# ICD-10-AM/ACHI/ACS

Reference to changes

**Thirteenth Edition** 



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#### Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition — May 2025

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## How to use this document

#### **General overview**

The Independent Health and Aged Care Pricing Authority (IHACPA) has released ICD-10-AM/ACHI/ACS Thirteenth Edition for implementation 1 July 2025:

- International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification (ICD-10-AM)
- Australian Classification of Health Interventions (ACHI)
- Australian Coding Standards (ACS).

The ICD-10-AM/ACHI/ACS Reference to Changes for Thirteenth Edition details changes that have been made since ICD-10-AM/ACHI/ACS Twelfth Edition. As classification development amendments are produced in discrete topics, there may be overlap within this document. Cross-references have been included to draw attention to related material in other topics.

To view the final classification amendments, please refer to the published books. Also note that there may be minor changes in the published books to align with classification conventions.

The ICD-10-AM/ACHI/ACS Reference to Changes for Thirteenth Edition document does not account for errata released to correct typographical errors.

In general, the structure of this document aligns with the ACS chapters, with additional topics for Conventions in ICD-10-AM and ACHI, Standardisation of the ACS and Dental.

Users are encouraged to use the search facility within this document if they are looking for a specific item.

#### Minor addenda

Where a topic is identified as minor addenda, this constitutes updates that have resulted from incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes, and incidental amendments identified during classification development.

#### Standardisation of the ACS

Specific feedback was received, supported by stakeholders, for a review and consolidation of the ACS due to inconsistencies with language, background information and examples.

It was identified that the purpose of the ACS must be clearly defined and informative, but succinct and written in plain language to avoid ambiguity. The examples provided should demonstrate application of the standard.

Thirteenth Edition has built on the work commenced in Twelfth Edition and applied a standardised template to all the ACS to achieve these goals. This has incorporated the retirement of unnecessary ACS and relocation of relevant content to the Tabular Lists or Alphabetic Indices. The application of the template to all ACS was to apply a standard format and not to make changes to classification guidelines within all ACS. For usability this document only contains amendments made to classification guidelines within an ACS. See Standardisation of the ACS for further information.

### Glossary of abbreviations

Abbreviation	Term
ABS	Australian Bureau of Statistics
ACHI	Australian Classification of Health Interventions
ACS	Australian Coding Standards
AR-DRG	Australian Refined Diagnosis Related Group
COVID-19	Coronavirus disease 2019
CCAG	Classifications Clinical Advisory Group
DCID	Diagnosis cluster identifier
HIMAA	Health Information Management Association of Australia
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
IHACPA	Independent Health and Aged Care Pricing Authority
INR	International Normalised Ratio
ITG	ICD Technical Group
MBS	Medicare Benefits Schedule
POTS	Postural orthostatic tachycardia syndrome
VAD	Voluntary assisted dying
WHO	World Health Organization

# Conventions in ICD-10-AM and ACHI

Revision of the format of the *Conventions used in ICD-10-AM Tabular List and Alphabetic Index and ACHI Tabular List and Alphabetic Index* has been undertaken to increase consistency across the classifications and align with the standardisation of the ACS.

## 1. ICD-10-AM Tabular List

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#### Guidance in the use of ICD-10-AM

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#### **USING ICD-10-AM**

#### **CONVENTIONS USED IN THE ICD-10-AM TABULAR LIST**

#### 1. FORMAT

#### 1.1 General format

The format of the Tabular List is largely the same as the format of the WHO ICD-10 with the exception of the spelling conventions (see *ICD-10-AM Tabular List/Introduction/Development of ICD-10*). The Tabular List uses an overall block format for ease of reference, with an indented format that applies to all *Inclusion* terms and *Instructional* terms/notes exceeding one line of text.

#### Note(s)

- 1. The Tabular List is divided into:
  - Chapters There are 22 chapters, based on ICD-10 titles.
  - Blocks The chapters are subdivided into blocks of three character categories, which have formal headings (such as block I10–I15, see Example 27). A range of categories without a formal heading is not a block (such as categories M80–M81, see Example 24).

- Categories Within a block, a three character category may be for a single condition (such as category I10, see Example 3), or for a group of diseases with common characteristics (such as category I12, see Example 1).
- Subcategories Many categories are further divided into subcategories (such as subcategory C95.0, see Example 2).

#### 1.2 Text boxes

**1.2.1** Black reverse text boxes are used for three character codes. They are **not valid** and **cannot** be assigned, as fourth and/or fifth characters are required (see Example 1).

Example 1:
Tabular List:

Hypertensive kidney disease

Black reverse text box — for a three character code that is not valid. A fourth character is required with I12 (Convention 1.2.1 and Note 1)

**1.2.2 Grey text boxes** are used for four character codes. They are **not valid** and **cannot** be assigned, as fifth characters are required (see Example 2).

Example 2:

Tabular List: C95.0 Acute leukaemia of unspecified cell type

Rationale: Grey text box — for a four character code that is not valid. A fifth character is required with C95.0

(Convention 1.2.2 and Note 1)

**1.2.3** A **box outline** is used for valid three character codes (see Example 3).

Example 3:

Tabular List: | I10 | Essential (primary) hypertension

**Rationale:** Box outline — for a valid three character code (*Convention* 1.2.3 and *Note* 1)

#### 2. MULTIPLE CONDITION CODING

In Australia, multiple condition coding (meaning that multiple conditions may be assigned in an episode of care) is used to provide specificity to fully describe the episode of care. This does not mean multiple codes are assigned to describe a single condition (unless otherwise instructed).

It is unnecessary for conditions to be explicit in a code title or *Inclusion* term to be correctly classified.

- **2.1 Do not** assign an additional code to further classify a condition unless directed by an *Instructional* term/note in the Tabular List, or an Australian Coding Standard or National Coding Advice. This includes when a condition is classified to a residual (other or unspecified) code as per the Alphabetic Index (see Example 4).
- **2.2** Multiple codes are not assigned when the classification provides a combination code that identifies all the elements in the diagnosis (see *Convention* 4).

#### Example 4:

Patient was admitted with intussusception of the appendix.

Index: Intussusception (bowel) (colon) (intestine) (rectum) K56.1

- appendix K38.8

- congenital Q43.89

- ureter (with obstruction) N13.5

Assign: K38.8 Other specified diseases of appendix

Rationale: K38.8 — an additional code is not required to further classify intussusception of the appendix, as the condition is classified to a residual code as per the Alphabetic Index (Convention 2.1)

2.3 Application of the Alphabetic Index or an *Excludes* note (see *Convention* 7.6.2) may result in a code for one of the clinical concepts in a causal relationship not being assigned. Assign multiple codes for both a condition and its underlying cause in accordance with ACS 0001 *Principal diagnosis/3*. *Problems and underlying conditions/3.2*. *Coding the problem as the principal diagnosis* or ACS 0002 *Additional diagnoses/3*. *Other guidelines related to additional diagnosis criteria/3.1 Problems and underlying conditions* (see Examples 5 and 24).

#### Example 5:

Patient was admitted for treatment of neurogenic bladder due to cauda equina syndrome.

Index: **Neurogenic** — see also condition

- bladder (see also Dysfunction/bladder/neuromuscular) N31.9

- - cauda equina syndrome G83.4

- - detrusor sphincter N31.8

Assign: N31.9 Neuromuscular dysfunction of bladder, unspecified

G83.4 Cauda equina syndrome

**Rationale:** N31.9 — ACS 0001 *Principal diagnosis*, for the problem being treated

G83.4 — ACS 0001 *Principal diagnosis*, for the underlying condition

Both codes are assigned to identify the clinical concepts in the causal relationship. Assignment of G83.4 alone by applying the cited indexing (*Neurogenic/bladder/cauda equina syndrome*) would result in the code for the problem being treated not being assigned (*Convention* 2.3).

# 3. AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM)

Some aetiology (underlying cause) codes are annotated by a dagger symbol (†) and manifestation codes by an asterisk symbol (\*).

**3.1** Where a condition classified using the aetiology and manifestation convention is reported as principal diagnosis, follow the guidelines in ACS 0001 *Principal diagnosis/2*. *Aetiology and manifestation convention (the 'dagger and asterisk' system)* to determine the sequence (see Example 6).

#### Example 6:

Patient was admitted with fracture to femur due to bony metastases from adenocarcinoma of prostate.

Assign: M90.75\* Fracture of bone in neoplastic disease, pelvic region and thigh

<u>C79.5</u>† <u>Secondary malignant neoplasm of bone and bone marrow</u>

M8140/6 Adenocarcinoma, metastatic NOS

C61 Malignant neoplasm of prostate

M8140/3 Adenocarcinoma NOS

Rationale: M90.75\* — for the manifestation (asterisk) in a dagger/asterisk pair (with fifth character 5 for the

site) (Convention 3.1)

C79.5† — for the underlying condition (dagger) in a dagger/asterisk pair (Convention 3.1). C79.5

is not always subject to dual classification (see Convention 3.2.3)

M8140/6, C61 and M8140/3 — ACS 0233 Morphology and ACS 0236 Neoplasm coding and sequencing

- **3.2** The rubrics in which dagger-marked terms appear may take one of three forms:
- **3.2.1** If the dagger symbol and the asterisk code both appear in the rubric heading, all conditions classifiable to that rubric are subject to dual classification and have the same asterisk code assigned (see Example 7).

Example 7:	
Tabular List:	B37.3† Candidiasis of vulva and vagina (N77.1*)
	Candidal vulvovaginitis
	Monilial vulvovaginitis
	Vaginal thrush
	N77.1* Vaginitis, vulvitis and vulvovaginitis in infectious and parasitic diseases
	<u>classified elsewhere</u>
Rationale:	All conditions classified to B37.3† are also assigned N77.1*, as the dagger symbol and asterisk
	code both appear in the rubric heading (Convention 3.2.1).

3.2.2 If the dagger symbol appears in the rubric heading but no asterisk code, all conditions classifiable to that rubric are subject to dual classification but may have different asterisk codes assigned (in accordance with the Alphabetic Index or Inclusion terms) (see Example 8). See also Conventions used in the ICD-10-AM Alphabetic Index/3. Aetiology and manifestation convention (the 'dagger and asterisk' system).

<u>Inaex/3. A</u>	<u>enology an</u>	a manifestation convention (the dagger and asterisk system).
Example 8:		
Tabular List:	A18.0†	Tuberculosis of bones and joints
		Tuberculosis of:
		• hip (M01.15*)
		• knee (M01.16*)
		• vertebral column (M49.0-*)
		<u>Tuberculous:</u>
		• arthritis (M01.1-*)
		• mastoiditis (H75.0*)
		• necrosis of bone (M90.0-*)
		• osteitis (M90.0-*)
		• osteomyelitis (M90.0-*)
		• synovitis (M68.0-*)
		• tenosynovitis (M68.0-*)
Rationale:	A18.0† h	as a dagger symbol in the rubric heading, but no asterisk code. Therefore, all conditions
	classifi	ed to A18.0† are assigned an asterisk code as per the Alphabetic Index or <i>Inclusion</i> terms
	(Conve	ention 3.2.2).
	<u>,come</u>	

3.2.3 If neither the dagger symbol nor the asterisk code appear in the rubric heading, the rubric is not always subject to dual classification, but individual *Inclusion* terms may be. These terms are marked with the dagger symbol and their paired asterisk code is listed (see Example 9).

Example 9: Gonococcal pneu	ımonia.	
Tabular List:	A54.8	Other gonococcal infections Gonococcal:
		• peritonitis† (K67.1*) • pneumonia† (J17.0*) • skin lesions
	J17.0*	Pneumonia in bacterial diseases classified elsewhere
Rationale:	not alv	the dagger symbol nor <b>the</b> asterisk code (J17.0*) appear in the rubric heading, so A54.8 is ways subject to dual classification, but gonococcal pneumonia is, as per the <i>Inclusion</i> term ention 3.2.3).

#### 4. COMBINATION CODES

A combination code is a single code that classifies two diagnoses, or a diagnosis with a manifestation or associated complication. A combination code is assigned when it fully identifies the diagnostic conditions involved and when directed by the Alphabetic Index (see Example 10).

#### Example 10:

Patient was admitted with arteriosclerosis of the extremities with gangrene.

Index: Arteriosclerosis
- extremities
- - with
- - - gangrene

Assign: I70.24 Atherosclerosis of arteries of extremities with gangrene

Rationale: 170.24 — a combination code that fully identifies all the diagnostic conditions involved, as directed

by the Alphabetic Index (Convention 4)

#### 5. DOUBLE CODING

Assign a code from Chapters 1–19, 21 and 22 **once** only in an episode of care:

- when multiple conditions are classified to the same code **or** when classifying bilateral conditions with no code specifying laterality (see Example 11)
- unless an ACS or National Coding Advice directs otherwise.

#### Example 11:

Patient was admitted for bilateral stripping and ligation of sapheno-femoral junction varicose veins.

Assign: I83.9 Varicose veins of lower extremities without ulcer or inflammation

Rationale: I83.9 — assigned once to classify bilateral varicose veins, as there is no code specifying laterality

(Convention 5)

#### 6. INCLUSION TERMS

*Inclusion* terms are diagnostic terms listed under a block heading, *Glossary description* or code. Their purpose is to demonstrate examples of clinical concepts classified to that rubric. They may refer to different conditions or synonyms, but they are not a subclassification.

<u>Inclusion</u> terms are listed primarily as a **guide to the content** of the rubrics. Many of the items listed relate to important or common terms classified to the rubric. Others are borderline conditions or sites, listed to distinguish the boundary between one subcategory and another. <u>Inclusion</u> terms are indexed.

#### **6.1 Do not** use *Inclusion* terms to code directly from the Tabular List as they are **not exhaustive**.

Reference first the Alphabetic Index, as it contains many more clinical concepts than the Tabular List (see Examples 12 and 13).

#### Example 12:

Tabular List: H50.5 Heterophoria

Alternating hyperphoria

Esophoria Exophoria Rationale: Alternating hyperphoria, esophoria and exophoria are clinical concepts classified to H50.5. These

Inclusion terms are not exhaustive and the Alphabetic Index contains more clinical concepts
classified to this code (Convention 6.1).

**6.2** In some instances, it is necessary to read *Inclusion* terms in conjunction with code titles. This occurs commonly when the *Inclusion* terms are lists of anatomical sites or pharmacological agents.

It also occurs where terms from a category or code title (such as "Malignant neoplasm of ...", "Injury to ...", "Poisoning by ...") need to be read in conjunction with the *Inclusion* terms (see Example 13).

Example 1	<u>3:</u>
-----------	-----------

Tabular List: Other benign neoplasms of connective and other soft tissue

D21.3 Connective and other soft tissue of thorax

Axilla Diaphragm Great vessels

Rationale: These *Inclusion* terms are sites in the thorax, and are best understood when read in conjunction with

the category and code titles:

• benign neoplasm of connective and/or soft tissue of the:

- axilla
- diaphragm
- great vessels (*Convention* 6.2).

#### 7. INSTRUCTIONAL TERMS/NOTES

<u>Instructional</u> terms/notes appear throughout the Tabular List:

<u>Chapter level</u> — Applies to the codes classified to the chapter.

<u>First level (block)</u> — Applies to the codes classified to the block.

<u>Second level (category)</u> — Applies to the codes classified to the category.

<u>Third level</u> (subcategory/code) — Applies to the subcategory/code.

<u>Instructional</u> terms/notes are listed in the following order:

**Glossary description** 

<u>Includes</u>

<u>Note</u>

See

Code first, Code also, Use additional code

**Excludes** 

#### 7.1 Glossary description

The *Glossary description* is a formal statement of the meaning of a term or code. It describes the content of a block, category or code. The *Glossary description* may contain outdated (historical) terminology and descriptions, and is not intended for use by clinical coders.

#### Note(s)

2. In Chapter 5 Mental and behavioural disorders (F00–F99), Glossary descriptions are sourced from ICD-10 Classification of Mental and Behavioural Disorders: Clinical Descriptions and Diagnostic Guidelines (CDDG) (also known as the 'Blue Book') and listed because the terminology of mental health conditions varies greatly, particularly between different countries, and the same term may be used to describe different conditions.

#### 7.2 Includes

The *Includes* note further defines the content of a chapter, block, category or subcategory/code. They are general diagnostic descriptions common to various levels throughout the Tabular List (see *Examples* 14 and 15).

*Includes terms are not normally indexed.* 

Example 14:

Tabular List: C50 Malignant neoplasm of breast

**Includes:** connective tissue of breast

Rationale: This *Includes* note further defines the content of the category (ie 'malignant neoplasm of connective

tissue of the breast' is classified to category C50) (Convention 7.2).

Example 15:

Tabular List: 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

**Rationale:** This *Includes* note further defines the content of the chapter (ie the scope of conditions classified to

Chapter 16) (Convention 7.2).

#### **7.3 Note**

**7.3.1** The *Note* clarifies the use of a code or codes in a block, category or subcategory/code (see Example 16).

Example 16:

Tabular List: **DERMATITIS AND ECZEMA** 

(L20-L30)

**Note:** In this block the terms dermatitis and eczema are used synonymously and interchangeably.

**Rationale:** This *Note* clarifies the use of the terms 'dermatitis' and 'eczema' in block L20–L30

(*Convention* 7.3.1).

**7.3.2** The *Note* may further define certain terms used in block, category or code descriptions (see Example 17).

Example 17:

Tabular List: ISCHAEMIC HEART DISEASES

(120-125)

Note: For morbidity, duration as used in categories I21, I22, I24 and I25 refers to the interval

elapsing between onset of the ischaemic episode and admission to care. For mortality,

duration refers to the interval elapsing between onset and death.

Rationale: This *Note* further defines the term 'duration' used in block I20–I25 (*Convention* 7.3.2).

#### **7.4 See**

The term *see* is used as a cross-reference to another section of the classification or the Alphabetic Index. Follow the cross-reference to ensure correct code selection (see *Examples* 18 and 19).

#### Note(s)

3. Cross-references may include terms that are not subterms, such as 'by site' or 'by type' (see Example 19).

Example 18:	
Tabular List:	K26 Duodenal ulcer
	See subdivisions
Rationale:	The term <i>see</i> is used here as a cross-reference to the fourth character subdivisions for category K26
	(Convention 7.4).

Example 19: Tabular List:	C08 Malignant neoplasm of other and unspecified major salivary glands
	Excludes: malignant neoplasms of:
	<del></del>
	• specified minor salivary glands — see Alphabetic Index:
	<u>Neoplasm/by site/malignant</u>
<b>Rationale:</b>	The term see is used here as a cross-reference to the Alphabetic Index (Convention 7.4).
	The term 'by site' in the cross-reference is not a subterm at the lead term <i>Neoplasm</i> ( <i>Note</i> 3).

#### 7.5 Code first, Code also, Use additional code

#### 7.5.1 Code first

The *Code first* note assists with code sequencing where multiple codes are required to classify a clinical concept (see Example 20).

#### Example 20:

Tabular List: S91.81 Open wound (of any part of ankle and foot) communicating with a fracture

Code first the fracture (S82.-, S92.-).

Rationale: This Code first note indicates that a fracture code from category S82 or S92 is assigned and

sequenced before S91.81 (Convention 7.5.1).

#### 7.5.2 Code also, Use additional code, Use additional external cause code

The Code also/Use additional code/Use additional external cause code notes indicate that multiple codes are required, **if applicable** or **if known**, to fully describe a clinical concept.

The *Code also* note is used to indicate that an additional code is required, usually to identify the underlying condition (see Example 21).

The *Use additional code* and *Use additional external cause code* notes are used to identify a code that adds specificity (see Example 22).

#### Example 21:

Tabular List: S22.5 Flail chest

Code also:

• rib fractures (S22.4-). • sternal fracture (S22.2).

Rationale: This *Code also* note indicates that multiple codes are required to fully describe the clinical concept

(ie an additional code is required, to identify rib fractures and/or sternum fracture as the

underlying cause of flail chest, if applicable or if known) (*Convention* 7.5.2).

Example 22:

Tabular List: K25 Gastric ulcer

*Use additional code (B96.81) to identify Helicobacter pylori.* 

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

**Rationale:** These *Use additional* notes indicate that multiple codes may be required to fully describe the

clinical concept (ie an additional code (for Helicobacter pylori and/or an external cause) is

assigned to add specificity to a code from category K25) (Convention 7.5.2).

#### 7.6 Excludes

**7.6.1** Excludes notes are listed at the chapter, block, category and subcategory/code level. Some are a guide to redirect clinical coders from an incorrect code to a correct code (see Example 23), and some support mortality (single condition) coding. Occasionally, an *Excludes* note will advise the clinical coder to 'omit code' (ie do not assign the code).

#### Example 23:

Patient was admitted with intussusception of the appendix.

Tabular List: K56.1 Intussusception

<u>Intussusception or invagination of:</u>

• bowel

• colon

• intestine

• rectum

**Excludes:** intussusception of appendix (K38.8)

Assign: K38.8 Other specified diseases of appendix

**Rationale:** This *Excludes* note redirects from K56.1 to K38.8, which is the correct code for intussusception of

the appendix (Convention 7.6.1).

7.6.2 Application of an Excludes note may result in a code for one of the clinical concepts in a causal relationship not being assigned. Assign multiple codes for both a condition and its underlying cause in accordance with ACS 0001 Principal diagnosis/3. Problems and underlying conditions/3.2. Coding the problem as the principal diagnosis or ACS 0002 Additional diagnoses/3. Other guidelines related to additional diagnosis criteria/3.1 Problems and underlying conditions (see Example 24) (see also Convention 2.3).

#### Example 24:

Patient was admitted for treatment of osteoporosis due to vitamin D deficiency.

Tabular List: Vitamin D deficiency

**Excludes:** adult osteomalacia (M83.-)

osteoporosis (M80–M81)

sequelae of rickets (E64.3)

Assign: M81.99 Unspecified osteoporosis, site unspecified

E55.9 Vitamin D deficiency, unspecified

Rationale: M81.99 — ACS 0001 Principal diagnosis, for the problem being treated

E55.9 — ACS 0001 Principal diagnosis, for the underlying condition

Both codes are assigned to identify the clinical concepts in the causal relationship. Application of

the Excludes note at E55.9 would result in the code for the underlying cause (vitamin D

deficiency) not being assigned (Conventions 2.3 and 7.6.2).

#### 8. PUNCTUATION AND SYMBOLS

#### 8.1 Parentheses ( )

**8.1.1** Parentheses are used to enclose nonessential modifiers (NEM), which are supplementary terms that follow a diagnostic term, but **do not affect** the code to which it is assigned (see Example 25).

Example 25:

Tabular List:

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

...

Rationale: Parentheses are used here to enclose nonessential modifiers chronic and interstitial, which do not affect code assignment (Convention 8.1.1).

**8.1.2** Parentheses are used to enclose code(s) in *Excludes* notes and other *Instructional* terms/notes (see Example 26).

Example 26:

Tabular List:

J02.8 Acute pharyngitis due to other specified organisms

Use additional code (B95-B97) to identify infectious agent.

Excludes: pharyngitis (due to):

enteroviral vesicular (B08.5)

herpesviral [herpes simplex] (B00.2)

infectious mononucleosis (B27.-)

influenza virus:

identified (J09, J10.1)

not identified (J11.1)

Parentheses are used here to enclose codes in the Use additional code note and Excludes note

(Convention 8.1.2).

**8.1.3** Parentheses are used to enclose the ranges of three character codes in chapter or block headings (see Example 27).

Example 27:
Tabular List: CHAPTER 9

DISEASES OF THE CIRCULATORY SYSTEM
(100–199)
HYPERTENSIVE DISEASES
(110–115)

Rationale: Parentheses are used here to enclose the ranges of three character codes in Chapter 9 and block

110–115 (Convention 8.1.3 and Note 1).

**8.1.4** Parentheses are used to enclose the dagger code in an asterisk category or the asterisk code following a dagger term (see Example 28).

Example 28:

Tabular List: A32.1† Listerial meningitis and meningoencephalitis

Listerial:

• meningitis (G01\*)

• meningoencephalitis (G05.0\*)

G01\* Meningitis in bacterial diseases classified elsewhere

Meningitis (in):

• anthrax (A22.8†)

• gonococcal (A54.8†)

• leptospirosis (A27.-†)

• listerial (A32.1†)

...

**Rationale:** Parentheses are used here to enclose the dagger codes in an asterisk category and the asterisk codes

following dagger terms (ie to identify the asterisk codes that are assigned with A32.1† and the

dagger codes that are assigned with G01\*) (Convention 8.1.4).

#### 8.2 Square brackets [ ]

**8.2.1** Square brackets are used to enclose synonyms or alternate terms (see Example 29).

Example 29:

Tabular List: **A30** Leprosy [Hansen's disease]

Rationale: Square brackets are used here to enclose the synonymous or alternate term for 'leprosy'

(Convention 8.2.1).

**8.2.2** Square brackets are used to enclose explanatory terms (see Example 30).

Example 30:

Tabular List: S06.02 Loss of consciousness of brief duration [less than 30 minutes]

**Rationale:** Square brackets are used here to enclose the explanatory term for duration (*Convention* 8.2.2).

**8.2.3** Square brackets are used to enclose abbreviations (see Example 31).

Example 31:

Tabular List: HUMAN IMMUNODEFICIENCY VIRUS [HIV] DISEASE

(B20-B24)

**Rationale:** Square brackets are used here to enclose the abbreviation for human immunodeficiency virus

(Convention 8.2.3).

**8.2.4** Square brackets are used to enclose valid characters (see Example 32).

Example 32:

Tabular List: M19.0 Primary arthrosis of other joints

[1-4, 7-9] Primary arthrosis NOS

**Rationale:** Square brackets are used here to enclose the valid characters to assign with M19.0

(Convention 8.2.4).

#### **8.3 Colon:**

**8.3.1** A colon is used in *Inclusion* terms when the terms preceding the colon require one or more modifiers (qualifying terms) for assignment to the rubric (see Example 33).

Example 33:	
Tabular List:	K36 Other appendicitis
	Appendicitis:  • chronic  • recurrent
Rationale:	A colon is used in this <i>Inclusion</i> term as the term preceding the colon (appendicitis) requires one or
	more modifiers (chronic or recurrent) for assignment to the rubric (K36) (Convention 8.3.1).

**8.3.2** Colons are also used to avoid repetition of terms (see Example 34).

#### Example 34: Tabular List: Q22.6 Hypoplastic right heart syndrome hypoplasia of: Includes: • pulmonary: • artery • valve • tricuspid valve underdevelopment of right ventricle Rationale: Colons are used in this *Includes* note to avoid repetition of the terms 'hypoplasia of' and 'pulmonary', and to separate 'Includes' from the diagnostic terms that follow (Conventions 8.3.2 and 8.3.3).

**8.3.3** Colons are used to separate certain *Instructional* terms/notes (ie *Includes* note, *Note*, *Code also*, *Excludes* note), and the diagnostic terms that follow (see Example 34).

#### **8.4 Special symbols (annotations)**

The following symbols are used in the Tabular List:

- † or † The dagger symbol denotes a code describing the aetiology or underlying cause of a condition and is always assigned with a manifestation (\*) code.
- The asterisk symbol denotes a code describing the manifestation of a condition and is always assigned with an aetiology  $(\dagger / \dagger)$  code.
- This symbol denotes that an Australian Coding Standard applies to a code or group of codes (category or block) and therefore, reference to the standard is essential before the code is assigned. The standard number is shown under or beside the symbol.
- This symbol denotes an Australian code.

#### 9. SPECIAL TERMINOLOGY

#### **9.1 NOS**

NOS is an abbreviation of 'not otherwise specified', meaning 'unspecified' or 'unqualified' (see Example 35).

Example 35:	
Tabular List:	A04.9 Bacterial intestinal infection, unspecified
	Bacterial enteritis NOS
<b>Rationale:</b>	NOS here means unspecified or unqualified bacterial enteritis (Convention 9.1).

#### 9.2 Not elsewhere classified (NEC)

9.2.1 The term 'not elsewhere classified' in code titles indicate that certain specified variants of that condition are classified in other parts of ICD-10-AM (see Example 36).

Example 36:

Tabular List: E21.1 Secondary hyperparathyroidism, not elsewhere classified

**Excludes:** secondary hyperparathyroidism of renal origin (N25.8)

Rationale: The term 'not elsewhere classified' is used in the code title here to indicate that specified variants

of secondary hyperparathyroidism are classified in other parts of ICD-10-AM

(Convention 9.2.1).

**9.2.2** The abbreviation 'NEC' is used in the Tabular List in *Inclusion* terms and *Instructional notes*. NEC code options are only assigned when there is insufficient information to assign the clinical concept to a more specific code (see *Examples* 37–39).

Example 37:

Tabular List: B17.8 Other specified acute viral hepatitis

Hepatitis non-A non-B (acute)(viral) NEC

Rationale: NEC is used here to indicate that B17.8 is only assigned when there is insufficient information to

assign a more specific viral hepatitis code (ie to indicate that specified variants of hepatitis are

classified in other parts of ICD-10-AM) (Convention 9.2.2).

Example 38:

Tabular List: K45 Other abdominal hernia

**Includes:** hernia:

• abdominal, specified site NEC

<u>...</u>

**Rationale:** NEC is used in the *Includes* note here to indicate that a code from category K45 is only assigned

when there is insufficient information to assign a more specific code (ie to indicate that specified

variants (sites) of abdominal hernia are classified in other parts of ICD-10-AM)

(Convention 9.2.2).

Example 39:

<u>Tabular List:</u> O99.8 Other specified diseases and conditions in pregnancy, childbirth and the

<u>puerperium</u>

**Excludes:** acute kidney failure in the puerperium (O90.4)

kidney disorders in pregnancy, childbirth and the

puerperium NEC (O26.81)

<u>...</u>

**Rationale:** NEC is used in the *Excludes* note here to indicate that O99.8 is only assigned when there is

<u>insufficient information to assign a more specific code (ie to indicate that specified variants of kidney disorders in pregnancy, childbirth and the puerperium are classified in other parts of the control of the con</u>

ICD-10-AM) (Convention 9.2.2).

#### Note(s)

4. Sometimes an unqualified term is 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 (see Example 40).

These inbuilt assumptions must to be taken into account in order to avoid incorrect classification. A review of *Inclusion* terms will indicate where an assumption of cause has been made. Clinical coders must not assign an unspecified code unless there is no information available that would permit a more specific assignment elsewhere.

Example 40:

Index: Stenosis

- mitral (chronic) (inactive) (valve) 105.0

Tabular List: Rheumatic mitral valve diseases

*Includes:* conditions classifiable to I05.0 and I05.2–I05.9, whether specified as

rheumatic or not

**Excludes:** when specified as nonrheumatic (I34.-)

105.0 Mitral stenosis

Rationale: Mitral stenosis (NOS) is classified by default as 'rheumatic mitral stenosis' unless another cause is

specified (Note 4).

#### 9.3 'AND' in code titles

The term 'and' in code titles means 'and/or' (see Example 41).

Example 41:

Tabular List: A18.0† Tuberculosis of bones and joints

**Rationale:** In this code title, 'and' means 'tuberculosis of bones and/or joints' (ie A18.0 classifies

'tuberculosis of bones', 'tuberculosis of joints', 'tuberculosis of bones and joints')

(Convention 9.3).

#### 9.4 'Male' and 'female' codes

A patient's sex is based on their sex characteristics such as their chromosomes, hormones and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or infancy, the patient's reported sex may change over the course of a patient's lifetime (ABS 2020).

In contrast to sex, gender is a social and cultural concept relating to social and cultural differences. Sex and gender are often used interchangeably however they are two distinct concepts (ABS 2020).

For classifying concepts in the ICD-10-AM, codes using the terms male or female are assigned based on the sex characteristics documented in the health care record regardless of how the patient reports their sex. This may include sex characteristics that are surgically created, such as anatomical features of the male or female reproductive systems.

#### 9.5 Causal relationship terminology

In clinical terminology, use of certain terms may infer a relationship between two concepts relating to time, sequence of events, co-occurrence, or cause and effect. There may be ambiguity in the exact relationship between these concepts when these connecting terms or phrases are used.

The World Health Organization guidelines for ICD-11 state that causal relationships should be specified with terminology that indicates a cause and effect relationship such as 'due to' or similar (WHO 2024).

- **9.5.1** Connecting terms such as 'secondary to', 'due to' or 'as a result of' (or similar or synonymous terms or phrases) infer a cause and effect relationship between a condition and:
  - another condition or
  - an external cause such as:
    - an adverse effect of drugs or substances
    - · an unintentional event
    - another complication of a healthcare intervention
    - other injury mechanisms

(see Example 42).

9.5.2 Connecting terms such as 'following', 'post' or 'after' (written or implied by similar terms) infer a temporal relationship (relating to time) or sequence of events, or co-occurrence of concepts (see Example 42).
Relationship terms such as 'associated with', 'postprocedural' or 'related' (written or implied by similar terms) are ambiguous and depending on the context may infer a relationship relating to timing, sequence of events, coexistence or cause and effect.

#### **9.5.3** A causation relationship is clearly established where:

- the causal relationship is stated by the clinician or
- the clinical diagnosis or context/event clearly infers an exclusive causation relationship (that is the complication would not have occurred in the absence of the causing condition or external causes such as an intervention complication) (see Examples 42–45) or
- the classification links two concepts by the Alphabetic Index (see Conventions used in the
   ICD-10-AM Alphabetic Index/10. Special Terminology), an Australian Coding Standard or by National Coding
   Advice.
- **9.5.4** Where the cause of a condition is multifactorial or ambiguous, a causal relationship cannot be assumed. Where there is no explicit causal link stated or provided by the Alphabetic Index, look for supplementary wording or other information to provide contextual clarification (see Example 46).

#### Example 42:

<u>Patient was admitted with shoulder pain following laparoscopy and insertion of intrauterine device. The clinician confirmed that the shoulder pain was from the laparoscopy.</u>

Assign: Principal diagnosis: Pain due to a procedure

Additional diagnoses: External cause and place of occurrence codes

Rationale: A temporal relationship between the shoulder pain and the two interventions is stated in the first

sentence (that is use of the term 'following'), which does not clearly establish a causal relationship (*Convention* 9.5.2).

A causal relationship between the shoulder pain and the laparoscopy is clearly stated in the second sentence (ie use of the term 'from') (*Conventions* 9.5.1 and 9.5.3).

#### Example 43:

Patient was admitted with an infection of hand at site of burn injury seven days prior.

Assign: Principal diagnosis: Burn of hand

Additional diagnoses: Per cent of body surface area

Post traumatic wound infection

External cause and place of occurrence codes

Rationale: A causal relationship between the infection and the hand burn is inferred by the clinical context

(ie the infection would not have occurred in the absence of the burn) (Convention 9.5.3).

#### Example 44:

Patient was admitted with a postoperative haematoma at the incision site, five days after a total knee replacement.

