M9391/3)
- - in situ (M9391/2) D09.7
- myxopapillary (M9394/1) D43.4
- - in situ (M9394/2) D09.7
- papillary (M9393/3) D43.2
- - in situ (M9393/2) D09.7
- subependymoma, mixed (M9383/1) D43.2

Esthesioneuroblastoma (M9522/3) C30.0

- in situ (M9522/2) D02.3
- Esthesioneurocytoma** (M9521/3) C30.0
- in situ (M9521/2) D02.3
- Esthesioneuroepithelioma** (M9523/3) C30.0
- in situ (M9523/2) D02.3
- Esthiomene** A55

Ewing sarcoma or tumour (M9260/3) — see
Neoplasm/bone/malignant

- in situ (M9260/2) D09.7

Examination (for) (general) (of) (routine) Z00.0

Fibrodentinosa, ameloblastic (M9290/3) —
 see *Neoplasm/bone/malignant*

- in situ (M9290/2) D09.7

Fibrodysplasia ossificans progressiva M61.1-

Fibromyxoma (M8811/0) — see
Neoplasm/connective tissue/benign

- plexiform (M8811/0) — see *Neoplasm/connective tissue/benign*

Fibromyxosarcoma (M8811/3) — see
Neoplasm/connective tissue/malignant

Fibro-odontosarcoma, ameloblastic (M9290/3) —
 see *Neoplasm/malignant*

- in situ (M9290/2) D09.7

Fibro-osteoma (M9262/0) — see
Neoplasm/bone/benign

Fibrosarcoma (M8810/3) — see also
Neoplasm/connective tissue/malignant

- ameloblastic (M9330/3) C41.1
- - in situ (M9330/2) D09.7
- - upper jaw (bone) C41.02
- ...
- odontogenic (M9330/3) C41.1
- - in situ (M9330/2) D09.7
- - upper jaw (bone) C41.02

Freckle(s) L81.2

- malignant melanoma in Hutchinson's melanotic (M8742/3) — see *Melanoma*
- melanotic, (Hutchinson's) (M8742/2) — see *Melanoma/in situ*
- - benign (M8742/0) D22.-

Fredrickson's hyperlipoproteinaemia, type

Ganglioglioma (M9505/1) — see also
Neoplasm/uncertain behaviour

- anaplastic (M9505/3) — see *Neoplasm/malignant*
- - in situ (M9505/2) D09.7
- desmoplastic infantile (M9412/1) — see *Neoplasm/brain/uncertain behaviour*

Ganglioneuroblastoma (M9490/3) — see
Neoplasm/nerve/malignant

- in situ (M9490/2) D09.7

Ganglioneuroma (M9490/0) D36.1

Gastrinoma (M8153/1)

- benign (M8153/0) D13.7
- in situ (M8153/2) D01.7
- malignant (M8153/3)

Gemistocytoma (M9411/3)

- in situ (M9411/2) D09.7
- specified site — see *Neoplasm/malignant*

Gerhardt's syndrome — see *Paralysis/vocal cords*

Germ cell(s)

- intratubular, malignant (M9064/2) D07.6
- tumour — see *Tumour/germ cell*

German measles (see also *Rubella*) B06.9

Germinoma (M9064/3) — see also
Neoplasm/malignant

- benign (M9064/0) — see *Neoplasm/benign*
- intratubular, malignant germ cells (M9064/2) D07.6

Glioblastoma (multiforme) (M9440/3)

- with sarcomatous component (M9442/3)
- - in situ (M9442/2)
- - - specified site — see *Neoplasm/in situ*
- - - unspecified site D09.7
- - specified site — see *Neoplasm/malignant*
- - unspecified site C71.9
- giant cell (M9441/3)
- - in situ (M9441/2)
- - - specified site — see *Neoplasm/in situ*
- - - unspecified site D09.7
- - specified site — see *Neoplasm/malignant*
- - unspecified site C71.9
- in situ (M9440/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site D09.7
- specified site — see *Neoplasm/malignant*

Glioma (malignant) (M9380/3) — see also
Neoplasm/brain/malignant

- angiocentric (M9431/1) — see *Neoplasm/brain/uncertain behaviour*
- astrocytic, astrocytoma (M9400/3) — see *Astrocytoma*
- benign (M9380/0) — see also *Neoplasm/brain/benign*
- chordoid, of third ventricle (M9444/1) D43.0
- - in situ (M9444/2) D09.7
- in situ (M9380/2) D09.7
- mixed (M9382/3)
- - in situ (M9382/2) D09.7
- nose, nasal (non-neoplastic) Q30.89
- subependymal (M9383/1) D43.2

Gliomatosis cerebri (M9381/3) C71.0

- in situ (M9381/2) D09.7

Gliomeuroma (M9505/1) — see *Neoplasm/uncertain behaviour*

Gliosarcoma (M9442/3)

- in situ (M9442/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site D09.7
- specified site — see *Neoplasm/malignant*

Glomangioma (M8712/0) D18.0-

- in situ (M8712/2) D09.7

Glomangiomyoma (M8713/0) D18.0-

- in situ (M8713/2) D09.7

Glomangiosarcoma (M8710/3) — see
Neoplasm/connective tissue/malignant

- in situ (M8710/2) D09.7

Glomerular

Glucagonoma

- malignant (M8152/3) C25.4
- pancreas C25.4
- specified site NEC — see *Neoplasm/malignant*
- pancreas

- - in situ (M8152/2) D01.7
- - malignant (M8152/3) C25.4
- - uncertain or unknown behaviour (M8152/1) D37.71
- specified site NEC
- - in situ (M8152/2) — see *Neoplasm/in situ*
- - malignant (M8152/3) — see *Neoplasm/malignant*
- - uncertain or unknown behaviour (M8152/1) — see *Neoplasm/uncertain or unknown behaviour*
- uncertain or unknown behaviour (M8152/1) D37.7
- pancreas D37.7
- specified site NEC — see *Neoplasm/uncertain or unknown behaviour*
- unspecified site
- - in situ (M8152/2) D01.7
- - malignant (M8152/3) C25.4
- - uncertain or unknown behaviour (M8152/1) D37.71

Glucoglycinuria E72.5

Gonadoblastoma (M9073/1)

- in situ (M9073/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site
- - - female D07.3
- - - male D07.6
- specified site — see *Neoplasm/uncertain behaviour*

Granuloma L92.9

- bone M86.8-
- - eosinophilic (M9752/4M9751/3) C96.6
- - from residual foreign body M86.8-
- brain (any site) G06.0
- ...
- ear, middle H71
- eosinophilic (M9752/4M9751/3) C96.6
- - oral mucosa K13.4
- - skin L92.2
- eyelid H01.8
- ...
- lung (infectious) (see also *Fibrosis/lung*) J84.1
- - coccidioidal B38.1
- - eosinophilic (M9752/4M9751/3) C96.6
- Majocchi's B35.8

Granulomatosis L92.9

- Langerhans-cell (M9751/43) C96.6
- - unifocal (M9752/4M9751/3) C96.6
- lymphoid (M9766/3) C83.8

Gynandroblastoma (M8632/1)

- in situ (M8632/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site
- - - female D07.3
- - - male D07.6
- specified site — see *Neoplasm/uncertain behaviour*

Haemangioblastoma (M9161/1) — see

Neoplasm/connective tissue/uncertain behaviour

- in situ (M9161/2) D09.7

Haemangioendothelioma (M9130/1) — see also

Neoplasm/uncertain behaviour

- epithelioid (M9133/1)
- - in situ (M9133/2) — see *Neoplasm/in situ*
- - malignant (M9133/3) — see *Neoplasm/malignant*
- in situ (M9130/2) — see *Neoplasm/in situ*
- kaposiform (M9130/1)

Haemangioma (M9120/0) D18.0-

- cavernous (M9121/0) D18.0-
- - malignant (M9121/3) — see *Neoplasm/connective tissue/malignant*
- epithelioid (M9125/0) D18.0-
- - malignant (M9125/3) — see *Neoplasm/connective tissue/malignant*
- histiocytoid (M9125/0) D18.0-
- - malignant (M9125/3) — see *Neoplasm/connective tissue/malignant*
- in situ (M9120/2) D09.7
- infantile (M9131/0) D18.0-
- intramuscular (M9132/0) D18.0-
- - in situ (M9132/2) D09.7
- juvenile (M9131/0) D18.0-

Haemangiopericytoma (M9150/1) — see also

Neoplasm/connective tissue/uncertain behaviour

- benign (M9150/0) — see *Neoplasm/connective tissue/benign*

- in situ (M9150/2) D09.7

- malignant (M9150/3) — see *Neoplasm/connective tissue/malignant*

Haemangiosarcoma (M9120/3) — see

Neoplasm/connective tissue/malignant

- in situ (M9120/2) D09.7

Haemarthrosis (nontraumatic) M25.0-

Haemolymphangioma (M9175/0) D18.1

- in situ (M9175/2) D09.7

Haemolysis

Hand-Schüller-Christian disease or syndrome

(M9753/4M9751/3) C96.5

Hanging (asphyxia) (strangulation) (suffocation) T71

Hepatoblastoma (M8970/3) C22.2

- in situ (M8970/2) D01.5

Hepatocarcinoma (M8170/3) C22.0

- in situ (M8170/2) D01.5

Hepatocholangiocarcinoma (M8180/3) C22.0

Hepatoma (malignant) (M8170/3) C22.0

- benign (M8170/0) D13.4
- embryonal (M8970/3) C22.0
- - in situ (M8970/2) D01.5
- in situ (M8170/2) D01.5

Hepatomegalia glycogenica diffusa E74.0† K77.8*

Hidradenocarcinoma (M8402/3) — see also

Neoplasm/skin/malignant

- in situ (M8402/2) — see *Neoplasm/skin/in situ*

Hidradenoma (nodular) (M8400/0) — see also *Neoplasm/skin/benign*

Histiocytosis D76.3

- acute progressive, X (M9754/1/3) C96.0
- Langerhans-cell NEC (M9751/43) C96.6
- - generalised (M9754/1/3) C96.8
- - multifocal
- - - multisystemic (disseminated) (M9754/1/3) C96.0
- - - unisystemic (M9753/4M9751/3) C96.5
- - unifocal (M9752/4M9751/3) C96.6
- malignant (M9750/3) C96.8
- mononuclear phagocytes NEC D76.1
- - Langerhans-cell (M9751/43) C96.6
- sinus, with massive lymphadenopathy D76.3
- syndrome NEC D76.3
- X NEC (M9751/43) C96.6

- acute progressive (M97541/3) C96.0
- multifocal (M9753/4) M9751/3) C96.5
- multisystemic (M97541/3) C96.0
- unifocal (M9752/4) M9751/3) C96.6

Histoplasmosis B39.9

Hurthle cell

- adenocarcinoma (M8290/3) C73
- in situ (M8290/2) D09.3
- adenoma (M8290/0) D34
- carcinoma (M8290/3) C73
- in situ (M8290/2) D09.3
- tumour (M8290/0) D34

Hutchinson's

- melanotic freckle (M8742/2) — see *Melanoma/in situ*
- benign (M8742/0) D22.-
- malignant melanoma in (M8742/3) — see *Melanoma*
- teeth or incisors (congenital syphilis) A50.5

Insulinoma

- malignant (M8151/3)
- pancreas C25.4
- specified site NEC — see *Neoplasm/malignant*
- unspecified site C25.4
- pancreas
- benign (M8151/0) D13.7
- in situ (M8151/2) D01.7
- malignant (M8151/3) C25.4
- uncertain or unknown behaviour (M8151/1) D37.71
- specified site NEC
- benign (M8151/0) — see *Neoplasm/benign*
- in situ (M8151/2) — see *Neoplasm/in situ*
- malignant (M8151/3) — see *Neoplasm/malignant*
- uncertain or unknown behaviour (M8151/1) — see *Neoplasm/uncertain or unknown behaviour*
- unspecified site
- benign (M8151/0) D13.7
- in situ (M8151/2) D01.7
- malignant (M8151/3) C25.4
- uncertain or unknown behaviour (M8151/1) D37.71

Klatskin tumour (M8162/3) C22.4 C24.0

- in situ (M8162/2) D01.5

Klauder's disease A26.8

Kupffer cell sarcoma (M9124/3) C22.3

- in situ (M9124/2) D01.5

Kuru A81.8

Leather bottle stomach (M8142/3) C16.9

- in situ (M8142/2) D00.2

Leber's

Leiomyoma (M8890/0) — see also

- Neoplasm/connective tissue/benign*
- atypical (M8893/0)
- malignant (M8893/3) — see *Neoplasm/connective tissue/malignant*
- bizarre (M8893/0)
- malignant (M8893/3) — see *Neoplasm/connective tissue/malignant*
- cellular (M8892/0)
- ...
- pleomorphic (M8893/0)
- malignant (M8893/3) — see *Neoplasm/connective tissue/malignant*

- symplastic (M8893/0)
- malignant (M8893/3) — see *Neoplasm/connective tissue/malignant*
- uterus (cervix) (corpus) D25.9

Lentigo (congenital) L81.4

- malignant (M8742/2) — see also *Melanoma/in situ*
- benign (M8742/0) D22.-
- melanoma (M8742/3) — see *Melanoma*

Lethargy R53

Letterer-Siwe disease (M97541/3) C96.0

Leuc(o) — see *Leuko*

Leukaemia (M9800/3) C95.9-

- B-cell type
- lymphocytic, chronic (M9823/3) C91.1-
- prolymphocytic (M9833/3) C91.3-
- splenic, unclassified (M9591/3) C85.9
- bilineal, acute (M9805/3) C95.0-
- ...
- hairy cell (M9940/3) C91.4-
- variant (M9591/3) C91.4-
- histiocytic (M9860/3) C93.9-
- ...
- lymphoblastic (acute) (ALL) (M9835/3) C91.0-
- leukaemia-lymphoma (M9835/3) C91.0-
- B (with) (M9811/3)
- hyperdiploidy (M9815/3)
- hypodiploidy (Hypodiploid ALL) (M9816/3)
- t(1;19)(q23;p13.3); E2A-PBX1 (TCF3-PBX1) (M9818/3)
- t(5;14)(q31;q32); IL3-IGH (M9817/3)
- t(9;22)(q34;q11.2); BCR-ABL1 (M9812/3)
- t(12;21)(p13;q22); TEL-AML1 (ETV6-RUNX1) (M9814/3)
- t(v;11q23); MLL rearranged (M9813/3)
- T (M9837/3)
- mature B-cell type (M9826/3) C91.8-
- precursor cell (acute) (not phenotyped) (M9835/3) C91.0-
- B-cell (M9836/3) C91.0-
- leukaemia-lymphoma (M9811/3) — see *Leukaemia/lymphoblastic/leukaemia-lymphoma/B*
- T-cell (M9837/3) C91.0-
- leukaemia-lymphoma (M9837/3) C91.0-
- lymphocytic (M9820/3) C91.9-
- ...
- megakaryocytic, acute (M9910/3) C94.2-
- mixed-lineage, acute (M9805/3) C95.0-
- lineage, acute (M9805/3) C95.0-
- phenotype, acute
- with
- t(9;22)(q34;q11.2); BCR-ABL1 (M9806/3) C95.0-
- t(v;11q23); MLL rearranged (M9807/3) C95.0-
- B-myeloid (M9808/3) C95.0-
- T-myeloid (M9809/3) C95.0-
- monoblastic, acute (M5) (M5a) (M5b) (M9891/3) C93.0-
- acute (M5) (M5a) (M5b) (M9891/3) C93.0-
- and monocytic (M9891/3) C93.0-
- monocytic, monocytoid NEC (M9860/3) C93.9-
- acute (M5) (M5a) (M5b) (M9891/3) C93.0-
- aleukaemic (M9860/3) C93.9-
- and monoblastic (M9891/3) C93.0-
- chronic (M9860/3) C93.1-
- ...

- myeloid (M9860/3) C92.9-
- - acute NEC (M9861/3) C92.0-
- - - with
- - - - 11q23-abnormality (M9897/3) C92.6-
- - - - abnormal marrow eosinophils (M9871/3) C92.0-
- - - - maturation (M9874/3) C92.0-
- - - - MLL-gene variation (M9897/3) C92.6-
- - - - multilineage dysplasia (M9895/3) C92.8-
- - - - mutated CEBPA (M9861/3) C92.0-
- - - - mutated NPM1 (M9861/3) C92.0-
- - - - myelodysplasia-related changes (M9895/3) C92.8-
- - - - prior myelodysplastic syndrome (M9895/3) C92.0-
- - - without
- - - -
- - - CBF-beta/MYH11 (M9871/3) C92.0-
- - - inv(3)(q21;q26.2) or t(3;3)(q21;q26.2); RPN1-EVI1 (M9869/3) C92.7-
- - - inv(16)(p13;q22) (M9871/3) C92.0-
- - - -
- - - PML/RAR-alpha (M9866/3) C92.4-
- - - t(1;22)(p13;q13); RBM15-MKL1 (megakaryoblastic) (M9911/3) C94.2-
- - - t(6;9)(p23;q34); DEK-NUP214 (M9865/3) C92.7-
- - - t(8;21)(q22;q22); RUNX1-RUNX1T1 (M9896/3) C92.0-
- - - t(9;11)(p22;q23); MLLT3-MLL (M9897/3) C92.0-
- - - t(15;17)(q22;q11-12) (M9866/3) C92.4-
- - - t(16;16)(p13;q11) (M9871/3) C92.0-
- - - therapy-related (alkylating agent) (epipodophyllotoxin) (M9920/3) C92.0-
- - aleukaemic (M9860/3) C92.9-
- - associated with Down syndrome (M9898/3) C94.2-
- - chronic (BCR/ABL-positive) (CML) (M9863/3) C92.1

Leydig cell tumour

- carcinoma (M8650/3)
- - specified site — *see Neoplasm/malignant*
- - unspecified site
- - - female C56
- - - male C62.9
- tumour (M8650/4)
- - benign (M8650/0)
- - - specified site — *see Neoplasm/benign*
- - - unspecified site
- - - female D27
- - - male D29.2
- - in situ (M8650/2)
- - - specified site — *see Neoplasm/in situ*
- - - unspecified site
- - - female D07.3
- - - male D07.6
- - malignant (M8650/3)
- - - specified site — *see Neoplasm/malignant*
- - - unspecified site
- - - female C56
- - - male C62.9
- - - specified site — *see Neoplasm/uncertain behaviour*
- - - unspecified site
- - - female D39.1
- - - male D40.1
- Leydig-Sertoli cell tumour (M8634/0) — *see Sertoli-Leydig cell tumour***
- specified site — *see Neoplasm/benign*
- unspecified site
- - female D27
- - male D29.2

Liar, pathologic F60.2

Linitis (gastric) plastica (M8142/3) C16.9

- in situ (M8142/2) D00.2

Lip — *see condition*

Lupus

- vulgaris A18.4

- - eyelid A18.4† H03.1*

Luteinoma (M8610/0) D27 — *see Luteoma*

Lutembacher's disease or syndrome Q21.15

Luteoma (M8610/0) D27

- in situ (M8610/2) D07.3

- malignant (M8610/3) C56

- uncertain or unknown behaviour (M8610/1) D39.1

Lutz-(Splendore-de Almeida) disease (*see also Paracoccidioidomycosis*) B41.9

Lymphangiosarcoma (M9170/3) — *see*

Neoplasm/connective tissue/malignant

- in situ (M9170/2) D09.7

Lymphangitis I89.1

Lymphoepithelioma (M8082/3) — *see*

Neoplasm/malignant

- in situ (M8082/2) — *see Neoplasm/in situ*

Lymphogranuloma (malignant) (M9650/3) C81.9

Lymphoma (malignant) (M9590/3) C85.9

- anaplastic

- - diffuse large B-cell (M9680/3) C83.3

- - -

- - - large cell (M9714/3) C84.6

- - - ALK

- - - - negative (M9702/3) C84.7

- - - - positive (M9714/3) C84.6

- - - CD30-positive C84.6

- - - Ki-1-positive+ C84.6

- - - primary cutaneous (M9718/3) C86.6

- - - -

- - B-cell NEC (M9591/3) C85.1

- - diffuse large (anaplastic) (centroblastic) (DLBCL) (T-cell rich) (M9680/3) C83.3

- - - with chronic inflammation (M9680/3) C83.3

- - - CD30-positive (M9718/3) C83.3

- - - EBV positive, of elderly (M9680/3) C83.3

- - - immunoblastic (M9684/3) C83.3

- - - plasmablastic (M9684/3) (M9735/3) C83.3

- - - primary

- - - - central nervous system (M9680/3)

- - - - - specified site — *see Neoplasm/malignant*

- - - - - unspecified site C72.9

- - - - - cutaneous, leg type (M9680/3) C44.7

- - - extranodal, marginal zone of mucosa-associated lymphoid tissue (MALT-lymphoma) (M9699/3) C88.4

- - - large

- - - - ALK-positive (M9737/3) C83.3

- - - - in HHV8-associated multicentric Castleman disease (M9738/3) C83.3

- - - - intravascular (M9680/3) (M9712/3) C83.8

- - - - mediastinal (thymic) (M9679/3) C85.2

- - - - T-cell, histiocyte rich (T/HRBCL) (M9688/3) C83.3

- - - marginal zone (M9699/3) C83.0

- - - monocytoid (M9699/3) C85.9

- - - primary effusion (M9678/3) C83.8

- - - small cell (M9670/3) C83.0

- - - splenic marginal zone (M9689/3) C83.0

- - - diffuse red pulp, small (M9591/3) C85.9
- - - marginal zone (M9689/3) C83.0
- - - unclassifiable (M9591/3) C85.9
- - unclassifiable
- - - with features intermediate between diffuse large B-cell lymphoma and
- - - Burkitt lymphoma (M9680/3) C83.9
- - - Hodgkin lymphoma, classical (M9596/3) C85.9
- B-CLL, non-leukaemic variant (M9670/3) C83.0
- ...
- follicle centre (centroblastic-centrocytic) (M9690/3)
- - cutaneous (M9690/3) C82.6
- - - primary (M9597/3) C82.6
- - diffuse (M9690/3) C82.5
- follicular (centroblastic-centrocytic) (nodular) (with or without diffuse areas) (M9690/3) C82.9
- ...
- hepatosplenic (gamma-delta) T-cell (M9716/3) C86.1
- histiocytic (M9680/3) C85.9
- ...
- Hodgkin (M9650/3) C81.9
- - and non-Hodgkin, composite (M9596/3) C85.7
- ...
- - sarcoma (M9662/3) C81.3
- hydroa vacciniforme-like (M9725/3) C84.5
- immunoblastic (B-cell) (diffuse) (large type) (M9684/3) C83.3
- ...
- lymphoblastic (diffuse) (M9727/3) C83.5
- - acute, leukaemia-lymphoma (acute) (M9835/3) C91.0 — see *Leukaemia/lymphoblastic/leukaemia-lymphoma*
- - precursor cell (M9727/3) C83.5
- - - B-cell (M9728/3) C83.5
- - - - leukaemia-lymphoma (M9811/3) — see *Leukaemia/lymphoblastic/leukaemia-lymphoma/B*
- - - T-cell (M9729/3) C83.5
- - - - leukaemia-lymphoma (M9837/3) C91.0-
- lymphocytic (diffuse) (M9670/3) C83.0
- ...
- monocytoid B-cell (M9699/3) C85.9
- mucosal-associated lymphoid tissue (MALT) (extranodal marginal zone) (M9699/3) C88.4
- NK/T-cell NEC (M9702/3) C84.9
- - extranodal, nasal type (M9719/3) C86.0
- NK-cell, blastic (M9591/3) C86.4
- ...
- plasmablastic (M9684/3) (M9735/3) C83.3
- plasmacytic (M9671/3) C83.0
- ...
- T-cell NEC (M9702/3) C84.4
- - adult (leukaemia/lymphoma) (M9827/3) C91.5-
- - angiocentric (M9719/3) C86.0
- - angioimmunoblastic (M9705/3) C86.5
- - cutaneous (CTCL) (primary) (M9709/3) C84.8
- - - CD4-positive small/medium (M9709/3) C84.5
- - - CD8-positive aggressive epidermotropic cytotoxic (M9709/3) C84.5
- - - CD30-positive large (M9718/3) C86.6
- - - gamma-delta (M9726/3) C84.4
- - enteropathy
- ...
- - peripheral (M9702/3) C84.4
- - - angioimmunoblastic lymphadenopathy with dysproteinemia (AILD) (M9705/3) C86.5
- - - large cell (M9702/3) C84.4
- - - pleomorphic (medium and large cell) (small cell) (M9702/3) C84.4

- primary cutaneous, CD30-positive (M9718/3) C86.6
- - subcutaneous panniculitis-like (M9708/3) C86.3

Management (of)

- ...
- vascular access device (infusion port) (Port-A-Cath) (reservoir) Z45.2

MANEC (mixed adenoneuroendocrine carcinoma) (M8244/3)

Mania (monopolar) F30.9

Mastocytoma (M9740/1) D47.0

- extracutaneous (M9740/1) D47.0

- malignant (M9740/3) C96.2

- skin (solitary) (M9740/1) D47.0

Mastocytosis (cutaneous) (diffuse) Q82.2

- adult onset (M9740/1) D47.0

- malignant (aggressive) (M9741/3) C96.2

- aggressive (M9741/3) C96.2

- systemic (associated with clonal haematopoietic non-mast cell disease) (indolent) (SM-AHNMD) (M9741/3) D47.0

- - with associated haematological (clonal) non-mast cell disorder (SM-AHNMD) (M9741/3) D47.0

- - aggressive (M9741/3) C96.2

Mastodynia N64.4

Medulloblastoma (M9470/3)

- with extensive nodularity (M9471/3) C71.6

- anaplastic (M9474/3) C71.6

- desmoplastic (nodular) (M9471/3) C71.6

- - in situ (M9471/2) D09.7

- in situ (M9470/2)

- - specified site — see *Neoplasm/in situ*

- - unspecified site D09.7

- large cell (M9474/3) C71.6

- - in situ (M9474/2) D09.7

- lipomatous (M9506/1) — see *Neoplasm/brain/uncertain behaviour*

- melanotic (M9470/3) C71.6

- - in situ (M9470/2)

- - - specified site — see *Neoplasm/in situ*

- - - unspecified site D09.7

- specified site — see *Neoplasm/brain/malignant*

- unspecified site C71.6

Medulloepithelioma (M9501/3) — see also

Neoplasm/malignant

- benign (M9501/0) D31.4

- in situ (M9501/2) D09.2

- teratoid (M9502/3) — see *Neoplasm/malignant*

- - benign (M9502/0) D31.4

- - in situ (M9502/2) D09.2

Medullomyoblastoma (M9472/3)

- in situ (M9472/2)

- - specified site — see *Neoplasm/in situ*

- - unspecified site D09.7

- specified site — see *Neoplasm/brain/malignant*

- unspecified site C71.6

Melanocytoma (M8726/0) — see also

Neoplasm/benign

- eyeball (M8726/0) D31.4

- - malignant (M8726/3) C69.4

- meningeal (M8728/1) — see *Neoplasm/meninges/uncertain behaviour*

Melanoma (malignant) (M8720/3) C43.9

- nodular (M8721/3)
- - in situ (M8721/2)
- regressing, ~~malignant (M8723/3)~~
- - malignant (M8723/3)
- - uncertain or unknown behaviour (M8723/1)
- site classification

...

- superficial spreading (M8743/3)
- - uncertain or unknown behaviour (M8743/1)

Melanomatosis, meningeal (M8728/3) — see *Neoplasm/meninges/malignant*

Meningioma (M9530/0) — see also

- Neoplasm/meninges/benign*
- anaplastic (M9530/3) — see *Neoplasm/meninges/malignant*
- - in situ (M9530/2) D09.7
- angioblastic (M9535/0)
- angiomatous (M9534/0)
- - in situ (M9534/2)
- atypical (M9539/1) — see *Neoplasm/meninges/uncertain behaviour*
- - benign (M9539/0) — see *Neoplasm/meninges/benign*
- - in situ (M9539/2) D09.7
- chordoid (M9538/1) — see *Neoplasm/meninges/uncertain behaviour*
- - in situ (M9538/2) D09.7
- clear cell (M9538/1) — see *Neoplasm/meninges/uncertain behaviour*
- endotheliomatous (M9531/0)
- - in situ (M9531/2)
- fibroblastic (M9532/0)
- fibrous (M9532/0)
- haemangioblastic (M9535/0)
- haemangiopericytic (M9150/1) — see *Neoplasm/meninges/uncertain behaviour*
- - in situ (M9150/2) D09.7
- - in situ (M9530/2) D09.7
- lymphoplasmacyte-rich (M9530/0)
- malignant (M9530/3) — see *Neoplasm/meninges/malignant*
- - in situ (M9530/2) D09.7
- meningothelial (M9531/0)
- - in situ (M9531/2)
- meningotheliomatous (M9531/0)
- - in situ (M9531/2)
- metaplastic (M9530/0)
- ...
- papillary (M9538/3) — see *Neoplasm/meninges/malignant*
- - in situ (M9538/2) D09.7
- psammomatous (M9533/0)
- - in situ (M9533/2)
- rhabdoid (M9538/3)
- - in situ (M9538/2)
- secretory (M9530/0)
- syncytial (M9531/0)
- - in situ (M9531/2)
- transitional (M9537/0)

Merkel cell tumour (M8247/3) — see

- Neoplasm/skin/malignant*
- in situ (M8247/2) — see *Neoplasm/skin/in situ*

Merocele — see *Hernia/femoral*

Mesenchymoma (M8990/1) — see also

- Neoplasm/connective tissue/uncertain behaviour*

- benign (M8990/0) — see *Neoplasm/connective tissue/benign*
- in situ (M8990/2) D09.7
- malignant (M8990/3) — see *Neoplasm/connective tissue/malignant*

Mesonephroma (malignant) (M9110/3) (see also *Neoplasm/malignant*) C80.-

- benign (M9110/0) — see *Neoplasm/benign*
- in situ (M9110/2) — see *Neoplasm/in situ*

Mesophlebitis — see *Phlebitis*

Micrencephalon Q02

Microadenoma, pancreatic (M8150/0) D13.7

Microaneurysm, retinal H35.0

Mullerian mixed tumour (M8950/3)

- in situ (M8950/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site D07.3
- specified site — see *Neoplasm/malignant*

Myeloencephalitis — see *Encephalitis*

Myelofibrosis (chronic) (idiopathic) (primary) (with myeloid metaplasia) (M9961/3) D47.4

- acute (M9931/3) C94.4-

Myelopathy (spinal cord) G95.9

...

- vitamin B₁₂ E53.8† G32.0*

Myelopoiesis, transient abnormal (M9898/1) D47.7

Myeloradiculitis G04.9

Myoblastoma, granular cell (M9580/0) — see also *Neoplasm/connective tissue/benign*

- in situ (M9580/2) D09.7
- malignant (M9580/3) — see *Neoplasm/connective tissue/malignant*

Myoepithelioma (M8982/0) — see also

- Neoplasm/benign*
- in situ (M8982/2) — see *Neoplasm/in situ*
- malignant (M8982/3) — see *Neoplasm/malignant*

Naevus (M8720/0) D22.9

- blue (M8780/0)
- - cellular (M8790/0)
- - - giant (M8790/0)
- - - malignant (M8790/3) — see *Neoplasm/skin/malignant*
- - in situ (M8780/2) D03.-
- - Jadassohn's (M8780/0)
- - malignant (M8780/3) — see *Melanoma*
- capillary (M9131/0) D18.0-
- cavernous (M9121/0) D18.0-
- - malignant (M9121/3)
- cellular (M8720/0)
- - blue (M8790/0)
- - - malignant (M8790/3)
- comedonicus Q82.5
- compound (M8760/0)
- - in situ (M8760/2)
- - malignant (M8760/3)
- - uncertain or unknown behaviour (M8760/1)
- congenital
- ...
- conjunctiva (M8720/0)
- dermal (M8750/0) — see also *Naevus/intradermal*

- - with epidermal naevus (M8760/0) — see
Naevus/compound
- dysplastic (M8727/0)
- - uncertain or unknown behaviour (M8727/1)
- epithelioid cell (M8771/0)
- - with spindle cell (M8770/0)
- - - uncertain or unknown behaviour (M8770/1)
- flammeus Q82.5

- ...
- halo (M8723/0)
- - uncertain or unknown behaviour (M8723/1)
- intradermal (M8750/0)
- - in situ (M8750/2)
- - malignant (M8750/3)
- - uncertain or unknown behaviour (M8750/1)
- intraepidermal (M8740/0)

- ...
- juvenile (M8770/0)
- - uncertain or unknown behaviour (M8770/1)
- lymphatic (M9170/0) D18.1
- magnocellular (M8726/0)
- - malignant (M8726/3)
- - - specified site — see Neoplasm/malignant
- - - unspecified site C69.4
- - specified site — see Neoplasm/benign

- ...
- regressing (M8723/0)
- - uncertain or unknown behaviour (M8723/1)
- sanguineous Q82.5

- ...
- spindle cell (M8772/0)
- - with epithelioid cell (M8770/0)
- - - uncertain or unknown behaviour (M8770/1)
- - pigmented, of Reed (M8770/0)
- Spitz (M8770/0)
- - uncertain or unknown behaviour (M8770/1)
- stellar I78.1
- strawberry Q82.5
- Sutton's (M8723/0)
- - uncertain or unknown behaviour (M8723/1)
- unius lateris Q82.5

Neoplasia

- intraepithelial
- - anal, grade III (AIN III) (M8077/2) D01.3
- - - grade III (AIN III) (M8077/2) D01.3
- - - high grade (M8077/2) D01.3
- - - low grade (M8077/0) D12.9
- - biliary
- - - grade III (BillN-3) (M8148/2) D01.5
- - - high grade (M8148/2) D01.5
- - - low grade (M8148/0) D13.5
- - breast
- - - ductal, grade 3 (DIN 3) (M8500/2) D05.1
- - - - with invasion — see Neoplasm/breast/malignant
- - - cervix (CIN) (uteri) N87.9
- - - adenocarcinoma in situ (M8148/2) D06.9
- - - - with invasion — see Neoplasm/cervix/malignant
- - - grade I N87.0
- - - grade II N87.1
- - - grade III (severe dysplasia) (M8077/2) D06.9
- - - - endocervix D06.0
- - - - exocervix D06.1
- - - - specified NEC D06.7
- - - squamous (cell)
- - - - high grade (HGSIL) (HSIL) (M8077/2) D06.9
- - - - endocervix D06.0

- - - - exocervix D06.1
- - - - specified NEC D06.7
- - - low grade (LGSIL) (LSIL) N87.0
- - conjunctival H11.8
- - ductal, grade 3 (DIN 3) (M8500/2) D05.1
- - grandular, grade III (M8148/2) D07.5
- - oesophageal
- - - glandular (dysplasia)
- - - - high grade (flat) (M8148/2) D00.1
- - - - low grade (M8148/0) D13.0
- - - squamous (cell)
- - - - high grade (M8077/2) D00.1
- - - - low grade (M8077/0) D13.0
- - prostatic (PIN)
- - - grade I N42.3
- - - grade II D07.5
- - - grade III (glandular) (PIN III) (M8148/2) D07.5
- - squamous, grade III (M8077/2) — see Neoplasm/in situ
- - vagina (VAIN) N89.3

Nephroblastoma (epithelial) (mesenchymal) (M8960/3) C64

- cystic, partially differentiated (M8959/1) C64

Nephrocalcinosis E83.5† N29.8*

Nephroma (M8960/3) C64

- cystic
- - benign (M8959/0) D30.0
- - in situ (M8959/2) D09.1
- - malignant (multilocular) (M8959/3) C64
- - in situ (M8960/2) D09.1
- mesoblastic (M8960/1) D41.0

Neurilemmoma (M9560/0) — see also

- Neoplasm/nerve/benign
- acoustic (nerve) D33.3
- in situ (M9560/2) D09.7
- malignant (M9560/3) — see also
Neoplasm/nerve/malignant
- - acoustic (nerve) C72.4

Neurilemmosarcoma (M9560/3) — see

- Neoplasm/nerve/malignant
- in situ (M9560/2) D09.7

Neurinoma (M9560/0) — see Neoplasm/nerve/benign

Neuroavitaminosis E56.9† G99.8*

Neuroblastoma (central) (M9500/3) — see also

- Neoplasm/malignant
- benign (M9500/0) — see Neoplasm/benign
- central (M9500/3) — see Neoplasm/brain/malignant
- cystic, partially differentiated (M8959/1) C64
- in situ (M9500/2) D09.7
- olfactory (M9522/3) C30.0
- - in situ (M9522/2) D02.3

Neurochorioretinitis (see also Chorioretinitis) H30.9

Neurocytoma (central) (M9506/1) — see also

- Neoplasm/uncertain behaviour
- extraventricular (M9506/1) — see also
Neoplasm/uncertain behaviour
- olfactory (M9521/3) C30.0
- - in situ (M9521/2) D02.3

Neurodermatitis (circumscribed) (circumscripta) (local) L28.0

Neuroepithelioma (M9503/3) — *see also*

Neoplasm/malignant

- *in situ* (M9503/2) — *see Neoplasm/in situ*

- olfactory

- - benign (M9523/0) D14.0

- - *in situ* (M9523/2) D02.3

- - malignant (M9523/3) C30.0

Neurofibroma (M9540/0) — *see also*

Neoplasm/nerve/benign

- plexiform (M9550/0) — *see Neoplasm/nerve/benign*

- - *in situ* (M9550/2) D09.7

Neurofibromatosis (multiple) (nonmalignant)

(M9540/1) Q85.0

- *in situ* (M9540/2) D09.7

- malignant (M9540/3) — *see*

Neoplasm/nerve/malignant

Neurofibrosarcoma (M9540/3) — *see*

Neoplasm/nerve/malignant

- *in situ* (M9540/2) D09.7

Neurogenic — *see also condition*

Neuronaevus (M8725/0) — *see Naevus*

- malignant (M8725/3)

Neuronitis G58.9

Neurosarcoma (M9540/3) — *see*

Neoplasm/nerve/malignant

- *in situ* (M9540/2) D09.7

Neurosclerosis — *see Disorder/nerve*

Neutropenia, neutropenic (congenital) (cyclic) (drug-induced) (periodic) (primary) (splenic) (toxic) D70

- neonatal, transitory (isoimmune) (maternal transfer) P61.5

- refractory (M9991/3) D46.7

Nevus — *see Naevus*

Odontosarcoma, ameloblastic (M9290/3) C41.1

- *in situ* (M9290/2) D09.7

- upper jaw (bone) C41.02

Oligoastrocytoma (anaplastic) (M9382/3) — *see*

Neoplasm/brain/malignant

- *in situ* (M9382/2) D09.7

Oligocythaemia D64.9

Oligodendroblastoma (M9460/3)

- *in situ* (M9460/2)

- - specified site — *see Neoplasm/in situ*

- - unspecified site D09.7

- specified site — *see Neoplasm/brain/malignant*

- unspecified site C71.9

Oligodendroglioma (M9450/3)

- anaplastic type (M9451/3)

- - *in situ* (M9451/2) D09.7

- - - specified site — *see Neoplasm/in situ*

- - - unspecified site D09.7

- - specified site — *see Neoplasm/brain/malignant*

- - unspecified site C71.9

- *in situ* (M9450/2)

- - specified site — *see Neoplasm/in situ*

- - unspecified site D09.7

- specified site — *see Neoplasm/brain/malignant*

- unspecified site C71.9

Orchioblastoma (M9071/3) C62.9

- *in situ* (M9071/2) D07.6

Orchitis (nonspecific) (septic) (suppurative) N45.9

Osteochondromatosis (M9210/1) D48.0

- malignant (M9210/3) — *see*

Neoplasm/bone/malignant

- syndrome Q78.4

Osteochondrosarcoma (M9180/3) — *see*

Neoplasm/bone/malignant

- *in situ* (M9180/2) D09.7

Osteochondrosis M93.9

Osteoclastoma (M9250/1) D48.0

- *in situ* (M9250/2) D09.7

- malignant (M9250/3) — *see*

Neoplasm/bone/malignant

Osteofibrosarcoma (M9182/3) — *see*

Neoplasm/bone/malignant

- *in situ* (M9182/2) D09.7

Osteogenesis imperfecta Q78.0

Osteosarcoma (M9180/3) — *see also*

Neoplasm/bone/malignant

- central (conventional) (M9186/3)

- - *in situ* (M9186/2) D09.7

- chondroblastic (M9181/3)

- - *in situ* (M9181/2) D09.7

- fibroblastic (M9182/3)

- - *in situ* (M9182/2) D09.7

- in Paget's disease of bone (M9184/3)

- - *in situ* (M9184/2) D09.7

- *in situ* (M9180/2) D09.7

- intracortical (M9195/3)

- - *in situ* (M9195/2) D09.7

- intraosseous (low grade) (well differentiated) (M9187/3)

- - *in situ* (M9187/2) D09.7

- juxtacortical (M9192/3)

- - *in situ* (M9192/2) D09.7

- medullary (M9186/3)

- - *in situ* (M9186/2) D09.7

- parosteal (M9192/3)

- - *in situ* (M9192/2) D09.7

- periosteal (M9193/3)

- - *in situ* (M9193/2) D09.7

- round cell (M9185/3)

- - *in situ* (M9185/2) D09.7

- small cell (M9185/3)

- - *in situ* (M9185/2) D09.7

- surface, high grade (M9194/3)

- - *in situ* (M9194/2) D09.7

- telangiectatic (M9183/3)

- - *in situ* (M9183/2) D09.7

Osteosclerosis Q78.2

Pacinian tumour (M9507/0) — *see*

Neoplasm/skin/benign

- *in situ* (M9507/2) — *see Neoplasm/skin/in situ*

Pad, knuckle or Garrod's M72.1

Paget's disease

- bone M88.9

- - osteosarcoma in (M9184/3) — *see*

Neoplasm/bone/malignant

- - - *in situ* (M9184/2) D09.7

- - skull M88.0

Pancreatoblastoma (M8971/3) — see
Neoplasm/pancreas/malignant
 - in situ (M8971/2) — see *Neoplasm/pancreas/in situ*
Pancroolithiasis K86.8

Papilloma (M8050/0) — see also *Neoplasm/benign*
 - choroid plexus (lateral ventricle) (third ventricle)
 (M9390/0) D33.0
 - - anaplastic (M9390/3) C71.5
 - - atypical (M9390/1) D43.0
 - - fourth ventricle (M9390/0) D33.1
 - - in situ (M9390/2) D09.7
 - - malignant (M9390/3) C71.5
 ...
 - inverted, squamous cell (M8053/0)
 - - malignant (M8053/3)
 - keratotic (M8052/0)

 - squamous (cell) (M8052/0)
 - - and glandular, mixed (M8560/0)
 - - inverted (M8053/0)
 - - - malignant (M8053/3)
 - transitional (cell) (M8120/1) — see also
Neoplasm/uncertain behaviour

Paraganglioma (M8680/1) — see also
Neoplasm/uncertain behaviour
 - adrenal (medullary) (M8700/0) D35.0
 - - in situ (M8700/2) D09.3
 - - malignant (M8700/3) C74.1
 - - uncertain or unknown behaviour (M8700/1) D44.1
 - aortic body (M8691/1) D44.7
 - - in situ (M8691/2) D09.7
 - - malignant (M8691/3) C75.5
 - aorticopulmonary (M8691/1) D44.7
 - - in situ (M8691/2) D09.7
 - benign (M8680/0) — see *Neoplasm/benign*
 - carotid body (M8692/1) D44.6
 - chromaffin (M8700/0) — see also *Neoplasm/benign*
 - - in situ (M8700/2)
 - - malignant (M8700/3) — see *Neoplasm/malignant*
 - extra-adrenal (M8693/1)
 - - in situ (M8693/2)
 - - - specified site — see *Neoplasm/in situ*
 - - - unspecified site D09.3
 - - malignant (M8693/3)
 ...
 - gangliocytic (M8683/0)
 - - specified site — see *Neoplasm/benign*
 - - uncertain or unknown behaviour (M8683/1)
 - - - specified site — see *Neoplasm/uncertain behaviour*
 - - - unspecified site D01.4
 - - unspecified site D13.2
 - glomus jugulare (M8690/1) D44.7
 - - benign (M8690/0) D35.6
 - - in situ (M8690/2) D09.3
 - in situ (M8680/2)
 - - specified site — see *Neoplasm/in situ*
 - - unspecified site D09.3
 - jugular (M8690/1) D44.7
 - - benign (M8690/0) D35.6
 - - in situ (M8690/2) D09.3
 - jugulotympanic (M8690/1) D44.7
 - - benign (M8690/0) D35.6
 - - in situ (M8690/2) D09.3
 - malignant (M8680/3)
 - - specified site — see *Neoplasm/malignant*

- - unspecified site C75.5
 - nonchromaffin (M8693/1)
 - - in situ (M8693/2)
 - - - specified site — see *Neoplasm/in situ*
 - - - unspecified site D09.3
 - - malignant (M8693/3)

Perineurioma (intraneural) (soft tissue) (M9571/0) —
 see also *Neoplasm/benign*
 - in situ (M9571/2) D09.7
 - malignant (MPNST) (M9571/3) — see *Tumour/nerve sheath, peripheral, malignant*

Phaeochromoblastoma (M8700/3)
 - in situ (M8700/2)
 - specified site — see *Neoplasm/malignant*
 - uncertain or unknown behaviour (M8700/1)
 - unspecified site C74.1

Phaeochromocytoma (M8700/0)
 - in situ (M8700/2)
 - - specified site — see *Neoplasm/in situ*
 - - unspecified site D09.3
 - malignant (M8700/3)
 - - specified site — see *Neoplasm/malignant*
 - - unspecified site C74.1
 - specified site — see *Neoplasm/benign*
 - uncertain or unknown behaviour (M8700/1) D44.1
 - unspecified site D35.0

Pilomatricoma (M8110/0) — see also
Neoplasm/skin/benign
 - in situ (M8110/2) — see *Neoplasm/skin/in situ*
 - malignant (M8110/3) — see
Neoplasm/skin/malignant

Pilomatrixoma (M8110/0) — see also
Neoplasm/skin/benign
 - in situ (M8110/2) — see *Neoplasm/skin/in situ*
 - malignant (M8110/3) — see *Neoplasm/skin/malignant*

Pindborg tumour (M9340/0) D16.5

- malignant (M9340/3) C41.1
 - - upper jaw (bone) C41.02
 - upper jaw (bone) (M9340/0) D16.42

Pineal body or gland — see *condition*

Pinealoblastoma (mixed with pineocytoma)
 (M9362/3) C75.3
 - in situ (M9362/2) D09.3

Pinealoma (M9360/1) D44.5

Pineoblastoma (mixed with pineocytoma) (M9362/3)
 C75.3
 - in situ (M9362/2) D09.3

Pineocytoma (M9361/1) D44.5

- malignant (M9361/3) C75.3
 - mixed with pineoblastoma (M9362/3) C75.3
 - - in situ (M9362/2) D09.3

Pinguecula H11.1

Pitted — see *Oedema*

Pituicytoma (M9432/1) D44.3

Pituitary gland — see *condition*

Plasmacytoma NEC (M9731/3) C90.3-

- extramedullary (not of bone) (M9734/3) C90.2-
 - extraosseous (M9734/3) C90.2-
 - medullary (M9731/3) C90.0-

PNET (primitive neuroectodermal tumour) (M9473/3)
 — see *Neoplasm/malignant*

- in situ (M9473/2) D09.7

Pneumathæmia — see *Air/embolism/by type*

Pneumoblastoma (M8972/3) — see
Neoplasm/lung/malignant

- in situ (M8972/2) — see *Neoplasm/lung/in situ*

Pneumocephalus G93.8

Polyembryoma (M9072/3) — see *Neoplasm/malignant*

- in situ (M9072/2) — see *Neoplasm/in situ*

Polyglandular

Polyp, polypus

- septum (nasal) J33.0

- serrated, sessile (M8213/0) — see also
Neoplasm/benign

- sinus (accessory) (ethmoidal) (frontal) (maxillary)
(sphenoidal) J33.8

Porocarcinoma (M8409/3) — see
Neoplasm/skin/malignant

- in situ (M8409/2) — see *Neoplasm/skin/in situ*

Porocephaliasis B88.8

Porokeratosis Q82.89

Poroma, eccrine (M8409/0) — see
Neoplasm/skin/benign

- in situ (M8409/2) — see *Neoplasm/skin/in situ*

- malignant (M8409/3) — see *Neoplasm/skin/malignant*

Porphyria (South African) (Swedish) E80.2

PPNET (peripheral primitive neuroectodermal tumour)
(M9364/3) — see *Neoplasm/malignant*

- in situ (M9364/2) — see *Neoplasm/in situ*

Prader-Willi syndrome Q87.14

Prolactinoma (benign) (M8271/0)

- in situ (M8271/2) D09.3

- malignant (M8271/3) — see *Neoplasm/malignant*

- specified site — see also *Neoplasm/benign*

- - in situ (M8271/2) — see *Neoplasm/in situ*

- - malignant (M8271/3) — see *Neoplasm/malignant*

- unspecified site D35.2

Ptilosis (eyelid) H02.7

PTLD (post-transplant lymphoproliferative disorder) (M9971/1) D47.7

- polymorphic (M9971/3) C96.7

Ptomaine (poisoning) T62.9

Recklinghausen's disease (M9540/1) (see also
Neurofibromatosis) Q85.0

- bones E21.0

Reclus' disease (cystic) N60.1

Reticuloendotheliosis

- malignant (M9960/3) C96.9

- nonlipid (M97541/3) C96.0

Reticulohistiocytoma (giant-cell) (M8831/0) D76.3

Retinoblastoma (M9510/3) C69.2

- differentiated (M9511/3) C69.2

- - in situ (M9511/2) D09.2

- diffuse (M9513/3) C69.2

- - in situ (M9513/2) D09.2

- in situ (M9510/2) D09.2

- spontaneously regressed (M9514/1) C69.2

- undifferentiated (M9512/3) C69.2

- - in situ (M9512/2) D09.2

Retinochoroiditis (see also *Chorioretinitis*) H30.9

Sarcoma (M8800/3) — see also *Neoplasm/connective tissue/malignant*

- alveolar soft part (M9581/3)

- - in situ (M9581/2) D09.7

- ameloblastic (M9330/3) C41.1

- - in situ (M9330/2) D09.7

- upper jaw (bone) C41.02

- - - in situ (M9330/2) D09.7

- botryoid, botryoides (M8910/3)

- cerebellar (M9480/3) C71.6

- - circumscribed (arachnoidal) (M9471/3) C71.6

- - - in situ (M9471/2) D09.7

- in situ (M9480/2) D09.7

- circumscribed (arachnoidal) cerebellar (M9471/3) C71.6

- - in situ (M9471/2) D09.7

- clear cell (of tendons and aponeuroses) (M9044/3)

...

- embryonal (M8991/3)

- - in situ (M8991/2)

- endometrial (high grade) (stromal) (M8930/3) C54.1

- - isthmus C54.0

- - low grade (M8931/3) C54.1

- epithelioid (cell) (M8804/3)

- - in situ (M8804/2)

- Ewing (M9260/3) — see *Neoplasm/bone/malignant*

- - in situ (M9260/2) D09.7

- germinoblastic (M9680/3) C83.8

- giant cell (except of bone) (M8802/3)

- - bone (M9250/3) — see *Neoplasm/bone/malignant*

- - - in situ (M9250/2) D09.7

- glomoid (M8710/3)

- - in situ (M8710/2)

- granulocytic (M9930/3) C92.3-

- haemangioendothelial (M9130/3)

- - in situ (M9130/2) D09.7

- haemorrhagic, multiple (M9140/3) — see
Sarcoma/Kaposi

...

- Kupffer cell (M9124/3) C22.3

- - in situ (M9124/2) D01.5

- Langerhans-cell (M9756/3) C96.4

- leptomenigeal (M9530/3) — see

Neoplasm/meninges/malignant

- - in situ (M9530/2) D09.7

- lymphangioendothelial (M9170/3)

- - in situ (M9170/2)

- lymphoblastic (M9727/3) C83.5

...

- meningeal (M9530/3) — see

Neoplasm/meninges/malignant

- - in situ (M9530/2) D09.7

- meningothelial (M9530/3) — see

Neoplasm/meninges/malignant

- - in situ (M9530/2) D09.7

- mesenchymal (M8800/3)

- - mixed (M8990/3)

- - - in situ (M8990/2)

- mesothelial (M9050/3) — see *Mesothelioma*

- monstrocellular (M9441/3) — see

Neoplasm/brain/malignant

- - in situ (M9441/2) D09.7

- myeloid (M9930/3) C92.3-

- myofibroblastic — see *Tumour/myofibroblastic*

- neurogenic (M9540/3) — see

Neoplasm/nerve/malignant

- - in situ (M9540/2) D09.7

- odontogenic (M9270/3) C41.1
- - in situ (M9270/2) D09.7
- - upper jaw (bone) C41.02
- osteoblastic (M9180/3) — see *Neoplasm/bone/malignant*
- - in situ (M9180/2) D09.7
- osteogenic (M9180/3) — see also *Neoplasm/bone/malignant*
- - in situ (M9180/2) D09.7
- - juxtacortical (M9192/3)
- - - in situ (M9192/2) D09.7
- - periosteal (M9193/3)
- - - in situ (M9193/2) D09.7
- periosteal (M8812/3) — see also *Neoplasm/bone/malignant*
- - osteogenic (M9193/3)
- - - in situ (M9193/2) D09.7
- plasma cell (M9731/3) C90.3-

Sarcomatosis

- meningeal (M9539/3) — see *Neoplasm/meninges/malignant*
- - in situ (M9539/2) D09.7
- specified site NEC (M8800/3) — see *Neoplasm/connective tissue/malignant*

Schneiderian

- carcinoma (M8121/3)
- - in situ (M8121/2)
- - - specified site — see *Neoplasm/in situ*
- - - unspecified site D02.3
- - specified site — see *Neoplasm/malignant*
- - unspecified site C30.0
- papilloma (M8121/0)
- - inverted (M8121/1) — see *Neoplasm/uncertain behaviour*
- - oncocytic (M8121/1) — see *Neoplasm/uncertain behaviour*
- - specified site — see *Neoplasm/benign*
- - unspecified site D14.0

Schüller-Christian disease or syndrome

(M9753/4/M9751/3) C96.5

Schultze's type acroparaesthesia, simple I73.8

Schwannoma (M9560/0) — see also

- Neoplasm/nerve/benign*
- degenerated (M9560/0)
- in situ (M9560/2) D09.7
- malignant (M9560/3) — see also *Neoplasm/nerve/malignant*
- - with rhabdomyoblastic differentiation (M9561/3) — see *Neoplasm/nerve/malignant*
- - - in situ (M9561/2) D09.7
- melanocytic (M9560/0)

Seminoma (M9061/3)

- with high mitotic index (M9062/3)
- - in situ (M9062/2) D07.6
- anaplastic (M9062/3)
- - in situ (M9062/2)
- - - specified site — see *Neoplasm/in situ*
- - - unspecified site D07.6
- - specified site — see *Neoplasm/malignant*
- - unspecified site C62.9
- specified site — see *Neoplasm/malignant*

Sertoli cell tumour

- with lipid storage (M8641/0)
- - specified site — see *Neoplasm/benign*
- - unspecified site
- - - female D27
- - - male D29.2
- adenoma (M8640/1) — see *Neoplasm/uncertain behaviour*
- - specified site — see *Neoplasm/uncertain behaviour*
- - unspecified site
- - - female D39.1
- - - male D40.1
- carcinoma (M8640/3)
- in situ (M8640/2)
- - specified site — see *Neoplasm/in situ*
- - unspecified site
- - - female D07.3
- - - male D07.6
- malignant (M8640/3)
- - specified site — see *Neoplasm/malignant*
- - unspecified site C62.9
- - - female C56
- - - male C62.9
- tumour (M8640/1) — see also *Neoplasm/uncertain behaviour*
- with lipid storage (M8641/0)
- - specified site — see *Neoplasm/benign*
- - unspecified site
- - - female D27
- - - male D29.2

Sertoli-Leydig cell tumour (M8631/1) — see also

- Neoplasm/uncertain behaviour*
- poorly differentiated (M8631/3) — see also *Neoplasm/malignant*
- - with heterologous elements (M8634/3) — see *Neoplasm/malignant*
- - - in situ (M8634/2) — see *Neoplasm/in situ*
- - in situ (M8631/2) — see *Neoplasm/in situ*
- retiform (M8633/1)

...

- well differentiated (M8631/0) — see *Neoplasm/benign*
- - specified site — see *Neoplasm/benign*
- - unspecified site
- - - female D27
- - - male D29.2

Serum

Somatostatinoma (M8156/1) — see also

- Neoplasm/uncertain behaviour*
- in situ (M8156/2) — see *Neoplasm/in situ*
- malignant (M8156/3) — see *Neoplasm/malignant*

Spongioblastoma (M9421/1) — see also

- Neoplasm/brain/uncertain behaviour*
- multiforme (M9440/3)
- - in situ (M9440/2) D09.7
- polar, polare (primitive) (M9423/3)
- - in situ (M9423/2) D09.7

Spongioneuroblastoma (M9504/3) — see

- Neoplasm/malignant*
 - in situ (M9504/2) D09.7
- Spontaneous** — see also *condition*

Struma (see also *Goitre*) E04.9

- ovarii (M9090/0) D27
- - with carcinoid (M9091/1) D39.1
- - - in situ (M9091/2) D07.3
- - in situ (M9090/2) D07.3

- - malignant (M9090/3) C56
- Riedel's E06.5

Sutton's naevus (M8723/0) D22.9

- uncertain or unknown behaviour (M8723/1) D48.5

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Sympathicoblastoma (M9500/3) — see

Neoplasm/malignant

- benign (M9500/0) — see *Neoplasm/benign*

- in situ (M9500/2) — see *Neoplasm/in situ*

Sympathicogonioma (M9500/3) — see

Sympathicoblastoma

Syndrome — see also *Disease*

- hand, diabetic E1-.61
- Hand-Schüller-Christian (M9753/4/M9751/3) C96.5
- hand-shoulder G90.8
- ...
- thyrotoxicosis (hyperthyroidism) E05.9+ G73.0*
- myelodysplastic (unclassifiable) (M9989/3) (see also *Anaemia/refractory*) D46.9
- - with isolated 5q deletion (5q-) (chromosomal abnormality) (M9986/3) D46.6
- - specified NEC D46.7
- - therapy related (alkylating agent related) (epipodophyllotoxin related) (M9987/3) D46.7
- myeloproliferative (chronic) (M9960/3/M9975/4) D47.1 D47.9
- chronic (M9960/3) D47.4
- myoclonus epilepsy ragged red fibre G40.4-
- ...
- Scholz(-Bielschowsky-Henneberg) E75.2
- Schüller-Christian (M9753/4/M9751/3) C96.5
- Schwartz(-Jampel) Q78.89

Syringoma (M8407/0) — see also *Neoplasm/skin/benign*

- chondroid (M8940/0)
- - in situ (M8940/2) — see *Neoplasm/skin/in situ*
- - malignant (M8940/3) — see *Neoplasm/skin/malignant*
- in situ (M8407/2) — see *Neoplasm/skin/in situ*

Syringomyelia G95.0

Teratoblastoma (malignant) (M9080/3) — see

Neoplasm/malignant

- in situ (M9080/2) — see *Neoplasm/in situ*

Teratocarcinoma (M9081/3) — see also

Neoplasm/malignant

- in situ (M9081/2) — see *Neoplasm/in situ*

- - liver D01.5

- liver C22.7

Teratoma (solid) (M9080/1) — see also

Neoplasm/uncertain behaviour

- with
- - embryonal carcinoma, mixed (M9081/3) — see *Neoplasm/malignant*
- - - in situ (M9081/2) — see *Neoplasm/in situ*
- - malignant transformation (M9084/3) — see *Neoplasm/malignant*
- - - in situ (M9084/2) — see *Neoplasm/in situ*
- - seminoma, mixed (M9085/3) — see *Neoplasm/malignant*
- adult (cystic) (M9080/0) — see *Neoplasm/benign*
- benign (M9080/0) — see *Neoplasm/benign*
- combined with choriocarcinoma (M9101/3) — see *Neoplasm/malignant*
- - in situ (M9101/2) — see *Neoplasm/in situ*

- cystic (adult) (M9080/0) — see *Neoplasm/benign*
- differentiated (M9080/0) — see *Neoplasm/benign*
- embryonal (M9080/3) — see also

Neoplasm/malignant

- - in situ (M9080/2) — see *Neoplasm/in situ*

- - - liver D01.5

- - liver C22.7

- immature (malignant) (M9080/3) — see

Neoplasm/malignant

- in situ (M9080/2) — see *Neoplasm/in situ*

- - liver D01.5

- liver (M9080/3) C22.7

- - adult, benign, cystic, differentiated type or mature (M9080/0) D13.4

- malignant (M9080/3) — see also

Neoplasm/malignant

- - anaplastic (M9082/3) — see *Neoplasm/malignant*

- - - in situ (M9082/2) — see *Neoplasm/in situ*

- - intermediate (M9083/3) — see *Neoplasm/malignant*

- - - in situ (M9083/2) — see *Neoplasm/in situ*

- - trophoblastic (M9102/3)

- - - in situ (M9102/2)

- - - - specified site — see *Neoplasm/in situ*

- - - - unspecified site D07.6

- - - specified site — see *Neoplasm/malignant*

- - - unspecified site C62.9

- - undifferentiated (M9082/3) — see

Neoplasm/malignant

- - - in situ (M9082/2) — see *Neoplasm/in situ*

- mature (M9080/0) — see *Neoplasm/benign*

- ovary (M9080/0) D27

- - embryonal, immature or malignant (M9080/3) C56

- - - in situ (M9080/2) D07.3

- sacral, fetal, affecting labour or delivery (mother) O66.3

Thecoma (M8600/0) D27

- in situ (M8600/2) D07.3

- luteinised (M8601/0) D27

- malignant (M8600/3) C56

Thrombocytopenia, thrombocytopenic D69.6

- puerperal, postpartum O72.3

- refractory (M9992/3) D46.7

- secondary D69.5

Thymoma (M8580/1) D38.4

- atypical (M8585/1)

- - in situ (M8585/2) D09.3

- - malignant (M8585/3) C37

- benign (M8580/0) D15.0

- cortical (M8584/1)

- - in situ (M8584/2) D09.3

- - malignant (M8584/3) C37

- - predominantly (M8583/1)

- - - in situ (M8583/2) D09.3

- - - malignant (M8583/3) C37

- epithelial (M8585/1)

- - in situ (M8585/2) D09.3

- - malignant (M8585/3) C37

- hamartomatous, ectopic (M8587/0)

- in situ (M8580/2) D09.3

- lymphocyte-rich (M8583/1)

- - in situ (M8583/2) D09.3

- - malignant (M8583/3) C37

- lymphocytic (M8583/1)

- - in situ (M8583/2) D09.3

- - malignant (M8583/3) C37

- malignant NEC (M8580/3) C37

- medullary (M8581/1)
 - - in situ (M8581/2) D09.3
 - - malignant (M8581/3) C37
 - mixed type (M8582/1)
 - - in situ (M8582/2) D09.3
 - - malignant (M8582/3) C37
 - organoid (M8583/1)
 - - in situ (M8583/2) D09.3
 - - malignant (M8583/3) C37
 - spindle cell (M8581/1)
 - - in situ (M8581/2) D09.3
 - - malignant (M8581/3) C37
 - type
 - - A (M8581/1)
 - - - in situ (M8581/2) D09.3
 - - - malignant (M8581/3) C37
 - - AB (M8582/1)
 - - - in situ (M8582/2) D09.3
 - - - malignant (M8582/3) C37
 - - B1 (M8583/1)
 - - - in situ (M8583/2) D09.3
 - - - malignant (M8583/3) C37
 - - B2 (M8584/1)
 - - - in situ (M8584/2) D09.3
 - - - malignant (M8584/3) C37
 - - B3 (M8585/1)
 - - - in situ (M8585/2) D09.3
 - - - malignant (M8585/3) C37
 - - C (M8586/3) C37
- Trichilemmocarcinoma** (M8102/3) — see *Neoplasm/skin/malignant*
- in situ (M8102/2) — see *Neoplasm/skin/in situ*
- Trichilemmoma**
- Trichoepithelioma** (M8100/0) — see *Neoplasm/skin/benign*
- in situ (M8100/2) — see *Neoplasm/skin/in situ*
- Trichofolliculoma** (M8101/0) — see *Neoplasm/skin/benign*
- in situ (M8101/2) — see *Neoplasm/skin/in situ*
- Tricholemmoma** (M8102/0) — see *Neoplasm/skin/benign*
- Tumour** (M8000/1) — see also *Neoplasm/uncertain behaviour*
- acinic cell (M8550/1) D48.9
 - ACTH-producing (M8158/1) — see *Neoplasm/uncertain behaviour*
 - adenocarcinoid (M8245/3) — see *Neoplasm/malignant*
 - - in situ (M8245/2) — see *Neoplasm/in situ*
 - adenomatoid (M9054/0) — see also *Neoplasm/benign*
 - - odontogenic (M9300/0) D16.5
 - - - upper jaw (bone) D16.42
 - adenosquamous (M8560/1) — see *Neoplasm/uncertain behaviour*
 - adnexal (skin) (M8390/0) — see *Neoplasm/skin/benign*
 - ...
 - aneurysmal (see also *Aneurysm*) I72.9
 - aortic body (M8691/1) D44.7
 - - in situ (M8691/2) D09.3
 - - malignant (M8691/3) C75.5
 - Askin (M9365/3) — see *Neoplasm/connective tissue/malignant*
 - - in situ (M9365/2) D09.7
 - autonomic nerve, gastrointestinal (GANT) (M8936/1) — see *Neoplasm/uncertain behaviour*
 - basal cell (M8090/1) — see *Neoplasm/skin/uncertain behaviour*
 - - benign (M8090/0) — see *Neoplasm/skin/benign*
 - Bednar (M8833/3) — see *Neoplasm/skin/malignant*
 - ...
 - Brenner (M9000/0) D27
 - borderline malignancy (M9000/1) D39.1
 - - in situ (M9000/2) D07.3
 - - malignant (M9000/3) C56
 - - proliferating (M9000/1) D39.1
 - bronchial alveolar, intravascular (M9133/3) — see *Neoplasm/lung/malignant*
 - - in situ (M9133/2) — see *Neoplasm/lung/in situ*
 - Brooke's (M8100/0) — see *Neoplasm/skin/benign*
 - brown fat (M8880/0) — see *Lipoma*
 - Burkitt (M9687/3) C83.7
 - calcifying epithelial odontogenic (M9340/0) D16.5
 - - malignant (M9340/3) C41.1
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 - carcinoid (M8240/3) — see *Carcinoid*
 - carotid body (M8692/1) D44.6
 - cells
 - - benign (M8001/0) — see *Neoplasm/benign*
 - - in situ (M8001/2) — see *Neoplasm/in situ*
 - - malignant (M8001/3) — see *Neoplasm/malignant*
 - - uncertain or unknown behaviour (M8001/1) — see *Neoplasm/uncertain behaviour*
 - cervix
 - ...
 - cystic
 - - clear cell, of borderline malignancy (M8444/1) D39.1
 - - mucinous (of) (with)
 - - - with moderate dysplasia (M8470/4) D37.7
 - - - associated invasive carcinoma (M8470/3) — see *Cystadenocarcinoma/mucinous*
 - - - benign (M8472/0)
 - - - of borderline malignancy (M8472/1) D39.1
 - - - - with malignant transformation (M8472/3) C56
 - - - - in situ (M8472/2) D07.3
 - - - - malignancy (M8472/1) D39.1
 - - - dysplasia (intermediate grade) (low grade) (moderate grade) (M8470/0) — see *Neoplasm/benign*
 - - - high grade (M8470/2) — see *Neoplasm/in situ*
 - - - intraepithelial neoplasia (intermediate grade) (low grade) (M8470/0) — see *Neoplasm/benign*
 - - - high grade (M8470/2) — see *Neoplasm/in situ*
 - - - papillary — see *Tumour/papillary/mucinous/cystic*
 - - of atrioventricular node (M8454/0) D15.1
 - - serous papillary, of borderline malignancy (M8462/1) D39.1
 - Dabska (M9135/1)
 - dendritic cell, follicular (M9758/3) C96.4
 - - blastic plasmacytoid (M9727/3) C86.4
 - - follicular (M9758/3) C96.4
 - - indeterminate (M9757/3) C96.4
 - dentigerous, mixed (M9282/0) D16.5
 - ...
 - desmoplastic, small round cell (M8806/3) — see *Neoplasm/connective tissue/malignant*
 - duct, infiltrating (M8500/1) — see *Neoplasm/uncertain behaviour*
 - embolus (M8000/6) — see *Neoplasm/secondary*
 - embryonal (mixed) (M9080/1) — see also *Neoplasm/uncertain behaviour*
 - - liver (M9080/3) C22.7

- endocrine, functioning (M8158/1) — see Neoplasm/uncertain behaviour
- endodermal sinus (M9071/3)
- - in situ (M9071/2)
- - specified site — see Neoplasm/malignant
- - unspecified site
- - - female C56
- - - male C62.9
- endometrioid
- - atypical proliferative (M8380/1)
- - of low malignant potential (M8380/1)
- epidermoid — see Carcinoma/squamous cell
- epithelial
- ...
- Ewing (M9260/3) — see Neoplasm/bone/malignant
- - in situ (M9260/2) D09.7
- fatty (M8850/0) — see Lipoma
- fetal, affecting labour or delivery (mother) O66.3
- fibroblastic, reticular cell (M9759/3) C96.7
- fibrohistiocytic, plexiform (M8835/1)
- ...
- germ cell (M9064/3) — see also Neoplasm/malignant
- - benign (M9064/0) — see Neoplasm/benign
- - intratubular (M9064/2) — see Neoplasm/testis/in situ
- - mixed (M9085/3)
- - - in situ (M9085/2)
- - nonseminomatous (M9065/3) C62.-
- ghost cell, odontogenic (M9302/0) D16.5
- - upper jaw (bone) D16.42
- giant cell (type) (M8003/3) — see also Neoplasm/malignant
- - benign (M8003/0) — see Neoplasm/benign
- - bone (M9250/1) D48.0
- - - in situ (M9250/2) D09.7
- - - malignant (M9250/3) — see Neoplasm/bone/malignant
- - chondromatous (M9230/0) — see Neoplasm/bone/benign
- - - in situ (M9230/2) — see Neoplasm/bone/in situ
- - soft parts (M9251/1) — see Neoplasm/connective tissue/uncertain behaviour
- - - in situ (M9251/2) D09.7
- - - malignant (M9251/3) — see Neoplasm/connective tissue/malignant
- - tendon sheath (M9252/0) — see Neoplasm/connective tissue/benign
- - - in situ (M9252/2) D09.7
- - - malignant (M9252/3) — see Neoplasm/connective tissue/malignant
- - tenosynovial (M9252/0) — see Neoplasm/connective tissue/benign
- - - in situ (M9252/2) D09.7
- - - malignant (M9252/3) — see Neoplasm/connective tissue/malignant
- glioneuronal (papillary) (rosette-forming) (M9509/1) — see Neoplasm/uncertain behaviour
- glomus (M8711/0) D18.0-
- - in situ (M8711/2) D09.7
- - jugulare (M8690/1) D44.7
- - - benign (M8690/0) D35.6
- - - in situ (M8690/2) D09.3
- - - malignant (M8690/3) C75.5
- - malignant (M8711/3) — see Neoplasm/connective tissue/malignant
- glucagon-like peptide-producing (M8152/1) — see Glucagonoma
- gonadal stromal (M8590/1)
- - sex cord
- - - benign (M8590/0)
- - - in situ (M8590/2)
- - - incompletely differentiated (M8591/1)
- - - - in situ (M8591/2)
- - - mixed forms (M8592/1)
- - - - in situ (M8592/2)
- granular cell (M9580/0) — see also Neoplasm/connective tissue/benign
- - in situ (M9580/2) D09.7
- - malignant (M9580/3) — see Neoplasm/connective tissue/malignant
- - of sellar region (M9582/0) D35.2
- granulosa cell (M8620/1) D39.1
- - adult type (M8620/1)
- - in situ (M8620/2) D07.3
- - juvenile (M8622/1)
- - malignant (M8620/3) C56
- - sarcomatoid (M8620/3) C56
- - - in situ (M8620/2) D07.3
- - theca cell (mixed) (M8621/1)
- granulosa cell-theca cell (M8621/1) D39.1
- - in situ (M8621/2) D07.3
- - malignant (M8621/3) C56
- Grawitz's (M8312/3) C64
- ...
- Hurthle cell (benign) (M8290/0) D34
- - in situ (M8290/2) D09.3
- - malignant (M8290/3) C73
- hydatid (see also Echinococcus) B67.9
- hypernephroid (M8311/1) — see Neoplasm/uncertain behaviour
- - malignant (M8311/3)
- infiltrating duct (M8500/1) — see Neoplasm/uncertain behaviour
- interstitial cell (M8650/1) D40.1
- - benign (M8650/0) D29.2
- - in situ (M8650/2) — see Neoplasm/testis/in situ
- - malignant (M8650/3) — see Neoplasm/testis/malignant
- ...
- juxtaglomerular (M8361/0) D30.0
- - in situ (M8361/2) D09.1
- - malignant (M8361/3) C64
- Klatskin (M8162/3) ~~C22.4~~C24.0
- - in situ (M8162/2) D01.5
- Krukenberg (M8490/6) C79.6
- L-cell (M8152/1) — see Glucagonoma
- Leydig cell (M8650/1)
- - benign (M8650/0)
- - - specified site — see Neoplasm/benign
- - - unspecified site
- - - - female D27
- - - - male D29.2
- - in situ (M8650/2) — see Neoplasm/in situ
- - malignant (M8650/3)
- ...
- - unspecified site
- - - female D39.1
- - - male D40.1
- lipid cell, ovary (M8670/0) D27
- - in situ (M8670/2) D07.3
- lipidoid cell, ovary (M8670/0) D27
- - in situ (M8670/2) D07.3
- malignant (M8000/3) — see also Neoplasm/malignant
- - clear cell (type) (M8005/3)
- - epithelial (M8010/3)
- - fusiform cell (type) (M8004/3)

- - giant cell (type) (M8003/3) C80.-
- - mast cell (M9740/3) C96.2
- - mixed NEC (M8940/3) (see also Tumour/mixed) C80.-
- - plasma cell, localised NEC (M9731/3) C90.3-
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- Merkel cell (M8247/3) — see Neoplasm/skin/malignant
- - in situ (M8247/2) — see Neoplasm/skin/in situ
- mesenchymal
- - malignant (M8800/3) — see Neoplasm/connective tissue/malignant
- - mixed (M8990/1) — see Neoplasm/connective tissue/uncertain behaviour
- - - in situ (M8990/2) D09.7
- mesodermal, mixed (M8951/3) — see also Neoplasm/malignant
- - in situ (M8951/2) — see Neoplasm/in situ
- - liver C22.4
- mesonephric (M9110/1) — see also Neoplasm/uncertain behaviour
- - in situ (M9110/2) — see Neoplasm/in situ
- - malignant (M9110/3) — see Neoplasm/malignant
- metastatic
- ...
- mixed NEC (M8940/0) — see also Neoplasm/benign
- - in situ (M8940/2) — see Neoplasm/in situ
- - malignant (M8940/3) — see Neoplasm/malignant
- mucinous, (of) low malignant potential (M8472/1) D39.4
- - appendiceal, low grade (M8480/1) D37.3
- - low malignant potential (M8472/1) D39.1
- mucocarcinoid (M8243/3)
- - in situ (M8243/2)
- - specified site — see Neoplasm/malignant
- - unspecified site C18.1
- mucoepidermoid (M8430/1) — see Neoplasm/uncertain behaviour
- Müllerian, mixed (M8950/3)
- - in situ (M8950/2) — see Neoplasm/in situ
- - specified site — see Neoplasm/malignant
- - unspecified site C54.9
- myelodysplastic, myeloproliferative, unclassifiable (M9975/3) D46.9
- myeloid
- - with PDGFRB rearrangement (M9966/3) D47.7
- - and lymphoid (with)
- - - FGFR1 abnormalities (M9967/3) D47.7
- - - PDGFRA rearrangement (M9965/3) D47.7
- - therapy related (M9920/3) C92.0-
- myeloproliferative (M9960/3) D47.1
- - unclassifiable (M9975/3) D46.9
- myoepithelial (M8982/0) — see Neoplasm/benign
- - in situ (M8982/2) — see Neoplasm/in situ
- myofibroblastic (inflammatory) (M8825/1)
- - malignant (M8825/3)
- - peribronchial (congenital) (M8827/1)
- nerve sheath, peripheral, malignant (MPNST) (M9540/3) — see also Neoplasm/malignant
- - with
- - - glandular differentiation (M9540/3)
- - - mesenchymal differentiation (M9540/3)
- - - rhabdomyoblastic differentiation (M9561/3)
- - - - in situ (M9561/2) D09.7
- - epithelioid (M9540/3)
- - - in situ (M9540/2) D09.7
- - melanotic (psammomatous) (M9540/3)
- - - in situ (M9540/2) D09.7
- - perineural (M9571/3)
- - - in situ (M9571/2) D09.7
- neuroectodermal (M9364/3) — see also Neoplasm/malignant
- - in situ (M9364/2) — see Neoplasm/in situ
- - primitive (PNET) (supratentorial) (M9473/3) — see Neoplasm/brain/malignant
- - - central (CPNET) (M9473/3) — see Neoplasm/brain/malignant
- - - - in situ (M9473/2) D09.7
- - - in situ (M9473/2) D09.7
- - - peripheral (PPNET) (M9364/3)
- - - - in situ (M9364/2)
- - - specified site — see Neoplasm/malignant
- - - unspecified site C71.9
- neuro-endocrine (M8246/3) — see also Carcinoma/neuro-endocrine
- - grade I (M8240/3)
- - grade II (M8249/3)
- - in situ (M8246/2)
- - uncertain or unknown behaviour (M8246/1)
- neuroepithelial, dysembryoplastic (M9413/0) — see Neoplasm/benign
- neurogenic, olfactory (M9520/3) C30.0
- - in situ (M9520/2) D02.3
- nonencapsulated sclerosing (M8350/3) C73
- odontogenic (M9270/1) D48.0
- adenomatoid (M9300/0) D16.5
- ...
- calcifying epithelial (M9340/0) D16.5
- - malignant (M9340/3) — see Neoplasm/malignant
- - upper jaw (bone) D16.42
- clear cell (M9341/1) D48.0
- - in situ (M9270/2) D09.7
- keratocystic (M9270/0) D16.5
- ...
- ovarian stromal (M8590/1) D39.1
- - benign (M8590/0) D27
- - in situ (M8590/2) D07.3
- ovary
- ...
- pacinian (M9507/0) — see Neoplasm/skin/benign
- - in situ (M9507/2) — see Neoplasm/skin/in situ
- Pancoast's (M8010/3) C34.1
- pancreatic
- - endocrine (M8150/1) D37.71
- - - and exocrine, mixed (M8154/3) C25.-
- - - benign (M8150/0)
- - - - pancreas D13.7
- - - - specified site NEC — see Neoplasm/benign
- - - - unspecified site D13.7
- - - malignant (M8150/3) — see Neoplasm/malignant
- - - - with exocrine, mixed (M8154/3)
- - - - - specified site — see Neoplasm/malignant
- - - - - unspecified site C25.9
- - - - pancreas C25.4
- - - - specified site NEC — see Neoplasm/malignant
- - - - unspecified site C25.4
- - - non-functioning (M8150/3) C25.4
- - - uncertain or unknown behaviour (M8150/1) D37.71
- - - - specified site NEC — see Neoplasm/uncertain behaviour
- - peptide and pancreatic peptide-like peptide within terminal tyrosine amide producing (M8152/1) — see Glucagonoma
- pancreatobiliary, noninvasive (M8163/0)
- - papillary, with
- - - high grade intraepithelial neoplasia (dysplasia) (M8163/2)

- - - low grade intraepithelial neoplasia (dysplasia) (M8163/0)
- papillary (M8050/0) — *see also Papilloma*
- - cystic (M8452/1) D37.7
- - - mucinous — *see*
Tumour/papillary/mucinous/cystic
- - intracystic (with)
- - - associated invasive carcinoma (M8503/3) — *see*
Adenocarcinoma/papillary/intraductal/with invasion
- - - dysplasia (intermediate grade) (low grade) (M8503/0) D13.5
- - - - high grade (M8503/2) D01.5
- - - intraepithelial neoplasia (intermediate grade) (low grade) (M8503/0) D13.5
- - - - high grade (M8503/2) D01.5
- - intraductal (with)
- - - associated invasive carcinoma (M8503/3) — *see*
Adenocarcinoma/papillary/intraductal/with invasion
- - - dysplasia (intermediate grade) (low grade) (M8503/0)
- - - - high grade (M8503/2)
- - - intraepithelial neoplasia (intermediate grade) (low grade) (M8503/0)
- - - - high grade (M8503/2)
- - - tubular
- - - - high grade (M8503/2)
- - - - low grade (M8503/0)
- - intraglandular with low grade intraepithelial neoplasia (M8503/0)
- - mucinous
- - - cystic
- - - - borderline
- - - - with malignant transformation (M8473/3) C56
- - - - - in situ (M8473/2) D07.3
- - - intraductal, (of) (with) moderate dysplasia (M8453/4) D37.7
- - - - associated invasive carcinoma (M8453/3) — *see*
Neoplasm/malignant/pancreas
- - - - dysplasia (intermediate grade) (low grade) (moderate grade) (M8453/0) D13.6
- - - - - high grade (M8453/2) D01.7
- - - - of low malignant potential (M8473/1) D39.1
- - - pancreatobiliary-type (with)
- - - high grade intraepithelial neoplasia (dysplasia) (M8163/2)
- - - low grade intraepithelial neoplasia (dysplasia) (M8163/0)
- - pineal region (M9395/3) C75.3
- - serous (cystic)
- ...
- phyllodes (borderline) (M9020/1) D48.6
- - benign (M9020/0) D24
- - in situ (M9020/2) D05.9
- - malignant (M9020/3) — *see*
Neoplasm/breast/malignant
- pilar (M8103/0) — *see Neoplasm/skin/benign*
- - in situ (M8103/2) — *see Neoplasm/skin/in situ*
- Pindborg (M9340/0) D16.5
- - malignant (M9340/3) — *see Neoplasm/malignant*
- - upper jaw (bone) D16.42
- pineal (mixed) (of intermediate differentiation) (transitional) (M9362/3) C75.3
- - in situ (M9362/2) D09.3
- Pinkus (M8093/3) — *see Neoplasm/skin/malignant*
- placental site trophoblastic (M9104/1) D39.2
- - in situ (M9104/2) D07.3
- plasma cell (M9731/3) C90.3-
- polygonal cell (M8034/1)
- polyvesicular vitelline (M9071/3)
- - in situ (M9071/2)
- - specified site — *see Neoplasm/malignant*
- - unspecified site
- - - female C56
- - - male C62.9
- Pott's puffy — *see Osteomyelitis*
- PP/PYY producing (M8152/1) — *see Glucagonoma*
- Rathke's pouch (M9350/1) D44.3
- ...
- rhabdoid (M8963/3) — *see also Neoplasm/malignant*
- - teratoid/rhabdoid, atypical (M9508/3) — *see*
Neoplasm/brain/malignant
- - - in situ (M9508/2) D09.7
- salivary gland type, mixed (M8940/0) (*see also*
Neoplasm/salivary gland/benign) D11.9
- - in situ (M8940/2) — *see Neoplasm/salivary gland/in situ*
- - malignant (M8940/3) — *see Neoplasm/salivary gland/malignant*
- Sampson's N80.1
- ...
- Sertoli-Leydig cell (M8631/1) — *see also*
Neoplasm/uncertain behaviour
- - intermediate differentiation (M8631/1)
- - - with heterologous elements (M8634/1)
- - poorly differentiated (M8631/3) — *see also*
Neoplasm/malignant
- - - with heterologous elements (M8634/3) — *see*
Neoplasm/malignant
- - - - in situ (M8634/2) — *see Neoplasm/in situ*
- - - in situ (M8631/2) — *see Neoplasm/in situ*
- - retiform (M8633/1)
- ...
- sex cord(-stromal) (M8590/1) — *see*
Neoplasm/uncertain behaviour
- - with annular tubules (M8623/1) D39.1
- - benign (M8590/0)
- - in situ (M8590/2)
- skin appendage (M8390/0) — *see*
Neoplasm/skin/benign
- ...
- somatostatin cell (M8156/1) — *see also*
Neoplasm/uncertain behaviour
- - in situ (M8156/2) — *see Neoplasm/in situ*
- - malignant (M8156/3) — *see Neoplasm/malignant*
- spindle epithelial, with thymus-like element (SETTLE) (M8588/3) — *see Neoplasm/malignant*
- - cell (M8032/1)
- - - benign (M8032/0)
- - - malignant (M8032/3) — *see Carcinoma/spindle cell*
- - epithelial, with thymus-like element (SETTLE) (M8588/3) — *see Neoplasm/malignant*
- sternomastoid (congenital) Q68.03
- steroid cell (M8670/0) — *see also Neoplasm/benign*
- - in situ (M8670/2) — *see Neoplasm/in situ*
- - malignant (M8670/3) — *see Neoplasm/malignant*
- stromal (M8935/1)
- - with minor sex cord elements (M8593/1) D39.1
- - - in situ (M8593/2) D07.3
- - benign (M8935/0) D26.1
- - epithelial, calcifying nested (M8975/1) D37.6
- - gastrointestinal (GIST) (of uncertain malignant potential) NEC (M8936/1) D37.9
- ...
- - gonadal (M8590/1)
- - - benign (M8590/0)
- - - in situ (M8590/2)

- - - sex cord (incompletely differentiated) (mixed) (M8591/1) (M8590/1)
- - - - benign (M8590/0)
- - - - in situ (M8590/2)
- - - - incompletely differentiated (M8591/1)
- - - - in situ (M8591/2)
- - - - mixed (M8592/1)
- - - - in situ (M8592/2)
- - ovarian (M8590/1) D39.1
- - - benign (M8590/0) D27
- - - in situ (M8590/2) D07.3
- - sex cord (M8590/1)
- - testicular (M8590/1) D40.1
- - - benign (M8590/0) D29.2
- - - in situ (M8590/2) D07.6
- sweat gland (M8400/1) — see also *Neoplasm/skin/uncertain behaviour*
- ...
- tenosynovial, giant cell (M9252/0) — see also *Neoplasm/connective tissue/benign*
- - in situ (M9252/2) D09.7
- - malignant (M9252/3) — see *Neoplasm/connective tissue/malignant*
- teratoid/rhabdoid, atypical (M9508/3) — see *Neoplasm/brain/malignant*
- - in situ (M9508/2) D09.7
- testicular stromal (M8590/1) D40.1
- - benign (M8590/0) D29.2
- - in situ (M8590/2) D07.6
- theca cell (M8600/0) D27
- - in situ (M8600/2) D07.3
- theca cell-granulosa cell (M8621/1) D39.1
- - in situ (M8621/2) D07.3
- - malignant (M8621/3) C56
- trichilemmal, proliferating (M8103/0) — see *Neoplasm/skin/benign*
- - in situ (M8103/2) — see *Neoplasm/skin/in situ*
- Triton, malignant (M9561/3) — see *Neoplasm/nerve/malignant*
- - in situ (M9561/2) D09.7
- trophoblastic
- - epithelioid (M9105/3) — see *Neoplasm/malignant*
- - - in situ (M9105/2) — see *Neoplasm/in situ*
- - placental site (M9104/1) D39.2
- - - in situ (M9104/2) D07.3
- turban (M8200/0) D23.4
- undifferentiated (M8020/1) — see *Neoplasm/uncertain behaviour*
- uterus (body)
- ...

