



The ICD-10-AM 2nd edition mapping tables

Introduction

The ICD-10-AM 2nd edition mapping tables have been created to demonstrate the relationship between the codes in the 1st edition of ICD-10-AM and the codes in the 2nd edition of ICD-10-AM and thus provide a means of interpreting data using codes from either version of the classification.

There are four tables:

- New disease codes 2000 (backward diagnosis mapping table) – dxbackmaps.txt
- Deleted disease codes 2000 (forward diagnosis mapping table) – dxforwmaps.txt
- New procedure codes 2000 (backward procedure mapping table) – pxbackmaps.txt
- Deleted procedure codes 2000 (forward procedure mapping table) – pxforwmaps.txt

The fields in the tables

Field 1: Code

The new or deleted code being mapped.

Field 2: Abbrev Descrip

An abbreviated text descriptor for the code number in field 1.

Field 3: Historical Map

This code is the 'best match' for the code in field 1. This selection is made based on:

- * the best match code descriptor
- * the code to which the concept is indexed
- * coding convention

In most cases this code will result in the same AR-DRG v4.1 assignment as the code in field 1.

Use the code in this field rather than field 4 if you wish to interpret the coded data in terms of how the concepts best match clinically.

Field 4: Logical Map

This code is generally the same as the code in field 3 because the code in field 3 generally results in the same AR-DRG assignment as the code in field 1. **When the code in this field is different to the code in field 3** (historical map) this means that the historical map results in a different AR-DRG assignment than that resulting from the code in field 1.

Use the code in this field rather than field 3 if you wish to interpret the coded data in terms of best match AR-DRG.

Field 5: Sequence Number

This field contains the sequence number which identifies the map as a primary map (0) or a secondary map (1,2,3,4, and so on). There is no hierarchy associated with the secondary maps (i.e. the code sequenced 2nd is not necessarily a better map than the code sequenced 4th).

In one-to-many relationships, the code chosen for the primary map will generally be the ‘unspecified’ code, with the more specific codes included as secondary maps.

For example, in the forward diagnosis mapping table:

ICD-10-AM 1st edition deleted code:

M25.26 *Flail joint, lower leg*

Maps to:

ICD-10-AM 2nd edition codes:**Primary map:**

M23.59 *Chronic instability of knee, unspecified ligament or unspecific meniscus*

Secondary maps:

M23.51 *Chronic instability of knee, anterior cruciate ligament or anterior horn of medial meniscus*

M23.52 *Chronic instability of knee, posterior cruciate ligament or posterior horn of medial meniscus*

M23.53 *Chronic instability of knee, medial collateral ligament or other and unspecified medial meniscus*

M23.54 *Chronic instability of knee, lateral collateral ligament or anterior horn of lateral meniscus*

M23.55 *Chronic instability of knee, posterior horn of lateral meniscus*

M23.56 *Chronic instability of knee, other and unspecified lateral meniscus*

M23.57 *Chronic instability of knee, capsular ligament*

M23.50 *Chronic instability of knee, multiple sites*

Interpreting one-to-many maps

The secondary maps generally indicate codes which bear a partial relationship to the code in field 1, as in the example above. However, there are instances such as the ‘dagger/asterisk’ convention represented by the annotations + and * respectively, which means that both codes are required to fully describe the concept represented by the code in field 1.

The annotations of + (dagger) and * (asterisk) indicate disease codes in ICD-10-AM which need another code (either asterisk or dagger, respectively) to complete the diagnostic statement. The dagger code indicates the aetiology of the disease and the asterisk code indicates how the disease manifests itself. Coding convention requires the dagger code to be sequenced before the accompanying asterisk code.

For example, ‘anterior spinal and vertebral artery compression syndromes’ is coded as M47.0+ *Anterior spinal and vertebral artery compression syndromes* followed by G99.2* *Myelopathy in diseases classified elsewhere*.