Assign: Principal diagnosis: Haematoma at incision site

Additional diagnoses: External cause and place of occurrence codes

Rationale: A causal relationship between the haematoma at the incision site and the joint replacement is clearly

inferred by the clinical context (ie the incision site haematoma would not have occurred in the

absence of the joint replacement procedure) (Convention 9.5.3).

#### Example 45:

Patient was admitted following a motorcycle accident for an urgent exploratory laparotomy and splenectomy due to splenic rupture. A sponge was identified as missing during the postsurgical count. The wound was reopened, and the sponge removed.

Assign: Principal diagnosis: Splenic rupture

Additional diagnoses: Foreign body accidently left in body cavity or operation wound

External cause and place of occurrence codes

Rationale: A causal relationship between the foreign body and the unintentional event is clearly inferred by the

clinical context (ie the foreign body would not have occurred if the procedure had not been

performed) (Convention 9.5.3).

#### Example 46:

Patient was admitted with a catheter associated urinary tract infection (UTI). No further information was available in the health care record.

Assign: Principal diagnosis: Urinary tract infection

Additional diagnoses: Nil

Rationale: A causal relationship between the UTI and the catheter cannot be assumed by use of the term

'catheter associated' and there is no causal link provided by the Alphabetic Index. There must be

cause and effect relationship context or terminology documented by the clinician

(*Convention* 9.5.4).

#### 10. RESIDUAL ('OTHER' AND 'UNSPECIFIED') CODES

**10.1** Residual codes are assigned for conditions that are specifically indexed to those codes.

#### **10.2** At the fourth character level:

- 0–7 classify specific conditions
- 8 classifies specific conditions that are not elsewhere classified (the 'other' category)
- 9 classifies **unspecified** conditions

(see Example 47).

#### Note(s)

5. In Chapter 2 Neoplasms (C00–D48), fourth character .8 is often used for 'overlapping' lesions.

6. In Chapter 19 *Injury*, *poisoning and certain other consequences of external causes (S00–T98)*, fourth character .7 is often used for 'multiple' injuries.

Example 47:		
Tabular List:	L50	<u>Urticaria</u>
	<u>L50.0</u>	Allergic urticaria
		<u></u>
	<u>L50.1</u>	Idiopathic urticaria
	<u>L50.2</u>	Urticaria due to cold and heat
	<u>L50.3</u>	Dermatographic urticaria
	<u>L50.4</u>	Vibratory urticaria
	L50.5	Cholinergic urticaria

	<u>L50.6</u> <u>L50.8</u>	Contact urticaria Other urticaria
Rationale:	<u>L50.8</u> — fourth	Urticaria, unspecified  fourth character codes classifying specified types of urticaria  character code classifying specified types of urticaria not elsewhere classified  character code classifying unspecified urticaria  10.2)

10.3 Occasionally, both 'other' and 'unspecified' conditions are classified to the same code (see Examples 48 and 49).

Example 48:	
Tabular List:	B67.9 Echinococcosis, other and unspecified
Rationale:	B67.9 — classifies both 'specified types of echinococcosis not elsewhere classified' and
	'unspecified echinococcosis' (Convention 10.3)

Example 49:	
Tabular List:	I44.3 Other and unspecified atrioventricular block
Rationale:	I44.3 — classifies both 'specified types of atrioventricular block not classified elsewhere' and
	'unspecified atrioventricular block' (Convention 10.3)

- **10.4** The fifth character level is a subclassification of the fourth character level. At the fifth character level (usually):
  - 0 classifies **unspecified** conditions
  - 1-8 classify specific conditions
  - 9 classifies specific conditions that are not classified elsewhere (the 'other' category) (see Example 50).

Example 50:		
Tabular List:	G47	Sleep disorders
		<u></u>
	<u>G47.3</u>	Sleep apnoea
		<u></u>
	<u>G47.30</u>	Sleep apnoea, unspecified
	<u>G47.31</u>	Central sleep apnoea syndrome
		<u></u>
	<u>G47.32</u>	Obstructive sleep apnoea syndrome
	G47.33	Sleep hypoventilation syndrome
	<u>047.55</u>	
	G47.39	Other sleep apnoea
D-4'1	_ <del></del>	
Rationale:	G47.30 — fifth	character code classifying unspecified sleep apnoea
	G47.31-G47.33	— fifth character codes classifying <b>specified</b> types of sleep apnoea
	G47.39 — fifth	character code classifying <b>specified</b> types of sleep apnoea <b>not classified elsewhere</b>
	(Convention	

**10.5 Do not** assign a residual code without first referencing the Alphabetic Index to locate the correct code. **Do not** browse the Tabular List (see *Guidance in the use of ICD-10-AM*).

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#### **GUIDANCE IN THE USE OF ICD-10-AM**

The main aim of clinical coding (clinical classification) is:

To classify clinical concepts into code.

Clinical concepts in ICD-10-AM include:

- · diseases
- symptoms
- injuries, poisonings, and/or adverse effects
- procedural complications of surgical and medical care

*Note:* ICD-10-AM also classifies external causes of morbidity and mortality (see Chapter 20), and factors influencing health status and contact with health services (see Chapter 21).

Originally designed to provide access to information contained in the health care records for research, education, and administration, coded data are now also utilised to facilitate payment of health services, determine utilisation patterns and evaluate the appropriateness of health care costs. Coded data also provide the basis for epidemiological studies and research into the quality of health care and patient safety.

The classification of clinical concepts and/or entities into code is a complex activity. Because coded data are used in so many areas, it is essential that classification is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of health care services.

In order to classify accurately, it is essential to have a working knowledge of medical science 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 clinical classification requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are all consulted before a code is assigned.

There are several steps in classifying diseases and the following is a simple guide intended to assist clinical coders (and the occasional user) of ICD-10-AM.

1. Identify in the current episode of admitted care, the concept requiring classification.

Avoid indiscriminate coding of irrelevant information, such as symptoms or signs characteristic of the diagnosis (see also *General standards for <u>ICD-10-AM-diseases</u>*).

**Note:** Certain symptoms represent important problems in medical care in their own right and may at times require code assignment (see also the *Instructional* note at the beginning of Chapter 18 *Symptoms*, *signs* and abnormal clinical and laboratory findings, not elsewhere classified (R00–R99)).

2. Locate the lead term in the appropriate section of the Alphabetic Index.

The lead term is usually a noun, but may be an adjective or eponym, identifying the pathological condition or injury:

- Follow any *Instructional* terms/notes(s) that appear under the lead term
- Note any terms enclosed in parentheses (<u>ie</u> nonessential modifiers; they do not affect code assignment), as well
  as any terms indented under the lead term (<u>ie</u> subterms; these essential modifiers may affect code assignment),
  until the clinical concept has been accounted for
- Follow carefully any cross\_references (see and see also).

**Note:** A code in the Alphabetic Index with a dash in the fourth or fifth position identifies that a fourth or fifth character is required for a valid code. The additional characters are located in the Tabular List.

- 3. Refer to the Tabular List to verify the suitability of the code selected. 
  Be guided by any *Inclusion* terms and *Instructional* terms/notes (such as *Includes* and *Excludes* notes, *Code also*, *Use additional code*) at the selected code, or at the chapter, block or category level.
- Be guided by any *Instructional* notes (eg '*Inclusion*' terms, '*Includes*' and '*Excludes*' notes, '*Code also*', '*Use additional code*') at the selected code, or at the chapter, block or category level.
- 4. Refer to the Australian Coding Standards:
  - First, refer to ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses*, and other *General standards for ICD-10-AMdiseases*
  - Refer to the Specialty standards for multiple or unspecified diagnoses and interventions
  - Refer to any other Specialty standards, as indicated by an ACS symbol (▼) in the Tabular List.
- 5. Refer to National Coding Advice, as appropriate.
- 6. Refer also to jurisdictional requirements, as appropriate.
- 7. Assign the code.

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## 2. ICD-10-AM Alphabetic Index

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#### Conventions of used in the ICD-10-AM Alphabetic Index

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- <u>2</u> <u>Structure</u>
- <u>Aetiology and manifestation convention (the 'dagger and asterisk' system)</u>
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#### **ICD-10-AM ALPHABETIC INDEX**

Section I: Alphabetic index of diseases and nature of injury

Section II: External causes of injury
Section III: Table of drugs and chemicals

#### **USING ICD-10-AM**

#### CONVENTIONS OF USED IN THE ICD-10-AM ALPHABETIC INDEX

#### 1. SECTIONS

The Alphabetic Index is arranged in three sections:

- Section I Alphabetic index of diseases and nature of injury lists all the terms classifiable to Chapters 1–19 and Chapters 21–22, except drugs and chemicals.
- Section II External causes of injury lists all the terms classifiable to Chapter 20, except drugs and chemicals.
- Section III Table of drugs and chemicals lists poisoning and/or adverse effects of substances classifiable to Chapters 19–20.

#### 2. STRUCTURE

#### 2.1 Lead terms

The Alphabetic Index is organised by 'lead terms', in **bold** typeface.

**2.1.1** Lead terms start at the extreme left of a column, with dashes used to indicate levels of indentation for subterms (modifiers). Therefore, a complete index term may be composed of several lines, which may be widely separated (see Example 1).

Example 1:	
Index:	Ectasia, ectasis
	- aorta (see also Aneurysm/aorta) 171.9
	- breast N60.4
	- capillary 178.8
	- cornea H18.7
	- gastric antral vascular (GAVE) K31.81
	with haemorrhage K31.82
Rationale:	Ectasia, ectasis is the lead term here. The complete index term for the last line is 'gastric antral
	vascular ectasia with haemorrhage' (Convention 2.1.1).

**2.1.2** Lead terms mainly identify the name of a disease or pathological condition, rather than the anatomic site involved (see Example 2).

Example 2: Tuberculosis of	the abdomen.
Index:	Tuberculosis, tubercular, tuberculous (caseous) (degeneration)  (gangrene) (necrosis) A16.9  - abdomen (lymph gland) A18.3
Rationale:	The lead term <i>Tuberculosis, tubercular, tuberculous</i> identifies the name of a disease ( <i>Convention</i> 2.1.2).

**2.1.3** An anatomical site is occasionally indexed as a lead term, when it is part of the name of a disease. This applies mainly to Latin expressions for some conditions (see Example 3).

Abdomen, abdominal — see also condition
<u>- acute R10.0</u>
<u>- apron E65</u>
<u>Cor</u>
<u>- biloculare Q20.89</u>

**Rationale:** Abdomen, abdominal and Cor (Latin) are anatomical sites that are lead terms, as they are part of the name of a disease (Convention 2.1.3).

#### 2.2 Subterms

- **2.2.1** Subterms (modifiers) (ie terms indented beneath lead terms) refer to:
  - varieties of a condition
  - anatomical sites affected by a condition
  - circumstances that affect the coding of a condition.

An index entry may list the adjectival or noun form of a condition, or both. If only the noun form is listed, the clinical coder must make the necessary translation.

As it is not feasible to index a complete list of the various combinations of subterms that apply to a lead term, some types of subterms have priority over others (see also *Convention 5*. *Sequence of terms and spelling*) (see Example 4).

- 2.2.2 Essential modifiers are subterms that affect the code selection. These subterms form individual line entries.

  The selection of a subterm representing a clinical concept must be supported by clinical documentation (such as selection of the subterm 'congenital' evidenced by documentation that a condition was present at birth) (see Example 4).
- **2.2.3 Nonessential modifiers** are terms in parentheses following a lead term or subterm. They **do not affect** code selection (see Example 4).

	(bee Example 1).
Example 4:	
Index:	Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9
	- abdominopelvic K65.3
	- tuberculous — see Tuberculosis/abscess
Rationale:	The lead term Abscess lists subterms that are:
	• essential modifiers for anatomical sites (eg 'abdominopelvic') and varieties of the condition
	(eg 'tuberculous') (Conventions 2.2.1 and 2.2.2)
	• nonessential modifiers ('embolic', 'infective', 'metastatic', 'multiple', 'pyogenic', 'septic')
	that do not affect code assignment (see Convention 2.2.3).
	The subterm 'tuberculous' is listed once only under the lead term Abscess, rather than listing under
	each anatomical site, as tuberculous abscesses are not classified to Abscess/by site, but to codes
	for tuberculosis of these sites.

#### 2.3 Terms in Section I Alphabetic index of diseases and nature of injury

Subterms are listed in Section I for varieties of a condition (such as congenital, infectious, malignant), anatomical site, or circumstances that affect the coding of a condition (such as traumatic, pregnancy, newborn).

Section I also includes lead terms and subterms to classify circumstances where a patient may encounter health services but was not necessarily ill or for health status (ie codes in Chapter 21 *Factors influencing health status and contact with health services (Z00–Z99)*). These terms indicate the type of problem or circumstances of the encounter (see *Note* 1).

#### Note(s)

- 1. Key terms in Section I that indicate the type of problem, or circumstances of the encounter include:
  - counselling
  - discord
  - · examination
  - history
  - · lack of
  - observation
  - pregnancy
  - problem
  - · screening
  - status
  - vaccination.

#### 2.4 Terms in Section II External causes of injury

Section II lists all the terms classifiable to Chapter 20 External causes of morbidity and mortality (U50–U73, V00–Y98), except drugs and chemicals.

#### Note(s)

- 2. Key lead terms in Section II include:
  - · accident
  - activity
  - assault
  - burn, burned, burning
  - complication(s) (of surgical and medical interventions)
  - contact
  - legal intervention
  - place of occurrence of external cause
  - sequelae
  - suicide
  - unintentional events
  - war operations.
- 3. In both Sections I and II, the key terms listed in *Convention* 2.3, and *Notes* 1 and 2 may be used instead of, or in addition to the standard indexing 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.

For example, obstetric complications, are indexed under the specific condition (such as <u>Haemorrhage/complicating/delivery</u>) or listed under the lead terms <u>Labour</u>, <u>Pregnancy</u>, <u>Puerperal</u> or <u>Maternal</u> condition, affecting fetus or newborn.

#### 2.5 Terms in Section III Table of drugs and chemicals

Section III lists generic names for drugs and chemicals as essential modifiers, in alphabetic order (see also *Convention* 8.1 and Example 22). Some brand names are also listed as nonessential modifiers.

#### 2.6 Tables in the Alphabetic Index

The Alphabetic Index presents indexed terms in the following five tables:

- Table of complications of abortion see Section I Abortion/complicated
- Table of neoplasms see Section I Neoplasm, neoplastic
- Table of land transport accidents see Section II Accident/transport/land
- Table of discharges of firearm see Section II *Discharge*
- Section III Table of drugs and chemicals.

# 3. AETIOLOGY AND MANIFESTATION CONVENTION (THE 'DAGGER AND ASTERISK' SYSTEM)

Where a condition is indexed using the aetiology and manifestation convention:

- assign code combinations as specified by the discrete code ranges listed in the Tabular List (see Example 5) or as per the Alphabetic Index (see Example 6)
- sequence codes in accordance with ACS 0001 Principal diagnosis/2. Aetiology and manifestation convention (the 'dagger and asterisk' system), if one of the conditions meets the principal diagnosis definition.

See also Conventions used in the ICD-10-AM Tabular List/3. Aetiology and manifestation convention (the 'dagger and asterisk' system),

Example 5:	
Index:	Syndrome NEC (see also Disease) U91
	- brain stem stroke I67.9† G46.3*
Tabular List:	G46.3* Brain stem stroke syndrome (I60–I67†)
Rationale:	'Brain stem stroke syndrome' is indexed with I67.9† listed as the default dagger code. However,
	G46.3* may be assigned with any of the codes from the discrete code range I60–I67† listed in
	the Tabular List (Convention 3).

Example 6:		
Index:	Anaemia D64.9	
	- Diphyllobothrium (Dibothriocephalus) B70.0† D63*	
	<u>- due to</u>	
	myxoedema E03.9† D63*	
	- hookworm B76.9† D63*	
	- malarial (see also Malaria) B54† D63*	
	Syphilis, syphilitic	
	- anaemia (late) A52.7† D63*	
Tabular List:	D63* Anaemia in chronic diseases classified elsewhere	
Rationale:	D63* does not list a range of applicable dagger codes in the Tabular List. Therefore,	
	dagger/asterisk combinations are assigned by following the Alphabetic Index (Convention 3).	

#### 4. COMBINATION CODES

A combination code is a single code used to classify two diagnoses or a diagnosis with a manifestation or an associated complication. Combination codes are identified by referring to subterm entries in the Alphabetic Index and by reading the *Inclusion* terms and *Excludes* notes in the Tabular List (see Example 7).

Example 7:  Influenza with pneumonia.	
Index:	Pneumonia (acute) (double) (migratory) (purulent) (septic) (unresolved) J18.9
	- with influenza virus (not identified) J11.0
Assign:	J11.0 Influenza with pneumonia, virus not identified
Rationale:	J11.0 — for multiple diagnoses (pneumonia and influenza) represented by a single code, linked
	by following the Alphabetic Index: Pneumonia/with/influenza virus (Convention 4)

#### 5. SEQUENCE OF TERMS AND SPELLING

#### **5.1 Sequence**

**5.1.1** Lead terms are sequenced alphabetically (see Example 8).

```
Example 8:
Index:
Aarskog's syndrome Q87.19
Abandoned procedure, after initiation Z53.3
Abandonment T74.0
Abasia (-astasia) (hysterical) F44.4
Abdomen, abdominal — see also condition

Rationale:
Lead terms are sequenced alphabetically (Convention 5.1.1).
```

**5.1.2** Spaces and numbers precede alphabetic sequence. Numbers (Arabic or Roman) are sequenced numerically **before** alphabetic characters (see Example 9).

Example 9:	
Index:	Preterm (infant) NEC P07.50
	- 35 completed weeks P07.58 - 36 completed weeks P07.59 - extreme NEC P07.40 - less than 22 completed weeks P07.41
Rationale:	Numbers precede alphabetic sequence (Convention 5.1.2).

#### 5.1.3 Prepositional terms

Where a preposition from the list below immediately follows a lead term or subterm, it takes precedence over symbols, numbers and the alphabetic sequence of subterms:

- as
- by
- for
- with (see Examples 10 and 11)
- without.

Example 10:	
Index:	Accessory (congenital)
	- chromosome(s) (nonsex) NEC Q92.9
	with complex rearrangements NEC Q92.5
	<u> seen only at prometaphase Q92.4</u>
	<u> 13 — see Trisomy/13</u>
	<u> 18 — see Trisomy/18</u>
	<u> 21 — see Trisomy/21</u>
	<u> partial Q92.9</u>
	<u>sex</u>
	<u> female phenotype Q97.8</u>
	<u> male phenotype Q98.8</u>
Rationale:	Prepositional term 'with' takes precedence over numbers and alphabetic sequence of subterms
	(Convention 5.1.3).

#### Example 11:

Index: 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 K65.3

- - wall L02.2

- abdominopelvic K65.3

**Rationale:** Prepositional term 'with' takes precedence over numbers and alphabetic sequence of subterms

(Convention 5.1.3). Therefore, 'abdominopelvic abscess with diverticular disease' is classified by following the Alphabetic Index: Diverticula/intestine, not to K65.3.

**5.1.4** When multiple prepositional terms are listed, they are sequenced in alphabetic order (see Example 12).

# Example 12: Index: Diabetes, diabetic (controlled) (mellitus) (without complication) E1-.9 - for stabilisation E1-.65 - with - - abnormal sweating (gustatory) E1-.43 Rationale: Multiple prepositional terms are sequenced in alphabetic order (Convention 5.1.4).

#### 5.2 Spelling

The spelling conventions in ICD-10-AM comply with the *Macquarie Dictionary* Ninth Edition (2023). Australian-English spelling of medical terms is used. Terms appear in alphabetical order according to the preferred Australian spelling.

#### 6. CODE NUMBERS

- **6.1** The code numbers that follow the terms in the Alphabetic Index are the three, four or five character codes/categories to which the clinical concepts are classified in the Tabular List (see Example 13).
- **6.2** In some cases, the fourth or fifth character is replaced by a dash. The dash at the fourth or fifth character position indicates that an additional character is required for a valid code. The additional characters are located either in a *Note* in the Alphabetic Index or by reference to the Tabular List (see *Examples* 13 and 14).

#### Example 13:

Index:

Burn (electricity) (flame) (hot gas, liquid or object) (steam) (thermal) T30.0

Note: The following fourth character subdivisions are for use with categories T20–T25 and T30:

- .0 unspecified thickness
- .1 erythema

First degree

.2 partial thickness [blisters, epidermal loss]

Second degree

.3 full thickness

Deep necrosis of underlying tissue

Third degree

The following fifth character subdivisions are for use with category T21:

- 0 unspecified
- <u>1</u> breast
- 2 chest wall
- 3 abdominal wall
- 4 back [any part]
- 5 genitalia [external]
- 9 other and multiple sites of trunk

The following fifth character subdivisions are for use with category T22:

- 0 unspecified
- <u>1</u> <u>forearm and elbow</u>
- 2 upper arm and shoulder region

<u>...</u>

- ankle (and foot) T25.-
- extent (per cent of body surface)
- - 9 per cent or less T31.00
- - 10-19 per cent T31.1-

Rationale:

T30.0, T31.00 — valid fourth and fifth character codes to which the clinical concepts are classified (*Convention* 6.1)

<u>T25.-, T31.1- — the dash indicates that an additional character is required for a valid code, located in the Note in the Alphabetic Index (Convention 6.2)</u>

#### Example 14:

Tabular:

T31

Burns classified according to extent of body surface involved

**▼**1911

*Note:* This category must be used as a supplementary code with categories T20–T25, T29.

The following fifth character subdivisions are for use with subcategories T31.0–T31.9 to indicate the per cent of body surface with full thickness burn. Valid fifth characters are in [brackets] under each code:

- 0 0–9 per cent or unspecified full thickness burns
- □ 1 10–19 per cent full thickness burns
- 2 20–29 per cent full thickness burns
- 3 30−39 per cent full thickness burns
- ◆ 4 40–49 per cent full thickness burns
- 5 50–59 per cent full thickness burns
- **○** 6 60–69 per cent full thickness burns

7 70–79 per cent full thickness burns
 8 80–89 per cent full thickness burns
 9 90 per cent or more of body surface full thickness burns
 Rationale: Fifth characters for subcategories T31.0–T31.9 are located in the Tabular List (Convention 6.2).

- **6.3** Common fourth characters for a category may be listed in a table (eg *Table of complications of abortion*).
- **6.4** A complication or main manifestation may be listed in the index with a cross-reference to a category or block, with specification of the fourth or fifth character (see Example 15).

Example 15:	
Index:	Syndrome NEC (see also Disease) U91
	<u>- dependence — code to F10–F19 with fourth character .2</u>
Rationale:	'Dependence syndrome' is listed in the index with a cross-reference to block F10-F19 Mental and
	behavioural disorders due to psychoactive substance use, with fourth character .2
	(Convention 6.4).

#### 7. INSTRUCTIONAL TERMS/NOTES

<u>Instructional</u> terms are listed in the Alphabetic Index to avoid unnecessary duplication of indexed terms by providing a cross-reference to alternate lead terms or subterms, or directly to the Tabular List. Slashes are used to separate lead terms and subterms in cross-references.

A Note in the Alphabetic Index provides instruction to assist with code assignment.

#### Note(s)

4. Cross-references may include terms that are not subterms, such as 'by site' or 'by type'.

#### 7.1 See, see also and see condition

The terms *see* and *see also* are cross-references to alternate modifiers for a term or its synonyms.

#### 7.1.1 See

The term *see* is used as a cross-reference, to compel code selection from alternate indexed terms (see Example 16).

Example 16:	
Index:	Haemorrhage, haemorrhagic R58
	- bronchus — see Haemorrhage/lung
Rationale:	The term see is used as a cross-reference, to compel code selection to alternate indexed terms
	(Convention 7.1.1).

#### **7.1.2 See also**

The term *see also* is used as a cross-reference to alternate indexed terms, where there are options that may provide more specificity (see Example 17).

Example 17:	
Index:	Paralysis, paralytic (complete) (incomplete) (syndrome) (see also Paresis) G83.9
	- shaking (see also Parkinsonism) G20
Rationale:	The term see also is used as a cross-reference to alternate indexed terms, where there are options
	that may provide more specificity (Convention 7.1.2).

# 7.1.3 See condition

The term *see condition* is an explicit directive, mainly used with anatomical sites and general adjectival modifiers, to compel code selection from alternate indexed terms (see Example 18).

Example 18:	
Assign:	Bladder — see condition
	<u>Macrocytic</u> — see condition
Rationale:	The see condition note at the lead term Bladder is an explicit directive, to compel code selection
	from alternate indexed terms (ie away from this anatomical term to index terms for a
	'bladder condition') (Convention 7.1.3).
	The term see condition at the lead term Macrocytic is an explicit directive, to compel code
	selection from alternate indexed terms (ie away from this general adjectival modifier to
	index terms for a condition described as 'macrocytic' such as Anaemia/macrocytic)
	(Convention 7.1.3).

# 7.2 Code to

The term *code to* is used as a cross-reference to the Tabular List, where code assignment is determined from a specific block or category (see Example 19).

Example 19:	
Index:	<u>Dependence</u>
	- syndrome — code to F10–F19 with fourth character .2
Rationale:	The term code to is used as a cross-reference to the Tabular List, where code assignment is
	determined from the three character codes in block F10-F19 Mental and behavioural
	disorders due to psychoactive substance use, with fourth character .2 (Convention 7.2).

# **7.3 Note**

**7.3.1** The *Note* clarifies the use of or further defines a lead term or subterm entry.

Example 20:		
Index:	Complication(s) (due to surgical or medical care) (from) (of)	
	- postprocedural	
	Note: Subterms listed under	
	Complication(s)/postprocedural are	
	considered an obvious result of a	
	specific or broader group of clinical	
	interventions where the causal	
	(cause and effect) relationship can be	
	assumed.	
	Do not follow the subterm	
	postprocedural where a different cause	
	for the condition is documented in the	
	health care record.	
Rationale:	This Note further defines and clarifies the use of the terms Complication(s)/postprocedural for	
	conditions that are linked via the Alphabetic Index (Convention 8).	

**7.3.2** The *Note* may list fourth or fifth characters, applicable to codes indexed with a dash (see *Convention* 6.2 and Example 13).

#### 8. PUNCTUATION AND SYMBOLS

# 8.1 Parentheses ()

Parentheses are used to enclose:

- nonessential modifiers (NEM) (see Examples 21, 23 and 24)
- brand names in the *Table of drugs and chemicals* (see Example 22)
- morphology codes (see Example 23)
- cross-references (see Example 21)
- expanded abbreviations (see Example 24).

#### Example 21:

Index: Kyphoscoliosis, kyphoscoliotic (acquired) (see also Scoliosis) M41.9-

**Rationale:** Parentheses are used to enclose the NEM and cross-reference (*Convention* 8.1).

#### Example 22:

Index: Sildenafil (Viagra)

**Rationale:** Parentheses are used to enclose the brand name (*Convention* 8.1).

#### Example 23:

Index: Adenomyoma (atypical polypoid) (M8932/0) — see also Neoplasm/benign

**Rationale:** Parentheses are used to enclose the NEM and morphology code (*Convention* 8.1).

#### Example 24:

Index: HELLP (haemolysis, elevated liver enzymes and low platelet count)

syndrome (with severe pre-eclampsia) O14.2

**Rationale:** Parentheses are used to enclose the NEM and expanded abbreviation (*Convention* 8.1).

#### 8.2 Special symbols (annotations)

The following symbols are used in the Alphabetic Index:

- † The dagger symbol denotes a code describing the aetiology or underlying cause of a condition and is always assigned with an appropriate manifestation (\*) code
- \* The asterisk symbol denotes a code describing the manifestation of a condition and is always assigned with an appropriate aetiology (†) code
- #/\ldots These symbols are attached to certain subterms (sites) in the *Table of neoplasms* to refer to *Notes* 3 and 4, respectively, at the beginning of the table.

# 9. SPECIAL TERMINOLOGY

# 9.1 In (due to)

The indexing of a condition with the subterm *in (due to)* implies a cause and effect relationship between two conditions. Even though 'in' is a preposition, it is not one of the prepositional subterms listed in the *Conventions used in the ICD-10-AM Alphabetic Index* (and therefore does not take precedence over other terms).

Where the Alphabetic Index links two conditions using the subterm *in (due to)*, follow this index entry except where another definitive cause for the condition is indicated in the health care record (see Example 25).

Example 25: Pyelonephritis with sepsis.	
Index:	Pyelonephritis (see also Nephritis/tubulo-interstitial) N12
	<u>- in (due to)</u> sepsis (septicaemia) NEC ( <i>see also Sepsis/by type</i> ) A41.9† N16.0*
Assign:	A41.9 Sepsis, unspecified
	N16.0 Renal tubulo-interstitial disorders in infectious and parasitic diseases classified
	<u>elsewhere</u>
Rationale:	A41.9, N16.0 — the subterm 'in (due to)' here implies a cause and effect relationship between
	pyelonephritis and sepsis. Follow this index entry except where another definitive cause for
	the condition is indicated in the health care record ( <i>Convention</i> 9.1)

#### Note(s)

- 5. The classification of diabetes mellitus is governed by the *Directives* in ACS 0401 *Diabetes mellitus and intermediate hyperglycaemia* see 1. *General classification principles* and in particular *Directive* 1.3.
- 6. See also ACS Chapter 15 *Pregnancy*, *childbirth and the puerperium* for classification *Directives* regarding conditions in (due to) pregnancy, childbirth and the puerperium.

# 9.2 Certain conditions where the classification links a condition and an intervention

For certain conditions the classification links the condition to an intervention. The cause and effect relationship is implied when:

- the Alphabetic Index lists a condition (complication) with an essential modifier that specifies the intervention causing the complication (see Example 26) or
- subterms listed under *Complication(s)/postprocedural* **or**
- Directives in a specialty ACS or National Coding Advice.

*Note:* The classification links the following specific interventions and conditions:

- · haemodialysis-associated steal syndrome
- peritoneal dialysis-associated peritonitis
- transfusion-related acute lung injury
- ventilation-associated pneumonia.

Where the Alphabetic Index links a condition and an intervention as described above, follow the Alphabetic Index unless a different cause for the condition is documented in the health care record.

Example 26:	
Index:	Complication(s)
	fracture, bone, post insertion of orthopaedic implant, joint prosthesis or bone plate M96.6
	<u></u>
	- gastrostomy leak (exit site) NEC K91.43
	<u></u>
	- lymphoedema
	postmastectomy (syndrome) 197.2
	postradiation therapy
	scoliosis M96.5

Rationale:	Where the Alphabetic Index links a condition and an intervention as described above, follow the
	Alphabetic Index unless a different cause for the condition is documented in the health care record
	(Convention 9.2).

# **9.3 NEC**

The abbreviation 'NEC' (not elsewhere classified) is used in the Alphabetic Index after terms classified to residual (other and unspecified) codes, and to terms that are ill-defined, as a warning that specified forms of the conditions are classified differently. If the health care record includes more precise information, code assignment must be modified accordingly (see Example 27).

Example 27:	
Index:	Anomaly, anomalous (congenital) (unspecified type) Q89.9
	- aorta (arch) NEC Q25.40
	Atresia, atretic
	- aorta (arch) (ring) Q25.2
Tabular:	Q25.2 Atresia of aorta
	Q25.40 Congenital malformation of aorta, unspecified
Rationale:	NEC is used at Anomaly, anomalous/aorta, which is classified to a residual (unspecified) code,
	as a warning that specified forms of the condition are classified differently (such as Q25.2
	Atresia of aorta (a specified form of aortic anomaly)) (Convention 9.3).

# 9.4 Eponyms

Eponyms are conditions named after people and are listed in the Alphabetic Index as lead terms, and as subterms to other lead terms (such as, *Disease*, *Syndrome*) (see Example 28).

Example 28:	
Index:	Kaschin-Beck disease M12.1-
	Syndrome NEC (see also Disease) U91
	- Arnold-Chiari Q07.0
Rationale:	'Kaschin-Beck disease' is an eponym listed as a lead term and 'Arnold-Chiari' is an eponym
	listed as a subterm (Convention 9.4).

# 9.5 'Male' and 'female' codes

A patient's sex is based on their sex characteristics such as their chromosomes, hormones and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or infancy, the patient's reported sex may change over the course of a patient's lifetime (ABS 2020).

In contrast to sex, gender is a social and cultural concept relating to social and cultural differences. Sex and gender are often used interchangeably however they are two distinct concepts (ABS 2020).

For classifying concepts in the ICD-10-AM, codes using the terms male or female are assigned based on the sex characteristics documented in the health care record regardless of how the patient reports their sex. This may include sex characteristics that are surgically created, such as anatomical features of the male or female reproductive systems.

# 10. RESIDUAL ('OTHER' AND 'UNSPECIFIED') CODES

<u>Do not assign a residual code without first referencing the Alphabetic Index to locate the correct code (see Guidance in the use of ICD-10-AM).</u>

When a clinician uses terminology that is not listed in the Alphabetic Index, seek clarification for alternate indexed terms. If no alternate description is provided, utilise one of the following strategies:

- follow the Alphabetic Index at *Disease*, diseased/by site (see Example 29) or
- assign a code for the 'default' listed in the Alphabetic Index (see Example 30).

# Example 29: Polyp of the oesophagus. Index: Disease, diseased - oesophagus -- specified NEC K22.8 Assign: K22.8 Other specified diseases of oesophagus Rationale: K22.8— for polyp of the oesophagus, by following the Alphabetic Index at Disease, diseased/by site (ie Disease/oesophagus/specified NEC), as the term 'oesophagus' is not listed as a subterm under the lead term Polyp (Convention 10)

Example 30:	
Subluxed catara	<u>ict.</u>
Index:	Cataract (cortical) (immature) (incipient) (intumescent) (white) (see also Cataracta) H26.9
Assign:	H26.9 Cataract, unspecified
<b>Rationale:</b>	H26.9 — for subluxed cataract, for the 'default' listed at the lead term Cataract, as the term
	'subluxed' is not listed as a subterm under the lead term Cataract (Convention 10)

# 3. ACHI Tabular List

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# **USING ACHI**

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#### Guidance in the use of ACHI

. . .

#### **USING ACHI**

# **CONVENTIONS USED IN ACHI TABULAR LIST**

# 1. FORMAT

## 1.1 First level - anatomical site axis

The ACHI Tabular List is structured with a principal axis of anatomical site. Within each chapter the anatomical site is structured by a 'superior' to 'inferior' (head-to-toe) approach.