- varicose (see also *Varicose/vein*) I83.9
- von Recklinghausen's (M9540/1) (see also *Neurofibromatosis*) Q85.0
- - bones E21.0
- vulva or perineum
- ...
- Wilms' (M8960/3) C64
- - in situ (M8960/2) D09.1
- Wolffian duct (M9110/1)
- - in situ (M9110/2)
- - malignant (M9110/3)
- yolk sac (hepatoid) (M9071/3)
- - in situ (M9071/2)
- - - specified site — see *Neoplasm/in situ*
- - - unspecified site
- - - - female D07.3
- - - - male D07.6
- - specified site — see *Neoplasm/malignant*

Tumourlet (M8040/1) — see also *Neoplasm/uncertain behaviour*

- benign (M8040/0) — see *Neoplasm/benign*
- malignant (M8040/3) — see *Neoplasm/malignant*

Tungiasis B88.1

Vipoma (M8155/1) — see also *Neoplasm/uncertain behaviour*

- in situ (M8155/2) — see *Neoplasm/in situ*
- malignant (M8155/3) — see *Neoplasm/malignant*

Von Recklinghausen-Applebaum disease E83.1

Von Recklinghausen's disease (M9540/1) (see also *Neurofibromatosis*) Q85.0

- bones E21.0
- disease (neurofibromatosis) (M9540/1) Q85.0
- bones E21.0

Von Willebrand(-Jurgens)(-Minot) disease or syndrome D68.0

Wilms' tumour (M8960/3) C64

- in situ (M8960/2) D09.1

Wilson-Mikity syndrome P27.0

Xanthoastrocytoma, pleomorphic (M9424/3)

- in situ (M9424/2) D09.7
- - specified site — see *Neoplasm/in situ*
- - unspecified site D09.7
- specified site — see *Neoplasm/malignant*

TABULAR LIST OF DISEASES

CODE_ID	Morphology Code Description
<u>M8001/2</u>	<u>Tumour cells, in situ</u>
<u>M8001/6</u>	<u>Tumour cells, metastatic</u>
<u>M8001/9</u>	<u>Tumour cells, uncertain whether primary or metastatic</u>
<u>M8003/0</u>	<u>Tumour, giant cell type, benign</u>
<u>M8020/1</u>	<u>Tumour, undifferentiated NOS, uncertain whether benign or malignant</u>
<u>M8032/0</u>	<u>Spindle cell tumour, benign</u>
<u>M8032/1</u>	<u>Spindle cell tumour NOS, uncertain whether benign or malignant</u>
<u>M8040/3</u>	<u>Tumourlet, malignant</u>

CODE_ID	Morphology Code Description
<u>M8040/6</u>	<u>Tumourlet, metastatic</u>
<u>M8040/9</u>	<u>Tumourlet, uncertain whether primary or metastatic</u>
<u>M8042/2</u>	<u>Oat cell carcinoma, in situ</u>
<u>M8043/2</u>	<u>Small cell carcinoma, fusiform cell, in situ</u>
<u>M8044/2</u>	<u>Small cell carcinoma, intermediate cell, in situ</u>
<u>M8045/2</u>	<u>Small cell-large cell carcinoma, in situ</u>
<u>M8046/2</u>	<u>Non-small cell carcinoma, in situ</u>
<u>M8051/2</u>	<u>Verrucous carcinoma NOS, in situ</u>
<u>M8053/3</u>	<u>Squamous cell papilloma, inverted, malignant</u>
<u>M8053/6</u>	<u>Squamous cell papilloma, inverted, metastatic</u>
<u>M8053/9</u>	<u>Squamous cell papilloma, inverted, uncertain whether primary or metastatic</u>
<u>M8072/1</u>	<u>Squamous cell tumour, large cell, nonkeratinising, uncertain whether benign or malignant</u>
<u>M8076/6</u>	<u>Squamous cell carcinoma, microinvasive, metastatic</u>
<u>M8076/9</u>	<u>Squamous cell carcinoma, microinvasive, uncertain whether primary or metastatic</u>
<u>M8077/0</u>	<u>Squamous intraepithelial neoplasia, low grade</u>
<u>M8077/2</u>	<u>Squamous intraepithelial neoplasia, high grade</u>
<u>M8082/2</u>	<u>Lymphoepithelial carcinoma, in situ</u>
<u>M8090/0</u>	<u>Basal cell tumour, benign</u>
<u>M8100/2</u>	<u>Trichoepithelioma, in situ</u>
<u>M8101/2</u>	<u>Trichofolliculoma, in situ</u>
<u>M8102/2</u>	<u>Trichilemmocarcinoma, in situ</u>
<u>M8103/2</u>	<u>Pilar tumour, in situ</u>
<u>M8110/2</u>	<u>Pilomatrix carcinoma, in situ</u>
<u>M8121/2</u>	<u>Schneiderian carcinoma, in situ</u>
<u>M8122/2</u>	<u>Transitional cell carcinoma, spindle cell, in situ</u>
<u>M8141/2</u>	<u>Scirrhus adenocarcinoma, in situ</u>
<u>M8142/2</u>	<u>Linitis plastica, in situ</u>
<u>M8147/1</u>	<u>Basal cell adenoma, uncertain whether benign or malignant</u>
<u>M8147/2</u>	<u>Basal cell adenocarcinoma, in situ</u>
<u>M8148/0</u>	<u>Glandular intraepithelial neoplasia, low grade</u>
<u>M8148/2</u>	<u>Glandular intraepithelial neoplasia, high grade</u>
<u>M8150/0</u>	Islet cell adenoma <u>Pancreatic endocrine tumour, benign</u>
<u>M8150/1</u>	Islet cell tumour NOS <u>Pancreatic endocrine tumour, NOS</u>
<u>M8150/2</u>	<u>Pancreatic endocrine tumour, in situ</u>
<u>M8150/3</u>	Islet cell carcinoma <u>Pancreatic endocrine tumour, malignant</u>
<u>M8150/6</u>	Islet cell carcinoma, metastatic <u>Pancreatic endocrine tumour, metastatic</u>
<u>M8150/9</u>	Islet cell carcinoma, uncertain whether primary or metastatic <u>Pancreatic endocrine tumour, uncertain whether primary or metastatic</u>
<u>M8151/2</u>	<u>Insulinoma, in situ</u>
<u>M8152/2</u>	<u>Glucagonoma, in situ</u>
<u>M8153/0</u>	<u>Gastrinoma, benign</u>
<u>M8153/2</u>	<u>Gastrinoma, in situ</u>
<u>M8154/1</u>	Mixed islet cell and exocrine adenomatous tumour, uncertain whether benign or malignant <u>Mixed pancreatic endocrine and exocrine tumour, uncertain whether benign or malignant</u>
<u>M8154/2</u>	<u>Mixed pancreatic endocrine and exocrine tumour, in situ</u>
<u>M8154/3</u>	Mixed islet cell and exocrine adenocarcinoma <u>Mixed pancreatic endocrine and exocrine tumour, malignant</u>
<u>M8154/6</u>	Mixed islet cell and exocrine adenocarcinoma, metastatic <u>Mixed pancreatic endocrine and exocrine tumour, metastatic</u>
<u>M8154/9</u>	Mixed islet cell and exocrine adenocarcinoma, uncertain whether primary or metastatic <u>Mixed pancreatic endocrine and exocrine tumour, uncertain whether primary or metastatic</u>

CODE_ID	Morphology Code Description
<u>M8155/2</u>	<u>Vipoma, in situ</u>
<u>M8156/2</u>	<u>Somatostatinoma, in situ</u>
<u>M8157/1</u>	<u>Enteroglucagonoma NOS</u>
<u>M8157/3</u>	<u>Enteroglucagonoma, malignant</u>
<u>M8157/6</u>	<u>Enteroglucagonoma, malignant, metastatic</u>
<u>M8157/9</u>	<u>Enteroglucagonoma, malignant, uncertain whether primary or metastatic</u>
<u>M8158/1</u>	<u>Endocrine tumour, functioning, NOS</u>
<u>M8162/2</u>	<u>Klatskin tumour, in situ</u>
<u>M8163/0</u>	<u>Pancreatobiliary neoplasm, noninvasive</u>
<u>M8163/2</u>	<u>Papillary neoplasm, pancreatobiliary-type, with high grade intraepithelial neoplasia</u>
<u>M8163/3</u>	<u>Pancreatobiliary-type carcinoma</u>
<u>M8163/6</u>	<u>Pancreatobiliary-type carcinoma, metastatic</u>
<u>M8163/9</u>	<u>Pancreatobiliary-type carcinoma, uncertain whether primary or metastatic</u>
<u>M8170/2</u>	<u>Hepatocellular carcinoma, in situ</u>
<u>M8171/2</u>	<u>Hepatocellular carcinoma, fibrolamellar, in situ</u>
<u>M8172/2</u>	<u>Hepatocellular carcinoma, scirrhous, in situ</u>
<u>M8173/2</u>	<u>Hepatocellular carcinoma, spindle cell variant, in situ</u>
<u>M8174/2</u>	<u>Hepatocellular carcinoma, clear cell type, in situ</u>
<u>M8175/2</u>	<u>Hepatocellular carcinoma, pleomorphic type, in situ</u>
<u>M8211/2</u>	<u>Tubular adenocarcinoma, in situ</u>
<u>M8213/3</u>	<u>Serrated adenocarcinoma</u>
<u>M8213/6</u>	<u>Serrated adenocarcinoma, metastatic</u>
<u>M8213/9</u>	<u>Serrated adenocarcinoma, uncertain whether primary or metastatic</u>
<u>M8231/2</u>	<u>Carcinoma simplex, in situ</u>
<u>M8240/0</u>	<u>Carcinoid tumour, benign</u>
<u>M8240/2</u>	<u>Carcinoid tumour, in situ</u>
<u>M8241/0</u>	<u>Enterochromaffin cell carcinoid, benign</u>
<u>M8241/2</u>	<u>Enterochromaffin cell carcinoid, in situ</u>
<u>M8242/2</u>	<u>Enterochromaffin-like cell tumour, in situ</u>
<u>M8243/2</u>	<u>Goblet cell carcinoid, in situ</u>
<u>M8244/1</u>	<u>Composite carcinoid uncertain whether benign or malignant</u>
<u>M8244/2</u>	<u>Mixed adenoneuroendocrine carcinoma, in situ</u>
<u>M8244/3</u>	Composite carcinoid <u>Mixed adenoneuroendocrine carcinoma</u>
<u>M8244/6</u>	Composite carcinoid, metastatic <u>Mixed adenoneuroendocrine carcinoma, metastatic</u>
<u>M8244/9</u>	Composite carcinoid, uncertain whether primary or metastatic <u>Mixed adenoneuroendocrine carcinoma, uncertain whether primary or metastatic</u>
<u>M8245/2</u>	<u>Adenocarcinoid tumour, in situ</u>
<u>M8246/1</u>	<u>Neuroendocrine tumour NOS, uncertain whether benign or malignant</u>
<u>M8246/2</u>	<u>Neuroendocrine carcinoma NOS, in situ</u>
<u>M8247/2</u>	<u>Merkel cell carcinoma, in situ</u>
<u>M8249/2</u>	<u>Atypical carcinoid tumour, in situ</u>
<u>M8250/2</u>	<u>Bronchiolo-alveolar adenocarcinoma NOS, in situ</u>
<u>M8251/2</u>	<u>Alveolar adenocarcinoma, in situ</u>
<u>M8265/3</u>	<u>Micropapillary carcinoma NOS</u>
<u>M8265/6</u>	<u>Micropapillary carcinoma NOS, metastatic</u>
<u>M8265/9</u>	<u>Micropapillary carcinoma NOS, uncertain whether primary or metastatic</u>
<u>M8270/2</u>	<u>Chromophobe carcinoma, in situ</u>
<u>M8271/2</u>	<u>Prolactinoma, in situ</u>
<u>M8271/9</u>	<u>Prolactinoma, uncertain whether primary or metastatic</u>

CODE_ID	Morphology Code Description
<u>M8272/2</u>	<u>Pituitary carcinoma NOS, in situ</u>
<u>M8280/2</u>	<u>Acidophil carcinoma, in situ</u>
<u>M8281/2</u>	<u>Mixed acidophil-basophil carcinoma, in situ</u>
<u>M8290/2</u>	<u>Oxyphilic adenocarcinoma, in situ</u>
<u>M8300/2</u>	<u>Basophil carcinoma, in situ</u>
<u>M8310/2</u>	<u>Clear cell adenocarcinoma NOS, in situ</u>
<u>M8311/3</u>	<u>Hypernephroid tumour, malignant</u>
<u>M8311/6</u>	<u>Hypernephroid tumour, metastatic</u>
<u>M8311/9</u>	<u>Hypernephroid tumour, uncertain whether primary or metastatic</u>
<u>M8313/2</u>	<u>Clear cell adenocarcinofibroma, in situ</u>
<u>M8314/0</u>	<u>Lipid-rich adenoma, benign</u>
<u>M8314/2</u>	<u>Lipid-rich carcinoma, in situ</u>
<u>M8315/2</u>	<u>Glycogen-rich carcinoma, in situ</u>
<u>M8316/2</u>	<u>Cyst-associated renal cell carcinoma, in situ</u>
<u>M8317/2</u>	<u>Renal cell carcinoma, chromophobe type, in situ</u>
<u>M8318/2</u>	<u>Renal cell carcinoma, sarcomatoid, in situ</u>
<u>M8319/2</u>	<u>Collecting duct carcinoma, in situ</u>
<u>M8320/2</u>	<u>Granular cell carcinoma, in situ</u>
<u>M8321/2</u>	<u>Chief cell adenocarcinoma, in situ</u>
<u>M8322/2</u>	<u>Water-clear cell adenocarcinoma, in situ</u>
<u>M8361/2</u>	<u>Juxtaglomerular tumour, in situ</u>
<u>M8381/2</u>	<u>Endometrioid adenofibroma, in situ</u>
<u>M8382/2</u>	<u>Endometrioid adenocarcinoma, secretory variant, in situ</u>
<u>M8382/6</u>	<u>Endometrioid adenocarcinoma, secretory variant, metastatic</u>
<u>M8382/9</u>	<u>Endometrioid adenocarcinoma, secretory variant, uncertain whether primary or metastatic</u>
<u>M8383/2</u>	<u>Endometrioid adenocarcinoma, ciliated cell variant, in situ</u>
<u>M8384/2</u>	<u>Adenocarcinoma, endocervical type, in situ</u>
<u>M8390/2</u>	<u>Skin appendage carcinoma, in situ</u>
<u>M8402/2</u>	<u>Nodular hidradenoma, in situ</u>
<u>M8404/2</u>	<u>Hidrocystoma, in situ</u>
<u>M8407/2</u>	<u>Syringoma, in situ</u>
<u>M8408/2</u>	<u>Eccrine papillary adenocarcinoma, in situ</u>
<u>M8409/2</u>	<u>Eccrine poroma, in situ</u>
<u>M8442/3</u>	<u>Serous cystadenoma, borderline, with malignant transformation</u>
<u>M8442/6</u>	<u>Serous cystadenoma, borderline, with malignant transformation, metastatic</u>
<u>M8442/9</u>	<u>Serous cystadenoma, borderline, with malignant transformation, uncertain whether primary or metastatic</u>
<u>M8451/2</u>	<u>Papillary cystadenoma, borderline, with malignant transformation, in situ</u>
<u>M8451/6</u>	<u>Papillary cystadenoma, borderline, with malignant transformation, metastatic</u>
<u>M8451/9</u>	<u>Papillary cystadenoma, borderline, with malignant transformation, uncertain whether primary or metastatic</u>
<u>M8452/2</u>	<u>Solid pseudopapillary carcinoma, in situ</u>
<u>M8453/4</u>	<u>Intraductal papillary mucinous tumour with moderate dysplasia</u>
<u>M8470/4</u>	<u>Mucinous cystic tumour with moderate dysplasia</u>
<u>M8471/1</u>	<u>Papillary mucinous cystadenoma, uncertain whether benign or malignant</u>
<u>M8472/0</u>	<u>Mucinous cystic tumour, benign</u>
<u>M8472/2</u>	<u>Mucinous cystic tumour, borderline, with malignant transformation, in situ</u>
<u>M8472/3</u>	<u>Mucinous cystic tumour, borderline, with malignant transformation</u>
<u>M8472/6</u>	<u>Mucinous cystic tumour, borderline, with malignant transformation, metastatic</u>
<u>M8472/9</u>	<u>Mucinous cystic tumour, borderline, with malignant transformation, uncertain whether</u>

CODE_ID	Morphology Code Description
	<u>primary or metastatic</u>
<u>M8473/2</u>	<u>Papillary mucinous cystic tumour, borderline, with malignant transformation, in situ</u>
<u>M8473/3</u>	<u>Papillary mucinous cystic tumour, borderline, with malignant transformation</u>
<u>M8473/6</u>	<u>Papillary mucinous cystic tumour, borderline, with malignant transformation, metastatic</u>
<u>M8473/9</u>	<u>Papillary mucinous cystic tumour, borderline, with malignant transformation, uncertain whether primary or metastatic</u>
<u>M8480/1</u>	<u>Mucinous adenoma, uncertain whether benign or malignant- Low grade appendiceal mucinous neoplasm</u>
<u>M8480/2</u>	<u>Mucinous adenocarcinoma, in situ</u>
<u>M8481/2</u>	<u>Mucin-producing adenocarcinoma, in situ</u>
<u>M8482/2</u>	<u>Mucinous adenocarcinoma, endocervical type, in situ</u>
<u>M8490/2</u>	<u>Signet ring cell carcinoma, in situ</u>
<u>M8500/1</u>	<u>Infiltrating duct tumour NOS, uncertain whether benign or malignant</u>
<u>M8523/2</u>	<u>Infiltrating duct mixed with other types of carcinoma, in situ</u>
<u>M8524/2</u>	<u>Infiltrating lobular mixed with other types of carcinoma, in situ</u>
<u>M8530/2</u>	<u>Inflammatory carcinoma, in situ</u>
<u>M8550/2</u>	<u>Acinar cell carcinoma, in situ</u>
<u>M8551/2</u>	<u>Acinar cell cystadenocarcinoma, in situ</u>
<u>M8552/3</u>	<u>Mixed acinar-ductal carcinoma</u>
<u>M8552/6</u>	<u>Mixed acinar-ductal carcinoma, metastatic</u>
<u>M8552/9</u>	<u>Mixed acinar-ductal carcinoma, uncertain whether primary or metastatic</u>
<u>M8560/1</u>	<u>Adenosquamous tumour, uncertain whether benign or malignant</u>
<u>M8562/2</u>	<u>Epithelial-myoepithelial carcinoma, in situ</u>
<u>M8580/2</u>	<u>Thymoma, in situ</u>
<u>M8581/2</u>	<u>Thymoma, type A, in situ</u>
<u>M8582/2</u>	<u>Thymoma, type AB, in situ</u>
<u>M8583/2</u>	<u>Thymoma, type B1, in situ</u>
<u>M8584/2</u>	<u>Thymoma, type B2, in situ</u>
<u>M8585/2</u>	<u>Thymoma type B3, in situ</u>
<u>M8589/2</u>	<u>Carcinoma showing thymus-like element, in situ</u>
<u>M8590/0</u>	<u>Sex cord-gonadal stromal tumour, benign</u>
<u>M8590/2</u>	<u>Sex cord-gonadal stromal tumour, in situ</u>
<u>M8591/2</u>	<u>Sex cord-gonadal stromal tumour, incompletely differentiated, in situ</u>
<u>M8592/2</u>	<u>Sex cord-gonadal stromal tumour, mixed forms, in situ</u>
<u>M8593/2</u>	<u>Stromal tumour with minor sex cord elements, in situ</u>
<u>M8600/2</u>	<u>Thecoma, in situ</u>
<u>M8610/2</u>	<u>Luteoma, in situ</u>
<u>M8620/2</u>	<u>Granulosa cell tumour, in situ</u>
<u>M8621/2</u>	<u>Granulosa cell-theca cell tumour, in situ</u>
<u>M8621/3</u>	<u>Granulosa cell-theca cell tumour, malignant</u>
<u>M8621/6</u>	<u>Granulosa cell-theca cell tumour, metastatic</u>
<u>M8621/9</u>	<u>Granulosa cell-theca cell tumour, uncertain whether primary or metastatic</u>
<u>M8630/2</u>	<u>Androblastoma, in situ</u>
<u>M8631/2</u>	<u>Sertoli-Leydig cell tumour, poorly differentiated, in situ</u>
<u>M8632/2</u>	<u>Gynandroblastoma, in situ</u>
<u>M8634/2</u>	<u>Sertoli-Leydig cell tumour, poorly differentiated, with heterologous elements, in situ</u>
<u>M8640/2</u>	<u>Sertoli cell carcinoma, in situ</u>
<u>M8650/2</u>	<u>Leydig cell tumour, in situ</u>
<u>M8670/2</u>	<u>Lipid cell tumour of ovary, in situ</u>
<u>M8680/2</u>	<u>Paraganglioma, in situ</u>

CODE_ID	Morphology Code Description
<u>M8683/1</u>	<u>Gangliocytic paraganglioma, uncertain whether benign or malignant</u>
<u>M8690/0</u>	<u>Glomus jugulare tumour, benign</u>
<u>M8690/2</u>	<u>Glomus jugulare tumour NOS, in situ</u>
<u>M8691/2</u>	<u>Aortic body tumour, in situ</u>
<u>M8693/2</u>	<u>Extra-adrenal paraganglioma, in situ</u>
<u>M8700/1</u>	<u>Phaeochromocytoma, uncertain whether benign or malignant</u>
<u>M8700/2</u>	<u>Phaeochromocytoma, in situ</u>
<u>M8710/2</u>	<u>Glomangiosarcoma, in situ</u>
<u>M8711/2</u>	<u>Glomus tumour, in situ</u>
<u>M8712/2</u>	<u>Glomangioma, in situ</u>
<u>M8713/2</u>	<u>Glomangiomyoma, in situ</u>
<u>M8721/2</u>	<u>Nodular melanoma, in situ</u>
<u>M8723/1</u>	<u>Melanoma, regressing, uncertain whether benign or malignant</u>
<u>M8725/3</u>	<u>Neuronaevus, malignant</u>
<u>M8725/6</u>	<u>Neuronaevus, metastatic</u>
<u>M8725/9</u>	<u>Neuronaevus, uncertain whether primary or metastatic</u>
<u>M8726/3</u>	<u>Magnocellular naevus, malignant</u>
<u>M8726/6</u>	<u>Magnocellular naevus, metastatic</u>
<u>M8726/9</u>	<u>Magnocellular naevus, uncertain whether primary or metastatic</u>
<u>M8727/1</u>	<u>Dysplastic naevus, uncertain whether benign or malignant</u>
<u>M8742/0</u>	<u>Lentigo maligna, benign</u>
<u>M8743/1</u>	<u>Superficial spreading melanoma, uncertain whether benign or malignant</u>
<u>M8750/2</u>	<u>Intradermal naevus, in situ</u>
<u>M8750/3</u>	<u>Intradermal naevus, malignant</u>
<u>M8750/6</u>	<u>Intradermal naevus, metastatic</u>
<u>M8750/9</u>	<u>Intradermal naevus, uncertain whether primary or metastatic</u>
<u>M8760/2</u>	<u>Compound naevus, in situ</u>
<u>M8760/3</u>	<u>Compound naevus, malignant</u>
<u>M8760/6</u>	<u>Compound naevus, metastatic</u>
<u>M8760/9</u>	<u>Compound naevus, uncertain whether primary or metastatic</u>
<u>M8770/1</u>	<u>Epithelioid and spindle cell naevus, uncertain whether benign or malignant</u>
<u>M8780/2</u>	<u>Blue naevus, in situ</u>
<u>M8790/3</u>	<u>Cellular blue naevus, malignant</u>
<u>M8790/6</u>	<u>Cellular blue naevus, metastatic</u>
<u>M8790/9</u>	<u>Cellular blue naevus, uncertain whether primary or metastatic</u>
<u>M8804/2</u>	<u>Epithelioid sarcoma, in situ</u>
<u>M8820/3</u>	<u>Elastofibroma, malignant</u>
<u>M8820/6</u>	<u>Elastofibroma, metastatic</u>
<u>M8820/9</u>	<u>Elastofibroma, uncertain whether primary or metastatic</u>
<u>M8833/6</u>	<u>Pigmented dermatofibrosarcoma protuberans, metastatic</u>
<u>M8833/9</u>	<u>Pigmented dermatofibrosarcoma protuberans, uncertain whether primary or metastatic</u>
<u>M8858/6</u>	<u>Dedifferentiated liposarcoma, metastatic</u>
<u>M8858/9</u>	<u>Dedifferentiated liposarcoma, uncertain whether primary or metastatic</u>
<u>M8893/3</u>	<u>Bizarre leiomyoma, malignant</u>
<u>M8893/6</u>	<u>Bizarre leiomyoma, metastatic</u>
<u>M8893/9</u>	<u>Bizarre leiomyoma, uncertain whether primary or metastatic</u>
<u>M8940/2</u>	<u>Mixed tumour, in situ NOS</u>
<u>M8941/2</u>	<u>Carcinoma in pleomorphic adenoma, in situ</u>
<u>M8950/2</u>	<u>Mullerian mixed tumour, in situ</u>

CODE_ID	Morphology Code Description
<u>M8951/2</u>	<u>Mesodermal mixed tumour, in situ</u>
<u>M8959/2</u>	<u>Cystic nephroma, in situ</u>
<u>M8960/2</u>	<u>Nephroblastoma NOS, in situ</u>
<u>M8970/2</u>	<u>Hepatoblastoma, in situ</u>
<u>M8971/2</u>	<u>Pancreatoblastoma, in situ</u>
<u>M8972/2</u>	<u>Pulmonary blastoma, in situ</u>
<u>M8973/2</u>	<u>Pleuropulmonary blastoma, in situ</u>
<u>M8975/1</u>	<u>Calcifying nested epithelial stromal tumour</u>
<u>M8980/2</u>	<u>Carcinosarcoma NOS, in situ</u>
<u>M8981/2</u>	<u>Carcinosarcoma, embryonal, in situ</u>
<u>M8982/2</u>	<u>Myoepithelioma, in situ</u>
<u>M8990/2</u>	<u>Mesenchymoma, in situ</u>
<u>M8991/2</u>	<u>Embryonal sarcoma, in situ</u>
<u>M9000/2</u>	<u>Brenner tumour, in situ</u>
<u>M9010/2</u>	<u>Fibroadenoma NOS, in situ</u>
<u>M9014/2</u>	<u>Serous adenocarcinofibroma, in situ</u>
<u>M9015/2</u>	<u>Mucinous adenocarcinofibroma, in situ</u>
<u>M9020/2</u>	<u>Phyllodes tumour, in situ</u>
<u>M9060/2</u>	<u>Dysgerminoma, in situ</u>
<u>M9062/2</u>	<u>Seminoma, anaplastic, in situ</u>
<u>M9064/0</u>	<u>Germinoma, benign</u>
<u>M9071/2</u>	<u>Yolk sac tumour, in situ</u>
<u>M9072/2</u>	<u>Polyembryoma, in situ</u>
<u>M9073/2</u>	<u>Gonadoblastoma, in situ</u>
<u>M9080/2</u>	<u>Teratoma, in situ, NOS</u>
<u>M9081/2</u>	<u>Teratocarcinoma, in situ</u>
<u>M9082/2</u>	<u>Malignant teratoma, undifferentiated, in situ</u>
<u>M9083/2</u>	<u>Malignant teratoma, intermediate, in situ</u>
<u>M9084/2</u>	<u>Teratoma with malignant transformation, in situ</u>
<u>M9085/2</u>	<u>Mixed germ cell tumour, in situ</u>
<u>M9090/2</u>	<u>Struma ovarii, in situ</u>
<u>M9091/2</u>	<u>Strumal carcinoid, in situ</u>
<u>M9100/2</u>	<u>Choriocarcinoma NOS, in situ</u>
<u>M9101/2</u>	<u>Choriocarcinoma combined with other germ cell elements, in situ</u>
<u>M9102/2</u>	<u>Malignant teratoma, trophoblastic, in situ</u>
<u>M9104/2</u>	<u>Placental site trophoblastic tumour, in situ</u>
<u>M9105/2</u>	<u>Trophoblastic tumour, epithelioid, in situ</u>
<u>M9110/2</u>	<u>Mesonephroma, in situ</u>
<u>M9120/2</u>	<u>Haemangiosarcoma, in situ</u>
<u>M9121/3</u>	<u>Cavernous haemangioma, malignant</u>
<u>M9121/6</u>	<u>Cavernous haemangioma, metastatic</u>
<u>M9121/9</u>	<u>Cavernous haemangioma, uncertain whether primary or metastatic</u>
<u>M9124/2</u>	<u>Kupffer cell sarcoma, in situ</u>
<u>M9125/3</u>	<u>Epithelioid haemangioma, malignant</u>
<u>M9125/6</u>	<u>Epithelioid haemangioma, metastatic</u>
<u>M9125/9</u>	<u>Epithelioid haemangioma, uncertain whether primary or metastatic</u>
<u>M9130/2</u>	<u>Haemangioendothelioma, in situ</u>
<u>M9132/2</u>	<u>Intramuscular haemangioma, in situ</u>
<u>M9133/2</u>	<u>Epithelioid haemangioendothelioma, in situ</u>

CODE_ID	Morphology Code Description
<u>M9150/2</u>	<u>Haemangiopericytoma, in situ</u>
<u>M9161/2</u>	<u>Haemangioblastoma, in situ</u>
<u>M9170/2</u>	<u>Lymphangiosarcoma, in situ</u>
<u>M9175/2</u>	<u>Haemolymphangioma, in situ</u>
<u>M9180/2</u>	<u>Osteosarcoma NOS, in situ</u>
<u>M9181/2</u>	<u>Chondroblastic osteosarcoma, in situ</u>
<u>M9182/2</u>	<u>Fibroblastic osteosarcoma, in situ</u>
<u>M9183/2</u>	<u>Telangiectatic osteosarcoma, in situ</u>
<u>M9184/2</u>	<u>Osteosarcoma in Paget disease of bone, in situ</u>
<u>M9185/2</u>	<u>Small cell osteosarcoma, in situ</u>
<u>M9186/2</u>	<u>Central osteosarcoma, in situ</u>
<u>M9187/2</u>	<u>Intraosseous well differentiated osteosarcoma, in situ</u>
<u>M9192/2</u>	<u>Parosteal osteosarcoma, in situ</u>
<u>M9193/2</u>	<u>Periosteal osteosarcoma, in situ</u>
<u>M9194/2</u>	<u>High grade surface osteosarcoma, in situ</u>
<u>M9195/2</u>	<u>Intracortical osteosarcoma, in situ</u>
<u>M9210/3</u>	<u>Osteochondromatosis, malignant</u>
<u>M9210/6</u>	<u>Osteochondromatosis, metastatic</u>
<u>M9210/9</u>	<u>Osteochondromatosis, uncertain whether primary or metastatic</u>
<u>M9220/2</u>	<u>Chondrosarcoma, in situ</u>
<u>M9221/2</u>	<u>Juxtacortical chondrosarcoma, in situ</u>
<u>M9230/2</u>	<u>Chondroblastoma, in situ</u>
<u>M9231/2</u>	<u>Myxoid chondrosarcoma, in situ</u>
<u>M9240/2</u>	<u>Mesenchymal chondrosarcoma, in situ</u>
<u>M9242/2</u>	<u>Clear cell chondrosarcoma, in situ</u>
<u>M9243/2</u>	<u>Dedifferentiated chondrosarcoma, in situ</u>
<u>M9250/2</u>	<u>Giant cell tumour of bone, in situ</u>
<u>M9251/2</u>	<u>Giant cell tumour of soft parts, in situ</u>
<u>M9252/2</u>	<u>Malignant tenosynovial giant cell tumour, in situ</u>
<u>M9260/2</u>	<u>Ewing sarcoma, in situ</u>
<u>M9261/2</u>	<u>Adamantinoma of long bones, in situ</u>
<u>M9270/2</u>	<u>Odontogenic tumour, in situ</u>
<u>M9290/2</u>	<u>Ameloblastic odontosarcoma, in situ</u>
<u>M9310/2</u>	<u>Ameloblastoma, in situ</u>
<u>M9330/2</u>	<u>Ameloblastic fibrosarcoma, in situ</u>
<u>M9340/3</u>	<u>Calcifying epithelial odontogenic tumour, malignant</u>
<u>M9340/6</u>	<u>Calcifying epithelial odontogenic tumour, metastatic</u>
<u>M9340/9</u>	<u>Calcifying epithelial odontogenic tumour, uncertain whether primary or metastatic</u>
<u>M9342/2</u>	<u>Odontogenic carcinosarcoma, in situ</u>
<u>M9361/3</u>	<u>Pineocytoma, malignant</u>
<u>M9361/6</u>	<u>Pineocytoma, metastatic</u>
<u>M9361/9</u>	<u>Pineocytoma, uncertain whether primary or metastatic</u>
<u>M9362/2</u>	<u>Pineoblastoma, in situ</u>
<u>M9364/2</u>	<u>Peripheral neuroectodermal tumour, in situ</u>
<u>M9365/2</u>	<u>Askin tumour, in situ</u>
<u>M9370/2</u>	<u>Chordoma NOS, in situ</u>
<u>M9371/2</u>	<u>Chondroid chordoma, in situ</u>
<u>M9372/2</u>	<u>Dedifferentiated chordoma, in situ</u>
<u>M9380/0</u>	<u>Glioma, benign</u>

CODE_ID	Morphology Code Description
<u>M9380/2</u>	<u>Glioma, in situ</u>
<u>M9381/2</u>	<u>Gliomatosis cerebri, in situ</u>
<u>M9382/2</u>	<u>Mixed glioma, in situ</u>
<u>M9390/2</u>	<u>Choroid plexus papilloma, in situ</u>
<u>M9391/2</u>	<u>Ependymoma, in situ</u>
<u>M9392/2</u>	<u>Ependymoma, anaplastic, in situ</u>
<u>M9393/2</u>	<u>Papillary ependymoma, in situ</u>
<u>M9394/2</u>	<u>Myxopapillary ependymoma, in situ</u>
<u>M9395/3</u>	<u>Papillary tumour of the pineal region</u>
<u>M9395/6</u>	<u>Papillary tumour of the pineal region, metastatic</u>
<u>M9395/9</u>	<u>Papillary tumour of the pineal region, uncertain whether primary or metastatic</u>
<u>M9400/0</u>	<u>Astrocytoma NOS, benign</u>
<u>M9400/1</u>	<u>Astrocytoma NOS, uncertain whether benign or malignant</u>
<u>M9400/2</u>	<u>Astrocytoma NOS, in situ</u>
<u>M9401/2</u>	<u>Astrocytoma, anaplastic, in situ</u>
<u>M9410/2</u>	<u>Protoplasmic astrocytoma, in situ</u>
<u>M9411/2</u>	<u>Gemistocytic astrocytoma, in situ</u>
<u>M9420/6</u>	<u>Fibrillary astrocytoma, metastatic</u>
<u>M9420/9</u>	<u>Fibrillary astrocytoma, uncertain whether primary or metastatic</u>
<u>M9423/2</u>	<u>Polar spongioblastoma, in situ</u>
<u>M9424/2</u>	<u>Pleomorphic xanthoastrocytoma, in situ</u>
<u>M9425/3</u>	<u>Pilomyxoid astrocytoma</u>
<u>M9425/6</u>	<u>Pilomyxoid astrocytoma, metastatic</u>
<u>M9425/9</u>	<u>Pilomyxoid astrocytoma, uncertain whether primary or metastatic</u>
<u>M9430/2</u>	<u>Astroblastoma, in situ</u>
<u>M9431/1</u>	<u>Angiocentric glioma</u>
<u>M9432/1</u>	<u>Pituicytoma</u>
<u>M9440/2</u>	<u>Glioblastoma NOS, in situ</u>
<u>M9441/2</u>	<u>Giant cell glioblastoma, in situ</u>
<u>M9442/2</u>	<u>Gliosarcoma, in situ</u>
<u>M9444/2</u>	<u>Chordoid glioma, in situ</u>
<u>M9450/2</u>	<u>Oligodendroglioma, NOS, in situ</u>
<u>M9451/2</u>	<u>Oligodendroglioma, anaplastic, in situ</u>
<u>M9460/2</u>	<u>Oligodendroblastoma, in situ</u>
<u>M9470/2</u>	<u>Medulloblastoma NOS, in situ</u>
<u>M9471/2</u>	<u>Desmoplastic nodular medulloblastoma, in situ</u>
<u>M9472/2</u>	<u>Medullomyoblastoma, in situ</u>
<u>M9473/2</u>	<u>Primitive neuroectodermal tumour NOS, in situ</u>
<u>M9474/2</u>	<u>Large cell medulloblastoma, in situ</u>
<u>M9480/2</u>	<u>Cerebellar sarcoma NOS, in situ</u>
<u>M9490/2</u>	<u>Ganglioneuroblastoma, in situ</u>
<u>M9500/0</u>	<u>Neuroblastoma NOS, benign</u>
<u>M9500/2</u>	<u>Neuroblastoma NOS, in situ</u>
<u>M9501/2</u>	<u>Medulloepithelioma NOS, in situ</u>
<u>M9502/2</u>	<u>Teratoid medulloepithelioma, in situ</u>
<u>M9503/2</u>	<u>Neuroepithelioma NOS, in situ</u>
<u>M9504/2</u>	<u>Spongioneuroblastoma, in situ</u>
<u>M9505/2</u>	<u>Ganglioglioma, anaplastic, in situ</u>
<u>M9507/2</u>	<u>Pacinian tumour, in situ</u>

CODE_ID	Morphology Code Description
<u>M9508/2</u>	<u>Atypical teratoid/rhabdoid tumour, in situ</u>
<u>M9509/1</u>	<u>Papillary glioneuronal tumour</u>
<u>M9510/2</u>	<u>Retinoblastoma NOS, in situ</u>
<u>M9511/2</u>	<u>Retinoblastoma, differentiated, in situ</u>
<u>M9512/2</u>	<u>Retinoblastoma, undifferentiated, in situ</u>
<u>M9513/2</u>	<u>Retinoblastoma, diffuse, in situ</u>
<u>M9520/2</u>	<u>Olfactory neurogenic tumour, in situ</u>
<u>M9521/2</u>	<u>Olfactory neurocytoma, in situ</u>
<u>M9522/2</u>	<u>Olfactory neuroblastoma, in situ</u>
<u>M9523/2</u>	<u>Olfactory neuroepithelioma, in situ</u>
<u>M9530/2</u>	<u>Meningioma, in situ</u>
<u>M9531/2</u>	<u>Meningothelial meningioma, in situ</u>
<u>M9533/2</u>	<u>Psammomatous meningioma, in situ</u>
<u>M9534/2</u>	<u>Angiomatous meningioma, in situ</u>
<u>M9538/2</u>	<u>Papillary meningioma, in situ</u>
<u>M9539/0</u>	<u>Atypical meningioma, benign</u>
<u>M9539/2</u>	<u>Meningeal sarcomatosis, in situ</u>
<u>M9540/2</u>	<u>Neurofibromatosis, in situ</u>
<u>M9550/2</u>	<u>Plexiform neurofibroma, in situ</u>
<u>M9560/2</u>	<u>Neurilemmoma, in situ</u>
<u>M9561/2</u>	<u>Malignant peripheral nerve sheath tumour with rhabdomyoblastic differentiation, in situ</u>
<u>M9571/2</u>	<u>Perineurioma, in situ</u>
<u>M9580/2</u>	<u>Granular cell tumour, in situ</u>
<u>M9581/2</u>	<u>Alveolar soft part sarcoma, in situ</u>
<u>M9597/3</u>	<u>Primary cutaneous follicle centre lymphoma</u>
<u>M9688/3</u>	<u>T-cell/histiocyte rich large B-cell lymphoma</u>
<u>M9712/3</u>	<u>Intravascular large B-cell lymphoma</u>
<u>M9716/3</u>	<u>Hepatosplenic gamma-delta T-cell lymphoma</u>
<u>M9724/3</u>	<u>Systemic EBV positive T-cell lymphoproliferative disease of childhood</u>
<u>M9725/3</u>	<u>Hydroa vacciniforme-like lymphoma</u>
<u>M9726/3</u>	<u>Primary cutaneous gamma-delta T-cell lymphoma</u>
<u>M9735/3</u>	<u>Plasmablastic lymphoma</u>
<u>M9737/3</u>	<u>ALK-positive large B-cell lymphoma</u>
<u>M9738/3</u>	<u>Large B-cell lymphoma arising in HHV8-associated multicentric Castleman disease</u>
<u>M9741/1</u>	<u>Indolent systemic mastocytosis</u>
<u>M9751/4</u>	<u>Langerhans cell histiocytosis NOS</u>
<u>M9751/3</u>	<u>Langerhans cell histiocytosis NOS</u>
<u>M9752/4</u>	<u>Langerhans cell histiocytosis, unifocal</u>
<u>M9753/4</u>	<u>Langerhans cell histiocytosis, multifocal</u>
<u>M9759/3</u>	<u>Fibroblastic reticular cell tumour</u>
<u>M9806/3</u>	<u>Mixed phenotype acute leukaemia with t(9;22)(q34;q11.2); BCR-ABL1</u>
<u>M9807/3</u>	<u>Mixed phenotype acute leukaemia with t(v;11q23); MLL rearranged</u>
<u>M9808/3</u>	<u>Mixed phenotype acute leukaemia, B/myeloid, NOS</u>
<u>M9809/3</u>	<u>Mixed phenotype acute leukaemia, T/myeloid, NOS</u>
<u>M9812-M983</u>	<u>Lymphoid leukaemias</u>
<u>M9811/3</u>	<u>B lymphoblastic leukaemia/lymphoma, NOS</u>
<u>M9812/3</u>	<u>B lymphoblastic leukaemia/lymphoma with t(9;22)(q34;q11.2); BCR-ABL1</u>
<u>M9813/3</u>	<u>B lymphoblastic leukaemia/lymphoma with t(v;11q23); MLL rearranged</u>
<u>M9814/3</u>	<u>B lymphoblastic leukaemia/lymphoma with t(12;21)(p13;q22); TEL-AML1 (ETV6-RUNX1)</u>

CODE_ID	Morphology Code Description
<u>M9815/3</u>	<u>B lymphoblastic leukaemia/lymphoma with hyperdiploidy</u>
<u>M9816/3</u>	<u>B lymphoblastic leukaemia/lymphoma with hypodiploidy (hypodiploid ALL)</u>
<u>M9817/3</u>	<u>B lymphoblastic leukaemia/lymphoma with t(5;14)(q31;q32); IL3-IGH</u>
<u>M9818/3</u>	<u>B lymphoblastic leukaemia/lymphoma with t(1;19)(q23;p13.3); E2A-PBX1 (TCF3-PBX1)</u>
<u>M9865/3</u>	<u>Acute myeloid leukaemia with t(6;9)(p23;q34); DEK-NUP214</u>
<u>M9869/3</u>	<u>Acute myeloid leukaemia with inv(3)(q21;q26.2) or t(3;3)(q21;q26.2); RPN1-EVI1</u>
<u>M9895/3</u>	<u>Acute myeloid leukaemia with multilineage dysplasia myelodysplasia-related changes</u>
<u>M9898/1</u>	<u>Transient abnormal myelopoiesis</u>
<u>M9898/3</u>	<u>Myeloid leukaemia associated with Down Syndrome</u>
<u>M9911/3</u>	<u>Acute myeloid leukaemia (megakaryoblastic) with t(1;22)(p13;q13); RBM15-MKL1</u>
<u>M9920/3</u>	<u>Therapy-related acute myeloid leukaemia NOS neoplasm</u>
<u>M9960/3</u>	<u>Chronic myeloproliferative disease NOS Myeloproliferative neoplasm NOS</u>
<u>M9961/3</u>	<u>Myelosclerosis with myeloid metaplasia Primary myelofibrosis</u>
<u>M9964/3</u>	<u>Hypereosinophilic syndrome Chronic eosinophilic leukaemia NOS</u>
<u>M9965/3</u>	<u>Myeloid and lymphoid neoplasms with PDGFRA rearrangement</u>
<u>M9966/3</u>	<u>Myeloid neoplasms with PDGFRB rearrangement</u>
<u>M9967/3</u>	<u>Myeloid and lymphoid neoplasms with FGFR1 abnormalities</u>
<u>M9971/1</u>	<u>Post transplant lymphoproliferative disorder</u>
<u>M9971/3</u>	<u>Polymorphic post transplant lymphoproliferative disorder</u>
<u>M9975/4</u>	<u>Myeloproliferative disease NOS</u>
<u>M9975/3</u>	<u>Myeloproliferative neoplasm, unclassifiable</u>
<u>M9991/3</u>	<u>Refractory neutropenia</u>
<u>M9992/3</u>	<u>Refractory thrombocytopenia</u>

3. Diseases of blood and blood forming organs and certain disorders of immune mechanism

3.1. Anaemia, sideroblasts, ring

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Anaemia D64.9

- refractory (related to alkylating agent) (related to Epipodophyllotoxin) (related to therapy) NEC (M9980/3) D46.4
- - with
- - - dysplasia, multilineage (M9985/3) D46.5
- - - excess blasts (RAEB 1) (RAEB 2) (M9983/3) D46.2
- - - - in transformation (RAEB-T) (M9984/3) C92.0
- - - haemochromatosis (M9982/3) D46.1
- - - sideroblasts, ringed (~~associated with marked thrombocytosis~~) (RARS) (M9982/3) D46.1
- - without sideroblasts, ringed (M9980/3) D46.0
- - sideroblastic (M9982/3) D46.1

3.2. Egyptian splenomegaly (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Egg shell nails L60.3

- congenital Q84.69

Egyptian splenomegaly B65.1† D77*

Ehlers-Danlos syndrome Q79.6

3.3. Immune reconstitution syndrome (*Indexing*)

In 2009 the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Immune

- fetus and newborn P55.9
- - specified NEC P55.8
- reconstitution syndrome (inflammatory) (IRIS) (IRS) D89.3

Immunisation (see also Vaccination) Z26.9

Syndrome — see also Disease

- immobility, immobilisation (paraplegic) M62.3-
- immune reconstitution (inflammatory) (IRIS) (IRS) D89.3
- immunodeficiency

TABULAR LIST OF DISEASES

D89 Other disorders involving the immune mechanism, not elsewhere classified

D89.3 Immune reconstitution syndrome
Immune reconstitution inflammatory syndrome [IRIS]

Use additional external cause code (Chapter 20), to identify drug.

3.4. Molecular adsorbent recirculating system (MARS) treatment (Indexing)

Advice was published in *Coding Matters*, September 2009 (Vol. 16, No. 2) regarding the correct code assignment for *Molecular Adsorbent Recirculating System (MARS) treatment*. This advice has been incorporated into ACHI Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Apheresis

- therapeutic NEC 13750-06 [1892]
- - erythropheresis (erythrocytapheresis) 13750-02 [1892]
- - leukopheresis (leukocytapheresis) 13750-01 [1892]
- - molecular adsorbent recirculating (MARS) treatment 13750-06 [1892]
- - plasmapheresis 13750-00 [1892]

Dialysis

- haemoperfusion 13100-05 [1060]
- liver (molecular adsorbent recirculating (MARS) treatment) 13750-06 [1892]
- peritoneal

Marking

- denture
- - for identification 97777-00 [477]
- MARS (molecular adsorbent recirculating system) treatment 13750-06 [1892]**
- Marshall-Marchetti-Kranz procedure** (retropubic procedure for stress incontinence) (with prosthesis)

Treatment

- fracture
- - by reduction — see *Reduction/fracture/by site*
- - nonsurgical (by cast) — see *Immobilisation*
- molecular adsorbent recirculating system (MARS) 13750-06 [1892]
- palliative

TABULAR LIST OF INTERVENTIONS

1892 Apheresis

▼0030

13750-06 Other therapeutic haemapheresis
Molecular adsorbent recirculating system (MARS) treatment

3.5. Sentinel lymph node biopsy (SLNB)

A public submission was received regarding *sentinel lymph node biopsy (SLNB) of the groin*. In ACHI Seventh Edition there is a code for sentinel lymph node of the axilla, however there is no code for the same procedure of other sites.

The sentinel lymph node is the first node draining a lymphatic basin (sentinel lymph node) which would be expected to predict the absence or presence of malignancy in that area.

SLNB involves three steps:

- Lymphoscintigram
- Intraoperative lymphatic mapping with blue dye
- Selective biopsy of lymph nodes identified as “sentinel” nodes

Once identified, the nodes are surgically excised and sent to histopathology for examination where further treatment decisions are based on the metastatic status of the sentinel nodes. If no malignancy cells are found, no further surgery is done. If cancerous cells are found to be present in the SLN, a further removal of lymph nodes in the region will be required.

The following amendments were made to ACHI for Eighth Edition:

- ACHI Tabular List
 - Created code 30300-01 *Sentinel lymph node biopsy, not elsewhere classified* in block [805] *Biopsy of lymphatic structure*
 - Created and revised instructional notes in blocks [806], [808]–[811]
- ACHI Alphabetic Index: amendments to support the above changes

ALPHABETIC INDEX OF INTERVENTIONS

Biopsy

- lymphatic structure (node) 30075-00 [805]
 ...
 - - scalene 30096-00 [805]
 - - sentinel (gynaecological) (inguinal) (mesenteric) (neck) NEC 30300-01 [805]
 - - - axilla 30300-00 [808]
 - mediastinum (with exploration)

Excision — see also Removal

- lymph node
 ...
 - - retroperitoneal (simple) (total) NEC 90282-00 [811]
 - - - for staging of malignancy 35726-01 [985]
 ...
 - - - regional (limited) 90282-01 [811]
 - - sentinel (gynaecological) (inguinal) (mesenteric) (neck) NEC 30300-01 [805]
 - - - axilla 30300-00 [808]
 - - specified site (simple) (total) NEC 90282-00 [811]

TABULAR LIST OF INTERVENTIONS

805

Biopsy of lymphatic structure

Excludes: axillary lymph node (30332-00 [808])

30300-01 Sentinel lymph node biopsy, not elsewhere classified

Excision of sentinel lymph node(s)

Includes: injection of radioisotope and mapping (lymphoscintigraphy) of nodal basin

Code also when performed:

• excision of lymph nodes:

- radical (31435-00 [806], 30330-00 [809], 35551 [810], 37607-00, 37610-00, 90282-02 [811])
- regional (31423-01 [806], 30329-01 [809], 90282-01 [811])

Excludes: that of axilla (30300-00 [808])

806

Excision procedures on lymph node of neck

Excision of cervical lymph nodes

31423-00 Excision of lymph node of neck

Total (simple) excision of lymph node of neck

Excludes: sentinel lymph node biopsy or excision (30300-01 [805])

31423-01 Regional excision of lymph nodes of neck

Limited excision of lymph nodes of neck

Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

31435-00 Radical excision of lymph nodes of neck

Complete clearance of all nodes in neck

Radical neck dissection
Resection of cervical lymph nodes down to muscle and fascia

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: radical excision of intraoral lesion (30275-00 [403])

808

Excision procedures on lymph node of axilla

30332-00 Excision of lymph node of axilla
Axillary sampling
Biopsy of single axillary lymph node
Excision of single axillary lymph node
Total (simple) excision of lymph node of axilla

Excludes: sentinel lymph node biopsy or excision of axilla (30300-00 [808])

30300-00 Sentinel lymph node biopsy of axilla
Excision of sentinel lymph node(s) in level I, II or III of axilla

Includes: injection of radioisotope and mapping (lymphoscintigraphy) of nodal basin

Note: Level I includes nodes of the lower axilla up to the lower border of pectoralis minor

Level II includes axillary contents up to the upper border of pectoralis minor

Level III includes axillary contents extending to the apex of the axilla

Code also when performed:

• excision of axillary lymph nodes:

• radical (30336-00 [808])

• regional (30335-00 [808])

30335-00 Regional excision of lymph nodes of axilla
Level I excision of lymph nodes of axilla
Limited excision of lymph nodes of axilla
Low axillary dissection or excision
Regional lymph node excision with excision of lymphatic drainage area including fat

Note: Level I includes nodes of the lower axilla up to the lower border of pectoralis minor

Code also when performed:

• sentinel lymph node biopsy or excision (30300-00 [808])

Excludes: sentinel node biopsy or excision (30300-00 [808])

30336-00 Radical excision of lymph nodes of axilla
Complete clearance of all nodes in axilla
Level II or III excision of lymph nodes of axilla
Mid or high axillary dissection or excision

Note: Level II includes axillary contents up to the upper border of pectoralis minor

Level III includes axillary contents extending to the apex of the axilla

Code also when performed:

• sentinel lymph node biopsy or excision (30300-00 [808])

Excludes: sentinel node biopsy or excision (30300-00 [808])

809

Excision procedures on lymph node of groin

Excision of inguinal lymph nodes

30329-00 Excision of lymph node of groin
Total (simple) excision of lymph node of groin

Excludes: sentinel lymph node biopsy or excision (30300-01 [805])

30329-01 Regional excision of lymph nodes of groin
Limited excision of lymph nodes of groin
Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

- 30330-00 Radical excision of lymph nodes of groin
Complete clearance of all nodes in groin
Resection of inguinal lymph nodes down to muscle and fascia

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

810

Excision procedures on lymph node for gynaecological malignancy

- 35551-00 Radical excision of pelvic lymph nodes via laparoscopy for gynaecological malignancy

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

- 35551-01 Radical excision of pelvic lymph nodes for gynaecological malignancy

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that with hysterectomy (35664-00, 35670-00 [1268], 35664-01 [1269])

811

Excision procedures on lymph node of other sites

- 90282-00 Excision of lymph node of other site
Total (simple) excision of lymph node of other site NOS

Excludes: sentinel lymph node biopsy or excision (30300-01 [805])

that for staging of malignancy:

- gynaecological (35723 [810])
- lymphoma (30384-00 [985])
- NOS (35726-01 [985])

- 90282-01 Regional excision of lymph nodes of other site
Limited excision of lymph nodes of other site NOS
Regional lymph node excision with excision of lymphatic drainage area including skin, subcutaneous tissue and fat

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that for staging of malignancy:

- gynaecological (35723 [810])
- lymphoma (30384-00 [985])
- NOS (35726-01 [985])

- 37607-00 Radical excision of retroperitoneal lymph nodes
▼0028 Radical dissection of retroperitoneal lymph nodes

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

Excludes: that with:

- excision of retroperitoneal neuro-endocrine lesion (30323-00 [989])
- hysterectomy (35661-00 [1268])
- radical nephrectomy (see block [1053])

- 37610-00 Radical excision of retroperitoneal lymph nodes, subsequent
Radical dissection of retroperitoneal lymph nodes following previous retroperitoneal:
• chemotherapy
• dissection
• irradiation

Code also when performed:

• sentinel lymph node biopsy or excision (30300-01 [805])

- Excludes:** that with:
- excision of retroperitoneal neuro-endocrine lesion (30323-00 [989])
 - hysterectomy (35661-00 [1268])
 - radical nephrectomy (see block [1053])
- 90282-02 Radical excision of lymph nodes of other site
Complete clearance of all nodes of other site NOS
Resection of lymph nodes down to muscle and fascia
- Code also when performed:
- sentinel lymph node biopsy or excision (30300-01 [805])
- Excludes:** that for staging of malignancy:
- gynaecological (35723 [810])
 - lymphoma (30384-00 [985])
 - NOS (35726-01 [985])
- that of pelvic lymph nodes for:
- gynaecological malignancy (35551 [810])
 - hysterectomy (35664-00, 35670-00 [1268], 35664-01 [1269])
 - radical prostatectomy and bladder neck reconstruction (37211-00 [1167])

4. Endocrine, nutritional and metabolic

4.1. Allied health intervention, diabetes education (*Indexing*)

A public submission highlighted deficiencies regarding the indexing of *allied health intervention*, *diabetes education*, and consequently an index entry was created for *diabetes education* under the index pathway *Intervention/allied health/general* for ACHI Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Intervention

- allied health — *see also specific interventions*
- - general
- - - audiology 95550-06 [1916]
- - - diabetes education 95550-14 [1916]
- - - dietetics 95550-00 [1916]

4.2. Cystic fibrosis

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. This included deleting the inclusion term for cystic fibrosis with combined manifestations at E48.8 *Cystic fibrosis with other manifestations*. This amendment has now been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Fibrosis, fibrotic

- cystic (of pancreas) E84.9
- - with
- - - ~~combined manifestations E84.8~~
- - - distal intestinal obstruction (syndrome) E84.1

TABULAR LIST OF DISEASES

E84

Cystic fibrosis

▼0402

E84.8

Cystic fibrosis with other manifestations
~~Cystic fibrosis with combined manifestations~~

AUSTRALIAN CODING STANDARDS

0402 CYSTIC FIBROSIS

Cystic fibrosis (CF) should be coded with the appropriate code from E84.- *Cystic fibrosis* followed by a code(s) for any specified manifestation(s). ~~Note that E84.8 *Cystic fibrosis with other manifestations* includes cases with combined manifestations.~~ More than one code from E84.- *Cystic fibrosis* should be used if the patient presents with multiple manifestations of CF.

EXAMPLE 1:

Patient admitted for reduction of fractured shaft of tibia following fall from ladder. Patient also treated for bronchiectasis associated with cystic fibrosis.

Codes: S82.28 *Other fracture of shaft of tibia*
W11 *Fall on and from ladder*
An appropriate place of occurrence code (Y92.-) and activity code (U50–U73)
E84.0 *Cystic fibrosis with pulmonary manifestations*
J47 *Bronchiectasis*

4.3. Criger-Najjar jaundice (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Jaundice (yellow) R17

- familial nonhaemolytic (congenital) (*Gilbert*) E80.4
- - *Criger-Najjar* E80.5
- fetus or newborn (physiological) P59.9

4.4. Diabetes mellitus and intermediate hyperglycaemia

A major review and update to ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia* was implemented 1 July 2012. The review highlighted minor revisions that were required for intermediate hyperglycaemia (IH) and diabetes mellitus (DM) in Eighth Edition. These were primarily changes to the ICD-10-AM Tabular List and Alphabetical Index. There were also a number of public submissions and queries which highlighted areas requiring revision to the classification of diabetes mellitus for Eighth Edition.

1. Update terminology of *impaired glucose regulation (IGR)* to *intermediate hyperglycaemia*

A joint WHO and International Diabetes Federation Technical Advisory Group was commissioned to review the WHO 1998 diagnosis and classification of diabetes mellitus. The report from this group does not use the term *impaired glucose regulation* but rather *intermediate hyperglycaemia* (World Health Organization 2006). The resultant change in terminology from impaired glucose regulation (IGR) to intermediate hyperglycaemia (IH) was endorsed by Australian clinicians and has now been reflected in ICD-10-AM for Eighth Edition.

2. Review Tabular List *Note: Diagnostic criteria at E09-E14 and O24.2*

The diagnostic criteria for diabetes mellitus and IGR/IH have been revised by WHO and the International Diabetes Federation (IDF). As part of the review and update to ACS 0401 it was agreed that the diagnostic criteria in the Tabular List at block E09–E14 and code O24.4 *Diabetes mellitus arising during pregnancy* should be deleted.

3. Amend index entries for *latent diabetes mellitus in adults (LADA)*

It was noted that the term latent diabetes mellitus in adults (LADA) was infrequently documented, therefore the references to LADA/Type 1.5 diabetes mellitus were deleted in ACS 0401 (1 July 2012 revision) and changes have been made to the ICD-10-AM Alphabetical Index for Eighth Edition as follows:

- at index pathway Diabetes/with added term ‘autoimmune, in adults (LADA) (Type 1.5) E14.-’ and sub-term ‘with positive auto-antibodies (GAD) (IA2) E10.-’
- at index lead-term Diabetes added term ‘Type 1.5 E14.-’ and sub-term ‘with positive auto-antibodies (GAD) (IA2) E10.-’

4. Clarify sequencing in episodes which qualify for diabetic foot

Following the NCCC diabetes mellitus education (May 2012) for the 1 July 2012 revision of ACS 0401 (Seventh Edition), feedback indicated that ACS 0401, 6. *Diabetic foot* did not provide clear instruction for sequencing of codes for cases of diabetic foot. In particular, it was suggested that examples (10-12) for coding diabetic foot in the revised ACS 0401 may be leading coders to assume that codes for cellulitis take precedence over E1-.73 codes; and that E1-.73 would usually only be the principal diagnosis in cases where E1-.73 replaced the ulcer code as principal diagnosis due to the combination code rule or where the concept *diabetic foot* was documented.

After extensive consultation it was agreed that it was always going to be difficult to provide clear, realistic coding scenarios for diabetic foot. Therefore, a clinical update with classification advice was published and released with the *Coding Q&A, December 2012* and revisions were made to ACS 0401 to clarify sequencing of codes for diabetic foot, including deletion of the diabetic foot examples so as not to bias code assignment.

5. Additional clinical updates

Clinical review of the classification highlighted some additional terms that should be included in the Alphabetic Index at lead terms *Diabetes* and *Hyperglycaemia, intermediate*, and also the Tabular List.

6. Cross references for terms indexed as 'diabetic'

Discussions with the ITG noted the distinction between terms described/documentated as 'diabetic' and 'diabetes with'. It was agreed that the 'diabetic' terms should be indexed not only under *Diabetes, diabetic* but also under the lead terms for the other conditions which are 'known to be caused by' diabetes mellitus.

Terms indexed under both *Diabetes, diabetic* and *Diabetes/with* were also reviewed, and index entry and subterms for *Diabetes, diabetic/gangrene* were deleted as these terms are sufficiently indexed at *Diabetes/with*.

7. Correction of inconsistencies between and within the Tabular List and Alphabetic Index

a. Diabetes mellitus with fixed or persistent proteinuria

Advice published in Coding Q&A, June 2012, *Diabetes mellitus and fixed or persistent proteinuria* highlighted that the Tabular List and Alphabetic Index were inconsistent in the way terms 'fixed' and 'persistent' were depicted in the inclusion term 'proteinuria' for codes E09.21 and E1-.22; that is in the Alphabetic Index the terms were essential modifiers, whereas in the Tabular List they were nonessential modifiers (NEMs). Clinical advice confirmed that the terms 'fixed' and 'persistent' should be essential modifiers for the allocation of E09.21 and E1-.22.

Clinical advice was also sought regarding the classification of 'fixed' proteinuria, given that 'fixed' is not specified in the Alphabetic Index under the lead term *Proteinuria*. Clinicians' advice indicated that while the term 'fixed proteinuria' was not in common use, it should be classified to N39.1 *Persistent proteinuria, unspecified*. Consequently, changes were made to ICD-10-AM Tabular List and Alphabetic Index for Eighth Edition.

b. Diabetes mellitus with orthostatic hypotension

A query highlighted inconsistencies in the indexing of diabetes mellitus with orthostatic hypotension and postural hypotension. Clinical advice confirmed that 'orthostatic hypotension' was synonymous with 'postural hypotension' and that DM with orthostatic hypotension should be indexed to E1-.43 **Diabetes mellitus with diabetic autonomic neuropathy*. Consequently, changes were made to the ICD-10-AM Tabular List and Alphabetic Index for Eighth Edition.

c. IH and DM with retinal haemorrhages (E1-.31 and E1-.32)

The Tabular List inclusion term and NEMs at E09.31 and E1-.31, and E09.32 and E1-.32 were inconsistent with the essential modifiers in the Alphabetic Index at *Diabetes/with/retinal/haemorrhages*, therefore the Tabular List inclusion terms at E1-.31 and E1-.32 were amended so that 'dot-and-blot' and 'flame-shaped' are essential modifiers at E09.31 and E1-.31 and 'blotchy', 'round' and 'small' are essential modifiers at E09.32 and E1-.32.

ALPHABETIC INDEX OF DISEASES

Acetonaemia R79.8

- diabetic — *see also* *Diabetes/with/acidosis ketoacidosis*
- - lactic (without coma) E1-.13
- - - with coma E1-.14

Acetonuria R82.4

Dermoid (cyst) (M9084/0) — *see also* *Neoplasm/benign*

- ...
- due to radiation (nonionising) L57.8

Dermopathy

- diabetic E1-.62

Dermophytosis — *see* *Dermatophytosis*

Diabetes, diabetic (controlled) (mellitus) E1-.9

- with
- - abnormal sweating (gustatory) E1-.43
- - -
- - chronic kidney disease (CKD) E1-.22
- - - end-stage (ESKD) E1-.22
- - - stage 1 E1-.21
- - - stage 2 E1-.21
- - - stage 3 E1-.22
- - - stage 4 E1-.22
- - - stage 5 E1-.22
- - claudication, intermittent — *see* *Diabetes/with/angiopathy, peripheral*
- - cranial nerve palsy (abducens) (III) (oculomotor) (VI) E1-.41
- - detachment, retina (traction) E1-.35
- - dyslipidaemia — *see* *ACS 0401 Diabetes mellitus and intermediate hyperglycaemia/3 DM and IH with features of insulin resistance*
- - Ebstein(-Armani) changes (renal tubular degeneration) E1-.22
- - end-stage kidney disease (ESKD) E1-.22
- - -
- - fasciitis, necrotising E1-.69
- - fatty (changes in of) liver disease, nonalcoholic (NAFLD)(nonalcoholic) liver E1-.72
- - features of insulin resistance E1-.72
- - -
- - glomerulosclerosis
- - - with end-stage kidney disease (ESKD) E1-.22
- - - diffuse E1-.22
- - - intracapillary E1-.22
- - - nodular E1-.22
- - high albuminuria E1-.21
- - hyperinsulinism E1-.72
- - -
- - hypoglycaemia (coma) (convulsion) (fit) (seizure) E1-.64
- - hypotension, postural E1-.43
- - - orthostatic E1-.43
- - - postural E1-.43
- - hypotonic bladder E1-.43
- - -
- - intraretinal microvascular abnormalities (IRMA) E1-.32
- - iridocyclitis E1-.39
- - -
- - iritis E1-.39
- - -
- - Kimmelstiel-Wilson (disease) (lesion) E1-.22
- - - with end-stage kidney disease (ESKD) E1-.22
- - left ventricular diastolic dysfunction E1-.53

- - macroalbuminuria E1-.22
- - -
- - Meleney's gangrene E1-.69
- - metabolic syndrome E1-.72
- - microalbuminuria
- - -
- - neuropathy E1-.40
- - - with foot ulcer — *see* *ACS 0401 Diabetes mellitus and intermediate hyperglycaemia/6 Diabetic foot*
- - - autonomic E1-.43
- - - abnormal sweating (gustatory) E1-.43
- - - diarrhoea E1-.43
- - - dysfunction
- - - - anorectal E1-.43
- - - - oesophageal E1-.43
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- - - - orthostatic E1-.43
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- - paresis, stomach E1-.43
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- - -
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- neuropathy, neuropathic
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- - early onset E1-.42
- - ischaemic optic E1-.39
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- Dientamoeba A07.8

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Hyperglycaemia, hyperglycaemic R73

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Hyperosmolality E87.0

- diabetic — *see Diabetes/hyperosmolality*

Hyperostosis M85.8-

Hypoglycaemia (spontaneous) E16.2

- with diabetes (mellitus) — *see Diabetes, by type diabetic*
- coma E15

Impaired, impairment (function)

- auditory discrimination H93.2
- carbohydrate tolerance (glucose) — *see Impaired, impairment, glucose regulation Hyperglycaemia, hyperglycaemic/intermediate*
- cognitive, persisting (due to) ...
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- tubulo-interstitial changes E09.21
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- ...
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- regulation, glucose — *see Impaired, impairment, glucose regulation Hyperglycaemia, hyperglycaemic/intermediate*
- renal — *see Impaired, impairment/idney*
- tolerance, carbohydrate (glucose) — *see Impaired, impairment, glucose regulation Hyperglycaemia, hyperglycaemic/intermediate*
- vision NEC (*see also Vision, visual*) H54.9

Interception of pregnancy Z30.3

Intermediate hyperglycaemia — *see Hyperglycaemia, hyperglycaemic/intermediate*

Intermenstrual — *see condition*

Obesity (simple) E66.9

- with diabetes E1-.72
- constitutional E66.8

Periarthritis (joint) M77.9

- scapulohumeral M75.0
- shoulder M75.0
- - diabetic E1-.61
- wrist M77.2

Pregnancy (single) (uterine)

- complicated by — *see also Pregnancy/management affected by*
- - abnormal, abnormality
- ...
- - insufficient weight gain O26.1
- - intermediate hyperglycaemia (tolerance) O24.5-
- - kidney disease or failure NEC O26.81

Proteinuria R80

- fixed N39.1
- - with glomerular lesion — *see Proteinuria/isolated/with glomerular lesion*
- gestational O12.1

Scleroderma, scleroderma (diffuse) (generalised)

- M34.9
- circumscribed L94.0
- diabetic E1-.62
- linear L94.1

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- diabetic E1-.62
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Screening (for) Z13.9

- ingestion of radioactive substance Z13.88
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- leishmaniasis Z11.6

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- Mongolian (blue) Q82.5
- shin, diabetic E1-.62

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TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 4

ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES (E00–E89)

~~Impaired glucose regulation~~Intermediate hyperglycaemia and diabetes mellitus (E09–E14)

E09 ~~Impaired glucose regulation~~Intermediate hyperglycaemia

E10 Type 1 diabetes mellitus

E11 Type 2 diabetes mellitus

E13 Other specified diabetes mellitus

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CHAPTER 4

ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES (E00–E89)

This chapter contains the following blocks:

E00–E07 Disorders of thyroid gland

E09–E14 ~~Impaired glucose regulation~~Intermediate hyperglycaemia and diabetes mellitus

E15–E16 Other disorders of glucose regulation and pancreatic internal secretion

~~IMPAIRED GLUCOSE REGULATION~~INTERMEDIATE HYPERGLYCAEMIA AND DIABETES MELLITUS (E09–E14)

▼0401

Note: — Diagnostic criteria:

— Criteria for impaired fasting glycaemia (IFG):

Fasting venous plasma glucose 6.1–6.9 mmol/L

Criteria for impaired glucose tolerance (IGT):

Based on correctly conducted oral glucose tolerance test (fasting venous plasma glucose level 6.1–6.9 mmol/L and 2-hour post glucose venous plasma glucose 7.8–11.0 mmol/L).

— **WHO criteria for diabetes mellitus:**

Based on correctly conducted oral glucose tolerance test (fasting venous plasma glucose ≥ 7.0 mmol/L or 2-hour post oral glucose, venous plasma glucose ≥ 11.1 mmol/L).

— **OR**

American Diabetes Association (ADA) criteria for diabetes mellitus:

— Fasting venous plasma glucose level ≥ 7.0 mmol/L or Classical symptoms of thirst, polyuria and a casual venous plasma glucose ≥ 11.1 mmol/L.

Use additional code (Z86.3) if an endocrinopathy has been successfully eradicated.

Use additional external cause code (Chapter 20) to identify if drug-induced or chemical-induced.

★E09

▼0401

~~Impaired glucose regulation~~Intermediate hyperglycaemia

Includes: abnormal glucose (carbohydrate):

- regulation
- tolerance
- diabetes, chemical
- diabetes, latent
- impaired:
 - fasting glycaemia (IFG)
 - glucose (carbohydrate): ~~tolerance (IGT)~~
 - regulation (IGR)
 - tolerance (IGT)
- prediabetes

Use additional code for any underlying condition or associated genetic syndrome.

Excludes: diabetes mellitus (E10–E14)
elevated blood glucose level (R73)

⚙E09.2 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with kidney complication

▼1438

Use additional code to identify the presence of chronic kidney disease (N18.-)

⚙E09.21 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with incipient nephropathy

~~Impaired glucose regulation~~Intermediate hyperglycaemia with:

- chronic kidney disease:
 - stage 1
 - stage 2
- glomerular:
 - basement-membrane thickening
 - mesangial expansion
- incipient nephropathy (early)(mild)(reversible)
- microalbuminuria:
 - constant
 - persistent
- proteinuria (~~fixed~~)(persistent)
 - fixed
 - persistent
- tubulo-interstitial changes

⚙E09.29 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with other specified kidney complication

⚙E09.3 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with ophthalmic complication

⚙E09.31 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with background retinopathy

~~Impaired glucose regulation~~Intermediate hyperglycaemia with:

- retinal:
 - haemorrhages: (~~dot and blot~~)(~~flame shaped~~)
 - dot-and-blot
 - flame-shaped
 - hard exudates
 - microaneurysms
 - venous dilatation
- retinopathy NOS

Excludes: with any condition listed in E09.32

⚙E09.32 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with preproliferative retinopathy

~~Impaired glucose regulation~~Intermediate hyperglycaemia with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
 - cotton-wool spots
 - haemorrhages: (~~blotchy~~)(~~round~~)(~~small~~)
 - blotchy
 - round
 - small
 - ischaemia
 - venous:
 - beading
 - looping
 - reduplication

⚙E09.4 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with neurological complication

⚙E09.40 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with unspecified neuropathy

⚙E09.42 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with polyneuropathy

~~Impaired glucose regulation~~Intermediate hyperglycaemia with:

- peripheral neuropathy:
 - distal symmetrical
 - NOS
 - selective 'small fibre'
 - sensorimotor

★E09.5 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with peripheral angiopathy

★E09.51 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with peripheral angiopathy, without gangrene

★E09.52 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with peripheral angiopathy, with gangrene

★E09.7 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with multiple complications

★E09.71 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with multiple microvascular complications
Two or more of conditions classifiable to E09.2-, E09.3- or E09.4-

★E09.72 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with features of insulin resistance
~~Impaired glucose regulation~~Intermediate hyperglycaemia with one or more of the following features:

- acanthosis nigricans
- dyslipidaemia characterised by elevated fasting triglycerides or depressed HDL-cholesterol
- hyperinsulinism
- increased intra-abdominal visceral fat deposition
- insulin resistance NOS
- nonalcoholic fatty (change of) liver disease (NAFLD)
- nonalcoholic steatohepatitis (NASH)
- obesity (morbid)
- overweight

Note: Hypertension is a common disorder with a variety of causes and its attribution to insulin resistance is only accepted if accompanied with at least one of the features listed above.

★E09.8 ~~Impaired glucose regulation~~Intermediate hyperglycaemia with unspecified complication

★E09.9 ~~Impaired glucose regulation~~Intermediate hyperglycaemia without complication

E10 Type 1 diabetes mellitus

Includes: diabetes (mellitus):

- autoimmune
- brittle
- idiopathic
- insulin dependent [IDDM]
- juvenile-onset
- ketosis-prone

Excludes: diabetes mellitus (due to)(in):

- neonatal (P70.2)
- NOS (E14.-)
- other specified (E13.-)
- pregnancy, childbirth and the puerperium (O24.-)
- Type 2 (E11.-)

glycosuria:

- NOS (R81)
- renal (E74.8)

~~impaired glucose regulation~~intermediate hyperglycaemia (E09.-)
postprocedural hypoinsulinaemia (E89.1)

E10.2 Type 1 diabetes mellitus with kidney complication

▼1438

★E10.22 Type 1 diabetes mellitus with established diabetic nephropathy

Type 1 diabetes mellitus with:

- advanced kidney disease
- chronic kidney:
 - disease ≥ stage 3
 - failure
 - impairment
- end-stage kidney disease
- glomerulosclerosis:
 - diffuse

- intracapillary
- nodular
- Kimmelstiel-Wilson (disease)(lesion)
- macroalbuminuria
- nephropathy (advanced)(NOS)(progressive)
- nephrosis
- nephrotic syndrome
- proteinuria: (fixed)(persistent)
- fixed
- persistent

Use additional code to identify the presence of chronic kidney disease (N18.-)

E10.3

Type 1 diabetes mellitus with ophthalmic complication

☛E10.31 Type 1 diabetes mellitus with background retinopathy

Type 1 diabetes mellitus with:

- retinal:
 - haemorrhages: ~~(dot-and-blot)(flame-shaped)~~
 - dot-and-blot
 - flame-shaped
 - hard exudates
 - microaneurysms
 - venous dilatation
- retinopathy NOS

Excludes: with any condition listed in E10.32

☛E10.32 Type 1 diabetes mellitus with preproliferative retinopathy

Type 1 diabetes mellitus with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
 - cotton-wool spots
 - haemorrhages: ~~(blotchy)(round)(small)~~
 - blotchy
 - round
 - small
- ischaemia
- venous:
 - beading
 - looping
- reduplication

E10.4

Type 1 diabetes mellitus with neurological complication

☛E10.42 Type 1 diabetes mellitus with diabetic polyneuropathy

Type 1 diabetes mellitus with:

- diabetic neuropathic cachexia
- early onset diabetic neuropathy
- insulin neuritis
- peripheral neuropathy:
 - distal symmetrical
 - NOS
 - selective 'small fibre'
 - sensorimotor

Excludes: Type 1 diabetes mellitus with diabetic autonomic polyneuropathy (E10.43)

☛E10.43 Type 1 diabetes mellitus with diabetic autonomic neuropathy

Type 1 diabetes mellitus with:

- abnormal sweating (gustatory)
- diabetic autonomic polyneuropathy
- diabetic diarrhoea
- dysfunction:
 - anorectal
 - oesophageal
- erectile failure (impotence)

- gastroparesis
- hypotension:
 - orthostatic
 - postural
- hypotonia, bladder
- neuropathic oedema
- ~~postural hypotension~~

E10.5

Type 1 diabetes mellitus with circulatory complication

☛E10.53

Type 1 diabetes mellitus with diabetic cardiomyopathy
Type 1 diabetes mellitus with left ventricular diastolic dysfunction

E11

Type 2 diabetes mellitus

Includes: diabetes (mellitus)(nonobese)(obese):

- adult onset
- due to insulin secretory defect
- insulin resistant
- maturity onset
- nonketotic

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Excludes: diabetes mellitus (in):

- glycosuria:
 - NOS (R81)
 - renal (E74.8)
- maturity onset (of the young) (MODY) (E13.-)
- neonatal (P70.2)
- NOS (E14.-)
- other specified (E13.-)
- pregnancy, childbirth and the puerperium (O24.-)
- Type 1 (E10.-)
- ~~impaired glucose regulation~~intermediate hyperglycaemia (E09.-)
- postprocedural hypoinsulinaemia (E89.1)

E11.2

Type 2 diabetes mellitus with kidney complication

▼1438

☛E11.22

Type 2 diabetes mellitus with established diabetic nephropathy

Type 2 diabetes mellitus with:

- advanced kidney disease
- chronic kidney:
 - disease ≥ stage 3
 - failure
 - impairment
- end-stage kidney disease
- glomerulosclerosis:
 - diffuse
 - intracapillary
 - nodular
- Kimmelstiel-Wilson (disease)(lesion)
- macroalbuminuria
- nephropathy (advanced)(NOS)(progressive)
- nephrosis
- nephrotic syndrome
- ~~proteinuria (fixed)(persistent):~~
 - fixed
 - persistent

Use additional code to identify the presence of chronic kidney disease (N18.-)

E11.3 Type 2 diabetes mellitus with ophthalmic complication

☛E11.31 Type 2 diabetes mellitus with background retinopathy

Type 2 diabetes mellitus with:

- retinal:
 - haemorrhages: ~~(dot and blot)~~ ~~(flame-shaped)~~
 - dot-and-blot
 - flame-shaped
 - hard exudates
 - microaneurysms
 - venous dilatation
- retinopathy NOS

Excludes: that with any condition listed in E11.32

☛E11.32 Type 2 diabetes mellitus with preproliferative retinopathy

Type 2 diabetes mellitus with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
 - cotton-wool spots
 - haemorrhages: ~~(blotchy)~~ ~~(round)~~ ~~(small)~~
 - blotchy
 - round
 - small
 - ischaemia
 - venous:
 - beading
 - looping
 - reduplication

E11.4 Type 2 diabetes mellitus with neurological complication

☛E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy

Type 2 diabetes mellitus with:

- diabetic neuropathic cachexia
- early onset diabetic neuropathy
- insulin neuritis
- peripheral neuropathy:
 - distal symmetrical
 - NOS
 - selective 'small fibre'
 - sensorimotor

Excludes: Type 2 diabetes mellitus with diabetic autonomic polyneuropathy (E11.43)

☛E11.43 Type 2 diabetes mellitus with diabetic autonomic neuropathy

Type 2 diabetes mellitus with:

- abnormal sweating (gustatory)
- diabetic autonomic polyneuropathy
- diabetic diarrhoea
- dysfunction:
 - anorectal
 - oesophageal
- erectile failure (impotence)
- gastroparesis
- hypotension:
 - orthostatic
 - postural
- hypotonia, bladder
- neuropathic oedema
- ~~postural hypotension~~

E11.5 Type 2 diabetes mellitus with circulatory complication

☛E11.53 Type 2 diabetes mellitus with diabetic cardiomyopathy

Type 2 diabetes mellitus with left ventricular diastolic dysfunction

E13**Other specified diabetes mellitus**

- Includes:** diabetes mellitus (due to)(in)(secondary to)(with):
- drug-induced or chemical-induced
 - endocrinopathy
 - genetic defect of:
 - beta-cell function
 - insulin action
 - genetic syndrome
 - immune-mediated disease
 - infection
 - maturity onset of the young (MODY)
 - pancreatic exocrine disease

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Use additional code to identify any underlying condition or genetic syndrome.

- Excludes:** diabetes mellitus (in):
- neonatal (P70.2)
 - NOS (E14.-)
 - pregnancy, childbirth and the puerperium (O24.-)
 - Type 1 (E10.-)
 - Type 2 (E11.-)
- glycosuria:
- NOS (R81)
 - renal (E74.8)
- ~~impaired glucose regulation~~ intermediate hyperglycaemia (E09.-)

E13.2

▼ 1438

Other specified diabetes mellitus with kidney complication

✚E13.22 Other specified diabetes mellitus with established diabetic nephropathy

Diabetes mellitus NEC with:

- advanced kidney disease
- chronic kidney:
 - disease \geq stage 3
 - failure
 - impairment
- end-stage kidney disease
- glomerulosclerosis:
 - diffuse
 - intracapillary
 - nodular
- Kimmelstiel-Wilson (disease)(lesion)
- macroalbuminuria
- nephropathy (advanced)(NOS)(progressive)
- nephrosis
- nephrotic syndrome
- proteinuria (fixed)(persistent):
 - fixed
 - persistent

Use additional code to identify the presence of chronic kidney disease (N18.-)

E13.3**Other specified diabetes mellitus with ophthalmic complication**

✚E13.31 Other specified diabetes mellitus with background retinopathy

Diabetes mellitus NEC with:

- retinal:
 - haemorrhages: ~~(dot and blot)(flame-shaped)~~
 - dot-and-blot
 - flame-shaped
 - hard exudates
 - microaneurysms
 - venous dilatation

- retinopathy NOS

Excludes: that with any condition listed in E13.32

✧E13.32 Other specified diabetes mellitus with preproliferative retinopathy

Diabetes mellitus NEC with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
 - cotton-wool spots
 - haemorrhages: ~~(blotchy)(round)(small)~~
 - blotchy
 - round
 - small
- ischaemia
 - venous:
 - beading
 - looping
 - reduplication

E13.4

Other specified diabetes mellitus with neurological complication

✧E13.42 Other specified diabetes mellitus with diabetic polyneuropathy

Diabetes mellitus NEC with:

- diabetic neuropathic cachexia
- early onset diabetic neuropathy
- insulin neuritis
- peripheral neuropathy:
 - distal symmetrical
 - NOS
 - selective 'small fibre'
 - sensorimotor

Excludes: diabetes mellitus NEC with diabetic autonomic polyneuropathy (E13.43)

✧E13.43 Other specified diabetes mellitus with diabetic autonomic neuropathy

Diabetes mellitus NEC with:

- abnormal sweating (gustatory)
- diabetic autonomic polyneuropathy
- diabetic diarrhoea
- dysfunction:
 - anorectal
 - oesophageal
- erectile failure (impotence)
- gastroparesis
- hypotension:
 - orthostatic
 - postural
- hypotonia, bladder
- neuropathic oedema
- ~~postural hypotension~~

E13.5

Other specified diabetes mellitus with circulatory complication

✧E13.53 Other specified diabetes mellitus with diabetic cardiomyopathy

Diabetes mellitus NEC with left ventricular diastolic dysfunction

E14

Unspecified diabetes mellitus

Diabetes mellitus NOS

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Excludes: diabetes mellitus (in):

- neonatal (P70.2)
- noninsulin dependent (E11.-)
- pregnancy, childbirth and the puerperium (O24.-)
- Type 1 (E10.-)
- Type 2 (E11.-)

glycosuria:
 • NOS (R81)
 • renal (E74.8)
~~impaired glucose regulation~~
~~intermediate hyperglycaemia~~ (E09.-)
 postprocedural hypoinsulinaemia (E89.1)

E14.2

▼1438

Unspecified diabetes mellitus with kidney complication

⊕E14.22 Unspecified diabetes mellitus with established diabetic nephropathy

Diabetes mellitus NOS with:

- advanced kidney disease
- chronic kidney:
 - disease ≥ stage 3
 - failure
 - impairment
- end-stage kidney disease
- glomerulosclerosis:
 - diffuse
 - intracapillary
 - nodular
- Kimmelstiel-Wilson (disease)(lesion)
- macroalbuminuria
- nephropathy (advanced)(NOS)(progressive)
- nephrosis
- nephrotic syndrome
- ~~proteinuria (fixed)(persistent):~~
 - fixed
 - persistent

Use additional code to identify the presence of chronic kidney disease (N18.-)

E14.3

Unspecified diabetes mellitus with ophthalmic complication

⊕E14.31 Unspecified diabetes mellitus with background retinopathy

Diabetes mellitus NOS with:

- retinal:
 - ~~haemorrhages: (dot-and-blot)(flame-shaped)~~
 - dot-and-blot
 - flame-shaped
 - hard exudates
 - microaneurysms
 - venous dilatation
- retinopathy NOS

Excludes: that with any condition listed in E14.32

⊕E14.32 Unspecified diabetes mellitus with preproliferative retinopathy

Diabetes mellitus NOS with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
 - cotton-wool spots
 - ~~haemorrhages: (blotchy)(round)(small)~~
 - blotchy
 - round
 - small
 - ischaemia
 - venous:
 - beading
 - looping
 - reduplication

E14.4

Unspecified diabetes mellitus with neurological complication

⊕E14.42 Unspecified diabetes mellitus with diabetic polyneuropathy

Diabetes mellitus NOS with:

- diabetic neuropathic cachexia
- early onset diabetic neuropathy
- insulin neuritis
- peripheral neuropathy:
 - distal symmetrical
 - NOS
 - selective 'small fibre'
 - sensorimotor

Excludes: diabetes mellitus NOS with diabetic autonomic polyneuropathy (E14.43)

✧E14.43 Unspecified diabetes mellitus with diabetic autonomic neuropathy

Diabetes mellitus NOS with:

- abnormal sweating (gustatory)
- diabetic autonomic polyneuropathy
- diabetic diarrhoea
- dysfunction:
 - anorectal
 - oesophageal
- erectile failure (impotence)
- gastroparesis
- hypotension:
 - orthostatic
 - postural
- hypotonia, bladder
- neuropathic oedema
- ~~postural hypotension~~

E14.5 Unspecified diabetes mellitus with circulatory complication

✧E14.53 Unspecified diabetes mellitus with diabetic cardiomyopathy

Diabetes mellitus NOS with left ventricular diastolic dysfunction

OTHER MATERNAL DISORDERS PREDOMINANTLY RELATED TO PREGNANCY (O20–O29)

O24 Diabetes mellitus in pregnancy

▼0401

Includes: Diabetes diabetes mellitus } in childbirth and the puerperium
Impaired glucose regulation }
intermediate hyperglycaemia }

O24.0 Pre-existing diabetes mellitus, Type 1, in pregnancy

The following fifth character subdivisions are for use with subcategories O24.1–O24.9:

- ✧ 2 insulin treated
- ✧ 3 oral hypoglycaemic therapy
- ✧ 4 other
 - Diet
 - Exercise
 - Lifestyle management
- ★ 9 unspecified

Note: When multiple fifth characters apply, assign the one appearing highest on the list.

O24.4 Diabetes mellitus arising during pregnancy

Gestational diabetes mellitus NOS

Note: Diagnostic criteria is based on oral glucose tolerance test correctly conducted according to WHO guidelines (fasting venous plasma glucose ≥ 6.1 mmol/L or 2-hour post glucose venous plasma glucose ≥ 7.8 mmol/L).

✧O24.5 Pre-existing intermediate hyperglycaemia ~~impaired glucose regulation~~, in pregnancy

ABNORMAL FINDINGS ON EXAMINATION OF BLOOD, WITHOUT DIAGNOSIS (R70–R79)

R73

Elevated blood glucose level

Includes: hyperglycaemia, unspecified

Excludes: diabetes mellitus:

- in pregnancy, childbirth and the puerperium (O24.-)
- NOS (E10–E14)
- impaired glucose regulation
- intermediate hyperglycaemia (E09.-)
- neonatal disorders (P70.0–P70.2)
- postprocedural hypoinsulinaemia (E89.1)

FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

Z13

Special screening examination for other diseases and disorders

▼2111

Z13.1 Special screening examination for ~~impaired glucose regulation~~ intermediate hyperglycaemia and diabetes mellitus

AUSTRALIAN CODING STANDARDS

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

1. GENERAL CLASSIFICATION RULES FOR DM AND IH

Rule 1.	DM and IH should always be coded when documented (demonstrated in all examples).
Rule 2.	<p>The terms ‘diabetic’, ‘due to’ or ‘secondary to’ infer a causal relationship between the DM and other conditions. Where such terms are used check the Alphabetic Index for appropriate codes indexed directly under <i>Diabetes, diabetic</i> or appropriate codes indexed under the lead term for the condition with a subterm <i>diabetic</i> (see example 1).</p> <p>If there is not an appropriate direct ‘diabetic’ entry in the Alphabetic Index for the ‘diabetic’ term, then follow <i>Rule 3</i> and <i>Rule 4a</i> to assign a DM code.</p> <p>An additional code for the ‘other condition’ may be assigned following <i>Rule 4b</i> and <i>Rule 6</i>.</p>
Rule 3.	<p>The classification includes conditions (often termed ‘complications’) which occur commonly with DM or IH. These conditions may or may not have been a direct consequence of the metabolic disturbance and are indexed under <i>Diabetes, diabetic/with</i> or <i>Impaired, impairment, glucose regulation</i> <u><i>Hyperglycaemia/intermediate/with</i></u>. Always refer to these index entries to classify DM or IH (see examples 2-7).</p>
Rule 4a.	All complications of DM or IH classified to category E09–E14 should always be coded to reflect the severity of DM or IH (see examples 3-6).
Rule 4b.	Complications or conditions associated with DM or IH classified outside of category E09–E14 should only be coded when the condition meets the criteria in ACS 0001 <i>Principal diagnosis</i> or ACS 0002 <i>Additional diagnoses</i> (see examples 3 and 4).
Rule 5.	Where the classification (Alphabetic Index) has linked a condition with DM, yet a specific cause other than DM is documented as the cause of the condition, then a code for the causal condition should be sequenced before the DM code(s) (see examples 5 and 6).

Rule 6. Multiple coding (see ACS-0027) should not be used when the classification provides a combination code (see ACS 0015) for the DM or IH that clearly identifies all of the elements documented in the diagnosis (see examples 7 and 11).

2. SPECIFIC CLASSIFICATION PRINCIPLES FOR DM AND IH

Pregnancy and pre-existing DM and IH

DM or IH complicating pregnancy is classified to category O24 *Diabetes mellitus in pregnancy*:

- O24.0 *Pre-existing diabetes mellitus, Type 1, in pregnancy*
- O24.1- *Pre-existing diabetes mellitus, Type 2, in pregnancy*
- O24.2- *Pre-existing diabetes mellitus, other specified type, in pregnancy*
- O24.3- *Pre-existing diabetes mellitus, unspecified, in pregnancy*
- O24.5- *Pre-existing ~~impaired glucose regulation~~intermediate hyperglycaemia, in pregnancy*

These codes should be assigned where DM or IH **predates** the pregnancy.

Additional codes for complications of DM or IH should be assigned in accordance with *Rule 4a* and *Rule 4b*.

3. DM AND IH WITH FEATURES OF INSULIN RESISTANCE

Insulin resistance syndrome (metabolic syndrome or syndrome X) refers to a cluster of disorders which are often present together and may include DM or IH. The features of insulin resistance are most commonly associated with T2DM and are not characteristic of T1DM.

CLASSIFICATION

Assign E11.72, E13.72, E14.72 **Diabetes mellitus with features of insulin resistance* or E09.72 *~~Impaired glucose regulation~~Intermediate hyperglycaemia with features of insulin resistance*, as appropriate, when DM or IH is documented with one or more of the following also documented:

- acanthosis nigricans
- dyslipidaemia¹ characterised by:
 - elevated fasting triglycerides (≥ 1.7 mmol/L), or
 - depressed HDL-cholesterol (male ≤ 1.03 , female ≤ 1.29)
- hyperinsulinism
- increased intra-abdominal visceral fat deposition
- 'insulin resistance'
- nonalcoholic fatty (change of) liver disease (NAFLD), nonalcoholic steatohepatitis (NASH)
- obesity, morbid obesity, overweight

Note: Hypertension is a common disorder with a variety of causes and its attribution to insulin resistance is only accepted if accompanied with at least one of the features listed above. Therefore, documentation of DM with hypertension alone does not meet the criteria for assignment of E11.72, E13.72, E14.72 **Diabetes mellitus with features of insulin resistance* or E09.72 *~~Impaired glucose regulation~~Intermediate hyperglycaemia with features of insulin resistance*.

Additional codes for complications of DM or IH should be assigned in accordance with *Rule 4a* and *Rule 4b*.

¹ The terms 'hypercholesterolaemia', 'high cholesterol', 'hyperlipidaemia' or '↑ chol' are often used in the clinical record rather than the term 'dyslipidaemia'. When any of these terms are documented, the following guidelines should be followed to determine whether to assign E1-.72 ** Diabetes mellitus with features of insulin resistance* or E09.72 *~~Impaired glucose regulation~~Intermediate hyperglycaemia with features of insulin resistance*:

- If increased cholesterol is documented in the clinical record with documentation of either increased fasting triglycerides **or** decreased HDL this can be considered as 'dyslipidaemia' – **code to** E1-.72 or E09.72
- If there is no documentation of increased cholesterol but **both** increased fasting triglycerides and decreased

HDL are documented in the clinical record – **code to** E1-.72 or E09.72

- If increased cholesterol only is documented with no documentation of increased fasting triglycerides or decreased HDL – **do not code to** E1-.72 or E09.72

Test results can be used to confirm an already documented condition as per ACS 0010 *General abstraction guidelines/Test results*.

See Figure 1

EXAMPLE 8:
 Patient with Type 2 diabetes mellitus and obesity was admitted for laser treatment for retinopathy.

Principal diagnosis: E11.31 *Type 2 diabetes mellitus with background retinopathy*
 Additional diagnosis: E11.72 *Type 2 diabetes mellitus with features of insulin resistance*

In this example, follow the index pathway *Diabetes, diabetic, with, retinopathy* and assign E11.31 (*Rule 3* and *Rule 6*). The patient is also obese therefore the criteria for insulin resistance has been met and E11.72 is also assigned. The obesity (E66.9) is not coded as it has not met ACS 0002 *Additional diagnoses* (*Rule 4b*).

Figure 1 – Flowchart of criteria for assignment of E11.72, E13.72, E14.72 *Diabetes mellitus with features of insulin resistance or E09.72 ~~Impaired glucose regulation~~ Intermediate hyperglycaemia with features of insulin resistance

...

4. SPECIFIC MULTIPLE COMPLICATIONS IN DM AND IH

...

4.2 IH with multiple microvascular complications

CLASSIFICATION
 Assign E09.71 ~~Impaired glucose regulation~~ Intermediate hyperglycaemia with multiple microvascular complications when the individual has **conditions classifiable to two or more of the following three categories:**

1. Kidney complications (E09.2-)
2. Ophthalmic complications (E09.3-)
3. Neurological complications (E09.4-)

Additional codes for the specific complications of IH should be assigned in accordance with *Rule 4a* and *Rule 4b*.

...

6. DIABETIC FOOT

...

CLASSIFICATION
 Assign E1-.73 **Diabetes mellitus with foot ulcer due to multiple causes* when:

- ‘diabetic foot’ is documented in the clinical record, **or**
- the criteria above are met

Additional codes for the specific complications of DM or IH should be assigned in accordance with *Rule 4a* and *Rule 4b*.

Sequencing of codes for diabetic foot should be determined by:

- ACS 0001 Principal diagnosis, with particular attention to:
 - the “after study” principle
 - *Two or more interrelated conditions, each potentially meeting the definition for principal diagnosis*
 - *Two or more diagnoses that equally meet the definition for principal diagnosis*
- ACS 0002 Additional diagnoses.

EXAMPLE 10:
 Patient with neuropathic oedema and Type 2 diabetes mellitus was admitted for treatment of foot cellulitis.

Principal diagnosis: L03.11 *Cellulitis of lower limb*
 Additional diagnoses: E11.43 *Type 2 diabetes mellitus with diabetic autonomic neuropathy*
 E11.73 *Type 2 diabetes mellitus with foot ulcer due to multiple causes*

In this example, foot cellulitis is assigned as the principal diagnosis (L03.11) as it meets ACS 0001 *Principal diagnosis*. Neuropathic oedema (E11.43) is coded following *Rule 4a*. The combination of the foot cellulitis (L03.11—Category 1), the neuropathic oedema (E11.43—Category 2b) and the DM meets the criteria for coding ‘diabetic foot’, therefore, E11.73 is assigned as an additional code.

EXAMPLE 11:
 Patient with peripheral vascular disease and Type 2 diabetes mellitus was admitted for treatment of a left foot ulcer. The foot ulcer was treated with daily dressings.

Principal diagnosis: E11.73 *Type 2 diabetes mellitus with foot ulcer due to multiple causes*
 Additional diagnosis: E11.51 *Type 2 diabetes mellitus with peripheral angiopathy, without gangrene*

In this example, the foot ulcer (L97) is the principal diagnosis as it meets ACS 0001 *Principal diagnosis*. The combination of the foot ulcer (L97—Category 1), the peripheral vascular disease (E11.51—Category 2a) and the DM meets the criteria for coding ‘diabetic foot’, therefore, E11.73 is assigned. As E11.73 contains the concepts of both DM and foot ulcer, L97 is not required (*Rule 6*) and E11.73 is assigned as the principal diagnosis. Peripheral vascular disease (E11.51) is coded following *Rule 4a*.