# 1.2 Second level – intervention type axis

The secondary axis is intervention type, beginning with the least invasive intervention through to the most invasive intervention. Standardised interventional axes are:

Examination

Application, Insertion, Removal

**Incision** 

**Destruction** 

**Excision** 

Reduction (only applicable to Chapter 15 Procedures on Musculoskeletal system)

**Repair** 

Reconstruction

Revision

**Reoperation** 

Other procedures

# 1.3 Third level - block axis

ACHI is structured on an anatomical basis, therefore code numbers (particularly those based on MBS item numbers) do not always appear in numerical order within the Tabular List. Therefore, a third level axis, called a **block**, is utilised. Blocks are numbered sequentially in the Tabular List to assist in locating a specific code and have titles that relate to the codes contained within the block.

#### 1.3.1. Black reverse text boxes

<u>Black reverse text boxes are used for all block numbers (see Example 1).</u> They are **not valid** codes and **cannot** be <u>assigned.</u>

#### Example 1:

Tabular List: 1340 Caesarean section

Rationale: Black reverse text box for the block number (*Convention* 1.3.1).

## Exception(s)

- 1. There are certain chapters that are exceptions to the general format:
  - Chapter 6 Dental services

This chapter is based on 'The Australian Schedule of Dental Services and Glossary, Thirteenth Edition' (Australian Dental Association 2022).

This chapter is structured on a service basis (eg diagnostic services, preventative services, periodontics, oral surgery). Secondary axes, in most instances, relate to intervention type.

• Chapter 14 Obstetric procedures

This chapter has a principal axis relating to the pregnancy cycle (eg antepartum procedures, procedures associated with labour, delivery procedures). Secondary axes relate to intervention type.

• Chapter 18 Radiation oncology procedures

This chapter has a principal axis relating to radiation oncology interventions. Secondary axes relate to the type of radiation (eg external beam therapy, brachytherapy, computerised planning).

• Chapter 19 Interventions not elsewhere classified

This chapter has a principal axis relating to the purpose of the intervention (eg diagnostic, therapeutic or administrative/clinical/client support and interventions not elsewhere classified). Secondary axes relate 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*.

• Chapter 20 Imaging services

This chapter has a principal axis relating to the imaging intervention performed (eg ultrasound, tomography, radiography). There is no secondary axis.

• Chapter 21 Codes for special purposes

This chapter has a principal axis relating to new or emerging health technologies and emergency use. There is no secondary axis.

# 2. INCLUSION TERMS

*Inclusion* terms are the interventional terms listed under a block heading, *Glossary description* or code. Their purpose is to demonstrate examples of interventions classified to the block or code. They may refer to different interventions, or synonyms, but they are not a subclassification.

*Inclusion* terms are listed primarily as a **guide to the content** of the block or code. Many of the items listed relate to important or common terms classified to the block or code. Others are interventions or sites, listed to distinguish the boundary between one code and another. *Inclusion* terms are indexed.

**2.1 Do not** use *Inclusion* terms to code directly from the Tabular List as they are **not exhaustive**. Reference first the Alphabetic Index, as it contains many more interventional terms than the Tabular List (see Example 2).

#### Example 2:

Tabular List: 90064-01 Refractive keratoplasty

<u>Keratomileusis</u> Thermokeratoplasty

Rationale: 'Keratomileusis' and 'Thermokeratoplasty' are interventions classified to 90064-01 [173]. These

Inclusion terms are not exhaustive and the Alphabetic Index contains other interventional terms

classified to this code (*Convention* 2.1).

**2.2** In some instances, it is necessary to read *Inclusion* terms in conjunction with block or code titles. This usually occurs when the *Inclusion* terms are lists of anatomical sites or pharmacological agents.

It also occurs where terms from the block or code title need to be read in conjunction with the *Inclusion* terms (see Example 3).

**Example 3:** 

Tabular List: 1920 Administration of pharmacotherapy

-02 anti-infective agent

Antibiotic
Antifungal
Antiprotozoal
Antiviral

Rationale: These Inclusion terms are anti-infective pharmacological agents, and are best understood when read

in conjunction with the block title (Convention 2.2):

Administration of:

• antibacterial agent

• antibiotic agent

· antifungal agent

• antiprotozoal agent

• antiviral agent.

# 3. INSTRUCTIONAL TERMS/NOTES

*Instructional* terms/notes appear throughout the Tabular List:

<u>Chapter level</u> – Applies to the codes classified to the chapter

First level (anatomical site axis) — Applies to the codes classified to the anatomical site

Second level (intervention type axis) — Applies to the codes classified to the intervention type

<u>Third level</u> (block axis) — Applies to the codes grouped under the block heading

Fourth level (code) — Applies to the code

*Instructional* terms/notes are listed in the following order:

**Glossary description** 

**Includes** 

Note

Code first, Code also, Code also when performed

**Excludes** 

See (within other *Instructional* notes)

# 3.1 Glossary description

The *Glossary description* is a formal statement of the meaning of a term or code. It describes the content of a chapter, block or code, or intervention type. The *Glossary description* may contain outdated (historical) terminology and descriptions and are not intended for use by clinical coders.

# 3.2 Includes

3.2.1 The *Includes* note further defines the content of a chapter, site, intervention type, block or code. They refer to intervention components or equipment/technique used, that are inherent in the interventions classified to a block or code (see *Examples* 4 and 5).

Includes terms are not normally indexed.

Example 4:

Tabular List: 36503-00 Kidney transplantation

Includes: vascular anastomosis

**Rationale:** This *Includes* note refers to a component of the intervention (*Convention* 3.2.1).

Example 5:

Tabular List: 41867-01 Reoperation arytenoidectomy

*Includes:* that by laser

**Rationale:** This *Includes* note refers to equipment/technique used in the intervention (*Convention* 3.2.1).

**3.2.2** The *Includes* note may further define a site (see Example 6).

Example 6:

Tabular List: Other procedures on external ear

Includes: auricle

external auditory canal

**Rationale:** This *Includes* note further defines the site of 'external ear' as 'auricle' and 'external auditory canal'

(Convention 3.2.2).

# **3.3 Note**

**3.3.1** The *Note* clarifies the use of a code or codes in a block. In some instances, the *Note* provides an example of a diagnosis for which the intervention may be performed but is not exhaustive (see Example 7).

Example 7:

Tabular List: 39806-00 Clipping of intracranial proximal artery

*Note:* Performed for aneurysm or arteriovenous malformation

Rationale: This *Note* provides examples of diagnoses for which the intervention may be performed (*Convention 3.3.1*).

3.3.2 The Note may further define certain terms used in code or block descriptions (see Example 8).

Example 8:

Tabular List: 712 Arterial bypass [grafting] using synthetic material

*Note:* Synthetic material – can include polyester (woven or knitted) or

polytetrafluoroethylene [PTFE] grafts

**Rationale:** This *Note* further defines the term 'synthetic material' used in block [712] (Convention 3.2.2).

#### 3.4 **See**

The term *see* is a cross-reference to another section of the classification or the Alphabetic Index. Follow the cross-reference to ensure correct code selection (see Examples 9 and 10).

#### Note(s)

1. Cross-references may include terms that are not index subterms, such as 'by site' or 'by type'.

Example 9:		
Tabular List:	90011-00	Other diagnostic procedures on spinal canal or spinal cord structures
		Excludes: nonsurgical diagnostic interventions (see Chapter 19)
Rationale:	This see note is	a cross-reference to Chapter 19 for 'nonsurgical diagnostic interventions on spinal
	canal or spinal	cord structures' (Convention 3.4).

Example 10:	
Tabular List:	30224-00 Percutaneous drainage of abscess of soft tissue
	Excludes: that of:
	<u></u>
	• specified sites classified elsewhere — see Alphabetic Index:
	Drainage/abscess/by site
	taran da antara da a
Rationale:	This see note is a cross-reference to the Alphabetic Index for 'percutaneous drainage of abscess of
	soft tissue of specified sites' (Convention 3.4).
	The term 'by site' in the cross-reference is not a subterm at <i>Drainage/abscess</i> ( <i>Note</i> 1).

# 3.5 Code first, Code also, Code also when performed

# 3.5.1 Code first

The *Code first* note assists with sequencing of codes. This note appears at the block or code level to identify codes that *must never* be assigned alone (ie supplementary or flag codes) (see Example 11).

Example 11:	
Tabular List:	1926 Supplementary codes, not elsewhere classified
	<u>Code first:</u> • open surgical procedure(s) performed
Rationale:	This Code first note at the block level identifies that codes from block [1926] must never be assigned alone (ie an open surgical procedure code must be assigned and sequenced before any of the codes from block [1926]) (Convention 3.5.1).

# 3.5.2 Code also and Code also when performed

The *Code also* and *Code also when performed* notes indicate that an additional code is assigned when certain associated interventions are performed, or equipment is used (see Example 12).

Example 12:		
Tabular List:	41548-00	Obliteration of mastoid cavity
		<u>Code also when performed:</u> • meatoplasty (41512-00 [305])
	41512 00	Reconstruction of external auditory canal
Rationale:	This Code als	so when performed note indicates that 41512-00 [305] is assigned when meatoplasty
	is performe	ed with obliteration of the mastoid cavity (Convention 3.5.2).

# 3.6 Excludes

<u>3.6.1 Excludes</u> notes are listed at the chapter, block and code level. Interventions listed in *Excludes* notes are classified elsewhere in ACHI. Codes within the *Excludes* note are ordered sequentially by block number, not in numerical order (see Example 13).

**3.6.2** Five digit codes (stem codes) may be listed in *Excludes* notes with or without their extensions. When stem codes are listed without extensions, the *Excludes* note applies to all the two digit extensions of that code (see Example 13).

Example 13:

Tabular List: 8 Intracranial drainage

**Excludes:** cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])

**Rationale:** This *Excludes* note lists three codes sequentially by block number (*Convention* 3.6.1) and two stem

codes without extensions. 40003 applies to all the two digit extensions to 40003 (-00 to -04) in block [5] and the two digit extensions to 40012 (-00, -01) in block [19] (Convention 3.6.2).

# 4. PUNCTUATION AND SYMBOLS

# 4.1 Parentheses ()

**4.1.1** Parentheses are used to enclose nonessential modifiers (NEM), which are supplementary terms that follow an interventional term, but **do not affect** the code number to which it is assigned (see Example 14).

Example 14:

Assign: 43912-02 Other open excision of bronchus

Excision of (lesion) (tissue) bronchus NEC

**Rationale:** Parentheses are used here to enclose nonessential modifiers (*Convention* 4.1.1).

**4.1.2** Parentheses are used to enclose the code(s) in *Excludes* notes and other *Instructional* terms/notes (see Example 15).

Example 15:

Tabular List: 5 Irrigation, insertion or removal of intracranial cerebrospinal

**fluid shunt** 

<u>Code also when performed:</u>

• neuroendoscopy (40903-00 [1])

Excludes: insertion of external ventricular drain (39015-00 [3])

revision of cerebrospinal fluid shunt (40009-00, 40009-01 [24])

**Rationale:** Parentheses are used here to enclose the codes in the *Code also when performed* note and *Excludes* 

note (Convention 4.1.2).

**4.1.3** Parentheses are used to enclose the range of blocks listed at the beginning of a chapter (see Example 16).

Example 16:

Tabular List: CHAPTER 1

PROCEDURES ON NERVOUS SYSTEM

(BLOCKS 1-86)

**Rationale:** Parentheses are used here to enclose the ranges of blocks at the beginning of Chapter 1

(*Convention* 4.1.3).

# 4.2 Square brackets []

#### **4.2.1** Square brackets are used to enclose synonyms or alternate terms (see Example 17).

Example 17:

Tabular List: 235 Canthoplasty

Includes: excision of tarsal cartilage [tarsectomy]

Rationale: Square brackets are used here to enclose a synonymous or alternate term for 'excision of tarsal

cartilage' (Convention 4.2.1).

**4.2.2** Square brackets are used to enclose explanatory terms (see Example 18).

Example 18:

Tabular List: 90047-00 Aspiration of thyroid

Percutaneous [needle] drainage of thyroid

**Rationale:** Square brackets are used here to enclose the explanatory term 'needle' (*Convention* 4.2.2).

**4.2.3** Square brackets are used to enclose abbreviations (see Example 19).

Example 19:

Tabular List: 57362-00 Computerised tomography of temporo-mandibular joint [TMJ]

**Rationale:** Square brackets are used here to enclose the abbreviation for temporomandibular joint (*Convention* 

4.2.3).

**4.2.4** Square brackets are used to enclose block numbers (see Example 20).

Example 20:

Assign: 90396-00 Excision of lesion of tunica vaginalis

Excludes: excision of hydrocele (30631-00 [1182])

**Rationale:** Square brackets are used here to enclose the block number in the *Excludes* note (*Convention* 4.2.4).

# 4.3 Colon:

**4.3.1** A colon is used in *Inclusion* terms when the terms preceding the colon require one or more modifiers (qualifying terms) for assignment of the code (see Example 21).

Example 21:

Tabular List: 37604-17 Percutaneous aspiration or drainage of scrotum or tunica vaginalis

Percutaneous aspiration of:

• hydrocele

• spermatocele

Tapping of hydrocele

Rationale: A colon is used here to identify that the modifiers (qualifying terms) 'hydrocele' or 'spermatocele'

are required with 'percutaneous aspiration of' for assignment of this code (Convention 4.3.1).

**4.3.2** Colons are also used to avoid repetition of terms (see Example 22).

Example 22:

Tabular List: 37209-00 Radical prostatectomy

Total prostatectomy NOS

*Includes:* excision of:

• seminal vesicles

• vas deferens

**Rationale:** A colon is used here to avoid repetition of the term 'excision of' (*Convention* 4.3.2).

**4.3.3** Colons are also used to separate certain *Inclusion* terms and *Instructional* terms/notes, and the interventional terms that follow (see *Examples* 4 and 5).

# 4.4 Special symbols (annotations)

This symbol denotes that an Australian Coding Standard applies to a code or block(s) and therefore, reference to the standard is essential before the code is assigned. The standard number is shown under or beside the symbol.

# 5. SPECIAL TERMINOLOGY

## **5.1 NOS**

NOS is an abbreviation for 'not otherwise specified', meaning 'unspecified' or 'unqualified' (see Example 23).

Example 23:

Tabular List: 90468-06 Forceps delivery, unspecified

Forceps delivery NOS

**Rationale:** NOS here means unspecified or unqualified forceps delivery (*Convention* 5.1).

# 5.2 Not elsewhere classified (NEC)

**5.2.1** The term 'not elsewhere classified' in a code title indicate that certain specified variants of that intervention are classified to other parts of ACHI (see Example 24).

Example 24:

Tabular List: 43987-02 Excision of neuroblastoma, not elsewhere classified

Excludes: intra-abdominal neuroblastoma (43987-01 [989])

intrathoracic neuroblastoma (43987-00 [563])

Rationale: The term 'not elsewhere classified' is used to indicate that specified variants of excision of

neuroblastoma are classified to other parts of ACHI (Convention 5.2.1).

**5.2.2** The abbreviation 'NEC' is used in *Inclusion* terms and *Instructional terms/notes*. NEC code options are only assigned when there is insufficient information to assign the interventional term to a more specific code (see Example 25).

Example 25:

Tabular List: 90319-04 Other closed procedures on liver

Percutaneous procedures on liver NEC

**Rationale:** NEC is used here to indicate that this code is only assigned when there is insufficient information

to assign a more specific closed (percutaneous) liver procedure code, classified to other parts of

ACHI (Convention 5.2.2).

# 5.3 'AND' or 'OR' in code titles

**5.3.1** The term 'and' in code titles means 'and' (see Example 26).

**5.3.2** The term 'or' in code titles means 'or' (see Example 26).

Example 26:		
Tabular List:	48224-00	Bone graft to radius or ulna
	47393-00	Open reduction of fracture of shaft of radius and ulna
Rationale:	(Convention 47393-00 [14.	35] — 'or' in the code title means 'bone graft to radius' or 'bone graft to ulna' 25.3.1) 31] — 'and' in the code title means 'open reduction of fracture of shaft of radius and ention 5.3.2)

# 5.4 'Male' and 'female' codes

A patient's sex is based on their sex characteristics such as their chromosomes, hormones and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or infancy, the patient's reported sex may change over the course of a patient's lifetime (ABS 2020).

In contrast to sex, gender is a social and cultural concept relating to social and cultural differences. Sex and gender are often used interchangeably however they are two distinct concepts (ABS 2020).

For classifying concepts in ACHI, codes using the terms male or female are assigned based on the sex characteristics documented in the health care record regardless of how the patient reports their sex. This may include sex characteristics that are surgically created, such as anatomical features of the male or female reproductive systems.

# 5.5 Paediatric codes

The term 'paediatric' is used in certain code titles where it is clinically significant to distinguish interventions performed on younger patients.

Generally, 'paediatric' is applied to admitted patients less than 16 years of age, unless the Tabular List or a specific standard indicates otherwise (see Example 27).

Example 27:	
Patient (15 year	rs of age) was admitted and underwent partial oesophageal resection with anastomosis.
Assign:	43906-00 [857] Partial resection of oesophagus with anastomosis, paediatric
Rationale:	As this code uses the term 'paediatric' but does not specify an applicable age, it is assigned when
	the intervention is performed on a patient less than 16 years of age (see Convention 5.5).

#### **GUIDANCE IN THE USE OF ACHI**

The main aim of clinical coding (clinical classification) is:

To classify clinical concepts into code.

Clinical concepts in ACHI are interventions.

Originally designed to provide access to information contained in elinical health care records for research, education and administration, clinical codes are now also utilised to facilitate payment of health services, determine utilisation patterns and evaluate the appropriateness of health care costs. Coded data also provide the basis for epidemiological studies and research into the quality of health care.

The classification of an intervention into code is a complex activity. Because coded data are used in so many areas, it is essential that classification is performed correctly and consistently in order to produce meaningful statistics to aid in the planning of health care needs.

In order to classify accurately, it is essential to have a working knowledge of medical science and to understand the characteristics, terminology and conventions of ACHI. The Alphabetic Index contains many terms not included in the Tabular List, and clinical classification requires that the Alphabetic Index, the Tabular List and the *Australian Coding Standards* are all consulted before a code is assigned.

There are several steps in classifying interventions and the following is a simple guide intended to assist clinical coders (and the occasional user) of ACHI.

- 1. Identify in the current episode of admitted care, the clinical concept requiring classification.
  - Avoid indiscriminate coding of irrelevant information, such as operative approach or procedural components (see also *General standards for <u>ACHI-interventions</u>*).
- 2. Locate the lead term in the appropriate section of the Alphabetic Index.

The lead term is usually a noun, but may be an adjective or eponym, identifying the type of intervention performed:

- Follow any *Instructional* terms/notes(s) that appear under the lead term
- Note any terms enclosed in parentheses (ie nonessential modifiers; they do not affect code assignment), as well as
  any terms indented under the lead term (ie subterms; these essential modifiers may affect code assignment), until
  the clinical concept has been accounted for
- Follow carefully any cross\_references (see and see also).

**Note:** A code in the Alphabetic Index with five digits <u>(stem code)</u> and a block number in parentheses (<u>eg such as 92514 [1910]</u>), requires the addition of a further two digits for a valid code. The additional digits are located in the Tabular List, at the appropriate block.

- 3. Refer to the Tabular List to verify the suitability of the code selected. <u>÷</u> Be guided by any *Inclusion* terms and *Instructional* terms/notes (such as *Includes*, *Excludes*, *Code also*, *Use additional code* notes) at the selected code, or at the chapter or block.
  - Be guided by any *Instructional* notes (eg '*Inclusion*' terms, *Includes* and '*Excludes*' notes, '*Code also*', '*Use additional code*') at the selected code, or at the chapter, block or category heading.
- 4. Refer to the Australian Coding Standards:
  - First, refer to the General standards for <u>ACHI</u> interventions—and ACS 0010 Clinical documentation and general abstraction guidelines
  - Refer to the Specialty standards for multiple or unspecified diagnoses and interventions
  - Refer to any other \*Specialty standards, as indicated by an ACS symbol (▼) in the Tabular List.
- 5. Refer to National Coding Advice, as appropriate.
- 6. Refer also to jurisdictional requirements, as appropriate.
- 7. Assign the code.

# 4. ACHI Alphabetic Index

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#### **ACHI ALPHABETIC INDEX**

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# **USING ACHI**

# CONVENTIONS OF USED IN THE ACHI ALPHABETIC INDEX

# 1. STRUCTURE

# 1.1 Lead terms

The Alphabetic Index is organised by 'lead terms', in **bold** typeface.

1.1.1 Lead terms start at the extreme left of a column, with dashes used to indicate levels of indentation for subterms (modifiers). Therefore, a complete index term may be composed of several lines, which may be widely separated (see Example 1).

Example 1: Index:	Hemicolectomy - left (with anastomosis) 32006-00 [913] with formation of stoma 32006-01 [913] via laparoscopy 32006-03 [913] via laparoscopy 32006-02 [913]
Rationale:	Hemicolectomy is the lead term here. The complete index term for the last line is 'laparoscopic left
	hemicolectomy (with anastomosis)' (Convention 1.1.1).

**1.1.2** Lead terms mainly identify the type of intervention performed, rather than the anatomic site involved (see Example 2).

Example 2:	
Patient was adm	nitted for abdominal wall biopsy.
Index:	Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection) - abdomen wall (open) 30075-17 [988]
Rationale:	The lead term <i>Biopsy</i> identifies a type of intervention ( <i>Convention</i> 1.1.2).

**1.1.3** An anatomical site is occasionally indexed as a lead term, when it is part of the name of an intervention (see Example 3).

Example 3:	
Index:	Cheek lift (bilateral) 45588-00 [1675]
Rationale:	'Cheek' is an anatomical site that is indexed as a lead term, as it is part of the name of an
	intervention (Convention 1.1.3).

# 1.2 Subterms

Subterms (modifiers) (ie terms indented beneath lead terms) refer to:

- anatomical sites applicable to the intervention
- diagnostic terms
- device(s) or (surgical) techniques.

- **1.2.1 Essential modifiers** are subterms that **affect** the code selection. These subterms form individual line entries. The selection of a subterm representing a clinical concept must be supported by clinical documentation (such as 'laparoscopic' evidenced by documentation of the use of ports in the operation report) (see Example 4).
- **1.2.2 Nonessential modifiers** are terms in parentheses following a lead term or subterm. They *do not affect* code selection (see Example 4).

Example 4:	
Assign:	Colpopexy 35597-01 [1285]
	- for stress incontinence (Burch) (with prosthesis) 37044-01 [1110]
	- sacral (with prosthesis) 35597-01 [1285]
	<u> laparoscopic 35597-00 <b>[1285]</b></u>
	<u>- sacrospinous 35568-00 [1285]</u>
	<u>- uterosacral 35568-00 [1285]</u>
Rationale:	The lead term Colpopexy lists subterms that are:
	• essential modifiers for anatomical sites ('sacral', 'sacrospinous', 'uterosacral'), diagnostic
	terms ('stress incontinence') and techniques ('laparoscopic') (Convention 1.2.1)
	• nonessential modifiers ('Burch' and 'with prosthesis') that do not affect code assignment
	(Convention 1.2.2).

# 2. SEQUENCE OF TERMS AND SPELLING

# 2.1 Sequence

**2.1.1** Lead terms are sequenced alphabetically (see Example 5).

Example 5:	
Index:	Abbe procedure
	<u>Abdominoplasty</u>
	ABiC (ab-interno canaloplasty)
	Ab-interno canaloplasty (ABiC)
Rationale:	Lead terms are sequenced alphabetically (Convention 2.1.1).

**2.1.2** Spaces and numbers precede alphabetic sequence. Numbers (Arabic or Roman) are sequenced numerically *before* alphabetic characters (see Example 6).

Example 6:	
Index:	Electroconvulsive therapy (ECT) (unspecified laterality or brevity) 14224-00 [1907]
	- 21 or more treatments 14224-06 [1907] - bilateral 14224-04 [1907]
<b>Rationale:</b>	Numbers precede alphabetic sequence (Convention 2.1.2).

# **2.1.3 Prepositional terms**

- Where a preposition from the list below immediately follows a lead term or subterm, it takes precedence over symbols, numbers and the alphabetic sequence of subterms:
  - as
  - <u>by</u>
  - <u>for</u>
  - with (see Example 7)
  - without
- Where multiple prepositional terms are listed, they are sequenced in alphabetic order (see Example 8).

Example 7:	
Index:	Formation Control of the Control of
	<u>- fistula</u>
	<u> arteriovenous</u>
	<u>with</u>
	<u> graft, vein 34512-00 <b>[765]</b></u>
	<u> prosthesis (Gore-tex) 34512-01 <b>[765]</b></u>
	limb (extremity)
	<u> lower 34509-00 [765]</u>
	<u> upper 34509-01 <b>[765]</b></u>
<b>Rationale:</b>	'Formation of an arteriovenous fistula of the lower limb with vein graft' is classified to
	34512-00 [765], not 34509-00 [765], as the index entries under the prepositional term 'with' take
	precedence over the alphabetic subterm 'limb' (Convention 2.1.3).

Example 8: Index:	<u>Repair</u>
Rationale:	Prepositional terms 'by' and 'with' take precedence over alphabetic sequence of subterms. Multiple prepositional terms are sequenced in alphabetic order ( <i>Convention</i> 2.1.3).

# 2.2 Spelling

The spelling conventions in ACHI comply with the *Macquarie Dictionary* Ninth Edition (2023). Australian-English spelling of medical terms is used. Terms appear in alphabetical order according to the preferred Australian spelling.

# 3. CODE AND BLOCK NUMBERS

# 3.1 Code numbers

The code numbers that follow the terms in the Alphabetic Index are the codes to which the terms are classified in the Tabular List (see also *Convention* 3.2). In some cases, five digit codes (stem codes) are indexed *without* their two digit extensions (see Example 9). When the extensions are not listed, the indexed code applies to **all** the two digit extensions of that stem **code in the cited block.** 

# 3.2 Block numbers

Block numbers in the index appear in bold and are located to the right of the code, separated from the code by square brackets. Use the block number to assist in locating a code in the Tabular List (see Example 9).

Example 9:	
Index:	Pharmacotherapy (systemic effect) 96206 [1920]
	<u>- for</u>
	local effect (open) (percutaneous) (via peripheral arterial or venous catheterisation)
	(see also Administration) 35317-02 [741]
<b>Rationale:</b>	96206 — listed here without a two digit extension, indicating that all the two digit extensions of
	that stem code in block [1920] (-00 to -19) apply (Convention 3.1)
	35317-02 — the (default) code to which 'pharmacotherapy for local effect' is classified
	[741] and [1920] — block numbers, listed to assist in locating the 96206 and 35317-02 in the
	Tabular List (Convention 3.2)

#### 4. INSTRUCTIONAL TERMS/NOTES

<u>Instructional</u> terms are listed in Alphabetic Index to avoid unnecessary duplication of indexed terms by providing a cross-reference to alternate lead terms or subterms, or directly to the Tabular List. Slashes are used to separate lead terms and subterms in cross-references.

A Note in the Alphabetic Index provides instruction to assist with code assignment.

#### Note(s)

1. Cross-references may include terms that are not subterms, such as 'by site' or 'by type' (see Example 12).

# 4.1 See and see also

The terms see and see also provide cross-references to alternate modifiers for a term or its synonyms.

#### 4.1.1 See

The term *see* is a cross-reference with an explicit direction, to compel code selection from alternate indexed terms (see Example 10).

Exam	ple	10:	
	_		

Index: CAT (computerised axial tomography) — see Tomography/computerised

Rationale: The term see is a cross-reference with an explicit direction, to compel code selection from alternate

indexed terms (Convention 4.1.1).

#### 4.1.2 See also

The term *see also* is a cross-reference to alternate indexed terms, where there are options that may provide more specificity (see *Examples* 11 and 12).

#### Example 11:

Index: Adhesiolysis — see also Division/adhesions

- epidural (peridural) 39140-00 [32]

**Rationale:** The term *see also* is a cross-reference to alternate indexed terms where there are options that may

provide more specificity (Convention 4.1.2).

# Example 12:

Index: Radiography (diagnostic) 90909-00 [1988]

- bone — see also Radiography/by specific site

**Rationale:** The term *see also* is a cross-reference to alternate indexed terms where there are options that may

provide more specificity (*Convention* 4.1.2).

The term 'by specific site' in the cross-reference is not a subterm at the lead term Radiography (see

*Note* 1).

#### 4.2 See block

The term see block is a cross-reference that directs to the Tabular List for code selection (see Example 13).

#### Example 13:

Index: Assistance, assisted

- endotracheal respiratory — see block [569]

**Rationale:** The term *see block* is a cross-reference that directs to block [569] *Ventilatory support* in the Tabular

<u>List for code selection</u> (*Convention* 4.2).

# 4.3 Omit code

The term omit code is used with certain interventional terms that are not coded when performed with other interventions (such as intervention components) (see *Examples* 14 and 15).

_		4 4
Exam	nle	4.
LAGIII	DIC	TT.

Index: Arthrotomy (with lavage) 50103-00 [1555]
- as operative approach — omit code

- ankle 49706-00 [1529] - elbow 49100-00 [1410] - hip 49303-00 [1481]

Rationale: The term *omit code* indicates that an arthrotomy code is not assigned when arthrotomy is performed

as the operative approach (Convention 4.3).

Example 15:

Index: Cardioversion 13400-00 [1890]

- in conjunction with cardiac surgery — omit code

Tabular: 13400-00 Cardioversion

**Rationale:** The term *omit code* indicates that 13400-00 [1890] is not assigned when cardioversion is performed

in conjunction with cardiac surgery (Convention 4.3).

# 4.4 Code specific procedure(s) performed

The term *code specific procedure(s) performed* is rarely used in the Alphabetic Index. It is used where it is necessary to code each individual component of an intervention, as they are not specifically listed under the lead term (see Example 16).

#### Example 16:

Index: Amputation

ear — code specific procedure(s) performed
 nose — code specific procedure(s) performed

**Rationale:** The term *code specific procedure(s) performed* is used because it is necessary to code each

individual component of an 'ear amputation' or 'nose amputation' as these interventions are not

listed under the lead term Amputation (Convention 4.4).

#### **4.5 Note**

The *Note* clarifies the use of, or further defines a lead term or subterm (see Example 17).

#### Example 17:

Index: Administration (around) (into) (local) (of) (therapeutic agent)

NEC — code to block [1920] with extension -19

**Note:** Terms listed under the lead term 'Administration' are split by three main subterms; Administration/indication, Administration/specified site and Administration/type of agent.

**Rationale:** This *Note* clarifies the main subterms under the lead term *Administration (Convention* 4.5).

#### 5. PUNCTUATION

# 5.1 Parentheses ()

Parentheses are used to enclose:

- nonessential modifiers (NEM) (see Example 18)
- cross-references (see Example 19)
- expanded abbreviations (see Example 18).

Exam	1	_ *	1 0	
<b>H.Vam</b>	nı	ρ	ıx	•
LAUIII	N.	v.	LU	•

Index: BiPAP (bilevel positive airway pressure) (nonintubated) — see block [570]

**Rationale:** Parentheses are used here to enclose the expanded abbreviation and the nonessential modifier

(Convention 5.1).

Example 19:

Index: Consultation (see also Assessment) 96037-00 [1824]

**Rationale:** Parentheses are used here to enclose the cross-reference (*Convention* 5.1).

# 6. SPECIAL TERMINOLOGY

## **6.1 NEC**

NEC (not elsewhere classified) is listed in the Alphabetic Index after terms classified to nonspecific ('other' or 'unspecified') codes, and to terms that are ill-defined, as a warning that specified types of the intervention are classified differently. If the health care record includes more precise information, modify the coding accordingly (see Example 20).

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Index: Intervention

- adenoids NEC 90146-00 [415]

**Biopsy** (brush) (with brushing(s)) (with washing(s) for specimen collection)

- adenoid 30075-25 [411]

Tabular: 30075-25 Biopsy of tonsils or adenoids

90146-00 Other procedures on tonsils or adenoids

Rationale: NEC is listed at *Intervention/adenoids*, which is classified to a nonspecific code, as a warning that

specified types of the intervention are classified differently (such as 30075-25 [411] *Biopsy of tonsils or adenoids*, a specified type of intervention on the adenoids) (*Convention* 6.1).

# **6.2 Eponyms**

Eponyms are interventions named after people and are listed in the Alphabetic Index as lead terms, and as subterms under the lead term *Procedure* and other lead terms. A description of the intervention or anatomical site affected usually follows the eponym (in parentheses) (see Example 21).

#### Example 21:

Index: Antrostomy

- Caldwell-Luc (external) (radical maxillary antrectomy) (unilateral) 41710-00 [387]

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]

**Rationale:** 'Caldwell-Luc' is an eponym listed as a subterm. The term 'radical maxillary antrectomy' in parentheses describes the intervention (*Convention* 6.2).

'Darrach' is an eponym listed as a lead term and subterm. The term 'osteotomy of ulna' in parentheses describes the intervention and anatomical site (*Convention* 6.2).

# 6.3 'Male' and 'female' codes

A patient's sex is based on their sex characteristics such as their chromosomes, hormones and reproductive organs. While typically based upon the sex characteristics observed and recorded at birth or infancy, the patient's reported sex may change over the course of a patient's lifetime (ABS 2020).

In contrast to sex, gender is a social and cultural concept relating to social and cultural differences. Sex and gender are often used interchangeably however they are two distinct concepts (ABS 2020).

For classifying concepts in ACHI, codes using the terms male or female are assigned based on the sex characteristics documented in the health care record regardless of how the patient reports their sex. This may include sex characteristics that are surgically created, such as anatomical features of the male or female reproductive systems.

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# Standardisation of the ACS

# **Background**

IHACPA has sought to standardise the format and language of the ACS to ensure clarity and consistent application of the guidelines. The first stage was to review, consolidate and eliminate unnecessary or redundant content in standards in Twelfth Edition. The second part of the review, completed in Thirteenth Edition, was to apply a standard template to ensure consistent and clear format, style and language.

# **Benefits**

Benefits of a standardised ACS format and language include:

- enhanced usability by simplification of ACS guidelines with streamlined structure
- improved understanding of the ACS with clear *Directives*, cross references and Examples with *Rationales*
- reduced ambiguity in the examples by promoting consistency in application of the ACS, to ultimately increase coding accuracy
- digital compatibility by organising the content for consistency and compatibility with the digital environment.

The features of the new template include:

- Numbered sections: for structure and ease of referencing
- **Cross references:** to alert users that certain information is in another ACS, and where there are codes included in an Example that are not justified by the *Directives* in the ACS in which they are embedded.
- **Description:** (previously Definition) if an explanation of the topic/subtopic is required to apply the *Directives*.
- **Directive(s):** the main classification points for the standard in a logical sequence, designed to be written in a clear and directive tense.
- **Exception(s):** if required, written in a clear and directive tense.
- Note(s): only if additional clinical or intervention information is required.
- **Example(s):** to demonstrate the application of *Directives* with a *Rationale* to explain the codes assigned and may demonstrate codes assigned that interact with any *Exceptions* or *Notes*.