EXAMPLE 12:
 Patient admitted for administration of intravenous antibiotics to treat cellulitis of toe. Patient also has peripheral vascular disease and Type 2 diabetes mellitus. The patient was on regular insulin medication.

Principal diagnosis: L03.02 *Cellulitis of toe*
 Additional diagnoses: E11.51 *Type 2 diabetes mellitus with peripheral angiopathy, without gangrene*
 E11.73 *Type 2 diabetes mellitus with foot ulcer due to multiple causes*
 Z92.22 *Personal history of long term (current) use of other medicaments, insulin*

In this example, toe cellulitis (L03.02) is assigned as the principal diagnosis as it meets ACS 0001 *Principal diagnosis*. Peripheral vascular disease is also coded (E11.51) (*Rule 4a*). The combination of cellulitis of the toe (L03.02—Category 1), peripheral vascular disease (E11.51—Category 2a) and DM meets the criteria for coding ‘diabetic foot’, therefore, E11.73 is assigned as an additional code. Z92.22 is assigned to reflect the patient’s regular use of insulin.

...
EXAMPLE 1310
 ...

EXAMPLE 1411
 ...

EXAMPLE 1512

1602 NEONATAL COMPLICATIONS OF MATERNAL DIABETES

Newborns with a diabetic mother sometimes experience a transient decrease in blood sugar which is usually attributable to the maternal condition. This diagnosis, code P70.1 *Syndrome of infant of a diabetic mother* or P70.0 *Syndrome of infant of mother with gestational diabetes*, should be confirmed by laboratory reports and clarified with the clinician (see also ACS 0401 *Diabetes mellitus and impaired glucose regulation/intermediate hyperglycaemia*).

4.5. Hepatogenous diabetes (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Diabetes, diabetic (controlled) (mellitus) E1-.9

- hand syndrome E1-.61
- hepatogenous E13.-
- hyperosmolarity (without coma) E1-.01

4.6. Hypophysis dysfunction (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Dysfunction

- hepatic K76.8
- hypophysis E23.37
- hypothalamic NEC E23.3

4.7. Obesity hypoventilation syndrome

A public submission was received regarding obesity hypoventilation syndrome (OHS), also historically described as the Pickwickian syndrome, which consists of the triad of obesity, sleep disordered breathing, and chronic hypercapnia during wakefulness in the absence of other known causes of hypercapnia. In response, an inclusion term for 'Obesity hypoventilation syndrome (OHS)' was included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hypoventilation R06.8

- syndrome
- - alveolar E66.2
- - obesity (OHS) E66.2
- - sleep G47.33

Obesity (simple) E66.9

- hypothyroid (*see also Hypothyroidism*) E03.9
- hypoventilation syndrome (OHS) E66.2
- morbid E66.8

Syndrome — *see also Disease*

- hypoventilation
- - alveolar E66.2
- - obesity (OHS) E66.2
- - sleep G47.33
- ...
- Nothnagel's H49.0
- obesity hypoventilation (OHS) E66.2
- obsession, obsessional F42.

TABULAR LIST OF DISEASES

E66

Obesity

- E66.2 Extreme obesity with alveolar hypoventilation
- Obesity hypoventilation syndrome (OHS)
- Pickwickian syndrome

4.8. Reopening, thyroid field wound (*Indexing*)

An indexing inconsistency was highlighted relating to the word 'field' in the index for reopening of thyroid wound. Consequently amendments have been made to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Aspiration

- testis (closed) (for collection of sperm) (percutaneous) 37605-01 [1177]
- - open 37606-01 [1178]
- thyroid (~~field~~)-(gland) 90047-00 [110]
- - postoperative 90047-01 [111]

Drainage

- abscess
- - appendiceal — see *Drainage/abscess/intra-abdominal*
- ...
- - subphrenic — see *Drainage/abscess/intra-abdominal*
- - thyroid (by incision) (~~field~~) (gland) 90047-01 [111]
- - - percutaneous (needle) 90047-00 [110]
- ...
- haematoma
- ...
- - spinal (canal) (epidural) (meninges) (subdural) 90031-00 [49]
- - thyroid (by incision) (~~field~~) (gland) 90047-01 [111]
- - - by aspiration (percutaneous) 90047-00 [110]
- ...
- thyroglossal tract (by incision) 90047-01 [111]
- - by aspiration (percutaneous) 90047-00 [110]
- thyroid (by incision) (~~field~~) (gland) 90047-01 [111]
- - by aspiration (percutaneous) 90047-00 [110]

Evacuation

- haematoma
- ...
- - spinal (canal) (epidural) (meninges) (subdural) 90031-00 [49]
- - thyroid (~~field~~)-(gland) (open) 90047-01 [111]
- - - percutaneous 90047-00 [110]

Examination — see also *Assessment*

- septum
- - nasal — see *Examination/nasal cavity*
- thyroid ~~field~~, postoperative 90047-02 [111]
- tympanic membrane (bilateral) 41650-01 [307]

Exploration — see also *Examination AND Incision/by site*

- thymus (field) 90045-00 [129]
- thyroid (by incision) (~~field~~)-(gland) 90047-01 [111]
- - postoperative 90047-02 [111]
- tooth root 97433-00 [463]

Incision

- thymus 90045-00 [129]
- thyroid (~~field~~)-(gland) 90047-01 [111]
- - postoperative 90047-02 [111]

Removal — see also *Excision*

- foreign body
- ...
- - tendon NEC 30068-00 [1559]
- - thyroid (by incision) (~~field~~) (gland) 90047-01 [111]
- - tonsils (by incision) 41779-00 [418]

Reopening — see also *Incision/by site*

- thoracotomy site (arrest of haemorrhage) 38656-01 [562]
- thyroid ~~field~~-wound (control of haemorrhage) (examination) (exploration) (removal of haematoma) 90047-02 [111]

Reoperation

- Thyroidotomy** (~~field~~)-(gland) NEC 90047-01 [111]
- postoperative 90047-02 [111]

4.9. Succinic semialdehyde dehydrogenase (SSADH) deficiency (*Indexing*)

Advice was published in Coding Q&A, December 2012, *Succinic semialdehyde dehydrogenase (SSADH) deficiency*, regarding the correct code assignment for this condition. The Alphabetic Index of ICD-10-AM Eighth Edition has been updated to support this advice.

ALPHABETIC INDEX OF DISEASES

Deficiency, deficient

- Stuart-Prower (factor X) D68.2
- succinic semialdehyde dehydrogenase (SSADH) E72.8
- sucrase E74.3

4.10. ACS 1426 Dialysis amyloid (Deleted)

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was agreed that the advice in ACS 1426 *Dialysis amyloid* could be incorporated into ICD-10-AM. Dialysis-related amyloidosis affects patients undergoing continuous peritoneal dialysis and long term haemodialysis.

The following amendments have been made to ICD-10-AM and ACS for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Amyloidosis (generalised) E85.9

- organ-limited E85.4

- peritoneal dialysis-associated E85.3

- Portuguese E85.1

...

- peritoneal Z49.2

-- amyloid, amyloidosis E85.3

-- preparatory care only (without treatment) Z49.0

Dialysis (intermittent) (treatment)

- adjustment of catheter Z49.0

- amyloid, amyloidosis E85.3

- extracorporeal Z49.1

Haemodialysis Z49.1

- amyloid, amyloidosis E85.3

- preparatory care only (without treatment) Z49.0

TABULAR LIST OF DISEASES

E85

Amyloidosis

E85.3

Secondary systemic amyloidosis

▼1426

Haemodialysis-associated amyloidosis

AUSTRALIAN CODING STANDARDS

SPECIALTY STANDARDS

14. Genitourinary system

...

1426 — Dialysis amyloid

1427 Hydrocele

~~1426 DIALYSIS AMYLOID~~

~~Dialysis amyloid (E85.3 Secondary systemic amyloidosis) is a specific form of amyloidosis due to the deposition in tissues of an amyloidogenic protein, β_2 microglobulin, which accumulates in kidney failure and becomes clinically significant after several years of dialysis treatment. The protein deposits preferentially in bones and in and around joints, particularly the shoulders, but may deposit in any tissue. This condition often produces a carpal tunnel syndrome due to deposition around the wrist which should also be coded if present. It may lead to progressive disability with reduced mobility and ultimately death.~~

5. Mental and behavioural disorders

5.1. Anhedonia (*Indexing*)

A public submission was received regarding the indexing of *anhedonia*, a condition defined by the Merriam-Webster dictionary as 'a psychological condition characterized by inability to experience pleasure in normally pleasurable acts' (2012). Anhedonia may also be part of numerous mental disorders including depression, schizophrenia and mood disorders. Amendments were made to the ICD-10-AM Tabular List and Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Angulus infectiosus (lips) K13.0

Anhedonia (~~sexual~~) F52.1R45.89

- sexual F52.1

Anhidrosis L74.4

TABULAR LIST OF DISEASES

R45.8 Other symptoms and signs involving emotional state

✶R45.89 Other symptoms and signs involving emotional state

Excludes: as part of a mental or behavioural disorder (F00–F99)

5.2. Dissociative versus dissociate disorders (*spelling inconsistency*)

An inconsistency was identified in the spelling of dissociate and dissociative in codes within category F44.8 *Other dissociative [conversion] disorder*. The following amendments were made to ICD-10-AM for Eighth Edition for consistency with the WHO ICD-10 Classification of Mental and Behavioural Disorders.

TABULAR LIST OF DISEASES

F44.8 Other dissociative [conversion] disorders

✶F44.82 Transient dissociative [conversion] disorders occurring in childhood and adolescence

5.3. Major depressive disorder (*Indexing*)

A public submission was received requesting the removal of the nonessential modifier 'major' in the index pathway for *Disorder depressive (major)* as it was inconsistent with the index pathway; *Depression/major (without psychotic symptoms)* F32.2-. Consequently, the following changes were made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Depression F32.9-

- major (without psychotic symptoms) F32.2-

- - with psychotic symptoms F32.3-

- - recurrent — see

Disorder/depressive/severe/recurrent

- manic-depressive — see
 Disorder/depressive/recurrent
- ...
- senile F03
- severe, single episode (*see also*
 Disorder/depressive/severe) F32.2-
- skull Q67.41

Disorder (of) — *see also Disease*

- depressive (~~major~~) (single episode) (*see also*
 Depression) F32.9-
- - major — *see Disorder/depressive/severe*
- - mild F32.0-
- ...
- - severe (without psychotic symptoms) F32.2-
- - - with psychotic symptoms F32.3-
- - - recurrent (without psychotic symptoms) F33.2
- - - - with psychotic symptoms F33.3

5.4. ACS 0505 *Mental illness complicating pregnancy*

Following a review of the codes assigned for spontaneous vertex deliveries, the following amendments have been made to ACS 0505 *Mental illness complicating pregnancy* for Eighth Edition.

AUSTRALIAN CODING STANDARDS

0505 MENTAL ILLNESS COMPLICATING PREGNANCY

CLASSIFICATION

A. Delivery or puerperal episode of care

Note: ACHI codes are not included in these examples.

EXAMPLE 1:

Patient delivered of a liveborn infant by spontaneous ~~vertex~~ vaginal delivery. Diagnosis was postnatal depression. Further qualification of this term was sought, yet not able to be provided.

Codes:	O80	<i>Single spontaneous delivery</i>
	F53.0	<i>Mild mental and behavioural disorders associated with the puerperium, not elsewhere classified</i>
	Z37.0	<i>Single live birth</i>
<hr/>		
	90467 00 [1336]	<i>Spontaneous vertex delivery (optional code)</i>

EXAMPLE 2:

Patient delivered of liveborn twins by elective lower segment caesarean section, under intravenous general anaesthetic, for malpresentation. During the next week she felt down and very tearful. A psychiatric consult diagnosed postpartum blues.

Codes:	O84.2	<i>Multiple delivery, all by caesarean section</i>
	O30.0	<i>Twin pregnancy</i>
	O32.5	<i>Maternal care for multiple gestation with malpresentation of one fetus or more</i>
	F53.8	<i>Other mental and behavioural disorders associated with the puerperium, not elsewhere classified</i>
	Z37.2	<i>Twins, both liveborn</i>
<hr/>		
	16520 02 [1340]	<i>Elective lower segment caesarean section</i>
	92514 99 [1910]	<i>General anaesthetic, ASA 9, nonemergency</i>

EXAMPLE 3:

Patient admitted at 36 weeks for bed rest and antidepressants for exacerbation of her major depression. During the same episode the patient delivered of a liveborn infant by spontaneous ~~vaginal~~ vertex delivery at 39 weeks.

Codes:	O99.3	<i>Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the puerperium</i>
--------	-------	--

F32.20	Severe depressive episode without psychotic symptoms, not specified as arising in the postnatal period
O80	Single spontaneous delivery
Z37.0	Single live birth
90467 00 [1336]	Spontaneous vertex delivery (optional code)

5.5. ACS 0511 Panic attacks with phobia (Deleted)

Following a general review of *Australian Coding Standards (ACS) Seventh Edition*, it was highlighted that the advice in ACS 0511 *Panic attacks with phobia* could be incorporated into ICD-10-AM, therefore the following amendments have been made to the ICD-10-AM Tabular List and ACS for Eighth Edition.

TABULAR LIST OF DISEASES

F40

Phobic anxiety disorders

▼9514

A group of disorders in which anxiety is evoked only, or predominantly, in certain well-defined situations that are not currently dangerous. As a result these situations are characteristically avoided or endured with dread. The patient's concern may be focused on individual symptoms like palpitations or feeling faint and is often associated with secondary fears of dying, losing control, or going mad. Contemplating entry to the phobic situation usually generates anticipatory anxiety. Phobic anxiety and depression often coexist. Whether two diagnoses, phobic anxiety and depressive episode, are needed, or only one, is determined by the time course of the two conditions and by therapeutic considerations at the time of consultation.

F40.0

Agoraphobia

A fairly well-defined cluster of phobias embracing fears of leaving home, entering shops, crowds and public places, or travelling alone in trains, buses or planes. Panic disorder is a frequent feature of both present and past episodes. Depressive and obsessional symptoms and social phobias are also commonly present as subsidiary features. Avoidance of the phobic situation is often prominent, and some agoraphobics experience little anxiety because they are able to avoid their phobic situations.

F40.1

Social phobias

Fear of scrutiny by other people leading to avoidance of social situations. More pervasive social phobias are usually associated with low self-esteem and fear of criticism. They may present as a complaint of blushing, hand tremor, nausea, or urgency of micturition, the patient sometimes being convinced that one of these secondary manifestations of their anxiety is the primary problem. Symptoms may progress to panic attacks.

Anthropophobia
Social neurosis

Use additional code (F41.0) to identify phobia with panic attacks (disorder), if applicable.

F40.2

Specific (isolated) phobias

Phobias restricted to highly specific situations such as proximity to particular animals, heights, thunder, darkness, flying, closed spaces, urinating or defecating in public toilets, eating certain foods, dentistry, or the sight of blood or injury. Though the triggering situation is discrete, contact with it can evoke panic as in agoraphobia or social phobia.

Acrophobia
Animal phobias
Claustrophobia
Simple phobia

Use additional code (F41.0) to identify phobia with panic attacks (disorder), if applicable.

Excludes: dysmorphophobia (nondelusional) (F45.2)
nosophobia (F45.2)

F40.8

Other phobic anxiety disorders

Use additional code (F41.0) to identify phobia with panic attacks (disorder), if applicable.

F40.9 Phobic anxiety disorder, unspecified
 Phobia NOS
 Phobic state NOS

Use additional code (F41.0) to identify phobia with panic attacks (disorder), if applicable.

F41

Other anxiety disorders

Disorders in which manifestation of anxiety is the major symptom and is not restricted to any particular environmental situation. Depressive and obsessional symptoms, and even some elements of phobic anxiety, may also be present, provided that they are clearly secondary or less severe.

F41.0 Panic disorder [episodic paroxysmal anxiety]

▼0511

The essential feature is recurrent attacks of severe anxiety (panic), which are not restricted to any particular situation or set of circumstances and are therefore unpredictable. As with other anxiety disorders, the dominant symptoms include sudden onset of palpitations, chest pain, choking sensations, dizziness, and feelings of unreality (depersonalisation or derealisation). There is often also a secondary fear of dying, losing control, or going mad. Panic disorder should not be given as the main diagnosis if the patient has a depressive disorder at the time the attacks start; in these circumstances the panic attacks are probably secondary to depression.

Panic:
 • attack
 • state

Code first the phobia (F40.1–F40.9) to identify phobia with panic attacks (disorder), if applicable.

Excludes: panic disorder with agoraphobia (F40.01)

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

5. Mental and behavioural disorders

...

0506 Adjustment/depressive reaction

0511 ~~Panic attacks with phobia~~

0512 Personality trait/disorder

~~0511 PANIC ATTACKS WITH PHOBIA~~

~~Both the panic attacks (F41.0 *Panic disorder [episodic paroxysmal anxiety]*) and the phobia should be coded, with the phobia (F40.) sequenced first.~~

~~**Note:** This standard excludes category F40.0 *Agoraphobia* which has fifth characters denoting with panic disorder (F40.01 *Agoraphobia with panic disorder*) and without panic disorder (F40.00 *Agoraphobia without mention of panic disorder*). All other phobias with panic attacks should be assigned two codes as above.~~

5.6. ACS 0517 Noncompliance with treatment (Deleted)

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was highlighted that the advice in ACS 0517 *Noncompliance with treatment* could be incorporated into ICD-10-AM as a note at code Z91.1 *Personal history of noncompliance with medical treatment and regimen*. It was also identified that Z91.1 should be assigned if it meets ACS 0002 *Additional diagnoses* for all episodes of care, not just mental and behavioural disorders, which is the chapter where ACS 0517 *Noncompliance with treatment* was located. The following changes have been made to the ICD-10-AM Tabular List and ACS for Eighth Edition.

TABULAR LIST OF DISEASES

Z91 Personal history of risk-factors, not elsewhere classified

Z91.1 Personal history of noncompliance with medical treatment and regimen

~~▼0517~~

Note: This code should only be used where noncompliance is a precipitating factor in an admission. It should not be used as a principal diagnosis.

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

5. Mental and behavioural disorders

...

0512 Personality trait/disorder

~~0517 Noncompliance with treatment~~

0520 Family history of mental illness

~~0517 NONCOMPLIANCE WITH TREATMENT~~

~~Z91.1 Personal history of noncompliance with medical treatment and regimen should be used where noncompliance is a precipitating factor in an admission. It should not be used as a principal diagnosis.~~

5.7. ACS 0533 *Electroconvulsive therapy*

It was noted that the concept of 'sessions' in the ECT standard could be inconsistently interpreted. The standard has been reworded to remove reference to separate courses, and instead focuses on the number of treatments being performed.

AUSTRALIAN CODING STANDARDS

0533 ELECTROCONVULSIVE THERAPY (ECT)

CLASSIFICATION

...

ACS 0031 *Anaesthesia* directs coders to assign one anaesthetic code for each visit to theatre. That is, an anaesthetic code is assigned as many times as performed. Therefore, when a patient undergoes 6 ~~separate sessions of ECT treatments~~, with each being performed under an intravenous general anaesthetic, the following codes apply:

EXAMPLE 1:

Patient had ~~two separate courses~~ one course of ECT with 6 (3 ECT treatments per course), all each performed under IV general anaesthetic, ~~during in the~~ during in the one episode of care.

Codes:	93341-06 [1907]	<i>Electroconvulsive therapy [ECT], 6 treatments</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>

6. Nervous system

6.1. Akathisia

A public submission was received regarding the spelling of *acathisia* and *akathisia*. Akathisia, also sometimes spelt acathisia, is a movement disorder characterised by a state of inner restlessness and a physical need to be moving constantly, and is often a side effect of certain drugs including neuroleptic agents, serotonin receptor antagonists, calcium channel blockers, lithium, L-dopa and phenothiazine antiemetics. Clinical advice clarified that the correct spelling is with a 'k'.

Additionally, clinical advice specified that regardless of its cause, akathisia should be classified to G25.8 *Other specified extrapyramidal and movement disorders*. The following changes have been made to the ICD-10-AM Tabular List and Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Acatalasaemia, acatalasia E80.3

Acathisia R25.8 — *see Akathisia*

— *due to drugs* G25.8

Accelerated atrioventricular conduction I45.6

Air

...

- sickness T75.3

Akathisia, treatment-induced G21.1 (*drug-induced*)
(*due to drugs*) (*treatment-induced*) G25.8

Akinesia R29.88

TABULAR LIST OF DISEASES

G25

Other extrapyramidal and movement disorders

G25.8 Other specified extrapyramidal and movement disorders

Akathisia (drug-induced) (treatment-induced)

Restless legs syndrome

Stiff-man syndrome

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

6.2. Charcot's arthropathy

Advice published by NCCH in *Coding Matters*, December 2007 (Vol. 14, No. 3) highlighted that the indexing of Charcot's arthropathy required updating. Charcot's arthropathy as a disease process was first described as a complication of syphilis in 1868, however in 1936 it was linked to diabetes and this is now considered to be the most common cause. The index entries for Charcot's arthropathy have been amended accordingly in ICD-10-AM for Eighth Edition, and the URC of WHO-FIC approved these changes to the Alphabetical Index of ICD-10 at the annual meeting in Brasilia in 2012.

ALPHABETIC INDEX OF DISEASES

Arthritis, arthritic (acute) (chronic) (subacute) M13.9-

- blennorrhagic (gonococcal) A54.4† M01.3-*

- Charcot's (*tabetic*) A52.1† M14.6* G98† M14.6*

— *diabetic* E1-.61

— *nonsyphilitic* NEC G98† M14.6*

— *syphilitic (tabetic)* A52.1† M14.6*

— *syringomyelic* G95.0† M49.4-*

...

- mycotic NEC B49† M01.6-*

- neuropathic (*tabetic*) A52.1† M14.6* G98† M14.6*

— *diabetic* E1-.61

— *nonsyphilitic* NEC G98† M14.6*

— *syphilitic (tabetic)* A52.1† M14.6*

— *syringomyelic* G95.0† M49.4-*

...

- syphilitic (late) A52.1† M01.3-*

— *Charcot's* A52.1† M14.6*

— *congenital* A50.5† M03.1-*

- syphilitica deformans (Charcot) A52.1† M14.6*

Arthropathy (see also *Arthritis*) M13.9-

- Charcot's (tabetic) A52.1† M14.6* G98† M14.6*
- - diabetic E1-.61
- - nonsyphilitic NEC G98† M14.6*
- - syphilitic (tabetic) A52.1† M14.6*
- - syringomyelic G95.0† M49.4-*

...

- neurogenic, neuropathic (tabetic) A52.1† M14.6* G98† M14.6*
- - diabetic E1-.61
- - nonsyphilitic NEC G98† M14.6*
- - syphilitic (tabetic) A52.1† M14.6*
- - syringomyelic G95.0† M49.4-*

Charcot's

- arthropathy (tabetic) A52.1† M14.6* G98† M14.6*
- - diabetic E1-.61

- - nonsyphilitic NEC G98† M14.6*
- - syphilitic (tabetic) A52.1† M14.6*
- - syringomyelic G95.0† M49.4-*
- cirrhosis K74.3

Diabetes, diabetic (controlled) (mellitus) E1-.9

- cataract E1-.36
- Charcot's arthropathy E1-.61
- cheiroarthropathy E1-.61

Disease, diseased — see also *Syndrome*

- joint M25.9-
- - Charcot's (tabetic) A52.1† M14.6* G98† M14.6*
- - - diabetic E1-.61
- - - nonsyphilitic NEC G98† M14.6*
- - - syphilitic (tabetic) A52.1† M14.6*
- - - syringomyelic G95.0† M49.4-*

6.3. Encephalitis and associated seizures

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

G04 Encephalitis, myelitis and encephalomyelitis

- G04.8 Other encephalitis, myelitis and encephalomyelitis
Postinfectious encephalitis and encephalomyelitis NOS

Use additional code to identify any associated epileptic seizures (G40.-).

6.4. Fat graft in spinal surgery

A DRG public submission was received regarding fat graft in spinal surgery. Fat graft technique has been applied to various spinal and posterior fossa surgeries to minimise adhesions. In some circumstances, a large fat graft is used to seal dural tears, or to repair postoperative CSF leaks that can occasionally occur during extradural spinal approaches for disc surgery or decompressive laminectomy. The fat is usually harvested locally without additional incisions. If a large fat graft is required, the fat may be obtained from the lateral thigh or from the abdominal wall. The following amendments have been made to the ACHI Tabular List for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

Refer section 6.6 Open door laminoplasty (page 117) for overlapping changes to blocks [46], [47] and [48].

20 Repair of dura of brain

- Dural (fat) graft
- Duraplasty
- Repair of cerebral meninges

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

Excludes: that with:

- intracranial decompression (40106-00, 40106-01 [9])
- plugging of obex (40339-00 [22])
- reduction of skull fracture (39612 [25])
- skull base surgery for lesion involving anterior cranial fossa (39640-00, 39642-00, 39646-00 [17])

46**Decompression of cervical spinal cord**

Decompressive laminectomy of cervical spine

Includes: bone graft
cervical discectomy
fat graft
that for spinal stenosis

Code also when performed:

- procurement of:
 - bone graft material through separate incision (47726-00 [1563])
 - fat for graft via separate incision (45018-04 [1666])
- rhizolysis (40330-00 [49])

40332-00 Decompression of cervical spinal cord with anterior fusion, 1 level

Includes: ~~bone graft~~
~~procurement of graft material through same incision~~

Code also when performed:

- internal fixation (48678-00, 48681-00, 48684-00 [1390])
- ~~procurement of graft material through separate incision (47726-00 [1563])~~

40335-00 Decompression of cervical spinal cord with anterior fusion, ≥ 2 levels

Includes: ~~bone graft~~
~~procurement of graft material through same incision~~

Code also when performed:

- internal fixation (48678-00, 48681-00, 48687-00, 48690-00 [1390])
- ~~procurement of graft material through separate incision (47726-00 [1563])~~

47**Decompression of thoracic and thoracolumbar spinal cord**

Includes: fat graft
~~that for spinal stenosis~~

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])
- rhizolysis (40330-00 [49])
- spinal fusion (48642-00, 48645-00, 48648-00, 48651-00, 48660-00, 48669-00 [1389])

48**Decompression of lumbar spinal canal**

Includes: decompression:

- anterior
- posterior

 discectomy
fat graft
laminectomy
that for spinal stenosis

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])
- rhizolysis (40330-00 [49])

Excludes: anterior decompression of thoracolumbar spinal cord (40351-00 [47])

49**Other incision procedures on spinal canal or spinal cord structures**

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

51**Discectomy for recurrent disc lesion**

Discectomy via:

- laminectomy }

- laminotomy } for recurrent disc lesion
- Excision of intervertebral disc }

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

Excludes: that with intervertebral disc prosthesis (see block [59])

52

Other discectomy

Excision of intervertebral disc

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

Excludes: discectomy for recurrent disc lesion (40303 [51])
laminectomy with insertion of cerebrospinal fluid shunt (40342-00 [42])
that with intervertebral disc prosthesis (see block [59])

55

Repair of spinal canal or spinal cord structures

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

1389

▼1348

Spinal fusion

Includes: bone graft
fat graft
procurement of graft material through same incision

Code also when performed:

- excision of vertebra (48639 [1383])
- internal fixation (48678-00, 48681-00, 48684-00, 48687-00, 48690-00 [1390])
- procurement of:
 - bone graft material through separate incision (47726-00 [1563])
 - fat for graft via separate incision (45018-04 [1666])
- ~~procurement of graft material through separate incision (47726-00 [1563])~~

1390

▼1348

Internal fixation of spine

Code also when performed:

- procurement of:
 - bone graft material through separate incision (47726-00 [1563])
 - fat for graft via separate incision (45018-04 [1666])
- ~~procurement of graft material through separate incision (47726-00 [1563])~~
- spinal fusion (see block [1389])

1393

▼1348

Other spinal procedures

Includes: fat graft

Code also when performed:

- procurement of fat for graft via separate incision (45018-04 [1666])

6.5. Injection into spinal nerve (*Indexing*)

A query was received regarding the coding of the administration of anaesthetic agent around spinal nerve roots, branch and plexus. Consequently, the following improvements have been made to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Administration (around) (of) — *see also Injection*

- nerve
- - spinal
- - - accessory (anaesthetic agent) 18250-00 [60]
- - - neurolytic agent 18290-00 [61]
- - - branch
- - - - anaesthetic agent — *see Administration/nerve/by site block [63]*
- - - - neurolytic agent 18292-00 [64]
- - - neurolytic agent NEC 18292-00 [64]
- - - plexus
- - - - anaesthetic agent — *see Administration/nerve/by site block [63]*
- - - - neurolytic agent 18292-00 [64]

Injection (around) (into) (of) — *see also Administration*

- spinal (canal)
- - nerve
- - - for sympathectomy — *see Administration/nerve/sympathetic*
- - - anaesthetic agent — *see Administration/nerve/spinal/by site*
- - - neurolytic agent 18292-00 [64]

6.6. Open door laminoplasty

A public submission was received querying the correct code assignment for 'open door' laminoplasty, performed for cervical stenosis with myelopathy. Coding advice was published in Coding Q&A, December 2011, *Open door laminoplasty*. Consequently the ACHI Tabular List and Alphabetic Index was updated for Eighth Edition to support this advice.

ALPHABETIC INDEX OF INTERVENTIONS

Laminectomy

- ...
- reopening of site
- - for postoperative complication (haemorrhage) (infection) 90009-00 [49]

Laminoplasty (open door) — *see Decompression/spinal*

Laminotomy

TABULAR LIST OF INTERVENTIONS

Refer section 6.4 Fat graft in spinal surgery (page 114) for overlapping changes to blocks [46], [47] and [48].

46

Decompression of cervical spinal cord

Decompressive laminectomy of cervical spine

Includes: cervical discectomy
laminoplasty (open door)
that for spinal stenosis

Code also when performed:

- rhizolysis (40330-00 [49])

47

Decompression of thoracic and thoracolumbar spinal cord

Includes: laminoplasty (open door)
that for spinal stenosis

Code also when performed:

- rhizolysis (40330-00 [49])
- spinal fusion (48642-00, 48645-00, 48648-00, 48651-00, 48660-00, 48669-00 [1389])

Decompression of lumbar spinal canal

Includes: decompression:

- anterior
- posterior
- discectomy
- laminectomy
- laminoplasty (open door)
- that for spinal stenosis

Code also when performed:

- rhizolysis (40330-00 [49])

Excludes: anterior decompression of thoracolumbar spinal cord (40351-00 [47])

6.7. Overnight oximetry

A public submission was received requesting a specific ACHI code for overnight oximetry. Overnight oximetry is a widely available screening tool used for obstructive sleep apnoea. It is an unattended sleep study and an alternative to attended (laboratory-based) polysomnography. It requires very little in the way of preparation and interpretation. Overnight oximetry involves placing an oximeter clip on the patient's finger overnight to monitor the heart rate and oxygen content of the blood, whereas polysomnography is a much more complex tool to fully evaluate sleep disordered breathing. It involves a laboratory technician monitoring the patient and environment during testing. In response, the following changes were made to the ACHI Tabular List and Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Investigation (of) NEC (see also *Test, testing*)

92204-00 [1866]

- sinus node function (electrophysiological study) 38209-00 [665]
- sleep apnoea, by 12203-00 [1828]
- - overnight oximetry 12203-01 [1828]
- - polysomnography 12203-00 [1828]
- syncope (electrophysiological study) 38209-00 [665]

Oversewing

...

- varices
- - gastric 30606-01 [972]

Oximetry, overnight 12203-01 [1828]

Oxygenation

Study

- sleep 92012-00 [1828]
- - for investigation of sleep apnoea, by 12203-00 [1828]
- - - overnight oximetry 12203-01 [1828]
- - - polysomnography 12203-00 [1828]
- spleen (nuclear medicine)

Test, testing (for) NEC (see also *Investigation*)

92204-00 [1866]

- sleep disorder function 92012-00 [1828]
- - multiple sleep latency test (MSLT) 92012-00 [1828]
- - sleep apnoea, by 12203-00 [1828]
- - - overnight oximetry 12203-01 [1828]
- - - polysomnography 12203-00 [1828]
- speech rollover 96045-00 [1837]

TABULAR LIST OF INTERVENTIONS**Sleep study**

12203-00 Polysomnography
Polysomnography for investigation of sleep apnoea

Note: ~~Sleep apnoea investigation~~ — Involves continuous monitoring of oxygen saturation and breathing using a multi-channel polygraph (polysomnogram), and recordings of EEG, EOG, submental EMG, anterior tibial respiratory movement, airflow, oxygen saturation and ECG

12203-01 Overnight oximetry
Overnight oximetry test for investigation of sleep apnoea and nocturnal hypoxia
Overnight oxygen saturation tracing

Excludes: that with polysomnography (12203-00 [1828])

92012-00 Other sleep disorder function tests
Multiple sleep latency test [MSLT]

6.8. Radiofrequency ablation of stellate ganglion (*Indexing*)

Advice published in *Coding Matters*, September 2009 (Vol. 16, No. 2), *Radiofrequency ablation of stellate ganglion* was incorporated into the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Division (freeing)

- nerve — *see also Sympathectomy*
- - for facet joint denervation (percutaneous)
- ...
- - peripheral 39324-01 [74]
- - - open (superficial) 39324-01 [74]
- - - - deep 39327-01 [74]
- - - percutaneous, by
- - - - cryoprobe 39323-01 [72]
- - - - - for facet joint denervation 39118-01 [72]
- - - - radiofrequency 39323-00 [72]
- - - - - for facet joint denervation 39118-00 [72]
- - - - - stellate ganglion 39323-00 [72]

- - - - - trigeminal ganglion (extracranial) 39109-00 [70]

Neurotomy

- peripheral 39324-01 [74]
- - open (superficial) 39324-01 [74]
- - - deep 39327-01 [74]
- - percutaneous, by
- - - cryoprobe 39323-01 [72]
- - - - for facet joint denervation 39118-01 [72]
- - - radiofrequency 39323-00 [72]
- - - - for facet joint denervation 39118-00 [72]
- - - - stellate ganglion 39323-00 [72]
- - - - trigeminal ganglion (extracranial) 39109-00 [70]

6.9. Rasmussen encephalitis or syndrome (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

- Encephalitis** (chronic) (haemorrhagic)
(idiopathic) (nonepidemic) (spurious)
(subacute) G04.9
- Powassan A84.8
- Rasmussen (subacute) G04.8
- Rio Bravo A85.8

Rash R21

- ...
- wandering, tongue K14.1

Rasmussen encephalitis or syndrome G04.8

Rasmussen's aneurysm (*see also*
Tuberculosis/pulmonary) A16.2

Syndrome — *see also Disease*

- Ramsay-Hunt (*see also Hunt's/disease or syndrome*)
B02.2† G53.0*
- - meaning dyssynergia cerebellaris myoclonica
G11.1
- Rasmussen (subacute) G04.8
- Raynaud's I73.0

6.10. Renal denervation for treatment-resistant hypertension (*Indexing*)

Public submissions were received regarding classification of *renal denervation for treatment-resistant hypertension*. Treatment-resistant hypertension is defined as persistent high blood pressure despite treatment with three antihypertensive agents of different classes. Renal denervation is a radiofrequency ablation technique developed by several Australian organisations for treatment resistant hypertension. The following amendments have been made to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Ablation

- nerve — *see also Neurotomy*
- - sympathetic, chemical — *see Administration/nerve/sympathetic*
- - - chemical — *see Administration/nerve/sympathetic*
- - - renal (artery), percutaneous, by radiofrequency (endovascular) (transluminal) 39323-00 [72]
- - uterosacral, laparoscopic (LUNA) 35638-14 [1299]
- placental vessels, endoscopic (fetoscopic) 90488-00 [1330]

Denervation

- facet
- - peripheral nerve, by
- - - cryoprobe (percutaneous) 39118-01 [72]
- - - radiofrequency (percutaneous) 39118-00 [72]
- - renal (artery), percutaneous, by radiofrequency (endovascular) (transluminal) 39323-00 [72]
- spinal facet

6.11. Sacral nerve stimulation

The MBS introduced new item numbers for sacral nerve stimulation (SNS) procedures for urinary conditions. Stimulation of peripheral or sacral nerves can be performed for a variety of medical conditions including faecal incontinence, urinary conditions or intractable chronic pelvic pain. As a result, new codes were created for SNS regardless of the target organ/condition, with the following amendments to the ACHI Tabular List and Alphabetic Index and ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Adjustment

- electrode(s) (for)
- ...
- - peripheral nerve NEC 39131-01 [67]
- - sacral nerve 32215-00-36665-00 [94067]
- - spinal — *see Adjustment/electrode(s)/epidural*

Insertion

- electrode(s) lead(s)
- ...
- - peripheral nerve NEC 39138-00 [67]
- - sacral nerve 32213-00-36663-00 [94067]
- - scalp, fetal (for monitoring) 16514-00 [1341]

Removal — *see also Excision*

- electrode(s) lead(s)
- ...
- - peripheral nerve NEC 39136-02 [67]
- - sacral nerve 32218-00-36667-00 [94067]

- - spinal — *see Removal/electrode(s) lead(s)/epidural*

Replacement

- electrode(s) lead(s)
- - cardiac (for)
- ...
- - intracranial
- - - via
- - - - burr holes 40709-03 [6]
- - - - craniotomy 40712-03 [6]
- - peripheral nerve NEC 39137-01 [67]
- - sacral nerve 32216-00-36664-00 [94067]

Revision (partial) (total)

- electrode(s) (for)
- ...
- - peripheral nerve NEC 39131-01 [67]
- - sacral nerve 32215-00-36665-00 [94067]
- - spinal — *see Revision/electrode(s)/epidural*

TABULAR LIST OF INTERVENTIONS

67

Insertion, replacement or removal of peripheral nerve electrodes

36663-00 Insertion of sacral nerve electrodes

Includes: intraoperative test stimulation

Code also when performed:

- insertion of neurostimulator (39134-01 [1604])

Excludes: that with replacement (36664-00 [67])

36665-00 Adjustment of sacral nerve electrodes

Revision of sacral nerve electrodes

36664-00 Replacement of sacral nerve electrodes

- Includes:*** intraoperative test stimulation
- 36667-00 Removal of sacral nerve electrodes
- Excludes:*** that with replacement (36664-00 [67])
- 39138-00 Insertion of other peripheral nerve electrodes
- Includes:*** intraoperative test stimulation
- Excludes:*** that with replacement (39137-01 [67])
- 39131-01 Adjustment of other peripheral nerve electrodes
Revision of other peripheral nerve electrodes
- 39137-01 Replacement of other peripheral nerve electrodes
- Includes:*** intraoperative test stimulation
- 39136-02 Removal of other peripheral nerve electrodes
- Excludes:*** that with replacement (39137-01 [67])

940 Other repair procedures on rectum or anus

- ~~32213-00 Insertion of sacral nerve electrodes~~
- Includes:*** intraoperative test stimulation
- ~~*Code also when performed:*~~
- ~~• insertion of neurostimulator (39134-01 [1604])~~
- ~~32215-00 Adjustment of sacral nerve electrodes~~
~~Revision of sacral nerve electrodes~~
- ~~32216-00 Replacement of sacral nerve electrodes~~
- Includes:*** intraoperative test stimulation
- ~~32218-00 Removal of sacral nerve electrodes~~

1604 Other application, insertion or removal procedures on skin and subcutaneous tissue

- 39134-01 Insertion of subcutaneously implanted neurostimulator
- Code also when performed:*
- insertion of electrodes:
 - epidural (39130-00, 39139-00 [43])
 - intracranial (40709-00, 40712-00 [6])
 - peripheral NEC (39138-00 [67])
 - sacral (~~32213-00~~36663-00 [94067])
- 39135-00 Removal of subcutaneously implanted neurostimulator
- Code also when performed:*
- removal of electrodes:
 - epidural (39136-01 [43])
 - intracranial (40709-01, 40712-01 [6])
 - peripheral NEC (39136-02 [67])
 - sacral (~~32218-00~~36667-00 [94067])

AUSTRALIAN CODING STANDARDS

0630 QUADRIPLEGIC HAND SURGERY

These procedures are being carried out in special units on a trial basis. They involve utilisation of active myotomes by forearm reconstruction. The most common reconstruction is transfer of deltoid-triceps muscles, involving the use of a Dacron graft. Implantation of motorised nerve stimulators can also be

performed. Assign codes for each individual procedure performed, the following codes being a general guide:

47966-01 [1573]	<i>Transfer of muscle, not elsewhere classified</i>
39134-01 [1604]	<i>Insertion of subcutaneously implanted neurostimulator</i>
39138-00 [67]	<i>Insertion of <u>other</u> peripheral nerve electrodes</i>

6.12. Supranuclear palsy

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Palsy (see also *Paralysis*) G83.9

- bulbar (chronic) (progressive) G12.2

- - of childhood (Fazio-Londe) G12.1

- - pseudo- NEC G12.2

- ~~supranuclear~~ NEC G12.2

- cerebral (congenital) G80.9

...

- shaking (see also *Parkinsonism*) G20

- supranuclear (progressive) G23.1

- ulnar nerve (tardy) G56.2

Paralysis, paralytic (complete) (incomplete) (see also *Paresis*) G83.9

- bulbar (chronic) (progressive) G12.2

- - infantile (see also *Poliomyelitis/paralytic*) A80.3

- - poliomyelitic (see also *Poliomyelitis/paralytic*) A80.3

- - pseudo- G12.2

- ~~supranuclear~~ G12.2

- cardiac I46.9

...

- progressive (atrophic) (bulbar) (spinal) G12.2

- - general A52.1

- - infantile acute (see also *Poliomyelitis/paralytic*) A80.3

- - supranuclear G23.1

- pseudobulbar G12.2

...

- stroke (current episode) I64

- supranuclear (progressive) G12.2 G23.1

- sympathetic G90.8

TABULAR LIST OF DISEASES

G23

Other degenerative diseases of basal ganglia

G23.1 Progressive supranuclear ophthalmoplegia [Steele-Richardson-Olszewski]
Progressive supranuclear palsy

6.13. ACS 0612 Skull base surgery (Deleted)

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was highlighted that the advice in ACS 0612 *Skull base surgery* could be incorporated intoACHI. Consequently the following amendments have been made toACHI for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Clearance

- lesion extension (skull base surgery)

- - orbital fossa 39646-00 [17]

Craniotomy

- for

- - decompression of intracranial tumour (with osteoplastic flap) 39706-01 [9]

- - delayed repair of dura following fractured skull 39615-01 [20]

- - dural repair 39615-01 [20]

- - removal of lesion (tumour) involving anterior fossa (skull base surgery) 39640-00 [17]

- - - with clearance of paranasal sinus extension 39642-00 [17]

Decompression

- nerve

- - cranial (intracranial) 39112-00 [75]
- - - with exploration of auditory meatus or canal (internal) 41599-00 [310]
- - - facial 41569-00 [75]
- - - - with partial resection of temporal bone 41584-01 [324]
- - - optic (intracranial) 39112-00 [75]
- - - - with removal of lesion (tumour) involving anterior cranial fossa (skull base surgery) 39646-00 [17]
- - - - sheath 42548-00 [69]
- - facial (intracranial) 41569-00 [75]
- ...
- - optic (intracranial) 39112-00 [75]
- - - with removal of lesion (tumour) involving anterior cranial fossa (skull base surgery) 39646-00 [17]
- - - sheath 42548-00 [69]
- - peripheral 39330-00 [77]

Division (freeing)

- zygomatic arch

- - with removal of lesion (tumour) involving middle cranial and infratemporal fossae (skull base surgery) 39650-00 [17]

Excision — see also Removal

- lesion(s)

- ...
- - intracranial 39712-04 [15]
- - - anterior cranial fossa (skull base surgery) 39640-00 [17]
- - - - with clearance of
- ...
- - - cerebrum 39709-00 [15]
- - - clivus (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
- - - infratemporal fossa (skull base surgery) 41581-00 [17]
- - - - and middle cranial fossa 39650-00 [17]
- - - petroclivus and clivus (skull base surgery) (supra and infratentorial approach) 39653-00 [17]
- - - pineal body 39712-01 [122]
- - - posterior cranial fossa (skull base surgery) (translabyrinth, transmastoid and transoral approach) 90032-00 [17]
- - intranasal NEC 90131-00 [377]
- ...
- - tumour
- - brain — see *Excision/tumour/intracranial*
- ...
- - cardiac — see *Excision/tumour/heart*
- - cavernous sinus (skull base surgery) (vascular) (with intracranial carotid artery exposure) 39660-02 [17]
- - cerebellopontine angle 41575-00 [15]
- ...
- - cholesteatoma — see *Clearance/cholesteatoma*
- - clivus (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
- - - and petroclival (infratentorial and supratentorial approach) 39653-00 [17]
- - common bile duct 30458-02 [968]
- ...
- - foramen magnum (far lateral suboccipital and transcondylar approach) (skull base surgery) (vascular) 39662-02 [17]

- - glomus (middle ear)

- ...
- - intracranial 39712-04 [15]
- - - anterior cranial fossa (skull base surgery) 39640-00 [17]
- - - - with clearance of paranasal sinus extension 39642-00 [17]
- - - - and clearance of orbital fossa extension 39646-00 [17]
- - - brain stem 39709-01 [15]
- - - cavernous sinus (skull base surgery) (vascular) (with intracranial carotid artery exposure) 39660-02 [17]
- - - cerebellopontine angle 41575-00 [15]
- - - cerebellum 39709-02 [15]
- - - cerebral meninges 39712-00 [15]
- - - cerebrum 39709-00 [15]
- - - clival (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
- - - - with petroclival tumour (supra and infratentorial approach) 39653-00 [17]
- - - foramen magnum (far lateral suboccipital and transcondylar approach) (skull base surgery) (vascular) 39662-02 [17]
- - - infratemporal fossa (skull base surgery) 41581-00 [17]
- - - - and middle cranial fossa 39650-00 [17]
- - - intraventricular (cerebral) 39712-03 [15]
- - - meninges 39712-00 [15]
- - - middle cranial and infratemporal fossae (skull base surgery) 39650-00 [17]
- - - petroclival and clival tumour (skull base surgery) (supra and infratentorial approach) 39653-00 [17]
- - - pineal body 39712-01 [122]
- - - posterior cranial fossa (skull base surgery) (translabyrinth, transmastoid and transoral approach) 90032-00 [17]
- - intranasal, via lateral rhinotomy 41728-00 [377]
- ...
- - petroclival and clival (infratentorial and supratentorial approach) (skull base surgery) 39653-00 [17]
- - pineal body 39712-01 [122]

Reconstruction

- zygoma (arch) 90683-00 [1715]
- - for correction of Treacher Collins syndrome 45773-00 [1711]
- - with removal of lesion (tumour) involving middle cranial and infratemporal fossae (skull base surgery) 39650-00 [17]
- - and glenoid fossa and temporal bone 45788-00 [1717]

Repair

- dura (brain) 39615-00 [20]
- - with
- - - decompression for
- ...
- - - removal of lesion (tumour) involving anterior cranial fossa (skull base surgery) 39640-00 [17]
- - - - with clearance of paranasal sinus extension 39642-00 [17]

Resection — see also Excision

- lesion — see also *Resection/tumour*
- - bladder — see *Resection/bladder/lesion*
- ...

- - intracranial
 - - - anterior cranial fossa (skull base surgery) 39640-00 [17]
 - ...
 - - - cerebrum 39709-00 [15]
 - - - clivus (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
 - - - infratemporal fossa (skull base surgery) 41581-00 [17]
 - - - - and middle cranial fossa 39650-00 [17]
 - - - petroclivus and clivus (skull base surgery) (supra and infratentorial approach) 39653-00 [17]
 - - - pineal body 39712-01 [122]
 - - - posterior cranial fossa (skull base surgery) (translabyrinth, transmastoid and transoral approach) 90032-00 [17]
 - - intraventricular 39712-03 [15]
 - ...
 - tumour
 - ...
 - - cavernous sinus (skull base surgery) (vascular) (with intracranial carotid artery exposure) 39660-02 [17]
 - ...
 - - cerebrum 39709-00 [15]
 - - clivus (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
 - - - and petroclival (infratentorial and supratentorial approach) 39653-00 [17]
 - - craniocervical junction 40315-00 [59]
 - ...
 - - foramen magnum (far lateral suboccipital and transcondylar approach) (skull base surgery) (vascular) 39662-02 [17]
 - - intracranial 39712-04 [15]
 - - - anterior cranial fossa (skull base surgery) 39640-00 [17]
 - - - - with clearance of paranasal sinus extension 39642-00 [17]
 - - - - and clearance of orbital fossa extension 39646-00 [17]
 - - - brain stem 39709-01 [15]
 - - - cavernous sinus (skull base surgery) (vascular) (with intracranial carotid artery exposure) 39660-02 [17]
 - ...
 - - - cerebrum 39709-00 [15]
 - - - clival (skull base surgery) (transmaxillary and transoral approach) 39658-00 [17]
 - - - - with petroclival tumour (supra and infratentorial approach) 39653-00 [17]
 - - - foramen magnum (far lateral suboccipital and transcondylar approach) (skull base surgery) (vascular) 39662-02 [17]
 - - - infratemporal fossa (skull base surgery) 41581-00 [17]
 - - - - and middle cranial fossa 39650-00 [17]
 - - - intraventricular (cerebral) 39712-03 [15]
 - - - meninges 39712-00 [15]
 - - - middle cranial and infratemporal fossae (skull base surgery) 39650-00 [17]
 - - - petroclival and clival tumour (skull base surgery) (supra and infratentorial approach) 39653-00 [17]
 - - - pineal body 39712-01 [122]
 - - - posterior cranial fossa (skull base surgery) (translabyrinth, transmastoid and transoral approach) 90032-00 [17]
 - - intraventricular (cerebral) 39712-03 [15]
 - ...
 - - neuroblastoma — see *Excision/tumour/nerve/neuroblastoma*
 - - petroclival and clival (infratentorial and supratentorial) (skull base surgery) 39653-00 [17]
 - - pineal body 39712-01 [122]
- Rhinotomy**
- lateral
 - - with excision of lesion (tumour)
 - - - intranasal 41728-00 [377]
 - - - involving anterior cranial fossa (skull base surgery) 39640-00 [17]
 - - - with clearance of paranasal sinus extension 39642-00 [17]

TABULAR LIST OF DISEASES

10 Postoperative reopening of craniotomy or craniectomy site

39721-00 Postoperative reopening of craniotomy or craniectomy site

▼0039, 0642

Decompression of oedema	—	} postoperative
Drainage of:		}
• haemorrhage		}
• infection		} postoperative
Removal of:		}
• abscess		}
• haematoma		}

Includes: removal of skull flap
that via osteoplastic flap

17 Skull base surgery for lesion

▼0642

Includes: any associated reparative or reconstructive surgery
that for vascular lesions

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

6. Nervous system

0604 Stroke

0605 Stroke extension

0612 ~~Skull base surgery~~

0625 Quadriplegia and paraplegia, nontraumatic

0612 ~~SKULL BASE SURGERY~~

~~The surgical management of lesions (such as glomus jugulare, meningioma, fibrosarcoma, fibrous dysplasia) involving the skull base (base of anterior, middle and posterior fossae) often requires the skills of several neurosurgeons or a number of surgeons from different specialties working together or in tandem during the operative session.~~

~~These procedures involve craniotomy, retraction of the brain, isolation and resection of tumour and often bony reconstruction.~~

~~To avoid serious infections such as osteomyelitis and/or meningitis, these procedures are usually not staged because of the need for definitive closure of the dura, subcutaneous tissues and skin.~~

7. Eye and adnexa

7.1. Avastin® injection for parafoveal telangiectasia

Advice was published in *Coding Matters*, June 2009 (Vol. 16, No. 1), *Parafoveal telangiectasia* regarding the correct code for treatment by Avastin® injection into retinal blood vessels. Consequently indexing improvements were incorporated into the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Injection (around) (into) (of) — see also *Administration*

- telangiectasis

- - eye (posterior chamber) (retina) 42740-03 [209]

- - head 30213-01 [742]

7.2. Descemet's stripping endothelial keratoplasty (DSEK)

Advice was published in *Coding Matters*, September 2009 (Vol 16, No 2), *Descmet's stripping endothelial keratoplasty* (DSEK) regarding the correct code for this intervention. Consequently amendments were made to ACHI for Eighth Edition.

Spelling of *Descmet's* was amended to *Descemet's* as this is the name of the basement membrane that lies between the stroma and endothelial layer of the cornea, and is also the spelling used in published text such as *Ophthalmology*, Third edition by Yanoff and Duker (2008) and other journal articles.

ALPHABETIC INDEX OF INTERVENTIONS

Deroofing

- cyst

- - renal (open) 36558-01 [1055]

- - - via laparoscopy (closed) 36558-00 [1055]

Descemet's stripping endothelial keratoplasty (DSEK) 90064-00 [173]

Desensitising procedure, dental 97165-01 [455]

DSA (digital subtraction angiography) — see *Angiography/by/digital subtraction technique*

DSEK (Descemet's stripping endothelial keratoplasty) 90064-00 [173]

Ductography

Keratoplasty 90064-00 [173]

- endothelial (Descemet's) (DSEK) 90064-00 [173]

- full thickness 42653-00 [173]

TABULAR LIST OF INTERVENTIONS

173

Keratoplasty

90064-00 Other keratoplasty
Endothelial keratoplasty
Keratoplasty NOS

7.3. Quadrant anopia (*Indexing*)

A public submission was received noting that 'Quadrant anopia' is often associated with stroke, however not easily accessed in the Alphabetic Index. The following improvements have been made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Anophthalmos, anophthalmus (congenital) (globe)
Q11.1
- acquired Z90.0
Anopia, anopsia, quadrant H53.4
Anorchia, anorchism, anorchidism Q55.00

Q fever A78
- with pneumonia A78† J17.8*
Quadrant anopia, anopsia H53.4
Quadricuspid aortic valve Q23.89

7.4. Repair, laceration, cornea (*Indexing*)

It was highlighted that the ACHI Alphabetic Index was inconsistent with respect to the repair of lacerated cornea. Consequently, amendments were made to the ACHI Alphabetic Index for Eighth Edition to differentiate between repair of lacerated cornea (only) and repair of lacerated cornea with perforating wound of eyeball.

ALPHABETIC INDEX OF INTERVENTIONS

Repair

- cornea, corneal (laceration) NEC 90066-00 [174]
- - by transplant (graft) — see *Keratoplasty*
- - for postoperative wound dehiscence 42857-00 [163]
- - - with excision of prolapsed iris 42857-01 [163]
- laceration 42551-00 [162]
- - -with
- - -conjunctival flap 42632-00 [174]
- - -repair of eyeball wound (perforating) 42551-00 [162]
- - -involving suture of sclera 42551-02 [162]
- - -sealing (glue) (tissue adhesive) 42635-00 [174]
- crown (direct) 97659-00 [472]
...
- laceration
- - conjunctiva 42632-02 [255]
- - - with repair of sclera 42551-01 [162]
- - - and cornea 42551-02 [162]

- - cornea 42551-00 [162] — see *Repair/cornea, corneal*
- - -for postoperative wound dehiscence 42857-00 [163]
- - -with excision of prolapsed iris 42857-01 [163]
- - -with
- - -conjunctival flap 42632-00 [174]
- - -repair of wound of eyeball (perforated) (with suture) 42551-00 [162]
- - -involving suture of sclera 42551-02 [162]
- - -sealing (glue) (tissue adhesive) 42635-00 [174]
- - ear (external) 30052-00 [304]

Suture (laceration)

- common bile duct 30472-01 [971]
- cornea 42551-00 [162] NEC 90066-00 [174]
- - for postoperative wound dehiscence 42857-00 [163]

7.5. Telangiectasia, eye (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Telangiectasia, telangiectasis (verrucous) I78.1
- haemorrhagic, hereditary (congenital) (senile) I78.0
- juxtafoveal H35.0
- macular H35.0
- parafoveal H35.0
- periungual E1-.62
- retinal (idiopathic) (juxtafoveal) (macular) (parafoveal) H35.0
- spider I78.1

7.6. ACS 0723 Corneal rust ring (Deleted)

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was highlighted that the advice in ACS 0723 *Corneal rust ring* could be incorporated into ICD-10-AM. Consequently, the following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Cornea, corneal — *see also condition*

- plana Q13.49
- rust ring H18.0

Cornelia de Lange syndrome Q87.12

Ring(s)

- contraction, complicating delivery O62.4
- - affecting fetus or newborn P03.6
- cornea, corneal rust H18.0
- Fleischer's (cornea) H18.0

TABULAR LIST OF DISEASES

H18 Other disorders of cornea

H18.0 Corneal pigmentations and deposits
Haematomcornea
Kayser-Fleischer ring
Krukenberg's spindle
Staepli's line

Use additional codes (T90.4 and Y85–Y89) to identify corneal rust ring.

Use additional external cause code (Chapter 20) to identify drug, if drug-induced.

T90 Sequelae of injuries of head

T90.4 Sequelae of injury of eye and orbit
▼0723 Sequelae of injury classifiable to S05.-

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

7. Eye and adnexa

0701 Cataract
0723 ~~Corneal rust ring~~
0724 Corneal calcium chelation

~~0723 CORNEAL RUST RING~~

~~Corneal rust ring should be coded to H18.0 Corneal pigmentations and deposits and T90.4 Sequelae of injury of eye and orbit, along with an appropriate external cause code (Y85–Y89).~~

7.7. ACS 0742 Orbital and periorbital cellulitis (New)

A review of ACS 1210 *Cellulitis* identified that a specialty standard for code assignment for cellulitis in open wounds and ulcers was unnecessary, as the guidelines in ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses* are sufficient.

The information regarding orbital and periorbital cellulitis in ACS 1210 *Cellulitis* was retained in a newly created standard in ACS Chapter 7 *Eye and Adnexa*, with the following amendments to ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

H00 Hordeolum and chalazion

H00.0 Hordeolum and other deep inflammation of eyelid
▼42400742 Abscess } of eyelid
 Furuncle }
 Style

H05 Disorders of orbit

H05.0 Acute inflammation of orbit
▼42400742 Abscess }
 Cellulitis }
 Osteomyelitis } of orbit
 Periostitis }
 Tenonitis }

L03 Cellulitis

▼4240

Includes: acute lymphangitis

Excludes: cellulitis of:
• anal and rectal regions (K61.-)
• external auditory canal (H60.1)
• external genital organs:
 • female (N76.4)
 • male (N48.2, N49.-)
• eyelid (H00.0)
• lacrimal apparatus (H04.3)
• mouth (K12.2)
• nose (J34.0)
eosinophilic cellulitis [Wells] (L98.3)
febrile neutrophilic dermatosis [Sweet] (L98.2)
lymphangitis (chronic)(subacute) (I89.1)

L03.2 Cellulitis of face
▼42400742 Periorbital cellulitis

Use additional code to identify eyelid involvement (H00.0).

AUSTRALIAN CODING STANDARD

TABLE OF CONTENTS SPECIALTY STANDARDS

7. Eye and adnexa

...

0741 Ectropion/Entropion

0742 Orbital and periorbital cellulitis

12. Skin and subcutaneous tissue

...

1210 Cellulitis

1216 Craniofacial surgery

0742 ORBITAL AND PERIORBITAL CELLULITIS

It is important to identify the distinction between orbital and periorbital cellulitis as the two conditions and the code assignments are different.

The diagnosis of orbital cellulitis should be used when there is actual inflammation of the soft tissues of the orbital cavity which may spread to involve the eye. This is a very serious infection, requiring some days of antibiotic therapy, and has the risk of spreading to involve the eye or the intracranial cavity. Code to H05.0 *Acute inflammation of orbit*.

The term ‘periorbital cellulitis’ is commonly used when the infection is purely involving the tissues around the eye including the eyelid, but without spread to the orbital cavity. This is a much less serious infection than orbital cellulitis and will rarely require more than 1–2 days in hospital. Code ‘periorbital cellulitis’ to L03.2 *Cellulitis of face* with an additional code of H00.0 *Hordeolum and other deep inflammation of eyelid* when the eyelid is involved (category L03 *Cellulitis* excludes cellulitis of the eyelid).

1210 CELLULITIS

Where cellulitis is associated with an open wound or with a skin ulcer, sequence the complicated wound code or the skin ulcer code as principal diagnosis and cellulitis as the additional diagnosis if the wound or ulcer is treated. For wounds not requiring treatment or treated earlier, with the current episode being for treatment of the cellulitis, sequence cellulitis as principal diagnosis with the complicated wound as an additional diagnosis. If the clinical coder is in doubt about the sequencing, clinician confirmation should be sought. (See also ACS 1221 *Decubitus ulcer and pressure area*.)

Orbital and periorbital cellulitis

It is important to identify the distinction between orbital and periorbital cellulitis as the two conditions and the code assignments are different. Clinical coders should be advised to check diagnoses of periorbital cellulitis with the clinician to ensure H05.0 *Acute inflammation of orbit* is appropriate.

The diagnosis of orbital cellulitis should be used when there is actual inflammation of the soft tissues of the orbital cavity which may spread to involve the eye. This is a very serious infection, requiring some days of antibiotic therapy, and has the risk of spreading to involve the eye or the intracranial cavity. Code to H05.0 *Acute inflammation of orbit*.

The term ‘periorbital cellulitis’ is commonly used when the infection is purely involving the tissues around the eye including the eyelid, but without spread to the orbital cavity. This is a much less serious infection than orbital cellulitis and will rarely require more than 1–2 days in hospital. Code ‘periorbital cellulitis’ to L03.2 *Cellulitis of face* with an additional code of H00.0 *Hordeolum and other deep inflammation of eyelid* when the eyelid is involved (category L03 *Cellulitis* excludes cellulitis of the eyelid).

1221 DECUBITUS ULCER AND PRESSURE AREA

... CLASSIFICATION

...
If a patient has multiple ulcer sites of differing stages, assign only one code to indicate the highest stage.

(See also ACS 1210 *Cellulitis*, when the admission is for treatment of a skin ulcer with associated cellulitis.)

EXAMPLE 1:

Decubitus ulcer stage two of the sacrum and ulcer with full thickness skin loss of the heels.

Code: L89.2 *Stage III decubitus ulcer and pressure area*

8. Ear, nose, mouth and throat

8.1. Resection, turbinates

An inconsistency was noted in the indexing of *Resection/turbinates* and consequently changes were made to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Resection — *see also* *Excision*

- tumour

- - bladder — *see* *Resection/bladder/lesion*

...

- - trachea 90167-00 [534]

- - - by laser, with

- - - - anastomosis 38453-00 [537]

- - - - repair by graft 38453-02 [537]

- turbinates, (nasal) (unilateral) — (*see also* *Turbinectomy*) 41692-00 [376]

- - bilateral 41692-01 [376]

- ureter

8.2. ACS 0803 Admission for removal of grommets (ACS references)

A public submission was received suggesting an ACS reference for ACS 0803 Admission for removal of grommets be added at 41644-00 [312] *Excision of rim of perforated tympanic membrane*. Consequently the following amendments were made to ICD-10-AM and ACHI for Eighth Edition.

TABULAR LIST OF DISEASES

H72 Perforation of tympanic membrane

H72.9 Perforation of tympanic membrane, unspecified

▼0803

TABULAR LIST OF INTERVENTIONS

312 Excision procedures on eardrum or middle ear

41644-00 Excision of rim of perforated tympanic membrane

▼0803

Includes: removal of tympanostomy tube

Excludes: cauterisation of perforated tympanic membrane (41641-00 [311])
that with myringoplasty – omit code

9. Circulatory system

9.1. Aneurysm and dissection of vertebral artery

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Aneurysm (anastomotic) (artery) (cirroid) (diffuse)
(false) (fusiform) (micro) (multiple) (saccular) I72.9
- arteriovenous (congenital) (peripheral) Q27.3
- - acquired I77.0

...
- - precerebral vessels (nonruptured) Q28.0
- - - ruptured NEC I72.5
- - specified site NEC Q27.3
- - - acquired I77.0
- - traumatic (complication) (early) T14.5
- basal — *see Aneurysm/brain*
- basilar (trunk) I72.5
- brain I67.1

...
- precerebral NEC I72.5
- - acquired (ruptured) I72.5
- - - basilar (trunk) I72.5
- - - carotid (internal) I72.0
- - - vertebral I72.6
- - congenital (nonruptured) Q28.1
- pulmonary I28.1

...
- ventricle (*see also Aneurysm/heart*) I25.3
- vertebral I72.6
Angelman syndrome Q87.85

Dissection

- artery NEC I72.9
- - basilar I72.5
- - carotid I72.0

...
- - precerebral NEC I72.5
- - - acquired (ruptured) NEC I72.5
- - - - basilar I72.5
- - - - carotid I72.0
- - - - vertebral I72.6
- - - congenital (nonruptured) Q28.1
- - renal (ruptured) I72.2
- - vertebral I72.6
- traumatic (complication) (early), specified site — *see Injury/blood vessel/by site*

TABULAR LIST OF DISEASES

I72

Other aneurysm and dissection

I72.5 Aneurysm and dissection of other precerebral arteries
Aneurysm and dissection of basilar artery (trunk)

Excludes: aneurysm and dissection of:
• carotid artery (I72.0)
• precerebral arteries, congenital (nonruptured) (Q28.1)
• vertebral artery (I72.6)

I72.6 Aneurysm and dissection of vertebral artery

9.2. Aspiration thrombectomy of the coronary artery

Advice was published in *Coding Matters*, June 2010 (Vol. 17, No. 1), *Aspiration thrombectomy of coronary artery*, as there was no specific code in ACHI for this procedure.

Numerous types of adjunctive coronary devices have been developed in conjunction with percutaneous coronary intervention (PCI) during acute myocardial infarction. These include aspiration thrombectomy, mechanical thrombectomy, rotational atherectomy and use of embolic protection devices. The classification of different types of adjunctive coronary intervention is based on the mechanism of action.

Aspiration thrombectomy of the coronary artery is performed by a catheter that is advanced to the thrombus over a guidewire and aspiration performed through syringe suction. This is different to rotational atherectomy in that the latter uses a rotablator, a device which is composed of a guidewire that is advanced through the narrow portion of the artery and a spinning blade grinding the hardened plaque into particles.

The other types of adjunctive coronary devices are mechanical thrombectomy and embolic protection devices. The mechanical thrombectomy devices apply energy through saline jets to facilitate break-up of the thrombus and embolic protection devices employ an occlusive balloon or filter which is positioned distal to the area of treatment trapping the debris during the procedure. Embolic protection devices such as FilterWire™, Interceptor™, GuardWire^(R) are most commonly used to capture debris that is dislodged during stenting of degenerated saphenous vein grafts.

The following changes were made to the ACHI and ACS for Eighth Edition:

- ACHI:
 - Tabular List: Created new codes in block [669] *Excision procedures on coronary arteries*
 - Alphabetic Index: Amended to support the above changes
- ACS: Amended ACS 0941 *Arterial Disease* to update the information in section 2. *Atherosclerosis, Procedures performed for atherosclerosis*.

ALPHABETIC INDEX OF INTERVENTIONS

Angioplasty

- patch, graft — see *Graft/artery/patch*
- transluminal balloon ~~(by rotablator)~~
- - for correction of arteriovenous fistula stenosis (percutaneous) 35303-06 [754]

Thrombectomy

- artery (with stenting) 90230-00 [702]
- - by surgical infusion (open) (peripheral vascular catheterisation) 35320-00 [741]
- ...
- - coeliac 33806-04 [702]
- - bypass 33803-02 [703]
- - communicating (anterior) (posterior) 90235-00 [702]
- - coronary, percutaneous transluminal (aspiration) (mechanical)
- - - multiple arteries 90218-01 [669]
- - - single artery 90218-00 [669]
- - femoral 33806-09 [702]

PTCA (percutaneous transluminal coronary angioplasty) (single artery/vessel) 38300-00 [670]

- with
- - embolic protection device

- - - multiple arteries 90218-03 [669]
- - - single artery 90218-02 [669]
- - rotational atherectomy — see *PTCRA (percutaneous transluminal coronary rotational atherectomy)*
- - stenting
- - - multiple stents
- - - - multiple arteries 38306-02 [671]
- - - - single artery 38306-01 [671]
- - - single stent 38306-00 [671]
- - thrombectomy (aspiration) (mechanical)
- - - multiple arteries 90218-01 [669]
- - - single artery 90218-00 [669]
- with stenting
- - multiple stents
- - - multiple vessels 38306-02 [674]
- - - single vessel 38306-01 [674]
- - - single stent 38306-00 [674]
- multiple arteries/vessels 38303-00 [670]
- PTCRA (percutaneous transluminal coronary rotational atherectomy) (by rotablator) (single artery) 38309-00 [669]**

TABULAR LIST OF INTERVENTIONS

669 Excision procedures on coronary arteries

90218-00 Percutaneous transluminal coronary angioplasty with aspiration thrombectomy, 1 artery
Percutaneous transluminal coronary angioplasty with mechanical thrombectomy of 1 coronary artery

Code also when performed:

- coronary angioplasty with stenting (see block [671])

90218-01 Percutaneous transluminal coronary angioplasty with aspiration thrombectomy, multiple arteries
Percutaneous transluminal coronary angioplasty with mechanical thrombectomy of multiple coronary arteries

Code also when performed:

- coronary angioplasty with stenting (see block [671])

90218-02 Percutaneous transluminal coronary angioplasty with embolic protection device, 1 artery

Code also when performed:

- coronary angioplasty with stenting (see block [671])

90218-03 Percutaneous transluminal coronary angioplasty with embolic protection device, multiple arteries

Code also when performed:

- coronary angioplasty with stenting (see block [671])

670

Transluminal coronary angioplasty

Code also when performed:

- coronary angiography (38215-00, 38218 [668])

Excludes: with atherectomy of coronary artery (see block [669])

- aspiration (mechanical) thrombectomy of coronary artery (see block [669])
- atherectomy of coronary artery (see block [669])
- endovascular embolic protection device (see block [669])
- stenting of coronary artery (see block [671])

671

Transluminal coronary angioplasty with stenting

Transluminal balloon angioplasty

Includes: balloon dilation of artery
that with drug eluting stent(s)

Code also when performed:

- coronary angiography (38215-00, 38218 [668])
- coronary angioplasty with:
 - aspiration thrombectomy (90218-00, 90218-01 [669])
 - embolic protection device (90218-02, 90218-03 [669])

Excludes: with atherectomy of coronary artery (see block [669])

AUSTRALIAN CODING STANDARDS

0941 ARTERIAL DISEASE

...

2. ATHEROSCLEROSIS

...

Procedures performed for atherosclerosis

Angioplasty (PTA/PTCA – percutaneous [balloon] transluminal coronary angioplasty, PTCRA – percutaneous [balloon] transluminal coronary rotational atherectomy), intra-arterial stenting, aspiration thrombectomy, endovascular embolic protection devices and bypass grafts (CABG, femoro-popliteal etc) are usually performed to relieve the symptoms of atherosclerosis (eg angina, intermittent claudication).

Therefore, in the absence of comprehensive documentation or clinical advice, if one of these procedures is performed, atherosclerosis may be assumed to be the diagnosis.

9.3. Atrial fibrillation and flutter

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Fibrillation

- atrial or auricular (established) I48.9
- - chronic I48.2
- - paroxysmal I48.0
- - persistent I48.1
- cardiac I49.8
- heart NEC I49.8
- muscular M62.8-

Flutter

- atrial or auricular I48.9
- - atypical I48.4
- - type I I48.3
- - type II I48.4
- - typical I48.3
- heart NEC I49.8
- ventricular I49.0

TABULAR LIST OF DISEASES

I48	Atrial fibrillation and flutter
I48.0	Paroxysmal atrial fibrillation
I48.1	Persistent atrial fibrillation
I48.2	Chronic atrial fibrillation
I48.3	Typical atrial flutter Type I atrial flutter
I48.4	Atypical atrial flutter Type II atrial flutter
I48.9	Atrial fibrillation and atrial flutter, unspecified

9.4. AV nodal re-entrant tachycardia (AVNRT)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Avitaminosis (multiple NEC) (*see also*
Deficiency/vitamin) E56.9

**AVNRT (atrioventricular nodal re-entrant
tachycardia)** I47.1

AVRT (atrioventricular re-entrant tachycardia) I47.1

Avulsion (traumatic) T14.7

Tachycardia R00.0

- atrial I47.1
- atrioventricular (re-entrant) I47.1

- auricular I47.1
- fetal — *see also* *Distress/fetal*
- complicating labour and delivery O68.0
- junctional I47.1
- nodal I47.1
- paroxysmal NEC I47.9
- - atrial I47.1
- - atrioventricular (AV) (re-entrant) I47.1
- - junctional I47.1

TABULAR LIST OF DISEASES

I47	Paroxysmal tachycardia
I47.1	Supraventricular tachycardia Paroxysmal Tachycardia (paroxysmal): <ul style="list-style-type: none"> • atrial • atrioventricular [AV]: <ul style="list-style-type: none"> • NOS • re-entrant (nodal) [AVNRT] [AVRT] • junctional • nodal

9.5. Cardiac resynchronisation therapy pacemaker/defibrillator

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Checking (of)

- device
- - cardiac Z45.0
- - contraceptive (intrauterine) (IUCD) Z30.5

Management (of)

- device
- - cardiac Z45.0
- - drug delivery or pump (external) (implantable spinal) Z45.1
- ...
- drug delivery device or pump (CADD) (external) (implantable spinal) Z45.1
- implanted device NEC Z45.9
- - cardiac Z45.0
- - specified NEC Z45.89

Presence (of) — *see also Status*

- cardiac
- - defibrillator (AICD) (functional) (resynchronisation therapy) Z95.0
- - implant or graft NEC Z95.9

- - - specified type NEC Z95.8
- - pacemaker (resynchronisation therapy) Z95.0
- cerebrospinal fluid drainage device Z98.2
- ...
- implanted device (artificial) (functional) (prosthetic) Z96.9
- - audiological Z96.2
- - bladder Z96.0
- - bone NEC Z96.7
- - cardiac
- - - defibrillator (AICD) (functional) (resynchronisation therapy) Z95.0
- - - pacemaker (resynchronisation therapy) Z95.0
- - cochlear Z96.2

Test(s)

- blood-drug Z04.0
- - positive — *see Finding in blood*
- cardiac ~~pulse generator (battery)~~ Z45.0
- - device (implanted) Z45.0
- - pulse generator (battery) Z45.0
- contraceptive management Z30.8

TABULAR LIST OF DISEASES

Z45

Adjustment and management of drug delivery or implanted device

- Z45.0 Adjustment and management of cardiac device
▼0936 Checking and testing of:
- automatic implantable cardiac defibrillator [AICD]
 - cardiac ~~pacemaker~~
 - pacemaker
 - resynchronisation therapy (CRT) pacemaker
 - resynchronisation therapy defibrillator (CRT-D)
 - pulse generator [battery]

Z95

Presence of cardiac and vascular implants and grafts

▼0909, 0936, 0940

- Z95.0 Presence of cardiac device
▼0936 Presence of:
- automatic implantable cardiac defibrillator [AICD]
 - cardiac ~~pacemaker~~
 - pacemaker
 - resynchronisation therapy (CRT) pacemaker
 - resynchronisation therapy defibrillator (CRT-D)

Excludes: adjustment or management of cardiac device (Z45.0)

9.6. Coronary slow flow syndrome

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Syndrome — *see also Disease*

- coronary
- - acute — *see ACS 0940 Ischaemic heart disease*
- - intermediate I20.0
- - slow flow I20.8
- Costen's (complex) K07.6

TABULAR LIST OF DISEASES

Refer section 9.16 Stable angina (Indexing) (page 143) for overlapping changes to code I20.8.

I20	Angina pectoris
▼0940	
I20.8	Other forms of angina pectoris
	Angina of effort
	<u>Coronary slow flow syndrome</u>
	Stenocardia

9.7. CT scan of coronary arteries

MBS introduced a new item number for CT scan of coronary arteries, which is a new technique increasingly used to diagnose ischaemic heart disease and to detect diseased coronary grafts. It is a noninvasive medical test using a new generation of computed tomography (64-MDCT) scanners which performs a minimum of 64 slices per minute to image the coronary arteries. The following changes were incorporated into ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Angiography

- by
 - ...
 - - spiral (by computerised tomography)
 - - - abdomen 57350-03 [1966]
 - - - abdominal aorta and iliofemoral lower extremity (bilateral) 57350-04 [1966]
 - - - chest 57350-02 [1966]
 - - - coronary artery 57360-00 [1966]
 - - - head (and neck) 57350-00 [1966]
 - - - lower extremity (bilateral) 57350-07 [1966]
 - - - neck (and head) 57350-00 [1966]
 - - - ~~other site 57350-08 [1966]~~
 - - - pelvis 57350-06 [1966]
 - - - specified site NEC 57350-08 [1966]
 - - - spine 57350-05 [1966]
 - - - upper extremity (bilateral) 57350-01 [1966]
- abdomen
- - spiral (by computerised tomography) 57350-03 [1966]
- aorta 59903-03 [1990]
- artery 59970-04 [1989]
- - aorta 59903-03 [1990]
- ...
- - cervical 59970-02 [1990]
- - - spiral (by computerised tomography) 57350-00 [1966]
- - coronary — *see also Angiography/coronary*
- - - spiral (by computerised tomography) 57360-00 [1966]
- - peripheral 59970-03 [1989]
- ...
- coronary 38215-00 [668]
- - with catheterisation of heart
- - - left 38218-00 [668]
- - - - combined with right heart 38218-02 [668]
- - - right 38218-01 [668]
- - - - combined with left heart 38218-02 [668]
- - spiral (by computerised tomography) 57360-00 [1966]
- extremity
- ...
- spiral
- - by computerised tomography
- - - abdomen 57350-03 [1966]

- abdominal aorta and iliofemoral lower extremity (bilateral) 57350-04 [1966]
- chest 57350-02 [1966]
- coronary artery 57360-00 [1966]
- head (and neck) 57350-00 [1966]
- lower extremity (bilateral) 57350-07 [1966]
- neck (and head) 57350-00 [1966]
- other site 57350-08 [1966]
- pelvis 57350-06 [1966]
- specified site NEC 57350-08 [1966]
- spine 57350-05 [1966]

Tomography NEC 60100-00 [1951]

- computerised (axial) (CT) (quantitative)
- for bone densitometry — see *Densitometry/bone*
- ...
- chest (bone) (soft tissue) (without contrast) 56301-00 [1960]

- for spiral angiography 57350-02 [1966]
- coronary artery 57360-00 [1966]
- with intravenous contrast (without, then with, intravenous contrast) 56307-00 [1960]
- ...
- colon (following incomplete colonoscopy) 56549-01 [1962]
- coronary artery 57360-00 [1966]
- digit — see *Tomography/computerised/extremity*
- ...
- spiral angiography
- abdomen 57350-03 [1966]
- abdominal aorta and iliofemoral lower extremity (bilateral) 57350-04 [1966]
- chest 57350-02 [1966]
- coronary artery 57360-00 [1966]
- head (and neck) 57350-00 [1966]

TABULAR LIST OF INTERVENTIONS

1966

Spiral angiography by computerised tomography

▼0042

- 57350-02 Spiral angiography by computerised tomography of chest, with intravenous contrast medium
Spiral angiography by computerised tomography of chest, without, then with, intravenous contrast medium

Excludes: computerised tomography coronary angiogram (57360-00 [1966])

- 57360-00 Spiral coronary angiography by computerised tomography, with intravenous contrast medium
CT coronary angiogram

9.8. Direct closure of innominate artery (*Indexing*)

A DRG public submission was received which highlighted a grouping issue. On review, it was determined that improved indexing for direct closure of innominate artery would assist correct code assignment for this procedure. The following amendment was made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Closure (of)

- amputation stump 44376-00 [1566]
- finger 46483-00 [1471]
- hand 46483-00 [1471]
- artery — see *Closure/wound/artery*
- atrial septal defect (for congenital heart disease) (open) (with patch graft) 38742-02 [617]

9.9. Electrophysiological testing

MBS descriptions of item numbers 38350, 38353 and 38356 were amended to specify that electrophysiological testing is a component of routine pacemaker implantations. In response to these MBS amendments, the following changes have been made to the ACHI Tabular List for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

648

Insertion of permanent transvenous electrode for cardiac pacemaker or defibrillator

▼0936

38368-00 Insertion of permanent transvenous electrode into left ventricle for cardiac pacemaker

Includes: cardiac electrophysiological studies [EPS]
insertion via coronary sinus

Code also when performed:

- insertion of cardiac pacemaker generator (38353-00 [650])
- insertion of permanent transvenous electrode into other heart chamber(s) for cardiac pacemaker (38350-00 [648])

Excludes: that with defibrillator functionality (38390-01 [648])

38350-00 Insertion of permanent transvenous electrode into other heart chamber(s) for cardiac pacemaker
Insertion of permanent transvenous electrode for cardiac pacemaker NOS

Includes: cardiac electrophysiological studies [EPS]
that into left atrium, right atrium or right ventricle

Code also when performed:

- insertion of cardiac pacemaker generator (38353-00 [650])
- insertion of permanent transvenous electrode into left ventricle for cardiac pacemaker (38368-00 [648])

Excludes: that with defibrillator functionality (38390-02 [648])

9.10. Endoluminal repair of aortic dissection

Advice was published in *Coding Matters*, March 2010 (Vol. 16, No. 4), *Endoluminal repair of aortic dissection*, regarding the correct code for endoluminal repair of a descending aortic dissection. Consequently, the following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Insertion

- stent
- - anophthalmic socket (with reconstruction of socket)
42527-00 [164]
- - artery
- - - aorta (for) (transluminal)
- - - - for endovascular repair of aneurysm (AAA stent)
(aneurysm) (dissection) (endoluminal) 33116-00
[762]
- - - - multiple stents (percutaneous) 35309-07 [754]
- - - - - open 35309-09 [754]
- - - - - single stent (percutaneous) 35309-06 [754]
- - - - - open 35309-08 [754]
- - - carotid, transluminal, single
- - - ...
- - - specified (for) NEC

- - - - for endovascular repair of aneurysm (aneurysm)
(dissection) (endoluminal) 33116-00 [762]
- - - - multiple stents (percutaneous) 35309-07 [754]

Repair

- aorta, aortic 38706-00 [693]
- - by aortopexy 43909-00 [693]
- - ...
- - - arch
- - - with repair of thoracic aorta, ascending — see
block [685]
- - - dissection, endovascular (endoluminal) 33116-00
[762]
- - - endovascular (AAA stent) (aneurysm) (dissection)
(endoluminal) 33116-00 [762]
- - interruption 38712-00 [693]

TABULAR LIST OF INTERVENTIONS

684

Repair of ascending thoracic aorta

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- operative management of acute rupture or dissection of thoracic aorta (38572-00 [693])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

Excludes: endovascular (endoluminal) repair (33116-00 [762])
that with repair of aortic arch (see block [685])

685

Repair of aortic arch and ascending thoracic aorta

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- operative management of acute rupture or dissection of thoracic aorta (38572-00 [693])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

Excludes: endovascular (endoluminal) repair (33116-00 [762])

686

Repair of descending thoracic aorta

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- operative management of acute rupture or dissection of thoracic aorta (38572-00 [693])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

Excludes: endovascular (endoluminal) repair (33116-00 [762])

9.11. Influenzal myocarditis

Refer section 10.4 Influenza due to certain identified influenza virus (page 155) for details.

9.12. Percutaneous heart valve replacement

A public submission was received regarding percutaneous aortic valve replacement. Percutaneous aortic valve replacement (PAVR) is a new and innovative technique for the management of high-risk patients with aortic stenosis who are often elderly, frail and have multiple comorbidities. Percutaneous valve replacement is also performed on the pulmonary, tricuspid and mitral valve.

Several company brands include: CoreValve, Cribier-Edwards, Lotus, Aortx, and Bonhoeffer.

Percutaneous pulmonary valve replacement (PPVR) is a new treatment option for patients with congenital heart defects involving malformation of the right ventricular outflow tract. The goal of PPVR is to extend the lifespan of the right ventricle, thus delaying open-heart surgery. PPVR uses a bovine, jugular venous valve sutured inside a platinum-iridium balloon-expandable stent.

Clinical advice indicates that there have been a handful of cases where valves have been implanted in the tricuspid and mitral positions, but not currently in any volume. Percutaneous mitral valve replacement have, however, been performed overseas (especially Europe) and it is expected this new procedure will be introduced into Australia in the next couple of years. Tricuspid valve diseases are not common and usually associated with mitral or aortic valve disease. Indications for percutaneous tricuspid valvuloplasty are rare and reserved for patients presenting with tight tricuspid stenosis.

The following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Implant, implantation — *see also Insertion*

- hearing device
- - bone conduction 41557-02 [321]
- - electromagnetic 41557-02 [321]
- heart valve, transcatheter — *see*
Insertion/valve/heart/percutaneous with
bioprosthesis
- hormone

Insertion

- valve
- - heart — *see Replacement/valve/heart*
- - - percutaneous with bioprosthesis
- - - - aorta, aortic 38488-08 [623]
- - - - mitral 38488-09 [628]
- - - - pulmonary 38488-11 [637]
- - - - tricuspid 38488-10 [634]
- - vas deferens 30644-12 [1189]

Replacement

- aorta, aortic

...

-- valve

--- with

---- aortic arch

----- repair — see block [685]

----- replacement — see block [688]

----- ascending thoracic aorta

----- repair — see block [684] and [685]

----- replacement — see block [687] and [688]

----- bioprosthesis 38488-01 [623]

----- percutaneous 38488-08 [623]

----- heterograft, unstented 38489-01 [623]

----- homograft 38489-00 [623]

----- mechanical prosthesis 38488-00 [623]

- artificial sphincter

...

- valve

-- heart

--- aortic

---- with

----- bioprosthesis 38488-01 [623]

----- percutaneous 38488-08 [623]

----- heterograft, unstented 38489-01 [623]

...

--- mitral

---- with

----- bioprosthesis 38488-03 [628]

----- percutaneous 38488-09 [628]

----- homograft 38489-02 [628]

----- mechanical prosthesis 38488-02 [628]

--- pulmonary

---- with

----- bioprosthesis 38488-07 [637]

----- percutaneous 38488-11 [637]

----- heterograft, unstented 38489-05 [637]

----- homograft 38489-04 [637]

----- mechanical prosthesis 38488-06 [637]

--- tricuspid

---- with

----- bioprosthesis 38488-05 [634]

----- percutaneous 38488-10 [634]

----- homograft 38489-03 [634]

----- mechanical prosthesis 38488-04 [634]

TABULAR LIST OF INTERVENTIONS

623

Replacement of aortic valve

38488-08 Percutaneous replacement of aortic valve with bioprosthesis

Transcatheter aortic valve implantation

Includes: cardiac catheterisation
valvuloplasty

Code also when performed:

• coronary angiography (38215-00, 38218 [668])

628

Replacement of mitral valve

38488-09 Percutaneous replacement of mitral valve with bioprosthesis

Includes: cardiac catheterisation
valvuloplasty

Code also when performed:

• coronary angiography (38215-00, 38218 [668])

634

Replacement of tricuspid valve

38488-10 Percutaneous replacement of tricuspid valve with bioprosthesis

Includes: cardiac catheterisation
valvuloplasty

Code also when performed:

• coronary angiography (38215-00, 38218 [668])

637

Repair or replacement of pulmonary valve

38488-11 Percutaneous replacement of pulmonary valve with bioprosthesis

Transcatheter pulmonary valve implantation

Includes: cardiac catheterisation
valvuloplasty

Code also when performed:

• coronary angiography (38215-00, 38218 [668])

9.13. Reoperation of arteries or veins of neck, code also note

A query was received highlighting that the *Code also* instructional note at code 35202-00 [763] *Access for reoperation of arteries or veins of neck, abdomen or limb* was in some instances being assigned as a principal procedure because of the ambiguous 'Code also' instructional note at code 35202-00 [763]. It was determined that this should be amended to a 'Code first' instructional note, to be consistent with notes at 38637-00 [680] *Reoperation for construction of coronary artery graft* and 38640-00 [664] *Reoperation for other cardiac procedure, not otherwise specified*.

TABULAR LIST OF INTERVENTIONS

763

Reoperation procedures on other vascular sites

35202-00 Access for reoperation of arteries or veins of neck, abdomen or limb

Code also first:

- surgical procedure(s) performed

9.14. Replacement of cardiac electrode (*Indexing*)

It was highlighted that the essential modifier *subxyphoid* had been omitted in the ACHI Alphabetic Index at relevant entries for cardiac defibrillator and pacemaker electrode replacements, so the following index entries have been added to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Replacement

- electrode(s) lead(s)
- - cardiac (for)
- - - defibrillator (automatic)
- - - - permanent
- - - - - epicardial (via) ~~38456-30 [654]~~
- - - - - sternotomy 38456-31 [654]
- - - - - subxyphoid approach 38456-30 [654]
- - - - - thoracotomy 38456-31 [654]
- - - - - myocardial ~~38456-30 [654]~~ — see Replacement/electrode(s) lead(s)/cardiac/defibrillator/permanent/epicardial
- - - - - transvenous (atrium) (right ventricle) 38350-03 [654]
- - - - - pacemaker
- - - - - permanent
- - - - - epicardial (via) ~~38456-23 [654]~~
- - - - - sternotomy 38456-24 [654]
- - - - - subxyphoid approach 38456-23 [654]
- - - - - thoracotomy 38456-24 [654]
- - - - - myocardial ~~38456-23 [654]~~ — see Replacement/electrode(s) lead(s)/cardiac/pacemaker/permanent/epicardial
- - - - - transvenous (atrium) (right ventricle) 38350-01 [654]

9.15. Resection artery, coronary (*Indexing*)

An inconsistency highlighted in the indexing of 38637-00 [680] *Reoperation for reconstruction of coronary artery graft* has been amended in ACHI for Eighth Edition as follows.

ALPHABETIC INDEX OF INTERVENTIONS

Excision

- artery
- ...
- - carotid
- - - with reanastomosis (with endarterectomy) 32703-00 [718]
- - coronary, with reconstruction of graft (occluded) 38637-00 [680]
- arytenoid cartilage with microlaryngoscopy 41867-00 [523]

Oversewing

- artery, coronary, ~~reoperation with reconstruction of graft~~ (occluded) 38637-00 [680]
- Mallory-Weiss laceration 90342-02 [887]

Reconstruction

- areola — *see Reconstruction/breast/areola*
- artery, coronary, graft (occluded) 38637-00 [680]
- atrial wall (intra-atrial) by
 - ...
 - coronal (dental) (full)
 - - metallic (direct) — *see Restoration/tooth/metallic*
 - - tooth-coloured adhesive restorative, anterior, direct — *see Restoration/tooth/tooth-coloured material/direct/anterior tooth*
- coronary artery graft (occluded) 38637-00 [680]
- cranial vault
 - ...
 - glenoid fossa
 - - and zygomatic arch and temporal bone 45788-00 [1717]
- graft, coronary artery (occluded) 38637-00 [680]
- hand

Reoperation

- artery
 - - abdomen 35202-00 [763]
 - - coronary, graft (occluded) 38637-00 [680]
 - - limb 35202-00 [763]
- ...
- cardiac procedure NEC 38640-00 [664]
- - coronary artery graft CABG (~~coronary artery bypass graft~~) (occluded) 38637-00 [680]
- dacryocystorhinostomy (2nd or subsequent procedure)
 - ...
 - flap — *see Flap*

- graft, coronary artery (occluded) 38637-00 [680]
- keratoplasty
 - ...
 - vein
 - - abdomen 35202-00 [763]
 - - coronary (~~occluded~~) 38637-00 [680]
 - - limb 35202-00 [763]

Resection — *see also Excision*

- artery
 - ...
 - - carotid
 - - - with reanastomosis (with endarterectomy) 32703-00 [718]
 - - coronary, with reconstruction of graft (occluded) 38637-00 [680]
 - bladder — *see also Cystectomy/urinary*

Revision (partial) (total)

- cardiac event monitor, subcutaneously implanted (ECG) (looping memory) (patient activated) 38285-01 [1604]
- cardiac surgery NEC 38640-00 [664] — *see also specific procedure(s) performed*
- - coronary artery bypass-graft (occluded) 38637-00 [680]
- catheter
 - ...
 - graft
 - - coronary artery bypass (~~occluded~~) 38637-00 [680]
 - - monitor (flap) (free jejunal) 90659-00 [1686]
- heart surgery NEC 38640-00 [664] — *see also specific procedure(s) performed*
- - coronary artery bypass-graft (occluded) 38637-00 [680]
- ICD (implantable cardioverter defibrillator) 90203-06 [656]

TABULAR LIST OF INTERVENTIONS

664

Reoperation procedures on other sites of heart

▼0909, 0934

38640-00 Reoperation for other cardiac procedure, not elsewhere classified

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])

Code first:

- surgical procedure(s) performed

Excludes: that with reconstruction of coronary artery graft (38637-00 [680])

680

Reoperation procedures on coronary arteries

▼0909, 0934

9.16. Stable angina (*Indexing*)

Advice was published in *Coding Matters*, June 2010 (Vol. 17, No. 1), *Stable angina*, concerning the correct code for *stable angina*. ICD-10-AM was updated for Eighth Edition to support this advice.

ALPHABETIC INDEX OF DISEASES

Angina (attack) (cardiac) (chest) (heart) (pectoris) (syndrome) (vasomotor) I20.9
- specified NEC I20.8
- stable I20.8
- unstable I20.0

TABULAR LIST OF DISEASES

Refer section 9.6 Coronary slow flow syndrome (page 137) for overlapping changes to code I20.8.

I20 Angina pectoris

▼0940

I20.8 Other forms of angina pectoris
Angina of effort
Slow coronary flow syndrome
Stable angina
Stenocardia

9.17. Transcatheter thrombectomy of intracranial arteries

A public submission was received requesting new codes for *transcatheter thrombectomy of intracranial arteries*. Mechanical thrombectomy of intracranial vessels is performed by extracting the thrombus with a retrieval device (such as the Merci Retriever® or the Penumbra System®) which is advanced through a guiding catheter via internal carotid artery or internal jugular vein. Balloon angioplasty can be used in conjunction with the endovascular extraction of the thrombus.

This procedure is also performed on intracranial venous vasculature. Stenting with thrombectomy or embolectomy can also be performed for vessels in other parts of the body for conditions such as deep vein thrombosis or pulmonary embolism. Therefore an includes notes of ‘that with stenting’ was added to block [702] *Arterial embolectomy or thrombectomy* and block [729] *Venous thrombectomy*.

The following changes were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Embolectomy

- artery (with stenting)
- - axillary 33806-00 [702]
- - - bypass 33806-12 [703]
- - basilar 90235-00 [702]
- - brachial 33806-01 [702]
- - - bypass 33806-12 [703]
- - carotid ~~33800-00 [702]~~
- - - external 33800-00 [702]
- - - internal
- - - - extracranial 33800-00 [702]
- - - - intracranial 90235-00 [702]
- - cerebral (anterior) (middle) (posterior) 90235-00 [702]
- - coeliac 33806-04 [702]
- - - bypass 33803-02 [703]
- - communicating (anterior) (posterior) 90235-00 [702]
- - femoral 33806-09 [702]
...
- - innominate 33803-01 [702]
- - - bypass 33803-02 [703]
- - intracranial NEC 90235-00 [702]
- - mesenteric 33806-05 [702]

...
- vein (with stenting) 33812-04 [729]
- - axillary 33812-03 [729]
- - dural sinus 90235-01 [729]
- - femoral 33812-00 [729]
- - iliac (open) 33811-01 [729]
- - - closed 33810-01 [729]
- - intracranial NEC 90235-01 [729]
- - peripheral
...
- - popliteal 33812-01 [729]
- - sagittal sinus 90235-01 [729]
- - specified site NEC 33812-04 [729]

Rebonding

- bridge, splint (dental) 97653-01 [472]

Recanalisation

- intracranial (with stenting)
- - artery 90235-00 [702]
- - vein 90235-01 [729]

Recementing

Revascularisation

- intracranial (with stenting)
- - artery 90235-00 [702]
- - vein 90235-01 [729]
- transmyocardial (open) (TMR) 38650-02 [639]

Thrombectomy

- artery (with stenting) 90230-00 [702]
- - by surgical infusion (open) (peripheral vascular catheterisation) 35320-00 [741]
- - -
- - axillary 33806-00 [702]
- - - bypass 33806-12 [703]
- - basilar 90235-00 [702]
- - brachial 33806-01 [702]
- - - bypass 33806-12 [703]
- - carotid 33800-00 [702]
- - - external 33800-00 [702]
- - - internal
- - - - extracranial 33800-00 [702]
- - - - intracranial 90235-00 [702]
- - cerebral (anterior) (middle) (posterior) 90235-00 [702]
- - coeliac 33806-04 [702]
- - - bypass 33803-02 [703]
- - communicating (anterior) (posterior) 90235-00 [702]
- - coronary, percutaneous transluminal (aspiration) (mechanical)
- - - multiple arteries 90218-01 [669]
- - - single artery 90218-00 [669]

- - femoral 33806-09 [702]
- - -
- - innominate 33803-01 [702]
- - - bypass 33803-02 [703]
- - intracranial NEC 90235-00 [702]
- - mesenteric 33806-05 [702]
- - -
- - vein (with stenting) 33812-04 [729]
- - by surgical infusion (open) (peripheral arterial catheterisation) 35320-00 [741]
- - -
- - axillary 33812-03 [729]
- - dural sinus 90235-01 [729]
- - femoral 33812-00 [729]
- - iliac (open) 33811-01 [729]
- - - closed 33810-01 [729]
- - intracranial NEC 90235-01 [729]
- - popliteal 33812-01 [729]
- - sagittal sinus 90235-01 [729]
- - specified site NEC 33812-04 [729]

Transcatheter embolisation of blood vessels — see

- Embolisation/blood vessel/transcatheter/by site*
- embolisation of blood vessels — see
- Embolisation/blood vessel, transcatheter/by site*
- thrombectomy (embolectomy) of blood vessels — see *Thrombectomy/artery AND Thrombectomy/vein*
- Transection** — see also *Division*

TABULAR LIST OF INTERVENTIONS

702 Arterial embolectomy or thrombectomy

Includes: that with stenting

Excludes: embolectomy or thrombectomy of arterial bypass graft:
• extremities (33806-12 [703])
• trunk (33803-02 [703])

90235-00 Embolectomy or thrombectomy of intracranial artery
Transcatheter embolectomy or thrombectomy of intracranial artery

33800-00 Embolectomy or thrombectomy of carotid artery

Excludes: intracranial internal carotid artery (90235-00 [702])

729 Venous thrombectomy

Includes: that with stenting

90235-01 Thrombectomy of intracranial vein
Transcatheter thrombectomy of intracranial vein

9.18. Transoesophageal ultrasound of heart performed during cardiac surgery

As part of the Seventh Edition review of ACS 0042 *Procedures normally not coded*, code 55130-00 [1942] *2 dimensional real time transoesophageal ultrasound of heart performed during cardiac surgery* was to be deleted from the ACHI Tabular List. However, the deletion of this code was not affected during production of Seventh Edition but has now been deleted from the ACHI Tabular List for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

1942

Ultrasound of heart

55130-00 — 2 dimensional real time transoesophageal ultrasound of heart performed during cardiac surgery

Includes: — that with sequential assessment of cardiac function before and after surgical procedure

9.19. ACS 0925 Hypertension and related conditions

On reviewing the multiple standards relating to hypertension it was decided that the advice in ACS 0925 *Hypertension*, ACS 0926 *Hypertensive heart disease (I11)* and ACS 0927 *Hypertensive heart and kidney disease (I13)* should be consolidated into one standard. Consequently advice from ACS 0926, 0927, 0928 and 1438 was consolidated into ACS 0925 which was renamed *Hypertension and related conditions*.

Additionally, in 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Atrophy, atrophic

- kidney (senile) (terminal) (*see also Sclerosis/kidney*)
N26

— with hypertension (*see also Hypertension/kidney*)
I12.9

- - congenital or infantile Q60.5

- - - bilateral Q60.4

- - - unilateral Q60.3

- - due to hypertension — *see Hypertension/kidney*

- - hydronephrotic N13.3

Failure, failed

- kidney N19

- - with

- - - hypertensive

- - - - heart disease (conditions in I11) I13.1

- - - - - with heart failure (congestive) I13.2

— kidney disease (*see also Hypertension/kidney*)
I12.0

- - - tubular necrosis (acute) N17.0

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (primary) (systemic)
I10

- with

- - heart involvement (conditions in I51.4–I51.9 due to hypertension) (*see also Hypertension/heart*) I11.9

- - kidney involvement (*see also Hypertension/kidney*)
I12.9

— renal sclerosis (conditions in N26) (*see also Hypertension/kidney*) I12.9

— with

— failure (conditions in N18.5, N19) I12.0

— heart involvement (conditions in I51.4–I51.9) —
see Hypertension/cardiorenal

- benign, intracranial G93.2

Sclerosis, sclerotic

- kidney N26

- - with cystine storage disease E72.0† N29.8*

— cystine storage disease

— hypertension (*see also Hypertension/kidney*)

— hypertensive heart disease (conditions in I11.) —
(*see also Hypertension/cardiorenal*)

- - arteriolar (hyaline) (hyperplastic) (*see also Hypertension/kidney*) I12.9

- - due to

- - - hypertension — *see Hypertension/kidney*

- - - hypertensive heart disease (conditions in I11.) —
see Hypertension/cardiorenal

- larynx J38.7

...

- renal (*see also Sclerosis/kidney*) N26

- - with cystine storage disease E72.0† N29.8*

— cystine storage disease E72.0† N29.8*

— hypertension (*see also Hypertension/kidney*) I12.9

— hypertensive heart disease (conditions in I11.) —

(*see also Hypertension/cardiorenal*) I13.9

- - arteriolar (hyaline) (hyperplastic) (*see also Hypertension/kidney*) I12.9

- - due to

- - - hypertension — *see Hypertension/kidney*

- - - hypertensive heart disease (conditions in I11.) —
see Hypertension/cardiorenal

- retina (senile) (vascular) H35.0

TABULAR LIST OF DISEASES

I11 **Hypertensive heart disease**

▼09256

I12 **Hypertensive kidney disease**

▼0925, 1438

I13 **Hypertensive heart and kidney disease**

▼09257, 1438

I15 **Secondary hypertension**

▼09258, 1438

N18 **Chronic kidney disease**

▼0925, 1438

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

9. Circulatory system

- 0909 Coronary artery bypass grafts
- 0920 Acute pulmonary oedema
- 0925 Hypertension and related conditions
- 0926 Hypertensive heart disease (I11)
- 0927 Hypertensive heart and kidney disease (I13)
- 0928 Secondary hypertension (I15)
- 0933 Cardiac catheterisation and coronary angiography

0925 HYPERTENSION AND RELATED CONDITIONS

HYPERTENSION WITH HEART AND KIDNEY DISEASE

When coding combinations of hypertension, heart and kidney disorders, it is important to distinguish if, and how, they are related.

- Hypertension may cause heart and/or kidney disease.
- Hypertension may be caused by other conditions, including some kidney disorders.
- Hypertension and heart and kidney disease may be unrelated although they are present at the same time.

CLASSIFICATION

Where hypertension is documented in the presence of heart and/or kidney disease and:

1. a causal relationship is stated such as ‘due to hypertension’ or ‘hypertensive’, assign a code from category:
 - I11 *Hypertensive heart disease* for certain heart conditions (listed in I50.- or I51.4– I51.9) due to hypertension
 - I12 *Hypertensive kidney disease* for certain kidney conditions (listed in N00–N07, N18.-, N19 or N26) due to hypertension
 - I13 *Hypertensive heart and kidney disease*, when both hypertensive heart disease (I11) and hypertensive kidney disease (I12) are present.
2. no causal relationship is stated, assign I10 *Essential (primary) hypertension* separately from the heart or kidney condition(s).

SECONDARY HYPERTENSION

Secondary hypertension is generally caused by another condition such as renal artery stenosis or pheochromocytoma. When hypertension is stated to be ‘due to’ or ‘secondary to’ other conditions, assign an appropriate code from category I15 *Secondary hypertension*.

Note: ACHI codes are not included in these examples.

EXAMPLE 1:

An 82 year old man was admitted for excision of a persistent papillary TCC of left ureter. His comorbidities included Parkinson’s disease, chronic renal impairment and hypertension. Routine eGFR = 59 mL/min.

He underwent open resection of the left kidney and remaining left ureter. Postoperatively his blood pressure proved difficult to control and his eGFR fell to 51 mL/min. Histopathology on the removed kidney confirmed hypertensive nephropathy and his nephrologist was consulted, advising a change to his hypertensive medications.

Histopathology reports: **Left ureter** – Chronic inflammation. Reactive urothelial hyperplasia, focal low grade papillary urothelial carcinoma. **Left kidney** – Frequent sclerosed glomeruli with tubular atrophy and interstitial fibrosis in keeping with hypertensive nephropathy.

Codes:	C66	<i>Malignant neoplasm of ureter</i>
	M8130/3	<i>Papillary transitional cell carcinoma</i>
	I12.9	<i>Hypertensive kidney disease without kidney failure</i>
	N18.3	<i>Chronic kidney disease, stage 3</i>

(See also ACS 1438 *Chronic kidney disease*)

EXAMPLE 2:

A 39 year old man, who had episodes of feeling dizzy, ‘funny turns’ and very high blood pressure, was referred by GP for further investigation. During the hospital admission, a pheochromocytoma was found in the medulla of right adrenal gland and it was confirmed that the tumour caused attacks of episodic hypertension.

Codes:	D35.0	<i>Benign neoplasm of adrenal gland</i>
	M8700/0	<i>Pheochromocytoma NOS</i>
	I15.2	<i>Hypertension secondary to endocrine disorders</i>

EXAMPLE 3:

Patient admitted with a bladder tumour obstructing his sole kidney. Patient has pre-existing chronic kidney disease with a eGFR = 25 mL/min and hypertension. A preoperative assessment by his nephrologist requested postoperative monitoring of his kidney function.

He underwent open partial cystectomy and re-implantation of ureter. Histopathology reports papillary urothelial carcinoma – high grade.

Codes:	C67.9	<i>Malignant neoplasm of bladder, unspecified</i>
	M8130/3	<i>Papillary transitional cell carcinoma</i>
	N18.4	<i>Chronic kidney disease, stage 4</i>
	I10	<i>Essential (primary) hypertension</i>

EXAMPLE 4:

A patient with a known history of chronic congestive heart failure and hypertension was admitted to hospital due to deterioration of cardiac function. During admission all medications including those for hypertension were reviewed and adjusted.

Codes:	I50.0	<i>Congestive heart failure</i>
	I10	<i>Essential (primary) hypertension</i>

0926 HYPERTENSIVE HEART DISEASE (I11)

Certain heart conditions:

- ~~I50. Heart failure~~
- ~~I51.4 Myocarditis, unspecified~~
- ~~I51.5 Myocardial degeneration~~
- ~~I51.6 Cardiovascular disease, unspecified~~
- ~~I51.7 Cardiomegaly~~
- ~~I51.8 Other ill defined heart diseases~~
- ~~I51.9 Heart disease, unspecified~~

~~are classified to category I11 Hypertensive heart disease when a causal relationship is stated (eg 'due to hypertension' or 'hypertensive'). In such cases, assign only a code from category I11.~~

~~The same heart conditions with hypertension, but without a stated causal relationship, are coded separately. Sequence according to the circumstances of the episode of care.~~

0927 HYPERTENSIVE HEART AND KIDNEY DISEASE (I13)

~~Assign codes from combination category I13 Hypertensive heart and kidney disease, when both hypertensive heart disease (I11) and hypertensive kidney disease (I12) are present. The term 'hypertensive' by default indicates that there is a causal relationship.~~

~~(See also ACS 1438 Chronic kidney disease).~~

0928 SECONDARY HYPERTENSION (I15)

~~Assign these codes when hypertension is stated to be 'due to' or 'secondary to' another condition, such as renal artery stenosis (I15.0 Renovascular hypertension) or pheochromocytoma (I15.2 Hypertension secondary to endocrine disorders).~~

~~Assign also a code from N18. Chronic kidney disease where I15.0 Renovascular hypertension or I15.1 Hypertension secondary to other kidney disorders are assigned (see also ACS 1438 Chronic kidney disease).~~

1438 CHRONIC KIDNEY DISEASE

DEFINITION

...

EXAMPLE 2:

A 65 year old female was admitted for an elective repair of rotator cuff tear. Admission comorbidities included Type 2 diabetes, on oral hypoglycaemics, with chronic kidney disease. Arthroscopic repair of rotator cuff performed under GA, ASA 2. Postoperatively her blood sugar levels fluctuated initially but stabilised after commencing insulin therapy for temporary management.

Codes:	M75.1	Rotator cuff syndrome
	E11.22	Type 2 diabetes mellitus with established diabetic nephropathy
	N18.9	Chronic kidney disease, unspecified
	48960-00 [1405]	Arthroscopic reconstruction of shoulder
	92514-29 [1910]	General anaesthesia, ASA 2, nonemergency

(See also ACS 0401 Diabetes mellitus and intermediate hyperglycaemia)

.....

Hypertension in kidney disease

The relationship between CKD and hypertension, though not clearly understood, is vital in treatment. Where hypertension is documented in the presence of CKD assign I10 *Essential (primary) hypertension*, as an additional diagnosis, except where a causal relationship has been clearly documented, for example, hypertensive kidney disease, renovascular disease or secondary hypertension (see also ACS 0927 *Hypertensive heart and kidney disease (I13)* and ACS 0928 *Secondary hypertension (I15)*).

EXAMPLE 3:

Patient admitted with a bladder tumour obstructing his sole kidney. Patient has pre-existing chronic kidney disease with a GFR = 25 mL/min and hypertension. A preoperative assessment by his nephrologist requested postoperative monitoring of his kidney function.

He underwent open partial cystectomy and re-implantation of ureter under GA, ASA 2. Histopathology reports papillary urothelial carcinoma—high grade.

Codes:	C67.9	<i>Malignant neoplasm of bladder, unspecified</i>
	M8130/3	<i>Papillary transitional cell carcinoma</i>
	N18.4	<i>Chronic kidney disease, stage 4</i>
	I10	<i>Essential (primary) hypertension</i>
	37000 01 [1102]	<i>Partial excision of bladder</i>
	36588 01 [1084]	<i>Reimplantation of ureter into bladder, unilateral</i>
	92514 29 [1910]	<i>General anaesthesia, ASA 2, nonemergency</i>

EXAMPLE 4:

An 82 year old man was admitted for excision of a persistent papillary TCC of left ureter. His comorbidities included Parkinson's disease, chronic renal impairment and hypertension. Routine eGFR = 59 mL/min.

He underwent open resection of the left kidney and remaining left ureter under GA, ASA 2. Postoperatively his blood pressure proved difficult to control and his eGFR fell to 51 mL/min. Histopathology on the removed kidney confirmed hypertensive nephropathy and his nephrologist was consulted, advising a change to his hypertensive medications.

Histopathology reports: **Left ureter**—Chronic inflammation. Reactive urothelial hyperplasia, focal low grade papillary urothelial carcinoma. **Left kidney**—Frequent sclerosed glomeruli with tubular atrophy and interstitial fibrosis in keeping with hypertensive nephropathy.

Codes:	C66	<i>Malignant neoplasm of ureter</i>
	M8130/3	<i>Papillary transitional cell carcinoma</i>
	I12.9	<i>Hypertensive kidney disease without kidney failure</i>
	N18.3	<i>Chronic kidney disease, stage 3</i>
	36531 01 [1054]	<i>Nephroureterectomy</i>
	92514 29 [1910]	<i>General anaesthesia, ASA 2, nonemergency</i>

(See also ACS 0010 *General abstraction guidelines*)

EXAMPLE 5:

A 79 year old woman, with known renal artery stenosis and hypertensive kidney disease, was admitted for renal artery stenting to alleviate worsening hypertension and deteriorating renal function, latest eGFR = 31 mL/min. Comorbidities included angina.

Prior to operation she experienced several attacks of angina which responded to Anginine. Anaesthetic assessment considered her cardiac status to be too unstable for operation at this time and she was discharged for ongoing follow up.

Codes:	I70.1	<i>Atherosclerosis of renal artery</i>
	Z53.0	<i>Procedure not carried out due to contraindication</i>
	I20.9	<i>Angina pectoris, unspecified</i>

I12.9	<i>Hypertensive kidney disease without kidney failure</i>
N18.3	<i>Chronic kidney disease, stage 3</i>

KIDNEY REPLACEMENT THERAPY

...

EXAMPLE 36:

...

EXAMPLE 47:

...

EXAMPLE 58:

...

DIABETIC NEPHROPATHY

...

EXAMPLE 69:

9.20. ACS 0942 *Banding of haemorrhoids (Deleted)*

Refer section 11.17 Haemorrhoids (page 175) for details on changes to coding of haemorrhoids.

10. Respiratory system

10.1. Excision, teratoma, mediastinum, via sternotomy (*Indexing*)

Inconsistencies were noted between index entry *Excision/teratoma/mediastinal* and the index entries at *Excision/lesion/mediastinum* and *Excision/tumour/mediastinum*. These were amended in the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Excision — *see also Removal*

- lesion(s) — *see also Excision/tumour and Excision/cyst and Excision/polyp*

...

-- mediastinum, via

--- sternotomy 38446-03 [563]

--- thoracotomy 38446-02 [563]

...

- teratoma

-- intra-abdominal (congenital) 90327-00 [989]

-- mediastinum, via 38446-02 [563]

--- sternotomy 38446-03 [563]

--- thoracotomy 38446-02 [563]

-- sacrococcygeal

...

- tumour — *see also Excision/lesion(s)*

...

-- mediastinum, via

--- sternotomy 38446-03 [563]

--- thoracotomy 38446-02 [563]

...

- teratoma

-- intra-abdominal (congenital) 90327-00 [989]

-- mediastinum, via 38446-02 [563]

--- sternotomy 38446-03 [563]

--- thoracotomy 38446-02 [563]

--- sacrococcygeal

10.2. Flexible bronchoscopy with broncho-alveolar lavage

Revisions to the ACHI codes for bronchoscopies were made following receipt of a public submission requesting a specific code for flexible bronchoscopy with broncho-alveolar lavage. ACHI did not distinguish bronchoscopy with broncho-alveolar lavage from bronchoscopy alone as bronchial lavage is an inclusion term at [543] *Examination procedures on bronchus* and [544] *Bronchoscopy with biopsy or removal of foreign body*.

A broncho-alveolar lavage (BAL) is performed during a flexible (fiberoptic) bronchoscopy to obtain samples of alveolar cells. Both BAL and bronchial lavage involve the instillation of saline into the respiratory tract, however a bronchial lavage involves the instillation of saline into the large airways or proximal lung surfaces such as bronchi, while a BAL involves the instillation of saline into the smaller airways and more distal lung surfaces such as the alveoli.

The following changes were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Bronchoscopy (fiberoptic) (with bronchial lavage)
(with fluoroscopic guidance) ~~(with lavage)~~ (with washings) 41898-00 [543]

- with

-- biopsy (bronchus) (lung) 41898-01 [544]

-- broncho-alveolar lavage 41898-02 [544]

-- dilation (bronchial stricture) (tracheal stricture)
41904-00 [546]

-- excision of lesion 41892-01 [545]

--- by laser 41901-00 [545]

-- removal of

--- foreign body 41895-00 41898-03 [544]

--- lesion 41892-01 [545]

--- by laser 41901-00 [545]

--- washings (for specimen collection) 41898-01 [544]

- rigid 41889-00 [543]

-- with

--- biopsy (bronchus) (lung) 41892-00 [544]

...

--- removal of

--- foreign body 41895-00 [544]

--- lesion 41892-01 [545]

--- by laser 41901-00 [545]

--- washings (for specimen collection) 41892-00 [544]

-- through artificial stoma 41889-01 [543]

Lavage — *see also Maintenance*

- alveolar — *see Lavage/broncho-alveolar*
- ~~via bronchoscopy (fiberoptic) 41898-00 [543]~~
- ~~with biopsy 41898-01 [544]~~
- ~~rigid 41889-00 [543]~~
- ~~with biopsy 41892-00 [544]~~
- ~~through artificial stoma 41889-01 [543]~~
- ~~through artificial stoma 41889-01 [543]~~
- anterior chamber (blood) (eye) 42743-00 [185]
- ...
- bronchiole-alveolar
- - via bronchoscopy (fiberoptic) 41898-00 [543]
- - - with biopsy 41898-01 [544]
- ...
- - - through artificial stoma 41889-01 [543]

- broncho-alveolar

- - via bronchoscopy (fiberoptic) 41898-02 [544]
- - - with biopsy 41898-01 [544]
- colon, intraoperative (total) 32186-00 [906]

Removal — *see also Excision*

- foreign body
- - without incision NEC 92201-00 [1908]
- ...
- - bronchus
- - - via bronchoscopy
- - - - fiberoptic 41898-03 [544]
- - - - endoscopic rigid 41895-00 [544]
- - - - cervix (penetrating) 35618-03 [1278]

TABULAR LIST OF INTERVENTIONS

LIST OF ACHI BLOCK NUMBERS

Block No Block Name

- | | |
|-----|---|
| 543 | Examination procedures on bronchus |
| 544 | Bronchoscopy with biopsy, <u>broncho-alveolar lavage</u> or removal of foreign body |
| 545 | Other excision procedures on bronchus |

543 Examination procedures on bronchus

Includes: bronchial lavage
 fluoroscopic guidance
lavage:
 • bronchial
 • broncho-alveolar
washings for specimen collection

41889-00 Rigid bBronchoscopy

Excludes: that through artificial stoma (41889-01 [543])
 that with:
 • biopsy (41892-00 [544])
 • dilation (41904-00 [546])
 • excision of lesion (41892-01, 41901-00 [545])
 • removal of foreign body (41895-00 [544])

41889-01 Bronchoscopy through artificial stoma

Includes: that using:
 • fiberoptic bronchoscope
 • rigid bronchoscope

Excludes: that with:
 • biopsy (41892-00, 41898-01 [544])
 • dilation (41904-00 [546])
 • excision of lesion (41892-01, 41901-00 [545])
 • removal of foreign body (41895-00, 41898-03 [544])

41898-00 Fiberoptic bronchoscopy

Excludes: that through artificial stoma (41889-01 [543])
 that with:
 • biopsy (41898-01 [544])
 • broncho-alveolar lavage (41898-02 [544])
 • dilation (41904-00 [546])
 • excision of lesion (41892-01, 41901-00 [545])
 • removal of foreign body (~~41895-00~~ 41898-03 [544])

544 **Bronchoscopy with biopsy, broncho-alveolar lavage or removal of foreign body**

Includes: bronchial lavage
 fluoroscopic guidance
 transbronchial lung biopsy
 washings for specimen collection

41892-00 Rigid Bronchoscopy with biopsy

41898-01 Fibreoptic bronchoscopy with biopsy

41898-02 Fibreoptic bronchoscopy with broncho-alveolar lavage [BAL]

41895-00 Rigid Bronchoscopy with removal of foreign body

41898-03 Fibreoptic bronchoscopy with removal of foreign body

APPENDIX B: ACHI CODE LIST

ACHI Code	Block
41898-01	544
41898-02	544
41898-03	544
41901-00	545

10.3. High flow nasal cannula (HFNC)

Advice was published in *Coding Q&A*, December 2011, *High flow nasal cannula*, regarding the correct code assignment for high flow nasal cannula (HFNC). HFNC, more commonly known as 'high flow' or 'high flow therapy (HFT)', has been introduced as an alternative to NIV as it delivers air and oxygen at flow rates greater than those traditionally used with a nasal interface.

HFNC is used on patients ranging in ages from preterm infants to adults who receive flow rates for respiratory support in a variety of conditions. Recent studies indicate that HFNC is used in a large number of neonatal intensive care units (NICUs) across Australia and New Zealand, because it reduces nasal trauma, provides continuous positive airways pressure and easier access to infant for breast feeding, parent bonding and neurodevelopmental care.

The following changes were made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Heterograft — see *Xenograft*

HFNC (high flow nasal cannula) (heated)

(humidified) — see *block [570]*

HFT (high flow therapy) (heated) (humidified) — see

block [570]

High flow nasal cannula (HFNC) (heated)

(humidified) — see *block [570]*

Hippocampectomy (amygdala) — see

Lobectomy/brain

Therapy

- helium 92045-00 **[1889]**

- high flow (heated) (HFT) (humidified) (nasal) — see
block [570]

- hyperbaric oxygen (≤ 90 mins) (HBO) 96191-00 **[1888]**

TABULAR LIST OF INTERVENTIONS

Refer section 16.10 *Ventilation – combined ventilatory support in neonates* (page 254) for overlapping changes to block [570].

570 **Noninvasive ventilatory support**

▼ 1006, 1615

Bi-level positive airway pressure [BiPAP]

Continuous positive airway pressure [CPAP]
High flow therapy [HFT] (nasal high flow cannula [HFNC])
 Intermittent mask CPAP
 Intermittent positive pressure breathing [IPPB]
 Intermittent positive pressure ventilation [IPPV]
 Noninvasive mask ventilation [NIMV]
 Noninvasive pressure ventilation [NIPV]

Includes: ventilatory support by:

- face mask
- mouthpiece
- nasal mask/pillows/prongs
- nasal/nasopharyngeal tube

1889

Other therapeutic interventions on respiratory system

92044-00 Other oxygen enrichment

▼1615

Catalytic oxygen therapy
 Cytochrome effect
 Oxygen therapy
 Oxygenators

Excludes: high flow therapy (nasal high flow cannula) (see block [570])
 hyperbaric oxygenation (see block [1888])

AUSTRALIAN CODING STANDARDS

1006 VENTILATORY SUPPORT

DEFINITION

...

Noninvasive ventilation (NIV)

Noninvasive ventilation refers to all modalities that assist ventilation without the use of an ETT or tracheostomy. For the purpose of this standard, noninvasive devices include: face mask, mouthpiece, nasal mask, nasal pillows, nasal prongs, nasal tubes, nasal high flow cannula (high flow therapy) and nasopharyngeal tubes.

TYPES/MODES OF VENTILATORY SUPPORT

...

10.4. Influenza due to certain identified influenza virus

In 2009, the URC of WHO-FIC reviewed the classification of Influenza A/H1N1 (Swine flu) and it was agreed to modify the code title J09 *Influenza due to identified avian influenza virus* to *Influenza due to certain identified influenza virus* to facilitate inclusion of other influenza viruses identified by WHO, such as swine flu. The inclusion term has also been modified to read 'Influenza caused by influenza virus strains of special epidemiological importance with an animal-human or inter-human transmission limited to the inclusions', meaning that only those influenza viruses listed at J09 *Influenza due to certain identified influenza virus* (i.e. A/H1N1 (swine) and A/H5N1 (avian)) may be assigned to this code and that additional virus strains may only be included upon recommendation from WHO.

A 'Use additional code' note was added to specify that pneumonia or other manifestations should also be coded.

Due to the timing of this decision the changes were unable to be included in ICD-10-AM Seventh Edition and therefore have been incorporated into ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Encephalitis (chronic) (haemorrhagic) (idiopathic) (nonepidemic) (spurious) (subacute) G04.9

- in (due to)
- - actinomycosis A42.8† G05.0*

...

- - infectious disease NEC B99† G05.2*
- - influenza (specific virus not identified) J09†, J10.8†, J11.8† G05.1*
- ~~avian influenza virus identified J09† G05.1*~~
- ~~specified influenza virus identified NEC J10.8† G05.1*~~
- - listeriosis A32.1† G05.0*

Encephalopathy

- in (due to)
- - influenza (specific virus not identified) J09†, J10.8†, J11.8† G94.8*
- ~~avian influenza virus identified J09† G94.8*~~
- ~~specified influenza virus identified NEC J10.8† G94.8*~~
- - lack of vitamin (see also *Deficiency/vitamin*) E56.9† G32.8*

Enteritis (diarrhoeal) (haemorrhagic)

- influenzal (specific virus not identified) J11.8
- - ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8

Influenza (specific virus not identified) J11.1

- with
- - digestive manifestations J11.8
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.8~~
- - enteritis J11.8
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8
- - gastroenteritis J11.8
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8
- - involvement of
- - gastrointestinal tract J11.8
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.8~~
- - nervous system NEC J11.8
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.8~~
- - laryngitis J11.1
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.1
- - manifestations NEC J11.8
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8
- - meningismus J11.8
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8
- - myocarditis J11.8† I41.1*
- ~~avian certain identified influenza virus identified J09† I41.1*~~
- - specified influenza virus identified NEC J10.8† I41.1*
- - pharyngitis J11.1
- ~~avian certain identified influenza virus identified J09~~

- - specified influenza virus identified NEC J10.1
- - pleural effusion NEC J11.1
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.1~~
- - pneumonia (any form in J12–J16, J18) J11.0
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.0~~
- - respiratory manifestations NEC J11.1
- ~~avian certain identified influenza virus identified J09~~
- ~~specified influenza virus identified NEC J10.1~~
- - upper respiratory infection (acute) NEC J11.1
- ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.1
- - A/H1N1 (swine) J09
- - A/H5N1 (avian) J09
- - avian (A/H5N1) influenza virus identified J09
- - other J10.1
- - bronchial (see also *Influenza/with/respiratory manifestations*) J11.1

...

- summer, of Italy A93.1
- swine (A/H1N1) J09
- - other J10.1
- virus identified J10.1
- ~~avian J09~~
- ~~specified NEC J10.1~~
- Influenza-like disease** (see also *Influenza*) J11.1

Meningismus R29.1

- influenzal (specific virus not identified) J11.8
- - ~~avian certain identified influenza virus identified J09~~
- - specified influenza virus identified NEC J10.8

Myocarditis (chronic) (fibroid) (interstitial) (old) (progressive) (senile) (with arteriosclerosis) I51.4

- influenzal (specific virus not identified) J11.8† I41.1*
- - ~~avian certain identified influenza virus identified J09† I41.1*~~
- - specified influenza virus identified NEC J10.8† I41.1*

Otitis H66.9

- media H66.9
- - with effusion (nonpurulent) H65.9
- ...
- - in (due to)
- influenza (specific virus not identified) J11.8† H67.1*
- ~~avian certain identified influenza virus identified J09† H67.1*~~
- ~~specified virus identified NEC J10.8† H67.1*~~

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

- with
- - influenza, flu or grippe (specific virus not identified) J11.0
- ~~avian certain identified influenza virus identified J09~~
- - other influenza virus identified J10.0

Polioencephalitis (acute) (bulbar) A80.9

- influenzal (specific virus not identified) J11.8† G05.1*
- - ~~avian certain identified influenza virus identified J09† G05.1*~~
- - specified influenza virus identified NEC J10.8† G05.1*

TABULAR LIST OF DISEASES

CHAPTER 10

DISEASES OF THE RESPIRATORY SYSTEM (J00–J99)

Influenza and pneumonia (J09–J18)

.....

J09 Influenza due to certain identified ~~avian~~ influenza virus

I41* Myocarditis in diseases classified elsewhere

I41.1* Myocarditis in viral diseases classified elsewhere

Influenzal myocarditis (acute) (J09†) (J10.8†) (J11.8†):

• ~~avian influenza virus identified (J09†)~~

• ~~other virus identified (J10.8†)~~

• ~~virus not identified (J11.8†)~~

Mumps myocarditis (B26.8†)

J09

Influenza due to certain identified ~~avian~~ influenza virus

Influenza caused by influenza ~~viruses~~ virus strains of special epidemiological importance with an animal-human or inter-human transmission limited to the inclusions, ~~that normally infect only birds and, less commonly, other animals.~~

Includes: influenza A/H1N1 pandemic 2009 [swine flu]
influenza A/H5N1 epidemic [avian influenza]

Note: Additional virus strains may only be included upon recommendation by WHO.

Use additional code to identify pneumonia or other manifestations.

Excludes: *Haemophilus influenzae*:

• infection NOS (A49.2)

• meningitis (G00.0)

• pneumonia (J14)

10.5. Pneumonia due to gram-negative bacteria (*Indexing*)

A public submission was received suggesting index entries be created for *Pneumonia due to gram-negative bacteria*, and consequently the following amendments have been incorporated into ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

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

- bacterial J15.9

- - Gram-negative NEC J15.6

- - specified NEC J15.8

- basal, basic, basilar — see *Pneumonia/lobar*

...

- in (due to)

...

- - gonorrhoea A54.8† J17.0*

- - Gram-negative bacteria NEC J15.6

- - *Haemophilus influenzae* (*H. influenzae*) J14

TABULAR LIST OF DISEASES

J15

Bacterial pneumonia, not elsewhere classified

J15.6	Pneumonia due to other (aerobic) Gram-negative bacteria Pneumonia due to: Serratia marcescens • <u>Gram-negative bacteria NOS</u> • <u>Serratia marcescens</u>
-------	--

10.6. Respiratory failure, type I and type II

In 2009, the URC of WHO-FIC approved a number of changes to the codes for respiratory failure at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

Respiratory failure is a disease of the lungs which occurs when gas exchange at the lungs is sufficiently impaired to cause a drop in blood levels of oxygen. This may occur with or without an increase in carbon dioxide levels. Respiratory failure is divided into type I and type II, which can also be described as either hypoxic or hypercapnic:

- Type I respiratory failure (hypoxic) involves low oxygen, and normal or low carbon dioxide levels.
- Type II respiratory failure (hypercapnic) involves low oxygen, with high carbon dioxide.

Hypoxic respiratory failure (type I) is the most common form of respiratory failure, and it can be associated with virtually all acute diseases of the lung, which generally involve fluid filling or collapse of alveolar units. Some causes of type I respiratory failure are pulmonary oedema, pneumonia, and pulmonary haemorrhage.

Hypercapnic respiratory failure (type II) is associated with causes such as increased airways resistance (eg, asthma and chronic obstructive pulmonary disease [COPD]), reduced breathing effort, and neuromuscular problems, and severe airway disorders.

Respiratory failure may also be either acute or chronic.

ALPHABETIC INDEX OF DISEASES

Disorder (of) — *see also Disease*

- respiratory function, impaired J96.99
- - acute (type unspecified) J96.09
- - - type I (hypoxic) J96.00
- - - type II (hypercapnic) J96.01
- - chronic (type unspecified) J96.19
- - - type I (hypoxic) J96.10
- - - type II (hypercapnic) J96.11
- - postprocedural J95.8
- - psychogenic F45.34
- - type I (hypoxic), not specified as acute or chronic J96.90
- - type II (hypercapnic), not specified as acute or chronic J96.91
- right hemisphere organic affective F07.8

Failure, failed

- renal — *see Failure/kidney*

- respiration, respiratory (type unspecified) J96.99
- - with
- - - other organ failure, code each site (*see also Failure/organ/multiple*)
- - acute (type unspecified) J96.09
- - - type I (hypoxic) J96.00
- - - type II (hypercapnic) J96.01
- - centre G93.8
- - chronic (type unspecified) J96.19
- - - type I (hypoxic) J96.10
- - - type II (hypercapnic) J96.11
- - newborn P28.5
- - postprocedural J95.8
- - type I (hypoxic), not specified as acute or chronic J96.90
- - type II (hypercapnic), not specified as acute or chronic J96.91
- rotation

TABULAR LIST OF DISEASES

J96

Respiratory failure, not elsewhere classified

The following fifth character subdivisions are for use with subcategories J96.0–J96.9:

- 0 Type I [hypoxic]
- 1 Type II [hypercapnic]
- 9 Type unspecified

J96.0	<u>Acute respiratory failure</u>
J96.1	<u>Chronic respiratory failure</u>
J96.9	<u>Respiratory failure, unspecified</u>

J96.0	Acute respiratory failure
J96.1	Chronic respiratory failure
J96.9	Respiratory failure, unspecified

AUSTRALIAN CODING STANDARDS

0110 SEPSIS, SEVERE SEPSIS AND SEPTIC SHOCK

CLASSIFICATION

Systemic inflammatory response syndrome [SIRS]

EXAMPLE 2:

A 55 year old male admitted to hospital with a diagnosis of severe acute pancreatitis (alcohol-induced) with systemic inflammatory response syndrome and acute multi-organ failure (renal and respiratory).

Codes:	K85.2	<i>Alcohol induced acute pancreatitis</i>
	R65.3	<i>Systemic inflammatory response syndrome [SIRS] of noninfectious origin with acute organ failure</i>
	F10.1	<i>Mental and behavioural disorders due to use of alcohol, harmful use</i>
	N17.9	<i>Acute kidney failure, unspecified</i>
	J96.09	<i>Acute respiratory failure, <u>type unspecified</u></i>

EXAMPLE 3:

A 55 year old male admitted to hospital with a diagnosis of severe acute pancreatitis (alcohol-induced) with systemic inflammatory response syndrome and acute multi-organ failure (renal and respiratory). The patient's condition worsened and a fine needle aspiration of the pancreas revealed pancreatic necrosis. Blood cultures were consistent with a diagnosis of sepsis due to *clostridium perfringens*.

Codes:	K85.2	<i>Alcohol induced acute pancreatitis</i>
	A41.4	<i>Sepsis due to anaerobes</i>
	R65.1	<i>Systemic inflammatory response syndrome [SIRS] of infectious origin with acute organ failure</i>
	F10.1	<i>Mental and behavioural disorders due to use of alcohol, harmful use</i>
	N17.9	<i>Acute kidney failure, unspecified</i>
	J96.09	<i>Acute respiratory failure, <u>type unspecified</u></i>
	30094-05 [977]	<i>Percutaneous needle biopsy of pancreas</i>

Severe sepsis

EXAMPLE 4:

A 38 year old man in respiratory distress was admitted to ICU. He reported a persistent cough and dyspnoea at rest, together with intermittent chills, drenching sweats, and fever. Chest x-ray and blood cultures confirmed a diagnosis of pneumococcal pneumonia. The patient developed acute respiratory failure and severe sepsis was confirmed.

Codes:	J13	<i>Pneumonia due to <i>Streptococcus pneumoniae</i></i>
	R65.1	<i>Systemic inflammatory response syndrome [SIRS] of infectious origin with acute organ failure</i>
	J96.09	<i>Acute respiratory failure, <u>type unspecified</u></i>

...

Septic shock

...

EXAMPLE 5:

A 63 year old male presented to hospital with an open foot wound of prolonged duration. He felt feverish and sluggish. Temperature, respiratory rate and heart rate were all elevated. Wound culture grew staphylococcus. He was transferred to ICU with a diagnosis of severe sepsis. He proceeded to septic shock, with acute multiple organ dysfunction (respiratory and cardiovascular) and despite resuscitation efforts, died on day 3.

Codes:	S91.3	<i>Open wound of other parts of foot</i>
	T89.02	<i>Open wound with infection</i>
	B95.8	<i>Unspecified staphylococcus as the cause of diseases classified to other chapters</i>
	R57.2	<i>Septic shock</i>
	J96.09	<i>Acute respiratory failure, <u>type unspecified</u></i>
	I50.9	<i>Heart failure, unspecified</i>

Assign appropriate external cause, place of occurrence and activity codes.

10.7. Silo-filler's disease (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Disease, diseased — *see also Syndrome*

- silo-filler's J68.8
- - bronchitis J68.0
- - pneumonitis J68.0
- - pulmonary oedema J68.1
- simian B B00.4

Silo-filler's disease J68.8

- bronchitis J68.0
- pneumonitis J68.0
- pulmonary oedema J68.1
- Simian malaria** B53.1

10.8. Ventilation – combined ventilatory support in neonates

Refer section 16.10 Ventilation – combined ventilatory support in neonates (page 254) for details.

10.9. ACS 1008 *Chronic obstructive pulmonary disease*

A public submission noted that the reference to diabetes mellitus in ACS 1008 *Chronic obstructive pulmonary disease* is not relevant to the coding of COPD, and accordingly this sentence has been deleted from ACS 1008 for Eighth Edition.

AUSTRALIAN CODING STANDARDS

1008 CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

...

COPD WITH PNEUMONIA

Clinically, pneumonia may not always exacerbate COPD. It is often the case that clinical documentation is unclear whether pneumonia exacerbates COPD. From a classification point of view, the presence of COPD **with** pneumonia is sufficient to assign J44.0 *Chronic obstructive pulmonary disease with acute lower respiratory infection*. ~~This is similar to diabetes mellitus coding where the 'with' rule applies and it is not necessary for clinical coders to ascertain a cause and effect relationship between the conditions.~~

...

11. Digestive system

11.1. Acute appendicitis with peritonitis

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Appendicitis K37

- with
- - peritoneal abscess K35.3
- - peritonitis (~~localised~~)-(perforation) (rupture) NEC K35.3
- - - generalised K35.2
- - - localised K35.3
- acute (catarrhal) (fulminating) (gangrenous) (obstructive) (retrocaecal) (suppurative) K35.8
- - with
- - - peritoneal abscess K35.3
- - - peritonitis (~~localised~~)-(perforation) (rupture) NEC K35.3
- - - - generalised K35.2
- - - - localised K35.3
- amoebic A06.8

Gangrene, gangrenous (dry) (moist) (skin) (ulcer) (*see also Necrosis*) R02

- appendix K35.8
- - with
- - - peritoneal abscess K35.3
- - - peritonitis (~~localised~~)-(perforation) (rupture) NEC K35.3
- - - - generalised K35.2
- - - - localised K35.3
- arteriosclerotic (general) (senile) — *see Arteriosclerosis/extremities*

Peritonitis (adhesive) (fibrinous) (with effusion) K65.9

- with or following
- - abscess K65.0
- - appendicitis (localised) (perforation) (rupture) NEC K35.3
- - - generalised K35.2
- ...
- diaphragmatic K65.0
- diffuse NEC (*see also Peritonitis/generalised*) K65.0
- diphtheritic A36.8† K67.8*
- disseminated NEC (*see also Peritonitis/generalised*) K65.0
- due to foreign substance accidentally left during a procedure (chemical) (powder) (talc) T81.6
- ...
- ~~generalised(ised)~~ K65.0
- - with or following appendicitis (acute) (perforation) (rupture) NEC K35.2
- gonococcal A54.8† K67.1*
- - pelvis A54.2
- - - female pelvic inflammatory disease A54.2† N74.3*
- localised K65.0
- - with or following appendicitis (acute) (perforation) (rupture) NEC K35.3
- meconium (newborn) P78.0

TABULAR LIST OF DISEASES

K35

Acute appendicitis

- K35.3 Acute appendicitis with localised peritonitis
- Acute appendicitis with:
 - peritoneal abscess
 - peritonitis (rupture) (perforation):
 - localised
 - NOS
 - ~~localised peritonitis (rupture) (perforation)~~
 - ~~peritoneal abscess~~

11.2. Alveolar (process) cleft

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

K08 Other disorders of teeth and supporting structures

K08.8 Other specified disorders of teeth and supporting structures

Alveolar (process) cleft

Enlargement of alveolar ridge NOS

Irregular alveolar process

Toothache NOS

Excludes: congenital cleft of gum (Q38.61)

11.3. Apocrine metaplasia (Indexing)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Metaplasia

- apocrine (breast) ~~R87.-~~ N60.8
- cervix (squamous) R87.-

11.4. Aspiration of peritonsillar abscess

Advice was published in *Coding Q&A*, December 2011, *Aspiration of peritonsillar abscess*, regarding the correct code for this intervention. The ACHI Tabular List and Alphabetic Index have been amended for Eighth Edition to support this advice.

ALPHABETIC INDEX OF INTERVENTIONS

Aspiration

- abscess
- - Bartholin's gland 35520-00 [1290]
- - ...
- - pelvic cavity 30224-01 [987]
- - peritonsillar 41807-00 [409]
- - retroperitoneal 30224-02 [987]

TABULAR LIST OF INTERVENTIONS

409 Incision procedures on tonsils or adenoids

41807-00 Incision and drainage of peritonsillar abscess

Includes: aspiration of peritonsillar abscess

11.5. Balloon dilation for stricture of oesophagus (*Indexing*)

A public submission highlighted an indexing issue regarding *balloon dilation for stricture of oesophagus*. Consequently the following amendment were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Dilation

- biliary tract NEC
- - endoscopic (for stricture) 30494-00 [971]
- - - with stenting 30491-00 [958]
- ...
- stricture
- - anastomotic (endoscopic)
- - - colorectal 32094-00 [917]
- - - oesophagus 41819-00 [862]
- - - - by laser 30479-00 [856]
- - - - with insertion of prosthesis 30490-00 [853]
- - - - balloon (using interventional imaging techniques)
41832-00 [862]
- - - - nonendoscopic 41828-00 [862]
- - - - pneumatic 41831-00 [862]
- - biliary tract NEC
- ...

- - oesophagus
- - - endoscopic 41819-00 [862]
- - - - by laser 30479-00 [856]
- - - - with insertion of prosthesis 30490-00 [853]
- - - - balloon (using interventional imaging techniques)
41832-00 [862]
- - - - pneumatic 41831-00 [862]

ERCP (endoscopic retrograde

- cholangiopancreatography)** (with biopsy) (with brushings) 30484-00 [957]
- with
- - dilation
- - - biliary tract 30494-00 [971]
- - - pancreatic duct 30491-02 [975]
- - excision of lesion (tumour)

11.6. Bile reflux

A previously published coding query highlighted the need for clarification of the code assignment for 'bile reflux'. Following clinical advice, review of the ICD-11 (Beta draft) and other international classification systems, ICD-10-AM was updated for Eighth Edition to specify the classification of bile reflux.

ALPHABETIC INDEX OF DISEASES

Gastritis (simple) K29.70

- atrophic K29.40
- - with haemorrhage K29.41
- bile, biliary (reflux) K29.60
- - with haemorrhage K29.61
- chronic (antral) (fundal) K29.50

Reflux

- bile, biliary (gastritis) K29.60
- - with haemorrhage K29.61
- gastro-oesophageal K21.9

TABULAR LIST OF DISEASES

K29

Gastritis and duodenitis

The following fifth character subdivisions are for use with subcategories K29.2–K29.9:

- ⊛ 0 without mention of haemorrhage
- ⊛ 1 with haemorrhage

K29.6

Other gastritis

Erosion (acute) of stomach
Gastritis due to bile reflux
Giant hypertrophic gastritis
Granulomatous gastritis
Ménétrier's disease

11.7. Bulking injections for faecal incontinence

Advice was published in *Coding Q&A*, October 2010, *PTQ Injections*, regarding the correct code for bulking injections performed for faecal incontinence, a new minimally invasive, treatment involving the injection of a liquid material (PTQ® Implant also known as Bioplastique) into the anal sphincter. When injected into the sphincter muscle it becomes solid and by its bulk improves sphincter function.

Amendments have been incorporated into ACHI for Eighth Edition to support this advice.

ALPHABETIC INDEX OF INTERVENTIONS

Administration (around) (of) — *see also Injection*

- agent (to)
- - for dental procedure 97927-00 [485]
- ...
- - anal fissure 90344-01 [929]
- - - fissure 90344-01 [929]
- - - sphincter, for faecal incontinence (bulking) 90344-01 [929]
- - arrest haemorrhage via surgical peripheral catheterisation — *see Administration/agent/occlude/blood vessel, transcatheter/by site*

Injection (around) (into) (of) — *see also Administration*

- agent (to)
- - anal
- - - fissure 90344-01 [929]
- - - sphincter, for faecal incontinence (bulking) 90344-01 [929]
- - arrest haemorrhage via surgical peripheral catheterisation — *see Embolisation/blood vessel, transcatheter/by site*
- ...
- anal fissure 90344-01 [929]
- - fissure 90344-01 [929]
- - sphincter, for faecal incontinence (bulking) 90344-01 [929]
- angioma 45027-01 [742]

TABULAR LIST OF INTERVENTIONS

929

Application, insertion or removal procedures on rectum or anus

- 90344-01 Administration of other therapeutic agent to anorectal region
- Administration of botulinum toxin into anal fissure
- Injection of agent into anal sphincter for faecal incontinence

11.8. Dental caries with pulp exposure

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Caries

- dental K02.9
- - with pulp exposure K02.5
- dentin (acute) (chronic) K02.1
- ...
- tooth, teeth K02.9
- - with pulp exposure K02.5
- tuberculous A18.0† M90.0-*
- vertebra (column) (tuberculous) A18.0† M49.0-*
- Carious teeth** K02.9
- with pulp exposure K02.5

Carneous mole O02.0

Decay

- dental K02.9
- - with pulp exposure K02.5
- senile R54
- tooth, teeth K02.9
- - with pulp exposure K02.5

Deciduitis (acute), affecting fetus or newborn P00.8

TABULAR LIST OF DISEASES

K02 **Dental caries**

K02.5 Caries with pulp exposure

11.9. Dental services

The Australian Schedule of Dental Services and Glossary, Ninth Edition, was released by the Australian Dental Association (ADA) in 2009. This update was reviewed for inclusion intoACHI and amendments have been made to Chapter 6 *Dental services* ofACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Analysis

- periodontal, clinical, with recording 97221-00 [456]
- tomographic, dental 97083-00 [452]

Anastomosis

Application

- cariostatic agent, topical (dental) 97121-02 [454]
- - concentrated 97123-02 [454]
- cast (fibreglass) (plaster) (plastic) 96092-00 [1870]
- ...
- crown — *see* *Crown/dental*
- dental
- - banding

Bonding

- orthodontic attachment
- - for application of orthodontic force 97862-00 [482]
- tooth fragment 97579-01 [469]
- veneer, to surface of tooth, direct (adhesive tooth-coloured material) 97582-01 [469]

Care

- postoperative
- - dental NEC 97986-00 [490]

Cariescreen 97047-0100 [452]

Carlson-Jampolsky procedure (muscle transplant for strabismus) 42848-00 [216]

Crown, dental

- full — *see also* *Restoration/tooth*
- - acrylic resin, indirect 97611-01 [470]
- ...
- - veneered, indirect 97615-00 [470]
- - - attached to osseointegrated implant 97672-00 [473]
- metallic 97576-00 [469]
- post and root cap, indirect 97629-00 [470]

Densitometry

- bone
- - dual energy x-ray absorptiometry of 12306-00 [1984]
- - quantitative computerised tomography of 12309-00 [1984]

Dentobuff 97047-0100 [452]

Dentocult 97047-0100 [452]

Denture

Fitting

- customised blocks for radiotherapy procedure
- - with construction 90765-03 [1797]
- dental implant abutment (crown) 97661-00 [473]
- - provisional 97662-00 [473]
- denture
- ...
- prosthesis
- - acrylic, dental, with metal frame attached to implants 97666-00 [473]
- - dental
- - - implant abutment (crown) 97661-00 [473]
- - - - provisional 97662-00 [473]
- - limb 96092-00 [1870]

Graft (repair)

- alveolar osseous, per implant 97234-00 [456]
- - for repair of cleft 52337-00 [1690]
- - block 97244-00 [456]
- anophthalmic socket (skin) 42524-00 [164]
- ...
- bone 48239-00 [1569]
- - for
- ...
- - allograft — *see* *Allograft/bone*
- - alveolar, per implant (dental procedure) 97234-00 [456]
- - - for repair of cleft 52337-00 [1690]
- - - block 97244-00 [456]
- - anatomic specific
- - - with en bloc resection of lesion (tumour) of bone
- - - - allograft 50227-00 [1570]
- - - - autograft 50227-01 [1570]

Insertion

- defibrillator, cardiac
- - electrode — *see* *Insertion/electrode(s) lead(s)/cardiac*
- ...
- - patch (epicardial) (myocardial) 38390-00 [649]
- dental pin (for retention) 97575-00 [469]
- - pin (for retention) 97575-00 [469]
- - provisional implant 97689-00 [473]
- device — *see also* *Insertion/by type of device*
- ...
- prosthesis, prosthetic device
- ...
- - wired-in conformer (anophthalmic socket) 42521-00 [164]

- provisional implant, dental 97689-00 [473]
- pseudophakos — see *Insertion/lens, artificial*

Perimetry (manual) (unilateral) 96040-00 [1832]
 - computerised (quantitative) (unilateral) 11224-00 [1832]
 - - bilateral 11221-00 [1832]

Periogard 97046-0097048-01 [452]

Perioscan 97046-0097048-01 [452]

Peritomy

Planing

- tooth root
- - with
- - - alveolar osseous procedure (≤ 8 teeth) 97233-00 [456]
- - - - > 8 teeth 97233-01 [456]
- - - - graft, per implant 97234-00 [456]
- - - - block 97244-00 [456]
- - - curettage, subgingival, per segment of (≤ 8 teeth) 97222-00 [456]

Procedure

- dental
- - alveolar osseous (≤ 8 teeth) 97233-00 [456]
- - - > 8 teeth 97233-01 [456]
- - - graft, per implant 97234-00 [456]
- - - - for alveolar cleft 52337-00 [1690]
- - - - block 97244-00 [456]
- - desensitising 97165-01 [455]

Provision

- appliance
- - dental
- - - diagnostic template 97678-00 [473]
- - - - for surgical implant guide 97679-00 [473]
- - - guide, for immediate denture (surgical) 97779-01 [477]
- - - minor tooth guidance, fixed 97846-01 [480]
- - - passive, fixed 97845-00 [480]
- - oral, for snoring and obstructive sleep apnoea (bi-maxillary) (single arch) 97985-00 [490]
- - orthodontic — see also *Attachment/appliance/orthodontic*
- - -
- - backing, metal, for denture tooth 97739-00 [474]
- - dental
- - - diagnostic template 97678-00 [473]
- - - for surgical implant guide 97679-00 [473]
- denture

Removal — see also *Excision*

- implant
- - abdominal wall (mesh) 90952-00 [987]
- - -
- - dental 97663-00 [473]
- - - for cleaning (with reattachment) 97669-00 [473]
- - - abutment screw (fixture) (with replacement) 97668-00 [473]

- - eye — see also *Removal/implant/orbital*

...

- prosthesis, prosthetic device
- - for gastroschisis 43867-01 [1003]

...

- dental 97663-00 [473]
- - for cleaning (with reattachment) 97669-00 [473]
- - - abutment screw (fixture) (with replacement) 97668-00 [473]
- - duodenal, endoscopic (metal) (plastic) (Wallstent) 92068-02 [892]

Replacement

- defibrillator, generator (automatic) (cardioverter) 38393-01 [656]
- dental
- - abutment screw (fixture) (with removal) 97668-00 [473]
- - implant abutment 97661-00 [473]
- denture

Restoration

- tooth (using) 97511-01 [465]
- - adhesive technique (tooth-coloured material)
- - -
- - coronal (full)
- - - with metallic crown (stainless steel) ~~crown~~ 97576-00 [469]
- - - metallic — see *Restoration/tooth/metallic*

Sampling

- for dental pathology testing
- - activity kit screening test (for)
- - - caries 97047-0097047-01 [452]
- - - periodontal disease 97046-0097048-01 [452]
- - bacteriological 97048-01 [452]
- - blood 97055-00 [452]
- - caries susceptibility test 97048-019 [452]
- - noninvasive collection of sample 97044-00 [452]
- - saliva 97047-01 [452]
- adrenal vein 13839-02 [1858]

Screening

- bacteriological, dental 97048-01 [452]
- risk NEC 96037-00 [1824]
- saliva, dental 97047-01 [452]

Scrotoectomy

Test, testing (for) NEC (see also *Investigation*) 92204-00 [1866]

- screening, dental
- - bacteriological 97048-01 [452]
- - caries
- - - activity kit 97047-0001 [452]
- - - susceptibility test 97048-0199 [452]
- - periodontal 97048-0197046-00 [452]
- - saliva 97047-01 [452]
- sensitivity

TABULAR LIST OF INTERVENTIONS

CONVENTIONS USED IN THE TABULAR LIST OF INTERVENTIONS

...

FORMAT

...

- **Dental services**

This chapter is based on 'The Australian Schedule of Dental Services and Glossary, 28th Edition' published by the Australian Dental Association (ADA) Incorporated. Copies of this publication can be obtained from the ADA, PO Box 520, St Leonards NSW 1590 Australia. The Dental Services chapter is structured on a service basis, for example, diagnostic services, preventative services, periodontics, oral surgery, etc. Secondary axes, in most instances, relate to procedure type. The MBS also contains dental items based on the ADA's item numbers. The MBS dental items are not utilised in ACHI but are listed in ACHI Tabular List Appendix C Mapping table for MBS dental items.

LIST OF ACHI BLOCK NUMBERS

Block No Block Name

454 Topical application of remineralisation and/or cariostatic agent

CHAPTER 6 DENTAL SERVICES (BLOCKS 450–490)

Note: The Australian Classification of Health Interventions (ACHI) Dental Services chapter is based on the Australian Dental Association's (ADA) publication 'The Australian Schedule of Dental Services and Glossary, 8th-9th Edition'.

452 Other dental diagnostic services

~~97046-00 Periodontal disease screening test~~

~~97047-00 Caries activity screening test~~

~~**Includes:** collection of saliva sample~~

97047-01 Saliva screening test

~~97048-00 Caries susceptibility test~~

97048-01 Bacteriological screening test

97083-00 Tomographic analysis

454 Topical application of remineralisation and/or cariostatic agent

Topical fluoride application

Code also when performed:

- removal of plaque (97111-00 [453])

97121-02 Topical application of cariostatic agent, 1 treatment

Includes: activation of agent by laser or other intense light and heat sources

97123-02 Application of concentrated cariostatic agent, per tooth

456 Periodontic interventions

97233-00 Alveolar osseous procedure ≤ 8 teeth

Includes: incision and detachment of gingival flap
planing of root
removal of calculus
reshaping of bone defect or deformity

Excludes: oral osseous graft (97234-00 [456])
oral osseous graft, block (97244-00 [456])
that for crown lengthening (97238-00 [456])

97233-01 Alveolar osseous procedure > 8 teeth

Includes: incision and detachment of gingival flap
planing of root
removal of calculus
reshaping of bone defect or deformity

Excludes: oral osseous graft (97234-00 [456])
oral osseous graft, block (97244-00 [456])
that for crown lengthening (97238-00 [456])

97234-00 Alveolar osseous graft, per tooth or implant
Particulate bone, or a synthetic substitute or other matrix used to replace alveolar bone

Includes: planing of root
removal of calculus
repair }
replacement } of alveolar bone

97244-00 Alveolar osseous graft, block
Block of bone used for augmentation of a bony ridge

Includes: insertion of screws or similar devices

Excludes: particulate bone, synthetic substitute or other matrix used for graft (97234-00 [456])

469 Other restorative dental service

97576-00 ~~Stainless steel~~ Metallic crown
Coronal restoration using stainless steel crown

97579-01 Bonding of tooth fragment
Restoration by direct bonding of a tooth fragment

473 Implant prosthesis

97661-00 Fitting of implant abutment, per abutment
Fitting of final implant abutment or replacement of an existing abutment
Excludes: fitting of provisional implant crown abutment (97662-00 [473])

97662-00 Fitting of provisional implant crown abutment, per abutment
Fitting of provisional implant crown abutment
Excludes: fitting of final implant abutment (97661-00 [473])

97668-00 Removal and replacement of fixture or abutment screw

97678-00 Provision of diagnostic template
Template incorporating radio-opaque markers as reference marks for preferred implant and restoration placement
Excludes: template used as a surgical implant guide (97679-00 [473])

97679-00 Provision of surgical implant guide
Provision of an appliance which indicates the ideal location and angulation for insertion of implants

97689-00 Insertion of provisional implant
Special purpose implant designed with the intention of it being removed at a later stage

490 Miscellaneous dental services

97985-00 Provision of oral appliance for diagnosed snoring and obstructive sleep apnoea
Includes: bi-maxillary oral appliance
single arch oral appliance

APPENDIX B

ACHI Code	Block No		
97044-00	452	97244-00	456
97046-00	452	...	
97047-00	452	97578-00	469
97048-00	452	97579-01	469
97047-01	452	97582-01	469
97048-01	452	...	
97052-00	452	97659-00	472
...		97661-00	473
97082-00	452	97662-00	473
97083-00	452	97663-00	473
97086-00	452	...	
...		97666-00	473
97121-01	454	97668-00	473
97121-02	454	97669-00	473
97123-01	454	...	
97123-02	454	97673-00	473
97131-00	455	97678-00	473
...		97679-00	473
		97689-00	473

11.10. Destruction, lesion, oesophagus

The MBS updates of 2009 and 2010 were reviewed for inclusion in ACHI. A review of MBS item number 30479 highlighted inconsistencies in the inclusion terms at codes 30479-00 [856] *Endoscopic laser therapy to oesophagus*, 30479-01 [931] *Endoscopic laser therapy to rectum* and 30479-02 [908] *Endoscopic laser therapy to large intestine*. This has been amended in the Tabular List, and additional entries have been added to the Alphabetic Index of ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Destruction

- lesion (tumour)
- ...
- - nose, by endoscopic laser 52035-00 [419]
- - oesophagus, by endoscopic
- - - Argon plasma coagulation 30478-19 [856]
- - - diathermy 30478-11 [856]
- - - heater probe coagulation 30478-12 [856]
- - - laser 30479-00 [856]
- - oral cavity, by endoscopic laser 52035-00 [419]

TABULAR LIST OF INTERVENTIONS

856

Destruction procedures on oesophagus

- 30479-00 Endoscopic laser therapy to oesophagus
- Endoscopic laser therapy for oesophageal:
 - benign vascular lesions
 - ~~dilation~~
 - neoplasia
 - stricture

11.11. Drainage haematoma retroperitoneal (*Indexing*)

An inconsistency was identified between the ACHI Alphabetic Index and Tabular List regarding retroperitoneal drainage. This has been amended for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Drainage

- cyst

-- abdominal organ NEC — *see also*

Drainage/cyst/intra-abdominal

...

-- renal 36537-01 [1045]

-- retroperitoneal (open) 30402-00 [987]

-- percutaneous 30224-02 [987]

-- urachal 90952-00 [987]

...

- haematoma

...

-- renal 36537-01 [1045]

-- retroperitoneal (open) 30402-00 [987]

-- percutaneous 30224-02 [987]

-- skin (subcutaneous tissue) 30223-00 [1606]

TABULAR LIST OF INTERVENTIONS

987

Other incision procedures on abdomen, peritoneum or omentum

30224-02 Percutaneous drainage of retroperitoneal abscess, haematoma or cyst

30394-00 Drainage of intra-abdominal abscess, haematoma or cyst

Includes:

appendiceal	}	
iliac fossa	}	
intraperitoneal	}	
pelvic	}	abscess, haematoma or cyst
pouch of Douglas	}	
subhepatic	}	
subphrenic	}	
peritonitis	}	

Code also when performed:

- appendectomy (30571-00 [926])

Excludes: abscess, haematoma or cyst of specified intra-abdominal or pelvic sites classified elsewhere (see Alphabetic Index: Drainage/abscess/by site; Drainage/haematoma/by site; Drainage/cyst/by site) drainage of:

- intra-abdominal abscess, haematoma or cyst:
 - laparoscopic (30394-01 [987])
 - percutaneous (30224-01 [987])
- pouch of Douglas via colpotomy (35572-00 [1280])
- hydatid cyst of:
 - abdominal cavity organ NEC (30434-02, 30436-02 [1002])
 - liver (30434-00, 30436-00, 30438-00 [955])
 - peritoneum (30434-01, 30436-01 [1002])
- retroperitoneal abscess, haematoma or cyst (30402-00, 30224-02 [987])

30402-00 Drainage of retroperitoneal abscess, haematoma or cyst

Drainage of abscess:

- extraperitoneal
- paravertebral

Excludes: percutaneous drainage of retroperitoneal abscess, haematoma or cyst (30224-02 [987])

11.12. Endoluminal fundoplication (ELF)

A public submission requested the introduction of a new ACHI code for *Endoluminal fundoplication*.

Endoluminal fundoplication (ELF) using the EsophyX™ device is a minimally invasive procedure for the treatment of gastro-oesophageal reflux disease (GORD) by reconstructing the gastro-oesophageal valve. The device facilitates the creation of the valve by drawing gastric tissue from the fundus between the body of the device and the tissue mould used to shape each portion of the gastro-oesophageal valve at the gastrooesophageal junction, resulting in the effective elimination of GORD. ELF is also effective in reducing hiatal hernia.

A new code for ELF was created in ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Elevation

...

- mucosal lining

- - with bone graft to floor of maxillary sinus 45849-00 [388]

ELF (endoluminal fundoplication) 30527-06 [886]

Elmslie-Trillat procedure (medial tibial tubercle transfer) 49503-01 [1520]

Endodontics — see *Extirpation/pulp AND Filling(s)/root canal*

Endoluminal fundoplication (ELF) 30527-06 [886]

Fundoplasty

- abdominal approach (Nissen's fundoplication) 30527-02 [886]

- - with

- - - closure of diaphragmatic hiatus 30527-03 [886]

- - - and oesophagogastric myotomy 30533-01 [864]

- - - oesophagoplasty 30529-00 [886]

- endoluminal 30527-06 [886]

- laparoscopic approach (Nissen's fundoplication) 30527-00 [886]

...

- revision 31466-00 [886]

- transoral approach 30527-06 [886]

- transthoracic approach 30527-04 [886]

TABULAR LIST OF INTERVENTIONS

Refer section 11.32 *Procedures for obesity* (page 194) for additional changes to the Excludes note at block [998] *Repair of diaphragmatic hernia*

886

Fundoplasty

30527-06 Fundoplasty, transoral approach
Endoluminal fundoplication (ELF)

Includes: repair of diaphragmatic hiatus (hiatal hernia)

998

Repair of diaphragmatic hernia

Repair of:

- hiatus hernia
- oesophageal hiatus

Excludes: repair of diaphragmatic hernia with fundoplasty (30527-01, 30527-03, 30527-05, 30527-06 [886])

11.13. Endoscopic administration of agent (*Indexing*)

An inconsistency was highlighted regarding the indexing of endoscopic administration of agent. Amendments have been made to the Alphabetic Index of ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Duodenoscopy (double balloon) 30473-00 [1005]

- with
- administration (of) of tattooing agent 30473-07 [1005]
- agent (sclerosing)
- lesion (varices) 30478-07 [870]
- tattooing 30473-07 [1005]
- biopsy 30473-01 [1008]
- ...
- excision
- lesion 30478-04 [1008]
- polyp 30478-04 [1008]
- injection to lesion (varices) 30478-07 [870]
- insertion of jejunal tube 30478-05 [892]
- ...

- resection of mucosa of stomach 90297-01 [880]

— via

- artificial stoma (with biopsy) 32095-00 [891]
- intraoperative enterotomy 30568-00 [893]
- laparotomy (with biopsy) 30569-00 [894]
- via
- artificial stoma (with biopsy) 32095-00 [891]
- intraoperative enterotomy 30568-00 [893]
- laparotomy (with biopsy) 30569-00 [894]

Duodenostomy 30375-01 [897]

Gastroscope 30473-00 [1005]

- with
- administration (of) of tattooing agent 30473-07 [1005]
- agent (sclerosing)
- lesion (varices) 30478-07 [870]
- tattooing 30473-07 [1005]
- banding of gastric varices 30476-03 [874]
- ...
- heater probe coagulation 30478-02 [1007]
- injection to lesion (varices) 30478-07 [870]
- laser coagulation 30478-03 [1007]

Panendoscopy (double balloon) (to duodenum) 30473-00 [1005]

- with
- administration (of) of tattooing agent 30473-07 [1005]
- agent (sclerosing)
- lesion (varices) 30478-07 [870]
- tattooing 30473-07 [1005]
- biopsy (Campylobacter like organism test) (urease test) 30473-01 [1008]
- ...
- excision of lesion (polyp) 30478-04 [1008]
- injection to lesion (varices) 30478-07 [870]
- removal of foreign body 30478-00 [1006]

11.14. Exploratory laparotomy

An inconsistency was highlighted in the ACHI Alphabetic Index under the lead term 'thoracotomy'. Consequently amendments were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Laparotomy

- exploratory (with biopsy) 30373-00 [985]
- performed with any other open intra-abdominal procedure — omit code
- grading — see *Laparotomy/staging, for malignancy*

Thoracotomy

- as operative approach — omit code
- with
- ...
- exploratory (with biopsy) 38418-00 [561]
- performed with any other open thoracic procedure on respiratory system — omit code
- reopening of site, postoperative

TABULAR LIST OF INTERVENTIONS

561

Incision procedures on chest wall, mediastinum or diaphragm

38418-00 Exploratory thoracotomy
Closure of fistula of thoracic duct
Ligation of thoracic duct
Median sternotomy

Includes: biopsy of:

- chest wall
- diaphragm
- mediastinum

Excludes: open biopsy of:

- lung (38418-02 [550])

- mediastinum, via:
 - cervical route (38448-00 [561])
 - mediastinotomy (30320-00 [561])
 - pleura (38418-01 [550])
- that: ~~as operative approach – omit code~~
~~as operative approach – omit code~~
~~performed with any other open thoracic procedure – omit code~~

985

Laparotomy

30373-00 Exploratory laparotomy

Includes: biopsy

Excludes: ~~that: exploration incidental to intra-abdominal surgery – omit code~~
~~as operative approach – omit code~~
~~performed with any other open intra-abdominal procedure – omit code~~

11.15. Functional dyspepsia

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Dyspepsia R10.1(~~allergic~~) (~~congenital~~) (~~functional~~) (~~gastrointestinal~~) (~~occupational~~) (~~reflex~~) K30
 - atonic K30
~~- functional (allergic) (congenital) (gastrointestinal) (occupational) (reflex) K30~~
 - nervous F45.32

TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 11

DISEASES OF THE DIGESTIVE SYSTEM (K00–K93)

Diseases of oesophagus, stomach and duodenum (K20–K31)

....

K30 Functional dDyspepsia

K30

Functional Ddyspepsia

Indigestion

Excludes: dyspepsia:
 • nervous (F45.32)
 • neurotic (F45.32)
 • psychogenic (F45.32)
 heartburn (R12)

R10

Abdominal and pelvic pain

R10.1 Pain localised to upper abdomen

Dyspepsia NOS
 Epigastric pain

Excludes: functional dyspepsia (K30)

R12**Heartburn**

Excludes: dyspepsia;
 • functional (K30)
 • NOS (R10.1)

AUSTRALIAN CODING STANDARDS**1122 HELICOBACTER PYLORI****EXAMPLE 2:**

Patient admitted for gastroscopy following one month of indigestion/dyspepsia. No abnormality detected on gastroscopy, *Helicobacter pylori* detected on CLO test.

Codes: K30 ~~Functional Dyspepsia~~
 30473-01 [1008] Panendoscopy to duodenum with biopsy

In this case, because there is no documented association between the *H. pylori* infection and the dyspepsia, B96.81 is not assigned.

11.16. Gastroenteritis and colitis, drug induced or due to *Clostridium difficile* (Indexing)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Colitis (acute) (catarrhal) (haemorrhagic) (*see also Enteritis*) A09.9

- chronic (*see also Colitis/ulcerative*) K52.9
- Clostridium difficile A04.7
- coccidial A07.3

...

- dietetic K52.2
- drug-induced K52.1
- due to
- - Clostridium difficile A04.7
- - drugs K52.1
- - radiation K52.0
- food hypersensitivity K52.2

...

- infectious (*see also Enteritis/infectious*) A09.0
- - due to Clostridium difficile A04.7
- ischaemic K55.9

...

- spastic K58.9
- - with diarrhoea K58.0
- toxic NEC K52.1
- - due to Clostridium difficile A04.7
- trichomonal A07.8

Diarrhoea, diarrhoeal (disease) (infantile) (summer) A09.9

- dietetic K52.2
- drug-induced K52.1
- due to

- - bacteria A04.9

...

- - Cryptosporidium A07.2
- - drugs K52.1
- - Escherichia coli A04.4

...

- strongyloidiasis B78.0
- toxic NEC K52.1
- - due to Clostridium difficile A04.7
- trichomonal A07.8

Enteritis (diarrhoeal) (haemorrhagic) A09.9

- dietetic K52.2
- drug-induced K52.1
- due to
- - Clostridium difficile A04.7
- - drugs K52.1
- food hypersensitivity K52.2

...

- infectious NEC A09.0
- due to
- - adenovirus A08.2

...

- - Campylobacter A04.5
- - Clostridium
- - - difficile A04.7
- - - Clostridium-perfringens A04.8
- - Enterobacter aerogenes A04.8

...

- staphylococcal A04.8
- toxic NEC K52.1
- - due to Clostridium difficile A04.7
- trichomonal A07.8

Gastroenteritis (acute) (see also *Enteritis*) A09.9

- dietetic K52.2
- drug-induced K52.1
- due to
- - Cryptosporidium A07.2
- - drugs K52.1
- - food poisoning (see also *Intoxication/food-borne*) A05.9

...

- septic A09.0
- toxic NEC K52.1
- - due to Clostridium difficile A04.7
- viral A08.4

Megacolon (acquired) (functional) (in) (not Hirschsprung's disease) K59.3

- Hirschsprung's (disease) (see also *Hirschsprung's disease or megacolon*) Q43.10
 - toxic NEC K59.3
 - - due to Clostridium difficile A04.7
- Megacystitis-megaureter syndrome** Q64.77

TABULAR LIST OF DISEASES

K52 Other noninfective gastroenteritis and colitis

▼ 1120

- K52.1 Toxic gastroenteritis and colitis
Drug-induced gastroenteritis and colitis

Use additional external cause code (Chapter 20) to identify drug or toxic agent.

K59 Other functional intestinal disorders

- K59.3 Megacolon, not elsewhere classified
Dilatation of colon
Toxic megacolon

Use additional external cause code (Chapter 20) to identify toxic agent.

Excludes: megacolon (due to) (in):

- Chagas' disease (B57.3)
- Clostridium difficile (A04.7)
- congenital (aganglionic) (Q43.10)
- Hirschsprung's disease (Q43.10)

11.17. Haemorrhoids

In 2010, the URC of WHO-FIC approved a number of changes to the ICD-10 Tabular List and Alphabetical Index for haemorrhoids. These changes reflect that haemorrhoids are more appropriately classified to Chapter 11 *Diseases of the digestive system*. Additionally, clinical terminology has been updated and haemorrhoids have been classified by degrees. These amendments have been incorporated into ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Refer section 17.3 Ear tag (Indexing) (page 262) for further changes under lead term Tag.

Bleeding (see also *Haemorrhage*) R58

- gastrointestinal NEC K92.2
- haemorrhoids NEC K64.8 — see Haemorrhoids
- intermenstrual (regular) N92.3

Haematoma (skin surface intact) (traumatic) (see also *Contusion*) T14.08

- penis (nontraumatic) N48.8
- - birth trauma P15.5

- - traumatic S30.2
- perianal (nontraumatic) K64.5~~184.3~~
- perineal S30.2

Haemorrhoids (bleeding) (external) (internal) (without mention of degree) K64.9~~184.9~~

- 1st degree (grade/stage I) (without prolapse) K64.0
- 2nd degree (grade/stage II) (with prolapse but retracts spontaneously) K64.1

- 3rd degree (grade/stage III) (with prolapse and requires manual repositioning or reduction) K64.2
- 4th degree (grade stage IV) (with prolapse and cannot be manually repositioned or reduced) K64.3
- ~~bleeding, prolapsed, strangulated or ulcerated NEC I84.8~~
- complicating
- - pregnancy O22.4
- - puerperium O87.2
- ~~external I84.5~~
- ~~bleeding, prolapsed, strangulated or ulcerated I84.4~~
- ~~thrombosed I84.3~~
- ~~internal I84.2~~
- ~~bleeding, prolapsed, strangulated or ulcerated I84.1~~
- ~~thrombosed I84.0~~
- specified NEC K64.8
- strangulated (see also Haemorrhoids/by degree) K64.8
- thrombosed NEC I84.7 (*see also Haemorrhoids/by degree*) K64.8
- ulcerated (see also Haemorrhoids/by degree) K64.8
- Haemosalpinx** N83.6

Tag (hypertrophied skin) (infected) L91.8

- adenoid J35.8
- anus ~~K64.4~~I84.6
- haemorrhoidal K64.4I84.6
- hymen N89.8
- perineal N90.8
- preauricular Q17.02
- ~~rectum I84.6~~
- skin L91.8

Thrombosis, thrombotic (multiple) (progressive) (septic) (vein) (vessel) I82.9

- anal ~~K64.5~~I84.3
- antepartum O22.9
- ...
- penis, penile N48.8
- perianal ~~K64.5~~I84.3
- peripheral arteries I74.4

Ulcer, ulcerated, ulcerating, ulceration, ulcerative L98.4

- anus (solitary) (sphincter) K62.6
- ~~varicose~~ *see Varicose/ulcer/anus*
- aphthous (oral) (recurrent) K12.0
- ...

- gum K06.8
- haemorrhoid (*see also Haemorrhoids/by degree*) K64.8
- heel (*see also Ulcer/lower limb*) L97
- ...

- rectum (solitary) (sphincter) K62.6
- - stercoraceous, stercoral K62.6
- ~~varicose~~ *see Varicose/ulcer/anus*
- retina H30.0
- ...
- varicose (*see also Ulcer/venous*) I83.0
- ~~anus~~ *see Varicose/ulcer/anus*
- - nasal septum I86.8
- - oesophagus I85.9
- - - bleeding I85.0
- ~~rectum~~ *see Varicose/ulcer/anus*
- - scrotum I86.1

Varicose

- ulcer (lower limb, any part) (venous) I83.0
- ~~anus I84.8~~
- ~~external I84.4~~
- ~~internal I84.1~~
- - inflamed or infected I83.2
- - nasal septum I86.8
- - oesophagus I85.9
- - - bleeding I85.0
- ~~rectum~~ *see Varicose/ulcer/anus*
- - scrotum I86.1
- - specified site NEC I86.8
- vein (lower limb) (ruptured) I83.9
- - anus I86.8 *see Haemorrhoids*
- - congenital (peripheral) Q27.8
- ...

- - puerperium (genital) (lower limb) O87.8
- - - anus or rectum O87.2
- - rectum I86.8 *see Haemorrhoids/internal*
- - scrotum (ulcerated) I86.1

Varix (lower limb) (ruptured) I83.9

- aneurysmal I77.0
- anus I86.8 *see Haemorrhoids*
- bladder I86.2
- ...
- puerperium O87.8
- - genital (vagina, vulva, perineum) O87.8
- rectum I86.8 *see Haemorrhoids/internal*
- renal papilla I86.8

TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 9

DISEASES OF THE CIRCULATORY SYSTEM (I00–I99)

Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified (I80–I89)

I83	Varicose veins of lower extremities
I84	Haemorrhoids
I85	Oesophageal varices

CHAPTER 11

DISEASES OF THE DIGESTIVE SYSTEM (K00–K93)

Other diseases of intestines (K55–K64)

K62	Other diseases of anus and rectum
-----	-----------------------------------

K63	Other diseases of intestine
K64	Haemorrhoids and perianal venous thrombosis

CHAPTER 15

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00–O99)

Other maternal disorders predominantly related to pregnancy (O20–O29)

O21	Excessive vomiting in pregnancy
O22	Venous complications <u>and haemorrhoids</u> in pregnancy
O23	Infections of genitourinary tract in pregnancy

Complications predominantly related to the puerperium (O85–O92)

O85	Puerperal sepsis
O86	Other puerperal infections
O87	Venous complications <u>and haemorrhoids</u> in the puerperium
O88	Obstetric embolism

I84

Haemorrhoids

▼0942

Includes: — piles
— varicose veins of anus and rectum

Excludes: — complicating:
— • childbirth and the puerperium (O87.2)
— • pregnancy (O22.4)

I84.0 — Internal thrombosed haemorrhoids

I84.1 — Internal haemorrhoids with other complications

Internal haemorrhoids:

- ▲ bleeding
- ▲ prolapsed
- ▲ strangulated
- ▲ ulcerated

I84.2 — Internal haemorrhoids without complication

Internal haemorrhoids NOS

I84.3 — External thrombosed haemorrhoids

Perianal:

- ▲ haematoma (nontraumatic)
- ▲ thrombosis

I84.4 — External haemorrhoids with other complications

External haemorrhoids:

- ▲ bleeding
- ▲ prolapsed
- ▲ strangulated
- ▲ ulcerated

I84.5 — External haemorrhoids without complication

External haemorrhoids NOS

I84.6 — Residual haemorrhoidal skin tags

Skin tags of anus or rectum

I84.7 — Unspecified thrombosed haemorrhoids

Thrombosed haemorrhoids, unspecified whether internal or external

I84.8 — Unspecified haemorrhoids with other complications

Haemorrhoids, unspecified whether internal or external:

- ▲ bleeding
- ▲ prolapsed
- ▲ strangulated
- ▲ ulcerated

~~I84.9~~ — ~~Unspecified haemorrhoids without complication~~
~~Haemorrhoids NOS~~

CHAPTER 11

DISEASES OF THE DIGESTIVE SYSTEM (K00–K93)

This chapter contains the following blocks:

...
K50–K52 Noninfective enteritis and colitis
K55–K64~~3~~ Other diseases of intestines
K65–K67 Diseases of peritoneum
...

OTHER DISEASES OF INTESTINES (K55–K64~~3~~)

K62 Other diseases of anus and rectum

Includes: anal canal
Excludes: colostomy and enterostomy malfunction (K91.4)
 faecal incontinence (R15)
 haemorrhoids (~~K64.1–K64.4~~)
 ulcerative proctitis (K51.2)

K64 Haemorrhoids and perianal venous thrombosis

Includes: piles
Excludes: complicating:
 • childbirth and the puerperium (O87.2)
 • pregnancy (O22.4)

K64.0 First degree haemorrhoids
Grade/Stage I haemorrhoids (bleeding) (strangulated) (thrombosed) (ulcerated)
Haemorrhoids without prolapse outside of anal canal

K64.1 Second degree haemorrhoids
Grade/Stage II haemorrhoids (bleeding) (strangulated) (thrombosed) (ulcerated)
Haemorrhoids that prolapse on straining but retract spontaneously

K64.2 Third degree haemorrhoids
Grade/Stage III haemorrhoids (bleeding) (strangulated) (thrombosed) (ulcerated)
Haemorrhoids that prolapse on straining and requires manual repositioning/reduction back inside anal canal

K64.3 Fourth degree haemorrhoids
Grade/Stage IV haemorrhoids (bleeding) (strangulated) (thrombosed) (ulcerated)
Haemorrhoids with prolapsed tissue that cannot be manually repositioned/reduced

K64.4 Residual haemorrhoidal skin tags
Skin tags of anus

K64.5 Perianal venous thrombosis
Perianal haematoma

K64.8 Other specified haemorrhoids

K64.9 Haemorrhoids, unspecified
Haemorrhoids (bleeding):
 • NOS
 • without mention of degree

O22 Venous complications and haemorrhoids in pregnancy

O87 Venous complications and haemorrhoids in the puerperium

O99**Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium**

O99.4 Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium

Excludes: cardiomyopathy in the puerperium (O90.3)
 hypertensive disorders (O10–O16)
 obstetric embolism (O88.-)
 venous complications and cerebrovenous sinus thrombosis in:
 • labour, childbirth and the puerperium (~~O87.-~~) (O87.0–O87.1, O87.3–O87.9)
 • pregnancy (~~O22.-~~) (O22.0–O22.3, O22.5–O22.9)

O99.6 Diseases of the digestive system complicating pregnancy, childbirth and the puerperium

Excludes: haemorrhoids in:
 • labour, childbirth and the puerperium (O87.2)
 • pregnancy (O22.4)
 liver disorders in pregnancy, childbirth and the puerperium (O26.6)

APPENDIX B: SPECIAL TABULATION LISTS FOR MORTALITY AND MORBIDITY

TABULATION LIST FOR MORBIDITY

162	Varicose veins of lower extremities	I83
163	Haemorrhoids	K64-I84
164	Other diseases of the circulatory system	I85–I99

ALPHABETIC INDEX OF INTERVENTIONS

Drainage

- haematoma
 - - abdominal wall 90952-00 [987]
 ...
 - - pelvic cavity — see Drainage/haematoma/intra-abdominal
 - - perianal 32147-00 [930]
 - - perinephric (open) (perirenal) 36537-00 [1045]

Evacuation

- haematoma
 - - abdominal wall 90952-00 [987]
 ...
 - - vagina 35572-01 [1280]

- haemorrhoids (~~thrombosed~~) 32138-00 [941]
 - lymphocele 90284-02 [812]

Incision

- haematoma — see Drainage/haematoma OR Evacuation/haematoma
 - haemorrhoids, ~~thrombosed, external~~ 32147-00 [930]
 - hand
 ...
 - perianal (skin) (tissue)
 - - abscess 32174-01 [930]
 - - haematoma 32147-00 [930]
 - - thrombus 32147-00 [930]
 - perineum 90446-00 [1290]

TABULAR LIST OF INTERVENTIONS

930**Incision procedures on rectum or anus**

32147-00 Incision of perianal thrombus
 Incision of ~~external thrombosed haemorrhoids~~
 • haemorrhoids
 • perianal haematoma

941**Procedures for haemorrhoids**

32135-00 Rubber band ligation of haemorrhoids
 ▼0942

Code also when performed:
 • cryosurgery (32135-01 [941])
 • infrared therapy (32135-01 [941])
 • sclerotherapy (32132-00 [941])

32138-00 Haemorrhoidectomy
Excision of ~~external thrombosed~~ haemorrhoids

Includes: excision of anal skin tags

Excludes: haemorrhoidectomy:
• laser (32138-01 [941])
• stapled (32138-02 [941])

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS

SPECIALTY STANDARDS

9. Circulatory system

...

0941 Arterial disease

0942 ~~Banding of haemorrhoids~~

~~0942 BANDING OF HAEMORRHOIDS~~

~~Definition~~

~~External haemorrhoids are aggregations of congested external perianal vascular plexus covered by perianal skin. External haemorrhoids are more correctly termed 'skin tags' or 'perianal haematomas'. They are acutely sensitive and are covered by anoderm (modified skin).~~

~~Internal haemorrhoids are vascular cushions originating from the subepithelial plexus of the anal canal above the dentate line. Internal haemorrhoids are covered by mucosa and are not sensitive.~~

~~Surgical treatment of haemorrhoids includes sclerotherapy, destruction (cauterisation, cryotherapy, infrared therapy), excision (haemorrhoidectomy) or rubber band ligation.~~

~~Rubber band ligation is a procedure applied to internal haemorrhoids only. A proctoscope is used for visualisation and the haemorrhoid is grasped with forceps, then passed through a banding tool with which it is possible to apply a rubber band. The procedure is never performed on external haemorrhoids, as the banding would be extremely painful.~~

~~(Orlay, G (2003), Haemorrhoids – a review, *Australian Family Physician*, Vol 32, No 7: 523–526.)~~

~~Classification~~

~~When a banding/ligation of haemorrhoids is performed with no documentation regarding the type of haemorrhoids, assign a diagnosis code for **internal** haemorrhoids (see Alphabetic Index of Diseases: Haemorrhoids, internal). Assign the procedure code 32135-00 [941] *Rubber band ligation of haemorrhoids*.~~

REFERENCES

National Kidney Foundation Inc. (2002), Kidney Disease Outcome Quality Initiative, Clinical practice guidelines for chronic kidney disease: evaluation, classification and stratification. *American Journal of Kidney Diseases*, Vol 39: S47

~~Orlay, G (2003), Haemorrhoids – a review, *Australian Family Physician*, Vol 3, No 7: 523–526.~~

World Health Organization (1992), *The ICD-10 Classification of Mental and Behavioural Disorders – Clinical Descriptions and Diagnostic Guidelines*, World Health Organization, Geneva.

11.18. Hepatitis, acute non-viral

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hepatitis K75.9

- acute NEC B17.9

- ~~with hepatic failure (see also Failure/hepatic) K72.9~~

- - alcoholic K70.1

- - infectious B15.9

- - - with hepatic coma B15.0

- - non-viral K72.0

- - viral NEC B17.9

- alcoholic (acute) (chronic) K70.1

...