# Changes to structure of the ACS sections/subsections

The Thirteenth Edition ACS has introduced two new subsections for standards that were previously *General standards* but did not provide guidance on specific diagnoses, interventions or clinical scenarios, or apply to all episodes of care:

- Specialty standards for multiple or unspecified diagnoses and interventions
- Specialty standards for other specified diagnoses and interventions

ACS Twelfth Edition	ACS Thirteenth Edition
General standards for diseases	General standards
	<ul> <li>Subsection: General standards for ICD-10-AM</li> </ul>
General standards for interventions	Subsection: General standards for ACHI
Specialty standards	
	Specialty standards
	<ul> <li>Subsection: Specialty standards for multiple or unspecified diagnoses and interventions</li> </ul>
	<ul> <li>Subsection: Specialty standards for other specified diagnoses and interventions (chapters 1–21)</li> </ul>

# Removal and relocation of ACS content

#### **Clinical Coders' Creed**

The Health Information Management Association of Australia (HIMAA) conducted a public consultation on the Clinical Coding Practice Framework. In response to a recommendation from HIMAA, IHACPA has removed the Clinical Coders' Creed from the ACS appendix as it has been incorporated in the updated framework.

Consequently, Appendix A is now the *Guidelines for formulating clinical documentation queries.* 

Other content has been removed from the ACS for various reasons, including:

- the ACS duplicated content in the classification
- · clinical information detracted from classification guidelines
- the ACS duplicated content relating to standard classification practice guidelines, for example applying *General standards* before *Specialty standards*.

The guidelines for certain ACS have been relocated into the ICD-10-AM or ACHI Tabular Lists or Alphabetic Indices.

# General standards for ICD-10-AM

# 1. Cluster coding

Cluster coding links ICD-10-AM codes using a diagnosis cluster identifier (DCID) to enhance the value of coded data. Codes are considered 'related' when they connect the circumstances of an event or a condition.

At the point of classifying admitted episodes of care, clinical coders apply sequencing to group related concepts. However, this relationship is not explicit, and the sequencing is not always maintained when data is reported nationally. This lack of relationship between ICD-10-AM codes in the national data inhibits meaningful interpretation.

With cluster coding, the relationship between ICD-10-AM codes becomes clearer, which adds meaning and improves the utility of the data.

# **Australian Coding Standards**

# GENERAL STANDARDS FOR ICD-10-AMDISEASES

# 0004 DIAGNOSIS CLUSTER IDENTIFIER (DCID)

For guidance regarding:

- intervention complications see ACS 1904 Complications of surgical or medical care
- external cause, place of occurrence and activity codes see ACS 2001 External cause code use and sequencing.

#### Description(s)

<u>Cluster coding is a mechanism of linking related ICD-10-AM codes through a diagnosis cluster identifier (DCID) to enhance the value of coded data.</u>

The DCID enhances the utility of coded data by identifying and maintaining the link between ICD-10-AM codes assigned within an episode of care as the data is collected, validated, processed and analysed. The improved utility of the coded data benefits research, safety and quality reporting and health service planning.

The diagnosis cluster identifier (DCID) is allocated to each ICD-10-AM code reported within an episode of care.

#### Cluster coding identifies:

- conditions/manifestations assigned with an external cause code, including injuries, complications and adverse effects
- supplementary codes for chronic conditions.

# Table 1: Permissible values — DCID

DCID	Descriptions and Notes
<u>A-ZZ</u>	<u>Diagnosis cluster</u>
	A diagnosis cluster identifies the following:
	• conditions caused by an external cause
	• manifestations, complications or sequelae arising from the external cause

	<ul> <li>codes for the external cause</li> <li>codes from Chapter 21 Factors influencing health status and contact with health services         (Z00-Z99) related to the diagnosis cluster.</li> <li>ICD-10-AM codes allocated the same alphabetic DCID belong to the same diagnosis cluster and this common DCID indicates that they are linked.</li> <li>Characters in the range A-ZZ have no inherent meaning. That is, DCID B does not indicate any significance other than there is an existing DCID A cluster for that episode of care. Clinical coders must ensure that sequential DCID A-ZZ characters are allocated. That is, if there are three diagnosis clusters in an episode of care, only A, B and C are allocated.</li> </ul>
<u>0</u>	Chronic condition cluster  The chronic condition cluster identifies conditions assigned in accordance with ACS 0003  Supplementary codes for chronic conditions.  ICD-10-AM codes with DCID 0 belong to the same cluster (chronic condition) but do not describe the same condition.
8	Code not clustered  DCID 8 represents an ICD-10-AM code that has not been allocated to a diagnosis cluster or chronic condition cluster.
1-7	Cluster not yet designated for use  DCID 1–7 are reserved and may only be allocated upon instruction from the Independent Health and Aged Care Pricing Authority.

#### (AIHW 2024c)

# 1. DCID ALLOCATION

# **Directive(s)**

# Diagnosis cluster (DCID A-ZZ)

#### Allocating codes to a diagnosis cluster

- **1.1** Allocate codes that are assigned with external cause codes:
  - conditions classified to Chapter 19 *Injury, poisoning and certain other consequences of external causes* (S00–T98) (eg injury, complication) (see Examples 2–4, 6, 7 and 9–12)
  - codes Z04.1–Z04.5
  - conditions classified outside Chapter 19 that are assigned with external cause codes (eg adverse effect, sequela) (see Examples 3, 5, 8, 10, 13 and 14).

#### **1.2** Allocate additional codes for:

- a manifestation, complication or sequela arising from the external cause (see Examples 3, 6, 7, 9–11 and 14)
- codes in Chapter 21 Factors influencing health status and contact with health services (Z00–Z99) related to the diagnosis cluster (see Examples 6–8, 10 and 13)
- **1.3** Allocate corresponding external cause, place of occurrence and activity codes for each cluster (see Examples 2–14).

## Allocating DCID values to codes in a diagnosis cluster

- **1.4** Allocate DCID A to all codes in the first cluster (see Examples 2–14)
- **1.5** Allocate DCID A to the cluster that includes the principal diagnosis (see Examples 3–5, 7 and 9–13)

- 1.6 Allocate the next sequential alphabetic DCID value (ie DCID B, C, D etc through to Z, and then AA, AB through to ZZ if required) to subsequent clusters in the same episode of care (see Examples 3–5, 7, 8, 10, 12 and 14). It is not necessary for subsequent clusters to remain in strict alphabetical order (see Example 7).
- **1.7** Allocate the same DCID to all codes within a cluster (see Examples 2–14).
- **1.8 Do not** allocate DCID A–ZZ where it is difficult to decide if a condition is allocated to a diagnosis cluster (see *Directive* 1.10).

# Chronic condition cluster (DCID 0)

**1.9** Allocate DCID 0 **only** to codes from block U78–U88 *Supplementary codes for chronic conditions*, assigned in accordance with ACS 0003 *Supplementary codes for chronic conditions* (see Examples 2, 3, 5–7 and 12).

#### Code not clustered (DCID 8)

- **1.10** Allocate DCID 8 to codes:
  - not allocated to a diagnosis cluster or chronic condition cluster (see Examples 1–3, 5–10 and 12–14) and/or
  - where it is difficult to decide if a condition is allocated to a diagnosis cluster.

# 2. DOUBLE CODING FOR CLUSTERING

# Directive(s)

#### **Multiple events**

- **2.1** Assign a code from the following Chapters **more than once**, only where the same code is allocated in **separate** diagnosis clusters (DCID A–ZZ) in an episode of care:
  - Chapter 19 *Injury, poisoning and certain other consequences of external causes (S00–T98)* (see Examples 4 and 12)
  - Chapter 20 External causes of morbidity and mortality (U50–U73, V00–Y98) (see Examples 5, 7, 8 and 14).
- **2.2** Where codes from Chapters 1–18 and 21 relate to two or more **separate** diagnosis clusters, assign these codes **only once** and:
  - allocate the full code set to the first cluster and
  - allocate the remaining codes to the subsequent cluster(s), in addition to any duplicated Chapter 19 and 20 codes (see Example 8).

#### Single event

**2.3** Do not assign the same code from Chapters 19 or 20 more than once for a bilateral condition arising from a single event (occurring at the same time due to the same external cause) (see Example 3).

*Note:* COF is listed in parentheses before the codes in each example.

#### Example 1:

Patient was admitted for removal of a right occipital lipoma, left occipital lipoma and a mid-scapular lipoma, under general anaesthesia. The morning after surgery, the patient noted severe abdominal pain that had been present for three days prior to admission. A computerised tomography scan showed acute pancreatitis secondary to cholelithiasis with obstruction, requiring emergency laparoscopic cholecystectomy. On day six, the patient was investigated for fever and sent for a chest x-ray, which showed lung consolidation and the patient was diagnosed with hospital acquired pneumonia, with chronic obstructive pulmonary disease exacerbation. The patient was also a current smoker.

#### Assign:

#### **DCID COF**

- 8 (2) D17.0 Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
- 8 (2) D17.1 Benign lipomatous neoplasm of skin and subcutaneous tissue of trunk
- 8 (2) M8850/0 *Lipoma NOS*
- 8 (2) K85.1 Biliary acute pancreatitis
- 8 (2) K80.21 Calculus of gallbladder without cholecystitis, with obstruction
- 8 (1) J18.9 Pneumonia, unspecified
- 8 (2) J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection
- 8 (2) Z72.0 Tobacco use, current

Rationale: DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)

None of the codes in the episode of care are assigned external cause codes or are supplementary codes for chronic conditions.

#### Example 2:

Patient was admitted with acute exacerbation of chronic obstructive pulmonary disease. Before discharge, they had a fall and fractured one rib after losing their balance while walking to the shower. The patient was noted to be a current smoker and had hypertension and osteoarthritis not impacting the episode of care.

# Assign:

#### **DCID COF**

- 8 (2) J44.1 Chronic obstructive pulmonary disease with acute exacerbation, unspecified
- A (1) S22.32 Fracture of one rib, other than first rib
- A (1) W01.2 Fall on same level from stumbling
- A (1) Y92.24 Place of occurrence, health service area, this facility
- A (1) U73.2 While resting, sleeping, eating or engaging in other vital activities
- 8 (2) Z72.0 Tobacco use, current
- 0 (2) U82.3 Supplementary code for hypertension
- 0 (2) U86.2 Supplementary code for arthritis and osteoarthritis [primary]

Rationale: DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)

DCID A — for codes allocated to the first diagnosis cluster (*Directives* 1.1, 1.3, 1.4 and 1.7)

DCID 0 — for codes allocated to the chronic condition cluster (*Directive* 1.9)

#### Example 3:

Patient was admitted with a bilateral fractured subcapital neck of femur and fractured distal radius, after being struck by a car on a pedestrian crossing, while out for a walk. The patient was noted to be under the influence of alcohol. The clinician confirmed acute alcohol intoxication, confirmed on blood test as blood alcohol level 110mg/100ml. During the episode the patient experienced an exacerbation of their chronic obstructive pulmonary disease. The patient was on long term warfarin for atrial fibrillation. On day three the patient was found to be overwarfarinised (INR=6). Vitamin K 5mg was given and warfarin was reduced and INR stabilised. The patient also had chronic osteoarthritis and hypertension not impacting the episode of care.

#### Assign:

D	CT	n	C	OF
יע	$\mathbf{L}$	v		OP.

A	(2)	S72.03	Fracture of subcapital section of femur
A	(2)	S52.50	Fracture of lower end of radius, unspecified
A	(2)	V03.1	Pedestrian injured in collision with car, pick-up truck or van, traffic accident
A	(2)	Y92.49	Place of occurrence, unspecified public highway, street or road
A	(2)	U72	Leisure activity, not elsewhere classified
8	(2)	F10.0	Mental and behavioural disorders due to use of alcohol, acute intoxication
8	(2)	Y90.5	Blood alcohol level of 100-119 mg/100 ml
8	(2)	J44.1	Chronic obstructive pulmonary disease with acute exacerbation, unspecified
В	(1)	R79.83	Abnormal coagulation profile
В	(1)	Y44.2	Anticoagulants causing adverse effects in therapeutic use
<u>B</u>	(1)	Y92.24	Place of occurrence, health service area, this facility
0	(2)	U82.3	Supplementary code for hypertension
0	(2)	U86.2	Supplementary code for arthritis and osteoarthritis [primary]

Rationale: DCID A — for codes allocated to the first diagnosis cluster, including the principal diagnosis (*Directives* 1.1, 1.3–1.5 and 1.7)

DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)

DCID B — for codes allocated to the second diagnosis cluster (*Directives* 1.1. 1.3, 1.6 and 1.7)

S72.03 is not assigned more than once as bilateral fractures occurring in a single event are assigned to the same code and allocated the same DCID (*Directive* 2.3).

F10.0 is not allocated to DCID A as it is not a manifestation, complication or sequela arising from the external cause (*Directive* 1.2).

Y90.5 is not allocated to a diagnosis cluster as it is not an external cause, place of occurrence or activity code (*Directive* 1.3).

DCID 0 — for codes allocated to the chronic condition cluster (*Directive* 1.9)

#### Example 4:

Patient was admitted with bilateral fractures of the distal radius. The patient had fractured the right distal radius, after falling off a ladder while cleaning gutters outside their home. The patient had also fractured their left distal radius, after tripping over on their driveway at home on the way to the hospital.

#### Assign:

#### **DCID COF**

- A (2) S52.50 Fracture of lower end of radius, unspecified
- A (2) W11 Fall on and from ladder
- A (2) Y92.01 Place of occurrence, outdoor areas
- A (2) U73.1 Activity, while engaged in other types of work
- B (2) S52.50 Fracture of lower end of radius, unspecified
- B (2) W01.1 Fall on same level from tripping
- B (2) Y92.00 Place of occurrence, driveway to home
- B (2) U73.89 Other specified activity, not elsewhere classified

Rationale: DCID A — for codes allocated to the first diagnosis cluster, including the principal diagnosis (*Directives* 1.1, 1.3–1.5 and 1.7)

DCID B — for codes allocated to the second diagnosis cluster (*Directives* 1.1, 1.3, 1.6 and 1.7)

S52.50 is assigned more than once as it is classified to Chapter 19 *Injury, poisoning and certain other* consequences of external causes (S00–T98) and is allocated in separate diagnosis clusters (Directive 2.1).

#### Example 5:

Patient was admitted for treatment of contrast induced acute kidney failure. They were also treated for their aspirin-induced gastritis (aspirin taken as prescribed) and hypertension. Their antihypertensive medications were adjusted. The patient also had type 2 diabetes mellitus, a long term history of insulin use, chronic obstructive pulmonary disease and rheumatoid arthritis not impacting the episode of care.

#### Assign:

#### **DCID COF**

- A (2) N17.9 Acute kidney failure, unspecified
- A (2) Y57.5 X-ray contrast media causing adverse effects in therapeutic use
- A (2) Y92.23 Place of occurrence, health service area, not specified as this facility
- 8 (2) E11.29 Type 2 diabetes mellitus with other specified kidney complication
- 8 (2) Z92.22 Personal history of long-term [current] use of insulin
- B (2) K29.60 Other gastritis, without mention of haemorrhage
- B (2) Y45.1 Salicylates causing adverse effects in therapeutic use
- B (2) Y92.23 Place of occurrence, health service area, not specified as this facility
- 8 (2) I10 Essential (primary) hypertension
- 0 (2) U83.2 Supplementary code for chronic obstructive pulmonary disease
- 0 (2) U86.1 Supplementary code for rheumatoid arthritis

Rationale: DCID A — for codes allocated to the first diagnosis cluster, including the principal diagnosis (*Directives* 1.1, 1.3–1.5 and 1.7)

DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)

DCID B — for codes allocated to the second diagnosis cluster (*Directives* 1.1, 1.3, 1.6 and 1.7)

DCID 0 — for codes allocated to the chronic condition cluster (*Directive* 1.9)

Y92.23 is assigned more than once as it is classified to Chapter 20 External causes of morbidity and mortality (U50–U73, V00–Y98) and is allocated in separate diagnosis clusters (Directive 2.1).

#### Example 6:

Patient was admitted for an ulcer and gangrene of the right leg. They were also treated for cellulitis of their left ankle complicating an abrasion at the same site, with post traumatic wound infection (*Staphylococcus aureus*, resistant to dicloxacillin) caused by striking against another object. The patient was also treated for moderate malnutrition. The patient was an ex-smoker. They also had chronic obstructive pulmonary disease and depression not impacting the episode of care.

# Assign:

#### **DCID COF**

8 (	2)	L97.9	Ulcer of low	er limb.	unspecified

- 8 (2) R02 Gangrene, not elsewhere classified
- A (2) L03.13 Cellulitis of lower limb
- A (2) S90.81 Abrasion of ankle and foot
- A (2) T79.3 Post traumatic wound infection, not elsewhere classified
- A (2) B95.6 Staphylococcus aureus as the cause of diseases classified to other chapters
- A (2) Z14.02 Resistance to beta-lactamase resistant [second generation] penicillins
- A (2) W22 Striking against or struck by other object(s)
- A (2) Y92.9 Unspecified place of occurrence
- A (2) U73.9 Unspecified activity
- 8 (2) E44.0 *Moderate protein-energy malnutrition*
- 8 (2) Z86.43 Personal history of tobacco use disorder
- 0 (2) U79.3 Supplementary code for depression
- 0 (2) U83.2 Supplementary code for chronic obstructive pulmonary disease

Rationale: DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)

DCID A — for codes allocated to the first diagnosis cluster, including codes that are manifestations and complications arising from the external cause, and Z14.02 which is in Chapter 21 Factors influencing health status and contact with health services (Z00–Z99) and is related to the diagnosis cluster (Directives 1.1–1.4 and 1.7)

DCID 0 — for codes allocated to the chronic condition cluster (*Directive* 1.9)

#### Example 7:

Patient was admitted for dislocation of hip prosthesis after a fall (slipped on the same level) in their kitchen at home (unspecified activity). During the episode, they also fell when walking to the bathroom (slipped on the same level) which resulted in a lacerated lip. The patient was also treated for unstable type 1 diabetes mellitus. Patient had an episode of ketoacidosis (no coma) due to a broken insulin pump. Patient was a current smoker. The patient had rheumatoid arthritis not impacting the episode of care.

#### Assign:

#### **DCID COF**

- A (2) S73.00 Dislocation of hip, unspecified
- A (2) W01.0 Fall on same level from slipping

<u>A</u>	(2)	Y92.04	Place of occurrence, kitchen			
<u>A</u>	(2)	U73.9	Unspecified activity			
<u>A</u>	(2)	Z96.64	Presence of hip implant			
<u>C</u>	(1)	S01.51	Open wound of lip			
<u>C</u>	(1)	W01.0	Fall on same level from slipping			
C	(1)	Y92.24	Place of occurrence, health service area, this facility			
C	(1)	U73.2	While resting, sleeping, eating or engaging in other vital activities			
8	(2)	E10.65	Type 1 diabetes mellitus with poor control			
<u>B</u>	(2)	T85.69	Mechanical complication of internal devices, implants and grafts, not elsewhere classified			
В	(2)	E10.11	Type 1 diabetes mellitus with ketoacidosis, without coma			
<u>B</u>	(2)	Y82.1	Other and unspecified medical devices associated with unintentional events, therapeutic			
			(nonsurgical) and rehabilitative devices			
<u>B</u>	(2)	Y92.23	Place of occurrence, health service area, not specified as this facility			
8	(2)	Z72.0	Tobacco use, current			
0	(2)	U86.1	Supplementary code for rheumatoid arthritis			
Ration	nale:	DCID A -	— for codes allocated to the first diagnosis cluster, including the principal diagnosis, and			
		<u>Z96.64</u>	which is in Chapter 21 Factors influencing health status and contact with health services			
		<u>(Z00–Z</u>	(99) and is related to the diagnosis cluster ( <i>Directives</i> 1.1–1.5 and 1.7)			
		DCID C -	for codes allocated to the second diagnosis cluster ( <i>Directives</i> 1.1, 1.3, 1.6 and 1.7)			
		DCID 8 –	for codes not allocated to a diagnosis cluster or chronic condition cluster ( <i>Directive</i> 1.10)			
		DCID B -	for codes allocated to the third diagnosis cluster, including E10.11 which is assigned			
		in acco	rdance with ACS 1904 Complications of surgical or medical care for a complication			
		(ketoac	ridosis) arising from the external cause ( <i>Directives</i> 1.1–1.3, 1.6 and 1.7)			
		<u>DCID</u>	0 — for codes allocated to the chronic condition cluster ( <i>Directive</i> 1.9)			
		W01.0 is	assigned more than once as it is classified to Chapter 20 External causes of morbidity and			
	mortality (U50–U73, V00–Y98) and allocated in separate diagnosis clusters (Directive 2.1).					
	It is not necessary for subsequent clusters to remain in strict alphabetical order as long as sequential					
	alphabetic DCID values are allocated (Directive 1.6).					

# Example 8:

Patient was admitted for treatment of epileptic seizures and administered IV carbamazepine. The patient developed pruritis, caused by the carbamazepine, which was ceased. The drug treatment was changed to valproic acid, however the patient again developed pruritis, due to the valproic acid, and this drug was also ceased. During the episode, treatment for folate deficiency anaemia caused by long term use of phenytoin was required.

# Assign:

D	CID COF		
8	(2)	G40.90	Epilepsy, unspecified, without mention of intractable epilepsy
<u>A</u>	(1)	L29.9	Pruritus, unspecified
<u>A</u>	(1)	Y46.4	Iminostilbenes causing adverse effects in therapeutic use
<u>A</u>	(1)	Y92.24	Place of occurrence, health service area, this facility
<u>B</u>	(1)	Y46.5	Valproic acid causing adverse effects in therapeutic use
<u>B</u>	(1)	Y92.24	Place of occurrence, health service area, this facility
<u>C</u>	(2)	D52.1	Drug-induced folate deficiency anaemia
<u>C</u>	(2)	Y46.2	Hydantoin derivatives causing adverse effects in therapeutic use

- C (2) Y92.23 Place of occurrence, health service area, not specified as this facility
- C (2) Z92.28 Personal history of long term [current] use of other medicaments
- Rationale: DCID 8 for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)
  - DCID A for codes allocated to the first diagnosis cluster (*Directives* 1.1, 1.3, 1.4 and 1.7)
  - DCID B for codes allocated to the second diagnosis cluster (*Directives* 1.1, 1.3, 1.6, 1.7 and 2.2)
  - <u>DCID C</u>—for codes allocated to the third diagnosis cluster, including Z92.28 which is in Chapter 21

    <u>Factors influencing health status and contact with health services (Z00–Z99)</u> and is related to the diagnosis cluster (*Directives* 1.1–1.3, 1.6 and 1.7)
  - Y92.24 is assigned more than once as it is classified to Chapter 20 External causes of morbidity and mortality (U50–U73, V00–Y98) and is allocated in separate diagnosis clusters (Directive 2.1).
  - <u>L29.9</u> is not assigned more than once as it is not classified to Chapter 19 *Injury*, *poisoning and certain other* consequences of external causes (S00–T98) or Chapter 20 (Directives 2.1 and 2.2).

#### Example 9:

Patient was admitted in a coma due to accidental overdose of methadone (therapeutic use). During the episode the patient was seen by the drug and alcohol counsellor for their opioid dependence.

#### Assign:

#### **DCID COF**

- A (2) T40.3 Poisoning by methadone
- A (2) R40.2 Coma
- A (2) X42 Accidental poisoning by and exposure to narcotics and psychodysleptics [hallucinogens], not elsewhere classified
- A (2) Y92.9 Unspecified place of occurrence
- A (2) U73.9 Unspecified activity
- 8 (2) F11.2 Mental and behavioural disorders due to use of opioids, dependence syndrome
- Rationale: DCID A for codes allocated to the first diagnosis cluster, including the principal diagnosis, and

  R40.2 which is assigned in accordance with ACS 1901 Poisoning by drugs for a manifestation (coma) arising from the external cause (Directives 1.1–1.5 and 1.7)
  - DCID 8 for codes not allocated to a diagnosis cluster or chronic condition cluster (*Directive* 1.10)
  - F11.2 is not allocated to DCID A as it is not a manifestation or complication arising from the external cause (overdose) (*Directive* 1.2).

#### Example 10:

Patient was admitted for a recent increase in erratic and delusional behaviour. Clinical review diagnosed delusional disorder, due to the patient's history of acquired brain injury as a result of a motor bike accident 10 years prior. Patient experienced abdominal pain on the third day. Patient was known to have cholelithiasis with chronic cholecystitis.

Ultrasound confirmed cholelithiasis requiring laparoscopic cholecystectomy. After surgery, patient experienced severe ongoing abdominal pain. Patient was transferred to a tertiary hospital with suspected intra-operative common bile duct perforation injury for further management.

#### Assign:

#### **DCID COF**

- A (2) F22.0 Delusional disorder
- A (2) T90.5 Sequelae of intracranial injury

<u>A</u>	(2)	Y85.0	Sequelae of motor-vehicle accident	
A	(2)	Y92.9	Unspecified place of occurrence	
8	(2)	K80.10	Calculus of gallbladder with other cholecystitis, without mention of obstruction	
<u>B</u>	(1)	K91.64	Accidental puncture and laceration of gallbladder or bile duct during a procedure	
<u>B</u>	(1)	Y60.0	Unintentional cut, puncture, perforation or haemorrhage during surgical operation	
В	(1)	Y92.24	Place of occurrence, health service area, this facility	
<u>B</u>	(1)	Z75.6	Transfer for suspected condition	
Ratio	nale:	DCID A -	— for codes allocated to the first diagnosis cluster, including the principal diagnosis, and	
F22.0 which is assigned in accordance with ACS 0008 Sequelae for the sequela arising from the				
external cause (Directives 1.1–1.5 and 1.7)				
DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster ( <i>Directive</i> 1.10)				
DCID B — for codes allocated to the second diagnosis cluster, including Z75.6 which is in				
Chapter 21 Factors influencing health status and contact with health services (Z00–Z99) and is				
	related to the diagnosis cluster ( <i>Directives</i> 1.1–1.3, 1.6 and 1.7)			

# Example 11:

Patient admitted with cardiac arrhythmia due to accidental poisoning by Mersyndol (codeine, paracetamol and doxylamine succinate). No individual component of the Mersyndol was identified as the cause of the poisoning.

# Assign:

D	CI	n	C	OF
יע		v		OI.

<b>DCII</b>	COF			
<u>A</u>	(2)	T40.2	Poisoning by other opioids	
<u>A</u>	(2)	I49.9	Cardiac arrhythmia, unspecified	
A	(2)	X42	Accidental poisoning by and exposure to narcotics and psychodysleptics [hallucinogens],	
			not elsewhere classified	
<u>A</u>	(2)	T45.0	Poisoning by antiallergic and antiemetic drugs	
A	(2)	X44	Accidental poisoning by and exposure to other and unspecified drugs, medicaments and	
			biological substances	
A	(2)	T39.1	Poisoning by 4-Aminophenol derivatives	
A	(2)	X40	Accidental poisoning by and exposure to nonopioid analgesics, antipyretics and	
			<u>antirheumatics</u>	
<u>A</u>	(2)	Y92.9	Unspecified place of occurrence	
A	(2)	U73.9	Unspecified activity	
Ratio	nale:	DCID A	— for codes allocated to the first diagnosis cluster, including the principal diagnosis, and	
	I49.9 which is assigned in accordance with ACS 1901 <i>Poisoning by drugs</i> for the manifestation arising			
		from the	ne external cause ( <i>Directives</i> 1.1–1.5 and 1.7)	

# Example 12:

A patient was admitted to hospital from a residential aged care facility with partial thickness burns to multiple areas of their right ankle (2 per cent body surface area (BSA)), and of their lower leg (4 per cent BSA). Burns were due to patient falling asleep too close to the radiator. Patient was seen by a geriatrician and diagnosed with dementia. They also have systemic lupus erythematosus not impacting the episode of care. On the third day of admission the patient spilled hot water on their left ankle while making a cup of tea causing partial thickness burn (2 per cent BSA).

Assig	n·		
	DCID COF		
A	(2)	T25.2	Partial thickness [blisters, epidermal loss] burn of ankle and foot
A	(2)	T24.2	Partial thickness [blisters, epidermal loss] burn of hip and lower limb, except ankle and foot
A	(2)	T31.00	Burns involving less than 10 per cent of body surface, 0-9 per cent or unspecified full thickness
	(2)	131.00	burns
A	(2)	X16	Contact with hot heating appliances, radiators and pipes
A	(2)	Y92.14	Place of occurrence, aged care facility
A	(2)	U73.2	While resting, sleeping, eating or engaging in other vital activities
8	(2)	F03.00	Unspecified dementia, without mention of psychological or behavioural disturbance
<u>B</u>	(1)	T25.2	Partial thickness [blisters, epidermal loss] burn of ankle and foot
<u>B</u>	(1)	T31.00	Burns involving less than 10 per cent of body surface, 0-9 per cent or unspecified full thickness
			<u>burns</u>
<u>B</u>	(1)	X10.0	Contact with hot drink
<u>B</u>	(1)	Y92.24	Place of occurrence, health service area, this facility
В	(1)	U73.2	While resting, sleeping, eating or engaging in other vital activities
0	(2)	U86.3	Supplementary code for systemic lupus erythematosus
Ratio	nale:	DCID A -	— for codes allocated to the first diagnosis cluster, including the principal diagnosis
		(Direct	tives 1.1, 1.3–1.5 and 1.7)
DCID 8 — for codes not allocated to a diagnosis cluster or chronic condition cluster ( <i>Directive</i> 1.10)			
DCID B — for codes allocated to the second diagnosis cluster ( <i>Directives</i> 1.1, 1.3, 1.6 and 1.7)			
	DCID 0 — for codes allocated to the chronic condition cluster ( <i>Directive</i> 1.9)		
	T25.2 and T31.00 are assigned more than once as they are classified to Chapter 19 <i>Injury</i> , <i>poisoning and</i>		
	certain other consequences of external causes (S00-T98) and allocated in separate diagnosis clusters		
		(Direct	tive 2.1).

# Example 13:

Patient was admitted following epistaxis due to long term warfarin use. The patient was on long term warfarin therapy post mechanical heart valve replacement. During the episode of care the anticoagulant medication was adjusted.

# Assign:

#### **DCID COF**

A (2) D68.3 Haemorrhagic disorder due	to circulating anticoagulants
---------------------------------------	-------------------------------

A (2) Y44.2 Anticoagulants causing adverse effects in therapeutic use

A (2) Y92.23 Place of occurrence, health service area, not specified as this facility

A (2) Z95.2 Presence of prosthetic heart valve

Rationale: DCID A — for codes allocated to the first diagnosis cluster, including the principal diagnosis, and Z95.2

which is in Chapter 21 Factors influencing health status and contact with health services (Z00–Z99)
and is related to the diagnosis cluster (Directives 1.1–1.5 and 1.7)

#### Example 14:

Patient was admitted for lower segment caesarean section due to previous caesarean section, with delivery of liveborn female. During the caesarean section, the incision resulted in a bladder laceration requiring repair. On day 6, the caesarean section wound was noted to be infected (*Streptococcus pyogenes*, resistant to ceftriaxone), and the patient was commenced on flucloxacillin. Patient had severe itching and was given Phenergan for the adverse effect to antibiotic.

#### Assign:

#### **DCID COF**

DCID	COI		
8	(2)	O82	Single delivery by caesarean section
8	(2)	O34.2	Maternal care due to uterine scar from previous surgery
<u>A</u>	(1)	O71.5	Other obstetric injury to pelvic organs
A	(1)	Y60.0	Unintentional cut, puncture, perforation or haemorrhage during surgical operation
<u>A</u>	(1)	Y92.24	Place of occurrence, health service area, this facility
8	(1)	O86.0	Infection of obstetric surgical wound
8	(1)	B95.0	Streptococcus, group A, as the cause of diseases classified to other chapters
8	(1)	Z14.23	Resistance to third generation cephalosporins
В	(1)	O99.7	Diseases of the skin and subcutaneous tissue in pregnancy, childbirth and the puerperium
В	(1)	L29.9	Pruritus, unspecified
В	(1)	Y40.0	Penicillins causing adverse effects in therapeutic use
В	(1)	Y92.24	Place of occurrence, health service area, this facility
8	(2)	Z37.0	Single live birth
Ration	nale:	DCID	8 — for codes not allocated to a diagnosis cluster or chronic condition cluster (Directive 1.10)

DCID A — for codes allocated to the first diagnosis cluster (*Directives* 1.1, 1.3, 1.4 and 1.7)

<u>DCID B</u> — for codes allocated to the second diagnosis cluster, including O99.7 which is assigned in accordance with ACS 1548 *Puerperal/postpartum condition or complication*, and L29.9 which is a manifestation arising from the external cause (*Directives* 1.1–1.3, 1.6 and 1.7)

Y92.24 is assigned more than once as it is classified to Chapter 20 External causes of morbidity and mortality (U50–U73, V00–Y98) and is allocated in separate diagnosis clusters (Directive 2.1).

# 2. Revised ACS General standards for ICD-10-AM

See also 19.3 Complications of surgical and medical care.

Application of the ACS template, incidental refinements and the review of Complications of surgical and medical care have led to the following refinements in the ACS:

Australian Coding Standard	Revision
0002 Additional diagnoses	Addition of <i>Directive</i> 1.1.2 (second bullet), <i>Note</i> 1, <i>Exception</i> 2 and relocation of Examples 8-10 from ACS 1904 <i>Complications of surgical or medical care.</i>

Australian Coding Standard	Revision
0048 Condition onset flag	Creation of tables for <i>Permissible values</i> for COF1 and COF 2 and addition of <i>Directive</i> 15.
0049 Disease ICD-10-AM codes that must never be assigned	Revised ACS title and addition of codes to the list (Z50.0, Z50.1, Z50.4 – Z50.8).
0050 Unacceptable principal diagnosis codes	Addition of <i>Note</i> 1.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

## FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

## PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES AND HEALTH CARE (Z40–Z54)

<b>Z</b> 50 <b>▼</b> 0050	Care involving use of rehabilitation procedures
	Excludes: counselling (Z70–Z71)
Z50.0 ▼ 0049	Cardiac rehabilitation
Z50.1	Other physical therapy
<u>▼ 0049</u>	Therapeutic and remedial exercises
Z50.2 ▼ 0049	Alcohol rehabilitation
Z50.3 ▼ 0049	Drug rehabilitation
Z50.4 ▼ 0049	Psychotherapy, not elsewhere classified
Z50.5 ▼ 0049	Speech therapy
Z50.6 ▼ 0049	Orthoptic training
Z50.7 ▼ 0049	Occupational therapy and vocational rehabilitation, not elsewhere classified
Z50.8 ▼ <del>0503</del> 0049	Care involving use of other rehabilitation procedures
	Tobacco rehabilitation Training in activities of daily living [ADL] NEC

Z50.9

Care involving use of rehabilitation procedure, unspecified

**▼** 2104

Rehabilitation care

..

#### **Australian Coding Standards**

#### 0002 ADDITIONAL DIAGNOSES

#### Directive(s)

- **1.1.2** Assign an additional diagnosis code for a condition that resulted in an alteration to the patient's existing care plan, that is, where the condition requires additional care from the treating team, such as:
  - an intervention being delayed/changed/cancelled due to a pre-existing condition
  - a condition requiring alteration to an existing treatment/care plan (ie beyond routine postintervention or postoperative care) (see *Note* 1 and Glossary: *Routine postoperative care*). (see Examples 3 and 10).

. . .

#### Note(s)

- 1. The following are examples of alterations to the treatment/care plan (ie additional care from the treating team) which demonstrate beyond routine postoperative care:
  - admission to the intensive care unit following surgery for conditions that would normally be managed in the surgical ward postoperatively (see Example 3)
  - application of a specialised dressing (not previously required) to replace a conventional dressing
  - commencement of antibiotics for (purulent) surgical wound exudate or discharge
  - control of bleeding with haemostatic agent for accidental laceration during a procedure
  - an unexpected or unplanned return to theatre or transfer to another facility.

#### Exception(s)

. . .

2. **Do not** assign an additional diagnosis code for a condition arising during an intervention or in the post interventional (postoperative) period that are a natural or expected event managed by routine postoperative care (eg pain; swelling; wound ooze; erythema) (see Glossary: *Routine postoperative care*) (see Example 8).

. .

#### Example 8:

Patient was noted to have wound exudate (ooze) from their abdominal incision site. The dressing from the abdominal wound was removed, a replacement dressing applied and the incision site monitoring continued.

Assign: Additional diagnosis: Nil

Rationale: A clinical intervention complication code is not assigned (*Exception* 2), as the specified action of changing a dressing for wound exudate and monitoring of the incision site is considered routine

postoperative care (see also Glossary: Routine postoperative care).

#### Example 9:

Patient was admitted following a motorcycle accident, for an urgent exploratory laparotomy and splenectomy due to splenic rupture. A sponge was missing during the postsurgical count. The wound was reopened and the sponge found and removed.

Assign: Additional diagnoses: Foreign body accidentally left in body cavity or operation wound following

<u>a procedure</u>

Rationale: Foreign body — meets the additional diagnosis criterion, as the wound was reopened and the

sponge retrieved (*Directive* 1.1.1).

#### Example 10:

Patient experienced continuing postoperative knee pain following a meniscal debridement procedure. Due to the uncontrolled pain the treating clinician requested a review by a pain management specialist that resulted in a change in the prescribed pain medication.

Assign: Additional diagnoses: Postoperative knee pain due to a procedure

Rationale: Postoperative knee pain due to a procedure — meets the additional diagnosis criterion, as following

a review by the pain specialist, changes were made to the prescribed pain medication

(*Directive* 1.1.2).

#### 0048 CONDITION ONSET FLAG

<u>**Table 1:** Permissible values</u> — <u>COF 1</u>

#### COF 1. CONDITION WITH ONSET DURING THE EPISODE OF ADMITTED PATIENT CARE

#### **Description**

A condition which arises during the episode of admitted patient care and would not have been present or suspected on admission.

COF 1 IS ALLOCATED TO:	EXAMPLES OF CONDITIONS AND STATUSES
1.1 A condition newly arising during the episode of admitted patient care.	<ul> <li>pneumonia</li> <li>rash</li> <li>confusion</li> <li>urinary tract infection (UTI)</li> <li>hypotension</li> <li>electrolyte imbalance</li> <li>(see Examples 1, 10 and 11).</li> </ul>
1.2 A condition resulting from an unintentional event during surgical or medical care in the current episode of admitted patient care.	accidental laceration during a procedure     foreign body left in cavity.
1.3 An abnormal reaction to, or later complication of, surgical or medical care (ie intervention complication) arising during the current episode of admitted patient care.	<ul> <li>postprocedural shock</li> <li>disruption of wound</li> <li>UTI due to catheter</li> <li>adverse effect of drugs</li> <li>(see Example 1).</li> </ul>

1.4 A condition impacting on obstetric care arising after admission, including complications or unsuccessful (failed) interventions of labour and delivery or prenatal/postpartum management.	<ul> <li>labour and delivery complicated by fetal heart rate anomalies</li> <li>postpartum haemorrhage</li> <li>failed forceps</li> <li>(see Examples 3 and 4).</li> </ul>
1.5 For neonates, the condition(s) arising during the birth episode (ie arising during or after labour and delivery) (including conditions sequenced as principal diagnosis).	<ul> <li>respiratory distress</li> <li>jaundice</li> <li>feeding problems</li> <li>neonatal aspiration</li> <li>conditions associated with birth trauma</li> <li>newborn affected by delivery or intrauterine procedures.</li> <li>See Directives 3 and 4.</li> <li>(see Examples 5 and 6).</li> </ul>
<b>1.6</b> Disease status or administrative codes arising during the episode of admitted patient care.	• cancelled procedure (see Example 1).

<u>**Table 2:**</u> Permissible values — COF 2

# COF 2. CONDITION NOT NOTED AS ARISING DURING THE EPISODE OF ADMITTED PATIENT CARE Description

A condition previously existing or suspected on admission such as the presenting problem, a comorbidity or chronic disease.

<u>unscuse.</u>	
COF 2 IS ALLOCATED TO:	EXAMPLES OF CONDITIONS AND STATUSES
2.1 A condition that has not been documented at the time of admission, but clearly did not develop after admission.	<ul> <li>newly diagnosed diabetes mellitus</li> <li>malignancy</li> <li>(see Examples 7, 8, 9 and 10).</li> </ul>
2.2 A previously existing condition that is exacerbated or manifests during the current episode of admitted patient care.	<ul> <li>atrial fibrillation</li> <li>unstable angina</li> <li>(see Examples 9 and 11).</li> </ul>
2.3 A condition that is suspected at the time of admission and subsequently confirmed during the current episode of admitted patient care.	<ul> <li>pneumonia</li> <li>acute myocardial infarction (AMI)</li> <li>stroke</li> <li>unstable angina.</li> </ul>
2.4 A condition impacting on obstetric care arising prior to admission.	<ul> <li>venous complications</li> <li>maternal disproportion</li> <li>(see Examples 3 and 4).</li> </ul>

2.5 For neonates, the condition(s) in the birth episode arising before labour and delivery.	<ul> <li>prematurity</li> <li>birth weight</li> <li>talipes</li> <li>clicking hip</li> <li>(see Examples 5 and 6).</li> </ul>
2.6 Disease status or administrative codes (issues) not arising during the episode of admitted patient care.	<ul> <li>history of tobacco use</li> <li>duration of pregnancy</li> <li>colostomy status</li> <li>drug resistance</li> <li>(see Examples 1, 4 and 9).</li> </ul>
2.7 Outcome of delivery (Z37) and place of birth (Z38) codes.	See Directive 10. (see Example 3, 4, 5 and 6).
2.8 Supplementary codes for chronic conditions (U78– U88).	See Directive 14. (see Example 7).

. . .

#### **Directive(s)**

...

<u>15. Drug resistance codes</u> — Always allocate COF 2 to codes from block Z14–Z16 Resistance to antimicrobial drugs (see Example 9).

. . .

#### 0049 **DISEASE ICD-10-AM** CODES THAT MUST NEVER BE ASSIGNED

#### **Directive(s)**

**1. Do not** assign the following codes:

---

Z50.0 Cardiac rehabilitation

Z50.1 Other physical therapy

<u>...</u>

Z50.4 Psychotherapy, not elsewhere classified

Z50.5 Speech therapy

Z50.6 Orthoptic training

Z50.7 Occupational therapy and vocational rehabilitation, not elsewhere classified

Z50.8 Care involving use of other rehabilitation procedures

...

. . .

#### 0050 UNACCEPTABLE PRINCIPAL DIAGNOSIS CODES

#### Note(s)

1. Unacceptable principal diagnosis ACS symbols (▼0050) are located at the code, category and chapter level, and in Appendix A Morphology of neoplasm codes.

#### For example:

<u>B92</u>

Sequelae of leprosy

**▼**0050

B94

Sequelae of other and unspecified infectious and parasitic diseases

**▼**0050

#### **CHAPTER 20**

EXTERNAL CAUSES OF MORBIDITY
AND MORTALITY

<u>(U50–U73, V00–Y98)</u>

**▼**0050, 2001

#### **APPENDIX A**

#### MORPHOLOGY OF NEOPLASMS

**▼**0050, 0233

2. Many codes in Chapter 21 Factors influencing health status and contact with health services (Z00–Z99) that are not flagged as an unacceptable principal diagnosis, will rarely be appropriate to assign as principal diagnosis in an episode of care.

## **General standards for ACHI**

#### 1. Retired and revised ACS General standards for ACHI

Application of the ACS template led to the following refinements in ACHI and the ACS:

Australian Coding Standard	Revision
0016 General intervention guidelines procedure guidelines	Revised ACS title with the addition of Reopening of an operative site from ACS 0039 Reopening of operative site with an Example (see also 19.3 Complications of surgical and medical care).
0029 Coding of cContracted interventionsprocedures	Revised ACS title.
0039 Reopening of operative site	Retired with content relocated to ACHI Tabular and Alphabetic Index and ACS 0016 General intervention guidelines.
0042 Procedures Interventions normally not coded	Revised ACS title and addition of specific intervention exceptions at 8. <i>Drug treatment /pharmacotherapy/prescription of drugs</i> for clarity. The addition of 17. <i>Temporary cardiac pacemaker or defibrillator electrodes</i> .

#### **ACHI Tabular List**

#### **CHAPTER 1**

#### PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1-86)

. . .



Postoperative reopening of craniotomy or craniectomy site

39721-00 <del>▼ 0039</del> Postoperative reopening of craniotomy or craniectomy site

Decompression of oedema postoperative Postoperative drainage or removal:

- abscess
- haematoma
- haemorrhage
- infection

Includes: removal of skull flap

that via osteoplastic flap

**Note:** Assign this code for treatment of an intervention complication only.

## 56

#### Revision procedures on spinal canal or spinal cord structures

. . .

51145-00

Postoperative reopening of laminotomy or laminectomy site

**▼**0039

Note:

Assign this code for treatment of an intervention complication only.

Performed for intervention complications such as:

- haemorrhage
- infection

#### **CHAPTER 2**

# PROCEDURES ON ENDOCRINE SYSTEM (BLOCKS 110–129) THYROID AND PARATHYROID GLANDS

#### **INCISION**



Incision procedures on thyroid

• • •

90047-02 <del>▼0039</del> Reopening of wound of thyroid

Reopening of wound of thyroid for:

- control of (postoperative) haemorrhage
- examination
- exploration
- removal of haematoma

**Note:** Assign this code for treatment of an intervention complication only.

. . .

#### **CHAPTER 7**

# PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520–572) CHEST WALL, MEDIASTINUM AND DIAPHRAGM DESTRUCTION



Destruction procedures on chest wall, mediastinum or diaphragm

. . .

38656-01 <del>▼0039</del> Reopening of thoracotomy or sternotomy site

Control of postoperative intrathoracic haemorrhage

- Postoperative reopening of: sternotomy site
- · thoracotomy site

Note:

Assign this code for treatment of an intervention complication only.

Performed for control of postoperative haemorrhage.

#### **CHAPTER 8**

#### PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600-777)

657

Other application, insertion or removal procedures on other sites of heart

13818-00

Insertion of right heart balloon catheter for monitoring

▼0042

Swan Ganz catheter

Includes: cardiac output measurement

pulmonary artery wedge pressure monitoring

Excludes: that with coronary angiography with right heart catheterisation (38218-01 [668])

746

Other destruction procedures on vascular sites

**▼**0039

**Note:** Assign these codes for treatment of an intervention complication only.

#### **CHAPTER 10**

#### PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011) ABDOMEN, PERITONEUM AND OMENTUM

#### **INCISION**

985

30385-00

Laparotomy

Postoperative reopening of laparotomy site

**▼**0039

Note:

Assign this code for treatment of an intervention complication only.

Performed for control of postoperative haemorrhage.

#### **CHAPTER 13**

#### **GYNAECOLOGICAL PROCEDURES (BLOCKS 1240–1299) OTHER PROCEDURES**

1299

Other procedures on female genital organs

35759-00

Control of postoperative haemorrhage, following gynaecological surgery, not elsewhere classified

**▼**0039

Assign this code for treatment of an intervention complication only.

#### **CHAPTER 15**

#### PROCEDURES ON MUSCULOSKELETALSYSTEM (BLOCKS 1360-1580) REOPERATION

1379

Reoperation procedures on neck or thorax

38466-00 Reoperation on sternum involving reopening of mediastinum

Includes: greater omental flap

muscle advancement flap

rewiring

**Note:** Assign this code for treatment of an intervention complication only.

#### **CHAPTER 20**

#### **IMAGING SERVICES (BLOCKS 1940–2016)**

▼0042

#### **ULTRASOUND SCAN**

**▼**0042

Echography Ultrasonography

. . .

1949

Other ultrasound

• • •

96272-00 Intravascular ultrasound [IVUS]

∇ 0042

...

#### **COMPUTERISED TOMOGRAPHY [CT] SCAN**

∇ 0042

Reconstruction tomography

• • •

1966

Spiral angiography by computerised tomography

#### RADIOGRAPHY

∇ 0042

Roentgenography

X-ray

• • •

1999

**Fluoroscopy** 

. ..

#### **NUCLEAR MEDICINE IMAGING**

∇ 0042

2000

#### Nuclear medicine imaging brain study

Includes: administration of:

- radioactive tracerradioisotope
- radionuclides planar imaging

61405-00 Brain study with blood brain barrier agent

Cerebral single photon emission computerised tomography [SPECT] with blood brain barrier agent

61402-00 Cerebral perfusion study with single photon emission computerised tomography [SPECT]

Cerebral single photon emission computerised tomography [SPECT]

Excludes: cerebral positron emission tomography [PET]: (61559-00 [2000])

• NOS (61559-00 [2000])

• with blood barrier agent (61405-00 [2000])

61559-00 Cerebral positron emission tomography [PET]

Includes: administration of fluorodeoxyglucose [FDG]

Excludes: cerebral single photon emission computerised tomography [SPECT]: (61402-00 [2000])

• NOS (61402-00 [2000])

• with blood barrier agent (61405-00 [2000])

. .

#### **MAGNETIC RESONANCE IMAGING [MRI]**

2015

Magnetic resonance imaging

√ 0042

• • •

2016

Other imaging services

••

11219-00 Opti

Optical coherence tomography

<del>∇ 0042</del>

2015

Magnetic resonance imaging

<del>∇ 0042</del>

• • •

90901-06 Magnetic resonance imaging of pelvis

Includes: adnexa

bladder prostate rectum uterus

**Note:** Performed for:

• fetal abnormality

• pregnancy related condition.

90901-07 Magnetic resonance imaging of extremity

63564-00 Magnetic resonance imaging of whole body

90901-08 Magnetic resonance imaging of other site

Includes: bone marrow blood supply

. . .

2016

Other imaging services

. . .

11219-00 Optical coherence tomography

∇ 0042

#### **ACHI Alphabetic Index**

#### Α

```
Arrest (of)
- haemorrhage — see also Reopening/operative site, for intervention complication
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- - by magnetic resonance — see Imaging/magnetic resonance
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Reopening — see also Incision/by site
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- - via laparotomy 35694-05 [1254]
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- laminectomy or laminotomy site, postoperative site (haemorrhage) (infection) 51145-00 [56]

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    control of haemorrhage or thrombosis
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     intra-abdominal (following vascular procedure) 33845-00 [746]
- - craniectomy 39721-00 [10]
- - craniotomy 39721-00 [10]
- - extremity, for control of bleeding or thrombosis (following vascular procedure) 33848-00 [746]
- - - with any other vascular procedure — omit code
- - gynaecological, for control of bleeding 35759-00 [1299]
- - intra-abdominal, control of bleeding or thrombosis (following vascular procedure) 33845-00 [746]
- - laminectomy 51145-00 [56]
- - laminotomy 51145-00 [56]
- - laparotomy 30385-00 [985]
- - mediastinum, for reoperation on sternum 38466-00 [1379]
- - spinal 51145-00 [56]
- - sternotomy 38656-01 [562]
- - thoracotomy 38656-01 [562]
- - thyroid wound 90047-02 [111]
- spinal procedure site, postoperative (haemorrhage) (infection) 51145-00 [56] - sternotomy site (control of haemorrhage) 38656-01 [562]
- tarsorrhaphy — see Blepharotomy 90084-00 [231]
- thoracotomy site (control of haemorrhage) 38656-01 [562]
-thyroid wound (control of hacmorrhage) (examination) (exploration) (removal of hacmatoma) 90047-02 [111]
```

#### Т

#### **Thoracotomy**

- exploratory (with biopsy) 38418-00 [561]
- - performed with any other open thoracic procedure omit code
- reopening of site, postoperative 38656-01 [562]
- -- for control of postoperative haemorrhage 38656-01 [562]

#### **Australian Coding Standards**

#### 0016 GENERAL INTERVENTION GUIDELINES PROCEDURE GUIDELINES

#### 2. REOPENING OF AN OPERATIVE SITE

#### **Directive(s)**

**2.1** Assign codes for each reopening of an operative site **only** for treatment of an intervention complication — see ACHI Alphabetic Index: *Reopening/operative site* (see Example 2).

#### Note(s)

4. Reopening of an operative site may be performed for intervention complication(s) such as haemorrhage, thrombosis or infection.

#### **EXAMPLE 2:**

Patient was admitted with postoperative haemorrhage following an intervention. They returned to theatre on days two and four due to recurrent postoperative haemorrhage, requiring reopening of the laparotomy site (under anaesthesia) on both occasions to control the haemorrhaging.

Assign: Principal diagnosis: Postoperative haemorrhage

30385-00 [985] Postoperative reopening of laparotomy site

Anaesthesia

30385-00 [985] Postoperative reopening of laparotomy site

**Anaesthesia** 

**Rationale:** 30385-00 [985] — for treatment of an intervention complication (postoperative haemorrhage)

(Directive 2.1) and assigned twice for the number of times the intervention was repeated during the episode of care at different visits to theatre (ACS 0020 Bilateral/multiple interventions/2.1 The same intervention is repeated during the episode of care at different visits to theatre)

#### 0042 PROCEDURES INTERVENTIONS NORMALLY NOT CODED

#### **Directive(s)**

- **1. Do not** assign codes for interventions listed in Table 1: *Interventions normally not coded*, unless any of the following apply:
  - they are the **principal reason for admission** in an episode of care, regardless of the length of stay
  - anaesthesia is required for the intervention to be performed (in accordance with ACS 0016 General intervention guidelines)
  - another ACS directs their assignment
  - they are listed as Exception(s) (column 2).

Table 1: Interventions normally not coded

<b>Do not code these interventions</b>	Exception(s) — code these interventions when performed
1. Application of plaster.	<u>Nil.</u>
2. Bladder washout — via indwelling catheter.	<ul> <li>endoscopic bladder irrigation for removal of blood clot         (36842-00 [1092])</li> <li>endoscopically controlled hydrodilation of bladder (36827-00 [1108]).</li> </ul>
3. Cardiopulmonary resuscitation — mechanical or non-mechanical.	Nil.
4. Cardiotocography (CTG).	• internal fetal monitoring (eg fetal scalp electrodes) (16514-00 [1341]).
5. Catheterisation — insertion, replacement and/or removal:  • arterial or venous (eg Hickman's, peripherally inserted central catheter (PICC), central venous catheter (CVC), Swan Ganz) • urinary.	<ul> <li>arterial or venous:         <ul> <li>cardiac catheterisation performed as a diagnostic intervention (blocks [667] and [668])</li> <li>catheterisation in neonates (13300-01, 13300-02, 13319-00 [738], 13303-00, 34524-00 [694])</li> <li>peripheral catheterisation with administration of thrombolytic or other therapeutic agent for local effect (block [741])</li> </ul> </li> <li>suprapubic urinary catheterisation (block [1093]).</li> </ul>
6. Doppler recordings.	Nil.
7. Dressings/wound management.	• vacuum (VAC) dressings (90686-02 [1600], 90686-03 [1601]).
8. Drug treatment/pharmacotherapy/ prescription of drugs (eg total parental nutrition (TPN)).	<ul> <li>agents for neonates:</li> <li>parenteral anti-infectives (block [1920])</li> <li>total parenteral nutrition (TPN) (96199-07 [1920])</li> <li>electrolytes (96199-08 [1920])</li> <li>dextrose (96199-19 [1920])</li> <li>anti-D for obstetric patients (92173-00 [1884])</li> <li>antivenom (block [1920] with extension -04)</li> <li>pharmacological agent to induce abortion or labour — see ACHI Alphabetic Index: <i>Termination of pregnancy</i> or <i>Induction/labour</i></li> <li>pharmacotherapy for neoplasms (block [1920] with extension -00)</li> <li>prescription of psychotherapeutic agent in residential or ambulatory mental health care facilities (96241 [1922])</li> <li>psychotherapeutic agent in residential or ambulatory mental health care facilities (block [1920] with extension -10)</li> <li>thrombolytic therapy (35317-01 [741], 96196-01, 96199-01 [1920])</li> <li>vaccination for:</li> <li>COVID-19 (92157-03, 92157-04, 92157-05, 92157-06 [1882])</li> <li>obstetric patients (see ACHI Alphabetic Index: <i>Vaccination</i>).</li> </ul>
9. Electrocardiography (ECG).	• patient activated implantable cardiac event monitoring (loop recorder) (11722-00 [1854]).

Do not code these interventions	Exception(s) — code these interventions when performed
10. Electromyography (EMG).	<u>Nil.</u>
11. Imaging services — block [451] and blocks [1940]—[2016].	<ul> <li>endoscopic ultrasound (EUS) (30688-00 [1949])</li> <li>intravascular ultrasound (IVUS) (96272-00 [1949])</li> <li>optical coherence tomography (OCT) (11219-00 [2016])</li> <li>transoesophageal echocardiogram (TOE) (55118-00 [1942]).</li> </ul>
12. Monitoring — cardiac, electroencephalography (EEG), vascular pressure.	<ul> <li>radiographic/video EEG monitoring 24 hours or more (92011-00 [1825])</li> <li>stereo electroencephalography (SEEG) (92011-01 [1825]).</li> </ul>
13. Nasogastric intubation, aspiration and feeding.	• nasogastric feeding in neonates (96202-07 [1920]).
14. Primary suture of surgical and traumatic wounds.	<ul> <li>repair of traumatic wounds that are not associated with an underlying injury (block [1635])</li> <li>codes from block [1344] Postpartum suture.</li> </ul>
15. Stress test.	<u>Nil.</u>
16. Traction — where associated with another procedure.	Nil.
17. Temporary cardiac pacemaker or defibrillator electrodes (transcutaneous or transvenous) — adjustment, repositioning, manipulation, removal.	Nil.

# Specialty standards for multiple or unspecified diagnoses and interventions

### 1. Syndromes

Refinements have been made to the ICD-10-AM Alphabetic Index to address inconsistencies with the term *syndrome*.

#### **ICD-10-AM Alphabetic Index**

#### Α

Abdomen, abdominal — see also condition

- acute (syndrome) R10.0
- apron E65
- convulsive equivalent G40.8-
- migraine syndrome G43.1
- muscle deficiency syndrome Q79.4
- overhang E65
- testicle NEC Q53.93
- - bilateral Q53.23
- - unilateral Q53.13

Adiposogenital dystrophy or syndrome E23.6

#### Adrenocortical syndrome E27.0 --- see Cushing's/syndrome or disease

- with Cushing's syndrome — see Syndrome/Cushing's

Adrenocorticotropic hormone (ACTH) ectopic syndrome E24.3

#### Adrenogenital syndrome E25.9

- acquired E25.8
- congenital, associated with enzyme deficiency E25.0
- salt loss E25.0

#### Alcohol, alcoholic, alcohol-induced — see also condition

- withdrawal (syndrome) F10.3
- Williawai (Syllatome) F
- - with delirium F10.4

#### **Alveolitis**

- allergic (extrinsic) J67.9
- - due to
- - inhaled organic dusts NEC J67.8
- - organisms (fungal, thermophilic actinomycetes, other) growing in ventilation (air conditioning) systems J67.7
- due to
- - Aspergillus clavatus J67.4
- - Cryptostroma corticale J67.6
- fibrosing (cryptogenic) (idiopathic) J84.1
- - drug-induced see Disease/lung/interstitial/drug-induced
- jaw K10.3

#### Alveolocapillary block syndrome J84.1

- drug-induced — see Disease/lung/interstitial/drug-induced

Alveolus, alveolar — see condition

#### Amnes(t)ic Amnesic, amnestic syndrome (confabulatory) F1-.6

- alcohol-induced F10.6

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Amyoplasia congenita Q79.89
Amyostatic syndrome E83.0
Amyotonia M62.8-
Angina, anginal (attack) (cardiac) (chest) (heart) (pectoris) (syndrome) (vasomotor) I20.9
Antibodies, maternal (blood group) (see also Incompatibility) O36.1
- anti-D O36.0
- - fetus or newborn P55.0
Antibody deficiency syndrome NEC (see also Syndrome/antibody deficiency) D80.9
Anticardiolipin syndrome D68.6
Antiphospholipid(-antibody) syndrome D68.6
Aortitis (calcific) (nonsyphilitic) 177.6
- syphilitic A52.0† I79.1*
- - congenital A50.5† I79.1*
Aortomesenteric duodenum occlusion syndrome K31.5
Apathy R45.3
Areola — see condition
Argentaffin syndrome E34.0
Argentaffinoma (M8241/3) — see also Neoplasm/malignant
Argininaemia E72.2
Arthritis, arthritic (acute) (chronic) (subacute) M13.9-
- allergic M13.8-
- ankylosing (crippling) (spine) M45.-
- - sites other than spine M13.8-
- atrophic — see also Arthrosis M19.9-
- - spine M45.-
- back (see also Arthritis/spine) M46.9-
- blennorrhagic (gonococcal) A54.4† M01.3-*
- Charcot G98† M14.6*
- - diabetic E1-.61
- - nonsyphilitic NEC G98† M14.6*
- - syphilitic (tabetic) A52.1† M14.6*
- - syringomyelic G95.0† M49.4-*
- chylous (filarial) B74.9† M01.8-*
- climacteric (any site) NEC M13.8-
- crystal(-induced) M11.9-
- deformans — see Arthrosis M19.9-
- epidemic erythema A25.1
- senile or senescent — see Arthrosis (see also Arthrosis) M19.9-
Arthrosis (deformans) (degenerative) NEC M19.0-M19.9-
- erosive M15.4
- generalised, p
                  ary M15.9 M15.9
- - primary M15.0
- joint NEC
- - post traumatic M19.1-
- - primary M19.0-
- - secondary NEC M19.2-
- knee M17.9
- - post traumatic (unilateral) M17.3
- - - bilateral M17.2
- - primary (unilateral) M17.1
- - - bilateral M17.0
- - secondary (unilateral) NEC M17.5
- - - bilateral M17.4
- localised M19.9-
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polyarticular M15.9post traumatic NEC M19.1-

- primary NEC (see also Arthrosis/by site or type) M19.0-
- secondary NEC M19.2-
- - multiple M15.3
- specified NEC M19.8-
- spine (see also Spondylosis) M47.9-

#### Autoimmune disease (systemic) NEC M35.9

- disease (systemic) NEC M35.9
- polyglandular syndrome E31.0

#### **Autointoxication R68.8**

**Autosome**, <u>autosomal</u> — see <u>also</u> condition by chromosome involved <u>-</u> syndrome NEC (see also Abnormal/autosomes) Q99.9

#### B

Barcoo disease or rot (see also Ulcer/skin) L98.4 Bare lymphocyte syndrome D81.6

Barlow's disease E54

#### **Black**

- eye S00.1
- hairy tongue K14.3
- lung J60
- widow spider bite syndrome T63.3

#### Blackfan-Diamond anaemia or syndrome D61.0

Blind — see also Blindness

- bronchus (congenital) Q32.4
- loop syndrome K90.2
- - congenital Q43.89
- - postprocedural K91.2
- sac, fallopian tube (congenital) Q50.69

#### Blue(s)

- baby Q24.9
- diaper syndrome E70.8
- dome cyst (breast) N60.0
- dot cataract Q12.0

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#### Body, bodies

- rice (see also Body/loose/joint) M24.09
- - knee M23.4-
- stalk syndrome Q79.51

#### Boeck's

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#### Bowleg(s) (acquired) M21.16

- congenital Q68.5
- rachitic (sequelae of rickets) E64.3

#### Boyd's dysentery A03.2

#### Broken

- arches M21.4
- - congenital Q66.5
- arm T10.-
- - meaning upper limb see Fracture/limb/upper
- - upper see Fracture/arm
- back see Fracture/vertebra
- bone see Fracture
- heart syndrome 142.8
- implant or internal device see Complication(s)/by site and type/mechanical

...

 $\begin{tabular}{ll} \textbf{Bucket-handle fracture or tear} & (semilunar cartilage) — see \textit{Tear/meniscus} \\ \hline \textbf{Buckley syndrome D82.4} \\ \end{tabular}$ 

**Budd-Chiari syndrome** 182.0

#### C

#### Cardiophobia F45.2

Cardiopulmonary-obesity syndrome E66.2-

Cardiorenal — see condition

Cardiorespiratory distress syndrome (idiopathic), newborn P22.0

Cardiorrhexis (see also Infarct/myocardium) I21.9

#### Carotid body or sinus syndrome G90.0

- artery syndrome (hemispheric) G45.1
- - internal G45.1
- body or sinus syndrome G90.0

Carotinosis (cutis) (skin) E67.1

#### Cerebro-oculo-facial-skeletal syndrome (COFS) Q74.4

Cervicitis (acute) (chronic) (nonvenereal) (subacute) (with ulceration) N72

...