- neonatal (giant cell) (idiopathic) (toxic) P59.2

- non-viral NEC K75.9

- - acute K72.0

- postimmunisation (see also Hepatitis/viral/type B) B16.9

TABULAR LIST OF DISEASES

K72

Hepatic failure, not elsewhere classified

Includes:

hepatic:

• coma NOS

• encephalopathy NOS

hepatitis:

• ~~acute~~ }

• fulminant } NEC, with hepatic failure

• malignant }

liver (cell) necrosis with hepatic failure

yellow liver atrophy or dystrophy

Excludes:

alcoholic hepatic failure (K70.4)

hepatic failure complicating:

• abortion or ectopic or molar pregnancy (O00–O07, O08.8)

• pregnancy, childbirth and the puerperium (O26.6)

icterus of fetus and newborn (P55–P59)

viral hepatitis (B15–B19)

with toxic liver disease (K71.1)

K72.0

Acute and subacute hepatic failure

Acute non-viral hepatitis NOS

11.19. Hepatobiliary disease (Indexing)

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Calculus, calculi, calculous

- hepatic (duct) K80.5-

- hepatobiliary K80.8-

- intestinal (impaction) (obstruction) K56.4

Disease, diseased — see also Syndrome

- hepatic — see *Disease/liver*

- hepatobiliary K83.9

- - toxic K71.9

- herpesviral, disseminated B00.7

Neoplasm, neoplastic	Malignant		In situ	Benign	Uncertain or unknown behaviour
	Primary	Secondary			
- hepatic	C22.9	C78.7	D01.5	D13.4	D37.6
- - duct (bile)	C24.0	C78.8	D01.5	D13.5	D37.6
- - flexure (colon)	C18.3	C78.5	D01.0	D12.3	D37.4
- - primary	C22.9	—	D01.5	D13.4	D37.6
- <u>hepatobiliary</u>	C24.9	C78.8	D01.5	D13.9	D37.6
- hilus of lung	C34.0	C78.0	D02.2	D14.3	D38.1

Obstruction, obstructed, obstructive

- hepatic K76.8
- duct (noncalculous) K83.1
- hepatobiliary K83.1
- ileum (*see also* *Obstruction/intestine*) K56.6

11.20. Hernia

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 for the classification of hernia. The changes provided a distinction between secondary hernias (such as incisional hernia, parastomal hernia) and primary hernias; as the mechanism and the optimum management of these two types of hernia can differ in regard to the risks and prognosis, including diverse new surgical techniques and methods of treatment. An incisional hernia is an abdominal wall protrusion formed at the incision line of a previous surgery. A parastomal hernia is a similar complication formed at the site of a stoma formation. These updates were also reviewed and approved by Australian gastroenterologists and the changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hernia, hernial (acquired) (recurrent) K46.9

- double (inguinal) — *see* *Hernia/inguinal/bilateral*
- epigastric — *see* *Hernia/ventral* K43.9
- - with
- - - gangrene (and obstruction) K43.7
- - - obstruction K43.6
- external (inguinal) — *see* *Hernia/inguinal*
- ...
- Hesselbach's — *see* *Hernia/femoral*, *by type*
- hiatal (oesophageal) (sliding) K44.9
- - with
- - - gangrene (and obstruction) K44.1
- - - obstruction K44.0
- - congenital Q40.1
- hypogastric K43.9
- - with
- - - gangrene (and obstruction) K43.7
- - - obstruction K43.6
- incarcerated (*see also* *Hernia/by site/with obstruction*) K46.0
- - with gangrene — *see* *Hernia/by site/with gangrene*
- incisional — *see* *Hernia/ventral* K43.2
- - with
- - - gangrene (and obstruction) K43.1
- - - obstruction K43.0
- indirect (inguinal) — *see* *Hernia/inguinal*
- ...
- mesenteric (internal) — *see* *Hernia/abdomen*
- midline K43.9
- - with
- - - gangrene (and obstruction) K43.7
- - - obstruction K43.6
- muscle (sheath) M62.8-
- ...
- para-oesophageal (*see also* *Hernia/diaphragm*) K44.9
- - congenital Q40.1

- parastomal K43.5

- - with
- - - gangrene (and obstruction) K43.4
- - - obstruction K43.3
- ~~parastomal K43.4~~
- paraumbilical — *see* *Hernia/umbilicus*
- ...
- sliding (inguinal) (*see also* *Hernia/inguinal*) K40.9-
- - hiatus — *see* *Hernia/hiatal*
- spigelian — *see* *Hernia/ventral* K43.9
- - with
- - - gangrene (and obstruction) K43.7
- - - obstruction K43.6
- spinal (*see also* *Spina bifida*) Q05.9-
- - with hydrocephalus (*see also* *Spina bifida/with hydrocephalus*) Q05.4-
- strangulated (*see also* *Hernia/by site/with obstruction*) K46.0
- - with gangrene (*see also* *Hernia/by site/with gangrene*) K46.1
- subxiphoid K43.9
- - with
- - - gangrene (and obstruction) K43.7
- - - obstruction K43.6
- supraumbilical — *see* *Hernia/ventral*
- ...
- ventral K43.9
- - with
- - - gangrene (and obstruction) K43.47
- - - obstruction K43.06
- vesical

Hesitancy of micturition R39.1

Hesselbach's hernia — *see* *Hernia/femoral/specified site* *NEG*

Heterochromia (congenital) Q13.2

TABULAR LIST OF DISEASES

K43

Ventral hernia

Includes: hernia:
 • epigastric
 • hypogastric
 • incisional
 • midline
 • parastomal
 • spigelian
 • subxiphoid

K43.0 ~~Ventral~~Incisional hernia with obstruction, without gangrene

~~Ventral~~Incisional hernia:
 • causing obstruction }
 • incarcerated } without gangrene
 • irreducible }
 • strangulated }

Includes: that with adhesions

K43.1 ~~Ventral~~Incisional hernia with gangrene

Gangrenous ~~ventral~~incisional hernia

K43.2 Incisional hernia without obstruction or gangrene

Incisional hernia NOS

K43.3 Parastomal hernia with obstruction, without gangrene

Parastomal hernia:
 • causing obstruction }
 • incarcerated } without gangrene
 • irreducible }
 • strangulated }

Includes: that with adhesions

K43.4 Parastomal hernia with gangrene

Gangrenous parastomal hernia

K43.5 Parastomal hernia without obstruction or gangrene

Parastomal hernia NOS

K43.6 Other and unspecified ventral hernia with obstruction, without gangrene

Hernia (epigastric) (hypogastric) (midline) (spigelian) (subxiphoid):
 • causing obstruction }
 • incarcerated } without gangrene
 • irreducible }
 • strangulated }

Includes: that with adhesions

K43.7 Other and unspecified ventral hernia with gangrene

Hernia:
 • epigastric }
 • hypogastric } with gangrene
 • midline }
 • spigelian }
 • subxiphoid }

K43.9 Other and unspecified ~~V~~ventral hernia without obstruction or gangrene

Hernia:
 • epigastric }
 • hypogastric } without obstruction or gangrene
 • midline }
 • spigelian }
 • subxiphoid }

Ventral hernia NOS

11.21. Ileocolic resection

Advice was published in *Coding Matters*, September 2009 (Vol. 16, No. 2) regarding the classification of ileocolic resection, which highlighted that there was no specific ACHI code for this procedure. Ileocolic resection, also referred to as ileocelectomy or ileocaecal resection, involves resection of about 15 to 30 centimetres of the terminal ileum and cecum, with an anastomosis created between the ileum and ascending colon. It is the most frequently performed surgical procedure for the treatment of Crohn's disease.

Advice was received from the Colorectal Surgical Society of Australia & New Zealand (CSSANZ) in updating the classification, and consequently the following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Anastomosis

- ileoanal
- - with
- - - closure of ileostomy (without resection) 30562-01 [899]
- - - - with resection (anal mucosa) (rectum) 32060-00 [934]
- - - proctocolectomy, total 32051-00 [936]
- - - - and formation of temporary ileostomy 32051-01 [936]
- ileocaecal — *see* *Anastomosis/ileocolic*
- ileocolic, ileocolonic 30515-01 [897]
- - with resection — *see* *Resection/ileocolic*
- ileocolonic 30515-01 [897]
- ileorectal, with total colectomy 32012-00 [913]

Enterocolostomy 30515-01 [897]

- with resection — *see* *Resection/ileocolic*

Enteroenterostomy 30515-02 [897]

Formation (of)

- duodenostomy 30375-01 [897]
- enterocolostomy (*see also* *Resection/ileocolic*) 30515-01 [897]
- enteroenterostomy 30515-02 [897]

- - with gastrectomy, partial

...

- - small to large intestine (*see also* *Resection/ileocolic*) 30515-01 [897]
- - small to small intestine 30515-02 [897]

Ileectomy (with anastomosis) 30566-00 [895]

- with formation of
- - reservoir — *see* *Formation/reservoir*
- - stoma 30565-00 [895]

Ileocelectomy — *see* *Resection/ileocolic*

Ileoscopy (double balloon) (via panendoscopy) 30473-05 [1005]

Resection — *see also* *Excision*

- hepatic duct, radical (common bile duct) 30463-00 [966]
- - with resection of segment of liver 30464-00 [966]
- ileocaecal — *see* *Resection/ileocolic*
- ileocolic (with anastomosis) 30515-03 [913]
- - with formation of stoma 30515-05 [913]
- - - via laparoscopy 30515-06 [913]
- - via laparoscopy 30515-04 [913]
- intestine

TABULAR LIST OF INTERVENTIONS

Refer section 11.23 *Laparoscopic colectomy* Laparoscopic colectomy (page 187) for additional changes to block [913] *Colectomy*.

897

Stomas of small intestine

- 30515-01 Enterocolostomy
Ileocolonic anastomosis

Excludes: that with:

- resection (30515-03, 30515-04 [913])
- resection with formation of stoma (30515-05, 30515-06 [913])

- 30515-02 Enteroenterostomy
Roux-en-Y reconstruction

- Excludes:* duodenoduodenostomy (43807-00 [897])
duodenojejunostomy (43807-00 [897])
that with partial gastrectomy (30503-02 [876], 30497-02 [877], 30503-05 [878])

- 30515-03 Ileocolic resection with anastomosis
Resection of (terminal) ileum and colon with anastomosis
- 30515-04 Laparoscopic ileocolic resection with anastomosis
Resection of (terminal) ileum and colon with anastomosis, via laparoscopy
- 30515-05 Ileocolic resection with formation of stoma
Enterocolostomy with formation of stoma
Resection of (terminal) ileum and colon with formation of stoma
- 30515-06 Laparoscopic ileocolic resection with formation of stoma
Laparoscopic:
 - enterocolostomy with formation of stoma
 - resection of (terminal) ileum and colon with formation of stoma

11.22. Insertion, artificial bowel sphincter

The MBS updates of 2009 and 2010 were reviewed for inclusion into ACHI.

Two new item numbers were introduced in March 2009 for insertion, removal and revision of an artificial bowel sphincter for severe faecal incontinence. ACHI Seventh Edition contained several codes for these procedures in block [940] *Other repair procedures on rectum and anus* which have been revised for ACHI Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Refer section 2.5 Chemotherapy wafer insertion (page 25) for further changes under lead term Insertion.

Adjustment

- AICD (automatic implantable cardioverter defibrillator) (see also *Test, testing/defibrillator*)
90203-06 [656]
- anal sphincter, artificial ~~90769-04~~32221-00 [940]
- artificial sphincter
 - - bowel ~~90769-04~~32221-00 [940]
 - - urinary 37390-00 [1124]
- assistive or adaptive device, aid or equipment NEC
96092-00 [1870]
- bowel sphincter, artificial ~~90769-04~~32221-00 [940]
- cannula
 - ...
 - pulse generator (subcutaneous)
 - - anal, gracilis neosphincter 32210-01 [940]
 - rectal sphincter, artificial ~~90769-04~~32221-00 [940]
 - seton (for)
 - - anal fistula 32166-01 [929]
 - sphincter, artificial
 - - bowel ~~90769-04~~32221-00 [940]
 - - urinary 37390-00 [1124]
 - spinal fixation (instrumentation) 50616-00 [1393]

Insertion

- anal sphincter, artificial ~~90769-00~~32220-00 [940]
- anal stimulator, electrical 32206-00 [940]
- ...
- artificial sphincter
 - - bowel ~~90769-00~~32220-00 [940]
 - - urinary (see also *Insertion/urinary sphincter, artificial*) 37387-00 [1113]
- ...

- bone
- - conduction hearing 41557-02 [321]
- - growth stimulator 47920-00 [1554]
- bowel sphincter, artificial ~~90769-00~~32220-00 [940]
- button
 - ...
 - receiver (neurostimulator) (radiofrequency) — see *Insertion/neurostimulator*
- rectal sphincter, artificial ~~90769-00~~32220-00 [940]
- reservoir
 - ...
 - sphincter, artificial
 - - bowel ~~90769-00~~32220-00 [940]
 - - urinary (see also *Insertion/urinary sphincter/artificial*) 37387-00 [1113]

Removal — see also Excision

- allograft, skin 90666-00 [1629]
- - to burn 90666-01 [1629]
- anal sphincter, artificial ~~90769-02~~32221-01 [940]
- - with replacement ~~90769-04~~32221-00 [940]
- ...
- artificial sphincter
 - - bowel ~~90769-02~~32221-01 [940]
 - - - with replacement ~~90769-04~~32221-00 [940]
 - - urinary 37390-02 [1113]
- ...
- bowel sphincter, artificial ~~90769-02~~32221-01 [940]
- - with replacement ~~90769-04~~32221-00 [940]
- brachytherapy applicator (catheters) (needles)
15339-00 [1793]
- ...

- rectal sphincter, artificial 90769-0232221-01 [940]
- - with replacement 90769-0432221-00 [940]
- reservoir

- ...
- sphincter, artificial
- - bowel 90769-0232221-01 [940]
- - - with replacement 90769-0432221-00 [940]
- - urinary 37390-02 [1113]

Replacement

- AICD (automatic implantable cardioverter defibrillator) 38393-01 [656]
- anal sphincter, artificial 90769-0432221-00 [940]
- aneurysm, with graft (prosthesis)
- ...
- artificial sphincter
- - bowel 90769-0432221-00 [940]
- - urinary 37390-01 [1113]
- assistive or adaptive device, aid or equipment NEC 96092-00 [1870]
- blood, complete (adult) 92206-00 [1893]
- - in infant 13306-00 [1893]
- bowel sphincter, artificial 90769-0432221-00 [940]
- bridge

- ...
- rectal sphincter, artificial 90769-0432221-00 [940]
- reservoir

- ...
- sphincter, artificial
- - bowel 90769-0432221-00 [940]
- - urinary 37390-01 [1113]

Reprogramming

- pacemaker (implanted) (pulse generator) (testing)
- - anal, gracilis neosphincter (closed) 90770-00 [1859]
- - - open 90769-0432221-00 [940]
- - cardiac 11718-00 [1856]

Revision (partial) (total)

- amputation stump 44376-00 [1566]
- - finger 46483-00 [1471]
- - hand 46483-00 [1471]
- anal sphincter, artificial 90769-0432221-00 [940]
- anastomosis
- ...
- artificial sphincter
- - bowel 90769-0432221-00 [940]
- - urinary 37390-00 [1124]
- blepharoptosis repair by levator sutures adjustment 45625-00 [1687]
- bowel sphincter, artificial 90769-0432221-00 [940]
- cannula
- ...
- rectal sphincter, artificial 90769-0432221-00 [940]
- release procedure for talipes equinovarus (unilateral) 50324-00 [1546]
- ...
- sphincter, artificial
- - bowel 90769-0432221-00 [940]
- - urinary 37390-00 [1124]

Test, testing (for) NEC (see also Investigation)

- 92204-00 [1866]
- pacemaker (electrode) (implanted) (pulse generator) (reprogramming)
- - anal, gracilis neosphincter (closed) 90770-00 [1859]
- - - open 90769-0432221-00 [940]
- - cardiac 11718-00 [1856]

Training — see also Retraining

- pacemaker (electrode(s)) (implanted) (pulse generator)
- - anal, gracilis neosphincter (closed) 90770-00 [1859]
- - - open 90769-0432221-00 [940]
- skills (in) 96151-00 [1879]

TABULAR LIST OF INTERVENTIONS

940 Other repair procedures on rectum or anus

- 90769-0032220-00 Insertion of artificial bowel sphincter
Excludes: adjustment or replacement (90769-0432221-00 [940])

- 90769-0432221-00 Revision of artificial bowel sphincter
 Adjustment }
 Replacement } of artificial bowel sphincter

- 90769-0232221-01 Removal of artificial bowel sphincter
Excludes: that ~~for~~with replacement (90769-0432221-00 [940])

1859 Digestive system diagnostic tests, measures or investigations

- 90770-00 Testing of implanted anal pacemaker
Includes: measurement of stimulus:
 • amplitude
 • rate
 • width
 reprogramming
 training
Excludes: that with incision (90769-0432221-00 [940])

11.23. Laparoscopic colectomy

A public submission was received regarding *laparoscopic colectomy*. Laparoscopy has gained wide acceptance in gastrointestinal surgery, including surgery for benign and malignant colorectal diseases and is associated with advantages such as faster return to normal activity and diet, reduced postoperative pain and reduced hospital stay. The introduction of laparoscopic colectomy began in 1991 and recently, studies have also shown that laparoscopic surgery for colorectal cancer is a safe and acceptable alternative for open surgery.

The following amendments were made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Anastomosis

- ileorectal, with total colectomy 32012-00 [913]
- - via laparoscopy 32012-01 [913]
- kidney 90350-00 [1059]

Caecectomy (with anastomosis) 32003-00 [913]

- with
- - excision of lesion of peritoneal tissue 90328-01 [989]
- - stoma formation 32000-00 [913]
- - - via laparoscopy 32000-02 [913]
- via laparoscopy 32003-02 [913]

Caecoappendicostomy (continent) 30375-30 [927]

Colectomy

- left (with anastomosis) 32006-00 [913]
- - with stoma formation 32006-01 [913]
- - - via laparoscopy 32006-03 [913]
- - via laparoscopy 32006-02 [913]
- limited (local) (with anastomosis) 32003-00 [913]
- - with stoma formation 32000-00 [913]
- - - via laparoscopy 32000-02 [913]
- - via laparoscopy 32003-02 [913]
- local — see *Colectomy/limited*
- right (with anastomosis) 32003-01 [913]
- - with stoma formation 32000-01 [913]
- - - via laparoscopy 32000-03 [913]
- - extended 32005-01 [913]
- - - with stoma formation 32004-01 [913]
- - - - via laparoscopy 32004-03 [913]
- - - via laparoscopy 32005-03 [913]
- - via laparoscopy 32003-03 [913]
- sigmoid (with anastomosis) 32003-00 [913]
- - with stoma formation 32000-00 [913]
- - - via laparoscopy 32000-02 [913]
- - via laparoscopy 32003-02 [913]
- subtotal (with ileosigmoid anastomosis) 32005-00 [913]
- - with stoma formation 32004-00 [913]
- - - via laparoscopy 32004-02 [913]
- - via laparoscopy 32005-02 [913]
- total (with ileorectal anastomosis) 32012-00 [913]
- - with stoma formation 32009-00 [913]
- - - via laparoscopy 32009-01 [913]
- - via laparoscopy 32012-01 [913]

Collection

Colostomy 30375-04 [915]

- with rectosigmoidectomy (Hartmann's procedure) 32030-00 [934]
- - via laparoscopy 32030-01 [934]
- loop 30375-28 [915]

Excision — see also *Removal*

- rectosigmoid junction 32030-00 [934]
- - perineal 32112-00 [934]
- - via laparoscopy 32030-01 [934]
- rectum — see also *Resection/rectum*
- - rectosigmoid junction 32030-00 [934]
- - - perineal 32112-00 [934]
- - - via laparoscopy 32030-01 [934]
- remnant

Formation (of)

- colostomy 30375-04 [915]
- - with rectosigmoidectomy (Hartmann's procedure) 32030-00 [934]
- - - via laparoscopy 32030-01 [934]
- - loop 30375-28 [915]
- ...
- ileostomy (permanent) 30375-01 [897]
- - with
- - - colectomy, total 32009-00 [913]
- - - - via laparoscopy 32009-01 [913]
- - - proctocolectomy, total — see *Proctocolectomy*

Hartmann's procedure (rectosigmoidectomy) (with formation of stoma) 32030-00 [934]

- closure of 32033-00 [917]
- via laparoscopy 32030-01 [934]

Harvesting — see *Procurement*

Hemicolectomy

- left (with anastomosis) 32006-00 [913]
- - with formation of stoma 32006-01 [913]
- - - via laparoscopy 32006-03 [913]
- - via laparoscopy 32006-02 [913]
- right (with anastomosis) 32003-01 [913]
- - with formation of stoma 32000-01 [913]
- - - via laparoscopy 32000-03 [913]
- - extended (with anastomosis) 32005-01 [913]
- - - with formation of stoma 32004-01 [913]
- - - - via laparoscopy 32004-03 [913]
- - - via laparoscopy 32005-03 [913]
- - via laparoscopy 32003-03 [913]

Hemihepatectomy 30418-00 [953]

Ileostomy (permanent) 30375-01 [897]

- with
- - colectomy, total 32009-00 [913]
- - - via laparoscopy 32009-01 [913]
- - proctocolectomy, total — see *Proctocolectomy*

Procedure

- Hartmann's (rectosigmoidectomy) (with formation of stoma) 32030-00 [934]
- - closure 32033-00 [917]
- - via laparoscopy 32030-01 [934]
- heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-00 [666]

Rectosigmoidectomy (Hartmann's procedure) (with formation of stoma) 32030-00 [934]

- perineal 32112-00 [934]
- via laparoscopy 32030-01 [934]

Redo procedure — see *Reoperation*

Revision (partial) (total)

- anastomosis
- - intestine
- - - large 32003-00 [913]
- - - - via laparoscopy 32003-02 [913]

- - - small 30566-00 [895]

Sigmoidcolectomy (with anastomosis) 32003-00 [913]

- with
- - excision of lesion of peritoneal tissue (mesentery) (omentum) 90328-01 [989]
- - stoma formation 32000-00 [913]
- - - via laparoscopy 32000-02 [913]
- via laparoscopy 32003-02 [913]

Sigmoidectomy (with anastomosis) 32003-00 [913]

- with
- - excision of lesion of peritoneal tissue (mesentery) (omentum) 90328-01 [989]
- - stoma formation 32000-00 [913]
- - - via laparoscopy 32000-02 [913]
- via laparoscopy 32003-02 [913]

Sigmoidopexy 90951-00 [917]

TABULAR LIST OF INTERVENTIONS

Refer section 11.21 Ileocolic resection (page 184) for additional changes to block [913] Colectomy.

913 Colectomy

32003-02 Laparoscopic limited excision of large intestine with anastomosis

Laparoscopic:

- caecectomy } with anastomosis
- local excision of colon } with anastomosis
- sigmoidcolectomy }
- sigmoidectomy }

Includes: resection of splenic flexure

32000-02 Laparoscopic limited excision of large intestine with formation of stoma

Laparoscopic:

- caecectomy }
- local excision of colon } with formation of stoma
- sigmoidcolectomy }
- sigmoidectomy }

Includes: resection of splenic flexure

32003-03 Laparoscopic right hemicolectomy with anastomosis

Resection of ascending colon, hepatic flexure and part of the transverse colon (mid transverse colon) with anastomosis, via laparoscopy

32000-03 Laparoscopic right hemicolectomy with formation of stoma

Resection of ascending colon, hepatic flexure and part of the transverse colon (mid transverse colon) with formation of stoma, via laparoscopy

32005-03 Laparoscopic extended right hemicolectomy with anastomosis

Resection of ascending colon, hepatic flexure and transverse colon to the splenic flexure with anastomosis, via laparoscopy

32004-03 Laparoscopic extended right hemicolectomy with formation of stoma

Resection of ascending colon, hepatic flexure and transverse colon to the splenic flexure with formation of stoma, via laparoscopy

32006-00 Left hemicolectomy with anastomosis

- Includes:** resection of:
- descending } colon
 - sigmoid }
 - splenic flexure

32006-02 Laparoscopic left hemicolectomy with anastomosis

Includes: resection of:
• descending } colon
• sigmoid }
• splenic flexure

32006-01 Left hemicolectomy with formation of stoma

Includes: resection of:
• descending } colon
• sigmoid }
• splenic flexure

32006-03 Laparoscopic left hemicolectomy with formation of stoma

Includes: resection of:
• descending } colon
• sigmoid }
• splenic flexure

32005-00 Subtotal colectomy with anastomosis

Includes: resection of:
• ascending } colon
• descending } colon
• hepatic } flexure
• splenic } flexure
• transverse } colon

32005-02 Laparoscopic subtotal colectomy with anastomosis

Includes: resection of:
• ascending } colon
• descending } colon
• hepatic } flexure
• splenic } flexure
• transverse } colon

32004-00 Subtotal colectomy with formation of stoma

Includes: formation of mucous fistula
• ascending } colon
• descending } colon
• hepatic } flexure
• splenic } flexure
• transverse } colon

32004-02 Laparoscopic subtotal colectomy with formation of stoma

Includes: formation of mucous fistula
resection of:
• ascending } colon
• descending } colon
• hepatic } flexure
• splenic } flexure
• transverse } colon

32012-01 Laparoscopic total colectomy with ileorectal anastomosis

32009-01 Laparoscopic total colectomy with ileostomy

Includes: formation of mucous fistula

934 Rectosigmoidectomy or proctectomy

32030-01 Laparoscopic rectosigmoidectomy with formation of stoma
Hartmann's procedure via laparoscopy

AUSTRALIAN CODING STANDARDS

Refer section 26.3 Minimally invasive procedures proceeding to open procedure (page 289) for changes to ACS 0019 Procedure not completed or interrupted.

11.24. Lupoid hepatitis

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hepatitis K75.9

- interstitial (chronic) K74.6
- lupoid NEC ~~K73.2~~ K75.4
- malignant (with hepatic failure) NEC K72.9

TABULAR LIST OF DISEASES

K73 Chronic hepatitis, not elsewhere classified

- K73.2 Chronic active hepatitis, not elsewhere classified
~~Lupoid hepatitis NEC~~

K75 Other inflammatory liver diseases

- K75.4 Autoimmune hepatitis
Lupoid hepatitis NEC

11.25. Malone antegrade continence enema (MACE) (Indexing)

A public submission highlighted that the abbreviation 'MACE' (Malone antegrade continence enema) is provided as an inclusion term at 30375-30 [927] *Appendicostomy* but is not indexed. Consequently the ACHI Alphabetical Index has been amended for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

MACE (Malone antegrade continence enema) 30375-30 [927]

MACI (matrix-induced autologous chondrocyte implantation) 14203-01 [1906]

Maggot debridement therapy (MDT) 96210-00 [1604]

Maintenance (of)

...

- vascular
- - access device (infusion port) (Port-A-Cath) (reservoir) 13939-02 [1922]
- - catheter (central venous catheter) (Hickman's line) (permacath) (without reservoir) 92058-01 [1922]
- Malone antegrade continence enema (MACE)
30375-30 [927]
- Mammoplasty — see *Mammoplasty*

11.26. Mucosal resection of polyp(s) (*Indexing*)

A public submission was received regarding *endoscopic mucosal resection* (EMR). Over recent years EMR is increasingly being used for removal of colorectal polyps and is described as the least invasive alternative to standard polypectomy. Amendments have been made to ACHI to specify mucosal resection of polyps for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Colonoscopy (beyond hepatic flexure) (fiberoptic) (long) (to caecum) 32090-00 [905]

- with

-- administration of tattooing agent 32090-02 [905]

...

-- polypectomy (by bipolar cautery) (mucosal resection) (multiple) (using hot biopsy forceps) (using snare technique) 32093-00 [911]

-- resection of mucosa of large intestine 90297-02 [914]

- through artificial stoma 32090-00 [905]

- to hepatic flexure (short) 32084-00 [905]

-- with

--- administration of tattooing agent 32084-02 [905]

--- biopsy (multiple) 32084-01 [911]

--- destruction of lesion 90308-00 [908]

--- excision of

---- lesion 90959-00 [914]

----- anal 90315-00 [933]

----- skin tag, anal (multiple) 32087-00 [911]

--- polypectomy (by bipolar cautery) (mucosal resection) (multiple) (using hot biopsy forceps) (using snare technique) 32087-00 [911]

- through artificial stoma 32084-00 [905]

Proctosigmoidoscopy (fiberoptic) (flexible) 32084-00 [905]

- with

-- biopsy 32084-01 [911]

...

-- polypectomy (by bipolar cautery) (mucosal resection) (using hot biopsy forceps) (using snare technique) 32087-00 [911]

- rigid 32075-00 [904]

Resection

- mucosa, endoscopic

-- large intestine 90297-02 [914]

--- for polypectomy — *see Polypectomy*

-- oesophagus 90297-00 [861]

Sigmoidoscopy (fiberoptic) (flexible) 32084-00 [905]

- with

-- biopsy 32084-01 [911]

...

-- polypectomy (by bipolar cautery) (mucosal resection) (using hot biopsy forceps) (using snare technique) 32087-00 [911]

- rigid 32075-00 [904]

TABULAR LIST OF INTERVENTIONS

911

Fiberoptic colonoscopy with excision

32087-00 Fiberoptic colonoscopy to hepatic flexure, with polypectomy
Colonoscopy to hepatic flexure, with multiple polypectomies
Flexible sigmoidoscopy with polypectomy
Short colonoscopy with polypectomy

Includes: polypectomy by or using:

- bipolar cautery
- hot biopsy forceps
- mucosal resection
- snare technique

32093-00 Fiberoptic colonoscopy to caecum, with polypectomy
Colonoscopy to caecum, with multiple polypectomies
Long colonoscopy with polypectomy

Includes: polypectomy by or using:

- biopolar cautery
- hot biopsy forceps
- mucosal resection
- snare technique

914

Other excision procedures on large intestine

90297-02 Endoscopic mucosal resection of large intestine

Excludes: destruction of lesion of large intestine (see block [908])

mucosal resection of polyps (see blocks [910] and [911])
polypectomy via endoscopy (see blocks [910] and [911])

11.27. Nasoalveolar/nasolabial cyst (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Cyst (colloid) (mucous) (retention) (simple)

- nabothian (follicle) (ruptured) N88.8
- nasoalveolar ~~K09.8~~K09.1
- nasolabial ~~K09.8~~K09.1
- nasopalatine (duct) K09.1

TABULAR LIST OF DISEASES

K09 Cysts of oral region, not elsewhere classified

- K09.1 Developmental (nonodontogenic) cysts of oral region
 Cyst (of):
- ~~nasolabial~~ ~~[nasoalveolar]~~ ~~globulomaxillary~~
 - ~~nasopalatine duct~~ ~~[incisive canal]~~ ~~incisive canal~~
 - ~~median palatal~~
 - ~~nasopalatine~~
 - ~~palatine papilla~~
- K09.8 Other cysts of oral region, not elsewhere classified
- | | | |
|------------------------------|---|----------|
| Dermoid cyst | } | |
| Epidermoid cyst | } | of mouth |
| Lymphoepithelial cyst | } | |
| Epstein's pearl | | |
| Nasoalveolar cyst | | |
| Nasolabial cyst | | |

11.28. Ogilvie syndrome and mucous colitis (*Indexing*)

A public submission was received regarding the indexing of *Ogilvie syndrome* and *mucous colitis*. Ogilvie syndrome, also known as acute colonic pseudo-obstruction, is a disorder where the colon becomes massively dilated and sometimes involves the small intestine in the absence of mechanical obstruction. Ogilvie syndrome presents with signs, symptoms and radiographic appearance of an acute large bowel obstruction but without evidence of distal colonic obstruction. Mucous colitis, more commonly referred to as irritable bowel syndrome (IBS) or irritable colon, is a common disorder of the large bowel that causes irregular bowel habits and recurrent abdominal pain and bloating. Consequently, amendments have been made to the ICD-10-AM Alphabetical Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Colitis (acute) (catarrhal) (haemorrhagic) (*see also*

- Enteritis*) A09.9
- microsporidial A07.8
- mucosal, mucous — *see Irritable/bowel OR Irritable/colon*
- noninfectious K52.9

Oestriasis (*see also Myiasis*) B87.9

Ogilvie syndrome K56.6

Oguchi's disease H53.6

Pseudo-obstruction

- intestine (chronic) (functional) (idiopathic) (intermittent secondary) (primary) K59.8
- - acute K56.6
- oesophagus, congenital Q39.82

Syndrome — see also Disease

- oculomotor H51.9
- Ogilvie K56.6
- ophthalmoplegia H49.8

11.29. Percutaneous biopsy of retroperitoneal mass

A public submission was received regarding the indexing of *percutaneous biopsy of retroperitoneal mass*. The following changes have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Biopsy

- abdomen wall (open) 30075-17 [988]
- - intra-abdominal — see *Biopsy/by specific site OR Biopsy/intra-abdominal mass*
- - retroperitoneal — see *Biopsy/retroperitoneal mass*
- - skin of — see *Biopsy/skin*
- ...

- renal — see also *Biopsy/kidney*
- - pelvis
- - - brush (closed) (endoscopic) 36821-00 [1047]
- retroperitoneal mass (closed) (needle) (percutaneous) 30094-06 [988]
- salivary gland or duct (closed) (needle) (percutaneous) 30094-09 [397]

TABULAR LIST OF INTERVENTIONS

988

Biopsy of abdomen, peritoneum or omentum

- 30094-06 Percutaneous needle biopsy of intra-abdominal mass
Percutaneous needle biopsy of retroperitoneal mass

11.30. Peritoneal eosinophilia (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Eosinophilia (allergic) (hereditary) D72.1

- peritoneal — see *Peritonitis*
- pulmonary NEC J82

Peritonitis (adhesive) (fibrinous) (with effusion) K65.9

- due to foreign substance accidentally left during a procedure (chemical) (powder) (talc) T81.6
- eosinophilic K65.8
- - acute K65.0
- fibrocaceous (tuberculous) A18.3† K67.3*

11.31. Peritonectomy/cytoreduction surgery (CRS)

A public submission requested a new ACHI code for the classification of peritonectomy/cytoreduction surgery.

Peritonectomy or cytoreduction surgery (CRS) is a multimodal procedure performed for the treatment of peritoneal neoplasms, with the aim of removing all peritoneal tumour deposits in patients with diagnoses such as peritoneal carcinomatosis, ovarian cancer, appendiceal cancer and pseudomyxoma. It is an extensive procedure that takes approximately 8 to 12 hours to perform. The type of surgical procedure

required for cytoreduction varies with each patient. Is usually performed in combination with heated intraoperative intraperitoneal chemotherapy (HIPEC) which involves perfusing the abdominal cavity with heated (40–48 °C) fluid containing a chemotherapeutic agent for 60 to 90 minutes after the peritonectomy procedures.

In response to the public submission the following changes were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Cystourethroscopy — see *Cystoscopy*
Cytoreduction surgery (CRS) 96211-00 [989]

Peritomy
 - conjunctiva 42632-01 [252]
Peritonectomy 96211-00 [989]
Peritoneography 59760-00 [1977]

TABULAR LIST OF INTERVENTIONS

989 Other excision procedures on abdomen, peritoneum or omentum

96211-00 Peritonectomy
 Cytoreduction surgery (CRS)

Note: Multimodal procedure performed for the treatment of peritoneal neoplasms, with the aim of removing all peritoneal tumours. The combination of surgical procedures required for cytoreduction varies with each patient.

Code also when performed:

- excision of abdominal, peritoneal or pelvic lesion (see Alphabetic Index)
- intraperitoneal chemotherapy:
 - early postoperative [EPIC] (96201-00 [1920])
 - heated (intraoperative) [HIPEC] (92178-00 [1880] and 96201-00 [1920])
 - postoperative [IPEC] (96201-00 [1920])
- removal abdominal, peritoneal or pelvic organ (see Alphabetic Index)
- repair procedures (see Alphabetic Index)
- resection procedures (see Alphabetic Index)

11.32. Procedures for obesity

Numerous queries regarding duodenal switch and sleeve gastrectomy highlighted the need to review block [889] *Procedures for morbid obesity* in ACHI to align with recent advances in the field of obesity surgery. Revision of block [889] was achieved through extensive consultation with the Obesity Surgery Society of Australia and New Zealand (OSSANZ). ACHI codes were included for each type of obesity surgery performed, including open, laparoscopic and endoscopic approaches where appropriate for:

- Sleeve gastrectomy
- Adjustable and nonadjustable gastric banding
- Gastric bypass
- Biliopancreatic diversion
- Gastroplasty
- Duodenal-jejunal bypass
- Ileal interposition
- Gastric balloon

In addition to the ACHI codes in block [889] *Procedures for obesity*, there are also codes in block [881] *Gastrostomy, gastro-enterostomy or gastro-gastrostomy* and block [1604] *Other application, insertion or removal procedures on skin and subcutaneous tissue* for implantation of neurostimulators, as these can also be performed for obesity.

The following changes were made to ACHI for Eighth Edition for procedures for obesity.

ALPHABETIC INDEX OF DISEASES

Hernia, hernial (acquired) (recurrent) K46.9

- Cooper's — *see* *Hernia/abdomen/specific site NEC*
- crural — *see* *Hernia/femoral*
- - diaphragm, diaphragmatic — *see* *Hernia/diaphragm, diaphragmatic*
- - femoral — *see* *Hernia/femoral*
- diaphragm, diaphragmatic K44.9

ALPHABETIC INDEX OF INTERVENTIONS

Access, accessing

- gastric band reservoir (port) (~~reservoir~~) 14215-0100 [889]

Achillotenotomy 49718-01 [1542]

Addition

- fluid to gastric band reservoir (port) (saline) 14215-0100 [889]
- spring, to removable appliance (orthodontic) 97877-01 [483]

Adjustment

- electrode(s) (for)
- ...
- - spinal — *see* *Adjustment/electrode(s)/epidural*
- - vagus nerve (for obesity) 39131-01 [67]
- expander, tissue (skin) (soft tissue) (subcutaneous tissue) (valve) 45566-03 [1661]
- - breast 45548-02 [1758]
- gastric band reservoir (deflation) (inflation) (port) 14215-0100 [889]
- generator
- ...
- rectal sphincter, artificial 90769-01 [940]
- reservoir, gastric band (port) 14215-01 [889]
- seton (for)

Advocacy 96108-00 [1915]

AGB (adjustable gastric banding) 30511-04 [889]

Allied health intervention — *see also specific interventions*

Banding

- artery — *see also* *Ligation/artery*
- - pulmonary, main 38715-00 [717]
- gastric, for obesity (adjustable) (~~for morbid obesity~~) (with replacement) 30511-00 [889]
- - adjustable (AGB) NEC 30511-04 [889]
- - - laparoscopic (LAGB) 30511-0204 [889]
- - laparoscopic NEC 30511-02 [889]
- - nonadjustable (fixed) (NGB) 30511-05 [889]
- - - laparoscopic (LNGB) 30511-03 [889]
- haemorrhoids 32135-00 [941]

Biliopancreatic diversion (BPD), for obesity (open) 30512-02 [889]

- with
- - cholecystectomy 30512-02 [889]
- - - laparoscopic 30512-01 [889]
- - duodenal switch (BPD-DS) 30512-02 [889]
- - - laparoscopic (LBPD-DS) 30512-01 [889]
- - gastrectomy (distal) (sleeve) 30512-02 [889]
- - - laparoscopic 30512-01 [889]
- laparoscopic 30512-01 [889]

Bonding

- ...
- veneer, to surface of tooth, direct (adhesive tooth-coloured material) 97582-01 [469]
- BPD (biliopancreatic diversion)** — *see* *Biliopancreatic diversion (BPD), for obesity*
- BPD-DS (biliopancreatic diversion with duodenal switch)** — *see* *Biliopancreatic diversion (BPD), for obesity/with/duodenal switch*
- Brace** — *see* *Immobilisation*

Brushings — *see* *Biopsy*

BSG (banded sleeve gastrectomy) — *see* *Gastrectomy/sleeve/for obesity*

BSSLT (bilateral sequential single lung transplant) 90172-00 [555]

Bypass

- dental
- - fractured endodontic instrument 97453-00 [464]
- duodenal-jejunal, for obesity (DJ bypass) 90940-00 [889]
- extracranial to intracranial
- ...
- gastric (~~for morbid obesity~~) 30512-00 [889]
- - for reversal of procedure for morbid obesity 30514-00 [889]
- - for obesity (banded) (loop) (mini gastric) (ring) (Roux-en-Y) 30512-00 [889]
- - - laparoscopic 30512-03 [889]
- - with

Cholecystectomy 30443-00 [965]

- as part of biliopancreatic diversion (~~open~~) 30512-02 [889] — *see* *Biliopancreatic diversion (BPD), for obesity/with/cholecystectomy*
- laparoscopic 30512-01 [889]
- with choledochotomy 30454-01 [965]

Deflation

- gastric band reservoir (~~for morbid obesity~~) (port) (saline) 14215-0100 [889]

Delay

Diversion

- biliopancreatic (~~open~~) 30512-02 [889] — *see* *Biliopancreatic diversion (BPD), for obesity*
- laparoscopic 30512-01 [889]
- submandibular duct (for control of drooling) 30255-00 [397]

DJ bypass (duodenal-jejunal bypass) 90940-00 [889]

Dohman's procedure (endoscopic resection of pharyngeal pouch) 41773-00 [421]

Duhamel procedure (retrorectal pull-through procedure) 43993-01 [934]

Duodenal switch, for obesity (DS) 30512-02 [889]

- with biliopancreatic diversion (BPD-DS) — see

Biliopancreatic diversion (BPD), for obesity/with duodenal switch

- laparoscopic (LDS) 30512-01 [889]

Duodenal-jejunal bypass, for obesity (DJ bypass) 90940-00 [889]

Duodenectomy (with anastomosis) 30566-00 [895]

Endoluminal sleeve, for obesity 90943-02 [889]

Endometrectomy

Gastrectomy

- for control of bleeding peptic ulcer 30509-00 [880]

- longitudinal, for obesity — see

Gastrectomy/sleeve/for obesity

- partial

...

- - distal

- - - as part of biliopancreatic diversion 30512-02 [889]

- - - - laparoscopic 30512-01 [889]

- - - with anastomosis

...

- radical 30524-00 [879]

- - subtotal, distal 30523-00 [879]

- sleeve (SG)

- - for obesity (banded) 30511-10 [889]

- - - as part of

- - - - biliopancreatic diversion (with duodenal switch)

30512-02 [889]

- - - - - laparoscopic 30512-01 [889]

- - - - duodenal-jejunal bypass 90940-00 [889]

- - - ileal interposition 90941-00 [889]

- - - laparoscopic 30511-09 [889]

- - for procedure(s) other than obesity 30523-00 [879]

- subtotal (distal) (radical) 30523-00 [879]

- total (with anastomosis) 30521-00 [879]

- tube, for obesity — see *Gastrectomy/sleeve/for obesity*

- vertical, for obesity — see *Gastrectomy/sleeve/for obesity*

Gastric sleeve, for obesity — see

Gastrectomy/sleeve/for obesity

Gastroduodenostomy 30515-00 [881]

- for morbid obesity 30512-00 [889]

- - laparoscopic 30512-03 [889]

— reversal procedure 30514-00 [889]

- with vagotomy (selective) (truncal) 30496-02 [884]

Gastroenterostomy 30515-00 [881]

- for morbid obesity 30512-00 [889]

- - laparoscopic 30512-03 [889]

— reversal procedure 30514-00 [889]

- with

- - pancreaticoduodenectomy 30584-00 [978]

- - vagotomy (selective) (truncal) 30496-02 [884]

Gastrogastrostomy 30375-31 [881]

Gastrojejunostomy 30515-00 [881]

- for morbid obesity 30512-00 [889]

- - laparoscopic 30512-03 [889]

— reversal procedure 30514-00 [889]

- with

- - pancreaticoduodenectomy 30584-00 [978]

- - vagotomy (selective) (truncal) 30496-02 [884]

Gastropexy 30530-00 [886]

Gastroplasty, for obesity (open) (VBG) (vertical banded) 30511-08 [889]

— for morbid obesity 30511-00 [889]

- endoscopic 30511-07 [889]

- laparoscopic 30511-06 [889]

Gastrorrhaphy 90342-02 [887]

Identification

- denture 97777-00 [477]

Ileal interposition, for obesity 90941-00 [889]

Ileectomy (with anastomosis) 30566-00 [895]

Implant, implantation — see also Insertion

- electromagnetic hearing device 41557-02 [321]

- endoluminal sleeve, for obesity 90943-02 [889]

- expander (tissue) 45566-00 [1661]

...

- stimulator

- - bone growth (by incision) 47920-00 [1554]

- - - noninvasive placement (nonoperative) 92139-00 [1870]

- - - gastric, for obesity (IGS) 39134-01 [1604]

- - skeletal muscle 90561-00 [1554]

Inflation

- gastric band reservoir (for morbid obesity) (port) (saline) 14215-0100 [889]

- tissue expander (skin) (soft tissue) (subcutaneous tissue) 45566-01 [1661]

Insertion

- balloon

- - for arrest of nasal haemorrhage 41677-00 [373]

- - - anterior (Little's area) (with cauterisation) (with diathermy) 41677-00 [373]

- - - posterior (with cauterisation) (with diathermy) 41656-00 [373]

- - gastric (bubble) 90950-00 [889]

- - pump, intra-aortic (IABP) 38362-00 [682]

...

- electrode(s) lead(s)

...

- - scalp, fetal (for monitoring) 16514-00 [1341]

- - vagus nerve (for obesity) 39138-00 [67]

- electromagnetic hearing device 41557-02 [321]

...

- gastric balloon, for obesity bubble (balloon) 90950-00 [889]

- gastrostomy button 30483-00 [870]

Ladd procedure (correction of malrotation of intestine) 43801-00 [916]

LAGB (laparoscopic adjustable gastric banding) 30511-0204 [889]

Laminectomy

Laying open

- fistula, anal 90338-00 [930]

- pilonidal sinus 30676-00 [1659]

LBPD (laparoscopic biliopancreatic diversion) 30512-01 [889]

LBPD-DS (laparoscopic biliopancreatic diversion with duodenal switch) 30512-01 [889]

Le Fort procedure

Ligation

- band

- - gastric, for obesity (for morbid obesity) 30511-00 [889] — see *Banding/gastric, for obesity*

- bronchus 90165-00 [547]

...

- fraenulum, fraenum
- - labial (lips) 30281-00 **[401]**
- - lingual (tongue) 30278-02 **[390]**
- gastric band, for obesity — *see* Banding/gastric, for obesity
- haemorrhoids (rubber band) 32135-00 **[941]**

LLETZ (large loop excision of transformation zone) 35647-00 **[1275]**

LNGB (laparoscopic nonadjustable gastric banding) 30511-03 **[889]**

Loading, drug delivery device (CADD) (external infusion pump) 96209 **[1920]**

Lowering

- floor of mouth
- - by vestibuloplasty (Obwegeser technique) (open) (oral) 45837-01 **[406]**
- - - submucosal 45837-00 **[406]**

LSG (laparoscopic sleeve gastrectomy) 30511-09 **[889]**

Lumpectomy (breast) 31500-00 **[1744]**

Neurotomy

- vestibular (via posterior cranial fossa) 39500-00 **[73]**
- - retrolabyrinthine approach 41596-00 **[331]**
- - - with cochlear nerve division 41596-02 **[331]**
- - translabyrinthine approach 41593-00 **[331]**

NGB (nonadjustable gastric banding) 30511-05 **[889]**

NIMV (noninvasive mask ventilation) — *see block* **[570]**

Plication

- fascia 30238-00 **[1574]**
- gastric, for obesity — *see* Gastroplasty, for obesity
- mesentery 90329-03 **[1000]**

Procedure

- for
- - alimentary continuity (primary restoration)
- - -
- - malrotation of intestine (Ladd operation) 43801-00 **[916]**
- - morbid obesity
- - - by
- - - banding, gastric (adjustable) (stapling) 30511-00 **[889]**
- - - laparoscopic 30511-01 **[889]**
- - - revision 14215-00 **[889]**
- - - biliopancreatic diversion (open) 30512-02 **[889]**
- - - laparoscopic 30512-01 **[889]**
- - - gastric bypass (gastroduodenostomy) (gastroenterostomy) (gastrojejunostomy) 30512-00 **[889]**
- - - revision 30514-00 **[889]**
- - - inflation (saline) 14215-00 **[889]**
- - - insertion of gastric bubble (balloon) 90950-00 **[889]**
- - - LAGB (laparoscopic adjustable gastric banding) 30511-01 **[889]**
- - - stapling 30511-00 **[889]**
- - - nystagmus (Anderson-Kestenbaum)
- - -
- - obesity NEC (*see also specific procedure(s) performed*) 90943-00 **[889]**
- - - for revision of procedure for obesity 30514-01 **[889]**
- - - endoscopic 90943-02 **[889]**
- - - laparoscopic 90943-01 **[889]**

- - orbital dystopia
- - -
- sclera NEC 90072-00 **[184]**
- - buckling
- - - for repair of retinal detachment 42776-00 **[212]**
- Scopinaro, for obesity 30512-02 **[889]**
- - laparoscopic 30512-01 **[889]**
- scrotum NEC 90398-01 **[1176]**

Reduction

- gastric, for obesity (for morbid obesity) 30511-00 **[889]** — *see* Banding/gastric, for obesity
- - for reversal of procedure for morbid obesity 30514-00 **[889]**
- - laparoscopic 30511-01 **[889]**
- hernia — *see also* Repair/hernia
- -
- stomach, for obesity (for morbid obesity) 30511-00 **[889]** — *see* Banding/gastric, for obesity
- - for reversal of procedure for morbid obesity 30514-00 **[889]**
- tongue

Removal — *see also* Excision

- assistive or adaptive device, aid or equipment 96094-00 **[1870]**
- balloon pump, intra-aortic 38612-00 **[682]**
- - with closure of artery by patch graft 38613-00 **[693]**
- - gastric, for obesity 90950-01 **[889]**
- - pump, intra-aortic 38612-00 **[682]**
- - - with closure of artery by patch graft 38613-00 **[693]**
- band
- - from detached retina (encircling) (silicone) 42812-00 **[209]**
- - gastric, for obesity — *see* Removal/gastric/band
- - pharyngeal (lateral) 41804-01 **[421]**
- bladder stimulator, electronic 90359-01 **[1091]**
- -
- electrode(s) lead(s)
- -
- - spinal — *see* Removal/electrode(s) lead(s)/epidural
- - vagus nerve (for obesity) 39136-02 **[67]**
- encephalocele (with closure) 40109-00 **[22]**
- -
- flap
- - oral mucosa, dental procedure 97377-00 **[460]**
- - skull, infected 39906-00 **[13]**
- fluid from gastric band reservoir (port) (saline) 14215-01 **[889]**
- foreign body
- - without incision NEC 92201-00 **[1908]**
- -
- - wrist (open) 49212-00 **[1443]**
- - - arthroscopic (closed) 49221-01 **[1443]**
- gastric bubble (balloon) 90305-00 **[890]**
- - balloon 90950-01 **[889]**
- - band (adjustable) (fixed) (nonadjustable) (open) 90942-00 **[889]**
- - - with replacement — *see* Banding/gastric, for obesity
- - - endoscopic 90942-02 **[889]**
- - - laparoscopic 90942-01 **[889]**
- - - with replacement — *see* Banding/gastric, for obesity
- - - reservoir 31441-01 **[889]**
- - - with removal of band — *see* Removal/gastric/band
- neurostimulator, for obesity (IGS) 39135-00 **[1604]**
- generator
- -

- reservoir
- - gastric band, for obesity — see Removal/gastric/band/reservoir
- - Rickham's 90001-01 [4]
- ...
- urinary sphincter, artificial 37390-02 [1113]
- - with replacement 37390-01 [1113]
- vagal block, for obesity 39135-00 [1604]
- valve

Repair

- crown (direct) 97659-00 [472]
- - indirect 97658-00 [472]
- crural, with obesity procedure — see block [889]
- cyst, duplication — *see Repair/duplication*
- ...
- gallbladder NEC 90320-00 [971]
- gastric band reservoir (port) 31441-00 [889]
- gastroschisis
- ...
- hernia
- - by manual reduction 92071-00 [1899]
- ...
- - diaphragmatic (hiatus)
- - - with
- - - body wall flap or prosthetic patch (congenital) 43837-02 [998]
- - - fundoplasty — *see Fundoplasty*
- - - obesity procedure — see block [889]
- - - abdominal approach 30601-00 [998]
- ...
- renal pelvis — *see Pyeloplasty*
- reservoir, gastric band (port) 31441-00 [889]
- retina, retinal

Replacement

- electrode(s) lead(s)
- - cardiac (for)
- ...
- - sacral nerve 36664-00 [67]
- - vagus nerve (for obesity) 39137-01 [67]
- external fixation device NEC 96092-00 [1870]
- ...
- flap, skull 40600-02 [23]
- gastric band reservoir (port) 31441-00 44215-00 [889]
- generator
- ...
- reservoir
- - gastric band (port) 31441-00 44215-00 [889]
- - Rickham's (ventricular) 39015-01 [3]

Repositioning

- gastric band reservoir (port) 31441-00 [889]
- generator
- ...
- pacemaker, cardiac 90203-05 [655]
- reservoir, gastric band (port) 31441-00 [889]

Reversal (of)

- Hartmann's procedure 32033-00 [917]
- procedure for
- - morbid obesity (surgical) 30514-01 [889]
- - sterilisation

Revision (partial) (total)

- electrode(s) (for)

- - cardiac
- ...
- - spinal — *see Revision/electrode(s)/epidural*
- - vagus nerve (for obesity) 39131-01 [67]
- erection device, artificial (complete) 37432-01 [1201]
- ...
- fundoplasty 31466-00 [886]
- gastric band reservoir (port) 44215-00 31441-00 [889]
- generator
- ...
- peritoneal access device (port-catheter) 90376-01 [983]
- procedure for obesity (surgical) 30514-01 [889]
- prosthesis
- ...
- reservoir
- - colonic 32029-01 [918]
- - gastric band (port) 31441-00 [889]
- - ileostomy 32069-01 [902]

Roux-en-Y procedure (enteroenterostomy) 30515-02 [897]

- with
- - gastrectomy, partial
- - - and vagotomy (selective) (truncal) 30497-02 [877]
- - - following previous procedure for peptic ulcer disease 30503-02 [876]
- - - with vagotomy (selective) (truncal) 30503-05 [878]
- - gastric bypass, for obesity (RYGB) 30512-00 [889]
- - laparoscopic (LRYGB) 30512-03 [889]
- - oesophagectomy

Sclerotomy (exploratory) 42644-05 [178]

Scopinaro procedure, for obesity 30512-02 [889]

- laparoscopic 30512-01 [889]

Scraping

Severing of blepharorrhaphy 90090-00 [231]

SG (sleeve gastrectomy) — *see Gastrectomy/sleeve*

Shaving

Sleeve gastrectomy (SG) — *see Gastrectomy/sleeve*

Sling procedure

Stapling

- epiphyseal — *see Epiphysiodesis*
- gastric, for obesity (for morbid obesity) 30511-00 [889] — *see Gastroplasty, for obesity*
- for reversal of procedure for morbid obesity 30514-00 [889]

Steindler release (plantar fasciotomy) 49854-00 [1530]

Suture (laceration)

- gallbladder 90342-03 [971]
- gastric, for obesity — *see Gastroplasty, for obesity*
- hepatic duct 30472-00 [971]

Withdrawing

- fluid
- - from
- - - gastric band reservoir (port) 14215-01 [889]
- - - implanted catheter (peritoneal) NEC 92058-01 [1922]

TABULAR LIST OF INTERVENTIONS

Refer section 11.12 Endoluminal fundoplication (ELF) (page 171) for additional changes to block [998]
Repair of diaphragmatic hernia

LIST OF ACHI BLOCK NUMBERS

Block No Block Name

881 Gastrostomy, ~~or~~ gastro-enterostomy or gastro-gastrostomy
889 Procedures for ~~morbid~~ obesity

879 Other gastrectomy

30523-00 Subtotal gastrectomy
Subtotal radical gastrectomy

Includes: distal pancreatectomy
extended node dissection

Excludes: sleeve gastrectomy for obesity (30511-09, 30511-10, 30512-01, 30512-02, 90940-00, 90941-00 [889])

881 Gastrostomy, ~~or~~ gastro-enterostomy or gastro-gastrostomy

Excludes: gastric bypass for morbid obesity (30512-00 [889])

30515-00 Gastro-enterostomy

Includes: gastroduodenostomy

Code also when performed:

- gastric bypass for obesity (30512-00, 30512-03 [889])
- revision procedure for obesity (30514-01 [889])

Excludes: that with:
• pancreaticoduodenectomy (30584-00 [978])
• selective [truncal] vagotomy (30496-02 [884])

30375-31 Gastro-gastrostomy

Includes: anastomosis

Note: Performed for stricture of the stomach

Code also when performed:

- revision procedure for obesity (30514-01 [889])

889 Procedures for ~~morbid~~ obesity

Excludes: implantable gastric stimulation (vagal block) (39134-01 [1604])

30511-09 Laparoscopic sleeve gastrectomy [LSG]

Laparoscopic:

- banded sleeve gastrectomy
- gastrectomy:
 - longitudinal
 - tube
 - vertical

Includes: diaphragmatic (crural) repair

Note: may be performed as the first stage of a two-stage surgery

Excludes: when performed concurrently with BPD-DS (30512-01 [889])

30511-10 Sleeve gastrectomy [SG]

Banded sleeve gastrectomy [BSG]

Gastrectomy:

- longitudinal
- tube
- vertical

Includes: diaphragmatic (crural) repair

Note: may be performed as the first stage of a two-stage surgery

Excludes: when performed concurrently with BPD-DS (30512-02 [889])

30511-02 Laparoscopic adjustable gastric banding [LAGB]

Laparoscopic gastric banding NOS

Includes: diaphragmatic (crural) repair
that with replacement

Code also when performed:

- replacement of gastric band reservoir (31441-00 [889])
- revision procedure for obesity (30514-01 [889])

30511-03 Laparoscopic nonadjustable gastric banding [LNGB]

Laparoscopic fixed gastric band

Includes: diaphragmatic (crural) repair
that with replacement

Note: involves marlex mesh or gastric ring reinforcement

Code also when performed:

- replacement of gastric band reservoir (31441-00 [889])
- revision procedure for obesity (30514-01 [889])

30511-04 Adjustable gastric banding [AGB]

Gastric banding NOS

Includes: diaphragmatic (crural) repair
that with replacement

Note: involves marlex mesh or gastric ring reinforcement

Code also when performed:

- replacement of gastric band reservoir (31441-00 [889])
- revision procedure for obesity (30514-01 [889])

30511-05 Nonadjustable gastric banding [NGB]

Fixed gastric band

Includes: diaphragmatic (crural) repair
that with replacement

Note: involves marlex mesh or gastric ring reinforcement

Code also when performed:

- replacement of gastric band reservoir (31441-00 [889])
- revision procedure for obesity (30514-01 [889])

30512-03 Laparoscopic gastric bypass

Laparoscopic bypass:

- banded (ring)
- loop
- mini gastric
- Roux-en-Y [LRYGB]

Includes: anastomosis
diaphragmatic (crural) repair
dilation of gastro-enteral stricture

Note: may be performed as the second stage of a two-stage surgery

Code also when performed:

- gastro-enterostomy (30515-00 [881])
- revision procedure for obesity (30514-01 [889])

Excludes: Roux-en-Y not for obesity (see Alphabetic Index: Roux-en-Y procedure)

30512-00 Gastric bypass

Bypass:

- banded (ring)

	<ul style="list-style-type: none"> • <u>loop</u> • <u>mini gastric</u> • <u>Roux-en-Y [RYGB]</u> <p><i>Includes:</i> anastomosis <u>diaphragmatic (crural) repair</u> <u>dilation of gastro-enteral stricture</u></p> <p><i>Note:</i> <u>may be performed as the second stage of a two-stage surgery</u></p> <p><i>Code also when performed:</i></p> <ul style="list-style-type: none"> • <u>gastro-enterostomy (30515-00 [881])</u> • <u>revision procedure for obesity (30514-01 [889])</u> <p><i>Excludes:</i> Roux-en-Y not for obesity (see Alphabetic Index: Roux-en-Y procedure)</p>
30512-01	<p>Laparoscopic biliopancreatic diversion [LBPD]</p> <p><u>Laparoscopic:</u></p> <ul style="list-style-type: none"> • <u>biliopancreatic diversion with duodenal switch [LBPD-DS]</u> • <u>duodenal switch [LDS]</u> • <u>Scopinaro procedure</u> <p><i>Includes:</i> anastomosis cholecystectomy <u>diaphragmatic (crural) repair</u> <u>distal } gastrectomy</u> <u>sleeve }</u></p> <p><i>Note:</i> <u>may be performed as the second stage of a two-stage surgery</u></p> <p><i>Code also when performed:</i></p> <ul style="list-style-type: none"> • <u>gastro-enterostomy (30515-00 [881])</u> • <u>revision procedure for obesity (30514-01 [889])</u>
30512-02	<p>Biliopancreatic diversion [BPD]</p> <p><u>Biliopancreatic diversion with duodenal switch [BPD-DS]</u></p> <p><u>Duodenal switch [DS]</u></p> <p><u>Scopinaro procedure</u></p> <p><i>Includes:</i> anastomosis cholecystectomy <u>diaphragmatic (crural) repair</u> <u>distal } gastrectomy</u> <u>sleeve }</u></p> <p><i>Note:</i> <u>may be performed as the second stage of a two-stage surgery</u></p> <p><i>Code also when performed:</i></p> <ul style="list-style-type: none"> • <u>gastro-enterostomy (30515-00 [881])</u> • <u>revision procedure for obesity (30514-01 [889])</u>
30511-06	<p>Laparoscopic gastroplasty</p> <p><u>Laparoscopic:</u></p> <ul style="list-style-type: none"> • <u>gastric:</u> • <u>plication</u> • <u>stapling</u> • <u>suturing</u> • <u>vertical banded gastroplasty [VBG]</u> <p><i>Includes:</i> <u>diaphragmatic (crural) repair</u></p> <p><i>Code also when performed:</i></p> <ul style="list-style-type: none"> • <u>revision procedure for obesity (30514-01 [889])</u>
30511-07	<p>Endoscopic gastroplasty</p> <p><u>Endoluminal:</u></p> <ul style="list-style-type: none"> • <u>gastric:</u> • <u>plication</u> • <u>stapling</u> • <u>suturing</u> • <u>vertical banded gastroplasty [VBG]</u> <p><i>Includes:</i> <u>diaphragmatic (crural) repair</u></p>

Code also when performed:

• revision procedure for obesity (30514-01 [889])

30511-08 Gastroplasty

Gastric:

- plication
- stapling
- suturing

Vertical banded gastroplasty [VBG]

Includes: diaphragmatic (crural) repair

Code also when performed:

• revision procedure for obesity (30514-01 [889])

90940-00 Duodenal-jejunal bypass [DJ bypass]

Includes: sleeve gastrectomy

90941-00 Ileal interposition

Includes: sleeve gastrectomy

90950-00 Insertion of gastric bubble [balloon]

90950-01 Removal of gastric balloon

90942-01 Laparoscopic removal of gastric band

Laparoscopic removal of gastric band:

- adjustable
- nonadjustable (fixed)

Includes: removal of (implanted) gastric band reservoir/port

Excludes: that with replacement (30511-02, 30511-03 [889])

90942-02 Endoscopic removal of gastric band

Endoscopic removal of gastric band:

- adjustable
- nonadjustable (fixed)

Includes: removal of (implanted) gastric band reservoir/port

Excludes: that with replacement (30511-02, 30511-03 [889])

90942-00 Removal of gastric band

Removal of gastric band:

- adjustable
- nonadjustable (fixed)

Includes: removal of (implanted) gastric band reservoir/port

Excludes: that with replacement (30511-04, 30511-05 [889])

14215-01 Adjustment of gastric band reservoir

Accessing in order to add or remove fluid (saline) from implanted reservoir/port of gastric band to adjust tightness

31441-00 Revision of gastric band reservoir

Repair _____ }
Replacement _____ } of implanted reservoir/port
Repositioning _____ }

Code also when performed:

• replacement of gastric band (30511-02, 30511-03, 30511-04, 30511-05 [889])

31441-01 Removal of gastric band reservoir

Removal of implanted reservoir/port

Excludes: replacement (31441-00 [889])
with removal of gastric band (90942 [889])

90943-01 Other laparoscopic procedures for obesity

Code also when performed:

- revision procedure for obesity (30514-01 [889])

90943-02 Other endoscopic procedures for obesity
Endoluminal sleeve

Code also when performed:

- revision procedure for obesity (30514-01 [889])

90943-00 Other procedures for obesity

Code also when performed:

- revision procedure for obesity (30514-01 [889])

30514-01 Revision procedure for obesity

Surgical reversal of procedure for obesity

Note: complete reversal of initial surgery immediately followed by another reduction, gastroplasty or bypass procedure

Code also when performed:

- gastro-enterostomy (30515-00 [881])
- gastro-gastrostomy (30375-31 [881])

Code first:

- obesity procedure(s) performed (see block [889])

14215-00 Revision of gastric band

Addition or removal of fluid (saline) from implanted reservoir of gastric band

Adjustment of gastric band

Replacement of implanted reservoir of gastric band

30511-01 Laparoscopic gastric reduction

Laparoscopic adjustable gastric banding (LAGB)

30511-00 Gastric reduction

Gastric:

• banding

• stapling

Gastroplasty for morbid obesity

30514-00 Surgical reversal of procedure for morbid obesity

997 Repair of incarcerated, obstructed or strangulated hernia

30615-00 Repair of incarcerated, obstructed or strangulated hernia

Excludes: that for:

- diaphragmatic hernia with obesity procedure(s) (30511, 30512 [889])
- incisional hernia (see block [993])
- ventral hernia (see block [996])

998 Repair of diaphragmatic hernia

Repair of:

• hiatus hernia

• oesophageal hiatus

Excludes: repair of diaphragmatic (hiatal) hernia with: fundoplasty (30527-01, 30527-03, 30527-05 [886])

• fundoplasty (30527-01, 30527-03, 30527-05, 30527-06 [886])

• obesity procedure(s) (30511, 30512 [889])

1604 Other application, insertion or removal procedures on skin and subcutaneous tissue

39134-01 Insertion of subcutaneously implanted neurostimulator

Code also when performed:

- insertion of electrodes:
 - epidural (39130-00, 39139-00 [43])
 - intracranial (40709-00, 40712-00 [6])

- peripheral NEC (39138-00 [67])
- sacral (36663-00 [67])
- vagus (intra-abdominal) (39138-00 [67])

39135-00 Removal of subcutaneously implanted neurostimulator

Code also when performed:

- removal of electrodes:
 - epidural (39136-01 [43])
 - intracranial (40709-01, 40712-01 [6])
 - peripheral NEC (39136-02 [67])
- sacral (36667-00 [67])
- vagus (intra-abdominal) (39136-02 [67])

11.33. Stomatitis and related lesions

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

K12 Stomatitis and related lesions

K12.3 Oral mucositis (ulcerative)
Mucositis (oral) (oropharyngeal):

- drug-induced
- NOS
- radiation induced
- viral

Use additional external cause code (Chapter 20) to identify external agent.

Excludes: mucositis (ulcerative) of:

- ▲ gastrointestinal tract (except oral cavity and oropharynx) (K92.8)
- ▲ ~~nose and nasal sinuses (J34.8)~~
- ▲ ~~vagina and vulva (N76.8)~~

11.34. Tattooing by colonoscopy & panendoscopy (*Indexing*)

It was noted that the indexing of *tattooing by colonoscopy and panendoscopy* could be improved by additional entries under the lead term 'Tattooing'. The following changes have been included in the Alphabetic Index of ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Tattooing

- by
 - - colonoscopy (to caecum) 32090-02 [905]
 - - - to hepatic flexure 32084-02 [905]
 - - panendoscopy (to duodenum) 30473-07 [1005]
 - - - to ileum 30473-08 [1005]
- cornea 90067-00 [176]

11.35. Transanal endoscopic microsurgery (TEMS) (Indexing)

Advice was published in *Coding Matters* March 2010 (Vol. 16, No.4) *Transanal endoscopic microsurgery* (TEMS). TEMS is a technique used for the resection of rectal tumours. It combines the use of specialised equipment, including an operating proctoscope, gas insufflation and magnified stereoscopic views with conventional surgical preparation and suturing. TEMS overcomes the limitations of local resection and allows the removal of lesions through the anus that are not normally accessible. Additional index entries were added for this procedure in ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Excision — see also *Removal*

- lesion(s) — see also *Excision/tumour AND Excision/cyst AND Excision/polyp*

...

- - rectum NEC 90341-00 [933]

- - - perirectal 90341-00 [933]

- - - submucosal (per anal) 32099-00 [933]

- - - - and anus (full thickness) 32105-00 [933]

- - - - trans-sphincteric 32108-00 [933]

- - - via

- - - - colonoscopy — see *Colonoscopy*

- - - - endoscopic microsurgery (TEMS) 32103-00 [933]

- - - - sigmoidoscopy — see *Sigmoidoscopy*

...

- tumour — see also *Excision/lesion(s)*

...

- - rectum (per anal) (submucosal) 32099-00 [933]

- - - and anus (full thickness) (per anal) 32105-00 [933]

- - - trans-sphincteric 32108-00 [933]

- - - via stereoscopic rectoscopy 32103-00 [933]

- - - - endoscopic microsurgery (TEMS) 32103-00 [933]

- - - - stereoscopic rectoscopy 32103-00 [933]

- - retroperitoneal

Microsurgery

- microvascular (microarterial) (microvenous) — see *Repair/artery/microvascular AND Repair/vein/microvascular*

- transanal, via endoscopy (TEMS) 32103-00 [933]

Minnesota balloon

Telemetry (cardiac) 92057-00 [1857]

...

- - - rate responsive 11721-03 [1856]

TEMS (transanal endoscopic microsurgery)
32103-00 [933]

Tenodesis NEC 47963-01 [1572]

TRAM (free trans rectus abdominus myocutaneous) flap, for breast reconstruction 45530-02 [1756]

Transanal endoscopic microsurgery (TEMS)
32103-00 [933]

Transcatheter

11.36. ACS 1122 *Helicobacter pylori*

It was noted that Example 1 in ACS 1122 *Helicobacter pylori* could be improved. Consequently the wording of Example 1 was revised in ACS 1122 for Eighth Edition.

AUSTRALIAN CODING STANDARDS

1122 HELICOBACTER PYLORI

EXAMPLE 1:

Patient admitted for panendoscopy. A biopsy was taken of the duodenal cap.

Findings: chronic duodenal ulcer. Pathology result: positive for *H. pylori*. ~~CLO test.~~

Codes: K26.7 Duodenal ulcer, chronic without haemorrhage or perforation

B96.81 *Helicobacter pylori* [*H. pylori*] as the cause of diseases classified to other chapters

30473-01 [1008] Panendoscopy to duodenum with biopsy

12. Skin and subcutaneous tissue

12.1. Dermatitis gangrenosa

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

L08 Other local infections of skin and subcutaneous tissue

L08.0 Pyoderma
Dermatitis:
• gangrenosa
• purulent
• septic
• suppurative

Excludes: pyoderma gangrenosum (L88)

DERMATITIS AND ECZEMA (L20–L30)

Note: In this block the terms dermatitis and eczema are used synonymously and interchangeably.

Excludes: chronic (childhood) granulomatous disease (D71)
dermatitis:
• dry skin (L85.3)
• factitial (L98.1)
• gangrenosa (~~L88~~) (L08.0)
• herpetiformis (L13.0)
• perioral (L71.0)
• stasis (I83.1–I83.2)
radiation-related disorders of the skin and subcutaneous tissue (L55–L59)

L88 Pyoderma gangrenosum

~~Dermatitis gangrenosa~~
Phagedenic pyoderma

Excludes: dermatitis gangrenosa (L08.0)

12.2. Excision multiple skin lesions

Refer section 26.6 ACS 0020 Bilateral/multiple procedures (page 295) for details of changes to ACS 0020.

12.3. Excisional biopsy (*Indexing*)

Advice was published in *Coding Q&A* June 2012 *Excisional biopsy* regarding the correct code for this procedure. This advice has been incorporated into the Alphabetic Index of ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Biopsy

- epididymis 30644-06 [1180]
- excisional — *see Excision*
- extraocular muscle or tendon 30075-36 [215]
- ...
- skin (subcutaneous tissue) 30071-00 [1618]
- - excisional — *see Excision*
- - fetus, in utero 90487-00 [1330]

12.4. Injection of Poly-L-lactic acid

The MBS introduced item numbers for administration of Poly-L-lactic acid (Sculptra), a bio-active dermal stimulatory agent which reverses the visible effects of facial lipoatrophy. Consequently the following changes were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Injection (around) (into) (of) — *see also Administration*

- filling material (filling of defect)
- - breast, for augmentation (unilateral) 90723-00 [1741]
- - - bilateral 90723-01 [1741]
- - skin 90660-00 [1602]
- - - collagen 90660-00 [1602]
- - - fat, autologous 90660-00 [1602]
- - - poly-L-lactic acid 90660-00 [1602]
- - - silicone 90660-00 [1602]
- fistula, enterocutaneous
- ...
- skin (subcutaneous tissue)
- - filling material (autologous fat) (collagen) (poly-L-lactic acid) (silicone) 90660-00 [1602]
- - hydrocortisone 30207-00 [1602]

TABULAR LIST OF INTERVENTIONS

1602

Administration of agent into skin and subcutaneous tissue

90660-00 Administration of agent into skin and subcutaneous tissue

Injection of:

- autologous fat
- collagen
- poly-L-lactic acid
- silicone

Note: Performed for correction of:

- contour deformities
- depressed scar
- dimples
- lipoatrophy
- muscle related wrinkles

Excludes: administration of agent into lesion of skin (30207-00 [1602])

12.5. Injection into breast tissue expander

A DRG query regarding *injections into breast tissue expander* highlighted that amendments to the Tabular List and Alphabetic Index were required to ensure correct code assignment for these procedures. The following changes have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Expansion

- tissue (skin) (soft tissue) (subcutaneous tissue)
- - by
- - - inflation of expander 45566-01 **[1661]**
- - - injection into expander 45566-01 **[1661]**
- - - - breast, without reconstruction 45566-01 **[1661]**
- - - - - with reconstruction 45539-00 **[1756]**
- - - insertion of expander 45566-00 **[1661]**

Implant, implantation — see also Insertion

- electromagnetic hearing device 41557-02 **[321]**
- expander, {tissue} (skin) (soft tissue) (subcutaneous tissue) 45566-00 **[1661]** — see *Insertion/tissue expander*
- breast (with reconstruction) 45539-00 **[1756]**
- in conjunction with other surgical procedure 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- intraoperative 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- generator
- ...
- tissue
- - expander (skin) (soft tissue) (subcutaneous tissue) 45566-00 **[1661]** — see *Insertion/tissue expander*
- breast (with reconstruction) 45539-00 **[1756]**
- in conjunction with other surgical procedure 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- intraoperative 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- - living — see *Implant, implantation/living tissue*
- titanium fixture (screw)

Inflation

- tissue expander (skin) (soft tissue) (subcutaneous tissue) 45566-01 **[1661]**
- - breast, without reconstruction 45566-01 **[1661]**
- - - with reconstruction 45539-00 **[1756]**

Infundibulectomy

Injection (around) (into) (of) — see also

Administration

- expander, {tissue} (skin) (soft tissue) (subcutaneous tissue) 45566-00 **[1661]** — see *Injection/tissue expander*
- fetotoxic
- ...
- thrombolytic agent — see *Injection/agent/thrombolytic*
- tissue expander (skin) (soft tissue) (subcutaneous tissue) 45566-01 **[1661]**
- - breast, without reconstruction 45566-01 **[1661]**
- - - with reconstruction 45539-00 **[1756]**
- toxin botulinum NEC (see also *Injection/by site*) 18360-00 **[1552]**

Insertion

- expander, tissue (skin) (soft tissue) (subcutaneous tissue) 45566-00 **[1661]** — see *Insertion/tissue expander*
- for augmentation of alveolar ridge 45843-00 **[1371]**
- breast (with reconstruction) 45539-00 **[1756]**
- in conjunction with other surgical procedure 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- intraoperative 45572-00 **[1661]**
- breast (with reconstruction) 45539-00 **[1756]**
- eye, artificial — see *Insertion/prosthesis, prosthetic device/orbital*

TABULAR LIST OF INTERVENTIONS

1661

Insertion, removal or adjustment of tissue expander or implant

- 45566-01 Injection into tissue expander
- Inflation of tissue expander

Excludes: — that for breast (45539-00 **[1756]**)

12.6. Necklift

A public submission was received requesting a specific ACHI code for *Necklift*. Clinical advice from the Australian Society of Plastic Surgeons (ASPS) confirmed that a necklift procedure is always bilateral, and when a facelift is performed, a necklift is generally also performed as an integral part of the facelift procedure. The following changes have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Eyebrow lift (bilateral) 45588-01 [1675]

- bilateral 45588-01 [1675]

- unilateral 45587-01 [1675]

Lift

- forehead (bilateral) 45588-01 [1675]

- - unilateral 45587-01 [1675]

- neck 45588-02 [1675]

- - with facelift (bilateral) 45588-00 [1675]

Nasopharyngoscopy 41764-02 [416]

Necklift 45588-02 [1675]

- with facelift (bilateral) 45588-00 [1675]

- - unilateral 45587-00 [1675]

Needle sweep procedure (subconjunctival) 42749-00 [191]

Rhytidectomy

- face (bilateral) (forehead) 45588-00 [1675]

- - eyelid — see *Rhytidectomy/eyelid*

- - unilateral 45587-00 [1675]

- neck 45588-02 [1675]

- - with facelift (bilateral) 45588-00 [1675]

- - - unilateral 45587-00 [1675]

Rhyzolysis — see *Rhyzolysis/spinal*

TABULAR LIST OF INTERVENTIONS

LIST OF ACHI BLOCK NUMBERS

Block No **Block Name**

1675 Facelift, necklift and browlift

1662 Excision, eyelid

45617-00 Reduction of upper eyelid
▼ 1205 Excision of redundant skin } of upper eyelid
 Restoration of symmetry }
 Upper eyelid rhytidectomy

Code also when performed:

• browlift (45587-01, 45588-01 [1675])

• facelift (45587-00, 45588-00 [1675])

• necklift (45588-02 [1675])

45620-00 Reduction of lower eyelid
▼ 1205 Lower eyelid rhytidectomy
 Restoration of symmetry of lower eyelid

Code also when performed:

• browlift (45587-01, 45588-01 [1675])

• facelift (45587-00, 45588-00 [1675])

• necklift (45588-02 [1675])

1675 Facelift, necklift and browlift

45587-00 Facelift, unilateral
 Cheek lift (meloplasty) }
 Correction of facial soft tissue asymmetry } unilateral
 Facial rhytidectomy }

Includes: neck-lift

Code also when performed:

• browlift (45587-01, 45588-01 [1675])

• eyelid reduction (45617-00, 45620-00 [1662])

45588-00 Facelift, bilateral
 Cheek lift (meloplasty) }
 Facial rhytidectomy } bilateral

Includes: neck-lift

Code also when performed:

• browlift (45587-01, 45588-01 [1675])

• eyelid reduction (45617-00, 45620-00 [1662])

45587-01	Browlift, unilateral
	Browplasty (endoscopic) }
	Eyebrow lift } unilateral
	Forehead lift }
	Repair of eyebrow ptosis }
	<i>Code also when performed:</i>
	• eyelid reduction (45617-00, 45620-00 [1662])
	• facelift (45587-00, 45588-00 [1675])
	• necklift (45588-02 [1675])
45588-01	Browlift, bilateral
	Browplasty (endoscopic) }
	Eyebrow lift } bilateral
	Forehead lift }
	Repair of eyebrow ptosis }
	<i>Code also when performed:</i>
	• eyelid reduction (45617-00, 45620-00 [1662])
	• facelift (45587-00, 45588-00 [1675])
	• necklift (45588-02 [1675])
45588-02	Necklift
	<u>Neck rhytidectomy</u>
	<i>Code also when performed:</i>
	• browlift (45587-01, 45588-01 [1675])
	• eyelid reduction (45617-00, 45620-00 [1662])
	<u><i>Excludes:</i> that with facelift (45587-00, 45588-00 [1675])</u>

12.7. Resection of ingrown toenail

The description of MBS item number 47916 was amended to expand the range of approaches that may be used for resection of ingrown toenail. The following changes have been made in ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Excision

- nail
- - finger (thumb) 46516-01 [1631]
- ...
- - toe 47906-01 [1632]
- - - ingrown
- - - - partial (by phenolisation) (electrocautery) (laser) (sodium hydroxide or acid) 47916-00 [1632]
- - - - radical 47918-00 [1632]

Removal

- nail
- - finger (thumb) 46516-01 [1631]
- ...
- - toe 47906-01 [1632]
- - - ingrown
- - - - partial (by phenolisation) (electrocautery) (laser) (sodium hydroxide or acid) 47916-00 [1632]
- - - - radical (bed) 47918-00 [1632]
- ...

- toenail 47906-01 [1632]
- - ingrown
- - - partial (by phenolisation) (electrocautery) (laser) (sodium hydroxide or acid) 47916-00 [1632]
- - - radical 47918-00 [1632]

Resection

- nail
- - finger (thumb)
- ...
- - toe 47906-01 [1632]
- - - ingrown
- - - - partial (by phenolisation) (electrocautery) (laser) (sodium hydroxide or acid) 47916-00 [1632]
- - - - radical 47918-00 [1632]
- ...
- toenail 47906-01 [1632]
- - ingrown
- - - partial (by phenolisation) (electrocautery) (laser) (sodium hydroxide or acid) 47916-00 [1632]
- - - radical 47918-00 [1632]

TABULAR LIST OF INTERVENTIONS

1632 Excision of toenail

47916-00 Partial resection of ingrown toenail

Includes: ~~destruction of nail matrix by that by phenolisation~~
 • electrocautery
 • laser
 • phenolisation
 • sodium hydroxide or acid

Excludes: wedge resection of ingrown toenail (46528-00 [1632])

12.8. Reticular erythematous mucinosis

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Mucinosis (cutaneous) (focal) (papular) (reticular erythematous) (skin) L98.5
 - oral K13.7

Retention, retained

...
 - water (in tissues) (*see also* *Oedema*) R60.9
Reticular erythematous mucinosis L98.5
Reticulation, dust — *see* *Pneumoconiosis*

TABULAR LIST OF DISEASES

L98 Other disorders of skin and subcutaneous tissue, not elsewhere classified

L98.5 Mucinosis of skin
 Focal mucinosis
 Lichen myxoedematosus
Reticular erythematous mucinosis

Excludes: focal oral mucinosis (K13.7)
 myxoedema (E03.9)

12.9. Sunburn

A public submission was received concerning the classification and AR-DRG assignment for *sunburn*. Sunburn is classified in Chapter 12 *Diseases of the skin and subcutaneous tissue (L00-L99)* which does not facilitate specification of site or external cause of sunburn. Given that sunburn is a significant health issue and has long term consequence for skin cancer, it was agreed that sunburn required multiple codes to identify the site and external causes. The following changes have been made to ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

L55 Sunburn 1911

▼ 1911

Use additional code (T20–T25, T29–T30) to identify site of sunburn.
Use additional code (T31) to identify the percentage of body surface area.
Use additional external cause code (Chapter 20) to identify cause.

BURNS (T20–T31)

Includes: burns (thermal) from:

- electrical heating appliances
 - electricity
 - flame
 - friction
 - hot air and hot gases
 - hot objects
 - lightning
- chemical burns [corrosions] (external)(internal)
radiation burns
scalds

Excludes: erythema [dermatitis] ab igne (L59.0)

other specified radiation-related disorders of the skin and subcutaneous tissue (~~L55~~L56–L59)
~~sunburn (L55.-)~~

AUSTRALIAN CODING STANDARDS

1911 BURNS

... CLASSIFICATION

Burns by site

Burns are classified by site in the following blocks:

T20–T25 Burns of external body surface, specified by site

T26–T28 Burns of eye and internal organs

T29–T30 Burns of multiple and unspecified body regions

Sunburn is coded to:

Sunburn requires multiple diagnosis codes to fully describe the injury.

Code first:

L55.0 *Sunburn, erythema*

L55.1 *Sunburn, partial thickness*

L55.2 *Sunburn, full thickness*

~~Note that the external cause is inherent in the codes L55.- *Sunburn* and therefore, the assignment of an external cause code is unnecessary. (See also ACS 2001 *External cause code use and sequencing*).~~

~~Assign an additional code to indicate the site of sunburn from T20–T25, T29–T30 and a supplementary code from T31.- *Burns classified according to extent of body surface involved* to indicate the percentage body surface area of sunburn.~~

~~However, for sunburn, if the percentage body surface area is documented, assign a code from category T31.- *Burns classified according to extent of body surface involved* and X32.- *Exposure to sunlight*.~~

~~Assign an appropriate external cause code to specify the circumstances of the sunburn injury, for example X32 *Exposure to sunlight*, W89 *Exposure to man-made visible and ultraviolet light*.~~

~~Assign an appropriate place of occurrence code (Y92.-) and activity code (U50–U73).~~

...

2001 EXTERNAL CAUSE CODE USE AND SEQUENCING

CODES NOT REQUIRING AN EXTERNAL CAUSE CODE

A range of conditions that are caused by external events are represented by certain codes within Chapters 1–18. Some of these codes do not require an external cause code to be assigned (see list below). The external cause code is not required because the external cause information is embedded in the diagnosis code and, therefore, the addition of an external cause code does not add any further information.

CODE	DESCRIPTION
...	
L25.8	<i>Unspecified contact dermatitis due to other agents</i>
L55.0	<i>Sunburn, erythema</i>
L55.1	<i>Sunburn, partial thickness</i>
L55.2	<i>Sunburn, full thickness</i>
L55.8	<i>Other sunburn</i>
L55.9	<i>Sunburn, unspecified</i>
L56.2	<i>Photocontact dermatitis [berloque dermatitis]</i>

12.10. ACS 1204 Plastic surgery

It was noted that the inclusion of 'micromastia' in ACS 1204 *Plastic surgery* in the examples of conditions to be coded when documented as 'the reason for cosmetic or reconstructive plastic surgery' was not appropriate as this condition does not have an entry in the ICD-10-AM Alphabetic Index. Therefore, 'micromastia' has been replaced with 'pendulous breasts' (as used in Example 2 in ACS 1204) in ACS 1204 for Eighth Edition.

AUSTRALIAN CODING STANDARD

Refer section 21.4 ACS 2114 *Prophylactic surgery (New)* (page 276) for further changes to ACS 1204 *Plastic Surgery*.

1204 PLASTIC SURGERY

COSMETIC AND RECONSTRUCTIVE PLASTIC SURGERY

Plastic surgery may be performed for cosmetic or medical reasons. When the reason for cosmetic or reconstructive plastic surgery (eg ~~micromastia~~ pendulous breasts, redundant facial tissue, bat ears, revision of scar, skull deformity, etc) is documented, code this condition, current disease or injury as the principal diagnosis. When the condition is not specified, or is a term not recognised by ICD-10-AM (eg ageing face), assign Z41.1 *Other plastic surgery for unacceptable cosmetic appearance* or Z42.- *Follow-up care involving plastic surgery* as the principal diagnosis, as appropriate.

12.11. ACS 1205 Blepharoplasty (Deleted)

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was highlighted that the advice in ACS 1205 *Blepharoplasty* could be incorporated into ACHI. The following amendments have been made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Reconstruction

- eyelid 45614-00 [1684]
- - by tarsal strip (lateral) 45614-01 [1684]
- ...
- - cosmetic — see *Rhytidectomy/eyelid*
- face, contour

TABULAR LIST OF INTERVENTIONS

1662 Excision, eyelid

- 45617-00 Reduction of upper eyelid
- ~~▼1205~~ Excision of redundant skin of upper eyelid
- Restoration of symmetry of upper eyelid
- Upper eyelid rhytidectomy

- 45620-00 Reduction of lower eyelid
- ~~▼1205~~ Lower eyelid rhytidectomy
- Restoration of symmetry of lower eyelid

AUSTRALIAN CODING STANDARDS

SPECIALTY STANDARDS

12. Skin and subcutaneous tissue

- 1203 Debridement
- 1204 Plastic surgery
- ~~1205 Blepharoplasty~~
- 1210 Cellulitis

~~1205 BLEPHAROPLASTY~~

~~Code cosmetic blepharoplasty to 45617-00 [1662] *Reduction of upper eyelid* or 45620-00 [1662] *Reduction of lower eyelid*. If the term ‘blepharoplasty’ is used to mean ‘reconstruction’ of the eyelid(s), refer to the appropriate entry under ‘Reconstruction, eyelid’ in the ACHI Alphabetic Index.~~

12.12. ACS 1210 Cellulitis (Deleted)

ACS 1210 *Cellulitis* was reviewed to include advice published in *Coding Matters*, June 2010 (Vol. 17, No. 1), *Cellulitis with superficial injuries*. It was agreed that the principles of ACS 0001 *Principal diagnosis* should be applied and that this standard was not required. Consequently ACS 1210 *Cellulitis* has been deleted and a new standard ACS 0742 *Orbital and periorbital cellulitis* containing the still relevant information relating to periorbital cellulitis from ACS 1210 *Cellulitis* has been included in the *Eye and adnexa* specialty standards section.

Refer section 7.7 ACS 0742 Orbital and periorbital cellulitis (New) (page 128) for details.

13. Musculoskeletal and connective tissue

13.1. Amputation, arm

An inconsistency was highlighted in ACHI code 44328-01 [1412] *Amputation through arm*. Consequently the following changes were made to ACHI for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

1412 Other excision procedures on humerus or elbow

44328-01 Amputation through upper arm

Includes: humerus

13.2. Arthropathy in haematologic disorders NEC (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Arthropathy (*see also Arthritis*) M13.9-

- in (due to)

- - acromegaly E22.0† M14.5*

...

- - haematologic disorders NEC (*see also categories D50–D62* ~~D50–D62~~, *D64–D76*) D75.9† M36.3*

- - haemochromatosis E83.1† M14.5*

13.3. Arthroplasty, digit (*Indexing*)

An indexing issue was highlighted regarding the subterms listed for *Arthroplasty/digit*. The following changes have been made to the ACHI Alphabetical Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Arthroplasty (*see also Repair/joint*) 50127-00 [1571]

~~— by osseointegration (implantation of titanium fixture)~~

~~— digit (finger) (toe) 45794-07 [1698]~~

- for hallux valgus (hallux rigidus) (unilateral) 49821-00 [1547]

...

- digit ~~(finger) (toe)~~

~~— by osseointegration (implantation of titanium fixture)~~
45794-07 [1698]

- - finger (thumb) — *see*

Arthroplasty/interphalangeal/hand

- - toe — *see Arthroplasty/toe*

- elbow NEC 90536-00 [1418]

...

- finger (thumb) — ~~*see also*~~

Arthroplasty/interphalangeal/hand

~~— by osseointegration (implantation of titanium fixture)~~
45794-07 [1698]

- foot

...

- interphalangeal

- - hand (finger) (thumb)

- - - for joint replacement (1 joint) (hemi) (total)
46309-00 [1462]

...

- thumb — *see Arthroplasty/interphalangeal/hand*

~~— by osseointegration (implantation of titanium fixture)~~
45794-07 [1698]

- toe

13.4. Arthroscopy, wrist with release of adhesions (*Indexing*)

An inconsistency was highlighted regarding the index entry for *Arthroscopy/with release of adhesions/and removal of foreign body*. The ACHI Alphabetic Index has been amended for Eighth Edition as follows.

ALPHABETIC INDEX OF INTERVENTIONS

Arthroscopy (with lavage) 50100-00 [1555]

- wrist 49218-00 [1443]

- - with

--- biopsy 49218-01 [1444]

...

- - - release of adhesions 49221-02 [1443]

--- and removal of loose body 49221-02 [1443]

- - - removal of loose body 49221-01 [1443]

--- and release of adhesions 49221-02 [1443]

- - - synovectomy 49224-01 [1451]

13.5. Bone substitute material (*Indexing*)

In response to a public submission regarding the indexing of *injection of bone substitute material*, the following amendments have been made to the ACHI Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Injection (around) (into) (of) — *see also Administration*

- bone

- - graft substitute (paste) — *see Graft/bone/specified site*

- - marrow 90280-00 [803]

- - substitute material (paste) — *see Graft/bone/specified site*

- botulinum toxin (Botox) (Botoxin) NEC (*see also Injection/by site*) 18360-00 [1552]

13.6. Closed reduction of acetabulum

Advice was published in *Coding Q&A*, December 2011, *Closed reduction of acetabulum* regarding the correct code for this procedure when an internal fixation is performed, in view of an instructional note precluding assignment of 47498-00 [1479] *Internal fixation of fracture of acetabulum*.

The excludes note at 47483-00 [1479] *External fixation of fracture of pelvis* and both the includes and excludes notes at 47498-00 [1479] *Internal fixation of fracture of acetabulum* have now been amended in ACHI Eighth Edition to allow the correct code to be assigned for closed reduction of acetabulum with internal fixation.

ALPHABETIC INDEX OF INTERVENTIONS

Reduction

- fracture (bone) (with cast) (with splint)

- - acetabulum

--- with internal fixation (closed) 47498-00 [1479]

--- - open, with internal fixation 47501-00 [1486]

- - ankle (closed) 47597-00 [1537]

TABULAR LIST OF INTERVENTIONS

1479 Fixation of fracture of pelvis or femur

47483-00 External fixation of fracture of pelvis
Immobilisation of fracture of pelvis

Excludes: that with reduction of fracture (47486-00, 47489, 47501-00, 47528-01, 47531-00 [1486])

47498-00 Internal fixation of fracture of acetabulum

Includes: closed reduction
traction

Excludes: that with open reduction of fracture (47486-00, 47489, 47501-00, 47528-01, 47531-00 [1486])

13.7. Excision of exostosis

The descriptions of MBS item numbers 49833, 49836, 49837 and 49838 were amended to include 'with or without excision of exostoses' during correction of hallux valgus. These changes have been included in the Tabular List of ACHI for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

1532 Excision of bone of foot

47933-01 Excision of exostosis of bone of foot

Includes: toe

Excludes: that with correction of hallux valgus (49833-00, 49836-00, 49837-00, 49838-00 [1547])

1547 Procedures for hallux valgus or hallux rigidus

49833-00 Correction of hallux valgus by osteotomy of first metatarsal, unilateral
Bunionectomy, unilateral NOS

Includes: excision of exostosis
internal fixation
prosthesis

49836-00 Correction of hallux valgus by osteotomy of first metatarsal, bilateral
Bunionectomy, bilateral NOS

Includes: excision of exostosis
internal fixation
prosthesis

49837-00 Correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallucis tendon, unilateral

Includes: excision of exostosis
internal fixation
prosthesis

49838-00 Correction of hallux valgus by osteotomy of first metatarsal and transfer of adductor hallucis tendon, bilateral

Includes: excision of exostosis
internal fixation
prosthesis

13.8. Graft, bone, vertebra with... (Indexing)

An inconsistency was highlighted in the indexing of bone grafts when performed with vertebral procedures in block [1385] *Other excision procedures on spine (vertebral column)* and [1393] *Other spinal procedures*. As some of these procedures do not involve a bone graft, theACHI Alphabetic Index has been amended for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Graft (repair)

- bone 48239-00 [1569]

-- for

....

- - specified site NEC 48239-00 [1569]

- - - with internal fixation NEC 48242-00 [1569]

~~spine~~ ~~see Graft/bone/vertebra~~

- - tibia 48206-00 [1513]

...

-- ulna 48224-00 [1435]

--- with internal fixation 48227-00 [1435]

---and radius 48218-00 [1435]

----with internal fixation 48221-00 [1435]

~~vertebra~~

~~with~~

~~coccygectomy 30672-00 [1385]~~

~~excision of sacrococcygeal tumour~~

~~posterior approach 43876-00 [1385]~~

~~postero-abdominal approach 43879-00 [1385]~~

~~revision (re-exploration) 50616-02 [1393]~~

- breast

13.9. Haglund's deformity (Indexing)

Advice was published in *Coding Q&A*, June 2012 for *Haglund's deformity*. The term 'Haglund's' is used to describe two different conditions:

- Haglund's osteochondrosis, or juvenile os tibiale externum osteochondrosis, is an abnormal growth at the inner aspect of the foot, on or near the navicular bone.
- Haglund's deformity, also known as Haglund's disease, disorder or syndrome, is an acquired condition in which there is a painful bony enlargement of the posterior heel, with or without bursitis. The condition is also referred to as 'pump bump' as it is caused by repetitive impingement of the retrocalcaneal bursa, often due to pressure from the backs of pump style shoes. For this reason it commonly occurs at the end of the second or third decade, mainly in females and is often bilateral. However the condition may occur in both sexes and at any age.

The following amendments have been made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Deformity

- gum, acquired NEC K06.8

- Haglund's (acquired) (pump bump) M21.67

- hand (acquired) M21.94

Disease, diseased — see also Syndrome

- haemorrhagic D69.9

- - due to

...

- - fetus or newborn P53

- Haglund's (acquired) (pump bump) M21.67

- hair (colour) (shaft) L67.9

Hageman's factor defect, deficiency or disease

D68.2

~~Haglund's disease or osteochondrosis (juvenile)~~

~~(os tibiale externum) M92.6~~

~~- deformity or disease (acquired) (pump bump) M21.67~~

~~- osteochondrosis (juvenile) (os tibiale externum) M92.6~~

~~- syndrome (acquired) (pump bump) M21.67~~

Hailey-Hailey disease Q82.89

Syndrome

- haemorrhagic fever with renal A98.5† N08.0*

- Haglund's (acquired) (pump bump) M21.67

- Hallerman-Streiff Q87.05

13.10. March fracture (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Fracture (abduction) (adduction) (avulsion) (closed) (comminuted) (compound) (compression) (depressed) (dislocated) (displaced) (elevated) (fissured) (greenstick) (impacted) (infected) (linear) (~~march~~) (missile) (oblique) (open) (puncture) (separation) (simple) (slipped epiphysis) (spiral) T14.2-

- manubrium (sterni) S22.2

- march ~~S92.3~~M84.3-

- maxilla, maxillary (bone) (sinus) (superior) (upper jaw) S02.4

March

- fracture ~~S92.3~~M84.3-

- haemoglobinuria D59.6

13.11. Matrix autologous chondrocyte implantation (MACI)

Two public submissions were received regarding the indexing of *matrix autologous chondrocyte implantation* (MACI). Autologous chondrocyte implantation (ACI) and matrix-induced autologous chondrocyte implantation (MACI) involve isolating and growing the patient's own cartilage (chondrocytes), and re-implanting these cells into the damaged area within the knee joint via surgery. The procedure is performed in two stages.

Stage 1

Arthroscopic removal of healthy cartilage cells (chondrocytes) from a non-weight bearing region of the knee. Chondrocytes are isolated and grown in a special laboratory using tissue engineering procedures and takes approximately four weeks to cultivate.

Stage 2

Insertion (implantation) of the chondrocytes into the defect. MACI involves implanting the chondrocytes seeded onto a collagen membrane into the defect.

The following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Achillotenotomy 49718-01 [1542]

ACI (autologous chondrocyte implantation)

14203-01 [1906]

Acromionectomy

Implant, implantation — *see also Insertion*

- cartilage (autologous) (chondrocytes) (matrix-induced) 14203-01 [1906]

- - by cannula 14206-01 [1906]

- - directly 14203-01 [1906]

- chondrocytes (autologous) (matrix-induced) — *see Implant, implantation/cartilage*

- defibrillator, generator (automatic) (cardioverter) (with pacemaker functionality) 38393-00 [653]

MACI (matrix-induced autologous chondrocyte implantation) 14203-01 [1906]

Maggot debridement therapy (MDT) 96210-00 [1604]

Mastotomy 31551-00 [1742]

Matrix-induced autologous chondrocyte implantation (MACI) 14203-01 [1906]

Maxillectomy — *see Resection/bone/maxilla*

Transplant, transplantation

- cartilage (autologous) (chondrocytes) (matrix-induced) 14203-01 [1906]

- - by cannula 14206-01 [1906]

- - directly 14203-01 [1906]

- chondrocytes (autologous) (matrix-induced) — *see Transplant, transplantation/cartilage*

- conjunctival (auto) 42641-01 [255]

TABULAR LIST OF INTERVENTIONS

1906

Implantation of hormone or living tissue

▼0030

14203-01 Direct living tissue implantation

▼0023

Includes: incision
suture

13.12. Osteotomy, mandible, multiple procedures

An inconsistency was highlighted regarding code assignment for osteotomies of the mandible and maxilla involving multiple procedures. The ACHI Alphabetic Index was amended with cross references to the ACHI Tabular List for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Osteotomy NEC 90572-00 [1563]

- mandible
 - bilateral 45726-02 [1705]
 - with internal fixation 45729-02 [1706]
 - multiple procedures (~~more than 2~~) 45731-00 [1707]
(multiple osteotomies or osteotomies of maxilla, in combination) — see block [1707]
 - with internal fixation — see block [1708]
 - internal fixation 45732-00 [1708]
 - multiple osteotomies or osteotomies of maxilla, in combination — see block [1707]
 - with internal fixation — see block [1708]
- unilateral 45720-02 [1705]
- with internal fixation 45723-02 [1706]
- maxilla
 - bilateral 45726-03 [1705]
 - with internal fixation 45729-03 [1706]
 - multiple procedures (~~more than 2~~) 45731-01 [1707]
(multiple osteotomies or osteotomies of mandible, in combination) — see block [1707]
 - with internal fixation — see block [1708]
 - internal fixation 45732-01 [1708]
 - multiple osteotomies or osteotomies of mandible, in combination — see block [1707]
 - with internal fixation — see block [1708]
- unilateral 45720-03 [1705]

Osteotomy NEC 90569-00 [1556]

- mandible
 - bilateral 45726-00 [1705]
 - with internal fixation 45729-00 [1706]
 - multiple procedures (~~more than 2~~) 45731-00 [1707]
(multiple osteotomies or osteotomies of maxilla, in combination) — see block [1707]
 - with internal fixation — see block [1708]
 - internal fixation 45732-00 [1708]
 - multiple osteotomies or osteotomies of maxilla, in combination — see block [1707]
 - with internal fixation — see block [1708]
- unilateral 45720-00 [1705]
- with internal fixation 45723-00 [1706]
- maxilla
 - bilateral 45726-01 [1705]
 - ...
 - multiple procedures (~~more than 2~~) 45731-01 [1707]
(multiple osteotomies or osteotomies of mandible, in combination) — see block [1707]
 - with internal fixation — see block [1708]
 - internal fixation 45732-01 [1708]
 - multiple osteotomies or osteotomies of mandible, in combination — see block [1707]
 - with internal fixation — see block [1708]
- midfacial — see Osteotomy/maxilla/midfacial

13.13. Osteophyte, facet joint (Indexing)

Advice published in Coding Q&A, June 2012, *Osteophyte, facet joint* clarified that osteophyte of the facet joint should be classified under *Spondylosis*. This has been incorporated into the Alphabetic Index for ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Osteophyte M25.7-

- facet joint — see *Spondylosis*

Osteopoikilosis Q78.81

13.14. Sequestration of intervertebral disc (*Indexing*)

Advice published in *Coding Matters*, December 2009 (Vol. 16, No. 3), *Sequestration of intervertebral disc*, highlighted an indexing inconsistency.

Disc sequestration is synonymous with a ruptured or displaced disc, however a sequestered disc is not sequestered bone. The three classifications of herniated/displaced disc are disc protrusion, disc extrusion, and disc sequestration. Disc sequestration is where the nucleus pulposus has leaked out of the disc entirely and has separated with the disc due to a breach of the posterior longitudinal ligament (PLL). Disc sequestration is often severely painful, exhibiting sciatica, or pain down the back and leg and usually requires decompressive surgery.

The following changes have been made to the ICD-10-AM Alphabetic Index for Eighth Edition to support this advice.

ALPHABETIC INDEX OF DISEASES

Sequestration — *see also* *Sequestrum*

- disc — *see* *Displacement, displaced/intervertebral disc*
- lung, congenital Q33.2

Sequestrum

- dental K10.2
- disc — *see* *Displacement, displaced/intervertebral disc*
- jaw bone K10.2

13.15. Single event multilevel surgery (SEMLS)

MBS updates in November 2006 introduced twelve new item numbers for single event multilevel surgery (SEMLS), also referred to as multiple lower extremity procedure (MLEP). SEMLS is one operation, involving multiple orthopaedic procedures for correction of spastic muscle/tendon contractions and bony deformities of the lower limbs.

This surgery is specifically designed for ambulant children with cerebral palsy, who have associated varying degrees of musculoskeletal pathology or abnormal gait, however it is also performed for a number of other neuromuscular conditions which are phenotypically similar to cerebral palsy, such as hereditary spastic paraplegias.

The following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Advancement

- tendon — *see also* *Repair/tendon*
- - patella 90611-01 [1522]
- tibial

Capsulotomy

- joint NEC 90570-00 [1555]
- - for claw toe repair 49848-01 [1548]
- - - with internal fixation 49851-01 [1548]
- - with release of hip contracture
- - - bilateral 50378-01 [1480]
- - - unilateral 50375-01 [1480]
- - - anterior (unilateral) 50381-00 [1480]
- - - bilateral 50384-00 [1480]
- - - medial (unilateral) 50375-00 [1480]
- - - bilateral 50378-00 [1480]
- lens 42734-00 [201]

Division (freeing)

- muscle NEC 90568-00 [1559]
- - with release of hip contracture (adductor) (psoas)

- - - bilateral 50378-01 [1480]
- - - unilateral 50375-01 [1480]
- - - anterior (unilateral) 50381-00 [1480]
- - - bilateral 50384-00 [1480]
- - - medial (unilateral) 50375-00 [1480]
- - - bilateral 50378-00 [1480]
- - hand NEC 90545-00 [1440]
- - sternocleidomastoid (for torticollis) (sternomastoid) 50402-00 [1374]
- nerve — *see also* *Sympathectomy*
- - for facet joint denervation (percutaneous)
- - -
- - with release of hip contracture (adductor) (psoas)
- - - bilateral 50378-01 [1480]
- - - unilateral 50375-01 [1480]
- - - anterior (unilateral) 50381-00 [1480]
- - - bilateral 50384-00 [1480]
- - - medial (unilateral) 50375-00 [1480]
- - - bilateral 50378-00 [1480]
- - cochlear
- - -

- tendon 47954-00 **[1572]**
- - with release of hip contracture (adductor) (psoas)
- - - bilateral 50378-01 **[1480]**
- - - unilateral 50375-01 **[1480]**
- - - - anterior (unilateral) 50381-00 **[1480]**
- - - - bilateral 50384-00 **[1480]**
- - - - medial (unilateral) 50375-00 **[1480]**
- - - - bilateral 50378-00 **[1480]**
- - Achilles' (ankle) 49718-01 **[1542]**

Incision

- muscle NEC 90568-00 **[1559]**
- - anorectal 90338-00 **[930]**
- ...
- - hip (adductor) (psoas)
- - - for release of hip contracture
- - - - bilateral 50378-01 **[1480]**
- - - - unilateral 50375-01 **[1480]**
- - - - - anterior (unilateral) 50381-00 **[1480]**
- - - - - bilateral 50384-00 **[1480]**
- - - - - medial (unilateral) 50375-00 **[1480]**
- - - - - bilateral 50378-00 **[1480]**
- - oesophagogastric (Heller's procedure)

Lengthen, lengthening

- muscle NEC 47957-00 **[1572]**
- - extraocular — *see Procedure/for/strabismus*
- - hip (adductor) (flexor) (psoas)
- - - with release of hip contracture
- - - - bilateral 50378-01 **[1480]**
- - - - unilateral 50375-01 **[1480]**
- - - - - anterior (unilateral) 50381-00 **[1480]**
- - - - - bilateral 50384-00 **[1480]**
- - - - - medial (unilateral) 50375-00 **[1480]**
- - - - - bilateral 50378-00 **[1480]**
- - os calcis 90612-00 **[1544]**
- - penis
- - by translocation of corpora 37423-00 **[1200]**
- tendon NEC 47957-00 **[1572]**
- - with release of contracture
- - - hip (adductor) (flexor) (psoas)
- - - - bilateral 50378-01 **[1480]**
- - - - unilateral 50375-01 **[1480]**
- - - - - with release of hip contracture
- - - - - - anterior (unilateral) 50381-00 **[1480]**
- - - - - - bilateral 50384-00 **[1480]**
- - - - - - medial (unilateral) 50375-00 **[1480]**
- - - - - - bilateral 50378-00 **[1480]**
- - - knee — *see Release/contracture/joint/knee*

Myotomy NEC 90568-00 **[1559]**

- hip (adductor) (psoas)
- - for release of hip contracture
- - - bilateral 50378-01 **[1480]**
- - - unilateral 50375-01 **[1480]**
- - - - anterior (unilateral) 50381-00 **[1480]**
- - - - bilateral 50384-00 **[1480]**
- - - - medial (unilateral) 50375-00 **[1480]**
- - - - bilateral 50378-00 **[1480]**
- oesophagogastric (Heller's procedure)

Procedure

- seminal vesicle NEC 90395-01 **[1170]**
- SEMLS — *see Single event multilevel surgery (SEMLS)*
- Senning (insertion of intra-atrial baffle) 38745-00 **[603]**
- ...

- Simmond's shell (management of postoperative hypotony/fistula using tamponade device) 42746-00 **[191]**
- single event multilevel surgery — *see Single event multilevel surgery (SEMLS)*
- sinus

Release

- capsule
- - contracture, for
- ...
- - joint NEC 90570-00 **[1555]**
- - - for claw toe repair 49848-01 **[1548]**
- - - - with internal fixation 49851-01 **[1548]**
- - - with release of hip contracture (adductor) (flexor) (psoas)
- - - - bilateral 50378-01 **[1480]**
- - - - unilateral 50375-01 **[1480]**
- - - - - anterior (unilateral) 50381-00 **[1480]**
- - - - - bilateral 50384-00 **[1480]**
- - - - - medial (unilateral) 50375-00 **[1480]**
- - - - - bilateral 50378-00 **[1480]**
- - - interphalangeal
- ...
- - contracture
- - capsule, for
- ...
- - joint 50112-00 **[1555]**
- - - with reconstruction of boutonniere deformity 46447-00 **[1469]**
- - - ankle 49706-03 **[1529]**
- - - elbow (open) 49100-02 **[1410]**
- - - - arthroscopic 49121-04 **[1410]**
- - - hip (adductor) (flexor) (psoas)
- - - - bilateral 50378-01 **[1480]**
- - - - unilateral 50375-01 **[1480]**
- - - - - anterior (unilateral) 50381-00 **[1480]**
- - - - - bilateral 50384-00 **[1480]**
- - - - - medial (unilateral) 50375-00 **[1480]**
- - - - - bilateral 50378-00 **[1480]**
- - - knee (posterior) (unilateral) 50363-00 **[1498]**

Repair

- tendon 47954-00 **[1572]**
- - by
- - - advancement — *see Advancement/tendon*
- - - lengthening — *see Lengthen, lengthening*
- - - shortening — *see Shortening/tendon*
- - - tenolysis — *see Tenolysis*
- - - tenoplasty NEC 47963-01 **[1572]**
- - - transfer (transplantation) — *see Transfer/tendon*
- - Achilles' (immediate) (primary) 49718-01 **[1542]**
- ...
- - patella 90611-01 **[1522]**
- - specified site NEC 47954-00 **[1572]**

Segmentectomy

- ...
- lung 38438-00 **[551]**
- SEMLS (single event multilevel surgery) — *see Single event multilevel surgery (SEMLS)*
- Sengstaken-Blakemore tube (balloon)

Shortening

- muscle
- - extraocular — *see Procedure/for/strabismus*
- - levator palpebrae (eyelid) 45623-02 **[1677]**
- tendon NEC 47954-00 **[1572]**

-- patella 90611-00 [1522]

Shunt

Simmond's shell procedure (management of postoperative hypotony/fistula using tamponade device) 42746-00 [191]

Single event multilevel surgery (SEMLS)

- bilateral NEC 50455-00 [1580]

-- involving

--- foot stabilisation 50475-00 [1580]

---- and lower limb (or)

----- multiple soft tissue procedures 50475-00 [1580]

----- osteotomy 50475-00 [1580]

-- lower limb osteotomy (multiple soft tissue procedures) 50470-00 [1580]

---- and foot stabilisation 50475-00 [1580]

--- multiple soft tissue procedures 50455-00 [1580]

---- and lower limb osteotomy 50470-00 [1580]

----- and foot stabilisation 50475-00 [1580]

- unilateral NEC 50450-00 [1580]

-- involving

--- foot stabilisation 50450-02 [1580]

---- and lower limb (or)

----- multiple soft tissue procedures 50450-02 [1580]

----- osteotomy 50450-02 [1580]

-- lower limb osteotomy (multiple soft tissue procedures) 50450-01 [1580]

---- and foot stabilisation 50450-02 [1580]

--- multiple soft tissue procedures 50450-00 [1580]

---- and lower limb osteotomy 50450-01 [1580]

----- and foot stabilisation 50450-02 [1580]

Sinography 59739-03 [1988]

Tenotomy (open)

- hip (adductor) (psoas)

-- for release of hip contracture

--- bilateral 50378-01 [1480]

--- unilateral 50375-01 [1480]

---- anterior (unilateral) 50381-00 [1480]

---- bilateral 50384-00 [1480]

---- medial (unilateral) 50375-00 [1480]

---- bilateral 50378-00 [1480]

- knee

TABULAR LIST OF INTERVENTIONS

LIST OF ACHI BLOCK NUMBERS

Block No Block Name

1578	Limb reconstruction
1579	Other procedures for other musculoskeletal sites
1580	Single event multilevel surgery [SEMLS]
1600	Dressing of burn
1601	Dressing of other wound

CHAPTER 15

PROCEDURES ON MUSCULOSKELETAL SYSTEM

(Blocks 1360–1579 1580)

1580

Single event multilevel surgery [SEMLS]

Note: Single event multilevel surgery (SEMLS) is performed for ambulant children with cerebral palsy and a number of other neuromuscular conditions which are phenotypically similar to cerebral palsy such as hereditary spastic paraplegia. SEMLS involves various combinations of orthopaedic procedures in a single operative episode.

50450-00 Single event multilevel surgery, involving multiple soft tissue surgery of the lower limb, unilateral

Procedure may comprise the following soft tissue procedures in any combination:

- lengthening (Achilles' tendon) (adductors) (gastrocnemius) (hamstrings) (peroneus brevis) (peroneus longus) (plantar flexors) (psoas) (psoas over the brim) (tibialis posterior)
- obturator neurectomy (anterior branch)
- phenol to obturator nerve
- release (adductors) (rectus femoris)
- transfer (rectus femoris) (semi-tendinosus) (tibialis anterior) (tibialis posterior)

50455-00 Single event multilevel surgery, involving multiple soft tissue surgery of the lower limbs, bilateral

Procedure may comprise the following soft tissue procedures in any combination:

- lengthening (Achilles' tendon) (adductors) (gastrocnemius) (hamstrings) (peroneus brevis) (peroneus longus) (plantar flexors) (psoas) (psoas over the brim) (tibialis posterior)
- obturator neurectomy (anterior branch)
- phenol to obturator nerve
- release (adductors) (rectus femoris)
- transfer (rectus femoris) (semi-tendinosus) (tibialis anterior) (tibialis posterior)

50450-01 Single event multilevel surgery, involving multiple soft tissue surgery and osteotomies of the lower limb, unilateral

Procedure may comprise the following procedures in any combination:

- lower limb osteotomies:
 - epiphysiodesis (fixed flexion deformity) (FFD) (limb length discrepancy) (LLD) (tibia)
 - femoral derotation osteotomy (distal) (proximal)
 - pelvic osteotomy (DEGA) (periacetabular osteotomy) (triple of PAO)
 - supramalleolar osteotomy
 - varus derotation osteotomy (VDRO) (with extension)
- soft tissue procedures listed in 50450-00 [1580]

50470-00 Single event multilevel surgery, involving multiple soft tissue surgery and osteotomies of the lower limb, bilateral

Procedure may comprise the following procedures in any combination:

- lower limb osteotomies:
 - epiphysiodesis (fixed flexion deformity) (FFD) (limb length discrepancy) (LLD) (tibia)
 - femoral derotation osteotomy (distal) (proximal)
 - pelvic osteotomy (DEGA) (periacetabular osteotomy) (triple of PAO)
 - supramalleolar osteotomy
 - varus derotation osteotomy (VDRO) (with extension)
- soft tissue procedures listed in 50455-00 [1580]

50450-02 Single event multilevel surgery, involving multiple soft tissue surgery, lower limb osteotomies and foot stabilisation, unilateral

Procedure may comprise the following procedures in any combination:

- foot stabilisation:
 - bone graft
 - os calcis (calcaneal) lengthening
 - subtalar fusion
- lower limb osteotomies listed in 50450-01 [1580]
- soft tissue procedures listed in 50450-00 [1580]

50475-00 Single event multilevel surgery, involving multiple soft tissue surgery, lower limb osteotomies and foot stabilisation, bilateral

Procedure may comprise the following procedures in any combination:

- foot stabilisation:
 - bone graft
 - os calcis (calcaneal) lengthening
 - subtalar fusion
- lower limb osteotomies listed in 50470-00 [1580]
- soft tissue procedures listed in 50455-00 [1580]

1480

Release of hip contracture

Lengthening of:

- adductor brevis
- adductor longus

Psoas:

- at the lesser trochanter
- over the brim (POTB)

Includes: division } of obturator nerve
phenol }
lengthening or division of adductors and psoas tendons
that via anterior or medial approach

~~50375-00 Medial release of hip contracture, unilateral~~

~~50378-00 Medial release of hip contracture, bilateral~~

~~50381-00 Anterior release of hip contracture, unilateral~~

~~50384-00 Anterior release of hip contracture, bilateral~~

50375-01 Release of hip contracture, unilateral

50378-01 Release of hip contracture, bilateral

1499 Osteotomy of distal femur, patella, tibia or fibula

Includes: wedge osteotomy

Excludes: that with single event multilevel surgery (SEMLS) (50450, 50455-00, 50470-00, 50475-00 [1580])

1522 Reconstruction procedures on knee

90611-00 Patellar tendon shortening

90611-01 Patellar tendon advancement

1544 Other repair procedures on ankle or foot

90612-00 Os calcis lengthening

Code also when performed:

• bone graft (48239-00, 48242-00 [1569])

13.16. Subluxation, complex (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Subluxation — *see also Dislocation*

- atlantoaxial (occipito), recurrent M43.4
- - with myelopathy M43.3
- complex; (vertebral) M99.1
- congenital NEC — *see also Malposition/congenital*

14. Genitourinary system

14.1. Bladder neck obstruction

Advice published in Coding Matters June 2010 (Vol 17, No 1) *Bladder neck obstruction (BNO)* clarified that the guidelines in ACS 1420 *Bladder neck incision for benign prostatic hypertrophy* concerning bladder neck obstruction refer to documentation of bladder neck obstructions where there is also a diagnosis of benign prostatic hypertrophy. This advice along with the advice in ACS 1420 has been incorporated into ICD-10-AM and ACHI for Eighth Edition and ACS 1420 has been deleted.

TABULAR LIST OF DISEASES

N32 Other disorders of bladder

N32.0 Bladder neck obstruction
▼1420 Bladder neck stenosis (acquired)

N40 Hyperplasia of prostate

▼1420
Adenofibromatous hypertrophy }
Enlargement (benign) } of prostate
Hypertrophy (benign) }
Median bar (prostate)
Prostatic obstruction NOS

Code also associated bladder neck obstruction (N32.0).

Excludes: benign neoplasms of prostate (D29.1)

TABULAR LIST OF INTERVENTIONS

1095 Other incision procedures on bladder

36854-00 Endoscopic incision of bladder neck
▼1420

Includes: cystourethroscopy
urethral dilation
urethroscopy

1165 Transurethral prostatectomy

37203-00 Transurethral resection of prostate [TURP]
▼1420
Transurethral endoscopic prostatectomy

Includes: that by:
• cold punch
• diathermy

Code also when performed:

• bladder neck incision (36854-00 [1095])

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

14. Genitourinary system

...

1417 Percutaneous resection of kidney pelvis tumour via nephrostomy

~~1420 Bladder neck incision for benign prostatic hypertrophy~~

1427 Hydrocele

~~1420 BLADDER NECK INCISION FOR BENIGN PROSTATIC HYPERTROPHY~~

~~Assign N40 *Hyperplasia of prostate* as the principal diagnosis. Any documented bladder neck obstruction should be coded as an additional diagnosis (N32.0 *Bladder neck obstruction*). Bladder neck obstruction can be assumed to be due to prostatic hypertrophy unless another condition is stated as the cause.~~

~~If a TURP and bladder neck incision are performed, sequence the TURP (37203-00 [1165] *Transurethral resection of prostate [TURP]*) as the first procedure code and bladder neck incision (36854-00 [1095] *Endoscopic incision of bladder neck*) as an additional procedure.~~

14.2. Cystoscopy with passage of sounds

In response to a public submission regarding the coding of cystoscopy and passage of sounds, the following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Cystoscopy 36812-00 [1089]

- with

- - biopsy

...

- - nephrostomy, percutaneous — see *Nephrostomy/percutaneous*

~~- - passage of sounds 36812-00 [1089]~~

- - prostatectomy — see *Prostatectomy*

TABULAR LIST OF INTERVENTIONS

1089 Examination procedures on bladder

36812-00 Cystoscopy

Includes: ~~passage of sounds, urethral~~ urethral dilation
urethral dilation

1122 Other repair procedures on urethra

37300-00 Passage of urethral sounds

Excludes: that with cystoscopy (36812-00 [1089])

14.3. Detrusor sphincter dyssynergia (*Indexing*)

A public submission was received requesting index entries for detrusor sphincter dyssynergia. This condition is a disturbance of the normal relationship between bladder (detrusor) contraction and sphincter relaxation during voluntary or involuntary voiding efforts, and is also referred to as neurogenic detrusor overactivity. The following index entries have been added to the Alphabetic Index to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Dysfunction

- bladder N31.9
- - neurogenic NEC (*see also*
Dysfunction/bladder/neuromuscular) N31.9
- - - detrusor sphincter N31.8
- - neuromuscular NEC N31.9

Dyssynergia

- cerebellaris myoclonica (Hunt's ataxia) G11.1
- detrusor sphincter (bladder) N31.8

Dysthymia F34.1

Neurogenic — *see also condition*

- bladder (*see also* *Dysfunction/bladder/neuromuscular*)
N31.9

- - cauda equina syndrome G83.4
- - detrusor sphincter N31.8
- bowel NEC K59.2

Overactive

- bladder N32.8
- - neurogenic, detrusor N31.8
- disorder, associated with mental retardation and
stereotyped movements F84.4

Overactivity R46.3

- detrusor, neurogenic (bladder) N31.8

Overbite (deep) (excessive) (horizontal) (vertical) K07.2

14.4. Hydrocele (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hydrocele (spermatic cord) (testis) (tunica vaginalis) N43.3

- canal of Nuck N94.8
- communicating N43.2
- - congenital P83.5
- congenital P83.5

14.5. McCall's culdoplasty

Advice published in *Coding Q&A*, June 2011, *McCall's culdoplasty*, clarified that this procedure is routinely performed with a vaginal hysterectomy to prevent enterocele formation and vaginal vault prolapse, or to repair an existing enterocele, however when McCall's culdoplasty is performed independently of a vaginal hysterectomy the correct code assignment is 35571-00 [1283] *Repair of posterior vaginal compartment, vaginal approach*. This advice has now been incorporated into ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Cuffing

- saphenous vein 34824-00 [721]

Culdoplasty

- McCall's 35571-00 [1283]
- - with vaginal hysterectomy — *omit code*

Culdotomy 35572-00 [1280]

McCall's culdoplasty 35571-00 [1283]

- with vaginal hysterectomy — *omit code*

Meal

Procedure

- Maze
- - by
- - - ablation (cryoablation) (microwave)
(radiofrequency) — *see*
Ablation/cardiac/arrhythmia circuit or focus,
involving
- - - incision — *see Division/accessory pathway*
- McCall's culdoplasty 35571-00 [1283]
- - with vaginal hysterectomy — *omit code*
- McGregor flap — *see Flap/lip/for reconstruction*

TABULAR LIST OF INTERVENTIONS

1269 Vaginal hysterectomy

Code also when performed:

- debulking of uterus (35658-00 [1270])
- ~~repair of:~~
 - cystocele (35570-00 [1283])
 - pelvic floor (35577-00 [1283])
 - rectocele (35571-00 [1283])

14.6. Overactive bladder

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

N32 Other disorders of bladder

- N32.8 Other specified disorders of bladder
- Bladder:
- calcified
 - contracted
 - overactive

14.7. Pipelle aspiration of the endometrium (*Indexing*)

Advice published in *Coding Q&A*, April 2011, *Pipelle aspiration of endometrium* highlighted that there was not a specific index entry for this procedure. Pipelle aspiration is a means of noninvasively sampling the endometrium without cervical dilation or anaesthesia. The following amendment has been made to the ACHI Alphabetical Index for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Aspiration

- ear, middle (unilateral) 41626-00 [309]
- - with intubation 41632-00 [309]
- - bilateral 41626-01 [309]
- - - with intubation 41632-01 [309]
- endometrium (pipelle) (suction cannula) 35630-00 [1259]
- epididymis (closed) (for collection of sperm) (percutaneous) 37605-00 [1177]

Biopsy

- ear
- - external 30075-28 [303]
- - inner 30075-30 [331]
- - middle 30075-29 [312]
- endometrium (endoscopic) (pipelle) 35630-00 [1259]
- - with hysteroscopy 35630-00 [1259]

14.8. Procedure, bladder, neck, retropubic, laparoscopic (*Indexing*)

An issue was highlighted regarding 'laparoscopic' being a nonessential modifier at the index entry *Procedure/bladder/neck/retropubic, laparoscopic*. As the procedure is for stress incontinence, the index entry under *Procedure/bladder/neck* was amended to provide a see note for *Repair/stress incontinence*.

ALPHABETIC INDEX OF INTERVENTIONS

Procedure

- bladder NEC 90363-01 [1111]
- - diagnostic NEC 90363-00 [1111]
- - neck, for stress incontinence — see *Repair/stress incontinence*
- retropubic, laparoscopic
- for stress incontinence (with prosthesis)
- female 37044-01 [1110]

— male 37044-00 [1109]

- - tubularisation technique

Repair

- strabismus — see *Procedure/for/strabismus*
- stress incontinence (by) (*laparoscopic*)
- - gracilis muscle transplant

14.9. Removal kidney, transplanted

It was highlighted that there was no index entry for removal of transplanted kidney by laparoscopy, and that the exclusion note at block [1051] *Complete nephrectomy for removal of transplanted kidney* and [1052] *Complete nephrectomy complicated by previous surgery on same kidney* were superfluous. The following amendments were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Removal — see also *Excision*

- kidney — see also *Nephrectomy*
- - from donor

- ...
- - transplanted 36519-01 [1051]
- - - via laparoscopy 36519-00 [1051]
- lead(s) (cardiac) (electrode(s)) — see *Removal/electrode(s) lead(s)*

TABULAR LIST OF INTERVENTIONS

1051 Complete nephrectomy for removal of transplanted kidney

Excludes: — that for transplantation from:
• cadaver (36516-06 [1050])
• living donor (36516-05 [1050])

1052 Complete nephrectomy complicated by previous surgery on same kidney

Excludes: radical nephrectomy complicated by previous surgery on same kidney (36529-00 [1053])
that for transplantation from:
• cadaver (36516-06 [1050])
• living donor (36516-05 [1050])

14.10. Strassman procedure (*Indexing*)

It was noted that there was no index entry for Strassman procedure via laparotomy. This procedure is performed for treatment of bicornuate uterus. The following amendments were made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Procedure

- stomach NEC 90305-00 [890]
- Strassman (*laparoscopic*) (repair of bicornuate uterus) 35680-00 [1272]
- - via laparotomy 35680-01 [1272]
- Syme (disarticulation through ankle) 44361-00 [1533]

Repair

- uterus (*laparoscopic*) (uterine wall) 90435-00 [1271]
- - bicornuate — see *Reconstruction/uterus*
- - obstetric laceration, current 90485-00 [1344]

Sting procedure (injection into ureteral orifice)
36851-00 [1092]
Strassman procedure (laparoscopic) (repair of
bicornuate uterus) 35680-00 [1272]

- via laparotomy 35680-01 [1272]
Stretching

14.11. Thickened endometrium (*Indexing*)

Advice was published in *Coding Q&A*, April 2011, *Thickened endometrium* which highlighted that there was no index entry for this disorder. The following changes have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Thickening
- breast N64.5
- endometrium N85.9
- epidermal L85.9

TABULAR LIST OF DISEASES

N85.9 Noninflammatory disorder of uterus, unspecified
Disorder of uterus NOS
Thickening of endometrium

14.12. Vaginal vault suspension

Advice was published in *Coding Q&A*, June 2012, *Vaginal vault suspension*, which highlighted that there was no index entry for this procedure. The following changes have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Colpopexy 35597-01 [1285]
- sacrospinous 35568-00 [1285]
- uterosacral 35568-00 [1285]
Colporrhaphy

Repair
- vagina NEC 90449-00 [1286]
- - by sacrospinous colpopexy 35568-00 [1285] — see
Colpopexy
- - with reconstruction 35565-00 [1287]
...
- - rectocele, vaginal approach (with prosthesis)
35571-00 [1283]
- - - and cystocele 35573-00 [1283]
- - vault (with fixation of ligaments) — see
Suspension/vaginal vault
~~abdominal 35595-01 [1285]~~
~~with enterocele repair 35595-01 [1285]~~

~~laparoscopic 35595-00 [1285]~~
~~with enterocele repair 35595-00 [1285]~~
- valve

Suspension
- vaginal vault
- - for stress incontinence (with prosthesis) 37044-01
[1110]
- - abdominal approach (with fixation of ligaments)
35595-01 [1285]
- - - with enterocele repair 35595-01 [1285]
- - laparoscopic approach (with fixation of ligaments)
35595-00 [1285]
- - - with enterocele repair 35595-00 [1285]
- - vaginal approach (sacrospinous) (uterosacral) (with
fixation of ligaments) 35568-00 [1285]
- ventrosuspension, laparoscopic 35637-04 [1271]

TABULAR LIST OF INTERVENTIONS

1285	Vaginal suspension procedures
35568-00	Sacrospinous colpopexy <u>Suspension of vaginal vault, vaginal approach</u>

14.13. ACS 1404 Admission for kidney dialysis

Advice was published in *Coding Q&A*, December 2011, *Coding of multiple radiotherapy sessions* regarding the correct assignment for radiotherapy performed multiple times during an episode of care. Consequently for Eighth Edition, a minor clarification was made to the wording in ACS 1404 *Admission for kidney dialysis*, with respect to kidney dialysis being performed multiple times during an episode of care.

AUSTRALIAN CODING STANDARDS

Refer section 2.35 ACS 0229 Radiotherapy (page 42) for details of changes to ACS 0229 Radiotherapy.

Refer section 26.6 ACS 0020 Bilateral/multiple procedures (page 295) for overlapping changes to ACS 0020 Bilateral/multiple procedures.

1404 ADMISSION FOR KIDNEY DIALYSIS

SAME-DAY AND OVERNIGHT EPISODES OF CARE FOR DIALYSIS

~~Where the patient is~~ For episodes of care where the patient is discharged on the same ~~day~~ ^{date} as the admission or on the next day after admission, code as principal diagnosis either Z49.1 *Extracorporeal dialysis* ~~for extracorporeal dialysis~~ or Z49.2 *Other dialysis* ~~for peritoneal dialysis~~ as appropriate.

MULTI-DAY EPISODES OF CARE FOR DIALYSIS

Where a kidney dialysis episode of care is multi-day and the intent for admission was **not** same-day, code as principal diagnosis the condition necessitating the admission. In these circumstances, kidney dialysis will be indicated by the procedure code. Therefore, the codes Z49.1 *Extracorporeal dialysis* and Z49.2 *Other dialysis* are not required.

Where a kidney dialysis episode of care is multi-day, but the intent for admission **was** same-day, code as principal diagnosis the condition responsible for extending the patient's length of stay and Z49.1 or Z49.2 as an additional diagnosis.

DIALYSIS PROCEDURE CODING

When dialysis is given multiple times during an episode of care and the same procedure code applies, assign the procedure code once only.

0020 BILATERAL/MULTIPLE PROCEDURES

... MULTIPLE PROCEDURES ...

Classification

1. The SAME PROCEDURE repeated during the episode of care at ~~different~~ DIFFERENT visits to theatre

A procedure which is repeated during the episode of care at different visits to theatre should be coded as many times as it is performed.

~~Examples of~~ Exceptions to this rule are:

- procedures included in ACS 0042 *Procedures normally not coded*
- ~~procedures where multiples are included in the code descriptor, such as:~~
 - ~~ECT (see ACS 0533 *Electroconvulsive therapy*)~~
 - ~~removal of renal calculi~~
- ~~dialysis (haemodialysis, peritoneal)~~
- ...
- procedures with specific rules in other coding standards, such as:
 - burn dressings (see ACS 1911 *Burns*)
 - chemotherapy (see ACS 0044 *Chemotherapy*)
 - blood transfusions (see ACS 0302 *Blood transfusions*)
 - allied health interventions (see ACS 0032 *Allied health interventions*)

- dialysis (see ACS 1404 *Admission for kidney dialysis*)
- ECT (see ACS 0533 *Electroconvulsive therapy*)
- radiotherapy (see ACS 0229 *Radiotherapy*)

14.14. *ACS 1426 Dialysis amyloid (Deleted)*

Following a general review of *Australian Coding Standards* (ACS) Seventh Edition, it was agreed that the advice in ACS 1426 *Dialysis amyloid* could be incorporated into ICD-10-AM. Dialysis-related amyloidosis affects patients undergoing continuous peritoneal dialysis and long term haemodialysis.

Refer section 4.10 ACS 1426 Dialysis amyloid (Deleted) (page 107) for details of classification changes.

15. Pregnancy, childbirth and puerperium

15.1. Death from anaesthesia during delivery

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Anaesthesia, anaesthetic — *see also Effect, adverse/anaesthesia*

- death from
- - correct substance properly administered T88.2
- - during delivery O74.98
- - in pregnancy O29.9

Death

- anaesthetic
- - due to
- - - correct substance properly administered T88.2
- - - overdose or wrong substance given T41.-
- - - - specified anaesthetic — *see Table of drugs and chemicals*

- - during delivery O74.89

- - in pregnancy O29.89

- - postpartum, puerperal O89.8

...

- under anaesthesia NEC

- - due to

- - - correct substance properly administered T88.2

- - - overdose or wrong substance given T41.-

- - - - specified anaesthetic — *see Table of drugs and chemicals*

- - during delivery O74.89

Debility (chronic) (general) R53

15.2. Duration of pregnancy - 009

Public submissions were received regarding an inconsistency in the classification of duration of pregnancy greater than 36 weeks. The following amendments have been made to ICD-10-AM Tabular List and Alphabetical Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Pregnancy (single) (uterine)

- duration
- - < 5 completed weeks O09.0
- - 5–13 completed weeks O09.1
- - 14–19 completed weeks O09.2
- - 20–25 completed weeks O09.3
- - 26–33 completed weeks O09.4
- - 34–~~36~~37 completed weeks O09.5
- - unspecified duration of pregnancy O09.9

TABULAR LIST OF DISEASES

O09

Duration of pregnancy

Note: 37 completed weeks refers to 36 weeks plus 7 days. Duration of pregnancy less than 37 completed weeks is deemed premature.

Note: Category O09 identifies the duration of pregnancy at admission on the mother's record and should only be assigned as an additional diagnosis with the following conditions:

- abortion (O00–O07 Pregnancy with abortive outcome)
- early onset of labour (O60 Preterm labour and delivery)
- fetal death in utero (O36.4) (before 37 completed weeks of gestation)
- premature rupture of membranes (O42) (before 37 completed weeks of gestation)
- threatened:
 - abortion (O20.0)

- premature labour (O47.0 *False labour before 37 completed weeks of gestation*)

O09.5 34–~~36~~–37 completed weeks

AUSTRALIAN CODING STANDARDS

1520 MULTIPLE BIRTHS

In a multiple delivery, if the babies are delivered differently, both types of delivery should be coded.

EXAMPLE 1:

Premature twin delivery at 35 weeks, twin 1 delivered by breech extraction and twin 2, transverse position delivered by lower segment caesarean section (LSCS) due to obstruction.

Codes:	O84.82	<i>Multiple delivery by combination of methods</i>
	O64.8	<i>Labour and delivery affected by other malposition and malpresentation</i>
	O32.5	<i>Maternal care for multiple gestation with malpresentation of one fetus or more</i>
	O30.0	<i>Twin pregnancy</i>
	O60.1	<i>Preterm labour with preterm delivery</i>
	O09.5	<i>Duration of pregnancy 34–36–<u>37</u> completed weeks</i>
	Z37.2	<i>Twins, both liveborn</i>
	16520-03 [1340]	<i>Emergency lower segment caesarean section</i>
	90470-03 [1339]	<i>Breech extraction</i>

15.3. HIV complicating pregnancy

In 2008, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Delhi. Subsequent revisions were then approved by the URC at the annual general meetings in Seoul and Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Pregnancy (single) (uterine)

- complicated by — see *also* *Pregnancy/management affected by*
- - abnormal, abnormality
- ...
- - human immunodeficiency virus [(HIV)] disease O98.7
- - hydatidiform mole (M9100/0) (*see also* *Mole/hydatidiform*) O01.9

TABULAR LIST OF DISEASES

OTHER OBSTETRIC CONDITIONS, NOT ELSEWHERE CLASSIFIED (O94–O99)

- O98.7 Human immunodeficiency virus [HIV] disease complicating pregnancy, childbirth and the puerperium
- Excludes:** asymptomatic human immunodeficiency virus [HIV] infection status (Z21)
 laboratory evidence of human immunodeficiency virus [HIV] (R75)

R75

▼0102

Laboratory evidence of human immunodeficiency virus [HIV]

Nonconclusive HIV-test finding in infants

- Excludes:** asymptomatic human immunodeficiency virus [HIV] infection status (Z21)
 human immunodeficiency virus [HIV] disease (B20–B24)

human immunodeficiency virus [HIV] disease complicating pregnancy, childbirth and the puerperium (O98.7)

15.4. Induction, labour, medical (*Indexing*)

It was highlighted that the index entry *Induction/labour/medical/within 4 hours of surgical induction* was not required, in accordance with the instruction in ACS 1513 *Induction and augmentation* which notes that time elapsed isn't relevant. The index entry was deleted from ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Induction

- labour
- - medical 90465-02 [1334]
- - - with surgical induction 90465-05 [1334]
- ...
- - - Syntocinon 90465-00 [1334]
- ~~--- within 4 hours of surgical induction 90465-05 [1334]~~
- - surgical 90465-03 [1334]

15.5. Infections of genitourinary tract in pregnancy

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

O23

Infections of genitourinary tract in pregnancy

▼ 1549

Excludes: gonococcal infections (O98.2)
infections with a predominantly sexual mode of transmission NOS (O98.3)
syphilis (O98.1)
tuberculosis of genitourinary system (O98.0)
venereal disease NOS (O98.3)

15.6. McRoberts manoeuvre

Advice was published in *Coding Q&A*, October 2010, *McRoberts manoeuvre* regarding the correct delivery code to assign when this intervention is performed. This advice has now been incorporated into ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Delivery (single) (spontaneous) (vertex) NEC O80

- assisted NEC O83
- - by ~~forceps or vacuum extractor O84~~
- - - ~~forceps or vacuum extractor O81~~
- - - McRoberts manoeuvre O83
- breech
- ...

- vaginal NEC O80
- - assisted NEC O83
- - - by ~~forceps and vacuum extractor O84~~
- - - - ~~forceps and vacuum extractor O81~~
- - - - McRoberts manoeuvre O83
- - multiple — see *Delivery/multiple*

TABULAR LIST OF DISEASES

O80

Single spontaneous delivery

Cases with minimal or no assistance

Single spontaneous delivery:

- breech
- NOS
- vaginal
- vertex

Includes: that with:

- epidural injection/infusion
- episiotomy with repair
- fetal monitoring
- medical or surgical:
 - augmentation } of labour
 - induction }
- suture of obstetric perineal laceration

Excludes: pregnancy with abortive outcome (O00–O08)

single delivery (by):

- assisted NOS (O83)
- breech extraction (O83)
- caesarean section (O82)
- forceps and vacuum extractor (O81)
- McRoberts manoeuvre (O83)
- version with extraction (O83)

O83

Other assisted single delivery

Includes: assisted single:

- breech delivery } NOS
- delivery }

breech extraction

single delivery assisted (facilitated) by:

- McRoberts manoeuvre
- other procedures, not elsewhere classified
- procedures on fetus
- version with extraction

Excludes: single delivery:

- by caesarean (O82)
- using forceps and vacuum extractor (O81)

15.7. Molar pregnancy (*Indexing*)

It was highlighted that molar pregnancy, hydatidiform was not indexed. Consequently, the following amendment has been made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Molar pregnancy NEC (~~M9100/0~~) O02.0

- hydatidiform (M9100/0) (*see also Mole/hydatid, hydatidiform*) O01.9

Molarisation of premolars K00.2

15.8. Nephritis complicating pregnancy (*Indexing*)

A public submission was received regarding inconsistent indexing of nephritis complicating pregnancy. In response, the following amendments have been made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Necrosis, necrotic (ischaemic) (*see also Gangrene*)

- R02
- kidney (bilateral) N28.0
- - acute N17.9
- ...
- - tubular N17.0
- - - complicating pregnancy ~~O99.8~~ O26.81
- - - - affecting fetus or newborn P00.1

- - abnormal, abnormality
- ...
- - conditions in
- - - A00–A07 O98.8
- ...
- - - N10–N12 O23.0
- - - N13–N99 NEC O99.8
- - - - N13.0–N13.5 O26.81

Nephritis, nephritic N05.-

- cirrhotic (*see also Sclerosis/renal*) N26
- complicating pregnancy, childbirth or puerperium ~~O99.8~~ O26.81
- - with secondary hypertension, pre-existing O10.4

- ...
- - multigravida, elderly (supervision only) Z35.52
- - necrosis, liver (conditions in K72.-) ~~O26.6~~
- - - kidney, tubular O26.81
- - - liver (conditions in K72.-) O26.6
- - neoplasms NEC O99.8
- - nephritis O26.81
- - nephropathy NEC O26.81
- - nephrosis O26.81
- - neuralgia O26.83

Pregnancy (single) (uterine)

- complicated by — *see also Pregnancy/management affected by*

15.9. Neuritis complicating puerperium (*Indexing*)

In 2011, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Cape Town. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Neuritis M79.2-

- peripheral (nerve) G62.9
- - complicating pregnancy or puerperium ~~O26.83~~
- - multiple (*see also Polyneuropathy*) G62.9

- ...
- - - F54–F99 O99.3
- - - G00–G99 NEC O99.3
- - - H00–H95 O99.8

- ...
- progressive hypertrophic interstitial G60.0
- puerperal, postpartum ~~O90.8~~ O26.83
- retrobulbar H46

- ...
- - neuralgia O26.83
- - neuritis O26.83
- - nutritional diseases NEC O99.2

Pregnancy (single) (uterine)

- complicated by — *see also Pregnancy/management affected by*
- - abnormal, abnormality
- ...
- - conditions in
- - - A00–A07 O98.8

Puerperal, puerperium

- necrosis, liver (acute) (conditions in category K72.0) (subacute) O90.8
- - with kidney failure O90.4
- neuritis O90.8
- paralysis, bladder (sphincter) O90.8

15.10. Obstetric laceration of mid or upper third of vaginal wall

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Injury

- periurethral tissue S37.38
- - complicating delivery ~~O71.5~~O70.0
- phalanges

Laceration NEC (see also Wound, open) T14.1

- perineum, perineal S31.0
- - complicating delivery O70.9
- - - 1st degree O70.0
- ...
- - - involving
- - - - anus (sphincter) O70.2
- ...
- - - - perineal muscles O70.1
- - - - periurethral tissue O70.0
- - - - rectovaginal septum O70.2
- ...
- - - - vagina, low O70.0
- - - - - high (deep) (instrumental) (mid) (sulcus) O71.4
- - - - vaginal muscles O70.1
- ...
- periurethral tissue S37.38
- - obstetric trauma ~~O71.5~~O70.0
- rectovaginal (septum) S31.80

- ...
- vagina, vaginal wall (low)-(high) S31.4
- - complicating delivery O70.0(~~deep~~) (~~without perineal laceration~~) ~~O71.4~~
- - - and muscles (perineal) (vaginal) O70.1
- - - high (deep) (instrumental) (mid) (sulcus) O71.4
- - - - with perineum ~~O70.0~~
- - - - and muscles (perineal) (vaginal) O70.1
- - nonpuerperal, nontraumatic N89.8

Rupture, ruptured (see also Injury/by site)

- vagina S31.4
- - complicating delivery (~~see also~~ ~~Laceration/vagina/complicating delivery~~) O71.4
- valve, valvular (heart) — see Endocarditis

Tear, torn (traumatic) (see also Wound, open) T14.1

- periurethral tissue, obstetric trauma ~~O71.5~~O70.0
- rectovaginal septum — see Laceration/rectovaginal septum
- ...
- urethra, obstetric trauma O71.5
- - periurethral tissue O70.0
- uterus — see Injury/uterus

TABULAR LIST OF DISEASES

O70

▼1551

Perineal laceration during delivery

Includes: episiotomy extended by laceration

Excludes: obstetric high vaginal laceration ~~alone~~ (O71.4)
vaginal sulcus laceration (O71.4)

O70.0

First degree perineal laceration during delivery

Perineal graze, laceration, rupture or tear (involving):

- fourchette }
- labia }
- periurethral tissue }
- skin } during delivery
- slight }
- vagina, low }
- vulva }

Excludes: periurethral laceration involving urethra (O71.5)
that with laceration of:
• high vaginal wall (middle) (upper third of vaginal wall) (O71.4)
• vaginal sulcus (O71.4)

O71

Other obstetric trauma

O71.4

Obstetric high vaginal laceration (alone)

Laceration of vaginal wall without mention of perineal laceration
• middle or upper third of vaginal wall
• vaginal sulcus

Excludes: ~~that of the lower vagina with perineal laceration (O70.-)~~

O71.5 Other obstetric injury to pelvic organs

Obstetric injury to:

- bladder
- urethra

Excludes: (minor) laceration involving periurethral tissue only (O70.0)

15.11. Pre-eclampsia superimposed on chronic hypertension

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Albuminuria, albuminuric (acute) (chronic)

(subacute) (see also *Proteinuria*) R80

- complicating pregnancy, childbirth or puerperium O12.1

— with

— ~~gestational hypertension (see also *Pre-eclampsia*)~~

O14.9

— ~~pre-existing hypertensive disorder O11~~

- gestational O12.1

— with

— ~~gestational hypertension (see also *Pre-eclampsia*)~~

O14.9

— ~~pre-existing hypertensive disorder O11~~

- orthostatic N39.2

- postural N39.2

— ~~pre-eclamptic (see also *Pre-eclampsia*) O14.9~~

— ~~affecting fetus or newborn P00.0~~

— ~~severe O14.1~~

— ~~affecting fetus or newborn P00.0~~

Alcaptonuria E70.2

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (primary) (systemic) I10

- complicating pregnancy, childbirth or puerperium O16

- - with

— ~~albuminuria (and oedema) (see also *Pre-eclampsia*)~~

O14.9

— ~~severe O14.1~~

--- heart disease O10.1

---- and kidney disease, pre-existing O10.3

--- kidney disease, pre-existing O10.2

- - affecting fetus or newborn P00.0

- - essential (benign), pre-existing O10.0

--- with superimposed ~~proteinuria~~ *pre-eclampsia* O11

--- malignant, pre-existing O10.0

- - malignant, pre-existing O10.0

--- with superimposed ~~proteinuria~~ *pre-eclampsia* O11

- - pre-existing O10.9

--- with superimposed ~~proteinuria~~ *pre-eclampsia* O11

--- malignant O10.0

- - pregnancy-induced (see also *Hypertension, gestational*) O13

- - secondary to kidney disease, pre-existing O10.4

- - specified NEC O10.4

- - transient — see *Hypertension/gestational*

...

- gestational (pregnancy-induced) ~~(without significant proteinuria) O13~~

— ~~with significant proteinuria or albuminuria (and oedema) (see also *Pre-eclampsia*) O14.9~~

- Goldblatt's I70.1

Heller's disease or syndrome F84.3

HELLP (haemolysis, elevated liver enzymes and low platelet count) syndrome (haemolysis, elevated liver enzymes and low platelet count) O14.2

Helminthiasis (see also *Infestation*) B83.9

Pre-eclampsia O14.9

- affecting fetus or newborn P00.0

- mild O14.0O13

- moderate O14.0

Pregnancy (single) (uterine)

- complicated by — see also *Pregnancy/management affected by*

- - abnormal, abnormality

...

- - albuminuria O12.1

- - - with oedema O12.2

— ~~hypertension (see also *Pre-eclampsia*) O14.9~~

— ~~oedema O12.2~~

- - alcohol dependence (F10.2) O99.3

...

- - oedema O12.0

- - - with proteinuria O12.2

— ~~with gestational hypertension, mild (see also *Pre-eclampsia*) O13~~

- - oligohydramnios NEC O41.0

...

- - pre-eclampsia O14.9

- - - mild O14.0O13

- - - moderate O14.0

...

- - proteinuria O12.1

- - - with oedema O12.2

— ~~hypertension (see also *Pre-eclampsia*) O14.9~~

— ~~oedema O12.2~~

- - protozoal diseases O98.6

Proteinuria R80

- complicating pregnancy, childbirth or puerperium O12.1

—significant, with gestation hypertension (*see also*
Pre-eclampsia) O14.9
 —superimposed on pre-existing hypertensive disorder
 O14
 ...
 - postural N39.2
 —pre-eclampsia (*see also* *Pre-eclampsia*) O14.9
 —affecting fetus or newborn P00.0

Proteus (mirabilis) (morganii), as cause of disease
 classified elsewhere B96.4

Puerperal, puerperium
 - pre-eclampsia (*see also* *Pre-eclampsia*) O14.9
 -- with pre-existing hypertension O11
 -- mild O14.0
 -- moderate O14.0
 -- severe O14.1

TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 15

PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00–O99)

O11 ~~Pre-eclampsia superimposed on chronic hypertension~~~~existing hypertensive disorder with~~
~~superimposed proteinuria~~
 O13 Gestational [pregnancy-induced] hypertension without significant proteinuria
 O14 ~~Pre-eclampsia~~Gestational [pregnancy-induced] hypertension with significant proteinuria

O10 Pre-existing hypertension complicating pregnancy, childbirth and the puerperium

Includes: the listed conditions with pre-existing proteinuria

Excludes: that with increased or superimposed ~~pre-eclampsia~~proteinuria (O11)

O11 ~~Pre-eclampsia superimposed on chronic hypertension~~~~existing hypertensive disorder~~ with superimposed proteinuria

Conditions in O10.- complicated by ~~pre-eclampsia~~increased proteinuria
~~Pre-eclampsia~~Superimposed on ~~pre-eclampsia~~
 • hypertension NOS
 • pre-existing hypertension

O13 Gestational [pregnancy-induced] hypertension without significant proteinuria

Gestational hypertension NOS
~~Mild pre-eclampsia~~Pregnancy-induced hypertension NOS

O14 ~~Pre-eclampsia~~Gestational [pregnancy-induced] hypertension with significant proteinuria

Excludes: superimposed pre-eclampsia (O11)

O14.0 ~~Mild to M~~moderate pre-eclampsia

15.12. Pruritus in pregnancy

A public submission requested that an index entry for pruritus in pregnancy be added at *Pregnancy/complicated by*. In response, the following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Pregnancy (single) (uterine)
 - complicated by — *see also* *Pregnancy/management*
affected by
 ...
 - - conditions in

--- A00–A07 O98.8
 ...
 --- K80–K93 O99.6
 --- L00–L99 NEC O99.7
 --- L29.- O26.88

- - - M00–M82 O99.8

Pruritus, pruritic L29.9

- gravidarum O26.88

- in pregnancy O26.88

- neurogenic (any site) F45.8

TABULAR LIST OF DISEASES

O99

Other maternal diseases classifiable elsewhere but complicating pregnancy, childbirth and the puerperium

O99.7 Diseases of the skin and subcutaneous tissue complicating pregnancy, childbirth and the puerperium

Excludes: herpes gestationis (O26.4)
pruritis in pregnancy (O26.88)

15.13. Reproductive medicine procedures

The MBS updates of 2009 and 2010 were reviewed for incorporation intoACHI. Changes to the MBS item numbers for reproductive medicine procedures have been included inACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Assistance, assisted

- endotracheal respiratory — *see block* [569]
- reproductive technologies, to induce
- - oocyte growth and development 13206-00 [1297]
- - superovulation 13200-00 [1297]

Atherectomy

Counselling 96090-00 [1869]

- for (regarding)
- - addiction
- - - gambling (betting) 96074-00 [1867]
- - - substance (alcohol) (drug) 96073-00 [1867]
- - assisted reproductive services (GIFT) (IVF) technologies, to induce
- - - oocyte growth and development 13206-00 [1297]
- - - superovulation 13200-00 [1297]
- - - using
- - - drugs to induce superovulation 13200-00 [1297]
- - - clomiphene citrate 13206-00 [1297]
- - - unstimulated ovulation 13206-00 [1297]
- - assistive or adaptive device, aid or equipment 96071-00 [1867]

Estimation

- hormones
- - for assisted reproductive services (GIFT) (IVF) technologies, to induce
- - - oocyte growth and development 13206-00 [1297]
- - - superovulation 13200-00 [1297]
- - - using
- - - drugs to induce superovulation 13200-00 [1297]
- - - clomiphene citrate 13206-00 [1297]
- - - unstimulated ovulation 13206-00 [1297]
- lung compliance — *see Test, testing/respiratory system/function*

Monitoring

- intracranial pressure 39015-02 [3]

- ovulation for artificial insemination 13203-00 [1297]
- - for
- - - artificial insemination 13203-00 [1297]
- - - superovulation treatment cycles 13203-00 [1297]
- pH for assessment of gastro-oesophageal reflux (24 hours) 11810-00 [1859]

Preparation

- semen
- - for ~~reproductive medicine procedure~~ artificial insemination 13221-00 [1177]
- - with assisted reproductive technologies, to induce
- - - oocyte growth and development 13206-00 [1297]
- - - superovulation 13200-00 [1297]
- tooth

Procedure

- for
- - alimentary continuity (primary restoration)
- - ...
- - reproductive medicine (in vitro fertilisation) NEC ~~43215-02~~ 13215-03 [1297]
- - - assisted reproductive technologies, to induce
- - - - oocyte growth and development 13206-00 [1297]
- - - - superovulation 13200-00 [1297]
- - - intracytoplasmic sperm injection 13251-00 [1177]
- - - management 13209-00 [1297]
- - - monitoring ovulation for artificial insemination 13203-00 [1297]
- - - planning 13209-00 [1297]
- - - preparation of semen for artificial insemination 13221-00 [1177]
- - - retrieval oocyte (transvaginal) 13212-00 [1297]
- - ...
- - - using
- - - drugs to induce superovulation 13200-00 [1297]
- - - clomiphene citrate 13206-00 [1297]
- - - unstimulated ovulation 13206-00 [1297]

- - retinal detachment (tear) repair NEC 90079-00 [212]

Service(s)

~~assisted reproductive (GIFT) (IVF)~~
~~using~~
~~drugs to induce superovulation 13200-00 [1297]~~
~~clomiphene citrate 13206-00 [1297]~~
~~unstimulated ovulation 13206-00 [1297]~~
 - coordination 96107-00 [1915]
 - embryology laboratory
 - for assisted reproductive services (GIFT) (IVF) technologies, to induce
 - - - oocyte growth and development 13206-00 [1297]
 - - - superovulation 13200-00 [1297]
~~using~~
~~drugs to induce superovulation 13200-00 [1297]~~
~~clomiphene citrate 13206-00 [1297]~~

~~unstimulated ovulation 13206-00 [1297]~~
 - ovulation monitoring for artificial insemination 13203-00 [1297]

Setback

Ultrasound (diagnostic) (scan) 90908-00 [1950]
 - with
 - - assisted reproductive services (GIFT) (IVF) technologies, to induce
 - - - oocyte growth and development 13206-00 [1297]
 - - - superovulation 13200-00 [1297]
~~using~~
~~drugs to induce superovulation 13200-00 [1297]~~
~~clomiphene citrate 13206-00 [1297]~~
~~unstimulated ovulation 13206-00 [1297]~~
 -- bronchoscopy 30688-00 [1949]

TABULAR LIST OF INTERVENTIONS

1177

Application, insertion or removal procedures on testis, vas deferens, epididymis or spermatic cord

13221-00 Preparation of semen for ~~reproductive medicine procedures~~ artificial insemination

Excludes: that with assisted reproductive technologies (13200-00, 13206-00 [1297])

1297

Procedures for reproductive medicine

13206-00 Assisted reproductive ~~technologies~~ services, using unstimulated ovulation or ovulation stimulated by clomiphene citrate to induce oocyte growth and development

Includes: embryology laboratory services
 quantitative estimation of hormones
semen preparation
 treatment counselling
 ultrasound examinations

13200-00 Assisted reproductive ~~technologies~~ services, using drugs to induce superovulation

Includes: embryology laboratory services
 quantitative estimation of hormones
semen preparation
 treatment counselling
 ultrasound examinations

13203-00 Ovulation monitoring services, for ~~superovulation treatment cycles and~~ artificial insemination

15.14. Suture, pelvic floor / perineum (Indexing)

It was highlighted that the essential modifier 'obstetric laceration, current' should be added to *Suture/pelvic floor* and *Suture/perineum* in the ACHI Alphabetic Index. The following amendments have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Suture (laceration)

- palate, superficial wound 30026-00 [1635]
 - - soft tissue 30029-00 [1635]
 - pelvic floor, obstetric laceration, current — see *Suture/obstetric laceration, current/perineum*
 - perineum, obstetric laceration, current — see *Suture/obstetric laceration, current/perineum*
 - peritoneum 90329-01 [1000]

15.15. ACS 1530 *Premature labour and delivery (Deleted)*

A public submission was received requesting an amendment to ACS 1530 *Premature labour and delivery*. On review, it was agreed by ITG, that the standard was superfluous as the guidelines were already contained within ACS 0001 *Principal diagnosis* and by following the Alphabetic Index and Tabular List. Consequently ACS 1530 *Premature labour and delivery* was deleted for Eighth Edition.

TABULAR LIST OF DISEASES

O42

Premature rupture of membranes

▼1530

Note: When a patient with premature rupture of membranes proceeds to a caesarean section without labour, the starting time of the operation should be used to calculate the time interval.

Use additional code from category O09.- to identify duration of pregnancy, when less than 37 completed weeks of gestation.

Code also preterm labour and delivery (O60.-) if applicable.

O60

Preterm labour and delivery

▼1511, ~~4530~~, 1550

Onset of labour before 37 completed weeks of gestation

Use additional code from category O09.- to identify duration of pregnancy.

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS

SPECIALTY STANDARDS

15. Pregnancy, childbirth and the puerperium

1521 Conditions complicating pregnancy

~~1530 Premature labour and delivery~~

1534 Forceps delivery

0002 ADDITIONAL DIAGNOSES

...

ADDITIONAL DIAGNOSIS REPORTING REFERRED TO IN OTHER STANDARDS

The standards listed below include guidance that, in some cases, may indicate that certain conditions that would not normally meet ACS 0002 should be assigned as additional diagnoses. Examples of these sorts of cases are 'status' codes such as HIV, smoking, carrier, conditions found at endoscopy and 'flag' codes such as duration of pregnancy, or outcome of delivery.

Note that this list may not always be exhaustive as standards are changed over time.

- 0005 *Syndromes*

...

- 1521 *Conditions complicating pregnancy*
- ~~1530 Premature labour and delivery~~
- 1544 *Complications following abortion and ectopic and molar pregnancy*

~~1530~~ PREMATURE LABOUR AND DELIVERY

~~Where the patient is admitted for management of their preterm labour and does not deliver during the episode of care, assign O60.0 *Preterm labour without delivery* as the principal diagnosis. The reason (if documented) for the onset of preterm labour should be assigned as an additional diagnosis.~~

~~When coding 'premature delivery' or delivery with onset of spontaneous labour before 37 completed weeks gestation, assign a code from category O80–O84 *Delivery* as the principal diagnosis with the reason for early delivery (if documented) and O60.1 *Preterm spontaneous labour with preterm delivery* as additional diagnoses.~~

~~For premature deliveries where there has been no labour (ie caesarean) or where there has been an induction, the labour has not been spontaneous. Therefore, assign a code from category O80–O84 *Delivery* as the principal diagnosis with the reason for early delivery (if documented) and O60.3 *Preterm delivery without spontaneous labour* as additional diagnoses.~~

15.16. ACS 1551 *Obstetric perineal lacerations/grazes*

Advice was published in *Coding Matters*, September 2006 (Vol 13, No 2) regarding the code assignment for perineal lacerations that are not repaired due to the patient's choice. This advice has now been incorporated into ACS 1551 *Obstetric perineal lacerations/grazes* for Eighth Edition.

AUSTRALIAN CODING STANDARDS

1551 OBSTETRIC PERINEAL LACERATIONS/GRAZES

...

CLASSIFICATION

Laceration/grazes

Obstetric perineal lacerations/grazes should only be assigned as an additional diagnosis in the delivery episode.

Perineal grazes and lacerations that are not sutured are not coded, with the exception of perineal lacerations/grazes where repair is clinically warranted but is not carried out, for example, where the patient chooses not to have their tear repaired. In this scenario assign the appropriate code for the laceration/graze with the addition of a code from Z53 *Persons encountering health services for specific procedures, not carried out*.

If 'labial graze' is documented and has been sutured, assign O70.0 *First degree perineal laceration during delivery*.

16. Perinatal

16.1. Cerebral leukomalacia

A review of neonatal conditions, including cerebral leukomalacia, was undertaken in conjunction with the Neonatal CTG.

The most common form of brain injury in preterm infants is periventricular leukomalacia (PVL), which is also the most common cause of cerebral palsy in preterm infants.

The current classification of neonatal cerebral leukomalacia does not distinguish between non-cystic and the more severe cystic leukomalacia. The following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Leukomalacia

- newborn
- - cerebral P91.20
- - - cystic P91.21
- - periventricular (PVL) P91.20
- - - cystic P91.21
- - subcortical P91.20
- - - cystic P91.21

Leukomelanopathy, hereditary D72.0

TABULAR LIST OF DISEASES

P91 Other disturbances of cerebral status of newborn

P91.2 Neonatal cerebral leukomalacia
Periventricular leukomalacia [PVL]
Subcortical leukomalacia

P91.2 Neonatal cerebral leukomalacia

Periventricular leukomalacia [PVL]
Subcortical leukomalacia

☛P91.20 Neonatal cerebral leukomalacia, unspecified

☛P91.21 Neonatal cerebral leukomalacia, cystic

16.2. Hypoxic ischaemic encephalopathy (HIE)

The classification of hypoxic ischaemic encephalopathy (HIE) was reviewed following recommendations of the Neonatal CTG.

HIE is the term used to describe damage to cells in the central nervous system due to a lack of oxygen and is one of the clinical manifestations of perinatal asphyxia. HIE has been classified into three categories – mild, moderate and severe. The terms ‘stage’ and ‘grade’ are used interchangeably. The following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Encephalopathy (acute) G93.4

- anoxic — *see also* *Damage/brain/anoxic*
- - ischaemic, neonatal (~~neonatal~~) (*see also* *Encephalopathy/neonatal, ischaemia*) P91.60
- arteriosclerotic I67.2
- ...
- hypoxic — *see also* *Damage/brain/anoxic*
- - ischaemic of newborn (*see also* *Encephalopathy/neonatal, ischaemia*) P91.60
- in (due to)

- ...
- necrotising, subacute (Leigh) G31.8
- neonatal, ischaemic P91.60
- - mild P91.61
- - moderate P91.62
- - severe P91.63
- - stage 1 (grade 1) P91.61
- - stage 2 (grade 2) P91.62
- - stage 3 (grade 3) P91.63
- pellagrous E52† G32.8*

TABULAR LIST OF DISEASES

P91 Other disturbances of cerebral status of newborn

~~P91.6~~ Hypoxic ischaemic encephalopathy [HIE] of newborn
~~▼1616~~

P91.6 Hypoxic ischaemic encephalopathy [HIE] of newborn

Code also any co-existent severe birth asphyxia (P21.0).

✧P91.60 Hypoxic ischaemic encephalopathy [HIE] of newborn, unspecified

✧P91.61 Stage 1 hypoxic ischaemic encephalopathy [HIE] of newborn
 Grade 1 } hypoxic ischaemic encephalopathy [HIE] of newborn
 Mild }

✧P91.62 Stage 2 hypoxic ischaemic encephalopathy [HIE] of newborn
 Grade 2 } hypoxic ischaemic encephalopathy [HIE] of newborn
 Moderate }

Includes: seizures

✧P91.63 Stage 3 hypoxic ischaemic encephalopathy [HIE] of newborn
 Grade 3 } hypoxic ischaemic encephalopathy [HIE] of newborn
 Severe }

Includes: seizures

AUSTRALIAN CODING STANDARDS

TABLE OF CONTENTS SPECIALTY STANDARDS

16. Certain conditions originating in the perinatal period

- ...
- 1615 Specific interventions for the sick neonate
- ~~1616~~ Hypoxic ischaemic encephalopathy (HIE) of newborn
- 1617 Neonatal sepsis/risk of sepsis

~~1616~~ **HYPOXIC ISCHAEMIC ENCEPHALOPATHY (HIE) OF NEWBORN**

Definition

~~This clinical syndrome is the encephalopathic process which follows a significant perinatal hypoxic-ischaemic injury. The encephalopathy is graded clinically as:~~

~~Grade 1 Hyperalertness, hyperreflexia, dilated pupils, tachycardia but no seizures.~~

~~Grade 2 Lethargy, miosis, bradycardia, depressed reflexes (eg Moro), hypotonia and seizures.~~

~~Grade 3 Stupor, flaccidity, seizures, absent Moro and bulbar reflexes.~~

Classification

Grade 1 Code to P91.6 ~~Hypoxic ischaemic encephalopathy [HIE] of newborn~~

Grade 2 Code to P91.6 ~~Hypoxic ischaemic encephalopathy [HIE] of newborn~~

+

P90 ~~Convulsions of newborn~~

Grade 3 Code to P91.6 ~~Hypoxic ischaemic encephalopathy [HIE] of newborn~~

+

P91.4 ~~Neonatal cerebral depression~~

+

P90 ~~Convulsions of newborn~~

Any co-existent severe birth asphyxia (P21.0 ~~Severe birth asphyxia~~) should be coded if documented

16.3. Jaundice

A query related to advice previously published in *Coding Matters*, July 1998 (Vol. 5, No. 1), *Readmitted for jaundice*, has been reflected in the ICD-10-AM Tabular List and ACS for Eighth Edition.

TABULAR LIST OF DISEASES

P58

Neonatal jaundice due to other excessive haemolysis

▼1615

Excludes: jaundice due to isoimmunisation (P55–P57)

P59

Neonatal jaundice from other and unspecified causes

▼1615

Excludes: due to inborn errors of metabolism (E70–E89)
kernicterus (P57.-)

AUSTRALIAN CODING STANDARD

Refer section 16.12 ACS 1615 *Specific interventions for the sick neonate* (page 257) for full changes to ACS 1615.

1615 SPECIFIC INTERVENTIONS FOR THE SICK NEONATE

...

Phototherapy

A code for phototherapy of the newborn should be assigned only when sustained phototherapy (> 12 hours) is provided for the treatment of neonatal jaundice. The procedure code is 90677-00 [1611] *Other phototherapy, skin*.

Jaundice

Note:—A diagnosis code for jaundice of the newborn **should only be assigned when > 12 hours of phototherapy is provided**.

However, if a neonate is readmitted specifically for jaundice with or without phototherapy, jaundice should be coded as the principal diagnosis.

16.4. Jaundice, from hepatocellular damage

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

P59 Neonatal jaundice from other and unspecified causes

▼1615

P59.2 Neonatal jaundice from other and unspecified hepatocellular damage

Fetal or neonatal (giant cell) (idiopathic) hepatitis

Fetal or neonatal (idiopathic) hepatitis

Giant cell hepatitis

Excludes: congenital viral hepatitis (P55.3)

16.5. Peri/intraventricular haemorrhage

The classification of peri/intraventricular haemorrhage was reviewed following recommendations from the Neonatal CTG. Bleeding into the ventricles of the brain can occur as a complication of prematurity and the grade assigned is an indicator of severity and therefore neurodevelopmental prognosis and outcomes.

The Australian and New Zealand Neonatal Network (ANZNN) define the grades of intraventricular haemorrhage as:

Grade	Description
I	Isolated germinal matrix haemorrhage
II	Intraventricular haemorrhage with normal ventricle size
III	Intraventricular haemorrhage of sufficient severity to dilate the ventricles with blood
IV	Intraparenchymal haemorrhage

The following changes have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Haemorrhage, haemorrhagic R58

- intraocular H44.8

- intraparenchymal, fetus or newborn P52.22

- intrapartum (see also

Haemorrhage/complicating/delivery) O67.9

...

- intraventricular I61.5

- - fetus or newborn (nontraumatic) P52.3

- - - birth trauma P10.2

- - - grade

- - - - 1 P52.0

- - - - 2 P52.1

- - - - 3 P52.21

- - - - 4 ~~P52.4~~ P52.22

- intravesical N32.8

...

- peritonsillar tissue J35.8

- - due to infection J36

- periventricular – see Haemorrhage/intraventricular

- petechial R23.3

...

- subependymal

- - fetus or newborn P52.0

- - - with intraventricular extension P52.1

- - - ~~and intracerebral extension~~ P52.2

- subhyaloid H35.6

TABULAR LIST OF DISEASES

P52 Intracranial nontraumatic haemorrhage of fetus and newborn

P52.0 Intraventricular (nontraumatic) haemorrhage, grade 1, of fetus and newborn

	<u>Subependymal germinal matrix haemorrhage</u> Subependymal haemorrhage (without intraventricular extension)
P52.1	Intraventricular (nontraumatic) haemorrhage, grade 2, of fetus and newborn <u>Intraventricular haemorrhage with no ventricular distention</u> Subependymal haemorrhage with intraventricular extension
P52.2	Intraventricular (nontraumatic) haemorrhage, grade 3 and grade 4, of fetus and newborn Subependymal haemorrhage with both intraventricular and intracerebral extension
⊕P52.21	<u>Intraventricular (nontraumatic) haemorrhage, grade 3, of fetus and newborn</u> <u>Intraventricular haemorrhage with ventricle distended with blood</u>
⊕P52.22	<u>Intraventricular (nontraumatic) haemorrhage, grade 4, of fetus and newborn</u> <u>Intraparenchymal haemorrhage</u>

16.6. Posthaemorrhagic hydrocephalus

The classification of posthaemorrhagic hydrocephalus was reviewed following the recommendations of the Neonatal CTG.

Hydrocephalus following intraventricular haemorrhage (IVH) is one of the most serious complications of premature birth and post-IVH hydrocephalus, also known as posthaemorrhagic hydrocephalus of prematurity (PHHP), it has a direct relationship with the grade of intraventricular haemorrhage (usually grade III-IV) as well as prematurity and very low birth weight. Clinical advice confirmed that this hydrocephalus is not congenital but acquired. Consequently, the following changes were made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Hydrocephalus (acquired) (external) (internal) (malignant) (recurrent) G91.9	...
- newborn-Q03.9	- obstructive G91.1
- - with spina bifida (<i>see also</i> Spina bifida/ <i>with hydrocephalus</i>) Q05.4-	- <u>post</u>
- - congenital Q03.9	- - <u>intraventricular haemorrhage (IVH), newborn G91.8</u>
- - <u>post intraventricular haemorrhage (IVH) G91.8</u>	- - <u>traumatic NEC G91.3</u>
- - <u>posthaemorrhagic G91.8</u>	- <u>posthaemorrhagic, newborn G91.8</u>
- noncommunicating G91.1	- <u>post traumatic NEC G91.3</u>
	- specified NEC G91.8

TABULAR LIST OF DISEASES

G91	Hydrocephalus
G91.8	Other hydrocephalus <u>Neonatal:</u> • <u>post intraventricular haemorrhage (IVH) hydrocephalus</u> • <u>posthaemorrhagic hydrocephalus</u>

16.7. Sudden infant death syndrome (SIDS)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Cot death (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
Cotard's syndrome F22.0

Crib death (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
Cribriform hymen Q52.3

Death

- cot (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
 - crib (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
 - family member Z63.4
 ...
 - sudden unexplained (cause unknown) R96.0
 - - during delivery O95
 - - infant (without mention of autopsy) R95.9
 - - - with mention of autopsy R95.0
 - - puerperal, during puerperium O95
 - unattended (cause unknown) R98

Sudden

- death, cause unknown R96.0
 - - during childbirth O95
 - - infant (without mention of autopsy) R95.9
 - - - with mention of autopsy R95.0
 - - obstetric O95
 - - puerperal, postpartum O95
 - heart failure (*see also Failure, heart*) I50.9
 - infant death syndrome (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
Sudeck's atrophy, disease or syndrome M89.0-

Syndrome

- subcoracoid-pectoralis minor G54.0
 - sudden infant death (without mention of autopsy) R95.9
 - - with mention of autopsy R95.0
 - Sudeck's atrophy M89.0-

TABULAR LIST OF DISEASES

R95 Sudden infant death syndrome

▼ 1610

R95.0 Sudden infant death syndrome with mention of autopsy
 R95.9 Sudden infant death syndrome without mention of autopsy
Sudden infant death syndrome, unspecified

R96 Other sudden death, cause unknown

Excludes: sudden:
 • cardiac death, so described (I46.1)
 • infant death syndrome (R95.-)

AUSTRALIAN CODING STANDARDS

1610 SUDDEN INFANT DEATH SYNDROME/ACUTE LIFE THREATENING EVENT

... CLASSIFICATION

1. Most SIDS cases present as deaths before arrival and hence would not usually require coding for admission purposes.
2. Occasionally, resuscitative efforts are initiated but the child subsequently dies. If the postmortem results confirm SIDS, then assign R95.0 *Sudden infant death syndrome with mention of autopsy*.
3. Rarely, SIDS may complicate an admission for other reasons. If the postmortem results confirm SIDS, then assign R95.0 *Sudden infant death syndrome with mention of autopsy*.
4. In cases of apparent ALTE where subsequent investigations establish an underlying cause (including diverse neurological, gastrointestinal and respiratory disorders), the underlying cause should be coded only.
5. In cases of apparent ALTE where subsequent investigations do not establish an underlying cause, assign R95.- *Sudden infant death syndrome*.

16.8. Therapeutic hypothermia

Guidelines for the classification of therapeutic hypothermia in neonates have been incorporated into ACHI for Eighth Edition following the recommendations of the Neonatal CTG.

Refer section 24.1 Therapeutic hypothermia (page 282) for changes to therapeutic hypothermia in neonates.

16.9. Ventilation – administration of nitric oxide

Guidelines for the classification of administration of nitric oxide in neonates have been included in Eighth Edition following the recommendations of the Neonatal CTG.

Nitric oxide gas is a drug administered by inhalation, and delivered via mechanical ventilation. In term or near term (>34 weeks) neonates, it is used for treatment of respiratory failure and provides improved oxygenation and reduces the need for extracorporeal membrane oxygenation.

The following changes have been made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Infusion

...

- thrombolytic agent — *see* *Infusion/agent/thrombolytic*

Inhalation

- nitric oxide 92210-00 [1889]

Injection (around) (into) (of) – *see also* *Administration*

Therapy

- nebuliser 92043-00 [1889]

- nitric oxide (inhalation) 92210-00 [1889]

- noninvasive ventilation

TABULAR LIST OF INTERVENTIONS

Refer section 16.10 Ventilation – combined ventilatory support in neonates (page 254) for overlapping changes to blocks [569] and [570].

CHAPTER 7

PROCEDURES ON RESPIRATORY SYSTEM

(BLOCKS 520–5710)

569

Ventilatory support

▼ 1006, 1615

Bi-level positive airway pressure [BiPAP] [airway pressure release ventilation] [pressure control ventilation] by endotracheal tube/tracheostomy

Continuous positive airway pressure [CPAP] by endotracheal tube/tracheostomy

Intermittent mandatory ventilation [IMV]

Invasive ventilation

Mechanical ventilation

Positive end expiratory pressure [PEEP]

Pressure support ventilation [PSV]

Synchronous intermittent mandatory ventilation [SIMV]

Includes: endotracheal:

- intubation

- respiratory assistance

mechanical ventilation by:

- endotracheal tube (ETT)

- nasal

- oral

- tracheostomy

weaning of intubated (endotracheal tube/tracheostomy) patient by any method

Code also when performed:

• neonates:

- nitric oxide therapy (92210-00 [1889])
 - when combined invasive and noninvasive ventilatory support is \geq 96 hours (92211-00 [571])
- tracheostomy:
- percutaneous (41880-00 [536])
 - permanent (41881-01 [536])
 - temporary (41881-00 [536])

Excludes: continuous negative pressure ventilation [CNPV] (92041-00 [568])
intermittent positive pressure breathing [IPPB] (see block [570])
intermittent positive pressure ventilation [IPPV] (see block [570])
noninvasive ventilatory support (see block [570])

570

Noninvasive ventilatory support

▼ 1006, 1615

Bi-level positive airway pressure [BiPAP]
Continuous positive airway pressure [CPAP]
Intermittent mask CPAP
Intermittent positive pressure breathing [IPPB]
Intermittent positive pressure ventilation [IPPV]
Noninvasive mask ventilation [NIMV]
Noninvasive pressure ventilation [NIPV]

Includes: ventilatory support by:

- face mask
- mouthpiece
- nasal mask/pillows/prongs
- nasal/nasopharyngeal tube

Code also when performed:

• neonates:

- nitric oxide therapy (92210-00 [1889])
- when combined invasive and noninvasive ventilatory support is \geq 96 hours (92211-00 [571])

Excludes: that by:

- endotracheal intubation (see block [569])
- tracheostomy (see block [569])

1889

Other therapeutic interventions on respiratory system

92210-00 Nitric oxide therapy

▼ 1615

Code first:

- ventilatory support (13882 [569], 92209 [570])

AUSTRALIAN CODING STANDARDS

Refer section 16.12 ACS 1615 Specific interventions for the sick neonate (page 257) for full changes to ACS 1615.

1615 SPECIFIC INTERVENTIONS FOR THE SICK NEONATE

The coding standards set out below relate to specific interventions for the sick neonate. These standards will provide a valuable body of data which will assist in improving AR-DRG classification of neonatal conditions.

...

2. CODE THE FOLLOWING INTERVENTION WHEN PERFORMED:

....

Nitric oxide therapy

Inhalation of nitric oxide gas with invasive or noninvasive ventilatory support is used to treat critical respiratory failure in neonates.

Code 92210-00 [1889] Nitric oxide therapy should be assigned in addition to a ventilatory support code.

16.10. Ventilation – combined ventilatory support in neonates

A public submission and a recommendation from the Neonatal CTG highlighted the need to classify combined continuous ventilatory support (CVS) and noninvasive ventilation (NIV). ACS 1006 *Ventilatory support* states that each ventilatory mode should be assigned a separate code. The following changes have been made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Bilevel positive airway pressure (BiPAP)

- (nonintubated) — see block [570]
- combined with continuous ventilatory support, for neonates — see block [571]
- via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]

BiPAP (bilevel positive airway pressure)

- (nonintubated) — see block [570]
- combined with continuous ventilatory support, for neonates — see block [571]
- via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]

Continuous positive airway pressure (CPAP)

- (nonintubated) — see block [570]
- combined with continuous ventilatory support, for neonates — see block [571]
- via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]

CPAP (continuous positive airway pressure)

- (nonintubated) — see block [570]
- combined with continuous ventilatory support, for neonates — see block [571]
- via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]

Intermittent positive pressure breathing (IPPB) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Intermittent positive pressure ventilation (IPPV) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Interrogation

IPPB (intermittent positive pressure breathing) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

IPPV (intermittent positive pressure ventilation) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Iridectomy (peripheral) 42764-04 [189]

Management (of)

- continuous ventilatory support
- - ≤ 24 hours 13882-00 [569]
- - > 24 and < 96 hours 13882-01 [569]
- - ≥ 96 hours 13882-02 [569]
- - combined with noninvasive ventilatory support, for neonates — see block [571]
- device
- ...

- ventilatory support (nonintubated) — see block [570]
- - combined with continuous ventilatory support, for neonates — see block [571]
- - via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]

NIMV (noninvasive mask ventilation) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

NIPV (noninvasive pressure ventilation) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Nissen's fundoplication — see Fundoplasty/abdominal approach and Fundoplasty/laparoscopic approach

Noninvasive mask ventilation (NIMV) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Noninvasive pressure ventilation (NIPV) — see block [570]

- combined with continuous ventilatory support, for neonates — see block [571]

Notchplasty

Pressure support

- ventilation (PSV) — see block [569]
- - combined with continuous ventilatory support, for neonates — see block [571]

PRK (photorefractive keratoplasty) 90063-00 [173]

Therapy

- bilevel positive airway pressure (BiPAP) (nonintubated) — see block [570]
- - combined with continuous ventilatory support, for neonates — see block [571]
- - via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]
- ...
- continuous
- - negative pressure
- ...
- - positive airway pressure (CPAP) (nonintubated) — see block [570]
- - - combined with continuous ventilatory support, for neonates — see block [571]
- - - via endotracheal tube or tracheostomy (with continuous ventilatory support) — see block [569]
- ...
- intermittent positive pressure
- - breathing (IPPB) — see block [570]
- - - combined with continuous ventilatory support, for neonates — see block [571]
- - ventilation (IPPV) — see block [570]

- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- interpersonal 96177-00 [1873]

...

- noninvasive ventilation
- - mask (NIMV) — *see block [570]*
- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- - pressure (NIPV) — *see block [570]*
- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- occlusal (dental)

Ventilation

- bilevel positive airway pressure (BiPAP) (nonintubated) — *see block [570]*
- - combined with continuous ventilatory support, for neonates — *see block [571]*
- - via endotracheal tube or tracheostomy (with continuous ventilatory support) — *see block [569]*
- continuous
- - mechanical — *see block [569]*
- - - combined with noninvasive ventilatory support, for neonates — *see block [571]*
- - negative pressure

- ...
- - positive airway pressure (CPAP) (nonintubated) — *see block [570]*
- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- - - via endotracheal tube or tracheostomy (with continuous ventilatory support) — *see block [569]*
- intermittent positive pressure
- - breathing (IPPB) — *see block [570]*
- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- - ventilation (IPPV) — *see block [570]*
- - - combined with continuous ventilatory support, for neonates — *see block [571]*
- mechanical, continuous
- - combined with noninvasive ventilatory support, for neonates — *see block [571]*
- - endotracheal respiratory assistance — *see block [569]*
- ...
- noninvasive
- - combined with continuous ventilatory support, for neonates — *see block [571]*
- - mask ventilation (NIMV) — *see block [570]*

TABULAR LIST OF INTERVENTIONS

Refer section 16.9 Ventilation – administration of nitric oxide (page 252) for overlapping changes to blocks [569] and [570].

Refer section 10.3 High flow nasal cannula (page 154) for overlapping changes to block [570].

LIST OF ACHI BLOCK NUMBERS

Block No Block Name

...

- | | |
|-----|---------------------------------|
| 570 | Noninvasive ventilatory support |
| 571 | Combined ventilatory support |
| 600 | Incision procedures on atrium |

CHAPTER 7

PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520–5710)

569

Ventilatory support

▼ 1006, 1615

Bi-level positive airway pressure [BiPAP] [airway pressure release ventilation] [pressure control ventilation] by endotracheal tube/tracheostomy
 Continuous positive airway pressure [CPAP] by endotracheal tube/tracheostomy
 Intermittent mandatory ventilation [IMV]
 Invasive ventilation
 Mechanical ventilation
 Positive end expiratory pressure [PEEP]
 Pressure support ventilation [PSV]
 Synchronous intermittent mandatory ventilation [SIMV]

Includes: endotracheal:
 • intubation
 • respiratory assistance

mechanical ventilation by:

- endotracheal tube (ETT)
- nasal
- oral
- tracheostomy

weaning of intubated (endotracheal tube/tracheostomy) patient by any method

Code also when performed:

• neonates:

- nitric oxide therapy (92210-00 [1889])
- when combined invasive and noninvasive ventilatory support is \geq 96 hours (92211-00 [571])
- tracheostomy:
 - percutaneous (41880-00 [536])
 - permanent (41881-01 [536])
 - temporary (41881-00 [536])

Excludes: continuous negative pressure ventilation [CNPV] (92041-00 [568])
intermittent positive pressure breathing [IPPB] (see block [570])
intermittent positive pressure ventilation [IPPV] (see block [570])
noninvasive ventilatory support (see block [570])

570

Noninvasive ventilatory support

▼ 1006, 1615

Bi-level positive airway pressure [BiPAP]
Continuous positive airway pressure [CPAP]
High flow therapy [HFT] (nasal high flow cannula [HFNC])
Intermittent mask CPAP
Intermittent positive pressure breathing [IPPB]
Intermittent positive pressure ventilation [IPPV]
Noninvasive mask ventilation [NIMV]
Noninvasive pressure ventilation [NIPV]

Includes: ventilatory support by:

- face mask
- mouthpiece
- nasal mask/pillows/prongs
- nasal/nasopharyngeal tube

Code also when performed:

• neonates:

- nitric oxide therapy (92210-00 [1889])
- when combined invasive and noninvasive ventilatory support is \geq 96 hours (92211-00 [571])

Excludes: that by:

- endotracheal intubation (see block [569])
- tracheostomy (see block [569])

571

Combined ventilatory support

▼ 1615

Combined continuous (invasive) and noninvasive ventilatory support listed in blocks [569] and [570]

Note: For neonates only. Duration of combined ventilatory support must be \geq 96 hours.

Code first:

• duration of ventilatory support:

- continuous (invasive) (see block [569])
- noninvasive (see block [570])

92211-00 Management of combined ventilatory support, \geq 96 hours

AUSTRALIAN CODING STANDARDS

Refer section 16.12 ACS 1615 Specific interventions for the sick neonate (page 257) for full changes to ACS 1615.

1615 SPECIFIC INTERVENTIONS FOR THE SICK NEONATE

The coding standards set out below relate to specific interventions for the sick neonate. These standards will provide a valuable body of data which will assist in improving AR-DRG classification of neonatal conditions.

...

1. CODE THE FOLLOWING ONLY WHEN THE INTERVENTION MEETS THE SPECIFIED CRITERIA:

...

Ventilatory support for resuscitation at birth **Combined ventilatory support (invasive and noninvasive)**

Neonates may receive both continuous ventilatory support (CVS) and noninvasive ventilatory support (NIV) in the same episode of care. CVS and NIV should be assigned separate codes as per the guidelines in ACS 1006 *Ventilatory support, Classification, point 1a*.

In addition, when the hours of invasive and noninvasive ventilatory support are added together and the total is ≥ 96 hours, assign 92211-00 *Management of combined ventilatory support, ≥ 96 hours*.

For resuscitation at birth

Ventilation (eg bag and mask, or IPPB) administered for resuscitation at birth should not be coded.

For specific information on the classification of ventilatory support refer to ACS 1006 *Ventilatory support*.