- tuberculous A18.1† N74.0\*

Cervicobrachial syndrome (diffuse) M53.1

Cervicocolpitis (emphysematosa) (see also Cervicitis) N72

**Cervicocranial syndrome M53.0** 

Cervicothoracic outlet syndrome G54.0

Cervix — see condition

#### Chondrocalcinosis M11.2-

- familial M11.1-
- specified NEC M11.2-

Chondrocostal junction syndrome M94.0

#### Chondrodermatitis nodularis chronica helicis or anthelicis H61.0

#### Chromosome — see also condition by chromosome involved

- 12, isochromosome 12p mosaic (Tetrasomy 12p) Q99.8
- count
- - 46 Q93.2
- - 47 Q92.6
- D(1) see condition/chromosome 13
- E(3) see condition/chromosome 18
- G see condition/chromosome 21
- long arm 18 or 21 syndrome Q93.5
   syndrome see Syndrome/chromosome

Chronic — see also condition

#### Claude Bernard-Horner syndrome G90.2

- traumatic S14.5
- Bernard-Horner syndrome G90.2
- - traumatic S14.5
- disease or syndrome I66.8† G46.3\*

#### Claude's disease or syndrome I66.8† G46.3\*

#### Claudication, intermittent 173.9

Climacteric (disease) (female) (symptoms) (syndrome) (see also Menopause) N95.1

- arthritis (any site) NEC M13.8-
- depression (single episode) F32.8-
- disease (female) N95.1
- male (symptoms) (syndrome) NEC N50.8
- paranoid state F22.8
- polyarthritis NEC M13.80
- symptoms (female) N95.1

#### Clinical research investigation

#### Clumsiness, clumsy child syndrome F82

Cluster headache syndrome G44.0

Cluttering F98.6

#### Codman('s) tumour (M9230/1) D48.0

#### Coeliac

- artery compression syndrome I77.4
- axis (compression) syndrome I77.4

#### Coenurosis B71.8

#### Communication

- between

- - base of aorta and pulmonary artery Q21.4
- - left ventricle and right atrium Q20.59
- - pericardial sac and pleural sac Q34.8
- - pulmonary artery and pulmonary vein, congenital Q25.79
- - uterus and digestive or urinary tract, congenital Q51.7

Compartment syndrome — see Syndrome/compartment

#### Compensation

#### Complex

- regional pain syndrome (CRPS) NEC G90.7-

#### Compression

- syndrome (see also Syndrome/compression) T79.5
- thorax J93.1

#### Congestion, congestive (chronic) (passive)

- duodenum K31.88
- dysmenorrhoea syndrome N94.6
- eye H11.4

- viscera R68.8

Congestion-fibrosis (pelvic) syndrome, female N94.8

#### Conical

#### Conn's syndrome E26.0

- overlap NEC M35.1

Conradi-(-Hunermann) disease or syndrome(syndrome) Q77.3

Costiveness (see also Constipation) K59.0

Costochondral junction syndrome M94.0

Costochondritis M94.0

Costoclavicular syndrome G54.0

- plana M91.2
- valga (acquired) M21.05
- - congenital Q65.81
- - rachitic (sequelae of rickets) E64.3
- vara (acquired) M21.15
- - congenital Q65.82
- -- late effect of rickets E64.3
- - rachitic (sequelae of rickets) E64.3

#### Craniotabes (cause unknown) M83.8-

- neonatal P96.3
- rachitic (sequelae of rickets) E64.3
- syphilitic A50.5

#### Craniotomy, fetus P03.8

- to assist delivery (single) O83
- - multiple see Delivery/multiple

Craniovertebral syndrome M53.0

#### **Cranium** — see condition

#### Cubitus

- valgus (acquired) M21.02
- - congenital Q74.09
- - rachitic (sequelae of rickets) E64.3
- varus (acquired) M21.12
- - congenital Q74.09
- late effect of rickets
- - rachitic (sequelae of rickets) E64.3

#### Curvature

- spine (acquired) (angular) (idiopathic) (incorrect) (postural) M43.9-
- - congenital Q67.52
- - due to or associated with

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- - - Charcot-Marie-Tooth disease G60.0† M49.4-*
- - - osteitis
- - - deformans M88.8-
- - - - fibrosa cystica E21.0† M49.8-*
- - - tuberculosis (Pott's curvature) A18.0† M49.0-*
- late effect of rickets E64.3
- - rachitic (sequelae of rickets) E64.3
- - tuberculous A18.0† M49.0-*
Cushing's
- syndrome or disease (see also Syndrome/Cushing's) E24.9
   drug-induced E24.2
  iatrogenic E24.2
-- pituitary-dependent E24.0
  specified NEC E24.8
- ulcer (see also Ulcer/peptic/acute) K27.3
Cusp, Carabelli — see condition
D
De Lange's syndrome Q87.12
De Morgan's spots 178.1
De Morsier syndrome Q04.4
De Quervain's
Deadborn fetus NEC P95
Deaf and dumb NEC H91.3
Deaf mutism (acquired) (congenital) NEC H91.3
Deficiency, deficient
- vitamin (multiple) E56.9
- - B<sub>6</sub> (syndrome) E53.1
Deformity Q89.9
- chest (acquired) (wall) M95.4
- - congenital Q67.8
- - rachitic (sequelae of rickets) E64.3
- chin (acquired) M95.2
- pelvis, pelvic (acquired) (bony) M95.5
- - with disproportion (fetopelvic) O33.0
- - - affecting
- - - - fetus or newborn P03.1
- - - - labour or delivery O65.0
- - congenital Q74.21
- - rachitic (late effect sequelae of rickets) E64.3
- rachitic (acquired), old or healed (sequelae of rickets) E64.3
- spine (acquired) M43.9-
- - congenital Q67.59
- - - postural curvature NEC Q67.52
- - - scoliosis, postural Q67.51
- - rachitic (sequelae of rickets) E64.3
- - specified type NEC M43.8-
- thorax (acquired) (wall) M95.4
- - congenital Q67.8
- - rachitic (sequelae of rickets) E64.3
- thumb (acquired) M20.0
Delay, delayed
- puberty (constitutional) E30.0
- sleep phase syndrome G47.2
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- union, fracture M84.2-

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Deletion(s)_(autosomes) Q93.9
- with complex rearrangements (unbalanced translocation) NEC Q93.7
- chromosome (syndrome)
- - 4 short arm Q93.3
- - 5 short arm Q93.4
- - 18 long arm Q93.5
- - 21 long arm Q93.5
- - part NEC Q93.5
- seen only at prometaphase Q93.6
- specified NEC Q93.8
 autosome Q93.9
  specified NEC Q93.8
 chromosome
  with complex rearrangements NEC Q93.7
   part Q93.5
   seen only at prometaphase Q93.6
   short arm
    -4 Q93.3
    5 Q93.4
   - specified part NEC Q93.5
  specified part NEC Q93.5
 long arm chromosome 18 or 21 syndrome Q93.5
   with complex rearrangements NEC Q93.7
  specified NEC Q93.8
Delhi boil or button B55.1
Demyelination, demyelinisation, demyelinating
- central nervous system G37.9
- - specified NEC G37.8
- corpus callosum (central) G37.1
- disseminated, acute G36.9
- - specified NEC G36.8
- in optic neuritis G36.0
 syndrome G37.9
Dengue (fever) NEC A97.9
Depersonalisation(-derealisation) (in neurotic state) (neurotic) (syndrome) F48.1
Disease, diseased...
- joint M25.9-
- - Charcot G98† M14.6*
- - - diabetic E1-.61
- - - nonsyphilitic NEC G98† M14.6*
- - - syphilitic (tabetic) A52.1† M14.6*
- - - syringomyelic G95.0† M49.4-*
- - degenerative — see also Arthrosis M19.9-
- - - multiple M15.9
- - - spine M47.9-
- - sacroiliac M53.3
- - specified type NEC M25.8-
- - spine NEC M53.9-
- - suppurative M00.9-
Disorder (of) — see also Disease
- amnesic, amnestic — see Amnes(t)ieAmnesic, amnestic syndrome
Dorsalgia M54.9-
- psychogenic F45.4

    specified NEC M54.8-

Dorsolateral syndrome (prefrontal) F07.0
- medullary I66.3† G46.4*
Dorsopathy M53.9-
- deforming M43.9-
- - specified NEC M43.8-
Drug
- use NEC Z72.2
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- withdrawal syndrome — see also Withdrawal

- - infant of dependent mother P96.1
- - therapeutic use, newborn P96.2
- wrong substance given or taken in error see Table of drugs and chemicals

**Drunkenness** F10

Dubowitz syndrome Q87.19

Dysentery, dysenteric (catarrhal) (diarrhoea) (epidemic) (haemorrhagic) (infectious) (sporadic) (tropical) A09.0

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- viral (see also Enteritis/viral) A08.4

**Dysexecutive syndrome** (dorsal convexity) (prefrontal) F07.0

Dysfibrinogenaemia (congenital) D68.2

F

Eagle syndrome M77.9

**Eagle-Barrett syndrome** Q79.4

Eales' disease H35.0

**Ectrodactyly NEC Q71.6** 

- with congenital malformation syndrome NEC (see also Syndrome/by type) Q87.28
- ectodermal dysplasia-cleft (EEC) syndrome Q87.28

Ectromelia

Eddowes-(-Spurway) syndrome Q78.0

Encephalopathy (acute) G93.4

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- postcontusional F07.2
- - current injury see Contusion/brain
- posterior reversible, syndrome (leukoencephalopathy) (PRES) I67.8
- - history Z86.71
- posthypoglycaemic (coma) E16.1† G94.3\*

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Entrapment\_syndrome, (nerve) — see Neuropathy/entrapment

Erythrocyanosis (crurum) 173.8

**Erythrocyte fragmentation syndrome** D59.4

Erythrocythaemia (M9840/3) — see Erythraemia

Erythrocytosis (megalosplenic)

Exhaustion (physical) NEC R53

- senile R54
- syndrome F48.0
- vital NEC Z73.0

#### Extraintestinal yersiniosis A28.20

- with sepsis A28.21

**Extrapyramidal disorder G25.9** 

- specified NEC G25.8

Extrasystoles (supraventricular) 149.4

Eye, eyeball, eyelid — see condition

Eyelid-malar-mandible syndrome Q87.09

Eyestrain H53.1

F

Fatigue (see also Exhaustion) R53

- syndrome F48.0

- - chronic G93.3
- - postviral G93.3
- voice R49.8

#### Fetus, fetal — see also condition

- alcohol
- - spectrum disorders Q86.0
- - syndrome (dysmorphic) Q86.0
- compressus (mother) O31.0
- hydantoin syndrome Q86.1
- papyraceous (mother) O31.0
- valproate (spectrum) disorder Q86.81

#### - valproic acid syndrome Q86.81 Fire-setting - without manifest psychiatric disorder Z03.2 - pathological (compulsive) F63.1 First arch syndrome Q87.09 Fish-hook stomach K31.88 Fitz\_Hugh\_Curtis\_and Curtis syndrome (gonococcal) A54.8† K67.1\* - chlamydial A74.8† K67.0\* Flat — see also Anomaly/by site - chamber (eye) H44.4 - chest, congenital Q67.8 - foot (acquired) (fixed type) (painful) (postural) M21.4 - - congenital Q66.5 - - rachitic (late effect sequelae of rickets) E64.3 - - rigid Q66.5 - - spastic (everted) Q66.5 Floppy baby syndrome (nonspecific) P94.2 - baby syndrome (nonspecific) P94.2 - mitral valve syndrome I34.1 Flu — see Influenza Fragile, fragility - X chromosome (syndrome) Q99.2 Frontal — see also condition lobe syndrome F07.0 - syndrome (lobe) (medial) F07.0 **Funnel** - breast (acquired) M95.4 - - congenital Q67.6 - - rachitic (seguelae of rickets) E64.3 - chest (acquired) M95.4 - - congenital Q67.6 -- late effect of rickets E64.3 - - rachitic (sequelae of rickets) E64.3 - pelvis (acquired) M95.5 ... G Ganglion (compound) (diffuse) (joint) (tendon (sheath)) M67.4-- of yaws (early) (late) A66.6 - syndrome (basal ganglia brain) G25.9 - tuberculous A18.0† M68.0-\* Gastromalacia K31.88 Gastro-oesophageal laceration-haemorrhage syndrome K22.6 Gastroparesis K31.88 Genu - extrorsum (acquired) M21.16 - - congenital Q74.19 - rachitic (sequelae of rickets)(old) E64.3 - recurvatum (acquired) M21.86 - - congenital Q74.19 -- late effect of rickets E64.3 - valgum (acquired) M21.06 - - congenital Q74.14 -- late effect of rickets E64.3 - varum (acquired) M21.16 - - congenital Q74.15 - late effect of rickets E64.3

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- cell

- - epulis K06.8

- - peripheral granuloma K06.8
- kidney, congenital Q63.3
- oesophagus, congenital Q39.5
- platelet syndrome (Bernard-Soulier) D69.1
- urticaria T78.3
- - hereditary D84.1

#### Goldenhar-(-Gorlin) syndrome Q87.08

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Gunshot wound (see also Wound, open) T14.1

- fracture code as Fracture/by site
- internal organs see Injury/by site

**Gustatory sweating syndrome** G50.8

Gynaecological examination (periodic) Z01.4

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- chorea F95.8
- disturbance, child F98.9
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- laxative F55.1

Haddad syndrome — see Syndrome/congenital/central hypoventilation AND Hirschsprung's disease or megacolon

Haemangioblastoma (M9161/1) — see also Neoplasm/connective tissue/uncertain behaviour

#### Haemoglobinuria R82.3

- with anaemia, haemolytic, acquired (chronic) NEC D59.6
- cold agglutinin disease D59.1
- -- paroxysmal (with Raynaud's syndrome) D59.6
- due to exertion or haemolysis NEC D59.6
- intermittent D59.6
- malarial B50.8
- march D59.6
- nocturnal (paroxysmal) D59.5
- paroxysmal (cold) D59.6
- - cold (with Raynaud's syndrome) D59.6
- - nocturnal D59.5

#### Haemoperitoneum K66.1

- infectional K65.9
- traumatic S36.81

Haemophagocytic, infection-associated syndrome D76.2

Haemophilia (familial) (hereditary) D66

#### Haemorrhage, haemorrhagic R58

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- - affecting management of pregnancy or puerperium O43.0
- fever with renal syndrome A98.5† N08.0\*
- fibrinogenolysis (see also Fibrinolysis) D65

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- deformity (acquired) NEC M20.3
- malleus (acquired) NEC M20.3
- rigidus (acquired) M20.2
- - congenital Q74.26
- -- late effect of rickets E64.3
- - rachitic (sequelae of rickets) E64.3
- valgus (acquired) M20.1

#### Hammer toe (acquired) NEC M20.4

- congenital Q66.82
- late effect of rickets E64.3
- rachitic (sequelae of rickets) E64.3

#### Hand — see condition

...

Hand-Schuller-Christian disease or syndrome (M9751/3) C96.5

Hand-shoulder syndrome G90.8

Hanging (asphyxia) (strangulation) (suffocation) T71

Hantavirus-disease (Dobrava) (Puumala) (Seoul) (with kidney manifestations) A98.5+ N08.0\*

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with pulmonary manifestations (Andes) (Bayou) (Bermejo) (Black Creek Canal) (Choclo) (Juquitiba) (Laguna negra)
      (Lechiguanas) (New York) (Oran) (Sin Nombre) B33.4+ J17.1*
- cardio-pulmonary syndrome (HCPS) B33.4† J17.1*
- disease (Dobrava) (Puumala) (Seoul) (with kidney manifestations) A98.5† N08.0*
- - with pulmonary manifestations (Andes) (Bayou) (Bermejo) (Black Creek Canal) (Choclo) (Juquitiba) (Laguna negra)
   (Lechiguanas) (New York) (Oran) (Sin Nombre) B33.4† J17.1*
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- syndrome NEC G44.8
- tension (chronic) (episodic) G44.2
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Heparin induced thrombosis and thrombocytopenia syndrome (HITTS) D69.5
Hepatalgia K76.8
Hepatic flexure syndrome K59.8
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- psychogenic F45.32
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- primary F51.1
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- congenital central P28.3
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newborn P28.5syndromealveolar E66.2-

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- - congenital central P28.3
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- - sleep G47.33
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- disease (autoimmune) (IgG4-RD) (IgG4-RSD) (sclerosing) (systemic) D89.89
· multiorgan lymphoproliferative syndrome (IgG4-MOLPS) D89.89
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- - severe (SCID) D81.9
- - - with
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- - - - or normal B-cell numbers D81.2
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- breast, cystic N60.8
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IPMN (intraductal papillary mucinous neoplasm) — see Tumour/papillary-mucinous, intraductal
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- rachitic (seguelae of rickets) E64.3
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- secondary NEC M40.1-
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    - laceration syndrome N83

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## Locked-in syndrome G83.5

- COVID (coronavirus disease 2019 (COVID-19)) U07.4
- labour O63.9

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- - 1st stage O63.0
- - 2nd stage O63.1
- - 3rd stage O63.3
- - affecting fetus or newborn P03.8
- QT syndrome 149.8
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- - anticoagulants Z92.1
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- congenital NEC Q76.49
- - postural Q76.44
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- postural M40.4-
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- specified NEC M40.4-
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- achiever, school Z55.3
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- psychosis NEC F28
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- - diabetes mellitus E1-.72
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. . .

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- state, symptoms, syndrome code to F10–F19 with fourth character .3

# 2. ACS 0030 Organ, tissue and cell procurement and transplantation

As a result of the Department of Health and Aged Care's draft *National Strategy for Organ Donation, Retrieval and Transplantation and Transition Action Plan*, a review was conducted into the ICD-10-AM and ACHI codes related to the classification of organ donation, procurement and transplantation.

The review demonstrated an opportunity to expand and improve classification for the more common organ and tissue procurement and transplantation.

Codes have also been created for organ procurement initiated and abandoned without organ harvest for both living and posthumous donors to capture all activity related to organ procurement.

The following refinements have been made to ICD-10-AM, ACHI and the ACS:

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

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Z52

#### Donors of organs and tissues

▼0030

Allogeneic donors of organs, and tissues, biological products and cells

**Note:** Assign Z52.88 alone where more than one code from Z52.1–Z52.7, Z52.81–Z52.86, Z52.89 applies.

Excludes: examination of potential donor (Z00.5)

ova for in vitro fertilisation (Z31.2) sperm for in vitro fertilisation (Z31.31)

Z52.0 Blood donor

Excludes: that via apheresis (Z51.81)

♥Z52.00 Whole blood donor

**Blood NOS** 

◆Z52.08 Other blood product donor

Blood components NOS

Lymphocytes Platelets

Excludes: that via apheresis (Z51.81)

. . .

Z52.7 Heart donor

Excludes: with lungs (Z52.84)

**Z52.8** Donor of other organs and tissues

**©**Z52.81 Chondrocyte [cartilage] donor

**OZ52.82** Limbal stem cell donor

**2**Z52.83 Lung donor

Excludes: with heart (Z52.84)

**©**Z52.84 Heart and lungs donor

**♥**Z52.85 Intestine donor

Includes: small or large intestine

©Z52.86 Pancreas donor

Excludes: heart and lungs alone (Z52.84)

**♥**Z52.89 Donor of other organ and tissue

Z52.9 Donor of unspecified organ or tissue

Donor NOS

<b>Z53</b>	Persons encountering health services for specific procedures, not carried out
<b>▼</b> 0011, 001	9, 0050, 1551
	Excludes: immunisation not carried out (Z28)
Z53.0	Procedure not carried out because of contraindication
	Excludes: procedure abandoned after initiation (Z53.3-)
Z53.1	Procedure not carried out because of patient's decision for reasons of belief or group pressure
	Excludes: procedure abandoned after initiation (Z53.3 <sub>-</sub> )
Z53.2	Procedure not carried out because of patient's decision for other and unspecified reasons
	Excludes: procedure abandoned after initiation (Z53.3-)
<b>♥</b> Z53.3	Procedure abandoned after initiation Procedure attempted but not completed
<u><b>©</b>Z53.30</u>	Procedure abandoned after initiation, not elsewhere classified
<u>♥Z53.31</u> <u>▼0030</u>	Living donor organ procurement attempted but not completed
	Note: Assign this code only when organ procurement is attempted but no organ is procured.
<u>♥Z53.32</u> <u>▼0030</u>	Posthumous organ procurement attempted but not completed
	Note: Assign this code only when organ procurement is attempted but no organ is procured.
Z53.8	Procedure not carried out for other reasons
	Excludes: procedure abandoned after initiation (Z53.3-)
Z53.9	Procedure not carried out, unspecified reason
	Excludes: procedure abandoned after initiation (Z53.3 <sub>-</sub> )
Z94 ▼0050	Transplanted organ and tissue status
	<i>Includes:</i> organ, or tissue, biological product and cell replaced by heterogenous or homogenous transplant
	<b>Excludes:</b> complications of transplanted organ or tissue — see Alphabetic Index presence of:
	• vascular graft (Z95)
	• xenogenic heart valve (Z95.3)
Z94.7	Corneal transplant status
Z94.8	Other transplanted organ and tissue status  Bone marrow
	Intestine Pancreas (beta-cells)(islets) Stem cells
<b>©</b> Z94.81	Bone marrow transplant status
<b>©</b> Z94.82	Intestine transplant status
<b>©</b> Z94.83	Pancreas transplant status
<b>©</b> Z94.84	Islet cell transplant status
<b>⊉</b> Z94.85	Stem cell transplant status, not elsewhere classified

```
©Z94.89
            Other specified transplanted organ and tissue status
             Transplanted organ and tissue status, unspecified
Z94.9
ICD-10-AM Alphabetic Index
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   - other products Z52.08
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Donovanosis A58
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...

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# PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1–86) SPINAL CANAL AND SPINAL CORD STRUCTURES INCISION

...

46

#### Decompression of spinal cord or canal

Includes: bone graft

discectomy fat graft laminectomy

laminoplasty (open door)

laminotomy

partial vertebrectomy

Code also when performed:

- decompression of spinal nerve roots (rhizolysis) (40330-00 [49])
- procurement of:
  - bone graft material through separate incision (96275-1747726-00 [1563])
  - fat for graft via separate incision (45018-04 [1666])
- spinal fusion (see block [1389])
- via percutaneous endoscopic (minimally invasive) approach (96234-01 [1923])

51011-00 Decompression of cervical spinal cord, 1 level

. . .

#### **CHAPTER 2**

# PROCEDURES ON ENDOCRINE SYSTEM (BLOCKS 110–129) THYROID AND PARATHYROID GLANDS

#### **EXCISION**

- - -

Other excision procedures on thyroid or parathyroid gland

30313-00 Excision of thyroglossal cyst

Sistrunk's procedure

30314-00 Radical excision of thyroglossal cyst or fistula

Includes: excision of:

- hyoid bone
- thyroglossal duct

96275-00 Procurement of parathyroid tissue for transplantation, living donor

**▼**0030

96275-01 Procurement of parathyroid tissue for transplantation, posthumous donor

**▼**0030

96275-02 Procurement of thyroid tissue for transplantation, posthumous donor

**▼**0030

#### **OTHER PROCEDURES**

117 Other procedures on thyroid or parathyroid gland

96276-00 Transplantation of parathyroid tissue

**▼**0030

Reimplantation of parathyroid tissue

96276-01 Transplantation of thyroid tissue

**▼**0030

Reimplantation of thyroid tissue

90040-00 Other procedures on parathyroid gland

90041-00 Other procedures on thyroid gland

. . .

#### ADRENAL GLAND

#### **EXCISION**

119 Adrenalectomy

Includes: that for lesion of adrenal gland

• • •

96275-03 Procurement of adrenal tissue for transplantation, posthumous donor

**▼**0030

#### **OTHER PROCEDURES**

121 Other procedures on adrenal gland

96276-02 Transplantation of adrenal tissue

**▼**0030

Reimplantation of adrenal tissue

. . .

#### **THYMUS**

#### **EXCISION**

128 Removal of thymus

Removal of thymoma Thymectomy

• •

96275-04 Procurement of thymus tissue for transplantation, living donor

▼0030

96275-05 Procurement of thymus tissue for transplantation, posthumous donor

▼0030

#### **OTHER PROCEDURES**

129

Other procedures on thymus

96276-03

Transplantation of thymus

**▼**0030

. . .

### **CHAPTER 3**

# PROCEDURES ON EYE AND ADNEXA (BLOCKS 160–256)

#### **EYEBALL**

#### **EXCISION**

161

**Excision procedures on eyeball** 

. . .

96275-06 Procurement of cornea for transplantation, posthumous donor

**▼**0030

. . .

#### **REPAIR**

174

Other repair procedures on cornea

. . .

90065-00

Transplantation of limbal stem cells Limbal stem cell transplant

▼0030

. . .

#### **OCULAR ADNEXA – EXTRAOCULAR MUSCLES**

#### **REPAIR**

216

**Procedures for strabismus** 

42848-00

<u>Transplantation of muscle for strabismus</u> <u>Muscle transplant for strabismus</u>

**▼**0030

Hummelsheim procedure

Transposition of extraocular muscles

. . .

#### **REOPERATION**

219

Reoperation procedures on extraocular muscle

42848-01

Reoperation of muscle transplanttransplantation procedure for strabismus

**▼**0030

42833-02

Reoperation of strabismus procedure involving muscles of eye, second procedure

Excludes: that with muscle transplantation (42848-01 [219])

42836-00

Reoperation of strabismus procedure involving muscles of eye, third or subsequent procedure

Excludes: that with muscle transplantation (42848-01 [219])

#### **CONJUNCTIVA**

#### **EXCISION**

254 Excision procedures on conjunctiva

. . .

42683-00 Excision of lesion or tissue of conjunctiva

<del>▼0030</del>

Excision of conjunctival cyst

96275-07 Procurement of limbal stem cells for transplantation, living donor

**▼**0030

96275-08 Procurement of limbal stem cells for transplantation, posthumous donor

**▼**0030

**REPAIR** 

255 Repair procedures on conjunctiva

. . .

42641-00 Mucous membrane graft to conjunctiva

Includes: procurement of mucous membrane

90093-00 Conjunctivoplasty

42641-01 <u>▼0030</u> Transplantation of conjunctiva [autoconjunctival transplant] Autoconjunctival transplant

**Includes:** procurement of conjunctiva

. . .

#### **CHAPTER 7**

# PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520–572) LUNG AND PLEURA

#### **EXCISION**

553 Pneumonectomy

38438-03 Removal of donor lung for transplantation

**▼**0030

Includes: procurement of associated artery and/or vein(s)

Excludes: that with combined heart transplantation (90204-01 [659])

96275-09

Procurement of lung for transplantation, living donor

**V**0030

Procurement of lower lobe of lung for transplantation

Includes: procurement of associated artery and/or vein(s) for transplantation

Excludes: combined heart and lungs procurement (90204-04 [659])

Procurement of lung for transplantation, posthumous donor

96275-10 ▼0030

*Includes:* procurement of associated artery and/or vein(s) for transplantation

Excludes: combined heart and lungs procurement (90204-05 [659])

#### **CHAPTER 8**

# PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600–777) HEART – OTHER SITES

#### **EXCISION**



Removal of donor heart or without lungs for transplantation

Includes: procurement of associated artery and/or vein(s) for transplantation

90204-00 Removal of donor heart for transplantation

90204-02 Procurement of heart for transplantation, living donor

90204-03 Procurement of heart for transplantation, posthumous donor

90204-01 Removal of donor heart and lung for transplantation

90204-04 Procurement of heart and lungs for transplantation, living donor

90204-05 Procurement of heart and lungs for transplantation, posthumous donor

. . .

#### **CHAPTER 9**

# PROCEDURES ON BLOOD AND BLOOD-FORMING ORGANS (BLOCKS 800–820)

#### **BONE MARROW**

#### **EXCISION**

• • •

801 Other excision procedures on bone marrow

13700-00 Procurement of bone marrow for transplantation

<del>▼0030</del>

Aspiration of bone marrow from donor Bone marrow harvesting for transplantation

Excludes: that by apheresis (13750-04, 13750-05 [1892])

13700-01 Procurement of bone marrow for transplantation, living donor

▼0030

Aspiration of bone marrow from living donor

Bone marrow harvesting from living donor for transplantation

Excludes: that by apheresis (13750-04, 13750-05 [1892])

13700-02 Procurement of bone marrow for transplantation, posthumous donor

**▼**0030

Aspiration of bone marrow from posthumous donor

Bone marrow harvesting from posthumous donor for transplantation

Excludes: that by apheresis (13750-04, 13750-05 [1892])

. . .

#### **OTHER PROCEDURES**



Other procedures on lymphatic structures

90283-00 Other procedures on lymphatic structures

**▼**0030

Correction of lymphoedema of limb NOS

Peripheral lymphatic:

- · anastomosis
- dilation
- ligation
- obliteration
- reconstruction
- · repair
- transplantation

Excludes: excision of lymphoedematous tissue (45048 [1667])

#### **SPLEEN**

#### **OTHER PROCEDURES**

817

Other procedures on spleen

30375-21

Other procedures on spleen

**V**0030

Excision of:

- · accessory spleen
- tumour of spleen

Transplantation of spleen

#### **BLOOD**

#### **OTHER PROCEDURES**



Transplantation of haematopoietic stem cells Haematopoietic stem cell transplantation

▼0030

The code in this block requires a two character extension. The first character represents the type of stem cell

donor. The second character represents the anatomical origin of the transplanted stem cells.

Note:

*Excludes:* adipose-derived stem cell therapy (14203 0196276-07 [1906])

limbal stem cell transplantation (90065-00 [174])

13706-XX Transplantation of haematopoietic stem cell Haematopoietic stem cell transplantation

See extension codes

Includes: with bone marrow concentrate graft

#### **CHAPTER 10**

# PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850-1011)

#### **SMALL INTESTINE**

#### **EXCISION**

896

Other excision procedures on small intestine

96269-02 Procurement of small intestine for transplantation, posthumous donor cadaver

▼0030

Includes: procurement of associated artery and/or vein(s) for transplantation

. . .

# LARGE INTESTINE

#### **EXCISION**

914

Other excision procedures on large intestine

• • •

96270-02 Procurement of large intestine for transplantation, posthumous donor cadaver

▼0030

*Includes:* procurement of associated artery and/or vein(s) for transplantation

. . .

#### **LIVER**

#### **EXCISION**

953

**Excision procedures on liver** 

• • •

96258-03 Procurement of liver for transplantation, <u>posthumous donor</u> cadaver

▼0030

Includes: procurement of associated artery and/or vein(s) for transplantation

. . .

#### **PANCREAS**

#### **EXCISION**



**Pancreatectomy** 

<del>▼0030</del>

Includes: procurement of associated artery and/or vein(s) for transplantation

30593-00 Pancreatectomy

*Code also when performed:* 

• autologous transplantation of islet cells (96276-05 [981])

30583-00 Distal pancreatectomy

30593-01 Pancreatectomy with splenectomy

30584-00 Pancreaticoduodenectomy with formation of stoma

Includes: choledochoenterostomy

gastrojejunostomy pancreaticojejunostomy preservation of pylorus

96275-11 Procurement of pancreas for transplantation, living donor

**▼**0030

Includes: procurement of associated artery and/or vein(s) for transplantation

96275-12 Procurement of pancreas for transplantation, posthumous donor

**▼**0030

Includes: procurement of associated artery and/or vein(s) for transplantation

96275-13 Procurement of islet cells for transplantation, living donor

▼0030

96275-14 Procurement of islet cells for transplantation, posthumous donor

**▼**0030

. . .

#### **REPAIR**

981

Other repair procedures on pancreas

. . .

90324-00 Transplantation of pancreas

▼0030

96276-04 Allogeneic transplantation of islet cells

**▼**0030

Includes: via:

• abdominal approach

cannula

96276-05 Autologous transplantation of islet cells

**▼**0030

Includes: via:

• abdominal approach

• cannula

90325-00 Other repair of pancreas

- - -

#### **CHAPTER 11**

## PROCEDURES ON URINARY SYSTEM (BLOCKS 1040-1129)

#### **KIDNEY**

#### **EXCISION**

<b>1050 ▼</b> 0030	Complete nephrectomy for transplantation Procurement of kidney for transplantation
	Includes: procurement of associated artery and/or vein(s)
36516-04	Laparoscopic <u>procurement of kidney complete nephrectomy</u> for transplantation, living donor
36516-05	Procurement of kidney Complete nephrectomy for transplantation, living donor
36516-06	Procurement of kidney Complete nephrectomy for transplantation, posthumous donor cadaver

### **CHAPTER 15**

# PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580) SPINE [VERTEBRAL COLUMN]

**REPAIR** 

#### 1389

#### **Spinal fusion**

Includes: bone graft

discectomy fat graft

procurement of graft material through same incision

Note:

Interventions in this block are classified by anterior or posterior spinal column fusion not surgical technique

(anterior, lateral or posterior approach).

Code also when performed:

- decompression of spinal:
  - cord (see block **[46]**)
  - nerve root (rhizolysis) (40330-00 [49])
- internal fixation (see block [1390])
- procurement of:
  - bone graft material through separate incision (96275-1747726-00 [1563])
  - fat for graft via separate incision (45018-04 [1666])
- via percutaneous endoscopic (minimally invasive) approach (96234-01 [1923])

. .

### 1390

#### Internal fixation of spine

Note:

Simple internal fixation - involves placement of fixation device(s) in the form of wire loops or simple bone screws to immobilise the facet joints of spine.

Segmental internal fixation - involves placement of implants at the upper and lower extremities of the spinal fusion and at multiple intervening sites.

Code also when performed:

- · procurement of:
  - bone graft material through separate incision (<u>96275-17</u>47726 00 [1563])
  - fat for graft via separate incision (45018-04 [1666])
- spinal fusion (see block [1389])
- via percutaneous endoscopic (minimally invasive) approach (96234-01 [1923])

٠.

#### **OTHER PROCEDURES**

#### 1393

#### Other spinal procedures

Includes: fat graft

Code also when performed:

- procurement of:
  - bone graft material through separate incision (96275-1747726-00 [1563])
- fat for graft via separate incision (45018-04 [1666])
- via percutaneous endoscopic (minimally invasive) approach (96234-01 [1923])

. . .

#### **HUMERUS AND ELBOW**

#### **REPAIR**

# 1417

#### Bone graft to humerus

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

. . .

### **FOREARM**

#### REPAIR

#### 1435

#### Bone graft to forearm

Code also when performed:

• procurement of graft material through separate incision (96275-1747726 00 [1563])

. .

#### HAND, WRIST

#### **REPAIR**

### 1460

#### Arthrodesis of hand

49203-00

Arthrodesis of intercarpal joint

Includes: bone graft

procurement of graft through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

...

#### 1461

#### Bone graft of wrist, metacarpus or phalanx of hand

Includes: procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

. . .

#### 1468

#### Other repair procedures on wrist

. . .

49200-00 Arthrodesis of radiocarpal joint

Arthrodesis of wrist

Includes: bone graft

internal fixation

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

. . .

#### **REPAIR**

#### 1488

#### Bone graft to pelvis or hip

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

• • •

# 1489

#### Arthroplasty of hip

90607-00 Resurfacing of hip, unilateral

Birmingham hip resurfacing, unilateral Metal hip resurfacing, unilateral

*Includes:* bone graft

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726 00 [1563])

Excludes: arthroplasty:

partial (49315-00 [1489])total (49318-00 [1489])

90607-01 Resurfacing of hip, bilateral

Birmingham hip resurfacing, bilateral Metal hip resurfacing, bilateral

Includes: bone graft

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

Excludes: arthroplasty:

partial (49315-00 [1489])total (49319-00 [1489])

49318-00 Total arthroplasty of hip, unilateral

Total joint replacement of hip

Includes: bone graft

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

Excludes: hip resurfacing (Birmingham) (90607-00 [1489])

49319-00 Total arthroplasty of hip, bilateral

Total joint replacement of hip

Includes: bone graft

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (96275-1747726-00 [1563])

Excludes: hip resurfacing (Birmingham) (90607-01 [1489])

**REPAIR** 

. . .

. . .

1513 Bone graft to tibia

Code also when performed:

• procurement of graft material through separate incision (96275-1747726 00 [1563])

**MUSCULOSKELETAL - OTHER SITES** 

**EXCISION** 

1561

Excision procedures on joint of other musculoskeletal sites

00000 04 A

90608-01 Arthroscopic procurement of cartilage

90608-00 Procurement of cartilage

▼0030 Procurement of cartilage, living donor Excludes: that with rhinoplasty (45644-00, 45644-02 [1679]) 96275-16 Procurement of chondrocytes for transplantation, posthumous donor **V**0030 Procurement of cartilage, posthumous donor 1563 Other excision procedures on bone of other musculoskeletal sites Procurement of bone for graft via separate incision Excludes: that: • from the same incision - omit code • with rhinoplasty (45644-01, 45644-02 [1679]) 47732-00 Procurement of vascularised pedicle of bone for graft Excludes: that from the same incision 96275-17 Procurement of bone for transplantation, living donor **V**0030 Procurement of vascularised pedicle of bone for graft, living donor • from the same incision — omit code • with rhinoplasty (45644-01, 45644-02 [1679]) Procurement of bone for transplantation, posthumous donor 96275-18 **▼**0030 REPAIR 1569 Graft or flap of other musculoskeletal sites 48239-00 Bone graft, not elsewhere classified Code also when performed: • procurement of bone for graft via separate incision (96275-1747726-00 [1563]) Bone graft with internal fixation, not elsewhere classified 48242-00 Code also when performed: • procurement of bone for graft via separate incision (96275-1747726-00 [1563]) 90583-00 Tendon graft, not elsewhere classified 90583-01 Muscle graft, not elsewhere classified 14206-02 Chondrocyte implantation by cannula **▼**0030 Chondrocyte [cartilage] transplantation by cannula 96275-19 Chondrocyte graft, not elsewhere classified ▼0030 Chondrocyte [cartilage] transplantation NEC

Procurement of chondrocytes for transplantation, living donor

96275-15

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

#### **CHAPTER 16**

# DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718) SKIN AND SUBCUTANEOUS TISSUE

#### **EXCISION**

**Excludes:** that of vascular anomaly (45030-00, 45033-00 [748])

Other excision procedures on skin and subcutaneous tissue

31245-03 Extensive excision of skin and subcutaneous tissue for sycosis, from face or neck

**Note:** Performed for sycosis:

90669-00 Excision of skin for graft

**₹**0030

Includes: repair of secondary defect by suture

Code also when performed:

- repair of secondary defect by graft (see blocks [1645] and [1646])

Excludes: that with graft at same operative episode (see blocks [1641] to [1650])

45653-00 Shaving of rhinophyma

96275-20 Procurement of skin for transplantation, living donor

▼0030

Includes: repair of secondary defect by suture

Code also when performed:

• repair of secondary defect by graft (see blocks [1645] and [1646])

Excludes: that with graft at same operative episode (see blocks [1641] to [1650])

96275-21 Procurement of skin for transplantation, posthumous donor

**▼**0030

. . .

#### **REPAIR**

1655

Other repair procedures on skin and subcutaneous tissue

. . .

45560-00

Transplantation of hair Hair transplant

**▼**0030

**Includes**: procurement of hair for transplantation

. . .

### PLASTIC PROCEDURES ON BONE

#### **REPAIR**

1703

#### Osteotomy or ostectomy of zygoma

Osteoplasty by osteotomy or ostectomy of zygoma

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

• procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: reconstructive osteoplasty of zygoma (90683-00 [1715])

that for correction of orbital dystopia (45776-00, 45779-00 [1711])

that with internal fixation (90680 [1704])

. . .

1704

#### Osteotomy or ostectomy of zygoma with internal fixation

Osteoplasty by osteotomy or ostectomy of zygoma with internal fixation

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

• procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: that for correction of orbital dystopia (45776-00, 45779-00 [1711])

. . .

1705

#### Osteotomy or ostectomy of mandible or maxilla

Mandibular or maxillary osteoplasty by osteotomy or ostectomy

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: complex combinations of osteotomy/ostectomy procedures on mandible or maxilla (45731, 45735-00,

45741-00, 45747-00 [**1707**])

multiple (more than two) procedures on:

- mandible (45731-00 [1707])
- maxilla (45731-01 **[1707]**)

that with internal fixation (45723, 45729 [1706])

٠.

1706

#### Osteotomy or ostectomy of mandible or maxilla with internal fixation

Mandibular or maxillary osteoplasty by osteotomy or ostectomy with internal fixation

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: complex combinations of osteotomy/ostectomy procedures on mandible or maxilla (45732, 45738-00,

45744-00, 45752-00 [**1708**])

multiple (more than two) procedures on:

- mandible (45732-00 [1708])
- maxilla (45732-01 [1708])

. . .

1707

#### Osteotomy or ostectomy of mandible or maxilla, procedures in combination

Mandibular or maxillary osteoplasties by osteotomy or ostectomy, procedures in combination

Includes: bone graft

transposition of nerves and vessels

Note: This block includes multiple osteotomies or multiple ostectomies or a combination of both procedures on

mandible or maxilla or both bones

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: midfacial osteotomies (45753-00 [1709])

that with internal fixation (45732, 45738-00, 45744-00, 45752-00 [1708])

1708

# Osteotomy or ostectomy of mandible or maxilla with internal fixation, procedures in combination

Mandibular or maxillary osteoplasties by osteotomy or ostectomy with internal fixation, procedures in combination

Includes: bone graft

transposition of nerves and vessels

**Note:** This block includes multiple osteotomies or multiple ostectomies or a combination of both procedures on

mandible or maxilla or both bones

Code also when performed:

• genioplasty (45761 [1702])

• procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: midfacial osteotomies (45754 [1709])

. . .

1709

#### Midfacial osteotomies

3 or more osteotomies (osteoplasties) of midface

Osteotomy (osteoplasty):

- Le Fort II
- Le Fort III
- modified Le Fort III (malar-maxillary) (nasomalar)

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

. . .

#### RECONSTRUCTION

1713

#### **Reconstruction of mandible**

- - -

45791-00 Construction of absent condyle and ascending ramus

Note: Performed for hemifacial microsomia

Code also when performed:

• procurement of bone for graft (96275-1747726-00 [1563])

. . .

#### **CHAPTER 19**

### **INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925)**

#### OTHER THERAPEUTIC INTERVENTIONS

1906

Implantation of hormone or transplantation of living tissue or cells

<del>▼0030</del>

96276-06 Transplantation of amniotic stem cells

**▼**0030

Amniotic stem cell therapy

96276-07 Transplantation of adipose-derived stem cells

**▼**0030

Adipose stem cell therapy