16.11. Ventilation – high flow nasal cannula

The classification of high flow nasal cannula (HFNC) was reviewed following a recommendation from the Neonatal CTG. HFNC, more commonly known as ‘high flow’, has been introduced as an alternative to NIV as it delivers air and oxygen at flow rates greater than those traditionally used with a nasal interface.

Recent studies indicate that HFNC is used in a large number of neonatal intensive care units (NICUs) across Australia and New Zealand because it reduces nasal trauma, provides continuous positive airway pressure and easier access to infant for breast feeding, parent bonding and neurodevelopmental care.

Refer section 10.3 High flow nasal cannula (page 154) for details of changes for High flow.

16.12. ACS 1615 Specific interventions for the sick neonate

As a result of consultation with the Neonatal CTG the following changes were approved and reflected in ACS 1615 *Specific interventions for the sick neonate*:

- Neonatal ventilatory support
- Administration of nitric oxide in neonates
- Neonatal procedures
- Neonatal therapeutic hypothermia

At the time of incorporating these proposals the layout of the standard was reviewed, with some minor clarification of wording and refinement of content. Additional ACHI Tabular List amendments were also made for Eighth Edition.

TABULAR LIST OF INTERVENTIONS

694 Arterial catheterisation

▼0042

13303-00 Umbilical artery catheterisation/cannulation in neonate

▼1615

Includes: infusion

738 Venous catheterisation

▼0042

13300-01 Scalp vein catheterisation/cannulation in neonate

▼1615

Includes: infusion

13300-02 Umbilical vein catheterisation/cannulation in neonate

▼1615

Includes: infusion

13319-00 Central vein catheterisation in neonate

▼1615

13300-00 Catheterisation/cannulation of other vein in neonate

▼1615

Includes: infusion

1893 Administration of blood and blood products

▼0302

13706-01 Administration of whole blood

▼1615

Administration of blood NOS
Transfusion of whole blood

13706-02 Administration of packed cells

▼1615

Transfusion of:
• erythrocytes
• packed cells
• red blood cells

92062-00 Administration of other serum

▼1615

Transfusion of:
• albumin
• plasma (fresh frozen) (FFP)

92063-00 Administration of blood expander

▼16150733

Haemodilution
Transfusion of:
• blood expander
• Dextran
• Rheomacrodex

AUSTRALIAN CODING STANDARDS

1615 SPECIFIC INTERVENTIONS FOR THE SICK NEONATE

The coding standards set out below relate to specific interventions for the sick neonate. These standards will provide a valuable body of data which will assist in improving AR-DRG classification of neonatal conditions.

...

1. CODE THE FOLLOWING ONLY WHEN THE INTERVENTION MEETS THE SPECIFIED CRITERIA:

...

Maternal illness/incapacity to care

In cases where a neonate requires care due to maternal illness or 'incapacity to care', the appropriate code should only be assigned if the neonate is **exclusively dependent on nursing care for more than 24 hours (consecutive)**.

Such cases would include 'baby for adoption' (Z02.8 *Other examinations for administrative purposes*) or maternal death (P01.6 *Fetus and newborn affected by maternal death*).

Oxygen therapy

92044-00 [1889] *Other oxygen enrichment* should be assigned only if the oxygen therapy (via cot, headbox, mask or cannula) was performed for **more than four hours**. Examples of diagnoses which may require oxygen therapy are 'transient tachypnoea' (P22.1 *Transient tachypnoea of newborn*) or 'other respiratory problems after birth' (P22.8 *Other respiratory distress of newborn*).

Ventilation for resuscitation at birth

Ventilation (eg bag and mask, or IPPB) administered for resuscitation at birth should not be coded. For specific information on the classification of ventilatory support refer to ACS 1006 *Ventilatory support*.

Parenteral fluid therapy

96199-07 [1920] *Intravenous administration of pharmacological agent, nutritional substance* and 96199-08 [1920] *Intravenous administration of pharmacological agent, electrolytes* should be assigned when used for management of carbohydrate, hydration or electrolyte disorders. Examples of diagnoses that may require parenteral fluid therapy are 'neonatal hypoglycaemia' (P70. *Transitory disorders of carbohydrate metabolism specific to fetus and newborn*) or 'other transient neonatal electrolyte disorders' (P74. *Other transitory neonatal electrolyte and metabolic disturbances*).

Note: These codes should **not be assigned** when these procedures are part of **resuscitation at birth**.

Parenteral antibiotics/anti-infectives

Procedure codes for ~~injection~~ *administration of antibiotics and other anti-infectives* should be assigned **only when given for > 24 hours** (see block [1920] *Administration of pharmacotherapy* with extension of -02). Examples of diagnoses which may require such treatment are 'perinatal infection' (P39.8 *Other specified infections specific to the perinatal period*) and 'neonatal sepsis' (P36.- *Bacterial sepsis of newborn*).

Phototherapy

A code for phototherapy of the newborn should be assigned only when sustained phototherapy (> **12 hours**) is provided for the treatment of neonatal jaundice. The procedure code is 90677-00 [1611] *Other phototherapy, skin*.

Jaundice

Note:—A diagnosis code for jaundice of the newborn **should only be assigned when > 12 hours of phototherapy is provided**.

However, if a neonate is readmitted specifically for jaundice with or without phototherapy, jaundice should be coded as the principal diagnosis.

Ventilatory Support

Combined ventilatory support (invasive and noninvasive)

Neonates may receive both continuous ventilatory support (CVS) and noninvasive ventilatory support (NIV) in the same episode of care. CVS and NIV should be assigned separate codes as per the guidelines in ACS 1006 *Ventilatory support, Classification, point 1a*.

In addition, when the hours of invasive and noninvasive ventilatory support are added together and the total is ≥ 96 hours, assign 92211-00 *Management of combined ventilatory support, ≥ 96 hours*.

For resuscitation at birth

Ventilation (eg bag and mask, or IPPB) administered for resuscitation at birth should not be coded. For specific information on the classification of ventilatory support refer to ACS 1006 *Ventilatory support*.

2. CODE THE FOLLOWING INTERVENTION WHEN PERFORMED:

Administration of blood and blood products

13706-01 [1893] *Administration of whole blood*

13706-02 [1893] *Administration of packed cells*

92062-00 [1893] *Administration of other serum (including plasma or albumin)*

92063-00 [1893] *Administration of blood expander (including dextran, etc)*

The above codes should be assigned when performed for the neonate.

(See also ACS 0302 *Blood transfusions*.)

Examples of diagnoses which may require transfusion are:

Fetal blood loss ————— P50. ————— *Fetal blood loss*

Congenital anaemia ————— P61.3 ————— *Congenital anaemia from fetal blood loss*

————— P61.4 ————— *Other congenital anaemias, not elsewhere classified*

Polycythaemia neonatorum — P61.1 ————— *Polycythaemia neonatorum*

Anaemia of prematurity — P61.2 ————— *Anaemia of prematurity*

Shock ————— R57.9 ————— *Shock, unspecified*

Hypovolaemia ————— P74.1 ————— *Dehydration of newborn*

Maternal illness/incapacity to care

In cases where a neonate requires care due to maternal illness or 'incapacity to care', the appropriate code should only be assigned if the neonate is **exclusively dependent on nursing care for more than 24 hours (consecutive)**.

Such cases would include 'baby for adoption' (Z02.8 *Other examinations for administrative purposes*) or maternal death (P01.6 *Fetus and newborn affected by maternal death*).

Catheterisation in a neonate

13300-00 [738] *Catheterisation/cannulation of other vein in neonate*

13300-01 [738] *Scalp vein catheterisation/cannulation in neonate*

13300-02 [738] *Umbilical vein catheterisation/cannulation in neonate*

13319-00 [738] *Central vein catheterisation in neonate*

13303-00 [694] *Umbilical artery catheterisation/cannulation in neonate*

Nitric oxide therapy

Inhalation of nitric oxide gas with invasive or noninvasive ventilatory support is used to treat critical respiratory failure in neonates.

Code 92210-00 [1889] *Nitric oxide therapy* should be assigned in addition to the appropriate ventilatory support code(s).

Parenteral fluid therapy

96199-07 [1920] *Intravenous administration of pharmacological agent, nutritional substance* and 96199-08 [1920] *Intravenous administration of pharmacological agent, electrolytes* should be assigned when used for management of carbohydrate, hydration or electrolyte disorders. Examples of diagnoses that may require parenteral fluid therapy are 'neonatal hypoglycaemia' (P70.- *Transitory disorders of carbohydrate metabolism specific to fetus and newborn*) or 'other transient neonatal electrolyte disorders' (P74.- *Other transitory neonatal electrolyte and metabolic disturbances*).

Note: These codes should **not be assigned** when these procedures are part of **resuscitation at birth**.

Therapeutic hypothermia

Therapeutic hypothermia is used in neonates who are at risk of suffering from lack of oxygen to the brain. A lack of oxygen before or during the birth process can destroy brain cells in a newborn and one method to stop this damage continuing is to induce hypothermia. Cooling should be started as soon as possible after birth and involves keeping the newborn's core temperature at 33 - 34°C for a period of 72 hours.

Assign 22065-00 [1880] Cold therapy in neonates regardless of duration given.

0042 PROCEDURES NORMALLY NOT CODED

...

4. **Cardiotocography (CTG)** except fetal scalp electrodes
5. **Catheterisation:**
 - **arterial or venous** (such as Hickman's, PICC, CVC, Swan Ganz) **except** cardiac catheterisation (blocks [667] and [668]), ~~or~~ surgical catheterisation (block [741]) or catheterisation in neonates (see ACS 1615 *Specific interventions for the sick neonate*)
 - **urinary** except if suprapubic
6. **Doppler recordings**

17. Congenital

17.1. Blue rubber bleb naevus syndrome (*Indexing*)

A query published in *Coding Q&A*, June 2012, *Blue rubber bleb naevus syndrome* highlighted that additional index entries would assist with the classification of this disorder.

Blue rubber bleb naevus syndrome (BRBNS), also referred to as Bean syndrome, is a rare congenital disorder commonly characterised by cutaneous and gastrointestinal venous malformations, however lesions have also been known to occur in other body organs.

The following entries have been included in the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Beals syndrome Q74.4

Bean syndrome Q27.8

Beard's disease F48.0

Blue

- naevus (M8780/0) D22.-

- - in situ (M8780/2) D04.-

- rubber bleb naevus syndrome (BRBNS) Q27.8

- sclera Q13.5

Braziers' disease T56.8

BRBNS (blue rubber bleb naevus syndrome) Q27.8

Break, retina (without detachment) H33.3

Syndrome — *see also* Disease

- Beals Q74.4

- Bean Q27.8

- Beckwith's Q87.31

...

- blue diaper E70.8

- blue rubber bleb naevus (BRBNS) Q27.8

- body stalk Q79.5

17.2. Cat eye syndrome (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Cat

- ear Q17.3

- eye syndrome Q92.8

Catabolism, senile R54

Syndrome

- cat eye Q92.8

- CATCH 22 Q87.87

17.3. Ear tag (*Indexing*)

A public submission highlighted there was no index entry for ear tag despite the code title at Q17.02 being *Ear tag*. A new index entry has been created for the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Refer section 11.17 Haemorrhoids (page 175) for further changes under lead term Tag.

Tag (hypertrophied skin) (infected) L91.8

- anus I84.6

- ear Q17.02

- haemorrhoidal I84.6

17.4. Idiopathic infantile arterial calcification (IIAC) (*Indexing*)

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Calcification

- heart (*see also Degeneration/myocardial*) I51.5
- - valve — *see Endocarditis*
- idiopathic infantile arterial (IIAC) Q28.8
- intervertebral cartilage or disc (postinfective) M51.8

Idiot, idiocy (congenital) F73.-

- amaurotic (Bielschowsky(-Jansky)) (familial) (infantile (late)) (juvenile (late)) (Vogt-Spielmeyer) E75.4

IIAC (idiopathic infantile arterial calcification) Q28.8

- Ileitis** (*see also Enteritis*) A09.9

17.5. Syndrome, trisomy and Trisomy (*Indexing*)

It was highlighted that there were indexing inconsistencies at *Syndrome/trisomy* and *Trisomy*. In response, the ICD-10-AM Alphabetical Index has been amended for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Syndrome — *see also Disease*

- trisomy NEC (*see also Trisomy*) Q92.9
- - 13 (partial) (with) NEC Q91.7
- - - meiotic nondisjunction Q91.4
- - - mitotic nondisjunction Q91.5
- - - mosaicism Q91.5
- - - translocation (Robertsonian) Q91.6
- - 18 (partial) (with) NEC Q91.3
- - - meiotic nondisjunction Q91.0
- - - mitotic nondisjunction Q91.1
- - - mosaicism Q91.1
- - - translocation Q91.2
- - 20 (qp) (pg) NEC Q92.8
- - 21 (partial) (with) NEC Q90.9
- - - meiotic nondisjunction Q90.0
- - - mitotic nondisjunction Q90.1
- - - mosaicism Q90.1
- - - translocation (Robertsonian) Q90.2
- - 22 NEC Q92.8
- tumour lysis (following antineoplastic treatment) (spontaneous) E88.3

Trisomy (syndrome) Q92.9

- 13 (partial) (with) NEC Q91.7
- - meiotic nondisjunction Q91.4
- - mitotic nondisjunction Q91.5
- - mosaicism Q91.5
- - translocation (Robertsonian) Q91.6
- 18 (partial) (with) NEC Q91.3
- - meiotic nondisjunction Q91.0
- - mitotic nondisjunction Q91.1
- - mosaicism Q91.1
- - translocation Q91.2
- 20 (p) (q) NEC Q92.8
- 21 (partial) (with) NEC Q90.9
- - meiotic nondisjunction Q90.0
- - mitotic nondisjunction Q90.1
- - mosaicism Q90.1
- - translocation (Robertsonian) Q90.2
- 22 NEC Q92.8
- autosomes NEC Q92.9

18. Signs and symptoms

18.1. Malaise and fatigue

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

R53

Malaise and fatigue

Asthenia NOS

Debility:

- chronic

- ~~nervous~~

- NOS

General physical deterioration

Lethargy

Tiredness

18.2. Musculoskeletal chest pain (*Indexing*)

Following advice published in *Coding, Q&A*, June 2012 *Musculoskeletal chest pain*, the following amendment was made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Pain(s) R52.9

- chest R07.4

- - anterior wall R07.3

- - ischaemic I20.9

- - musculoskeletal R07.3

- - on breathing R07.1

18.3. Systemic inflammatory response syndrome (*Indexing*)

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Syndrome

- systemic inflammatory response [(SIRS)], as a result of disease classified elsewhere

- - infectious origin (without acute organ failure) R65.0

19. Injury

19.1. Fracture, tibial plateau

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

S82 Fracture of lower leg, including ankle

S82.1 Fracture of upper end of tibia

- Tibial:
- condyles
 - head
 - plateau
 - proximal end
 - tuberosity

19.2. Open wound of hand and wrist

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

S61 Open wound of wrist and hand

▼1917

S61.9 Open wound of wrist and hand-part, part unspecified

19.3. Poisoning by helium, nonmedicinal

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

SECTION 3: TABLE OF DRUGS AND CHEMICALS

Substance	Poisoning				Adverse effect in therapeutic use
	Chapter 19	Accidental	Intentional Self-harm	Undetermined intent	
Helium (nonmedicinal) NEC	T48.7 T59.8	X44 X47	X64 X67	Y14 Y17.8	Y55.7
- medicinal	T48.7	X44	X64	Y14	Y55.7

TABULAR LIST OF DISEASES

X47

Accidental poisoning by and exposure to other gases and vapours

- ✚X47.8 Accidental poisoning by and exposure to other specified gas and vapours
Accidental poisoning by and exposure to:
 - carbon monoxide
 - helium (nonmedicinal) NOS
 - lacrimogenic gas [tear gas]
 - nitrogen oxides
 - sulfur dioxide

X67

Intentional self-poisoning by and exposure to other gases and vapours

- ✚X67.8 Intentional self-poisoning by and exposure to other specified gas or vapours
Intentional self-poisoning by and exposure to:
 - carbon monoxide
 - helium (nonmedicinal) NOS
 - lacrimogenic gas [tear gas]
 - nitrogen oxides
 - sulfur dioxide

Y17

Poisoning by and exposure to other gases and vapours, undetermined intent

- ✚Y17.8 Poisoning by and exposure to other specified gas or vapours, undetermined intent
Undetermined intent of poisoning by and exposure to:
 - carbon monoxide
 - helium (nonmedicinal) NOS
 - lacrimogenic gas [tear gas]
 - nitrogen oxides
 - sulfur dioxide

19.4. S56.0 and S56.1 Discrepancy between Electronic Code List and book descriptors

The following discrepancies between ICD-10-AM and the Electronic Code List (ECL) for S56.0 and S56.1 were highlighted and amended for Eighth Edition:

- S56.0 ICD-10-AM - *Injury of long flexor muscle and tendon of thumb at forearm level*
ECL descriptor - *Injury of flexor muscle and tendon of thumb at forearm level*
- S56.1 ICD-10-AM - *Injury of flexor muscle and tendon of other finger(s) at forearm level*
ECL descriptor - *Injury of long flexor muscle and tendon of other finger(s) at forearm level*

ALPHABETIC INDEX OF DISEASES

Injury (see also specified injury type) T14.9

- muscle (and fascia) (and tendon) T14.6

- - abdomen S39.0

...

- - extensor

- - - finger(s) (other than thumb), forearm level S56.4

...

- - - toe (ankle level) (foot level) ~~(large)~~ (long) S96.1

- - - wrist and hand level, multiple S66.7

- - flexor

- - - finger(s) (other than thumb), forearm level (long)
S56.1

- - - - wrist and hand level S66.1

- - - forearm level, specified NEC S56.2

- - - multiple, wrist (and hand) level S66.6

- - - thumb, ~~long (wrist and hand level)~~ S66.0

- - - - forearm level S56.0

- - - - wrist and hand level (long) S66.0

- - - - toe (ankle level) (foot level) (long) S96.0

- - - - wrist and hand (level), multiple S66.6

- - - foot (level) S96.9

...

- - long

- - - extensor, toe, ~~at~~ ankle and foot level S96.1

- - - flexor, ~~toe, at~~ ankle and foot level S96.0

- - - - finger(s) (other than thumb), forearm level S56.1

- - - - thumb, wrist and hand level S66.0

- - - - toe, ankle and foot level S96.0

- - - head, biceps S46.1

TABULAR LIST OF DISEASES

S56 Injury of muscle and tendon at forearm level

- S56.0 Injury of ~~long~~ flexor muscle and tendon of thumb at forearm level
- S56.1 Injury of long flexor muscle and tendon of other finger(s) at forearm level

19.5. Unspecified injury of neck (*Indexing*)

In 2009 and 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meetings in Seoul & Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Injury

- epigastric region S39.9
- epiglottis ~~NEG~~ (*see also Injury/neck*) S19.89
- eustachian tube S09.9
- ...
- gland
 - - lacrimal (laceration) S05.8
 - - salivary S09.9
- - thyroid ~~NEG~~ (*see also Injury/neck*) S19.89
- globe (eye) S05.9
- ...
- lacrimal duct S05.8
- larynx ~~NEG~~ (*see also Injury/neck*) S19.89
- leg
 - ...
 - oesophagus (thoracic part) S27.83
 - - cervical ~~NEG~~ (*see also Injury/neck*) S19.89
- optic (chiasm) (cortex) (nerve) (pathways) S04.0
- ...
- phalanges

- - foot S99.9
- - hand S69.9
- pharynx (*see also Injury/neck*) ~~S09.9~~ S19.89
- pleura S27.6
- ...
- throat ~~NEG~~ (*see also Injury/neck*) S19.89
- thumb S69.9
- thymus (gland) S27.84
- thyroid (gland) ~~NEG~~ (*see also Injury/neck*) S19.89
- toe S99.9
- ...
- trachea (cervical) ~~NEG~~ (*see also Injury/neck*) S19.89
- - thoracic S27.5

Rupture, ruptured (*see also Injury/by site*)

- oesophagus K22.3
- - traumatic
- - - cervical ~~NEG~~ (*see also Injury/neck*) S19.8-9
- - - thoracic S27.83

19.6. ACS 1911 Burns

Refer section 12.9 Sunburn (page 211) for changes to ACS 1911 Burns.

20. External causes

20.1. Complications of medical devices associated with adverse incidents

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

MISADVENTURES TO PATIENTS DURING SURGICAL AND MEDICAL CARE (Y60–Y69)

Excludes: breakdown or malfunctioning of medical device (during procedure)(after implantation)(ongoing use) (Y70–Y82)
| medical devices associated with adverse incidents due to external causes classified elsewhere (V01–Y59, Y85–Y87, Y89)
| surgical and medical procedures as the cause of abnormal reaction of the patient, without mention of misadventure at the time of the procedure (Y83–Y84)

MEDICAL DEVICES ASSOCIATED WITH MISADVENTURES IN DIAGNOSTIC AND THERAPEUTIC USE (Y70–Y82)

Includes: breakdown or malfunctioning of medical device (during procedure)(after implantation)(ongoing use)
Excludes: later complications following use of medical devices without mention of breakdown or malfunctioning of medical device (Y83–Y84)
| medical devices associated with adverse incidents due to external causes classified elsewhere (V01–Y59, Y85–Y87, Y89)
| misadventures to patients during surgical or medical care classifiable to Y60–Y69

SURGICAL AND OTHER MEDICAL PROCEDURES AS THE CAUSE OF ABNORMAL REACTION OF THE PATIENT, OR OF LATER COMPLICATION, WITHOUT MENTION OF MISADVENTURE AT THE TIME OF THE PROCEDURE (Y83–Y84)

Excludes: breakdown or malfunctioning of medical device (during procedure)(after implantation)(ongoing use) (Y70–Y82)
| medical devices associated with adverse incidents due to external causes classified elsewhere (V01–Y59, Y85–Y87, Y89)
| misadventures to patients during surgical or medical care classifiable to Y60–Y69

20.2. External cause for cut by object (*Indexing*)

A public submission highlighted inconsistency in the indexing of the external cause code for cut by object. Consequently, the following amendments were made to the ICD-10-AM Alphabetic Index for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Contact (accidental)
- with

-- abrasive wheel (metalworking) W31.1
...

- shark W56.0
- sharp object (cutting or piercing instrument) NEC W49-W45.9
- body piercing (rings) (studs) (voluntary) W45.0
- ...

- specified ~~sharp object~~ NEC ~~W49-W45.9~~
- intentional
- ~~body piercing (rings) (studs) (voluntary)~~ W45.0
- homicide (attempt) X99.8-

20.3. Fall, from, stationary machinery

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. These changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Contact (accidental)

- with
- abrasive wheel (metalworking) W31.1
- ...
- cherry picker W31.8
- agricultural operations W30.8
- stationary W17.5
- chisel W27
- ...
- lift, lifting (devices) (shaft) NEC W24
- stationary W17.5
- lion fish X26.18
- ...
- machine, machinery NEC (*see also Contact/with/by type of machine*) W31.9
- agricultural, including animal-powered NEC W30.9
- cherry picker W31.8
- agricultural operations W30.8
- stationary W17.5
- drilling, metal (industrial) W31.1
- ...
- lifting (devices) NEC W24
- stationary W17.5
- metalworking (industrial) W31.1
- milling, metal W31.1
- mining W31.0
- mobile elevated work platform (MEWP) W31.8
- stationary W17.5
- moulding W31.8
- ...
- scraping W31.4
- sky lift W31.8
- stationary W17.5
- specified NEC W31.8
- ...
- woodworking or forming (industrial) W31.2
- marine
- ...

- mirror — *see Contact/glass/mirror AND Contact/glass/mirrored*
- mobile elevated work platform (MEWP) W31.8
- stationary W17.5
- motor vehicle glass W25.5
- ...
- shovel W27
- steam (in stationary use) W31.4
- sky lift W31.8
- stationary W17.5
- skylight, glass W25.3

Fall, falling (accidental) W19

- from, off (*see also Fall, falling/involving*)
- 1 level to another NEC W17.9
- ...
- change table, baby W08.0
- cherry picker, stationary (*see also Contact/with/cherry picker*) W17.5
- cliff W15
- ...
- ladder W11
- lifting device, stationary (*see also Contact/with/lift, lifting*) W17.5
- loft bed W06.8
- lounge W07.8
- machine, machinery (*see also Contact/with/by type of machine*) W31.9
- stationary, not in operation NEC W17.8
- mobile elevated work platform (MEWP), stationary (*see also Contact/with/mobile elevated work platform*) W17.5
- motorcycle (without antecedent collision) V28.-
- ...
- shopping trolley W02.9
- sky lift, stationary (*see also Contact/with/sky lift*) W17.5
- sofa W07.8

TABULAR LIST OF DISEASES

W17

Other fall from one level to another

- ✱W17.5 Fall from mobile elevated work platform [MEWP]
- Fall from stationary:
 - cherry picker
 - lifting device

- sky lift

W24

Contact with lifting and transmission devices, not elsewhere classified

Includes: chain hoist
drive belt
pulley (block)
rope
transmission belt or cable
winch
wire

Excludes: fall from stationary mobile elevated work platform (MEWP) (cherry picker) (sky lift) (W17.5)
transport accidents (V00–V99)

W30

Contact with agricultural machinery

Includes: animal-powered farm machine

Excludes: contact with agricultural machinery in transport under own power or being towed by a vehicle (V00–V99)
exposure to electric current (W86)
fall from stationary mobile elevated work platform (MEWP) (cherry picker) (sky lift) (W17.5)
power take off (PTO) (W24)
transport accident involving:
• 2-, 3- or 4-wheeled agricultural bikes (V86.-)
• special vehicle mainly used in agriculture (V84.-)

W31

Contact with other and unspecified machinery

Excludes: contact with:
• hot engines, machinery and tools (X17)
• machinery in transport under own power or being towed by a vehicle (V00–V99)
• powered hand tools and household machinery (W29)
• powered lawnmower (W28)
exposure to electric current (W86)
fall from stationary mobile elevated work platform (MEWP) (cherry picker) (sky lift) (W17.5)

20.4. ACS 2001 External cause code use and sequencing

Refer section 12.9 Sunburn (page 211) for details.

21. Factors influencing health status

21.1. Dependence on respirator

A public submission was received requesting the addition of the term *ventilator* at Z99.1 *Dependence on respirator* as this is synonymous with respirator but the common terminology now.

The following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Dependence

- on
- - aspirator Z99.0
- ...
- - respirator Z99.1
- - ventilator Z99.1
- - wheelchair Z99.3

TABULAR LIST OF DISEASES

Z99	Dependence on enabling machines and devices, not elsewhere classified
------------	--

Z99.1	Dependence on respirator <u>Dependence on ventilator</u>
-------	---

21.2. Donation of haematopoietic progenitor stem cells

A public submission was received regarding donation of haematopoietic progenitor cells. Stem cells that form immune and blood cells are also known as haematopoietic stem cells (HSC). They are responsible for the constant renewal of blood and can be collected from bone marrow, peripheral blood or umbilical cord blood. HSC can be used in the treatment of cancers, leukaemia and lymphomas, and inherited blood disorders.

Patients may be admitted for preparatory care, and given a dose of granulocyte colony stimulating factor (G-CSF), but are not yet donors. Granulocyte colony stimulating factor (G-CSF) is a pharmacological agent used to induce stem cell mobilisation (stimulation of migration from bone marrow to blood stream).

The following amendments have been made to ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Care (following) (for) (of)

- pregnancy — *see Maternal care*
- preparatory, ~~for subsequent treatment~~ Z51.4
- - for dialysis Z49.0
- - potential donor of organ and tissue Z00.5
- - subsequent treatment NEC Z51.4
- respite Z75.5

Donor, donation (allogeneic) (of) (organ or tissue) (procurement) Z52.9

- potential, examination of Z00.5
- preparatory care Z00.5
- skin Z52.1

Mixed — *see condition*

Mobile, mobilisation, mobility

- cells (stem), for potential donor of organ and tissue Z00.5
- excessive — *see Hypermobility*

Prenatal

- ...
- screening — *see Antenatal/screening*
- Preparatory care** (for) ~~for subsequent treatment~~ NEC Z51.4
- for dialysis Z49.0
- potential donor of organ and tissue Z00.5
- subsequent treatment NEC Z51.4

Prepartum — *see condition*

TABULAR LIST OF DISEASES

Z00

General examination and investigation of persons without complaint or reported diagnosis

Z00.5 Examination of potential donor of organ and tissue

▼0028

Includes: mobilisation of (stem) cells
preparatory care

21.3. Resistance to antimicrobial and antineoplastic drugs

In 2009, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Seoul. This update provides new codes to specify agents resistant to antimicrobial and antineoplastic drugs, not just antibiotics. The following changes have been included in ICD-10-AM for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Drug

- rehabilitation measures Z50.3
- resistant bacterial agent in bacterial infection — see Resistance/bacterial agent to antibiotic(s)

Infection, infected (opportunistic) B99

- with lymphangitis — see Lymphangitis
— antibiotic resistant bacterial agent (resistant to) Z06.90
— methicillin Z06.32
— multiple antibiotics Z06.8
— penicillin Z06.31
— penicillin related antibiotic Z06.39
— specified antibiotic (single) NEC Z06.99
— multiple antibiotics Z06.8
— vancomycin Z06.41
— vancomycin related antibiotic Z06.49
— lymphangitis — see Lymphangitis
- abortion (subsequent episode) O08.0
...
- bacterial NEC A49.9
- - agent NEC
- - - as cause of disease classified elsewhere B96.88
- - - resistant to antibiotic — see Infection, infected with antibiotic-resistant bacterial agent
Resistance, resistant/antibiotic(s)
- - resulting from HIV disease B20

Resistance, resistant (to)

- activated protein C (APC) (factor V Leiden mutation) (thrombophilia) D68.5
— bacterial agent to antibiotic Z06.90
— methicillin Z06.32
— multiple Z06.8
— penicillin Z06.31
— penicillin related Z06.39
— specified (single) NEC Z06.99
— multiple Z06.8
— vancomycin Z06.41
— vancomycin related Z06.49

- antibiotic(s) Z06.60
— - beta-lactam Z06.50
— - - extended spectrum beta-lactamase (ESBL) Z06.53
— - - methicillin (cloxacillin) (dicloxacillin) (flucloxacillin) (oxacillin) Z06.52
— - - penicillin (amoxicillin) (ampicillin) Z06.51
— - - specified Z06.58
— - multiple Z06.67
— - quinolones Z06.63
— - specified (single) NEC Z06.68
— - vancomycin Z06.61
— - - other related Z06.62
- antifungal drug(s) Z06.72
- antimicrobial drug(s) Z06.70
— - antifungal Z06.72
— - antiparasitic Z06.71
— - antiviral Z06.73
— - multiple Z06.77
— - quinine Z06.71
— - specified NEC Z06.78
— - tuberculostatic Z06.74
- antineoplastic drug(s) Z07
- antiparasitic drug(s) Z06.71
- antiviral drug(s) Z06.73
- drug Z06.70
- extended spectrum beta-lactamase (ESBL) Z06.53
- methicillin (cloxacillin) (dicloxacillin) (flucloxacillin) (oxacillin) Z06.52
- multiple
— - antibiotics Z06.67
— - antimicrobial drugs Z06.77
- penicillin (amoxicillin) (ampicillin) Z06.51
- quinine Z06.71
- quinolones Z06.63
- tuberculostatic drug(s) Z06.74
- vancomycin Z06.61
— - other related Z06.62

Resorption

Substance	Poisoning				Adverse effect in therapeutic use
	Chapter 19	Accidental	Intentional Self-harm	Undetermined intent	
Antibiotic NEC	T36.9	X44	X64	Y14	Y40.9
- beta-lactam Beta-lactam NEC	T36.1	X44	X64	Y14	Y40.1
- ENT	T49.6	X44	X64	Y14	Y56.6

TABULAR LIST OF DISEASES

LIST OF THREE-CHARACTER CATEGORIES

CHAPTER 21

FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

Persons encountering health services for examination and investigation (Z00–Z13)

...

Z04	Examination and observation for other reasons
Z06	Bacterial agents resistant to antibiotics <u>Resistance to antimicrobial drugs</u>
Z07	Resistance to antineoplastic drugs
Z08	Follow-up examination after treatment for malignant neoplasms

CHAPTER 1

CERTAIN INFECTIOUS AND PARASITIC DISEASES (A00-B99)

...

Includes: diseases generally recognised as communicable or transmissible

Use additional code (Z06–Z07) to identify the antibiotic to which a bacterial agent is resistant resistance to antimicrobial and antineoplastic drugs.

Z06 ~~Bacterial agents resistant to antibiotics~~ Resistance to antimicrobial drugs

▼0112

Note: This category is intended for use as an additional code to identify the ~~antibiotic to which a bacterial agent is resistant, in bacterial infection classified elsewhere~~ resistant properties of infectious agent(s) in infections classified elsewhere.

Z06.3 ~~Agent resistant to penicillin and related antibiotics~~

- Z06.31** Penicillin resistant agent
- Z06.32** Methicillin resistant agent
Agent resistant to multiple antibiotics including methicillin
- Z06.39** Agent resistant to other penicillin-related antibiotic

Z06.4 ~~Agent resistant to vancomycin and related antibiotics~~

- Z06.41** Vancomycin resistant agent
- Z06.49** Agent resistant to other vancomycin-related antibiotic

Z06.5 Resistance to beta-lactam antibiotics

Use additional code (B95–B96) to identify infectious agents resistant to beta-lactam antibiotics.

✧Z06.50 Resistance to beta-lactam antibiotics, unspecified

✧Z06.51 Resistance to penicillin

Resistance to:

- amoxicillin
- ampicillin

✧Z06.52 Resistance to methicillin

Resistance to:

- cloxacillin
- dicloxacillin
- flucloxacillin
- multiple antibiotics including methicillin
- oxacillin

✧Z06.53 Extended spectrum beta-lactamase [ESBL] resistance

✧Z06.58 Resistance to other beta-lactam antibiotics

✧Z06.6 Resistance to other antibiotics

Use additional code (B95–B96) to identify infectious agents resistant to antibiotics.

✧Z06.60 Resistance to unspecified antibiotic

Resistance to antibiotic NOS

✧Z06.61 Resistance to vancomycin

✧Z06.62 Resistance to other vancomycin related antibiotics

✧Z06.63 Resistance to quinolones

✧Z06.67 Resistance to multiple antibiotics

Note: This code should only be assigned when an infectious agent is resistant to two or more antibiotics but the type of antibiotics are not specified. Where multiple resistant antibiotics are specified, code each resistant antibiotic separately.

Excludes: resistance to multiple antibiotics involving methicillin (Z06.52)

✧Z06.68 Resistance to other single specified antibiotic

✧Z06.7 Resistance to other antimicrobial drugs

Excludes: resistance to antibiotics (Z06.5- –Z06.6-)

✧Z06.70 Resistance to unspecified antimicrobial drug(s)

Drug resistance NOS

Resistance to antimicrobial drugs NOS

Use additional code (B95–B97) to identify infectious agents resistant to antimicrobial drugs.

✧Z06.71 Resistance to antiparasitic drug(s)

Resistance to quinine and related compounds

✧Z06.72 Resistance to antifungal drug(s)

✧Z06.73 Resistance to antiviral drug(s)

Use additional code (B97.-) to identify infectious agents resistant to antiviral drugs.

✧Z06.74 Resistance to tuberculostatic drug(s)

✧Z06.77 Resistance to multiple antimicrobial drugs

Note: This code should only be assigned when an infectious agent is resistant to two or more antimicrobial drugs but the type of antimicrobial drugs are not specified. Where multiple resistant antimicrobial drugs are specified, code each resistant drug separately.

Excludes: resistance to multiple antibiotics (Z06.67)

⚡Z06.78 Resistance to other specified antimicrobial drug

⚡Z06.8 Agent resistant to multiple antibiotics

Note: This category is used to identify agent resistant to multiple antibiotics excluding those involving methicillin (Z06.32).

⚡Z06.9 Agent resistant to other and unspecified antibiotics

⚡Z06.90 Agent resistant to unspecified antibiotic

⚡Z06.99 Agent resistant to other single specified antibiotic

⚡Z07

Resistance to antineoplastic drugs

Note: Assign Z07 as an additional code to identify resistance to antineoplastic drugs in the treatment of conditions classified elsewhere.

Z22

Carrier of infectious disease

Includes: suspected carrier

Use additional code to identify resistance to antimicrobial drugs (Z06.5- –Z06.7-).

AUSTRALIAN CODING STANDARDS

0112 INFECTION WITH DRUG RESISTANT MICROORGANISMS

DEFINITION

Resistance to a drug can be identified in most organisms. This standard deals with the coding of antibiotic or antimicrobial drug resistant organisms that have caused an infection in the patient.

MRSA: (Methicillin Resistant or Multi-Resistant *Staphylococcus Aureus*)

Traditionally the M refers to methicillin and this is still the commonest use of the term MRSA. It is also used to mean multi-resistant.

Staphylococcus aureus is a common bacterium found on the skin, but it may be the cause of a number of diseases and conditions ranging from minor to life threatening. The degree of infection varies from stitch abscesses to septic phlebitis, chronic osteomyelitis, pneumonia, meningitis, endocarditis and sepsis.

Penicillins, cephalosporins, carbapenems and monobactams contain a beta-lactam ring in their chemical structure and are known as beta-lactam antibiotics. Methicillin is a semisynthetic penicillin used in the laboratory to identify resistance although no longer used in clinical practice. Similar drugs used for treatment are flucloxacillin and dicloxacillin. Generally there are two strains of MRSA:

- Nosocomial (or hospital acquired) strains of MRSA are usually resistant to multiple antibiotics, not just methicillin and penicillin. *Staphylococcus aureus* resistant to methicillin is typically resistant to multiple antibiotics.
- Community acquired strains of MRSA are typically resistant to only methicillin and penicillin (with a small percentage also resistant to erythromycin or ciprofloxacin).

...

CLASSIFICATION

The presence of an infection (wound infection, urinary tract infection, pneumonia, etc) must be documented and coded in accordance with ACS 0002 *Additional diagnoses* before additional codes can be assigned for the organism, or the condition coded as being due to the organism. If the clinician has documented in the record that the organism causing the infection is resistant to an antibiotic or other antimicrobial drugs, then the appropriate code from Z06.- Resistance to antimicrobial drugs must be assigned as an additional code to identify the antibiotic or other antimicrobial agent to which the organism is resistant. *Bacterial agents resistant to antibiotics* must also be assigned.

A code from category Z06. ~~*Bacterial agents resistant to antibiotics*~~ is assigned as an additional code to identify the antibiotic to which a bacterial agent is resistant.

MRSA –MRSA infections would have codes assigned as follows:

- A code for the infection
- B95.6 *Staphylococcus aureus as the cause of diseases classified to other chapters* (if the organism is not included in the infection code)
- ~~Z06.32 *Methicillin resistant agent*~~ Z06.52 *Resistance to methicillin*

Note that Z06.32~~52~~ is assigned for MRSA when it means ***Methicillin Resistant or Multi-Resistant Staphylococcus Aureus***, where one of the agents is methicillin.

VRE – An infection resistant to Vancomycin would be coded as follows:

- A code for the infection
- B95.2 *Streptococcus, group D, as the cause of diseases classified to other chapters* (if the organism is not already included in the infection code)
- ~~Z06.41 *Vancomycin resistant agent*~~ Z06.61 *Resistance to vancomycin*

~~Z06.8 *Agent resistant to multiple antibiotics*~~ Z06.67 *Resistance to multiple antibiotics* and Z06.77 *Resistance to multiple antimicrobial drugs* are assigned when an agent is resistant to two or more antibiotics or antimicrobial drugs, but the type of antibiotics or antimicrobial drugs are not specified. Where multiple resistant antibiotics or antimicrobial drugs are specified, code each resistant drug separately, not including Methicillin (which is classified to Z06.32).

21.4. ACS 2114 Prophylactic surgery (New)

Coding advice published in *Coding Q&A*, December 2011, *Prophylactic salpingo-oophorectomy* highlighted a code sequence inconsistency for prophylactic surgery. Consequently, ACS 2114 *Prophylactic surgery* was created and the section 'Prophylactic mastectomy' was relocated from ACS 1204 *Plastic surgery* to ACS 2114 for Eighth Edition.

The new standard provides the same code selection advice however the sequencing instruction has been revised. A code from Z40.0- *Prophylactic surgery for risk-factors related to malignant neoplasms* should now be sequenced as the principal diagnosis when a patient is admitted for prophylactic surgery, and the risk factor (eg family history, personal history) sequenced as an additional diagnosis.

ALPHABETIC INDEX OF DISEASES

Prophylactic

- organ removal (for neoplasmia management)
- ...
- surgery Z40.9
 - for risk factors related to malignant neoplasm
 - breast Z40.00
 - ovary Z40.01
 - specified NEC Z40.08
 - specified NEC Z40.8
- Propionic acidaemia** E71.1

Surgery

- prophylactic Z40.9
- organ removal (for neoplasm management)
- breast Z40.00
- ovary Z40.01
- specified organ NEC Z40.08
- for risk factors related to malignant neoplasm
- breast Z40.00
- other specified organ Z40.08
- ovary Z40.01
- specified NEC Z40.8
- reconstructive (following healed injury or operation) Z42.9

TABULAR LIST OF DISEASES

Z40

Prophylactic surgery

▼2114

Z40.0

Prophylactic surgery for risk-factors related to malignant neoplasms

Admission for prophylactic organ removal

✱Z40.00

Breast

▼1204

Admission for prophylactic breast removal

✱Z40.01

Ovary

Admission for prophylactic ovary removal

✱Z40.08

Other

Z40.8

Other prophylactic surgery

Z40.9

Prophylactic surgery, unspecified

AUSTRALIAN CODING STANDARD

TABLE OF CONTENTS

SPECIALTY STANDARDS

21. Factors influencing health status and contact with health services

...

2113

Follow-up examinations for specific disorders

2114

Prophylactic surgery

0236

NEOPLASM CODING AND SEQUENCING

(excluding same-day chemotherapy/radiotherapy)

...

If the episode is for follow-up care, the malignancy may be coded as current or as a past history, dependent on the circumstances surrounding the episode of care. (See also ACS 1204 *Plastic surgery*, ACS 2112 *Personal history*, and ACS 2113 *Follow-up examinations for specific disorders* and ACS 2114 *Prophylactic surgery*.)

Where there are multiple metastatic sites, assign a code for each site in order to reflect the severity of the condition.

1204

PLASTIC SURGERY

...

REMOVAL OF BREAST IMPLANTS

....

EXAMPLE 6:

Patient anxious about silicone breast implants; bilateral replacement with saline implants performed under GA.

Codes:	Z42.1	<i>Follow-up care involving plastic surgery of breast</i>
	Z71.1	<i>Person with feared complaint in whom no diagnosis is made</i>
	45555-00 [1758]	<i>Removal of silicone breast prosthesis and replacement with other than silicone prosthesis</i>
	45555-00 [1758]	<i>Removal of silicone breast prosthesis and replacement with other than silicone prosthesis</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 9, nonemergency</i>

Prophylactic mastectomy

The term ‘prophylactic’ in regards to mastectomy may refer to:

1. Those who have had breast disease (eg carcinoma, fibrocystic disease), **or**
2. Those who have had no previous breast disease (eg family history carcinoma).

Where the reason for the prophylactic mastectomy can be assigned a code (eg fibrocystic disease, family history), this should be sequenced as the principal diagnosis (even if all evident disease was previously resected). Z40.00 *Prophylactic surgery for risk factors related to malignant neoplasms, breast* or Z40.8 *Other prophylactic surgery* should be assigned as an additional diagnosis.

For prophylactic surgery performed in the absence of breast disease, or when a more definitive diagnosis cannot be abstracted from the clinical record, assign Z40.00 *Prophylactic surgery for risk factors related to malignant neoplasms, breast* or Z40.8 *Other prophylactic surgery* as the principal diagnosis.

2114 PROPHYLACTIC SURGERY

Prophylactic surgery is performed to reduce the risk of developing cancer or other diseases. It is most commonly an option for individuals with high risk factors related to neoplasms, including:

- a strong family history of cancer
- gene mutations (eg positive BRCA1 or BRCA2 gene mutation)
- personal history of disease (eg carcinoma, indeterminate breast microcalcifications).

CLASSIFICATION

When prophylactic surgery is performed for risk factors, an appropriate code from category Z40 *Prophylactic surgery* should be assigned as the principal diagnosis. The specific type of risk factor (eg personal history of disease, family history of cancer), should be sequenced as an additional diagnosis.

For prophylactic surgery performed in the absence of disease or risk factor, or when a more definitive diagnosis cannot be abstracted from the clinical record, assign Z40.0- *Prophylactic surgery for risk-factors related to malignant neoplasms* or Z40.8 *Other prophylactic surgery* as the principal diagnosis alone.

Refer to ACS 0236 *Neoplasm coding and sequencing* and ACS 2112 *Personal history* for code assignment relating to neoplasia.

EXAMPLE 1:

Patient has a strong family history of breast cancer and was admitted for prophylactic bilateral total mastectomy.

Codes:	Z40.00	<i>Prophylactic surgery for risk-factors related to malignant neoplasms, breast</i>
	Z80.3	<i>Family history of malignant neoplasm of breast</i>
	31518-01 [1748]	<i>Simple mastectomy, bilateral</i>

EXAMPLE 2:

Patient admitted for prophylactic laparoscopic bilateral salpingo-oophorectomy after being found to have the BRCA2 gene fault on predictive gene testing. Patient has a past history of breast carcinoma with left mastectomy 28 years ago.

Codes:	Z40.01	<i>Prophylactic surgery for risk-factors related to malignant neoplasms, ovary</i>
	Z85.3	<i>Personal history of malignant neoplasm of breast</i>
	35638-12 [1252]	<i>Laparoscopic salpingo-oophorectomy, bilateral</i>

(See also ACS 2112 *Personal history*.)

22. Codes for special purpose

22.1. Codes for emergency use

In 2010, the URC of WHO-FIC approved a number of changes to the Tabular List and Alphabetical Index of ICD-10 at the annual meeting in Toronto. Codes U00-U49 are reserved for use by WHO for the provisional classification of new diseases. WHO have designated U04.9 for classification of *severe acute respiratory syndrome* [SARS], unspecified. U06 and U07 have been set aside for special reserve use and can only be assigned upon instruction from WHO. These changes have been included in ICD-10-AM for Eighth Edition.

TABULAR LIST OF DISEASES

LIST OF THREE CHARACTER CATEGORIES

CHAPTER 22

CODES FOR SPECIAL PURPOSES (U00–U49)

Provisional assignment of new diseases of uncertain aetiology or emergency use (U00–U49)

U04 Severe acute respiratory syndrome [SARS]

U06 Emergency use of U06

U07 Emergency use of U07

CHAPTER 22

CODES FOR SPECIAL PURPOSES (U00–U49)

This chapter contains the following blocks:

U00–U49 Provisional assignment of new diseases of uncertain aetiology or emergency use

PROVISIONAL ASSIGNMENT OF NEW DISEASES OF UNCERTAIN AETIOLOGY OR EMERGENCY USE (U00–U49)

Note: Codes U00–U49 are reserved for use by WHO for the provisional classification of new diseases of uncertain aetiology.

U06 Emergency use of U06

Note: As codes are not always readily available in electronic systems, categories U06 and U07 have been designated for emergency use so they can be used immediately upon instruction from WHO.

U06.0 Emergency use of U06.0

U06.1 Emergency use of U06.1

U06.2 Emergency use of U06.2

U06.3 Emergency use of U06.3

U06.4 Emergency use of U06.4

U06.5 Emergency use of U06.5

U06.6 Emergency use of U06.6

U06.7 Emergency use of U06.7

U06.8 Emergency use of U06.8

U06.9 Emergency use of U06.9

U07**Emergency use of U07**

Note: As codes are not always readily available in electronic systems, categories U06 and U07 have been designated for emergency use so they can be used immediately upon instruction from WHO.

U07.0 Emergency use of U07.0

U07.1 Emergency use of U07.1

U07.2 Emergency use of U07.2

U07.3 Emergency use of U07.3

U07.4 Emergency use of U07.4

U07.5 Emergency use of U07.5

U07.6 Emergency use of U07.6

U07.7 Emergency use of U07.7

U07.8 Emergency use of U07.8

U07.9 Emergency use of U07.9

AUSTRALIAN CODING STANDARDS**INTRODUCTION**

...

Tabular List of Diseases

Most of the Tabular List is taken up with the main disease classification composed of 22 chapters. The first character of the ICD-10-AM code is a letter, and each letter is associated with a particular chapter, except for the letter D, which spans both Chapter 2 *Neoplasms* and Chapter 3 *Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism*, and the letter H, which is used in both Chapter 7 *Diseases of the eye and adnexa* and Chapter 8 *Diseases of the ear and mastoid process*. Four chapters (Chapters 1, 2, 19 and 20) use more than one letter in the first position of their codes.

WHO intends the codes U00–U99 to be used for provisional assignment of new diseases of uncertain aetiology, for emergency use and for specific research purposes. U50–U73 are used in ICD-10-AM to classify activity and U90 classifies Healthcare associated infections.

23. Section 3 - Drugs & Chemicals

23.1. Escitalopram oxalate (Lexapro®) (Indexing)

Advice was published in *Coding Matters*, June 2010 (Vol. 17, No. 1), *Lexapro®* regarding the correct code assignment for poisoning or adverse effect following ingestion of escitalopram (Lexapro®). *Excitalopram oxalate* is a type of selective serotonin reuptake inhibitor (SSRI) which are typically used as antidepressants.

Consequently, the following amendments were made to the ICD-10-AM Alphabetic Index in Section 3: Table of Drugs and Chemicals for Eighth Edition.

ALPHABETIC INDEX OF DISEASES

Substance	Poisoning				Adverse effect in therapeutic use
	Chapter 19	Accidental	Intentional Self-harm	Undetermined intent	
Antidepressant NEC	T43.2	X41	X61	Y11	Y49.2
- monoamine-oxidase-inhibitor	T43.1	X41	X61	Y11	Y49.1
- selective serotonin reuptake inhibitor (SSRI)	T43.2	X41	X61	Y11	Y49.2
- triazolpyridine	T43.2	X41	X61	Y11	Y49.2
...					
Escin	T46.9	X44	X64	Y14	Y52.9
Escitalopram	T43.2	X41	X61	Y11	Y49.2
Esculin	T45.2	X44	X64	Y14	Y57.7

24. Noninvasive, cognitive and other interventions

24.1. Therapeutic hypothermia

Therapeutic hypothermia is used in neonates at risk of suffering lack of oxygen to the brain and has been shown to effectively stop the damage caused to brain cells. It is regarded as a significant indicator of morbidity and cost in neonates.

Guidelines for the classification of therapeutic hypothermia in neonates have been incorporated into Eighth Edition following recommendations from the Neonatal CTG.

ALPHABETIC INDEX OF INTERVENTIONS

Hypothermia

- gastric 13500-00 [1899]
- therapeutic 22065-00 [1880]
- total body 22065-00 [1880]

TABULAR LIST OF INTERVENTIONS

- 22065-00 Cold therapy
▼1615 Hypothermic therapy (therapeutic hypothermia)
Total body hypothermia

Note: The application of cold in the therapeutic treatment of disease or injury. Hypothermia can be induced by ice packs or compresses, cooling blankets, immersion in cold water (bath or tub) or by extracorporeal cooling of the blood. Hypothermia can also be induced as a protective measure in certain cardiovascular and neurological surgical procedures or as an adjunct to anaesthesia in surgical procedures involving a limb.

Excludes: cryotherapeutic destruction of tissue (see Alphabetic Index: Cryotherapy/by site)
deep hypothermia (22075-00 [642])
gastric hypothermia (13500-00 [1899])
hypothermic therapy in conjunction with cardiac or circulatory arrest (22075-00 [642])

AUSTRALIAN CODING STANDARDS

Refer section 16.12 ACS 1615 *Specific interventions for the sick neonate* (page 257) for details of the full changes in ACS 1615.

1615 SPECIFIC INTERVENTIONS FOR THE SICK NEONATE

The coding standards set out below relate to specific interventions for the sick neonate. These standards will provide a valuable body of data which will assist in improving AR-DRG classification of neonatal conditions.

...

2. CODE THE FOLLOWING INTERVENTION WHEN PERFORMED:

...

Therapeutic hypothermia

Therapeutic hypothermia is used for neonates who are at risk of suffering from lack of oxygen to the brain. A lack of oxygen before or during the birth process can destroy brain cells in a newborn and one way to stop this damage continuing is to induce hypothermia. Cooling should be started as soon as possible after birth and involves keeping the newborn's core temperature at 33–34°C usually for a period of 72 hours.

Assign 22065-00 [1880] Cold therapy regardless of duration given.

25. Imaging services

25.1. Cisternography

It was highlighted that ACHI classifies cisternography to 90900-00 *Encephalography* in block [1967] *Radiography of head or neck*, however a cisternogram is not a radiographic examination. A cisternogram is a nuclear medicine imaging study involving the injection of a radionuclide by lumbar puncture into the cerebrospinal fluid. A series of images are taken at intervals to determine if there is abnormal CSF flow within the brain and spinal canal.

The correct code for cisternography is 90910-00 [2014] *Nuclear medicine study of other region or organ*, which is in Chapter 20 *Imaging Services*, therefore there is no requirement to routinely code cisternography as per the guidelines in ACS 0042 *Procedures normally not code*. The following amendments have been incorporated into ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Circumcision, male 30653-00 [1196]

- hemi

- - with urethral meatotomy 37354-00 [1198]

Cisternography ~~90910-00 [2014]~~~~90900-00 [1967]~~

Clavotomy 48406-06 [1395]

TABULAR LIST OF INTERVENTIONS

1967 Radiography of head or neck

90900-00 Encephalography
~~Cisternography~~
Pneumocisternography
Pneumoencephalography

2014 Other nuclear medicine imaging study

90910-00 Nuclear medicine study of other region or organ
Cisternography

25.2. Endoscopic ultrasound

A new code 30668-00 [1949] *Endoscopic ultrasound* was created in ACHI Seventh Edition based on MBS item number 30688. As the numbers had been inadvertently transposed, it was inactivated and 30688-00 [1949] was created in ACHI for Eighth Edition to correctly align with the MBS item number.

ALPHABETIC INDEX OF INTERVENTIONS

Ethmoidotomy 41737-04 [383]

EUS (endoscopic ultrasound) ~~30688-00~~~~30668-00 [1949]~~
Evacuation

Ultrasound (diagnostic) (scan) 90908-00 [1950]
- with

...
- - bronchoscopy ~~30668-00~~~~30688-00 [1949]~~
- - endoscopy ~~30668-00~~~~30688-00 [1949]~~
- abdomen, abdominal 55036-00 [1943]

- - for pregnancy-related condition NEC 55700-02 [1943]

...

- - with urinary tract 55036-00 [1943]

- - endoscopic ~~30668-00~~~~30688-00 [1949]~~

- - vessels — see *Ultrasound/vessels/intra-abdominal*

...

- elbow 55804-00 [1950]

- endoscopic ~~30668-00~~~~30688-00 [1949]~~

- eye (bidimensional) (orbital contents)
(unidimensional) 55030-00 [1940]

TABULAR LIST OF INTERVENTIONS

1949

Other ultrasound

~~30668-00~~ 30688-00 Endoscopic ultrasound
Ultrasound in conjunction with endoscopy

25.3. MRI scan of pelvis

A new MBS item number 63476 was introduced in July 2009 for MRI scan of pelvis performed for initial staging of rectal cancer. Consequently, ACHI has been updated for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Imaging (diagnostic)

- magnetic resonance (MRI) (nuclear) 90901-08 **[2015]**
- - abdomen 90901-05 **[2015]**
- ...
- - prostate 90901-06 **[2015]**
- - rectum 90901-06 **[2015]**
- - sinuses (ethmoid) (frontal) (maxillary) (sphenoid) 90901-01 **[2015]**

TABULAR LIST OF INTERVENTIONS

2015

Magnetic resonance imaging

▼0042

90901-06 Magnetic resonance imaging of pelvis

Includes: bladder
prostate
rectum

26. Cross system updates

26.1. High intensity focused ultrasound (HIFUS)

High intensity focused ultrasound (HIFUS) is a noninvasive thermal ablation that uses focused ultrasound waves to target pathogenic tissue. The focused ultrasound transducer directs sound waves to a single point through the skin and into the body. The focused waves create heat at the focal point, which rapidly raises the temperature in a small region inside the body. In less than 10 seconds, the tissue in the focal region reaches a temperature that causes irreversible cell death and the dead tissue is removed via natural process, similar to the way the body handles infection.

HIFUS is currently used for several conditions, including the treatment of uterine fibroids, atrial fibrillation and arrhythmia, with the potential for treatment of solid tumours (both malignant and benign) of the bone, breast, liver, kidney and prostate.

HIFUS can be used in conjunction with MRI, CT and other ultrasound guidance systems. When HIFUS is combined with MRI guidance, it is sometimes referred to as MRI-guided high intensity focused ultrasound (either MR-HIFUS or MRgFUS).

The following changes have been made to ACHI and the ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Refer section 26.2 Irreversible electroporation (IRE) (page 288) for overlapping ACHI changes in this area.

Destruction

- bone (laser) (lesion) (radiofrequency) (tumour) 90609-00 **[1579]**
- breast (lesion) (tumour) 90726-00 [1759]
- calculus, calculi (encrustation) (stone)
- ...
- kidney (irreversible electroporation) (lesion) (tumour) 90370-00 [1046]
- labyrinth (inner ear) 41572-00 **[330]**
- ...
- lesion (tumour)
- anus (open) 90315-01 **[933]**
- ...
- bone (laser) (radiofrequency) ~~(tumour)~~ 90609-00 **[1579]**
- brain, stereotactic 40801-00 **[27]**
- breast 90726-00 [1759]
- cervix 35608-01 **[1275]**
- ...
- iris, by laser 42806-00 **[188]**
- kidney (irreversible electroporation) 90370-00 [1046]
- laryngopharynx, by endoscopic laser 52035-00 **[419]**
- ...
- liver 90299-00 **[956]**
- by
- cryotherapy 30419-00 **[956]**
- irreversible electroporation 90299-00 [956]
- laser 90299-00 **[956]**
- radiofrequency ablation 50950-00 **[956]**
- lung (irreversible electroporation) (laser) (radiofrequency) ~~(tumour)~~ 90181-00 **[558]**
- ...
- prostate 90408-00 [1162]
- by
- diathermy (closed) (endoscopic) 37224-00 **[1162]**
- high intensity focused ultrasound 90408-00 **[1162]**

- - - - irreversible electroporation 90408-00 **[1162]**
- - - - laser (closed) (endoscopic) 37224-00 **[1162]**
- - rectum
- ...
- - urethra (closed) (endoscopic) 37318-01 **[1116]**
- - - wart 36815-01 **[1116]**
- - uterus 90451-00 **[1263]**
- - vagina NEC 90437-00 **[1281]**
- ...
- liver (lesion) (tumour) 90299-00 **[956]**
- - by
- - - cryotherapy 30419-00 **[956]**
- - - irreversible electroporation 90299-00 **[956]**
- - - laser 90299-00 **[956]**
- - - radiofrequency ablation 50950-00 **[956]**
- lung (irreversible electroporation) (laser) (lesion) (radiofrequency) (tumour) 90181-00 **[558]**
- ...
- pharynx (by cauterisation) (by diathermy) 41674-02 **[419]**
- prostate (lesion) (tumour) 90408-00 **[1162]**
- - by
- - - diathermy (closed) (endoscopic) 37224-00 **[1162]**
- - - high intensity focused ultrasound 90408-00 **[1162]**
- - - irreversible electroporation 90408-00 **[1162]**
- - - laser (closed) (endoscopic) 37224-00 **[1162]**
- rectum
- ...
- tumour — see also Destruction/lesion
- - angiofibroma, face or neck
- ...
- - bone (laser) (radiofrequency) 90609-00 **[1579]**
- - breast 90726-00 **[1759]**
- - colon
- ...

- intestine, large
- endoscopic (closed) 90308-00 [908]
- by laser 30479-02 [908]
- kidney (irreversible electroporation) 90370-00 [1046]
- liver 90299-00 [956]
- by
- cryotherapy 30419-00 [956]
- irreversible electroporation 90299-00 [956]
- laser 90299-00 [956]
- radiofrequency ablation 50950-00 [956]
- lung (irreversible electroporation) (laser) (lesion) (radiofrequency) 90181-00 [558]
- lymphangioma — see *Destruction/vascular anomaly*
- prostate 90408-00 [1162]
- by
- diathermy (closed) (endoscopic) 37224-00 [1162]
- high intensity focused ultrasound 90408-00 [1162]
- irreversible electroporation 90408-00 [1162]
- laser (closed) (endoscopic) 37224-00 [1162]
- skin (subcutaneous tissue) — see also *Destruction/lesion/skin*

-
- trichoepithelioma, face or neck
- by laser 30190-00 [1612]
- uterus 90451-00 [1263]
- uterus (lesion) (tumour) 90451-00 [1263]
- valve, urethral (closed) (endoscopic) 37854-00 [1116]

HIFUS (high intensity focused ultrasound) 90908-01 [1949]

~~prostate 37203-05 [1166]~~

Prostatectomy

- by (using)
- cryoablation (cryosurgery) (freezing) 37203-03 [1166]
- electrical vaporisation, transurethral 37203-02 [1165]
- high intensity focused ultrasound (HIFUS) (transrectal) 37203-05 [1166]

- laser
-
- thermotherapy, microwave 37203-04 [1166]
- ultrasound guided, laser induced, transurethral (TULIP) 37207-00 [1166]
- guided, laser induced, transurethral (TULIP) 37207-00 [1166]
- high intensity focused (HIFUS) (transrectal) 37203-05 [1166]
- closed NEC 37203-06 [1166]
-
- transperitoneal laparoscopic radical (TLRP) — see *Prostatectomy/radical/laparoscopic*
- ~~transrectal, using high intensity focused ultrasound (HIFUS) 37203-05 [1166]~~
- transurethral
- Ultrasound (diagnostic) (scan)** 90908-00 [1950]
- high intensity focused (HIFUS) 90908-01 [1949]
- prostate (transrectal) 37203-05 [1166]
- hip 55816-00 [1950]
-
- prostate with bladder base and urethra (transrectal) 55600-00 [1943]
- with bladder base and urethra (transrectal) 55600-00 [1943]
- high intensity focused (HIFUS) (transrectal) 37203-05 [1166]
- scrotum 55048-00 [1943]
-
- transrectal
- prostate with bladder base and urethra 55600-00 [1943]
- bladder base and urethra 55600-00 [1943]
- high intensity focused (HIFUS) 37203-05 [1166]
- umbilical artery (B-mode) (Doppler) (duplex) (with assessment of amniotic fluid volume) 55729-01 [1945]

TABULAR LIST OF INTERVENTIONS

Refer section 26.2 Irreversible electroporation (IRE) (page 288) for overlapping ACHI changes in this area.

601

Destruction procedures on atrium

- Includes:** that with:
- cryoablation
 - electrophysiological studies
 - high intensity focused ultrasound (HIFUS)
 - laser
 - microwave
 - radiofrequency ablation

Code also when performed:

- transoesophageal echocardiogram (55118-00 [1942])

Excludes: division of accessory pathway (38512-00, 38515-00 [600])

956

Other procedures on liver

- 90299-00 Other destruction of liver
- | | | |
|------------------------------------|---|------------------------|
| Interstitial laser coagulation | } | of liver lesion/tumour |
| Irreversible electroporation [IRE] | } | |

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1046 Destruction procedures on kidney

90370-00 Other destruction of lesion of kidney
Irreversible electroporation [IRE] of kidney lesion/tumour

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1162 Destruction of tissue of prostate

90408-00 Other destruction of lesion of prostate
Irreversible electroporation [IRE] of prostate lesion/tumour

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1166 Other closed prostatectomy

~~37203-05 High intensity focused ultrasound [HIFUS] (transrectal) of prostate~~

1263 Destruction procedures on uterus

90451-00 Other destruction of lesion of uterus

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1579 Other procedures for other musculoskeletal sites

90609-00 Destruction of bone
Laser destruction }
Radiofrequency ablation } of bone lesion

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1759 Other procedures on breast

90726-00 Other destruction of breast
Destruction of lesion of breast

Code also when performed:

- high intensity focused ultrasound (HIFUS) (90908-01 [1949])

1949 Other ultrasound

90908-01 High intensity focused ultrasound [HIFUS]

Code first:

HIFUS for:

- arthritis and other musculoskeletal conditions (90609-00 [1579])
- treatment of lesion(s)/tumour(s):
 - bone (90609-00 [1579])
 - breast (90726-00 [1759])
 - kidney (90370-00 [1046])
 - liver (90299-00 [956])
 - prostate (90408-00 [1162])
 - uterus (90451-00 [1263])

Excludes: that for arrhythmia or atrial fibrillation (38287-02, 38290-01, 38287-01 [601])

AUSTRALIAN CODING STANDARDS

0042 PROCEDURES NORMALLY NOT CODED

...

13. **Imaging services** – all codes in ACHI Chapter 20 *Imaging services* and block [451] *Dental radiological examination and interpretation* **except:**
 - transoesophageal echocardiogram (TOE) (55118-00 [1942])
 - when instructed to do so
14. **Monitoring: cardiac, electroencephalography (EEG), vascular pressure** except radiographic/video EEG monitoring ≥ 24 hours

26.2. Irreversible electroporation (IRE)

A public submission was received requesting procedure codes for irreversible electroporation (IRE) of liver, kidney and lung lesions using the NanoKnife® system.

IRE was first introduced as a potential tissue ablation technique in 2005. It involves the insertion of a pair of fine needle electrodes into the tumour under general anaesthesia using ultrasound and CT guidance. An intense pulsating direct current is delivered to the target organ over 1-2 minutes causing the cancer cells to open microscopic pores permanently, or irreversibly. This ultimately causes the cancer cells to die, dissolve and be removed by the body's natural processes.

The following updates have been made to ACHI for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Refer section 26.1 *High intensity focused ultrasound (HIFUS)* (page 285) for overlapping ACHI changes in this area.

Destruction

- kidney (irreversible electroporation) (lesion) (tumour)
90370-00 [1046]

- labyrinth (inner ear) 41572-00 [330]

...

- lesion (tumour)

-- anus (open) 90315-01 [933]

...

-- iris, by laser 42806-00 [188]

- kidney (irreversible electroporation) 90370-00 [1046]

- laryngopharynx, by endoscopic laser 52035-00 [419]

...

-- liver 90299-00 [956]

--- by

---- cryotherapy 30419-00 [956]

---- irreversible electroporation 90299-00 [956]

---- laser 90299-00 [956]

---- radiofrequency ablation 50950-00 [956]

-- lung (irreversible electroporation) (laser)

(radiofrequency) (tumour) 90181-00 [558]

-- mouth, by endoscopic laser 52035-00 [419]

...

-- prostate

--- by

---- diathermy (closed) (endoscopic) 37224-00 [1162]

---- irreversible electroporation 90408-00 [1162]

---- laser (closed) (endoscopic) 37224-00 [1162]

...

- liver (lesion) (tumour) 90299-00 [956]

-- by

--- cryotherapy 30419-00 [956]

--- irreversible electroporation 90299-00 [956]

--- laser 90299-00 [956]

--- radiofrequency ablation 50950-00 [956]

- lung (irreversible electroporation) (laser) (lesion)

(radiofrequency) (tumour) 90181-00 [558]

- lymphangioma — see *Destruction/vascular anomaly*

...

- tumour — see also *Destruction/lesion*

-- angiofibroma, face or neck

...

-- kidney (irreversible electroporation) 90370-00 [1046]

-- liver 90299-00 [956]

--- by

---- cryotherapy 30419-00 [956]

---- irreversible electroporation 90299-00 [956]

---- laser 90299-00 [956]

---- radiofrequency ablation 50950-00 [956]

-- lung (irreversible electroporation) (laser) (lesion)

(radiofrequency) 90181-00 [558]

-- lymphangioma — see *Destruction/vascular anomaly*

-- prostate

--- by

---- diathermy (closed) (endoscopic) 37224-00 [1162]

---- irreversible electroporation 90408-00 [1162]

---- laser (closed) (endoscopic) 37224-00 [1162]

-- skin (subcutaneous tissue) — see also

Destruction/lesion/skin

Electro-oculography (EOG) (bilateral) (unilateral)
11205-00 [1835]

Electroporation, irreversible (IRE)

- kidney 90370-00 [1046]

- liver 90299-00 [956]

- lung 90181-00 [558]

- prostate 90408-00 [1162]

Electroretinography (ERG) (bilateral) (unilateral)
11204-00 [1835]

Irreversible electroporation (IRE) — see
Electroporation, irreversible (IRE)

Irrigation — see also *Maintenance*

TABULAR LIST OF INTERVENTIONS

Refer section 26.1 High intensity focused ultrasound (HIFUS) (page 285) for overlapping ACHI changes in this area.

558 Other procedures on lung or pleura

90181-00 Destruction procedures on lung
Irreversible electroporation [IRE] }
Laser destruction ~~of lesion~~ } of lung lesion/tumour
Radiofrequency ablation }

956 Other procedures on liver

90299-00 Other destruction of liver
Interstitial laser coagulation } of liver lesion/tumour
Irreversible electroporation [IRE] }

1046 Destruction procedures on kidney

90370-00 Other destruction of lesion of kidney
Irreversible electroporation [IRE] of kidney lesion/tumour

1162 Destruction of tissue of prostate

90408-00 Other destruction of lesion of prostate
Irreversible electroporation [IRE] of prostate lesion/tumour

26.3. Minimally invasive procedures proceeding to open procedure

Updates to other procedures highlighted a need to identify laparoscopic and minimally invasive procedures proceeding to open procedures. Clinical advice obtained from a number of specialties emphasised the need to identify these types of procedures.

The following changes were made to ACHI and ACS for Eighth Edition.

ALPHABETIC INDEX OF INTERVENTIONS

Arthroscopy (with lavage) 50100-00 [1555]

...
- procedure proceeding to open procedure 90613-00
[1579]
- shoulder 48945-00 [1395]

Cholecystectomy 30443-00 [965]

- laparoscopic 30445-00 [965]
- - with exploration of common bile duct, via
- - - cystic duct 30448-00 [965]

- - - laparoscopic choledochotomy 30449-00 [965]

- - proceeding to open cholecystectomy 90343-01
[1011]30446-00 [965]

Cholecystocolostomy 30460-01 [969]

Endoscopy, endoscopic (double balloon) — see also
Panendoscopy

- pharynx 41764-02 [416]

- procedure proceeding to open procedure NEC
90343-00 [1011]

- sinus, nasal 41764-01 [370]

Hysterectomy

- vaginal 35657-00 [1269]

-- with

...

- - laparoscopically assisted (guided) 35750-00 [1269]

- - - with

...

- - - proceeding to abdominal hysterectomy (open)

90343-01 [1011] 35756-00 [1269]

----- with

----- oophorectomy (bilateral) (unilateral) 35756-03 [1269]

----- salpingectomy (bilateral) (unilateral) 35756-03 [1269]

----- salpingo-oophorectomy (bilateral) (unilateral) 35756-03 [1269]

- - radical (with salpingo-oophorectomy) 35667-01 [1269]

Laparoscopy (diagnostic) (exploratory) 30390-00 [984]

...

- procedure proceeding to open procedure 90343-01 [1011]

Laparostomy

Procedure

- artery NEC 90222-00 [720]

- - heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-19 [681]

- - - with cardiopulmonary bypass 38653-08 [681]

- - mesenteric, inferior NEC 32736-00 [720]

- arthroscopic proceeding to open procedure 90613-00 [1579]

- atrium, heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-13 [606]

...

- Elmslie-Trillat (medial tibial tubercle transfer) 49503-01 [1520]

- endoscopic proceeding to open procedure NEC 90343-00 [1011]

- epididymis NEC 30644-12 [1189]

...

- Ladd (correction of malrotation of intestine) 43801-00 [916]

- laparoscopic proceeding to open procedure 90343-01 [1011]

- larynx NEC 90160-00 [531]

...

- posterior chamber (eye) NEC 90080-01 [214]

- proceeding to open procedure, endoscopic NEC 90343-00 [1011]

- - arthroscopic (percutaneous) 90613-00 [1579]

- - laparoscopic 90343-01 [1011]

- - other minimally invasive approach 90343-00 [1011]

- prostate NEC 90395-00 [1170]

TABULAR LIST OF INTERVENTIONS

965

Cholecystectomy

~~30446-00 Laparoscopic cholecystectomy proceeding to open cholecystectomy~~

1011

Other procedures on digestive system

90343-00 Endoscopic procedure proceeding to open procedure

▼0019 Endoscopic } procedure NOS proceeding to open procedure
Minimally invasive }

Includes: minimal access approach (via):

- percutaneous
- transluminal

Code first:

- open surgical procedure(s) performed

Excludes: that via:

- arthroscopy (90613-00 [1579])
- laparoscopy (90343-01 [1011])

90343-01 Laparoscopic procedure proceeding to open procedure

▼0019

Code first:

- open surgical procedure(s) performed

1269

Vaginal hysterectomy

35753-02 Laparoscopically assisted vaginal hysterectomy with removal of adnexa

Includes: excision of (bilateral) (unilateral):

- fallopian tube

- ovarian cyst
- ovary

~~Excludes:~~ that proceeding to abdominal hysterectomy (35756-03 [1269])

~~35756-00 Laparoscopically assisted vaginal hysterectomy proceeding to abdominal hysterectomy~~

~~Excludes:~~ that with removal of adnexa (bilateral) (unilateral) (35756-03 [1269])

~~35756-03 Laparoscopically assisted vaginal hysterectomy proceeding to abdominal hysterectomy with removal of adnexa~~

~~Includes:~~ excision of (bilateral) (unilateral):

- ▲ fallopian tube
- ▲ ovarian cyst
- ▲ ovary

1579

Other procedures for other musculoskeletal sites

90613-00 Arthroscopic procedure proceeding to open procedure

▼0019

Includes: percutaneous minimal access approach

Code first:

- open surgical procedure(s) performed

AUSTRALIAN CODING STANDARDS

0019 PROCEDURE NOT COMPLETED OR INTERRUPTED

If a surgical procedure was interrupted or not completed for any reason, code to the extent of the procedure performed.

EXAMPLE 1:

If a laparotomy had been done in order to perform an appendicectomy, but the appendicectomy was not done due to the patient having a cardiac arrest, code only laparotomy.

Code: 30373-00 [985] *Exploratory laparotomy*

EXAMPLE 2:

Attempted endoscopic release of carpal tunnel, converted to open procedure.

Procedure sequenced first: 39331-01 [76] *Release of carpal tunnel*

Other procedure: 39331-00 [76] *Endoscopic release of carpal tunnel*

EXAMPLE 3:

A laparoscopically assisted vaginal hysterectomy proceeding to abdominal hysterectomy.

Code: 35756-00 [1269] *Laparoscopically assisted vaginal hysterectomy proceeding to abdominal hysterectomy*

Clinical coders should be cautious when a procedure is recorded as ‘failed’ (eg ‘failed CDE’ can mean that the common bile duct was explored but that the dye could not be inserted). In such circumstances, the procedure should be coded.

Note: ACHI provides a code for failed forceps delivery, 90468-05 [1337] *Failed forceps* which mean that the expected outcome was not achieved (ie delivery of the baby was not achieved using forceps).

MINIMALLY INVASIVE (KEYHOLE) PROCEDURES PROCEEDING TO OPEN PROCEDURE

When an intended minimally invasive procedure proceeds to an open procedure, assign first a code for the open procedure followed by the appropriate code below:

- 90343-00 [1011] *Endoscopic procedure proceeding to open procedure*
- 90343-01 [1011] *Laparoscopic procedure proceeding to open procedure, or*
- 90613-00 [1579] *Arthroscopic procedure proceeding to open procedure.*

Note: While codes 90343-00 and 90343-01 are located in Chapter 10 *Procedures on digestive system* they can be used with other codes not located in this chapter to identify endoscopic or laparoscopic procedures which proceed to open procedures.

Note: These codes should not be used for diagnostic endoscopy/laparoscopy/arthroscopy.

If the conversion was the result of a procedural complication, code also the complication as per the guidelines in ACS 1904 *Procedural complications*.

EXAMPLE 2:

Attempted endoscopic release of carpal tunnel, converted to open procedure.

Codes:	39331-01 [76]	<i>Release of carpal tunnel</i>
	90343-00 [1011]	<i>Endoscopic procedure proceeding to open procedure</i>

EXAMPLE 3:

A laparoscopically assisted vaginal hysterectomy proceeding to total abdominal hysterectomy.

Code:	35653-01 [1268]	<i>Total abdominal hysterectomy</i>
	90343-01 [1011]	<i>Laparoscopic procedure proceeding to open procedure</i>

EXAMPLE 4:

Laparoscopic removal of the gallbladder. Extensive adhesions were encountered and the procedure proceeded to an open cholecystectomy.

Codes:	30443-00 [965]	<i>Cholecystectomy</i>
	90343-01 [1011]	<i>Laparoscopic procedure proceeding to open procedure</i>

26.4. ACS 0001 Principal diagnosis (dagger and asterisk system)

In 2008, the URC of WHO-FIC approved a number of changes to ICD-10 at the annual meeting in Delhi. One of these changes was in the use of the dagger and asterisk convention detailed in the Volume 2 Instruction Manual of ICD-10; allowing that either the dagger or asterisk code be sequenced as the principal diagnosis.

This change has been affected in the conventions section of the ICD-10-AM Tabular List for Eighth Edition.

TABULAR LIST OF DISEASES

Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for further details of changes to Conventions used in the Tabular List of Diseases.

CONVENTIONS USED IN THE TABULAR LIST OF DISEASES

There are a number of special conventions employed in the ICD-10-AM Tabular List which need to be understood by clinical coders and those interpreting statistics based on ICD-10-AM codes.

AETIOLOGY AND MANIFESTATION CONVENTION (THE ‘DAGGER AND ASTERISK’ SYSTEM)

Codes for aetiology (underlying cause) are annotated by a dagger symbol (†) and manifestation codes by an asterisk (*) symbol.

When a condition classified using the dagger and asterisk system is reported as the principal diagnosis, follow the guidelines in ACS 0001 *Principal diagnosis* to determine the sequence. In cases where a morphology code is required, assign the morphology after the neoplasm (C00–D48) code (see also ACS 0233 *Morphology*).

EXAMPLE 1:

Fracture to femur due to bony metastases from adenocarcinoma of prostate.

Index entry: **Fracture/metastatic** C79.5† M90.7-*

Tabular:	M90.75*	<i>Fracture of bone in neoplastic disease, pelvic region and thigh</i>
	C79.5	<i>Secondary malignant neoplasm of bone and bone marrow</i>
	M8140/6	<i>Adenocarcinoma, metastatic NOS</i>
	C61	<i>Malignant neoplasm of prostate</i>
	M8140/3	<i>Adenocarcinoma NOS</i>

The rubrics in which dagger-marked terms appear may take one of three different forms:

- a. If the symbol (†) and the alternative asterisk code both appear in the rubric heading**, all terms classifiable to that rubric are subject to dual classification and all have the same alternative asterisk code.

EXAMPLE 2:

B37.3†	<i>Candidiasis of vulva and vagina (N77.1*)</i>
	<i>Candidal vulvovaginitis</i>
	<i>Monilial vulvovaginitis</i>
	<i>Vaginal thrush</i>

- b. If the symbol (†) appears in the rubric heading but the alternative asterisk code does not**, all terms classifiable to that rubric are subject to dual classification but they have different alternative codes (which are listed for each term).

EXAMPLE 3:

A18.0†	<i>Tuberculosis of bones and joints</i>
	<i>Tuberculosis of:</i>
	• hip (M01.15*)
	• knee (M01.16*)
	• vertebral column (M49.0-*)
	<i>Tuberculous:</i>
	• arthritis (M01.1-*)
	• mastoiditis (H75.0*)
	• necrosis of bone (M90.0-*)
	• osteitis (M90.0-*)
	• osteomyelitis (M90.0-*)
	• synovitis (M68.0-*)
	• tenosynovitis (M68.0-*)

- c. If neither the symbol (†) nor the alternative asterisk code appear in the title**, the rubric as a whole is not subject to dual classification but individual inclusion terms may be. If so, these terms will be marked with the symbol and their alternative codes given.

EXAMPLE 4:A54.8 *Other gonococcal infections*

Gonococcal:

...

- peritonitis† (K67.1*)
- pneumonia† (J17.0*)
- septicaemia
- skin lesions

AUSTRALIAN CODING STANDARDS

Refer section 26.7 ACS 0027 Multiple coding (Deleted) (page 297) for changes to Aetiology and manifestation (the 'dagger and asterisk' system) in ACS 0027 Multiple coding.

0001 PRINCIPAL DIAGNOSIS

...

AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM-CODES)

ICD-10-AM coding convention requires that the aetiology code (dagger †) be sequenced before the manifestation code (asterisk *) as specified in the Alphabetic Index (see ACS 0027 *Multiple coding*). Sequence the aetiology and manifestation (dagger and asterisk) codes according to the principal diagnosis definition. While dagger and asterisk pairs are always shown with the aetiology code sequenced first in the Alphabetic Index, either code can be assigned as the principal diagnosis (see also ICD-10-AM Tabular List: *Conventions used in the Tabular List of Diseases/Aetiology and manifestation convention (the 'dagger and asterisk' system)*).

0102 HIV/AIDS

....

Sequencing and selection of codes

Decisions as to sequencing of codes should be made in light of the definition of principal diagnosis (ACS 0001 *Principal diagnosis*).

If the condition chiefly responsible for occasioning the patient's episode of care was the HIV, use the appropriate code from B20–B24.

If the condition chiefly responsible for occasioning the patient's episode of care was a manifestation of HIV, code the manifestation as the principal diagnosis.

Note: Manifestations that are annotated with an asterisk (*) must never be assigned as the principal diagnosis in HIV/AIDS (see ACS 0027 *Multiple coding*).

-

When the manifestation requires both an aetiology code (†) and a manifestation code (*), such as dementia in HIV (B22† and F02.4*), assign the two codes in the order given (ie aetiology followed by manifestation).

If the patient has multiple manifestations classifiable to two or more categories within B20–B24, only the HIV code related to the principal diagnosis need be assigned for the episode. This HIV code should be sequenced directly after the principal diagnosis code. Assignment of more than one code from block B20–B24 is acceptable for those hospitals which may require this level of detail and should be sequenced after the manifestation code to which they relate.

26.5. ACS 0005 Syndromes

Following receipt of several coding queries, ACS 0005 *Syndromes* was reviewed. The instruction advising that syndromes without a specific code allocation in ICD-10-AM should be notified to the state coding advisory body was reviewed in consultation with the state/territory jurisdictions and considered unnecessary.

Consequently, the following amendment has been made to ACS 0005 *Syndromes* for Eighth Edition.

AUSTRALIAN CODING STANDARDS

0005 SYNDROMES

...

GUIDELINES FOR SEQUENCING WHEN CODING SYNDROMES

...

5. If the syndrome is a congenital one, assign Q87.- *Other specified congenital malformation syndromes affecting multiple systems* as an additional diagnosis code to the specified manifestations already coded. The addition of this code acts as an indication that this is a syndrome which does not have a specific code allocation in ICD-10-AM. ~~These cases should be notified to your state coding advisory body.~~
6. When assigning multiple codes to represent the syndrome, assign codes only for the manifestations that are relevant for the patient in question – all ‘standard’ manifestations of a syndrome may not be present in every patient with the syndrome.

26.6. ACS 0020 Bilateral/multiple procedures

Advice was published in *Coding, Q&A*, December 2011, *Multiple skin biopsies* which indicated that ACS 0020 *Bilateral/multiple procedures* would be reviewed. To support the advice published in the Q&A, the following amendments were made to ACS 0020 *Bilateral/multiple procedures*, *Multiple procedures – Point 5* for Eighth Edition.

Additional updates were also made to ACS 0020 *Bilateral/multiple procedures* based on changes to wording within ACS 0229 *Radiotherapy* and ACS 1404 *Admission for kidney dialysis*.

AUSTRALIAN CODING STANDARDS

Refer section 2.35 ACS 0229 *Radiotherapy* (page 42) for details of changes to ACS 0229 *Radiotherapy*.

Refer section 14.13 ACS 1404 *Admission for kidney dialysis* (page 232) for details of changes to ACS 1404 *Admission for kidney dialysis*.

0020 BILATERAL/MULTIPLE PROCEDURES

...

MULTIPLE PROCEDURES

...

Classification

1. The **SAME PROCEDURE** repeated during the episode of care at ~~different~~ **DIFFERENT** visits to theatre

A procedure which is repeated during the episode of care at different visits to theatre should be coded as many times as it is performed.

Examples of exceptions to this rule are:

- procedures included in ACS 0042 *Procedures normally not coded*
- ~~procedures where multiples are included in the code descriptor, such as:~~
 - ~~ECT (see ACS 0533 *Electroconvulsive therapy*)~~
 - ~~removal of renal calculi~~
- ~~dialysis (haemodialysis, peritoneal)~~
- ~~excision/removal of skin lesions (see point 5 below)~~
- procedures with specific rules in other coding standards, such as:
 - burn dressings (see ACS 1911 *Burns*)
 - chemotherapy (see ACS 0044 *Chemotherapy*)
 - blood transfusions (see ACS 0302 *Blood transfusions*)
 - allied health interventions (see ACS 0032 *Allied health interventions*)
 - dialysis (see ACS 1404 *Admission for kidney dialysis*)
 - ECT (see ACS 0533 *Electroconvulsive therapy*)
 - radiotherapy (see ACS 0229 *Radiotherapy*)

~~In these cases use the appropriate code that reflects the number of visits to theatre.~~

EXAMPLE 1:

Patient has three ECT sessions each requiring general anaesthetic.

Code:	93341-03 [1907]	<i>Electroconvulsive therapy [ECT], 3 treatments</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 99</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 99</i>
	92514-99 [1910]	<i>General anaesthesia, ASA 99</i>

EXAMPLE 2:

Patient has drainage of Bartholin's gland abscess performed at two different visits to theatre~~two laparotomies performed during an episode of care.~~

Code:	35520-00 [1290]	<i>Treatment of Bartholin's gland abscess</i>
	35520-00 [1290]	<i>Treatment of Bartholin's gland abscess</i>

Assign the code for each visit to theatre

~~Assign: the appropriate laparotomy code twice~~

...

5. Skin or subcutaneous lesion removal, excision or biopsy

For multiple excisions or biopsies or removals performed on:

- separate skin lesions: assign relevant code(s) as many times as it is performed
- same lesion: assign relevant code once

~~Assign the relevant code for excision of multiple lesions.~~

For excision or biopsy or removal of skin lesions repeated during the episode of care at different visits to theatre – see point 1.

EXAMPLE 3:

Excision of two lesions from forearm.

Codes:	31205-00 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of other sites</i>
	31205-00 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of other sites</i>

EXAMPLE 4:

Excision of four lesions from eyelid (1) and nose (1) and neck (2).

Codes:	31230-00 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of eyelid</i>
--------	-----------------	--

31230-01 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of nose</i>
31235-01 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of neck</i>
31235-01 [1620]	<i>Excision of lesion(s) of skin and subcutaneous tissue of neck</i>

EXAMPLE 5:

Assign one code only in the following examples:

- diathermy of anal warts
- diathermy of vulval warts
- removal of plantar warts
- excision of anal skin tags
- multiple excisions or biopsies of the same lesion

EXAMPLE 6:

3 x biopsy of SCC (1) on face.

Code: 30071-00 [1618] *Biopsy of skin and subcutaneous tissue*

EXAMPLE 7:

Biopsy of BCC on forearm and compound naevus on neck.

Codes: 30071-00 [1618] *Biopsy of skin and subcutaneous tissue*
30071-00 [1618] *Biopsy of skin and subcutaneous tissue*

26.7. ACS 0027 Multiple coding (Deleted)

Duplication and inconsistencies were highlighted relating to conventions found in the introductory sections of ICD-10-AM and ACHI and the corresponding information in the ACS. In particular, ACS 0027 *Multiple coding* contains information that is duplicated in the introductory sections and in Appendix A: *Basic coding guidelines*. Information on the conventions and coding guidelines in the standards were removed and consolidated into the relevant volumes of ICD-10-AM and ACHI for Eighth Edition.

TABULAR LIST OF DISEASES

O85

Puerperal sepsis

▼0027, 0110

Puerperal:

- endometritis
- fever
- peritonitis
- septicaemia

AUSTRALIAN CODING STANDARDS

Refer section 26.4 ACS 0001 *Principal diagnosis (dagger and asterisk system)* (page 292) and section 27.5 *Formatting – ICD and ACHI conventions* (page 312) for further details regarding changes to the *Conventions in ICD-10-AM and ACHI*.

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~~B. A. Code of ethics for clinical coders~~
~~C. B. Clinical Coders' Creed~~

0001 PRINCIPAL DIAGNOSIS

... AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM)

Sequence the aetiology and manifestation (dagger and asterisk) codes according to the principal diagnosis definition. While dagger and asterisk pairs are always shown with the aetiology code sequenced first in the Alphabetic Index, either code can be assigned as the principal diagnosis (see also ICD-10-AM Tabular List: Conventions used in the Tabular List of Diseases/Aetiology and manifestation convention (the 'dagger and asterisk' system) ~~ACS 0027 Multiple coding, Aetiology and manifestation convention (the 'dagger and asterisk' system)~~).

0002 ADDITIONAL DIAGNOSES

... MULTIPLE CODING

~~As explained in ACS 0027 Multiple coding,~~ There are situations which require the assignment of additional codes to reflect the various components of a disease, which may themselves not meet the above criteria of an additional diagnosis (see also ICD-10-AM Tabular List: Conventions used in the Tabular List of Diseases/Instructional notes/terms). ~~The ICD-10-AM coding conventions referred to in that standard must be followed. For example, when using a code from category I60–I69 Cerebrovascular diseases, hypertension will also be coded if present as there is an instruction at this category to 'Use additional code to identify presence of hypertension'.~~

Examples of common areas where multiple coding is used in ICD-10-AM include:

- aetiology and manifestations (see also ACS 0001 Principal diagnosis)
- local infections to identify the organism
- functional activity of neoplasms
- neoplasm morphology (see also ACS 0233 Morphology)
- underlying disease
- toxic agents
- nature of injury or cause of poisoning or adverse effect
- diabetes mellitus with complications
- postprocedural complications

0015 COMBINATION CODES

...
Multiple coding ~~(ACS 0027)~~ should not be used when the classification provides a combination code that clearly identifies all of the elements documented in the diagnosis.

0025 DOUBLE CODING

EXAMPLE 2:

Bilateral Colles' fractures.

Procedure: Closed reduction of bilateral Colles' fractures.

Codes: S52.51 *Fracture of lower end of radius with dorsal angulation*

47363-00, 47363-00 [1427] *Closed reduction of fracture of distal radius*

For further discussion of multiple coding, see ACS 0027 *Multiple coding*.

0027 MULTIPLE CODING

There are situations where multiple codes may need to be assigned to reflect the various components of a disease. Each individual component (ie code) may not necessarily meet the definition of ACS 0002 *Additional diagnoses*, yet the detail is required to ensure that the entire medical concept is captured by the codes. The main aim of coding is:

To translate medical statements into code

If the application of the criteria in ACS 0002 *Additional diagnoses* results in the medical statement not being fully represented by code(s), then you may need to re-examine the code assignments. A good way to test the appropriateness of your code assignments is **to translate the codes back to the medical statement**.

Note: Avoid indiscriminate multiple coding of irrelevant information, such as symptoms or signs characteristic of the diagnosis.

Examples of common areas where multiple coding is used in ICD-10-AM include:

- aetiology and manifestations
- local infections to identify the organism
- functional activity of neoplasms
- neoplasm morphology
- underlying disease
- toxic agents
- nature of injury or cause of poisoning or adverse effect
- diabetes mellitus with complications
- postprocedural complications

The following ICD-10-AM coding conventions assist in the appropriate assignment of multiple coding:

Aetiology and manifestation convention (the 'dagger and asterisk' system)

Codes for aetiology (underlying cause) are annotated by a dagger symbol (†) and manifestation codes by an asterisk (*) symbol.

When a condition classified using the dagger and asterisk system is reported as the principal diagnosis, follow the guidelines in ACS 0001 *Principal diagnosis* to determine the sequence. In cases where a morphology code is required, assign the morphology after the neoplasm (C00–D48) code (see also ACS 0233 *Morphology*).

EXAMPLE 1:

Fracture to femur due to bony metastases from adenocarcinoma of prostate.

Index entry: **Fracture**/metastatic C79.5† M90.7 *

Tabular:	M90.75*	<i>Fracture of bone in neoplastic disease, pelvic region and thigh</i>
	C79.5	<i>Secondary malignant neoplasm of bone and bone marrow</i>
	M8140/6	<i>Adenocarcinoma, metastatic NOS</i>
	C61	<i>Malignant neoplasm of prostate</i>

The rubrics in which dagger marked terms appear may take one of three different forms:

- a. **If the symbol (†) and the alternative asterisk code both appear in the rubric heading**, all terms classifiable to that rubric are subject to dual classification and all have the same alternative asterisk code.