```
14203-00
            Direct subdermal hormone implantation
             Insertion of subdermal implant:
             • contraceptive
             • hormone
             Includes: implantation:
                        • oestrogen
                        • progesterone
                        incision
                        suture
14203-01 Direct living tissue implantation
<del>▼0023</del>
             Includes: incision
                        suture
            Living tissue implantation, not elsewhere classified
14203-02
▼0030
14206-00 Hormone implantation by cannula
14206-01 Living tissue implantation by cannula
ACHI Alphabetic Index
Α
Achillotenotomy 49718-01 [1542]
ACI (autologous chondrocyte implantation) 96275-19 [1569]14203 01 [1906]
- by cannula 14206-02 [1569]
Administration (around) (into) (local) (of) (therapeutic agent) NEC — code to block [1920] with extension -19
- indication — see also Administration/specified site OR Administration/type of agent
- - thrombus in central venous catheter (see also Administration/type of agent/thrombolytic) 92058-01 [1922]
- - transplantation (cells) (organ) (tissue) — see Transplant, transplantation
- - varices (endoscopic)
Aspiration
- biopsy — see Biopsy/by site
- bladder
- - percutaneous (closed) (needle) 37041-00 [1092]
- bone marrow for transplantation 13700-00 [801]
- - living donor 13700-01 [801]
- - posthumous donor 13700-02 [801]
- brain 90000-00 [2]
- - cyst 39703-03 [2]
Autotransplant, autotransplantation
- kidney 36503-01 [1058]
- tissue (living)
- - adrenal <u>96276-02</u> [121] 14203-01 [1906]
-- pancreatic 14203-01 [1906]
- - parathyroid 96276-00 [117]14203-01 [1906]
- - thyroid <u>96276-01 [117]14203-01 [1906]</u>
```

#### D

**Donation** 

```
- blood
- - for transfusion 13709-00 [1891]
- - - following apheresis 13755-00 [1892]
- bone marrow 13700 00 [801]
- - living donor 13700-01 [801]
- - posthumous donor 13700-02 [801]
Doppler study
E
Excision — see also Removal
- cartilage NEC 90574-01 [1561]
- - for lesion of skin 31340-00 [1566]
- - - lesion of skin 31340-00 [1566]
- - - transplantation — see Procurement/cartilage
- - arytenoid with microlaryngoscopy 41867-00 [523]
- cornea (lesion) (partial) 42647-00 [170]
- - by laser 42797-03 [168]
- - for transplantation, posthumous donor 96275-06 [161]
- - with excision of limbic tumour 42695-00 [171]
- - phototherapeutic 42810-00 [170]
- craniopharyngioma 39712-02 [125]
- heart
- - for transplantation — see Procurement/heart transplant 90204-00 [659]
    with lung 90204-01 [659]
- - atrium
- - - septum (wall) — see Septectomy
- - pericardium (open) 38456-05 [646]
- - - by thoracoscopy (closed) 38456-06 [646]
- intestine
- - for formation of reservoir
- - - formation of reservoir — see Formation/reservoir
- - - transplantation — see Procurement/intestine
- - with excision of lesion of peritoneal tissue 90328-01 [989]
- - large — see also Colectomy
     for transplantation (cadav
                                   96270-02 [914]
    - living donor 96270-01 [914]
     -- laparoscopic 96270-00 [914]
- - small (with anastomosis) 30566-00 [895]
    for transplantation (cadaver)

    living donor 96269-01 [896]

       - laparoscopic 96269-00 [896]
- - - with
- - - - formation of
- - - - reservoir — see Formation/reservoir
- liver (hemi) (lobe) (partial) (total) 30418-00 [953]
- - for transplantation — see Procurement/liver (cadaver) 96258-03 [953]
- lung (total removal of lung) 38438-02 [553]
- - - lung volume reduction surgery 90170-00 [551]
- - - transplantation — see Procurement/lung
- - - transplant 38438-03 [553]
     - with heart 90204-01 [659]
- - completion, following previous removal of portion of lung 38438-01 [552]
- - partial — see Lobectomy/lung
- - radical (with dissection of mediastinal nodes) 38441-01 [553]
- pancreas 30593-00 [978]
- - for transplantation — see Procurement/pancreas
```

- - - duodenectomy (with formation of stoma) 30584-00 [978]

```
- - - gastrectomy, radical 30524-00 [879]
- - - subtotal 30523-00 [879]
- - - splenectomy 30593-01 [978]
- - distal 30583-00 [978]
- paraganglioma 30321-00 [989]
- skin (subcutaneous tissue)
- - - burn (granulating) — see Excision/burn
- - - graft <u>— see Graft/skin-90669-00 [1634]</u>
- - - hydradenitis (suppurative)
- - - sycosis (barbae) (nuchae)
- - - transplantation — see Procurement/skin
- - eyelid
G
Graft (repair)
- cartilage — see also Transplant, transplantation/cartilage
- - - facial contour restoration — see Reconstruction/face, contour OR Restoration/contours/face
- - - rhinoplasty — see Rhinoplasty/with graft/cartilage
- - - arthroscopic repair of meniscus of knee 49563-00 [1520]
- - - exploration and repair of temporomandibular joint 45873-00 [1362]
- - orbital cavity (floor) (wall)
- - - for reconstruction — see Reconstruction/orbital cavity/with/graft/cartilage
- - to tympanic membrane — see Myringoplasty
- chondral - see also Transplant, transplantation/cartilage
- - with arthroscopic repair of meniscus of knee 49563-00 [1520]
- chondrocutaneous — see Graft/composite
Implant, implantation — see also Insertion

    adipose-derived stem cells <u>96276-07</u> <u>14203-01</u> [1906]

- applicator for brachytherapy (catheters) (needles)
- cardioverter, generator (automatic) (with pacemaker functionality) 38393-00 [653]
- - with replacement 38393-01 [656]
- cartilage (autologous) (chondrocytes) (matrix-induced) 96275-19 [1569]14203-01 [1906]
- - by cannula 14206-02 [1569] 14206-01 [1906]
- directly 14203 01 [1906]
- chondrocytes (autologous) (matrix-induced) 96275-19 [1569] — see Implant, implantation/cartilage
- - by cannula 14206-02 [1569]
- cochlear prosthetic device (multiple channel) (single channel) (unilateral) 41617-02 [334]
- lens, intraocular 42701-00 [193]
- - with cataract extraction — see Extraction/cataract/by approach
- - posterior chamber and suture to iris or sclera 42703-00 [193]
- living tissue NEC 14203-02 [1906]
    -direct implantation 14203-01 [1906]
- micro-bypass surgery stent, trans-trabecular 42504-00 [191]
- middle ear hearing device 41557-04 [334]
- single plane, removable
- - with brachytherapy
- - - high dose rate 15327-06 [1792]
- - - low dose rate 15327-00 [1792]
- - - pulsed dose rate 15327-01 [1792]
- stem cell NEC 14203-02 [1906], adipose-derived 14203-01 [1906]
- - adipose-derived 96276-07 [1906]
- - amniotic 96276-06 [1906]
- stimulator
- - bone growth (by incision) 47920-00 [1554]
```

```
Lobectomy
- liver 30418-00 [953]
- - for transplantation — <u>see Procurement/liver</u>-(cadaver) 96258-03 [953]
    - laparoscopic 96258-01 [953]
- - extended
M
MACE (Malone antegrade continence enema) 30375-30 [927]
MACI (matrix-induced autologous chondrocyte implantation) 96275-19 [1569]14203-01 [1906]
- by cannula 14206-02 [1569]
Maggot debridement therapy (MDT) 96210-00 [1604]
Mastotomy 31551-00 [1742]
Matrix-induced autologous chondrocyte implantation (MACI) 96275-19 [1569]14203-01 [1906]
by cannula 14206-02 [1569]
Maxillectomy — see Resection/bone/maxilla
Nephrectomy
- with
- - ureterectomy (bladder cuff) (open) (total) 36531-01 [1054]
- - - complicated by previous surgery on same kidney (via laparoscopy) 36533-00 [1054]
- - - via laparoscopy 36531-00 [1054]
- complete
- - open (unilateral) (via laparotomy) 36516-01 [1049]
- - - removal of transplanted kidney 36519-01 [1051]
- - - - transplantation <u>see Procurement/kidney (donor kidney)</u>
      cadaver 36516-06 [1050]
   ---- living donor 36516-05 [1050]
- - - bilateral 36516-03 [1049]
0
Ostectomy NEC 90572-00 [1563]
- for graft
- - living donor 96275-17 [1563]
- - posthumous donor 96275-18 [1563]
- bone NEC 90572-00 [1563]
  -- flap, via separate incision 47732-00 [1563]
  - graft, via separate incision 47726 00 [1563]
  accessory 48400-01 [1563]
- carpal — see Carpectomy 48406-14 [1451]
P
Pneumonectomy (total removal of lung) 38438-02 [553]
```

- - lung volume reduction surgery 90170-00 [551]
- - transplanttransplantation see Procurement/lung 38438-03 [553]
- with heart 90204-01 [659]
- completion, following previous removal of portion of lung 38438-01 [552]
- partial see Lobectomy/lung
- radical (with dissection of mediastinal nodes) 38441-01 [553]

#### Procurement (for graft, flap or transplantation)

- adrenal tissue, posthumous donor 96275-03 [119]
- artery for coronary artery bypass see Bypass/arterial/coronary

```
-see Bypass/arterial/coronary

    for coronary artery bypass

- blood — see Collection/blood
- bone (pedicle) (vascularised pedicle)
-- for graft NEC 47726-00 [1563]
   - vascularised pedicle 47732-00 [1563]
- flap for graft 47732-00 [1563]
- - living donor 96275-17 [1563]
- - marrow, for transplantation 13700-00 [801]
- - - living donor 13700-01 [801]
--- posthumous donor 13700-02 [801]
- - posthumous donor 96275-18 [1563]
- - vascularised pedicle for graft 47732-00 [1563]
- cartilage (chondrocytes) 90608-00 [1561]
-- arthroscopic 90608-01 [1561]
- - living donor 96275-15 [1561]
- - posthumous donor 96275-16 [1561]

    chondrocytes

- - living donor 96275-15 [1561]
- - posthumous donor 96275-16 [1561]
- cornea, posthumous donor 96275-06 [161]
- fascia 90577-00 [1565]
   for graft 90577-00 [1565]
- fat-for-graft, via separate incision 45018-04 [1666]
-flap of bone for graft 47732-00 [1563]
- heart 90204-00 [659]
 -- for transplantation
   - with lung 90204-01 [659]
- - with lung(s)
- - - living donor 90204-04 [659]
- - - posthumous donor 90204-05 [659]
- - living donor 90204-02 [659]
- - posthumous donor 90204-03 [659]
- intestine, for transplantation
    cadaver 96270-02 [914]
- - - living donor 96270-01 [914]
- - - - laparoscopic 96270-00 [914]
- - - posthumous donor 96270-02 [914]
- - small
    cadaver 96269-02 [896]
- - - living donor 96269-01 [896]
- - - - laparoscopic 96269-00 [896]
- - - posthumous donor 96269-02 [896]
- islet cells (Langerhans)
- - living donor 96275-13 [978]
- - posthumous donor 96275-14 [978]
- kidney
- - living donor 36516-05 [1050]
- - - laparoscopic 36516-04 [1050]
- - posthumous donor 36516-06 [1050]
  for transplantation (cadaver) 365
   - living donor 36516-05 [1050]
     - laparoscopic 36516-04 [1050]
- limbal stem cells
- - living donor 96275-07 [254]
- - posthumous donor 96275-08 [254]
- liver (hemi) (lobe) (partial) (total)
- - living donor 96258-02 [953]
- - - laparoscopic 96258-01 [953]
- - posthumous donor 96258-03 [953]
   for transplantation (cadaver) 96258-03 [953]
  - - living donor 96258-02 [953]
    - laparoscopic 96258-01 [953]
- lung(s)
- - for transplantation
- - - with heart 90204-01 [659]
- - with heart
- - - living donor 90204-04 [659]
- - - posthumous donor 90204-05 [659]
- - living donor 96275-09 [553]
```

```
- posthumous donor 96275-10 [553]
- muscle 90577-00 [1565]
-- for graft 90577-00 [1565]
- nerve — see Graft/nerve
for graft see Graft/nerve
- pancreas
- - living donor 96275-11 [978]
- - posthumous donor 96275-12 [978]
- parathyroid tissue
- - living donor 96275-00 [116]
- - posthumous donor 96275-01 [116]
- skin - see also Graft/skin
 - for graft 90669-00 [1634]
                                             see Graft/skin
- - living donor 96275-20 [1634]
- - posthumous donor 96275-21 [1634]
- stem cells (from)
- - blood 13750-04 [1892]
- - - with cryopreservation (freezing) 13750-05 [1892]
- - bone marrow 13700-00 [801]
- - - living donor 13700-01 [801]
- - - posthumous donor 13700-02 [801]
<u>- - limbal</u>
- - - living donor 96275-07 [254]
- - - posthumous donor 96275-08 [254]
- tendon 90578-00 [1564]
-- for graft 90578-00 [1564]
- thymus tissue
- - living donor 96275-04 [128]
- - posthumous donor 96275-05 [128]
- thyroid tissue, posthumous donor 96275-02 [116]
- vascularised pedicle of bone for graft 47732-00 [1563]
- - for coronary artery bypass — see Bypass/arterial/coronary
- - limb, for gra
- - - bypass 32760-00 [730]
- - - patch 33551-00 [730]
- - - replacement 32760-00 [730]
R
Reimplantation
- subvalvular structures (heart)
- - with reconstruction 38490-00 [662]
- tissue (living)
- - adrenal <u>96276-02</u> [121] 14203-01 [1906]
-- pancreatic 14203-01 [1906]
- - parathyroid <u>96276-00</u> [117] 14203-01 [1906]
- - thyroid 96276-01 [117]14203-01 [1906]
- ureter
- - with secondary repair for
Removal - see also Excision
- - for transplantation — see Procurement/heart
- - artificial 96229-01 [608]
    for transplant 90204-00 [659]
     with removal of lung 90204-01 [659]
- heterograft — see Removal/xenograft, skin
- intestine — see also Resection/intestine
- - for transplantation — see Procurement/intestine
    -large
    - cavader 96270-02 [914]
     - <del>living donor 96270-</del>01 [914]
      -laparoscopic 96270-00 [914]
   -small
```

```
cadaver 96269-02 [896]
     living donor 96269-01 [896]
      - laparoscopic 96269-00 [896]
- intra-aortic balloon pump 38612-00 [682]
- kidney — see also Nephrectomy
- - for transplantation — see Procurement/kidney
  - from donor

    for transplantation

    cadaver 36516-06 [1050]
    living (open) 36516-05 [1050]
   -- via laparoscopy 36516-04 [1050]
   transplanted 36519-01 [1051]
    via laparoscopy 36519-00 [1051]
- lead(s) (cardiac) (electrodes(s)) — see Removal/electrode(s) lead(s)
- lung — see also Pneumonectomy
- - for transplantation — see Procurement/lung
   - for transplant 38438-03 [553]
     with removal of heart 90204-01 [659]
- lymphocele 90284-02 [812]
Resection — see also Excision
- liver (hemi) (lobe) (partial) (total) 30418-00 [953]
- - for transplantation — see Procurement/liver (cadaver) 96258-03 [953]
--- living donor 96258-02 [953]
     laparoscopic 96258-01 [953]
- - with excision of hydatid cyst of liver (with drainage) 30438-00 [955]
- lung (total removal of lung) 38438-02 [553]
- - - lung volume reduction surgery 90170-00 [551]
- - - transplanttransplantation — see Procurement/lung 38438 03 [553]
---- with heart 90204-01 [659]
- - completion, following previous removal of portion of lung 38438-01 [552]
- - partial — see Lobectomy/lung
- - radical (with dissection of mediastinal nodes) 38441-01 [553]
Т
Therapy
- abrasion — see Abrasion/skin
- adipose-derived stem cell <u>96276-07</u> <u>14203-01</u> [1906]
- adjunctive physical, dental
- - temporomandibular joint 97971-00 [489]
- adoptive cell — see Therapy/cell
- amniotic stem cell 96276-06 [1906]
- art 96181-00 [1873]
- spiritual ritual 96240-00 [1915]
- stem cell, adipose-derived 14203-01 [1906]
- - adipose-derived 96276-07 [1906]
- - amniotic 96276-06 [1906]
- stimulation (using electrophysical agent) NEC 96155-00 [1880]
Thrombectomy
- artery (with stenting) 90230-00 [702]
- - popliteal 33806-10 [702]
- - - bypass 33806-12 [703]
- - pulmonary 33806-13 [702]
- - radial 33806-02 [702]
- - - bypass 33806-12 [703]
- - renal 33806-06 [702]
```