EXAMPLE 2:

B37.3† *Candidiasis of vulva and vagina (N77.1*)*
 Candidal vulvovaginitis
 Monilial vulvovaginitis
 Vaginal thrush

- b. **If the symbol (†) appears in the rubric heading but the alternative asterisk code does not**, all terms classifiable to that rubric are subject to dual classification but they have different alternative codes (which are listed for each term).

EXAMPLE 3:

A18.0† *Tuberculosis of bones and joints*
 Tuberculosis of:
 • hip (M01.15*)
 • knee (M01.16*)
 • vertebral column (M49.0 *)
 Tuberculous:
 • arthritis (M01.1 *)
 • mastoiditis (H75.0*)
 • necrosis of bone (M90.0 *)
 • osteitis (M90.0 *)
 • osteomyelitis (M90.0 *)
 • synovitis (M68.0 *)
 • tenosynovitis (M68.0*)

- c. **If neither the symbol (†) nor the alternative asterisk code appear in the title**, the rubric as a whole is not subject to dual classification but individual inclusion terms may be. If so, these terms will be marked with the symbol and their alternative codes given.

EXAMPLE 4:

A54.8 *Other gonococcal infections*
 Gonococcal:
 ...
 • peritonitis† (K67.1*)
 • pneumonia† (J17.0*)
 • septicaemia
 • skin lesions

Instructional terms

There are situations, other than in the dagger and asterisk system that permit two ICD-10-AM codes to be used to describe fully a person's condition. Instructional terms such as 'Code also...', 'Use additional code ...', 'Note...', identify many of these situations.

'Code also underlying disease'—Assign the codes for both the manifestation and underlying cause **with the underlying cause being sequenced first**.

'Use additional code...':

- **to identify manifestation**—Assign also the code that identifies the manifestation, such as, **but not limited to**, the examples listed in the Tabular List.
- **to identify infectious agent**—Assign also the code that identifies the organism responsible for the condition, if known.

Apply multiple coding instructions as directed in either the Alphabetic Index or the Tabular List.

EXAMPLE 5:

Patient admitted with puerperal endometritis seven days after giving birth. Group A \square haemolytic *Streptococcus pyogenes* isolated as the causative organism.

Index entry: **Endometritis**/puerperal, postpartum O85

Tabular: **O85** *Puerperal sepsis*

Puerperal:

• endometritis

...

Use additional code (B95–B97) to identify infectious agent in localised infection

Use additional code to identify localised infection:

• endometritis (N71.)

Codes: **O85** *Puerperal sepsis*

N71.9 *Inflammatory disease of uterus, unspecified*

B95.0 *Streptococcus, group A, as the cause of diseases classified to other chapters*

Z39.01 *Postpartum care after hospital delivery*

(See also ACS 1548 *Postpartum condition or complication*.)

0233 MORPHOLOGY

...

Note the following important points:

1. A morphology code should **always** be assigned directly after the neoplasm code to which it applies ie:
C00–D48 *Neoplasms* (see also ACS 0027-0002 *Additional diagnoses/Multiple coding*)
L41.2 *Lymphomatoid papulosis*

0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

...

1. GENERAL CLASSIFICATION RULES FOR DM AND IH

Rule 6. Multiple coding (see ACS 0027) should not be used when the classification provides a combination code (see ACS 0015) for the DM or IH that clearly identifies all of the elements documented in the diagnosis (see examples 7 and 11).

1904 PROCEDURAL COMPLICATIONS

...

CLASSIFICATION OF PROCEDURAL COMPLICATIONS (DIAGNOSIS CODES)

...

In some cases, rather than the generic term ‘postprocedural’, the subterm may directly describe the procedure involved.

EXAMPLE 9:

Severe headache due to confirmed cerebrospinal fluid leak following lumbar puncture.

ICD-10-AM Alphabetic Index

Leak, leakage

- cerebrospinal fluid G96.0

- - from spinal (lumbar) puncture G97.0

Codes: **G97.0** *Cerebrospinal fluid leak from spinal puncture*

R51 *Headache*

An additional code from Chapters 1 to 19 ~~may~~ should be assigned to provide further specification of the condition where it provides further specificity.

EXAMPLE 10:

Rectovaginal fistula due to previous low anterior resection, for rectal carcinoma.

ICD-10-AM Alphabetic Index

Fistula

- rectovaginal N82.3

- - postprocedural N99.8

Codes:	N99.8	<i>Other postprocedural disorders of genitourinary system</i>
	N82.3	<i>Fistula of vagina to large intestine</i>

1907 MULTIPLE INJURIES

CLASSIFICATION

...
(See also ACS 0027-0002 *Additional diagnoses/Multiple coding*.)

Note: External cause and ACHI codes are not included in the following example.

APPENDIX A

BASIC CODING GUIDELINES

The Alphabetic Indexes contain many terms not included in the Tabular Lists, and coding requires that both the Index and the Tabular List are consulted before a code is assigned.

The following is a simple guide intended to assist the occasional user of ICD-10-AM and ACHI.

1. Identify the type of statement to be coded and refer to the appropriate section of the Alphabetic Index.
2. Locate the lead term. For disease and injuries, this is usually a noun for the pathological condition. For procedures, this is usually a noun identifying the type of procedure performed. However, some conditions expressed as adjectives or eponyms are included in the Index as lead terms.
3. Read and be guided by any note that appears under the lead term.
4. Read any terms enclosed in parentheses after the lead term (these nonessential modifiers do not affect the code number), as well as any terms indented under the lead term (these essential modifiers may affect the code number), until all the words in the clinical expression have been accounted for.
5. Follow carefully any cross references ('see' and 'see also') found in the Index.
6. Refer to the Tabular List to verify the suitability of the code number selected. For disease classification, note that a three character code in the Index with a dash in the fourth or fifth position means that there is a fourth or fifth character to be found in the Tabular List. Further subdivisions to be used in a supplementary character position are not indexed and, if used, must be located in the Tabular List.
7. Be guided by any inclusion or exclusion notes under the selected code or under the chapter, block or category heading.
8. Assign the code.

APPENDIX ~~BA~~
CODE OF ETHICS FOR CLINICAL CODERS

APPENDIX ~~CB~~
CLINICAL CODERS' CREED

26.8. ACS 0033 Conventions used in the tabular list of diseases (Deleted)

Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for details.

26.9. ACS 0034 Conventions used in the alphabetic index of diseases (Deleted)

Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for details.

26.10. ACS 0040 Conventions used in the tabular list of interventions (Deleted)

Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for details.

26.11. ACS 0041 Conventions used in the alphabetic index of interventions (Deleted)

Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for details.

26.12. ACS 0042 Procedures normally not coded and ACS 0044 Chemotherapy

A public submission suggested that a reference to ACS 0044 *Chemotherapy* be included in ACS 0042 *Procedures normally not coded*. In response, the following amendment was made to ACS 0042 for Eighth Edition.

AUSTRALIAN CODING STANDARDS

Refer section 16.12 ACS 1615 Specific interventions for the sick neonate (page 257) for additional changes to ACS 0042 Procedures normally not coded.

Refer section 26.1 High intensity focused ultrasound (HIFUS) (page 285) for additional changes to ACS 0042 Procedures normally not coded

0042 PROCEDURES NORMALLY NOT CODED

...

8. Drug treatment/pharmacotherapy

Drug treatment should not be coded except if:

- the substance is given as the principal treatment in same-day episodes of care
- drug treatment is specifically addressed in a coding standard (see [ACS 0044 Chemotherapy](#), ACS 1316 *Cement spacer/beads* and ACS 1615 *Specific interventions for the sick neonate*)

9. Electrocardiography (ECG) except patient-activated implantable cardiac event monitoring (loop recorder)

26.13. ACS 0048 Condition onset flag

The Department of Health and Ageing (DoHA) wrote to NCCC on behalf of the National Health Information Standards and Statistics Committee (NHISSC) highlighting apparent inconsistent application of the condition onset flag (COF). This followed an analysis conducted by the Australian Institute of Health and Welfare (AIHW) which had raised concerns about the maturity of implementation and quality of the COF data. NHISSC has a particular interest in the quality of the COF data given its role in developing specifications for National Healthcare Agreement (NHA) performance indicators (PIs) for the Council of Australian Governments (COAG). NHA indicators include adverse drug events in hospitals; falls resulting in harm in hospitals; intentional self-harm in hospitals; and pressure ulcers in hospitals. A sound mechanism for reporting these indicators with a high degree of comparability across jurisdictions is essential.

NHISSC supported the prevailing COF definition but suggested the wording of ACS 0048 *Condition onset flag* be refined and additional examples be added to better support assignment of the COF across jurisdictions.

During development, the NCCC sought feedback from the Australian Commission on Safety and Quality in Health Care (the Commission) to confirm the appropriate application of COF values. Based on this feedback, it was recommended that ACS 0048 *Condition onset flag* be updated to identify all instances of potentially preventable disease circumstances or events for further review. Additionally, periods of planned leave (ie where the health care provider has assessed the patient as fit to commence leave) should be included within the COF definitions of 'arising during the admitted patient episode' where the condition(s) meet the criteria of ACS 0002 Additional diagnoses for coding.

The following changes have been made to the ACS for Eighth Edition.

AUSTRALIAN CODING STANDARDS

0048 CONDITION ONSET FLAG

The condition onset flag (COF) is a means of differentiating those conditions which arise during, ~~or from~~ those arising ~~arose~~ before, an admitted patient episode of care. Having this information will provide an insight into the kinds of conditions patients already have when entering hospital and those conditions that ~~what~~ arises during the episode of admitted patient care. A better understanding of those conditions arising during the episode of admitted patient care may inform prevention strategies particularly in relation to complications of medical care.

PERMISSIBLE VALUES:

COF 1. Condition with onset during the episode of admitted patient care

Definition

A condition which arises during the episode of admitted patient care and would not have been present or suspected on admission.

Examples of inclusions:

- a condition resulting from a misadventure during surgical or medical care in the current episode of admitted patient care (eg accidental laceration during procedure, foreign body left in cavity, medication infusion error)
- an abnormal reaction to, or later complication of, surgical or medical care arising during the current episode of admitted patient care (eg postprocedural shock, disruption of wound, catheter associated UTI)
- a condition newly arising during the episode of admitted patient care ~~and not related to surgical or medical care~~, (eg pneumonia, rash, confusion, cyst UTI, hypotension, electrolyte imbalance)
- a condition impacting on obstetric care arising after admission, including complications or unsuccessful interventions of labour and delivery or prenatal/postpartum management (eg labour and delivery complicated by fetal heart rate anomalies, postpartum haemorrhage)
- for neonates, this also includes the condition(s) in the birth episode arising during the birth event (ie the labour and delivery process) (eg respiratory distress, jaundice, feeding problems, neonatal aspiration, conditions associated with birth trauma, newborn affected by delivery or intrauterine procedures) (see Guide for use, point 4)
- disease status or administrative codes arising during the episode of admitted patient care (eg cancelled procedure, MRSA).

COF 2. Condition not noted as arising during the episode of admitted patient care

Definition

A condition previously existing or suspected ~~present~~ on admission such as the presenting problem, a comorbidity or chronic disease ~~or disease status~~.

OR

-

~~A previously existing condition not diagnosed until the episode of admitted patient care.~~

-

Explanatory notes:

~~Conditions that have not yet been diagnosed at the time of admission, but clearly did not develop after admission, should be assigned a value of 2. For example, if a patient presents with a symptom which is diagnosed during the admission as a malignancy, the malignancy should be considered to be present on admission.~~

Examples of inclusions:

- a condition that has not been documented at the time of admission, but clearly did not develop after admission (eg newly diagnosed diabetes mellitus, malignancy and morphology)
- ~~in the case of neonates, the condition(s) present at birth.~~
- a previously existing condition that is exacerbated during the current episode of admitted patient care (eg atrial fibrillation, unstable angina)
- ~~a conditions that is are suspected at the time of admission and subsequently confirmed during the current episode of admitted patient care should be assigned a value of 2. (eg pneumonia, AMI, stroke, unstable angina)~~
- a condition impacting on obstetric care arising prior to admission (eg venous complications, maternal disproportion)
- for neonates, this also includes the condition(s) in the birth episode arising before the labour and delivery process (eg prematurity, birth weight, talipes, clicking hip)
- disease status or administrative codes not arising during the episode of admitted patient care (eg history of tobacco use, duration of pregnancy, colostomy status)
- outcome of delivery (Z37) and place of birth (Z38) codes (see Guide for use, point 9).

GUIDE FOR USE

1. Assign the relevant COF value ~~condition onset flag~~ only to ICD-10-AM ~~disease~~ codes assigned in the principal diagnosis and additional diagnosis fields for the National Hospital Morbidity Data (NHMD) collection.

2. Sequencing of ICD-10-AM disease-codes must comply with the *Australian Coding Standards* and therefore codes should not be re-sequenced in an attempt to list ~~them with~~ the same COF values ~~condition onset flag~~ together.
3. The principal diagnosis code is always assigned COF 2. The exception to this is neonates in their admitted birth episode in that hospital, where codes sequenced as the principal diagnosis may be assigned COF 1 if appropriate (see Example 6).
4. For neonates, where a condition in the admitted birth episode is determined to have arisen ~~arises~~ during the birth event (ie labour and delivery process), these conditions should be considered as arising during the episode of admitted patient care and assigned COF 1 (see Examples 5 and 6).
5. When a single ICD-10-AM code describes multiple concepts (ie a combination code) and any concept within that code meets the criteria of COF 1, assign COF 1 (see Example 2).
6. When it is difficult to decide if a condition was present at the beginning of the episode of admitted patient care or if it arose during the episode, assign COF 2 ~~a value of 2 Condition not noted as arising during the episode of admitted patient care.~~ (see Example 12).
7. ~~The condition onset flag value on the principal diagnosis code is always 2.~~
- 8-7. The COF value assigned to ~~flag on~~ external cause, place of occurrence and activity codes should match that of the corresponding injury or disease code. Injuries which occur during the admitted episode of care but not on the hospital grounds (eg hospital in the home (HITH)) should be assigned COF 1 as 'arising during the episode of admitted patient care'.
- 9-8. The COF value assigned to ~~flag on~~ morphology codes should match that of ~~the~~ the corresponding neoplasm code.
10. ~~When a single disease code describes a condition and,~~
 - ~~that code contains more than one concept (eg diabetes with kidney complications) and~~
 - ~~each concept within that code has a different condition onset flag (see example 10 below);~~~~— always assign a flag value of 2.~~
8. ~~When a condition requires more than one disease code to describe it, it is possible and allowable, that each disease code can have a different condition onset flag value. For example, diabetes with kidney complications will have an E code for the diabetes (which may be flagged 2 — see example 10 below) and an N code for the kidney condition (which may be flagged 1 if the kidney complication arises during the episode of care (see example 10 below)).~~
- 11-9. The COF value ~~flag on~~ Z codes related to the outcome of delivery on the mother's record (Z37), or the place of birth on the baby's record (Z38) should always be assigned COF ~~a value of 2.~~
12. ~~The flag on Z codes related to the place of birth on the baby's record (Z38), should always be assigned a value of 2.~~
- 13-10. The COF value on aetiology and manifestation (dagger and asterisk) codes should be appropriate to each condition and therefore the dagger and asterisk codes may be assigned different COF values.
- 14-11. An episode of admitted patient care includes all periods when the patient remains admitted and under the responsibility of the health care provider, including periods of authorised leave and HITH. Where diagnoses arising during this period meet the criteria for ACS 0002 *Additional diagnoses*, coders should apply the *COF Guide for use* instructions and assign COF 1 if appropriate (see Example 13). Unauthorised leave does not fall under the responsibility of the health care provider and conditions arising during this time should be assigned COF 2.
- 15-12. Where an admission has multiple admitted patient episode 'care type' changes (eg acute to rehabilitation), COF assignment should be relevant to each episode. A condition arising in an episode should be assigned COF 1. If care for that condition continues in subsequent episodes those conditions should be assigned COF 2.

Note: ACHI codes are not included in the following examples.

EXAMPLE 1:

Patient is admitted with acute appendicitis and has an appendicectomy. A wound infection develops in the post operative period and a swab taken grows MRSA.

- 2 – Acute appendicitis
- 1 – Wound infection
- 1 – Staphylococcus aureus (infectious agent)
- 1 – MRSA
- 1 – Removal of organ (external cause code related to wound infection)
- 1 – Place of occurrence (of external cause)

EXAMPLE 2:

A patient admitted with acute cholecystitis for laparoscopic cholecystectomy. Patient also has ~~with~~ Type 2 diabetes mellitus and develops lactic acidosis post operatively. ~~The lactic acidosis is an exacerbation of pre-existing diabetes and is therefore coded as:~~

- 2 – Acute cholecystitis
- ~~12 – E11.13~~ Type 2 diabetes mellitus with lactic acidosis, without coma

EXAMPLE 3:

A woman is admitted for induction of labour due to post dates. ~~During delivery she suffers a first degree perineal tear (that is sutured) and a post partum haemorrhage. Fetal distress arises during labour requiring forceps delivery.~~ The baby is born alive with the cord wrapped tightly around its neck. During delivery she also suffers a second degree perineal tear (that is sutured) and a postpartum haemorrhage. On day three following delivery, the patient experiences chest pain and palpitations and is diagnosed with puerperal cardiomyopathy.

- 2 – Delivery affected by forceps
- 2 – Prolonged pregnancy
- 1 – Second ~~First~~ degree perineal laceration during delivery
- 1 – Labour and delivery complicated by fetal distress
- 1 – Labour and delivery complicated by other cord entanglement
- 1 – Other immediate post-partum haemorrhage
- 1 – Cardiomyopathy in the puerperium
- 2 – Single live birth ~~(Z37)~~

EXAMPLE 4:

Patient admitted for preterm confinement at 36 weeks. She was known to be Group B sStrep positive and was given antibiotics. She progressed to SVD of single male infant. A second degree tear was sutured. Nipple care was discussed as the patient had bleeding nipples with difficulty attaching the baby. During the episode, the patient developed a generalised rash caused by the ibuprofen which was changed to paracetamol.

- 2 – Delivery
- 2 – Preterm delivery
- 2 – Duration of pregnancy
- 2 – Group B Strep positive
- 2 – Prophylactic antibiotics
- 1 – Second degree tear
- 1 – Bleeding nipples (attachment difficulty)
- 1 – Diseases of skin complicating pregnancy, childbirth and puerperium
- 1 – Skin eruption due to drugs
- 1 – Adverse effect in therapeutic use
- 1 – Place of occurrence – health service area

2 – Single live birth~~Outcome of delivery~~

EXAMPLE 5:

Baby born in hospital at 36 weeks (3200g). After delivery, clinical review confirmed ‘meconium aspiration syndrome’ and newborn was given IV antibiotics and oxygen. Initial check – talipes. Nursing staff felt that there was a slight hip click. Baby was unsettled and fussed at breast. Required assistance with feeding due to tongue tie. Developed jaundice on the second day which was treated with 15 hours of phototherapy. ~~Rx with bili blanket.~~ Physiotherapy review for talipes. Paediatric review on day 3 "L hip subluxatable" for follow up.

2 – Preterm infant

1 – Neonatal aspiration of meconium

1 – Other feeding problems of newborn

2 – Tongue tie

2 – Talipes

1 – Jaundice

2 – Subluxatable hip

2 – Singleton born in hospital

EXAMPLE 6:

Singleton born at 38 weeks (2840g) by caesarean section. During caesarean section, scalp laceration occurred requiring review by paediatrician. Initial check – cleft palate, Mongolian spot. Newborn referred to specialist team for repair of cleft palate.

1 – Other birth trauma to scalp

1 – Fetus and newborn affected by caesarean delivery

2 – Cleft palate

2 – Singleton born in hospital

EXAMPLE 76:

A patient is admitted with chest pain. He has a history of ~~IHD and~~ hypertension. A diagnosis of unstable angina is made. During admission, test results revealed previously undiagnosed thalassaemia minor. Patient referred to haematology clinic for further review.

2 – Unstable angina

2 – Hypertension

2 – Thalassaemia minor

EXAMPLE 87:

Patient admitted with pneumonia. On admission chest x-ray showed several nodules in the left lung ~~felt~~ thought to be metastases. These were biopsied and histology showed SCC.

2 – Pneumonia

2 – Metastases to lung

2 – Morphology (of lung metastases code)

2 – Unknown primary neoplasm site

2 – Morphology (of unknown primary neoplasm code)

EXAMPLE 98:

A patient is readmitted with a post cholecystectomy wound infection and the swabs grow MRSA. The patient had a background of hypertension controlled with regular medication. During the episode, the patient had several hypertensive episodes, managed by adjusting the patient’s regular medication.

2 – Wound infection

2 – Staphylococcus aureus (infectious agent)

2 – MRSA

2 – Removal of organ (external cause)

2 – Place of occurrence (of external cause)
2 – Hypertension

EXAMPLE 109:

Patient admitted with bone secondaries (spine and ribs). Left mastectomy 10 yrs ago – infiltrating duct ca. Patient in pain on admission, has not mobilised for several days. Small red pressure area to sacrum on admission. Day 4 ulcer stage 2 continue pressure care. Day 8 some shortness of breath. Investigations reveal Hb80 which was a significant drop from Hb115 on admission (patient's normal). Anaemic – transfused packed cells.

2 – Bone metastases
2 – Morphology (of bone metastases code)
~~1 – Anaemia, unspecified~~
2 – Breast primary
2 – Morphology (of breast cancer code)
2 – Pressure ulcer (stage 1 progressed to stage 2)
1 – Anaemia, unspecified

EXAMPLE 110:

Patient admitted with uncontrolled Type 2 diabetes. The patient is known to have ~~peripheral neuropathy~~ nephropathy (CKD stage 3) but no other complications of the diabetes. During admission the patient develops acute kidney failure.

2 – Type 2 diabetes mellitus uncontrolled (E11.65)
1 – Acute kidney failure
1 – Type 2 diabetes mellitus with acute kidney failure
2 – Type 2 diabetes mellitus with chronic kidney disease
2 – Chronic kidney disease, stage 3
~~2 – Type 2 diabetes with multiple microvascular complications (E11.71)~~
~~2 – Peripheral neuropathy (G62.9 – related to E11.71)~~
~~1 – Acute kidney failure (N17.9 – related to E11.71)~~

EXAMPLE 11:

During admission, test results indicate that the patient has ~~previously undiagnosed thalassaemia minor~~.

-
2 – Thalassaemia minor
-

EXAMPLE 12:

Patient admitted with pneumonia. During admission, the patient was also diagnosed with UTI. It could not be determined whether the UTI arose during or prior to the admitted episode of care.

2 – Pneumonia
2 – UTI

EXAMPLE 13:

Elderly patient admitted with chronic respiratory failure. Given permission for home leave for the weekend to attend family event at daughter's house. During the weekend, the patient slips while in the bathroom and fractures her neck of femur. She immediately returns to hospital from approved leave where fracture is treated.

2 – Chronic respiratory failure
1 – Fractured neck of femur
1 – External cause code – slip
1 – Place of occurrence – bathroom
1 – Activity – other vital activity

EXAMPLE 14:

A patient is admitted with schizophrenia. On the fourth day, patient absconds and returns 16 hours later. On return, patient is found with multiple self-inflicted lacerations to their left forearm. The patient is taken to the emergency department for treatment before returning to the mental health unit.

2 – Schizophrenia

2 – Open wound of forearm

2 – External cause code – self-inflicted cut

2 – Place of occurrence – unspecified

2 – Activity – other specified

27. Formatting changes

27.1. Formatting – Consistency of terminology for category and character

During the publishing process, inconsistencies in terminology were identified at the instruction notes at code subdivisions in the ICD-10-AM Tabular List. The terms category, subcategory, block, character and digit have been used interchangeably at fourth and fifth character subdivision notes. To be consistent with the terminology used in other sections of the Tabular List and the ICD-10-AM database, it was decided that the term 'category' should be used for three character codes and the term 'subcategory' should be used for fourth character codes. The term 'digit' was replaced with the term 'character.'

27.2. Formatting – Expansion of alpha, beta, gamma and mu symbols

The symbols α , β , γ , μ in ICD-10-AM were expanded to the written form 'alpha', 'beta', 'gamma' and 'mu' respectively, for compatability with the NCCC's electronic coding product.

Inconsistency in the use of hyphens in the compound words 'betalactam', 'betalactamase' were also identified. Consequently hyphens were added to these compound words to be consistent with the format in the Electronic Code List (ECL).

27.3. Formatting – Review ACS references

The list of References and in text references were amended for compatability with University of Wollongong Author-Date (Harvard) Referencing Guidelines (2007). It was also noted that amendments were required to ensure all references and definitions used in the standards, including AIHW METeOR data items, were current.

NCCC has updated the references in the following ACS in Eighth Edition:

- 0001 *Principal diagnosis*
- 0002 *Additional diagnoses*
- 0016 *General procedure guidelines*
- 0026 *Admission for clinical trial, drug challenge or therapeutic drug monitoring*
- 0029 *Coding of contracted procedures*
- 0102 *HIV/AIDS*
- 0111 *Healthcare associated Staphylococcus aureus bacteraemia*
- 0224 *Palliative care*
- 0304 *Pancytopenia*
- 0503 *Drug, alcohol and tobacco use disorders*
- 0505 *Mental illness complicating pregnancy*
- 0526 *Munchhausen's by proxy*
- 0530 *Drug overdose*
- 0532 *Cognitive impairment*
- 0625 *Quadriplegia and paraplegia, nontraumatic*
- 0741 *Ectropion/entropion*
- 0936 *Cardiac pacemakers and implanted defibrillators*
- 0940 *Ischaemic heart disease*
- 1103 *Gastrointestinal (GI) haemorrhage*
- 1435 *Female genital mutilation*
- 1438 *Chronic kidney disease*

- 1549 *Streptococcal group B infection/carrier in pregnancy*
- 1605 *Conditions originating in the perinatal period*
- 1607 *Newborn/Neonate*
- 1915 *Spinal (cord) injuries*
- 1922 *Crushing injury*
- 2105 *Long term/nursing home type inpatients*

27.4. Formatting – Replace commas with slashes in index pathways

The commas in the index pathways and cross references in ICD-10-AM/ACHI/ACS were replaced with slashes to facilitate development of the NCCC's electronic coding product. *Refer section 27.5 Formatting – ICD and ACHI conventions (page 312) for further details.*

This change was also reflected in the *Conventions used in the Alphabetic Index of Diseases and Interventions*.

27.5. Formatting – ICD and ACHI conventions

There was inconsistency in the introductory content with respect to conventions and the corresponding information in the ACS. Information on the conventions in the standards has been removed and consolidated into the relevant volumes of ICD-10-AM and ACHI.

Updates relating to the relaxing of the sequencing of dagger and asterisk codes were also incorporated into the conventions section in the introductory content. *Refer section 26.4 ACS 0001 Principal diagnosis (dagger and asterisk system) (page 292) for further details for changes for the sequencing of dagger and asterisk codes.*

Instructions in ACS 0027 *Multiple coding* was also duplicated in the ACS and the introductory content, and consequently consolidated into the introductory content relating to conventions. *Refer section 26.7 ACS 0027 Multiple coding (Deleted) (page 297) for further details on these changes.*

The following amendments were made to ICD-10-AM/ACHI/ACS for Eighth Edition:

Conventions

- Deleted ACS:
 - 0033 *Conventions used in the tabular list of diseases*
 - 0034 *Conventions used in the alphabetic index of diseases*
 - 0040 *Conventions used in the tabular list of interventions*
 - 0041 *Conventions used in the alphabetic index of interventions*
- Updated all references to conventions in the ACS
- Updated information about conventions in the appropriate volumes of ICD and ACHI
- Deleted the following references from the ACS Eighth Edition hard copy books:
 - Page 52: "0033-0034 see pages 27–32"
 - Page 54: "0040–0041 see pages 34–38"

Aetiology and manifestation system ('dagger and asterisk')

- Amended ACS:
 - 0001 *Principal diagnosis*
 - 0027 *Multiple codes*
 - 0102 *HIV/AIDS*
- Amended:
 - Conventions used in the tabular list of diseases – Annotations
 - Conventions used in the alphabetic index of diseases – Code numbers

ALPHABETIC INDEX OF DISEASES

GENERAL ARRANGEMENT OF THE ALPHABETIC DISEASE INDEX OF DISEASES

MAIN SECTIONS

The Alphabetic Index consists of three sections, as follows:

-

Section I is the index of diseases, syndromes, pathological conditions, injuries, signs, symptoms, problems and other reasons for contact with health services, ie the type of information that would be recorded by a clinician. It includes all terms classifiable to categories A00–T98 and Z00–Z99 except drugs and other chemical substances giving rise to poisoning or other adverse effects (these are included in Section III).

-

Section II is the index of external causes of injury. The terms included here are not medical diagnoses but descriptions of the circumstances in which the violence occurred (eg fire, explosion, fall, assault, collision, submersion). It includes all terms classifiable to U50–Y98, except drugs and chemicals.

-

Section III is the index of drugs and other chemical substances giving rise to poisoning or other adverse effects (referred to in Sections I and II as the Table of drugs and chemicals). For each substance the table gives the Chapter 19 code for poisoning (T36–T65) and the external cause (Chapter 20) codes for accidental poisoning by and exposure to noxious substances (X40–X49), intentional self-harm (X60–X69), and poisoning, undetermined whether accidental or intentional (Y10–Y19). For drugs, medicaments and biological substances, it also gives the code for these substances causing adverse effects in therapeutic use (Y40–Y59).

The Alphabetic Index is arranged in three sections:

- **Section I** lists all the terms classifiable to Chapters 1–19 and Chapter 21–22, except drugs and other chemicals.
- **Section II** is the index of external causes of injury and contains all the terms classifiable to Chapter 20, except drugs and other chemicals.
- **Section III**, the *Table of Drugs and Chemicals*, lists for each substance the codes for poisonings and adverse effects of drugs classifiable to Chapter 19, and the Chapter 20 codes that indicate adverse effects of a correct substance properly administered and whether the poisoning was accidental, deliberate (self-harm) or undetermined.

SEQUENCE

Main-Lead terms are usually sequenced alphabetically. This may vary from previous editions where hyphens, symbols and numbers preceded alphabetic lettering. For example:

Bee sting

Beer drinker's heart

-

Descemetocoele

Descemet's membrane

-

Fibromyxosarcoma

Fibro-odontoma, ameloblastic

EXAMPLE 1:

Bee sting

Beer drinker's heart

Descemetocoele

Descemet's membrane

Fibromyxosarcoma

Fibro-odontoma, ameloblastic

Hyphens, symbols and numbers precede alphabetic sequence.

EXAMPLE 2:

Pregnancy

- duration
- - < 5 completed weeks O09.0
- - 5–13 completed weeks O09.1
- - 14–19 completed weeks O09.2
- - 20–25 completed weeks O09.3
- - 26–33 completed weeks O09.4
- - 34–<37 completed weeks O09.5
- - unspecified duration of pregnancy O09.9

PREPOSITIONAL TERMS

Wherever a preposition from the list below immediately follows a lead term or subterm, they always take precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

EXAMPLE 3:

Accessory (congenital)

- chromosome(s) (nonsex) NEC Q92.9
- - with complex rearrangements NEC Q92.5
- - - seen only at prometaphase Q92.4
- - 13 — see Trisomy/13
- - 18 — see Trisomy/18
- - 21 — see Trisomy/21
- - partial Q92.9
- - sex
- - - female phenotype Q97.8
- - - male phenotype Q98.8

EXAMPLE 4:

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9

- with
- - diverticular disease (intestine) — see Diverticula/intestine
- - lymphangitis — code by site under Abscess
- abdomen, abdominal
- - cavity K65.0
- - wall L02.2
- abdominopelvic K65.0

In the above example, abdominal abscess with diverticular disease should be coded using the index entry *Diverticula/intestine* and not coded to K65.0 as indicated by the index entry *Abscess/abdomen, abdominal/cavity*.

STRUCTURE

To avoid unnecessary repetition, the index is organised in the form of lead terms, which start at the extreme left of a column, and various levels of indentation, which start progressively further right. Therefore a complete index term may be composed of several lines, sometimes quite widely separated.

~~For example, in the entry:~~

EXAMPLE 5:

Erythroblastosis (fetalis) (newborn) P55.9

- due to

- - ABO (antibodies) (incompatibility) (isoimmunisation) P55.1
- - Rh (antibodies) (incompatibility) (isoimmunisation) P55.0

In the above entry, the last line stands for 'Erythroblastosis due to Rh antibodies, incompatibility or isoimmunisation'.

~~Erythroblastosis (fetalis) (newborn) P55.9~~
~~due to~~
~~ABO (antibodies) (incompatibility) (isoimmunisation) P55.1~~
~~Rh (antibodies) (incompatibility) (isoimmunisation) P55.0~~
~~-~~

~~the last line stands for 'Erythroblastosis due to Rh antibodies, incompatibility or isoimmunisation'.~~

Usually, the lead term is the name of a disease or pathological condition, while the terms indented beneath it (the 'modifiers') refer either to varieties of the condition, to the anatomical sites affected by it, or to circumstances that affect its coding. ~~The clinical coder~~ Users should therefore look up the disease or condition as a lead term and then find the variety, anatomical site, etc, indented beneath it. Thus 'tuberculosis of hip' is under the letter T and not under H, and stomach ulcer is under U, not under S. Only occasionally are anatomical sites indexed as the lead term. Usually, after the name of the anatomical site there will be a cross-reference to the disease, eg Ankle — *see condition*.⁽¹⁾

(1) *The name of an anatomical site appears as a lead term when it is part of the name of the disease, eg 'Abdomen/acute R10.0'. This does not occur frequently in English, and in the English-language version applies mainly to Latin expressions for some conditions, eg 'Cor biloculare'.*

In some diagnostic statements, the disease condition is expressed in adjectival form. Sometimes, the index lists both forms but often only the noun form will be found and the clinical coder must make the necessary transformation.

Among the indented modifiers, it is not always feasible to include a complete listing of the various combinations of modifiers that could apply to a given term. In such circumstances, some types of modifiers tend to have priority in assignment over others. For instance, under the lead term 'Abscess' are indented a large number of anatomical sites and their appropriate codes. However, tuberculous abscesses are not classified to these codes but to the codes for tuberculosis of these sites. Instead of inserting an indent 'tuberculous' under each anatomical site, the index uses one single indent 'tuberculous — *see Tuberculosis/abscess*' under the lead term 'Abscess'. In general, the types of modifiers that tend to have priority in Section I are those indicating that a disease or condition is infectious or parasitic, malignant, neoplastic, psychogenic, hysterical, congenital, traumatic, complicating or affecting the management of pregnancy, childbirth or the puerperium, or affecting the fetus or newborn, or that the disease was reported in circumstances where the patient was looking for health advice but was not necessarily sick (codes in Chapter 21). In Section II, the priority modifiers are those indicating transport accidents, complications of medical and surgical procedures, intentional self-harm, assault, legal intervention, or war operations.

Section I incorporates an index of the categories to be used with Chapter 21 for terms relating to problems or circumstances rather than diseases or injuries. Some special lead terms, or 'key' words, are used for these, indicating the type of problem or circumstances. The main key words are 'Counselling', 'Examination', 'History', 'Observation', 'Pregnancy', 'Problem', 'Screening', 'Status', and 'Vaccination'.

In both Sections I and II, this key word form of lead term is also used instead of, or in addition to, the standard method for certain conditions or circumstances where terminology is diverse and reported descriptions might not easily be found in the index, or where the normal method of indexing might be misleading. Some obstetric complications, especially the more common ones, are indexed under the specific condition, eg Haemorrhage/complicating/delivery. However, the complication may instead be listed under the lead term 'Labour', 'Pregnancy', 'Puerperal' or 'Maternal condition affecting fetus or newborn'.

In Section II, key words are 'Complication' (for medical and surgical procedures), 'Sequelae', 'Suicide', 'Assault', 'Legal intervention' and 'War operations'. Users should remember the presence of these special lists whenever they have difficulty locating index entries for the relevant conditions, problems or circumstances; by scrutinizing the indented terms, guidance can be found as to the code numbers of all the relevant categories even if not reported in precisely the same words.

CODE NUMBERS

The code numbers that follow the terms in the index are those of the three, four or five character categories to which the terms are classified. In some cases, the fourth character is replaced by a dash, eg Burn, ankle (and foot) T25.-. This indicates that a fourth and possibly a fifth character exists and should be used, and that it will be found either in a

note in the index (eg the fourth character subdivisions common to many sites of burns are given in a note under the lead term ‘Burn’) or by reference to the Tabular List.

When a set of fourth characters is applicable to a group of categories, the common fourth characters may be presented in a note or, in the case of pregnancies with abortive outcome, in a table in order to facilitate their application to different types of complete or incomplete abortion and to molar pregnancies. In other cases, the complication or main manifestation is listed in the index with a cross-reference to the entire group of categories, with specification of the fourth character, eg Syndrome/dependence — *code to F10–F19 with fourth character .2*.

Where an index term is one of the diagnostic statements for which there is a dual classification according to the aetiology and manifestation convention (dagger and asterisk), see ACS 0001 *Principal diagnosis/Aetiology and manifestation convention (the ‘dagger and asterisk’ system)*. (see *Australian Coding Standards*), both codes are given, the first followed by a dagger (†) and the second by an asterisk (*), eg Pott’s disease A18.0† M49.0*.

MULTIPLE DIAGNOSES

The Tabular List includes a number of categories for the classification of two or more conditions jointly reported, eg ‘Influenza with pneumonia’ (J11.0), ‘Acute appendicitis with generalised peritonitis’ (K35.2). Such combinations of conditions, which are specifically classified in the Tabular List, also appear in the index.

SPELLING

The spelling conventions of ICD-10-AM comply with the *Macquarie Dictionary* 4th edition (2005) as recommended by the Australian government *Style Manual*, 6th edition (2002). Australian-English spelling of medical terms is used. Terms appear in alphabetical order according to the preferred Australian spelling.

CONVENTIONS USED IN THE ALPHABETIC DISEASE INDEX OF DISEASES

PARENTHESES

In the index, as in the Tabular List, parentheses have a special meaning which the user/clinical coder must bear in mind. A term that is followed by other terms in parentheses is classified to the given code number whether any of the terms in parentheses are reported or not. For example:

EXAMPLE 6:

Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic)
- brain (any part) G06.0

————— Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic)
————— brain (any part) G06.0

Brain abscess is classified to G06.0 regardless of the part of the organ affected and whether or not the abscess is described as embolic, infective, metastatic, multiple, pyogenic, or septic.

Parentheses are also used to enclose:

- brand names in the Table of Drugs and Chemicals – eg pamidronate (*Aredia*)
- morphology codes – eg pseudomucinous (M8470/3)
- instructional notes – eg Laceration NEC (*see also Wound, open*)

CROSS REFERENCES

Some categories, particularly those subject to notes linking them with other categories, require rather complex indexing arrangements. To avoid repeating this arrangement for each of the inclusion terms involved, a cross-reference is used. This may take a number of forms, as in the following examples:

EXAMPLE 7:

Inflammation

- bone — see Osteomyelitis

————— Inflammation
————— bone — see Osteomyelitis

This indicates that the term ‘Inflammation, bone’ is classified in the same way as the term ‘Osteomyelitis’. On looking up the latter term, the ~~clinical coder~~ user will find listed various forms of osteomyelitis: acute, acute haematogenous, chronic, etc.

When a term has a number of modifiers which might be listed beneath more than one term, the cross-reference (*see also...*) is used.

EXAMPLE 8:

Paralysis

- shaking (*see also Parkinsonism*) G20

~~Paralysis~~

~~shaking (*see also Parkinsonism*) G20~~

This means ~~told~~ that if ‘shaking paralysis’ is the only term ~~on~~ documented in the medical-clinical record, the code is G20, ~~but that if any~~ If other information is present which is not found indented below, ~~he or she~~ the user should look up ‘Parkinsonism’. ~~There,~~ where alternative codes will be found for the condition if further or otherwise qualified ~~as,~~ for example, due to drugs or syphilitic.

EXAMPLE 9:

Enlargement, enlarged — *see also Hypertrophy*

If ~~the user does not find~~ the site of the enlargement among indentations beneath ‘Enlargement’, ~~he or she~~ is not found, ~~the user~~ should look among the indentations beneath ‘Hypertrophy’ where a more complete list of sites is given.

EXAMPLE 10:

Bladder — *see condition*

Hereditary — *see condition*

~~Bladder~~ — *see condition*

~~Hereditary~~ — *see condition*

As stated previously, anatomical sites and very general adjectival modifiers are not usually used as lead terms in the index and the ~~clinical coder~~ user is instructed to look up the disease or injury reported on the ~~medical~~ clinical record and under that term to find the site or adjectival modifier.

EXAMPLE 11:

Abdomen, abdominal — *see also condition*

- acute R10.0

- apron E65

- convulsive equivalent G40.8-

- muscle deficiency syndrome Q79.4

- overhang E65

- testicle NEC Q53.93

- - bilateral Q53.23

- - unilateral Q53.13

~~Abdomen, abdominal~~ — *see also condition*

~~acute R10.0~~

~~apron E65~~

~~convulsive equivalent G40.8-~~

~~muscle deficiency syndrome Q79.4~~

~~overhang E65~~

~~testicle NEC Q53.93~~

~~bilateral Q53.23~~

~~unilateral Q53.13~~

The term ‘acute abdomen’ is coded to R10.0; ‘abdominal apron’ is coded to E65; ‘abdominal convulsive equivalent’ is coded to G40.8-; ‘abdominal muscle deficiency syndrome’ is coded to Q79.4; ‘abdominal overhang’ is coded to E65; ‘abdominal testicle NEC’ is coded to Q53.93; ‘bilateral abdominal testicle’ is ~~coded coded~~ to Q53.23 and ‘unilateral abdominal testicle’ is coded to Q53.13. For other abdominal conditions, the ~~clinical coder user~~ should look up the disease or injury reported.

Prior to ICD-10-AM Eighth Edition cross references in the Alphabetic Index used commas to separate lead terms and subterms in an alternate index pathway. From Eighth Edition these commas have been replaced with slashes as follows:

EXAMPLE 12:

Haemorrhage, haemorrhagic

- childbirth — *see Haemorrhage, complicating, delivery*

is shown as:

Haemorrhage, haemorrhagic

- childbirth — *see Haemorrhage/complicating/delivery*

NEC

The letters NEC stand for ‘not elsewhere classified’. They are added after terms classified to residual or unspecific categories and to terms in themselves ill-defined as a warning that specified forms of the conditions are classified differently. If the ~~medical clinical~~ record includes more precise information the coding should be modified accordingly, eg:

EXAMPLE 13:

Anomaly, anomalous (congenital) (unspecified type) Q89.9

- aorta (arch) NEC Q25.40

_____ **Anomaly, anomalous (congenital) (unspecified type) Q89.9**
 _____ aorta (arch) NEC Q25.40

The term ‘anomaly of aorta’ is classified to Q25.40 only if no more precise description appears on the ~~medical clinical~~ record. If a more precise term, eg atresia of aorta, is recorded, this term should be looked up for the appropriate code.

SPECIAL SIGNS/ANNOTATIONS

The following special signs will be found attached to certain code numbers or index terms:

†/* Used to designate the aetiology code and the manifestation code respectively, for terms subject to dual classification. *See* under ‘Code numbers’.

#/◆ Attached to certain terms in the list of sites under ‘Neoplasm’ to refer the ~~clinical coder user~~ to Notes 23 and 34, respectively, at the start of that list.

TABULAR LIST OF DISEASES

CONVENTIONS USED IN THE TABULAR LIST OF DISEASES

There are a number of special conventions employed in the ICD-10-AM Tabular List which need to be understood by clinical coders and those interpreting statistics based on ICD-10-AM codes.

Aetiology and manifestation convention (the ‘dagger and asterisk’ system)

Codes for aetiology (underlying cause) are annotated by a dagger symbol (†) and manifestation codes by an asterisk (*) symbol.

When a condition classified using the dagger and asterisk system is reported as the principal diagnosis, follow the guidelines in ACS 0001 *Principal diagnosis* to determine the sequence. In cases where a morphology code is required, assign the morphology after the neoplasm (C00–D48) code (see also ACS 0233 *Morphology*).

EXAMPLE 1:

Fracture to femur due to bony metastases from adenocarcinoma of prostate.

Index entry: **Fracture**/metastatic C79.5† M90.7-*

Tabular:	M90.75*	<i>Fracture of bone in neoplastic disease, pelvic region and thigh</i>
	C79.5	<i>Secondary malignant neoplasm of bone and bone marrow</i>
	M8140/6	<i>Adenocarcinoma, metastatic NOS</i>
	C61	<i>Malignant neoplasm of prostate</i>
	M8140/3	<i>Adenocarcinoma NOS</i>

The rubrics in which dagger-marked terms appear may take one of three different forms:

- a. If the symbol (†) and the alternative asterisk code both appear in the rubric heading, all terms classifiable to that rubric are subject to dual classification and all have the same alternative asterisk code.**

EXAMPLE 2:

B37.3† *Candidiasis of vulva and vagina (N77.1*)*

Candidal vulvovaginitis

Monilial vulvovaginitis

Vaginal thrush

- b. If the symbol (†) appears in the rubric heading but the alternative asterisk code does not, all terms classifiable to that rubric are subject to dual classification but they have different alternative codes (which are listed for each term).**

EXAMPLE 3:

A18.0† *Tuberculosis of bones and joints*

Tuberculosis of:

• *hip (M01.15*)*

• *knee (M01.16*)*

• *vertebral column (M49.0-*)*

Tuberculous:

• *arthritis (M01.1-*)*

• *mastoiditis (H75.0*)*

• *necrosis of bone (M90.0-*)*

• *osteitis (M90.0-*)*

• *osteomyelitis (M90.0-*)*

• *synovitis (M68.0-*)*

• *tenosynovitis (M68.0-*)*

c. If neither the symbol (†) nor the alternative asterisk code appear in the title, the rubric as a whole is not subject to dual classification but individual inclusion terms may be. If so, these terms will be marked with the symbol and their alternative codes given.

EXAMPLE 4:

A54.8 *Other gonococcal infections*
Gonococcal:
...
• peritonitis† (K67.1*)
• pneumonia† (J17.0*)
• septicaemia
• skin lesions

Inclusion terms

Within the three and four character rubrics, there are usually listed a number of other diagnostic terms. These are known as ‘inclusion terms’ and are given, in addition to the title, as examples of the diagnostic statements to be classified to that rubric. They may refer to different conditions or be synonyms. They are not a subclassification of the rubric.

Inclusion terms are listed primarily as a **guide to the content** of the rubrics. Many of the items listed relate to important or common terms belonging to the rubric. Others are borderline conditions or sites listed to distinguish the boundary between one subcategory and another. **The lists of inclusion terms are by no means exhaustive** and alternative names of diagnostic entities are included in the [Alphabetic Index](#), which should be referred to first when coding a given diagnostic statement.

EXAMPLE 5:

H50.5 *Heterophoria*
Alternating hyperphoria
Esophoria
Exophoria

It is sometimes necessary to read inclusion terms in conjunction with titles. This usually occurs when the inclusion terms are elaborating lists of sites or pharmaceutical products, where appropriate words from the preceding titles (eg “malignant neoplasm of ...”, “injury to ...”, “poisoning by ...”) need to be understood.

EXAMPLE 6:

D21 *Other benign neoplasms of connective and other soft tissue*

D21.3 *Connective and other soft tissue of thorax*
Axilla
Diaphragm
Great vessels

Instructional notes/terms

There are situations, other than in the dagger and asterisk system that permit two ICD-10-AM codes to be used to describe fully a person’s condition. Instructional terms such as ‘Code also...’, ‘Use additional code ...’ and ‘Note...’, identify many of these situations (see also ACS 0002 *Additional diagnoses/Multiple coding*).

Includes note

General diagnostic descriptions common to various levels throughout the Tabular List eg. chapter, category or code.

EXAMPLE 7:

C50 *Malignant neoplasm of breast*

Includes: connective tissue of breast

EXAMPLE 8:**CHAPTER 16****CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (P00–P96)**

Includes: conditions that have their origin in the perinatal period even though death or morbidity occurs later

Note

The Note can be used as an explanation that clarifies the use of a code or codes.

EXAMPLE 9:**DERMATITIS AND ECZEMA (L20–L30)**

Note: In this block the terms dermatitis and eczema are used synonymously and interchangeably.

See

The *See* instructional term is a cross-reference to another section of the classification. *See* notes should be followed to ensure correct code selection.

EXAMPLE 10:

K26 *Duodenal ulcer*

See subdivisions

EXAMPLE 11:

M71 *Other bursopathies*

See site code

Code first

The *Code first* instruction assists the correct sequencing of codes. This instruction appears under codes that must never be assigned alone.

EXAMPLE 12:

★S91.81 *Open wound (of any part of ankle and foot) communicating with a fracture*

Code first the fracture (S82.-, S92.-).

Use additional code/Code also

The *Use additional code* and *Code also* instructions indicate that an additional code should be assigned to fully describe the condition or injury (see also ACS 0002 *Additional diagnoses/Multiple coding*).

EXAMPLE 13:

N34 *Urethritis and urethral syndrome*

Use additional code (B95–B97) to identify infectious agent.

EXAMPLE 14:

K08.81 *Pathological fracture of tooth*

Code also any predisposing dental disease (K00–K10).

Exclusion terms**Excludes notes**

Certain rubrics contain lists of conditions preceded by the word 'Excludes'. These are terms which, although the rubric title might suggest that they were to be classified there, are in fact classified elsewhere. An example of this is in category A46 *Erysipelas*, where postpartum or puerperal erysipelas is excluded. Following each exclusion term, in parentheses, is the category or subcategory code elsewhere in the classification to which the excluded term should be allocated.

'Excludes' notes can be found immediately following a chapter, block, category or code title. For a more detailed explanation of exclusion terms see **ACS 0033** *Conventions used in the tabular list of diseases, Exclusion notes*.

Excludes notes can be found at various levels of the Tabular List eg. chapter, category or code.

There are two types of excludes notes in ICD-10-AM. The excludes note meanings were developed by the World Health Organization (WHO) and in the development of ICD-10-AM, the excludes notes remain unaltered from those appearing in ICD-10. This is an important point in understanding the two types of excludes notes which are described simply by the WHO as:

Excludes Note Type 1 *For single condition coding, 'it' goes somewhere else.*

Excludes Note Type 2 *You might think 'it' goes here but it doesn't.*

Apart from understanding the ICD-10 principles involved in excludes notes, it is also essential that we revisit our main aim in coding:

To translate medical statements into code

If the application of an excludes note results in the medical statement not being fully represented by code(s), then you may need to re-examine the code assignments. A good way to test the appropriateness of your code assignments is to **translate the codes back to the medical statement**.

A simple example of translating code back to a medical statement:

Medical statement: Cholecystitis with cholelithiasis

Code translation: K80.10

Medical translation: Calculus of gallbladder with other cholecystitis, without mention of obstruction

This is a good code assignment because both the medical statement and the medical translation include inflammation of the gallbladder (cholecystitis) and calculus of the gallbladder (cholelithiasis).

It is not critical that coders identify whether an excludes note is a Type 1 or Type 2 but rather coders should ensure that the codes selected fully translate the medical statement. Coders also need to follow advice in standards ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*, as well as specialty standards.

These notes need to be considered in relation to the principle of single or multiple condition coding in ICD-10. The principle of single condition coding is employed in some countries, where only the main condition treated or investigated during the relevant episode of health care is reported – ie one code only to describe the episode of care. Single condition coding will often result in valuable information being lost. In Australia, we use multiple condition coding to provide the necessary specificity to fully describe the episode of care (see also ACS 0002 *Additional diagnoses/Multiple coding*).

Type 1 excludes notes (For single condition coding, 'it' goes somewhere else)

For example, if there is a code for a condition in one of the specialty chapters (eg. musculoskeletal) but that condition can occur in pregnancy or the perinatal period, then it is likely that the code will have an excludes note sending the user to the appropriate 'in pregnancy' or 'in the perinatal period' code for that condition.

Sometimes the code in the pregnancy or perinatal chapter may not have enough detail to translate the diagnostic statement into code. For example, the code may say 'other conditions complicating pregnancy'. In such cases, coders should assign the pregnancy code **and** the code where the excludes note applies. The two codes translate the medical statement.

Again, the rule of thumb is to translate your codes back to the medical statement to check for completeness of code assignment.

EXAMPLE 15:

Diagnosis: Gangrene in Raynaud's syndrome.

For 'single condition' coding, this diagnostic statement would be coded to I73.0 *Raynaud's syndrome* because there is an excludes note at R02 *Gangrene, not elsewhere classified*, which excludes gangrene in other peripheral vascular diseases (I73.-):

R02	<i>Gangrene, not elsewhere classified</i>
	Excludes: gangrene in:
	• atherosclerosis (I70.24)
	• diabetes mellitus (E1-.52, E1-.69, E1-.73)
	• other peripheral vascular diseases (I73.-)
	gangrene of certain specified sites (see <i>Alphabetic Index</i>)
	gas gangrene (A48.0)
	pyoderma gangrenosum (L88)

For **multiple condition coding**, R02 would be used as an additional code to fully describe the diagnostic statement because the code I73.0 does not provide detail about the gangrene (see ACS 0002 *Additional diagnoses/Multiple coding* and ACS 1802 *Signs and symptoms*).

EXAMPLE 16:

Diagnosis: Exhaustion during pregnancy

There is an excludes note at R53 *Malaise and fatigue* which excludes pregnancy (O26.88).

R53	<i>Malaise and fatigue</i>
	<i>Asthenia NOS</i>
	<i>Debility:</i>
	• chronic
	• nervous
	• NOS
	<i>General physical deterioration</i>
	<i>Lethargy</i>
	<i>Tiredness</i>
	Excludes: debility:
	• congenital (P96.9)
	• senile (R54)
	<i>exhaustion and fatigue (due to)(in):</i>
	• combat (F43.0)
	• excessive exertion (T73.3)
	• exposure (T73.2)
	• heat (T67.-)
	• neurasthenia (F48.0)
	• pregnancy (O26.88)
	• senile asthenia (R54)
	<i>fatigue syndrome:</i>
	• NOS (F48.0)
	• postviral (G93.3)

As 'exhaustion during pregnancy' contains **multiple diagnostic concepts** (ie 'exhaustion' and 'pregnancy'), this requires **multiple codes**.

To fully translate this medical statement into code you need to assign both O26.88 *Other specified pregnancy-related conditions* and R53 *Malaise and fatigue*.

Codes:	O26.88	<i>Other specified pregnancy-related conditions</i>
	R53	<i>Malaise and fatigue</i>

Type 2 excludes notes (You might think ‘it’ goes here but it doesn’t)

The conditions listed in these excludes notes are those which are similar concepts to the rubric in which they are listed and therefore could be mistakenly classified to the rubric in question.

These notes are ‘hints’ to ensure correct code selection. We might think that a particular diagnosis should be coded within a particular category, but the excludes note instructs you to go elsewhere. A good example of this is when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.

EXAMPLE 17:

Diagnosis: Intussusception of appendix

K56.1	<i>Intussusception</i>
	<u>Intussusception or invagination of:</u>
	• <u>bowel</u>
	• <u>colon</u>
	• <u>intestine</u>
	• <u>rectum</u>

Excludes: intussusception of appendix (K38.8)

This excludes note directs coders to assign K38.8 where the intussusception is of the appendix. As ‘intussusception of appendix’ is a **single diagnostic concept**, this only requires a **single code**.

Proper use of the Alphabetic Index avoids this situation as the index pathway *Intussusception/ appendix* assigns K38.8 *Other specified diseases of appendix*.

EXAMPLE 18:

Diagnosis: Newborn developed hydrocephalus post intraventricular haemorrhage

Q03	<i>Congenital hydrocephalus</i>
-----	---------------------------------

Includes: hydrocephalus in newborn

Excludes: Arnold-Chiari syndrome (Q07.0)
hydrocephalus:
• acquired (G91.-)
• due to congenital toxoplasmosis (P37.1)
• with spina bifida (Q05.0- –Q05.4-)

Hydrocephalus developed after the newborn suffered an intraventricular haemorrhage, therefore, it is an acquired condition and the excludes note should be followed. Note also that proper use of the Alphabetic Index avoids this situation as the index pathway *Hydrocephalus/newborn/post intraventricular haemorrhage* assigns G91.8 *Other hydrocephalus*.

EXAMPLE 19:

Diagnosis: Cholelithiasis with obstruction

K82.0	<i>Obstruction of gallbladder</i>
	<u>Occlusion }</u>
	<u>Stenosis }</u> of cystic duct or gallbladder without calculus
	<u>Stricture }</u>

Excludes: with cholelithiasis (K80.-)

This code has an excludes note which directs coders to assign the appropriate code from category K80 Cholelithiasis. ICD-10-AM classifies the obstruction with a fifth character subdivision for use with conditions listed under category K80, to specify with or without mention of obstruction. K80.21 Calculus of gallbladder without cholecystitis, with obstruction fully describes the medical statement and there is no need to assign K82.0.

Glossary descriptions

Glossary descriptions are formal statements of the meaning of a term or code. For example, in Chapter 5 *Mental and Behavioural Disorders*, glossary descriptions are used to indicate the content of rubrics. This device is used because the terminology of mental disorders varies greatly, particularly between different countries, and the same name may be used to describe quite different conditions. **The glossary is not intended for use by clinical coders.**

Parentheses ()

Parentheses are used in four ways:

1. Parentheses are used to enclose supplementary words, which may follow a diagnostic term without affecting the code number to which the words outside the parentheses would be assigned. This is known as a **nonessential modifier**.

EXAMPLE 120:

In the inclusion note at I12 *Hypertensive kidney disease* the line ‘arteriosclerotic nephritis (chronic) (interstitial)’ means that I12 is the code number for the term ‘arteriosclerotic nephritis’ alone or when qualified by one of the words ‘chronic’ or ‘interstitial’ (or both).

I12 *Hypertensive kidney disease*

Includes: any condition in N00–N07, N18.-, N19 or N26 due to hypertension
arteriosclerosis of kidney
arteriosclerotic nephritis (chronic)(interstitial)
hypertensive nephropathy
nephrosclerosis

Excludes: secondary hypertension (I15.-)

2. Parentheses are also used to enclose the code(s) to which an ~~exclusion term~~ excludes note refers.

EXAMPLE 221:

I88 *Nonspecific lymphadenitis* excludes ‘acute lymphadenitis, except mesenteric’ (L04.- *Acute lymphadenitis*) and ‘enlarged lymph nodes NOS’ (R59.- *Enlarged lymph nodes*)

I88 *Nonspecific lymphadenitis*

Excludes: acute lymphadenitis, except mesenteric (L04.-)
enlarged lymph nodes NOS (R59.-)

3. Parentheses are used in the block titles in the Tabular List to enclose the three character codes of categories included in that block.

EXAMPLE 22:

HYPERTENSIVE DISEASES (I10–I15)

4. Parentheses are used to enclose the dagger code in an asterisk category or the asterisk code following a dagger term.

EXAMPLE 323:

A32.1†	<i>Listerial meningitis and meningoencephalitis</i> Listerial: <ul style="list-style-type: none"> • meningitis (G01*) • meningoencephalitis (G05.0*)
G01*	<i>Meningitis in bacterial diseases classified elsewhere</i> Meningitis (in): <ul style="list-style-type: none"> • anthrax (A22.8†) • gonococcal (A54.8†) • leptospirosis (A27.-†) • listerial (A32.1†)

Square brackets []

Square brackets are used to enclose synonyms, alternative words, explanatory phrases or valid characters.

1. For enclosing synonyms.

EXAMPLE 424:

A30 *Leprosy [Hansen's disease]*

2. For explanatory phrases.

EXAMPLE 525:

⊕S06.02 *Loss of consciousness of brief duration [less than 30 minutes]*

3. For valid characters.

EXAMPLE 626:

M19.0 *Primary arthrosis of other joints*
[1–4, 7–9]

Colon :

A colon is used in listings of inclusion terms and ~~exclusion terms~~ excludes notes when the words that precede it are not complete terms for assignment to that rubric. They require one or more of the modifying or qualifying words indented under them before they can be assigned to the rubric.

EXAMPLE 727:

In K36 *Other appendicitis*, the diagnosis 'appendicitis' is to be classified there only if qualified by the words 'chronic' or 'recurrent'.

—K36 *Other appendicitis*
Appendicitis:

- chronic
- recurrent

Brace }

A brace is used in listings of inclusion terms and ~~exclusion terms~~ excludes notes to indicate that neither the words that precede it nor the words after it are complete terms. Any of the terms before the brace should be qualified by one or more of the terms that follow it.

EXAMPLE 828:

—O71.6 *Obstetric damage to pelvic joints and ligaments*
Avulsion of inner symphyseal cartilage }
Damage to coccyx } obstetric

NOS

The letters NOS are an abbreviation for ‘not otherwise specified’, meaning ‘unspecified’ or ‘unqualified’.

Sometimes an unqualified term is nevertheless classified to a rubric for a more specific type of the condition. This is because, in medical terminology, the most common form of a condition is often known by the name of the condition itself and only the less common types are qualified.

EXAMPLE 929:

Mitral stenosis is commonly used to mean ‘rheumatic mitral stenosis’.

These inbuilt assumptions have to be taken into account in order to avoid incorrect classification. Careful inspection of inclusion terms will reveal where an assumption of cause has been made. **Clinical coders** should be careful not to code a term as unqualified unless it is quite clear that no information is available that would permit a more specific assignment elsewhere.

Data analysts should similarly be aware that some conditions assigned to an apparently specified category will not have been so specified on the clinical record that was coded. When comparing trends over time and interpreting statistics, it is important to be aware that assumptions may change from one revision of the ICD to another. For example, before the Eighth Revision, an unqualified aortic aneurysm was assumed to be due to syphilis.

Not elsewhere classified

The words ‘not elsewhere classified’, when used in a three character category title, serve as a warning that certain specified variants of the listed conditions may appear in other parts of the classification.

EXAMPLE 1030:

J16 *Pneumonia due to other infectious organisms, not elsewhere classified*

This category includes J16.0 *Chlamydial pneumonia* and J16.8 *Pneumonia due to other specified infectious organisms*. Many other categories are provided in Chapter 10 *Diseases of the Respiratory System* and other chapters for pneumonias due to specified infectious organisms (eg J09–J15 and P23.-). J18 *Pneumonia, organism unspecified*, accommodates pneumonias for which the infectious agent is not stated.

‘AND’ in titles

‘And’ stands for ‘and/or’. For example, in the rubric A18.0† *Tuberculosis of bones and joints*, are to be classified cases of ‘tuberculosis of bones’, ‘tuberculosis of joints’ and ‘tuberculosis of bones and joints’.

Annotations

- † The dagger symbol denotes a code describing the aetiology or underlying cause of a disease and should always be assigned together with the appropriate manifestation (*) code. ~~Sequence both codes in the same sequence in which they appear in the alphabetic index (that is, the aetiology code followed by the manifestation code).~~
- * The asterisk symbol denotes a code describing the manifestation of a disease and should always be assigned together with the appropriate aetiology (†) code. ~~Sequence both codes in the same sequence in which they appear in the alphabetic index (that is, the aetiology code followed by the manifestation code).~~
- ▼ This symbol denotes that an Australian Coding Standard applies to a particular code or group of codes (category or block) and therefore, the standard should be checked before the code(s) is assigned. The relevant standard number(s) is shown under or beside the symbol.
- ★ This symbol denotes an Australian code.

Text boxes

A **black reverse text box** indicates codes at the third character level which are NOT VALID and CANNOT be assigned because the code requires an additional character(s) (*see code I12 in the example below*).

I12 Hypertensive kidney disease

Includes: any condition in N00–N07, N18.-, N19.- or N26.- due to hypertension
arteriosclerosis of kidney
arteriosclerotic nephritis (chronic)(interstitial)
hypertensive nephropathy
nephrosclerosis

Excludes: secondary hypertension (I15.-)

A **grey reverse text box** indicates codes at the fourth character level which are NOT VALID and CANNOT be assigned because the code requires an additional character (*see code C95.0 in the example below*).

C95.0 Acute leukaemia of unspecified cell type

Acute:
• bilineal }
• mixed lineage } leukaemia
Biphenotypic acute }
Stem cell leukaemia of unclear lineage

Excludes: secondary hypertension (I15.-)

A **box outline** is used to indicate codes at the three character level which are VALID (*see code I10 in the example below*).

I10 Essential (primary) hypertension

High blood pressure
Hypertension (arterial)(benign)(essential)(malignant)(primary)(systemic)

Excludes: involving vessels of:
• brain (I60–I69)
• eye (H35.0)

Type face

Bold Bold type face is used for all block titles in the Tabular List of Diseases.

Bold, Italics Bold and italicised type face is used for the all instructional terms text of ***Includes***, ***Excludes*** and ***Note***, with the exception of ‘Code also...’ and ‘Use additional code...’.

Italics Italicised type face is used for the instructional terms text of *Code also...*, *Code first...*, *See...* and *Use additional code*. ‘Code also...’ and ‘Use additional code...’.

Format

ICD-10-AM uses an overall block format for ease of reference with an indented format applying to all inclusional and instructional terms notes exceeding one line of text.

GUIDANCE IN THE USE OF ICD-10-AM

The translation of disease, injury, condition and procedure descriptions into code is a complex activity. In order to code accurately, it is essential to have a working knowledge of medical terminology and to understand the characteristics, terminology, and conventions of ICD-10-AM.

The main aim of coding is:

To translate medical statements into code

Originally designed to provide access to information contained in medical records for research, education, and administration, medical codes are now also utilised to facilitate payment of health services, to determine utilisation patterns and to evaluate the appropriateness of health care costs. Coding also provides the basis for epidemiological studies and research into the quality of health care.

The translation of disease, injury, condition and procedure descriptions into code is a complex activity. Because coding is used in so many areas, it is essential that coding is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of the health care needs of the country.

In order to code accurately, it is essential to have a working knowledge of medical terminology and to understand the characteristics, terminology and conventions of ICD-10-AM. The Alphabetic Index contains many terms not included in the Tabular List, and coding requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are consulted before a code is assigned.

There are several steps in coding diseases or procedures and the following is a simple guide intended to assist the occasional user of ICD-10-AM.

1. Identify the type of statement to be coded and refer to the appropriate section of the Alphabetic Index.
Note: Avoid indiscriminate multiple coding of irrelevant information, such as symptoms or signs characteristic of the diagnosis.
2. Locate the lead term. For disease and injuries, this is usually a noun for the pathological condition. For procedures, this is usually a noun identifying the type of procedure performed. However, some conditions expressed as adjectives or eponyms are included in the Alphabetic Index as lead terms.
3. Read and be guided by any instructional note(s) that appears under the lead term.
4. Read any terms enclosed in parentheses after the lead term (these nonessential modifiers do not affect the code-number), as well as any terms indented under the lead term (these essential modifiers may affect the code-number), until all the words in the clinical expression have been accounted for.
5. Follow carefully any cross-references ('see' and 'see also') found in the Alphabetic Index.
6. Refer to the Tabular List to verify the suitability of the code-number selected. For disease classification, note that a three character code in the Alphabetic Index with a dash in the fourth or fifth position means that there is a fourth or fifth character to be found in the Tabular List. Further subdivisions to be used in a supplementary character position are not indexed and, if used, must be located in the Tabular List.
7. Be guided by any inclusion terms, instructional notes and ~~or~~ exclusion ~~notes~~ under the selected code or under the chapter, block or category heading.
8. Assign the code.

~~Questions regarding the use and interpretation of the *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) can be directed to:~~

National Centre for Classification in Health
Faculty of Health Sciences
The University of Sydney
PO Box 170
Lidcombe NSW 1825
Australia

ALPHABETIC INDEX OF INTERVENTIONS

CONVENTIONS USED IN THE ALPHABETIC INDEX OF INTERVENTIONS

~~Conventions used in the Alphabetic Index of Interventions~~

Blocks

~~MBS is a fee schedule and has been structured according to specialty. As the *Australian Classification of Health Interventions* is based on item numbers in the MBS and is structured on an anatomical basis, the code numbers do not always appear in numerical order within the Tabular List of Interventions. A third level axis, called a **block**, has been introduced. Blocks are numbered sequentially in the Tabular List of Interventions to assist in locating a specific code. Block numbers in the index appear in bold and are located to the right of the code, separated from the code by brackets.~~

Main LEAD TERMS

The Alphabetic Index of Interventions is organised by ‘main-lead terms’ which are printed in bold type face for ease of reference. Main-Lead terms usually identify the type of procedure performed, rather than the anatomic site involved. Lead terms start at the extreme left of a column, with various levels of indentation, which start progressively further right. Therefore a complete index term may be composed of several lines, sometimes quite widely separated.

BLOCKS

MBS is a fee schedule and has been structured according to specialty. As the *Australian Classification of Health Interventions* is based on item numbers in the MBS and is structured on an anatomical basis, the code numbers do not always appear in numerical order within the Tabular List of Interventions. A third level axis, called a **block**, has been introduced. Blocks are numbered sequentially in the Tabular List of Interventions to assist in locating a specific code. Block numbers in the index appear in bold and are located to the right of the code, separated from the code by brackets.

SEQUENCE

Lead terms are sequenced alphabetically.

Spaces, symbols and numbers precede alphabetic letters. Numbers, whether Arabic or Roman, are sequenced numerically *before* alphabetic characters.

EXAMPLE 1:

Test, testing (for) NEC (*see also Investigation*) 92204-00 [**1866**]

- absorption

- - radioactive B₁₂

- - - 1 isotope 12512-00 [**1863**]

- - - 2 isotopes 12515-00 [**1863**]

Main terms are sequenced alphabetically. This may vary from previous editions where hyphens, symbols and numbers preceded alphabetic lettering. For example:

-

Amniocentesis

-diagnostic 16600-00 [**1330**]

-therapeutic 16618-00 [**1330**]

Amnio-infusion 16621-00 [**1330**]

Hyphens appear in the Alphabetic Index of Interventions to indicate levels of indentation of sub-entries in the Index. For example:

EXAMPLE 2:

Hypothermia

- deep 22075-00 [**642**]

- - with

- - - cardiac arrest, induced 22075-00 [642]
 - - - cerebral perfusion (antegrade) (retrograde) 38577-00 [642]
 - - - circulatory arrest, induced 22075-00 [642]

Hypothermia

- deep 20075-00 [642]
 - with
 - - cardiac arrest, induced 22075-00 [642]
 - - cerebral perfusion (antegrade) (retrograde) 38577-00 [642]
 - - circulatory arrest, induced 22075-00 [642]

-
 Numbers, whether Arabic or Roman, are sequenced numerically *before* alphabetic characters.

-
 For example:

Test, testing (for) NEC (*see also Investigation*) 92204-00 [1866]
 - absorption
 - radioactive B₁₂
 - - 1 isotope 12512-00 [1863]
 - - 2 isotopes 12515-00 [1863]

Prepositional terms

Wherever a preposition from the list below immediately follows a lead term or subterm, they always take precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with
- without

EXAMPLE 3:

Flap (repair)

- gingival (< 8 teeth) 97232-00 [456]
 - - for crown lengthening 97238-00 [456]
 - - with alveolar osseous procedure (< 8 teeth) 97233-00 [456]
 - - - > 8 teeth 97233-01 [456]
 - - > 8 teeth 97232-01 [456]

EXAMPLE 4:

Formation

- fistula
 - - arteriovenous
 - - - with
 - - - - graft, vein 34512-00 [765]*
 - - - - prosthesis (Gore-tex) 34512-01 [765]
 - - - limb (extremity)
 - - - - lower 34509-00 [765]**
 - - - - upper 34509-01 [765]

The prepositions ‘as’, ‘by’, ‘for’, ‘with’ and ‘without’ immediately follow the main term or subterm to which they refer. When a procedure description includes terms listed under a prepositional subterm and an alphabetic subterm, the prepositional subterm takes precedence when there is no default code listed.

-
 For example:

Formation

- fistula
 - arteriovenous
 - with

- ~~— graft, vein 34512-00 [765]*~~
- ~~— prosthesis (Gore tex) 34512-01 [765]~~
- ~~— limb (extremity)~~
- ~~— lower 34509-00 [765]**~~
- ~~— upper 34509-01 [765]~~

In the above example, ‘formation of an arteriovenous fistula of the lower limb with graft’ would be assigned code 34512-00 [765]* rather than code 34509-00 [765]** because entries under ‘with’ take precedence over the alphabetic subterm of ‘limb’.

When multiple prepositional references are present, they are listed in alphabetic sequence.

EXAMPLE 5:

Orbitotomy (exploratory) 42533-00 [222]

- for
- - decompression, by removal of
- - - bone (with replacement) — *see Orbitotomy/with/removal of/bone*
- - - intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- - dysthyroid eye disease, by
- - - fenestration of ≥ 2 walls 42545-00 [227]
- - - removal of intraorbital fat (peribulbar) (retrobulbar) 42545-01 [224]
- with
- - biopsy 42533-01 [224]
- - drainage 42533-00 [222]
- - excision of lesion (anterior aspect) 42542-00 [224]
- - - retrobulbar aspect 42543-00 [224]

For example:

- Arthroplasty** (*see also Repair, joint*) 50127-00 [1571]
- by osseointegration (implantation of titanium fixture)
- digit (finger) (toe) 45794-07 [1698]
- for hallux valgus (hallux rigidus) (unilateral) 49821-00 [1547]
- with prosthesis 49839-00 [1547]
- bilateral 49824-00 [1547]
- with prosthesis 49842-00 [1547]
- ankle
- for joint replacement (total) 49715-00 [1544]
- revision 49716-00 [1544]
- with bone graft 46717-00 [1544]
- Austin Moore, hip 47522-00 [1489]

MODIFIERS

A main-lead term or subterm may be followed by a series of terms in parentheses. The presence or absence of these parenthetical terms in the procedure description has *no effect* upon the selection of the code. These are called *nonessential modifiers*.

EXAMPLE 6:

Bronchoscopy (fibroptic) (with fluoroscopic guidance) (with bronchial lavage) (with washings) 41898-00 [543]

- with
- - biopsy (bronchus) (lung) 41898-01 [544]
- - broncho-alveolar lavage 41898-02 [544]
- - dilation (bronchial stricture) (tracheal stricture) 41904-00 [546]
- - excision of lesion 41892-01 [545]
- - - by laser 41901-00 [545]
- - removal of
- - - foreign body 41898-03 [544]
- - - lesion 41892-01 [545]
- - - - by laser 41901-00 [545]

For example:

Bronchoscopy (fibreoptic) (with fluoroscopic guidance) (with lavage) 41898-00 [543]
— with
— biopsy (bronchus) (lung) 41898-01 [544]
— dilation (bronchial stricture) (tracheal stricture) 41904-00 [546]
— excision of lesion 41892-01 [545]
— by laser 41901-00 [545]
— removal of
— foreign body 41895-00 [544]
— lesion 41892-01 [545]
— by laser 41901-00 [545]
— washings (for specimen collection) 41898-01 [544]

A term may also be followed by a list of subterms which *do have an effect* upon the selection of the appropriate code for a given procedure. These are called *essential modifiers*. These subterms form individual line entries and describe essential differences in site or surgical technique.

EXAMPLE 7:

Clipping

- artery 34106-14 [697]
- - axillary 34103-11 [697]
- - - for aneurysm 33070-00 [714]
- - - - ruptured 33175-00 [714]
- - brachial 34106-10 [697]
- - - for aneurysm 33070-00 [714]
- - - - ruptured 33175-00 [714]
- - cardiac collateral (open) 38700-03 [691]
- - - percutaneous (closed) 38700-02 [691]

For example:

Clipping

— artery 34106-14 [697]
— axillary 34103-11 [697]
— for aneurysm 33070-00 [714]
— ruptured 33175-00 [714]
— brachial 34106-10 [697]
— for aneurysm 33070-00 [714]
— ruptured 33175-00 [714]
— cardiac collateral (open) 38700-03 [691]
— percutaneous (closed) 38700-02 [691]

NOT ELSEWHERE CLASSIFIED (NEC)

NEC is used for two purposes which can only be determined by referring to the Tabular List of Interventions:

1. With ill-defined terms as a warning that specified forms of the procedure are classified differently. The codes given for such terms should be used only if more precise information is not available.
2. Terms for which a more specific category is not provided in the Tabular List, and no amount of additional information will alter the selection of the code.

Omit code

The *omit code* instruction can apply to terms which identify incisions that are listed as main terms in the Alphabetic Index of Interventions. If the incision was made only for the purpose of performing further surgery, the instruction *omit code* is given.

For example:

Arthrotomy (with lavage) 50103-00 [1555]
— as operative approach — *omit code*
— ankle 49706-00 [1529]
— elbow 49100-00 [1410]
— hip 49303-00 [1481]

~~Omit code~~ instructions can also apply to certain procedures which, when performed with other procedures, should not be coded.

-

For example:

~~Cardioversion 13400-00 [1890]~~

~~— in conjunction with cardiac surgery — omit code~~

CROSS REFERENCES/INSTRUCTIONAL REFERENCES

Prior to ACHI Eighth Edition cross references in the Alphabetic Index used commas to separate lead terms and subterms in an alternate index pathway. From Eighth Edition these commas have been replaced with slashes as follows:

EXAMPLE 8:

Administration

- agent (to)

- - sympatholytic — *see also Administration, nerve, sympathetic*

is shown as:

Administration

- agent (to)

- - sympatholytic — *see also Administration/nerve/sympathetic*

See/see also

See and see also cross references provide the user with possible modifiers for a term or its synonyms. They are used to avoid unnecessary duplication of terms in the index. Cross references provide the user with possible modifiers for a term or its synonyms. There are three types of cross references:

1. 'see' is an explicit direction to look elsewhere. It is used with terms which do not define the type of procedure performed.

EXAMPLE 9:

CAT (computerised axial tomography) — *see Tomography/computerised*

— For example:

— ~~CAT (computerised axial tomography)~~ — *see Tomography, computerised*

2. 'see also' directs the user to another ~~main~~ lead term when the entries under consideration do not provide a code.

EXAMPLE 10:

Abdominoplasty

- abdominal apron — *see also Lipectomy/abdominal*

- Pitanguy 30177-00 [1666]

- radical 30177-00 [1666]

— For example:

Abdominoplasty

- abdominal apron — *see also Lipectomy, abdominal apron*

- Pitanguy 30177-00 [1666]

- radical 30177-00 [1666]

3. 'see block [xxxx]' directs the user to the ~~†~~ Tabular List for further information or specific site references.

EXAMPLE 11:

Assistance

- endotracheal respiratory — *see block [569]*

—For example:
Assistance
—endotracheal respiratory — *see block [569]*

Omit code

The *omit code* instruction can apply to terms which identify incisions that are listed as lead terms in the Alphabetic Index of Interventions. If the incision was made only for the purpose of performing further surgery, the instruction *omit code* is given.

EXAMPLE 12:

Arthrotomy (with lavage) 50103-00 [1555]
- as operative approach — *omit code*
- ankle 49706-00 [1529]
- elbow 49100-00 [1410]
- hip 49303-00 [1481]

Omit code instructions can also apply to certain procedures which, when performed with other procedures, should not be coded.

EXAMPLE 13:

Cardioversion 13400-00 [1890]
- in conjunction with cardiac surgery — *omit code*

Code specific procedure(s) performed

This instruction is rarely used in the Alphabetic Index. It appears in those instances where it is necessary to code each individual component of a procedure and these are not specifically listed at this lead term.

EXAMPLE 14:

Amputation
- ear — *code specific procedure(s) performed*
- nose — *code specific procedure(s) performed*

EPONYMS

Procedures named after people (eponyms) are listed both as ~~main-lead~~ terms in their appropriate alphabetic sequence and under the ~~main-lead~~ term 'procedure'. A description of the procedure or anatomic site affected usually follows the eponym.

EXAMPLE 15:

Darrach procedure (osteotomy of ulna) 48406-04 [1424]
- with internal fixation 48409-04 [1424]

Procedure

- Darrach (osteotomy of ulna) 48406-04 [1424]
- - with internal fixation 48409-04 [1424]

For example:

Darrach procedure (osteotomy of ulna) 48406-04 [1424]
— with internal fixation 48409-04 [1424]

-

Procedure
— Darrach (osteotomy of ulna) 48406-04 [1424]
— with internal fixation 48409-04 [1424]

TABULAR LIST OF INTERVENTIONS

CONVENTIONS USED IN THE TABULAR LIST OF INTERVENTIONS

~~Conventions used in the Tabular List of Interventions~~

FORMAT

First level – anatomical site axis

ACHI has been structured with a principal axis of anatomical site. Within each chapter the anatomical site has been structured by a ‘superior’ to ‘inferior’ (head-to-toe) approach.

Second level – procedural type axis

The secondary axis is procedure type, beginning with the least invasive procedure through to the most invasive procedure. Standardised procedural axes are:

Examination

Application, Insertion, Removal

Incision

Destruction

Excision

Reduction (only applicable to Musculoskeletal chapter)

Repair

Reconstruction

Revision

Reoperation

Other procedures

Third level – block axis

Medicare Benefits Schedule (MBS) is a fee schedule and has been structured according to specialty. As ACHI is based on item numbers in the MBS and structured on an anatomical basis, the code numbers do not always appear in numerical order within the Tabular List. A third level axis, called a **block**, has been introduced. Blocks are numbered sequentially in the Tabular List to assist users in locating a specific code and have titles that relate specifically to the codes contained within the block.

There are certain chapters that are an exception to the general format:

- **Dental services**

This chapter is based on *‘The Australian Schedule of Dental Services and Glossary, 89th Edition’* published by the Australian Dental Association (ADA) Incorporated. Copies of this publication can be obtained from the ADA, PO Box 520, St Leonards NSW 1590 Australia. The Dental Services chapter is structured on a service basis, for example, diagnostic services, preventative services, periodontics, oral surgery, etc. Secondary axes, in most instances, relate to procedure type. The MBS also contains dental items based on the ADA’s item numbers. The MBS dental items are not utilised in ACHI but are listed in ACHI Tabular List Appendix C Mapping table for MBS dental items.

- **Obstetric procedures**

This chapter has a principal axis relating to the pregnancy cycle, for example, antepartum procedures, procedures associated with labour, delivery, etc. Secondary axes relate to procedure type.

- **Radiation oncology procedures**

This chapter has a principal axis relating to radiation oncology procedures. Secondary axes relate to the type of radiation, for example, external beam therapy, brachytherapy, computerised planning, etc.

- **Noninvasive, cognitive and interventions, not elsewhere classified**

This chapter has a principal axis relating to the purpose of the intervention, for example diagnostic, therapeutic or administrative/clinical/client support. The secondary axis relates to the type of intervention or the body system. For example, in the primary axis of Diagnostic Interventions, the secondary axes are *Assessment, Consultation, Interview, Examination, Evaluation or Diagnostic Tests, Measures or Investigations – Eye and Adnexa*. In the primary axis of Therapeutic Interventions, secondary axes include *Counselling, Education or Nutritional Support Interventions, or Therapeutic Interventions – Cardiovascular System*.

- **Imaging services**

The principal axis within this chapter relates to the imaging service performed, for example, ultrasound, tomography, radiography, etc. There is no secondary axis within this chapter.

ABBREVIATIONS

NEC *Not elsewhere classified.* This expression is used in the context of a warning to users that certain specified variants of the listed procedures may appear in other parts of the classification. Codes including ‘NEC’ within their description are only to be assigned when the user lacks the information necessary to assign the procedural term to a more specific code.

NOS *Not otherwise specified.* This abbreviation is the equivalent of the term ‘unspecified’.

AND/OR IN CODE TITLES

‘And’ in code titles means ‘and’. ‘Or’ in code titles means ‘or’.

EXAMPLE 1:

48224-00 [1435]	<i>Bone graft to radius or ulna</i>
47393-00 [1431]	<i>Open reduction of fracture of shaft of radius and ulna</i>

For example:

48224-00 [1435]	<i>Bone graft to radius or ulna</i>
47393-00 [1431]	<i>Open reduction of fracture of shaft of radius and ulna</i>

PUNCTUATION

- [] Brackets are used to enclose synonyms, alternative wordings or explanatory phrases.
- () Parentheses are used to enclose supplementary words which may be present or absent in the statement of a procedure without affecting the code number to which it is assigned.
- :
- Colons are used in the ~~†~~Tabular ~~†~~List after an incomplete term which needs one or more of the modifiers which follow in order to make it assignable to a given category.
- }
- Braces are used to enclose a series of terms, each of which is modified by the statement appearing at the right of the brace.

INCLUSION TERMS

Inclusion terms are the procedural terms listed under a block heading or code description.

Their purpose is to give examples of terms which are categorised to the code or block. ~~For example:~~

EXAMPLE 2:

90064-01 [173]	<i>Refractive keratoplasty</i>
	<i>Keratomileusis</i>
	<i>Thermokeratoplasty</i>

90064-01 [173]	<i>Refractive keratoplasty</i>
	<i>Keratomileusis</i>
	<i>Thermokeratoplasty</i>

Inclusion terms are *not* exhaustive and ~~users~~ clinical coders should *never code directly from the* ~~†~~Tabular ~~†~~List. The Alphabetic Index should be referenced first, as it contains many more procedural terms than the Tabular List.

INSTRUCTIONAL NOTES

Instructional notes appear in certain locations throughout the Tabular List:

Chapter instructional notes relate to the codes classified to the chapter

First level – instructional notes relate to the codes classified to the site

Anatomical site axis

Second level – instructional notes relate to the codes classified to the procedural type
Procedural type axis

Third level – instructional notes relate to the codes grouped under the block heading
Block axis

Fourth level – instructional notes relate to the code
Code

Instructional notations are listed in the following order:

Glossary descriptions/Definitions

Includes

Note

Code also when performed (Code also) (Code first)

Excludes

Glossary descriptions/Definitions:

Glossary descriptions are formal statements of the meaning of a term or code. They are used to define the content of a chapter, anatomical site, procedure type, block or code. Glossary descriptions are useful in standardising terminology and assist with coding quality. **Glossary descriptions are not intended for use by clinical coders.**

Includes:

The Includes note is used to further define the contents of a chapter, site, procedure type, block or code. In some instances, the Includes note refers to procedural components or equipment used that is inherent in the description of a code or block heading. **For example:**

EXAMPLE 3:

36503-00 [1058] *Kidney transplantation*

Includes: vascular anastomosis

————— 36503-00 [1058] ————— *Kidney transplantation*

-

————— **Includes:** vascular anastomosis

In other instances, the Includes instructional note further defines the site. **For example:**

EXAMPLE 4:

30394-00 [987] *Drainage of intra-abdominal abscess, haematoma or cyst*

Includes: appendiceal }
iliac fossa }
intraperitoneal }
pelvic } abscess, haematoma or cyst
pouch of Douglas }
subhepatic }
subphrenic }
peritonitis }

————— 30394-00 [987] ————— *Drainage of intra-abdominal abscess, haematoma or cyst*

————— **Includes:** appendiceal }
iliac fossa }
intraperitoneal }
pelvic } abscess, haematoma or cyst
pouch of Douglas }

_____	subhepatic	}
_____	subphrenic	}
_____	peritonitis	

Note:

The Note can be used as an explanation that clarifies the use of a code or codes. In many instances, the Note provides an example of a diagnostic term for which the procedure may be performed (ie the Note is not exhaustive). ~~For example:~~

EXAMPLE 5:

39806-00 [11] *Clipping of intracranial proximal artery*

Note: Performed for aneurysm or arteriovenous malformation

_____ 39806-00 [11] *Clipping of intracranial proximal artery*

-

Note: Performed for aneurysm or arteriovenous malformation

The Note can also be used to further define certain terms used in code descriptions within the block, ~~for example:~~

EXAMPLE 6:

[712] *Arterial bypass graft using synthetic material*

Note: Synthetic material can include polyester (woven or knitted) or polytetrafluorethylene [PTFE] grafts

_____ [712] *Arterial bypass graft using synthetic material*

-

Note: Synthetic material can include polyester (woven or knitted) or polytetrafluorethylene [PTFE] grafts

Code also/Code also when performed:

This instruction is used throughout the Tabular List to advise the user that an additional code is to be assigned when certain associated procedures are performed or certain equipment is used. ~~For example:~~

EXAMPLE 7:

41548-00 [323] *Obliteration of mastoid cavity*

Code also when performed:

• meatoplasty (41512-00 [305])

_____ 41548-00 [323] *Obliteration of mastoid cavity*

-

Code also when performed:

• meatoplasty (41512-00 [305])

Code first:

Code first instructions assist the user in the correct sequencing of codes. This instruction appears under codes that *must never* be assigned alone.

EXAMPLE 8:

15012-00 [1794] *Brachytherapy, eye*

Code first:

• implantation of brachytherapy applicator, eye (42801-00 [177])

Excludes:

Terms following the word 'Excludes' are to be coded elsewhere as indicated in each case.

Codes are not listed within the 'Excludes' ~~note/instructional term~~ in numerical order. Rather they are ordered sequentially by block number. For example:

EXAMPLE 9:

[8] *Intracranial drainage*

Excludes: cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])

~~*Excludes:* cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])~~

Codes can be listed in Excludes notes with or without their extensions (see above example, 40003 [5] and 40012 [19]). When the extensions are not used, the Excludes ~~note/instructional term~~ applies to **all** the two digit extensions of that code. In the above example, there are two extensions to code 40012 (below):

EXAMPLE 10:

40012-00 [19] *Endoscopic third ventriculostomy*

40012-01 [19] *Third ventriculostomy*

~~40012-00 [19] *Endoscopic third ventriculostomy*~~

~~40012-01 [19] *Third ventriculostomy*~~

Black reverse text boxes

Black reverse text boxes are used for all block numbers. They DO NOT indicate valid codes and CANNOT be assigned. For example:

1340

Caesarean section

- 16520-00 Elective classical caesarean section
- 16520-01 Emergency classical caesarean section
- 16520-02 Elective lower segment caesarean section
- 16520-03 Emergency lower segment caesarean section

Type Face

Bold Bold type face is used for all block titles in the Tabular List of Interventions.

Bold, Italics Bold and italicised type face is used for all the instructional ~~note~~ text of ***Includes***, ***Excludes*** and ***Note***, with the exception of 'Code also when performed' and 'Code first'.

Italics Italicised type face is used for the instructional ~~s~~ text of *Code also...*, *Code first*, *See...* and *Use additional code*. ~~'Code also when performed' and 'Code first'.~~

Annotations

- ▼ This symbol denotes that for a particular code or group of codes (category or block) there is an Australian Coding Standard that should be checked before the code(s) is assigned. The relevant standard number(s) is shown under or beside the symbol.

GUIDANCE IN THE USE OF ACHI

The translation of disease, injury, condition and procedure descriptions into code is a complex activity. In order to code accurately, it is essential to have a working knowledge of medical terminology and to understand the characteristics, terminology and conventions of ICD-10-AM and ACHI.

The main aim of coding is:

To translate medical statements into code

Originally designed to provide access to information contained in medical records for research, education and administration, clinical codes are now also utilised in some jurisdictions to facilitate payment of health services, to determine utilisation patterns and to form part of systems to evaluate the appropriateness of health care costs. Coding also provides the basis for epidemiological studies and research into the quality of health care.

The translation of disease, injury, condition and procedure descriptions into code is a complex activity. Because coding is used in so many areas, it is essential that coding is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of the health care needs of the country.

In order to code accurately, it is essential to have a working knowledge of medical terminology and to understand the characteristics, terminology and conventions of ICD-10-AM. The Alphabetic Index contains many terms not included in the Tabular List, and coding requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are consulted before a code is assigned.

There are several steps in coding diseases or interventions and the following is a simple guide intended to assist the occasional user of ICD-10-AM and ACHI.

1. Identify the type of statement to be coded and refer to the appropriate section of the Alphabetic Index.
Note: Avoid indiscriminate multiple coding of irrelevant information, such as symptoms or signs characteristic of the diagnosis.
2. Locate the lead term. For disease and injuries, this is usually a noun for the pathological condition. For interventions, this is usually a noun identifying the type of procedure performed. However, some conditions expressed as adjectives or eponyms are included in the Alphabetic Index as lead terms.
3. Read and be guided by any instructional note(s) that appears under the lead term.
4. Read any terms enclosed in parentheses after the lead term (these nonessential modifiers do not affect the code number), as well as any terms indented under the lead term (these essential modifiers may affect the code number), until all the words in the clinical expression have been accounted for.
5. Follow carefully any cross-references ('see' and 'see also') found in the Alphabetic Index.
6. Refer to the Tabular List to verify the suitability of the code number selected. For disease classification note that a three character code in the Alphabetic Index with a dash in the fourth or fifth position means that there is a fourth or fifth character to be found in the Tabular List. Further subdivisions to be used in a supplementary character position are not indexed and, if used, must be located in the Tabular List.
7. Be guided by any inclusion terms, instructional notes and ~~or~~ exclusion ~~notes~~ under the selected code or under the chapter, block or category heading.
8. Assign the code.

Questions regarding the use and interpretation of the *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM) or the *Australian Classification of Health Interventions* (ACHI) can be directed to:

National Centre for Classification in Health
Faculty of Health Sciences
The University of Sydney
PO Box 170
Lidcombe NSW 1825
Australia