```
Transplant, transplantation
- adrenal tissue 96276-02 [121]14203-01 [1906]
- artificial heart 96229-00 [608]
- bone marrow (stem cell) 13706 [820]
- cartilage (autologous) (chondrocytes) (matrix-induced)] 96275-19 [1569]14203-01 [1906]
- - by cannula 14206-02 [1569]14206-01 [1906]
      ectly 14203-01 [1906]
- chondrocytes (autologous) (matrix-induced) — see Transplant, transplantation/cartilage
- intestine
- - large 96270-03 [917]
- - small 96269-03 [901]
- islet cells (Langerhans)
- - allogeneic 96276-04 [981]
 - autologous 96276-05 [981]
- kidney (with anastomosis) 36503-00 [1058]
- pancreas 90324-00 [981]
- parathyroid tissue 96276-00 [117]14203-01 [1906]
- peripheral blood stem cells 13706 [820]
- skin — see Graft/skin
- stem cell NEC 14203-02 [1906] 13706 [820]
- - adipose-derived 96276-07 [1906] 14203-01 [1906]
- - amniotic 96276-06 [1906]
- - haematopoietic 13706 [820]
- - limbal 90065-00 [174]
- tendon 47966-00 [1572]
- testis to scrotum — see Fixation/testis
- thymus (tissue) 96276-03 [129]14203 01 [1906] - thyroid tissue 96276-01 [117]44203 01 [1906]
- tooth (bud) 97388-00 [461]
```

# **Australian Coding Standards**

# 0030 ORGAN, TISSUE AND CELL PROCUREMENT AND TRANSPLANTATION

For guidance regarding:

- intervention not completed see ACS 0019 Intervention abandoned, interrupted, not completed, or failed
- anaesthesia see ACS 0031 Anaesthesia.

#### 1. AUTOLOGOUS DONATION

#### Description(s)

Autologous donation involves a person (with a known disease) donating their own cells or tissue for reinfusion/transplantation at a later stage.

#### **Directive(s)**

#### **1.1** Assign:

- an ICD-10-AM code for the condition requiring the reinfusion/transplantation
- · ACHI codes for interventions performed during the episode of care.

#### 2. ALLOGENEIC DONATION

#### **Description(s)**

Allogeneic donation involves procuring organ(s)/tissue/cells from one person, for infusion/transplantation into another person.

<u>Domino transplant</u> — involves a person receiving and donating organs during the same episode of care (eg receives heart and lungs, and donates lungs).

### **Directive(s)**

#### **Live donation**

- **2.1** Assign one of the following as principal diagnosis:
  - · a code from category Z52 Donors of organs and tissues (see Example 1)
  - · Z51.81 Apheresis.
- **2.2** Assign Z53.31 *Living donor organ procurement attempted but not completed* as an additional diagnosis where organ procurement is intended but does not take place.
- **2.3** Assign ACHI codes for interventions performed during the episode of care (see Example 1).

# <u>Donation from deceased (posthumous) donor (following death in hospital)</u> In the (initial) episode of care during which the donor dies

**2.4** Assign Z00.5 Examination of potential donor of organ and tissue as an additional diagnosis to indicate intent to procure, even if the organ(s)/tissue are not subsequently procured (see Example 2).

Z00.5 does not have to meet the criteria in ACS 0002 Additional diagnoses.

**2.5** Do not assign ACHI code(s) for procurement during this episode of care.

#### In the procurement episode of care

#### **2.6** Assign:

- a principal diagnosis code from category Z52 Donors of organs and tissues see the ICD-10-AM Alphabetic
   Index: Donor, donation. For multiple organ and tissue procurements, other than heart and lungs alone, assign
   Z52.88 Donor of multiple organs and tissues (see Examples 2 and 3)
- do not assign codes for diagnoses from the initial episode, or cause of death, as these will already have been coded in the episode of care in which the donor died
- <u>Z53.32 Posthumous organ procurement attempted but not completed</u> as an additional diagnosis where organ procurement is intended but does not take place. (see Example 3)
- · ACHI codes for posthumous organ procurement performed during the episode of care see ACHI Alphabetic

  Index: Procurement (see Example 2)
- 96231-00 [1886] Machine perfusion for organ transplantation as an additional code if machine perfusion was used during organ procurement. Assign this code once only for an episode of care, irrespective of the number of organs procured or devices used.

#### Transplantation of organ(s)/tissue/cells

#### **2.7** Assign:

- a code for the condition requiring the transplanted organ(s)/tissue/cells
- ACHI transplantation code(s) see ACHI Alphabetic Index: *Transplant, transplantation*.

**Do not** assign codes for the removal of the diseased or dysfunctional organ(s).

#### **Domino transplantation**

#### **2.8** Assign:

- a code for the condition requiring the transplanted organ(s)/tissue/cells
- an additional diagnosis code from category Z52 for the donated organ or tissue see ICD-10-AM Alphabetic Index: *Donor, donation*

A code from category Z52 does not have to meet the criteria in ACS 0002.

- ACHI transplantation code(s) see ACHI Alphabetic Index: *Transplant, transplantation*
- ACHI code(s) for procurement see ACHI Alphabetic Index: *Procurement*.

#### Exception(s)

1. **Do not** apply the *Directive(s)* in this ACS for reproductive medicine procedures.

#### **EXAMPLE 1:**

Patient was admitted to donate their left kidney to their brother. Laparoscopic left nephrectomy was successfully performed.

Assign: Z52.4 Kidney donor

36516-04 [1050] Laparoscopic procurement of kidney for transplantation, living donor

<u>Anaesthesia</u>

**Rationale:** Z52.4 — principal diagnosis for a live donor (*Directive* 2.1)

36516-04 [1050] — for the intervention performed during the episode of care (*Directive* 2.3)

#### **EXAMPLE 2:**

Patient was brought in with a catastrophic intracranial haemorrhage incompatible with life and declared brain dead by clinicians in intensive care. Patient noted to be an organ donor and family members agreed to multiple organ donation (heart, lung and kidneys). Patient remained on life support and was prepared for posthumous organ procurement.

#### **Episode of care during which the donor dies**

<u>Assign:</u> <u>I62.9</u> <u>Intracranial haemorrhage (nontraumatic), unspecified</u>

<u>Z00.5</u> Examination of potential donor of organ and tissue

Rationale: I62.9 — ACS 0001 Principal diagnosis

Z00.5 — to indicate intent to procure, even if the organ(s)/tissue are not subsequently procured

(Directive 2.4)

#### **Procurement episode of care**

In the procurement episode of care the heart, lungs and kidneys were successfully procured.

Assign: Z52.88 Donor of multiple organs and tissues

90204-05 [659] Procurement of heart and lungs for transplantation, posthumous donor

36516-06 [1050] Procurement of kidney for transplantation, posthumous donor 36516-06 [1050] Procurement of kidney for transplantation, posthumous donor

Rationale: Z52.88 — principal diagnosis for a deceased (posthumous) donor of multiple organs and tissues in

the procurement episode of care (Directive 2.6)

90204-05 [659], 36516-06 [1050] — for the posthumous organ procurement performed during the

procurement episode of care (Directive 2.6)

#### **EXAMPLE 3:**

Patient was declared brain dead by clinicians in intensive care. Family members agreed to posthumous organ donation of the kidneys and liver. During the organ procurement, a tumour was noted on the appendix, which was removed and confirmed by frozen section to be a high grade mucinous adenocarcinoma. Due to the risk of wider spread of the neoplasm, the procurement of kidneys and liver did not progress.

#### **Procurement episode of care**

Assign: Z52.88 Donor of multiple organs and tissues

Z53.32 Posthumous organ procurement attempted but not completed

C18.1 Malignant neoplasm of appendix

<u>M8480/3</u> <u>Mucinous adenocarcinoma</u>

30571-00 [**926**] Appendicectomy

Rationale: Z52.88 — principal diagnosis for a deceased (posthumous) donor of multiple organs and tissues in

the procurement episode of care (Directive 2.6)

Z53.32 — to identify that organ procurement was intended but did not take place (*Directive* 2.6)

<u>C18.1, M8480/3, 30571-00 [926] — ACS 0019</u> <u>Intervention abandoned, interrupted, not</u>

completed, or failed

#### 0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

See also 4.2 Diabetes mellitus.

#### 8. CURED OR QUIESCENT DM/DM IN REMISSION

#### Directive(s)

#### Type 1 diabetes mellitus

**8.1**..

• Z94.83 Pancreas transplant status **or** Z94.84 Islet cell transplant status.

<u>...</u>

#### 3. Minimally invasive interventions

A block has been created to centralise codes that are not interventions in their own right but describe aspects of another intervention (ie flag codes).

The following refinements have been made in ACHI and the ACS:

#### **ACHI Tabular List**

**CHAPTER 10** 

#### PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011)

ABDOMEN, PERITONEUM AND OMENTUM

**INCISION** 

984

Laparoscopy

30390-00

Laparoscopy

Diagnostic [exploratory] laparoscopy

Excludes: that:

• as operative approach NEC (30390-01 [1926])

• with any intervention at the same site in Chapters 1–18 — omit code

..

#### **OTHER PROCEDURES**

1011 Other procedures on digestive system

90334-00 Transjugular intrahepatic portosystemic shunt [TIPS]

90343-00 Endoscopic procedure proceeding to open procedure

∇ 0023

Endoscopic procedure NEC proceeding to open procedure
Minimally invasive procedure NEC proceeding to open procedure

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

∇ 0023

Code first:

• open surgical procedure(s) performed

90335-00 Other diagnostic procedures on the digestive system

Note: For nonsurgical diagnostic interventions see Chapter 19

90335-01 Other procedures on the digestive system

...

#### **CHAPTER 15**

#### PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360-1580)

#### **MUSCULOSKELETAL - OTHER SITES**

#### **OTHER PROCEDURES**

1579 Other procedures for other musculoskeletal sites

50102-00 Arthroscopic procedure of joint, not elsewhere classified

90613-00 Arthroscopic procedure proceeding to open procedure

∇ 0023

Includes: percutaneous minimal access approach

Code first:

• open surgical procedure(s) performed

#### **CHAPTER 19**

#### INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–19265)

#### INTERVENTIONS NOT ELSEWHERE CLASSIFIED

#### INTERVENTIONS NOT ELSEWHERE CLASSIFIED

1923

**Technology-assisted interventions** 

∇ 0023

Code first:

• procedure(s) performed

Excludes: computer-assisted image:

• guidance — see Alphabetic Index • intensifier — see Alphabetic Index

stereotactic localisation — see Alphabetic Index

96234-01 Percutaneous endoscopic-assisted intervention, not elsewhere classified

Includes: minimally invasive spinal surgery [MISS] approach

transoral endoscopic vestibular approach [TOEVA]

Note: Percutaneous endoscopic approach involves access through one or more minor incisions in the skin and

subcutaneous layers or mucous membrane, allowing passage of endoscopic instruments to visualise the

operative site and guide the procedure.

Excludes: that via:

• arthroscopy (50100-00 [1555])

• laparoscopy (<u>30390-01</u> [**1926**]<del>30390-00</del> [**984**])

• neuroendoscopy (40903-00 [1])

• percutaneous nephroscopy (36627-00 [1043])

• thoracoscopy (38436-00 **[559]**)

#### 1926 Supplementary codes for interventions, not elsewhere classified

∇ 0023

Note: Codes in this block (flag codes) do not identify interventions in their own right but describe aspects of another intervention. Assign codes in this block only in addition to a code from Chapters 1–18.

Code first:

• open surgical procedure(s) performed

Laparoscopic approach, not elsewhere classified 30390-01

Excludes: laparoscopic procedure proceeding to open procedure (90343-03 [1926])

that with any laparoscopic intervention at the same site in Chapters 1–18 — omit code

90343-02 Endoscopic procedure proceeding to open procedure

Endoscopic procedure NEC proceeding to open procedure

Minimally invasive procedure NEC proceeding to open procedure

Includes: minimal access approach (via):

• percutaneous

• transluminal

**Excludes:** that via:

• arthroscopy (90613-01 [1926])

• laparoscopy (90343-03 [1926])

90343-03 Laparoscopic procedure proceeding to open procedure

90613-01 Arthroscopic procedure proceeding to open procedure

Includes: percutaneous minimal access approach

#### **ACHI Alphabetic Index**

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- laparoscopic 30445-00 [965]
- - proceeding to open cholecystectomy 90343-03 [1926] 90343-01 [1011]
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      condition and Intervention/specified site.
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- - aplasia, radial (centralisation) 50399-00 [1438]
- - blepharoptosis
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- - revision of levator sutures following previous correction of blepharoptosis 45625-00 [1687]
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- - - by injection 37415-00 [1192]
- - - decompression 37393 [1193]
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- Nissen's fundoplication — see Fundoplasty/abdominal approach OR Fundoplasty/laparoscopic approach
- nose NEC 90133-00 [381]
   diagnostic NEC 41653-01 [370]
- Obwegeser
- - for reconstruction of glenoid fossa, zygomatic arch and temporal bone 45788-00 [1717]
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- - vestibuloplasty (open) (oral) (submucosal) 45837-02 [406]

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- oesophagus NEC 90301-00 [869]
-- intrathoracic NEC 38456-20 [869]
- omentum NEC 90331-00 [1004]
- orbit NEC 90083-00 [229]
- osseointegration — see Osseointegration
- ossicles of ear NEC 90115-00 [320]
- ovary NEC 90431-00 [1247]
 palate NEC 90143-01 [408]
- Panas (linear proctotomy) 90338-00 [930]

    pancreas NEC 90326-00 [982]

 parathyroid gland NEC 90040-00 [117]
penis NEC 90405-01 [1202]
  for sex transformation NEC 90405-00 [1202]
- Pereyra (transvaginal needle suspension) (with prosthesis) 37043-00 [1110]
pericardium (intrathoracic) (without cardiopulmonary bypass) NEC 38456-00 [666]
  with cardiopulmonary bypass NEC 38653-00 [666]
 peritoneum NEC 90331-00 [1004]
- pharynx NEC 90147-00 [422]
 pineal gland (body) NEC 90043-00 [123]
- Pirogoff (disarticulation through ankle) 44361-00 [1533]
- Pitanguy (abdominoplasty) 30177-00 [1666] - pituitary gland NEC 90044-00 [126]
- pleura (open) NEC 38456-02 [558]
- - closed (percutaneous) 38456-35 [558]
 - endoscopic 38456-36 [558]
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]
- prostatic urethral lift (PUL) (Urolift) 90409-00 [1160]
- pull-through, definitive anastomosis with intestinal resection (for Hirschsprung's disease) 43993-01 [934]
- pulmonary valve (intrathoracic) (without care
                                             liopulmonary bypass) NEC 38456-18 [638]
-- with cardiopulmonary bypass 38653-07 [638]
- punctum snip 42617-00 [244]
- Putti-Platt (capsulorrhaphy of shoulder for recurrent dislocation) (open) 48930-00 [1404]
- - arthroscopic 48957-00 [1404]
- Racz (epidural adhesiolysis) 39140-00 [32]
- Ramstedt's (pyloromyotomy) 43930-00 [873]
- Rashkind procedure (balloon septostomy) (blade septostomy) 38270-00 [619]
- Raz (transvaginal needle suspension) (with prosthesis) 37043-00 [1110]
-rectum NEC 90314-00 [942]
- retina NEC 90080-00 [214]
- robotic-assisted <u>— see Robotic-assisted intervention</u> NEC (see also Robotic-assisted intervention) 96233-00 [1923]
  - digestive system (gastrointestinal) 96233-02 [1923]
  - genitourinary system 96233-03 [1923]
    musculoskeletál system 96233-01 [1923]
   - nervous system 96233-04 [1923]
 salivary gland or duct NEC 90140-00 [399]
- Schauta (radical vaginal hysterectomy) 35667-01 [1269]
- - laparoscopically assisted 35667-03 [1269]
- sclera NEC 90072-00 [184]
-- buckling, for repair of retinal detachment 42776-00 [212]
- scleral buckling 42776-00 [212]
- Scopinaro, for obesity (open) 30512-02 [889]
- - laparoscopic 30512-01 [889]
- scrotum NEC 90398-01 [1176]
-- diagnostic 90398-00 [1176]
-- seminal vesicle NEC 90395-01 [1170]
- SEMLS — see Single event multilevel surgery (SEMLS)
- Senning (insertion of intra-atrial baffle) 38745-00 [603]
- septum, heart (intrathoracic) (without cardiopulmonary bypass) 38456-12 [620]
 - with cardiopulmonary bypass 38653-03 [620]
- - pelvis 50393-00 [1488]
- - vaginal obturator (paravaginal) (with prosthesis) 37044-01 [1110]
- Simmond's shell (management of postoperative hypotony/fistula using tamponade device) 42746-05 [191]
- single event multilevel surgery — see Single event multilevel surgery (SEMLS)
- sinus lift 45849-00 [388]
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nasal — see also Procedure/nasal sinus
   - lift 45849-00 [388]
- Sistrunk's (excision of thyroglossal cyst) 30313-00 [116]
- skin (subcutaneous tissue) NEC 90676-00 [1660]
-skull NEC 90007-01 [28]
   diagnostic 90007-00 [28]
          y 50200-00 [1560]
- sling (for stress incontinence)
- - female 35599-00 [1110]
- - - revision 35599-01 [1110]
- - intestinal, prior to radiotherapy 32183-00 [925]
- - male 37044-00 [1109]
- - - revision 37044-03 [1109]
- Soave 43993-01 [934]
- spermatic cord NEC 30644-12 [1189]
 spinal (canal) (cord) (meninges) NEC 90011-01 [59]
   diagnostic 90011-00 [59]
   excision NEC 90011-06 [54]
   repair NEC 90011-02 [55]
 spine NEC 90011-10 [1393]
- Stamey (transvaginal needle suspension) (with prosthesis) 37043-00 [1110]
- Steindler release (plantar fasciotomy of foot) 49854-00 [1530]
- Stephen-Fowler — see Fixation/testis
- stereotactic — see Stereotactic procedure
- sterilisation
- - female (bilateral) (unilateral)
- - - - electrodestruction — see Electrodestruction/fallopian tube
- - - - salpingectomy — see Salpingectomy
- - - laparoscopic 35688-00 [1257]
- - - open abdominal approach (via laparotomy) 35688-02 [1257]
- - - vaginal approach 35688-01 [1257]
- - male
- - - - ligation 30644-02 [1179]
- - - - vasectomy (bilateral) 37623-03 [1183]
- - - - unilateral 37623-02 [1183]
- Sting (injection into ureteral orifice) 36851-00 [1092]
- Strassman (laparoscopic) (repair of bicornuate uterus) 35680-00 [1272]
- - via laparotomy 35680-01 [1272]
- Stretta 30478-22 [856]
- Syme (disarticulation through ankle) 44361-00 [1533]
- syndactyly 90673-00 [1655]
- tarsal strip — see Tarsal strip
- technology-assisted NEC 96234-00 [1923]

    temporal bone NEC 90116-00 [328]

-tendon NEC 90593-01 [1579]
--diagnostic NEC 90593-00 [1579]
  extraocular NEC 90081-00 [220]
   plastic NEC 47963-01 [1572]
  sheath NEC 47972-00 [1572]
- tension-free vaginal tape 35599-00 [1110]
- - removal 37340-00 [1110]
- - revision 35599-01 [1110]
- TEST (tubal embryo stage transfer) 13215-02 [1297]
- testis NEC 90401-01 [1189]
  - diagnostic 90401-00 [1189
- therapeutic NEC 92205-00 [1908]
- Thiersch (insertion of wire for anorectal prolapse) 32120-00 [929]
- thymus NEC 90045-00 [129]
- thyroid gland NEC 90041-00 [117]
- to assist delivery NEC 90477-00 [1343]
- tongue NEC 90137-00 [394]
  tonsils NEC 90146-00 [415]
- Torek-Bevan — see Fixation/testis
- Torkildsen's (ventriculocisternostomy) 40000-00 [19]
      nea NEC 90162-00 [542]
- transobturator suburethral tape (TOT) 35599-00 [1110]
- - removal 37340-00 [1110]
- - revision 35599-01 [1110]
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- transvaginal tension-free tape (TVT) 35599-00 [1110]
- - removal 37340-00 [1110]
- - revision 35599-01 [1110]
-tricuspid valve (intrathoracic) (without cardiopulmonary bypass) NEC 38456-17 [635]
-- with cardiopulmonary bypass 38653-06 [635]
- Tripier flap — see Flap/eyelid/for reconstruction
- tubal embryo stage transfer (TEST) 13215-02 [1297]

    tunica vaginalis NEC 90398-01 [1176]

  diagnostic 90398-00 [1176]
tympanic membrane NEC 90114-00 [316]
ureter NEC 90358-00 [1088]
 urethra NEC 90365-00 [1125]
- urethral lift, prostatic (PUL) (Urolift) 90409-00 [1160]
- urinary system NEC 90366-00 [1129]
  - bladder NEC 90363-01 [1111]
  - diagnostic NEC 90363-00 [1111]
  kidney NEC 90354-00 [1064]
  ureter NEC 90358-00 [1088]
  urethra NEC 90365-00 [1125]
 uterus NEC 90436-00 [1273]
- uvula NEC 90143-02 [408]
· vagina NEC 90438-00 [1288]
 vas deferens NEC 30644-12 [1189]
 vascular NEC 90223-01 [777]
  - artery NEC 90222-00 [720]
   - heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-19 [681]
    - with cardiopulmonary bypass 38653-08 [681]
 - vein NEC 90222-01 [739]
   -heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-19 [681]
    - with cardiopulmonary bypass 38653-08 [681]
 ventricle, heart (intrathoracic) (without cardiopulmonary bypass) NEC 38456-14 [615]
-- with cardiopulmonary bypass 38653-02 [615]
- Virag procedure (microvascular small vessel bypass for penile erection failure) 90405-01 [1202]
- vitreous (eye) NEC 90078-00 [208]
- vulva NEC 90441-00 [1295]
- Whipple's (pancreaticoduodenectomy) 30584-00 [978]
- Zadek's (radical excision of ingrown toenail) (Zadik's) 47918-00 [1632]
- zygote intrafallopian (ZIFT) 13215-02 [1297]
Т
Tattoo, tattooing (India ink) (markers) (radiolucent) (SPOT)
- cornea 90067-00 [176]
Technology-assisted intervention NEC 96234-00 [1923]
Telemetry (cardiac) 92057-00 [1857]
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#### **Australian Coding Standards**

#### **0023 MINIMALLY INVASIVE INTERVENTIONS**

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#### **Operative approach**

Endoscopic approach to an operative site may be:

• • •

Mini-laparotomy (minimally incised laparotomy) — is an assistive technique that is used to facilitate removal of an organ or large specimen, and is inherent in the laparoscopic intervention in which it is performed.

## 4. Revised ACS Specialty standards for multiple or unspecified diagnoses and interventions

See also 19.7 Retired and revised ACS Chapter 19.

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in the ACS:

Australian Coding Standard	Revision
0008 Sequelae	Incorporation of the content of retired ACS 1912 Sequelae of injuries, poisoning, toxic effects and other external causes.
0020 Bilateral/multiple interventions	Addition of Examples with the addition of a <i>Description</i> for one entry/approach to provide clarity. Relocation of graft to eyelid to 1.3 <i>Interventions with no code option for bilateral.</i>
0024 Panendoscopy, oesophagoscopy and ileoscopy	Revised ACS title and expansion of the Examples.
0026 Admission for clinical trial or therapeutic drug monitoring	Addition of a <i>Directive</i> for patients receiving therapeutic treatment for a definitive diagnosis as part of clinical trial and Example.
0031 Anaesthesia	Deletion of duplicate information that is in ACHI blocks [1333], [1909] and [1910].
0052 Same-day endoscopy — surveillance	Addition of <i>in situ</i> neoplasms to the list of diseases that have the potential for malignant transformation or invasion (spread).

#### **Australian Coding Standards**

#### 0008 SEQUELAE

## 2. SEQUELAE OF INFLAMMATORY DISEASES OF THE CENTRAL NERVOUS SYSTEM

#### **Directive(s)**

- **2.1** Code first the sequela (current, residual condition) (see Example 4).
- **2.2** Assign G09 Sequelae of inflammatory diseases of central nervous system where conditions classified to categories G00, G03, G04, G06 and G08 are the underlying cause of sequelae see the Alphabetic Index Section I Alphabetic index of diseases and nature of injury: Sequelae.

2.3 Sequelae of inflammatory diseases of the central nervous system classified using the aetiology and manifestation convention (dagger and asterisk system) — categories G01\*, G02\*, G05\* and G07\* — are classified to sequelae of the underlying condition (dagger).

Where there is no sequelae category for the underlying (dagger) condition, assign a code for the underlying condition itself (see Example 4).

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Example 4:			
Patient was admitted with blindness due to previous tuberculous brain abscess.			
Assign:	H54.0 Blindness, binocular		
	B90.0 Sequelae of central nervous system tuberculosis		
Rationale:	H54.0 — for the sequela (coded first) ( <i>Directive</i> 2.1)		
	<u>B90.0</u> — for the underlying cause of the sequela by following the Alphabetic Index Section I:		
	Sequelae/tuberculosis/central nervous system (Directive 1.2)		
	G09 Sequelae of inflammatory diseases of central nervous system is <b>not</b> assigned, as tuberculous		

brain abscess is classified using the dagger and asterisk system (A17.8† G07\*). Sequelae of conditions classified to G07\* are classified to sequelae of the underlying condition (dagger)

#### 0020 BILATERAL/MULTIPLE INTERVENTIONS

(Directive 2.3).

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## 2.2 The same intervention is repeated during a single visit to theatre, involving one entry point/approach and similar/same lesions

#### Description(s)

One entry point/approach refers to the primary incision/approach, regardless of how many incisions are subsequently performed to gain further access, once primary entry is gained.

Example 1:			
Patient was admitted for sterilisation by laparoscopic occlusion of their left and right fallopian tubes.			
Assign:	35688-00 [1257] Laparoscopic sterilisation		
	<u>Anaesthesia</u>		
Rationale:	e: 35688-00 [1257] — assigned once, as sterilisation is (usually) a bilateral intervention (ie disruption		
of both fallopian tubes is required to achieve effective sterilisation, if the patient has two			
	fallopian tubes) (Directive 1.1.1)		

Example 2:				
Patient was admitted for tonsillectomy.				
Assign:	41789-00 [412] Tonsillectomy without adenoidectomy			
	<u>Anaesthesia</u>			
Rationale:	41789-00 [412] — assigned once, as tonsillectomy is inherently bilateral (ie both left and right			
tonsils are removed) (Directive 1.2.1)				

#### Example 3:

<u>Patient was admitted for open reduction with internal fixation of fractures of the left distal humerus and right distal humerus.</u>

Assign: 47459-01 [1414] Open reduction of fracture of distal humerus with internal fixation

47459-01 [1414] Open reduction of fracture of distal humerus with internal fixation

**Anaesthesia** 

**Rationale:** 47459-01 [1414] — assigned twice for the bilateral interventions, as there is no bilateral code

option (Directive 1.3.1)

#### Example 4:

Patient was admitted for removal of multiple polyps from the maxillary antrum.

Assign: 41716-03 [385] <u>Intranasal removal of polyp from maxillary antrum</u>

Anaesthesia

Rationale: 41716-03 [385] — assigned once for removal of multiple polyps, even though polyp (singular) is in

the code title (*Note* 6)

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#### Example 6:

Patient was admitted for laparoscopic aspiration of multiple ovarian cysts.

Assign: 35518-00 [1240] Aspiration of ovarian cyst

<u>Laparoscopy</u> <u>Anaesthesia</u>

Rationale: 35518-00 [1240] — assigned once as the same intervention (aspiration) was repeated during a visit

to theatre involving one entry point and the same lesions (cysts) (Directive 2.2.1)

#### Example 7:

Patient was admitted for suturing of a lacerated tendon and a lacerated artery in the hand, through a single incision.

Assign: 47963-02 [1467] Repair of tendon of hand, not elsewhere classified

90209-03 [708] Direct closure of other artery

**Anaesthesia** 

Rationale: 47963-02 [1467], 90209-03 [708] — as the same type of intervention (suturing) was repeated

during a single visit to theatre, involving one entry point/approach (single incision) and different

lesions (lacerated tendon and lacerated artery) (Directive 2.3.1)

#### Example 8:

Patient was admitted for arthrodesis of the ankle and first metatarsophalangeal joint (foot).

Assign: 49712-00 [**1543**] *Arthrodesis of ankle* 

49845-00 [1543] Arthrodesis of first metatarsophalangeal joint

Anaesthesia

Rationale: 49712-00 [1543], 49845-00 [1543] — as the same type of intervention (arthrodesis) was repeated

during a single visit to theatre, involving more than one entry point/approach and more than one

non-bilateral site (ankle and foot) (Directive 2.4.1)

#### Example 13:

Patient was admitted for removal of three teeth.

97311-03 **[457**] Assign: Removal of 3 teeth or part(s) thereof

Anaesthesia

Rationale: 97311-03 [457] — once as the code includes the number of teeth removed (*Directive* 2.6.1)

#### Example 14:

Potient was admitted for adontonlasty on six teeth

ration was admitted for odomopiasty on six teetin.			
Assign:	97171-00 <b>[455]</b>	Odontoplasty, per tooth	
	<u>97171-00 [<b>455</b>]</u>	Odontoplasty, per tooth	
	<u>97171-00 [<b>455</b>]</u>	Odontoplasty, per tooth	
	<u>97171-00 [<b>455</b>]</u>	Odontoplasty, per tooth	
	<u>97171-00 [<b>455</b>]</u>	Odontoplasty, per tooth	
	<u>97171-00 [<b>455</b>]</u>	Odontoplasty, per tooth	
	<u>Anaesthesia</u>		
Rationale:	97171-00 [455] — six times for the number of odontoplasties performed, as the code title is 'per		
tooth' (Directive 2.6.1)			

#### Example 15:

Patient was admitted for pulpotomy of four teeth.			
Assign:	97414-00 <b>[462]</b>	<u>Pulpotomy</u>	
	<u>97414-00 [<b>462</b>]</u>	<u>Pulpotomy</u>	
	<u>97414-00 [<b>462</b>]</u>	<u>Pulpotomy</u>	
	<u>97414-00 [<b>462</b>]</u>	<u>Pulpotomy</u>	
	<u>Anaesthesia</u>		
Rationale:	97414-00 <b>[462]</b> — four times for the number of pulpotomies performed, as the code does not		
include the number of teeth involved (Directive 2.6.1)			

### 0024 PANENDOSCOPY, OESOPHAGOSCOPY AND ILEOSCOPY

#### Directive(s)

#### Upper digestive tract panendoscopy

1. Assign a code from blocks [1005] to [1008] for panendoscopy of the upper digestive tract (excluding oesophagus <u>alone</u>) — see the Alphabetic Index: *Panendoscopy* (see Example 1).

#### Oesophagoscopy (endoscopy of the oesophagus alone)

2. Assign a code from blocks [850] to [853], [856], [861] and [862] — see the Alphabetic Index: Oesophagoscopy.

#### Lower digestive tract panendoscopy

**3.** Assign a colonoscopy code for panendoscopy of the lower digestive tract — see the Alphabetic Index: *Colonoscopy* (see Example 2).

#### **Endoscopy of the ileum (ileoscopy)**

**4.** Assign a code from blocks [1005] to [1008] for ileoscopy — see the Alphabetic Index: *Ileoscopy*.

#### Panendoscopy of nondigestive tract sites

<u>**5.**</u> Assign a code for endoscopy of the furthest site viewed — see the Alphabetic Index (see Examples 3 and 4).

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## 0026 ADMISSION FOR CLINICAL TRIAL OR THERAPEUTIC DRUG MONITORING

#### 1. CLINICAL TRIAL

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#### **Directive(s)**

- **1.1** Assign Z00.6 *Examination for normal comparison and control in clinical research programme* as principal diagnosis for admission for a clinical trial for research purposes (see Example 1).
- **1.2 Do not** assign Z00.6 as an additional diagnosis for patients with a definitive diagnosis receiving therapeutic treatment or a placebo as part of a clinical trial (see Example 2).

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#### Example 1:

Patient was admitted for a bronchoscopy, for a clinical research project (trial).

Assign: Z00.6 Examination for normal comparison and control in clinical research programme

**Rationale:** Z00.6 — for admission for a clinical trial for research purposes (*Directive* 1.1)

#### Example 2:

Patient was admitted with an acute myocardial infarction (AMI) and consented to participate in a placebo-controlled clinical trial for the AMI during the episode of care.

Assign: Principal diagnosis Acute myocardial infarction

**Rationale:** AMI — ACS 0001 *Principal diagnosis* 

Z00.6 Examination for normal comparison and control in clinical research programme is not assigned, as there is a definitive diagnosis receiving therapeutic treatment or a placebo as part of a clinical trial (*Directive* 1.2).

#### 0031 ANAESTHESIA

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#### **1. CEREBRAL ANAESTHESIA**

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#### Directive(s)

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#### **1.3** Assign 92515-XX [**1910**] *Sedation*:

- · for 'sedation' (see Examples 2 and 4)
- where anaesthetic drugs are administered by intravenous or intramuscular route, inhalation, or a combination of methods, and there is no evidence of the use of an artificial airway.

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#### Exception(s)

#### 1. **Do not** assign 92515-XX [1910] *Sedation*:

- when ongoing sedation is administered with continuous ventilatory support for comfort measures, control of anxiety or pain relief
- for transmucosal sedation (eg intranasal, oral, buccal, sublingual).

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#### 0052 SAME-DAY ENDOSCOPY — SURVEILLANCE

#### **Description(s)**

This standard applies to admissions for endoscopic surveillance of any body system for diagnostic purposes and are:

•••

• screening of diseases that have the potential for malignant transformation or invasion (spread) — such as in situ neoplasms and pre-malignant conditions including, Barrett's oesophagus, hyperplastic polyps and familial adenomatous polyposis (FAP) (see Examples 8, 11 and 12).

# Specialty standards for other specified diagnoses and interventions

## 1. Certain infectious and parasitic diseases

#### 1.1 HIV

Application of the ACS template led to the following refinements in ICD-10-AM and the ACS:

- manifestations of HIV now assigned in accordance with ACS 0001 and ACS 0002
- multiple manifestations can now be coded
- removal of instruction to code Kaposi's sarcoma at each subsequent episode of care.

#### **ICD-10-AM Tabular List**

C46
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#### Kaposi sarcoma

**▼**0102

A malignant neoplasm that generally develops in people with compromised immune systems including those with acquired immune deficiency syndrome (AIDS). The aetiological agent for Kaposi sarcoma is Human Herpes Virus (HHV-8) (also known as Kaposi Sarcoma Herpes Virus (KSHV)) that may be listed as a causative agent.

Includes: morphology code M9140 with behaviour code /3

C46.0 Kaposi sarcoma of skin

Kaposi sarcoma of skin of genitals

C46.1 Kaposi sarcoma of soft tissue

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#### **ICD-10-AM Alphabetic Index**

#### S

Status (post) — see also Presence

- HIV positive Z21
- human immunodeficiency virus (HIV) infection, asymptomatic Z21
- - infection, asymptomatic Z21
- - virus positive Z21
- human immunodeficiency virus positive Z21
- hysterectomy (complete) (partial) Z90.7

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#### **Australian Coding Standards**

## 0102 HIV/AIDS (HUMAN IMMUNODEFICIENCY VIRUS/ACQUIRED IMMUNE DEFICIENCY SYNDROME)

#### **Directive(s)**

#### **General Directives for HIV**

#### **1.1** Assign:

- a code for HIV disease or status when documented in an episode of care
- a code for any documented HIV manifestation(s).

The following HIV disease or status codes do not have to meet the criteria in ACS 0002 Additional diagnoses:

- R75 Laboratory evidence of human immunodeficiency virus [HIV]
- Z21 Asymptomatic human immunodeficiency virus [HIV] infection status
- B23.0 Acute HIV infection syndrome
- Block B20–B24 Human immunodeficiency virus [HIV] disease.

#### Note(s)

3. Where multiple manifestations are documented, assign codes from block B20–B24 and sequence after the manifestation code to which it relates (see Example 2).

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#### **EXAMPLE 2:**

Patient with AIDS was admitted with a principal diagnosis of Kaposi sarcoma of the skin. The dietitian provided the patient with a management plan for wasting syndrome and they were started on intravenous antibiotics for cytomegalovirus retinitis.

<u>cytomegarovire</u>	
Assign:	C46.0 Kaposi sarcoma of skin
	M9140/3 Kaposi sarcoma
	B21 Human immunodeficiency virus [HIV] disease resulting in malignant neoplasms
	H30.9 Chorioretinal inflammation, unspecified
	B25.8 Other cytomegaloviral diseases
	B20 Human immunodeficiency virus [HIV] disease resulting in infectious and parasitic
	<u>diseases</u>
	R64 Cachexia
Rationale:	C46.0 — for manifestation of HIV ( <i>Directive</i> 1.5)
	<u>M9140/3 — ACS 0233 Morphology</u>
	B21, B20 — for HIV disease (classified to block B20-B24) (Directive 1.5 and Note 3)
	<u>H30.9, B25.8, R64 — ACS 0002 Additional diagnoses</u>

#### Acute HIV infection syndrome - B23.0

A significant proportion (40–60%) of patients will develop an acute illness shortly after acquiring HIV infection. This illness most commonly presents as a glandular fever like illness with fever, sore throat, lymphadenopathy, rash and occasionally complications, including meningitis. The diagnosis of acute HIV infection syndrome (or primary HIV infection) is not usually established until the patient develops antibodies to HIV (ie seroconverts). However, HIV detection by viral detection assays may allow a diagnosis to be made before antibodies develop. This usually takes 3–6 weeks following the onset of the illness. Although the diagnosis of acute HIV infection syndrome may be strongly suspected at the time of discharge, it will not usually be confirmed at this time. Supportive evidence of acute HIV infection syndrome during the admission would include a positive HIV p24 antigen test. The possibility of acute HIV infection syndrome should have been recorded in the clinical record. A negative HIV antibody test during the admission does not exclude the diagnosis.

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#### Kaposi sarcoma

The WHO Classification of Tumours (Lamovec & Knuutila 2002) classifies Kaposi sarcoma as a "locally aggressive endothelial tumour that typically presents with cutaneous lesions in the form of multiple patches, plaques or nodules but may also involve mucosal sites, lymph nodes and visceral organs". The aetiological agent Human Herpes Virus (HHV 8) (also known as Kaposi Sarcoma Herpes Virus (KSHV)) may be listed as a causative agent. Assign a code from category C46 Kaposi sarcoma whether the primary site is known or unknown. Kaposi sarcoma should be coded for each subsequent episode of care following the initial diagnosis.

#### **Antiretroviral therapy complications or adverse effects**

Antiretroviral therapy can result in complicating conditions such as anaemia, neuropathy and urinary tract calculi. Zidovudine (AZT) is one of a number of licensed antiretroviral drugs.

EXAMPLE 3:			
Antiretroviral drug-induced haemolytic anaemia with HIV positive status.			
Codes:	Haemolytic anaemia	D59.2	Drug induced nonautoimmune haemolytic anaemia
	Adverse effect of	¥41.5	Antiviral drugs causing adverse effects in therapeutic use antiretroviral drug
	HIV positive (asymptomatic)	<del>Z21</del>	Asymptomatic human immunodeficiency virus [HIV] infection status
Appropriate place of occurrence code (Y92. )			

EXAMPLE 4:		
Antiretroviral drug induced renal calculus with AIDS status.		
Codes: Renal calculus, drug induced N20.0 Calculus of kidney		
Adverse effect of antiretroviral drug Y41.5 Antiviral drugs causing adverse effects in therapeutic		
<del>use</del>		
AIDS B20 B22, B23.8, B24		
Appropriate place of occurrence code (Y92.)		

#### 1.2 Viral hepatitis

Application of the ACS template led to the following refinements in ICD-10-AM and the ACS:

- definitions added to ICD-10-AM Tabular List
- removal of table from ACS 0104 Viral hepatitis.

#### **ICD-10-AM Tabular List**

#### **VIRAL HEPATITIS**

#### (B15-B19)

**▼**0104

A group of liver diseases caused by infection with one or more of the five hepatitis viruses.

The infection may be recent and present for less than 6 months (acute hepatitis) or present for more than 6 months (chronic hepatitis), in which case progression to cirrhosis and liver cancer can occur. Transmission is by the faecal-oral route including water contamination, sexual transmission, blood and body fluid contamination (parenteral spread) and from birth parent to baby at the time of birth (vertical transmission).

Use additional external cause code (Chapter 20) to identify post-transfusion hepatitis

Excludes: cytomegaloviral hepatitis (B25.1)

herpesviral [herpes simplex] hepatitis (B00.8) sequelae of viral hepatitis (B94.2)

B15 Acute hepatitis A

Acute liver injury and inflammation caused by recent and short-term (less than 6 months) infection with hepatitis A virus [HAV]. Transmission is by the faecal-oral route. It never progresses to chronic hepatitis or cirrhosis.

Acute hepatitis A virus [HAV] infection

B15.0 Hepatitis A with hepatic coma

B15.9 Hepatitis A without hepatic coma

Hepatitis A (acute)(viral) NOS

B16 Acute hepatitis B

Acute liver injury and inflammation caused by recent and short-term (less than 6 months) infection with hepatitis B virus [HBV]. Transmission is by sexual contact, blood and body fluid contamination (parenteral spread), and from birth parent to baby at the time of birth (vertical transmission).

Acute hepatitis B virus [HBV] infection

B16.0 Acute hepatitis B with delta-agent (coinfection) with hepatic coma

B16.1 Acute hepatitis B with delta-agent (coinfection) without hepatic coma

B16.2 Acute hepatitis B without delta-agent with hepatic coma

B16.9 Acute hepatitis B without delta-agent and without hepatic coma

Acute hepatitis B (viral) NOS

B17 Other acute viral hepatitis

B17.0 Acute delta-(super) infection in chronic hepatitis B

B17.1 Acute hepatitis C

Acute liver injury and inflammation caused by recent and short-term (less than 6 months) infection with hepatitis C virus [HCV]. Transmission is by blood and body fluid contamination (parenteral spread) in most cases, and rarely by sexual contact or from birth parent to baby at the time of birth (vertical transmission).

Acute hepatitis C virus [HCV] infection

B17.2 Acute hepatitis E

A disease of the liver, caused by an acute infection with hepatitis E virus [HEV]. Transmission is commonly by the faecal-oral route.

Hepatitis E (virus) NOS

B17.8 Other specified acute viral hepatitis

Hepatitis non-A non-B (acute)(viral) NEC

B17.9 Acute viral hepatitis, unspecified

Acute:

• hepatitis NOS

• infectious hepatitis NOS

#### B18 Chronic viral hepatitis

B18.0 Chronic viral hepatitis B with delta-agent

Hepatitis D (virus) NOS

B18.1 Chronic viral hepatitis B without delta-agent

A liver disease characterised by liver inflammation and fibrosis caused by more than 6 months of infection with the hepatitis B virus. Transmission is by blood and body fluid contamination, sexual contact, and from birth parent to baby at the time of birth (vertical transmission).

Chronic hepatitis B virus infection

Hepatitis B\_(virus) NOS

B18.2 Chronic viral hepatitis C

A liver disease characterised by liver inflammation and fibrosis caused by more than 6 months of infection with the hepatitis C virus. Transmission is by blood and body fluid contamination, rarely by sexual transmission and from birth parent to baby at the time of birth (vertical transmission).

Chronic hepatitis C virus infection

Hepatitis C (virus) NOS

B18.8 Other chronic viral hepatitis

B18.9 Chronic viral hepatitis, unspecified

B19 Unspecified viral hepatitis

B19.0 Unspecified viral hepatitis with hepatic coma

B19.9 Unspecified viral hepatitis without hepatic coma

Viral hepatitis NOS

. . .

#### **Australian Coding Standards**

#### 0104 VIRAL HEPATITIS

#### **DEFINITION**

#### Viral hepatitis

Viral hepatitis is a 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 E 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.

#### **Hepatitis A**

Hepatitis A is a disease which is contagious and transmitted enterically (faecal oral route). The hepatitis A virus (HAV) is *never* a chronic infection. There is no known carrier state and HAV plays no role in chronic 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 such as blood, sexual fluids (semen and cervical secretions), transplanted tissue and blood products, and rarely saliva.

#### **Hepatitis C**

Hepatitis C rarely manifests as an acute illness and commonly progresses to a chronic infection. Hepatitis C virus (HCV) is usually acquired parenterally (eg injecting drug use, 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.

#### **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.

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).

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):

CLASSIFICATION			
Viral Hepatitis/type	Code/description	General guidelines	
Hepatitis A	B15.0 Hepatitis A with hepatic coma B15.9 Hepatitis A without hepatic coma O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium Z86.18 Personal history of other infectious and parasitic disease	<ul> <li>Assign Z86.18 when hepatitis A is cured but the history is relevant to the current episode of care.</li> <li>Where hepatitis A complicates pregnancy, childbirth or the puerperium, assign O98.4 and B15.0 or B15.9.</li> </ul>	
Hepatitis B	B16. Acute hepatitis B B18.0 Chronic viral hepatitis B with delta agent B18.1 Chronic viral hepatitis B without delta agent O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium	When documentation is unclear or ambiguous terms such as 'hepatitis B', 'hepatitis B positive' or 'history of hepatitis B' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign B18.1.  Where hepatitis B complicates pregnancy, childbirth or the puerperium, assign O98.4 and B16., B18.0 or B18.1.	
Hepatitis C	B17.1 Acute hepatitis C B18.2 Chronic viral hepatitis C O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium	When documentation is unclear or ambiguous terms such as 'hepatitis C' or 'hepatitis C positive' are documented, verify with the clinician if the disease is at the acute or chronic stage. Where consultation is not possible, assign B18.2.  When 'history of hepatitis C' is documented, assign B18.2 except when documented with terms such as 'cured', 'cleared' or 'with SVR' —see 4. Cured/cleared hepatitis C.  Where hepatitis C complicates pregnancy, childbirth or the puerperium, assign O98.4 and B17.1 or B18.2.	
Hepatitis D (with acute HBV)  Hepatitis D (with chronic HBV)	B16.0 Acute hepatitis B with delta agent (coinfection) with hepatic coma  B16.1 Acute hepatitis B with delta agent (coinfection) without hepatic coma  B17.0 Acute delta (super)infection in chronic hepatitis B	<ul> <li>When documentation is unclear or ambiguous terms such as 'hepatitis D', 'hepatitis D positive' or '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 B18.0.</li> <li>Where hepatitis D complicates pregnancy, childbirth or the puerperium, assign O98.4 and B16.0, B16.1, B17.0 or B18.0.</li> </ul>	

Hepatitis D	B18.0 Chronic viral hepatitis B with delta agent  O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium	
Hepatitis E	B17.2 Acute hepatitis E B18.8 Other chronic viral hepatitis O98.4 Viral hepatitis in pregnancy, childbirth and the puerperium Z86.18 Personal history of other infectious and parasitic disease	<ul> <li>Assign Z86.18 when hepatitis E is cured but the history is relevant to the current episode of care.</li> <li>Where hepatitis E complicates pregnancy, childbirth or the puerperium, assign O98.4 and B17.2 or B18.8.</li> </ul>

#### 1.3 COVID-19

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in ICD-10-AM and the ACS:

- removal of Directives for assigning ACHI code for testing for COVID-19
- inclusion of rapid antigen test [RAT]
- removal of table from ACS 0113 Coronavirus disease 2019 (COVID-19).

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

### FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)



Medical observation and evaluation for suspected diseases and conditions, ruled out

**Z03.8** 

Observation for other suspected diseases and conditions

**♥**203.81

Observation for suspected coronavirus disease 2019 [COVID-19], ruled out

Coronavirus disease 2019 [COVID-19] ruled out by negative polymerase chain reaction [PCR] or rapid antigen test [RAT] on laboratory testing

• • •

#### **CHAPTER 22**

#### CODES FOR SPECIAL PURPOSES (U00-U49, U75-U77, U78-U88, U91-U93)



**Emergency use of U07** 

...

U07.1

Coronavirus disease 2019 [COVID-19], virus identified

**▼**0113

<u>Laboratory confirmed eC</u>oronavirus disease 2019 [COVID-19] <u>confirmed by positive polymerase chain reaction [PCR] or rapid antigen test [RAT]</u> (severe acute respiratory syndrome coronavirus 2 SARS-CoV-2 identified).

Use additional code (Z29.0) to identify isolation.

Excludes: as part of multisystem inflammatory syndrome associated with coronavirus disease 2019 [COVID-19] (U07.5)

OU07.11 Coronavirus disease 2019 [COVID-19], virus identified, asymptomatic

Excludes: where symptoms have developed after diagnosis (U07.12)

**Q**U07.12 Coronavirus disease 2019 [COVID-19], virus identified, symptomatic

Use additional code to identify manifestation(s).

U07.2 Coronavirus disease 2019 [COVID-19], virus not identified

▼0113

Clinically diagnosed or probable coronavirus disease 2019 [COVID-19] not confirmed by positive polymerase chain reaction [PCR] or rapid antigen test [RAT] without laboratory confirmation, including where laboratory testing for SARS-CoV-2 is inconclusive or not available.

COVID-19 NOS

Includes: symptoms and signs associated with or attributed to COVID-19

*Use additional code to identify manifestation(s).* 

Use additional code (Z29.0) to identify isolation.

Excludes: as part of multisystem inflammatory syndrome associated with coronavirus disease 2019 [COVID-19]

(U07.5)

coronavirus disease 2019 [COVID-19] confirmed by positive polymerase chain reaction [PCR] or rapid

antigen test [RAT] laboratory testing (U07.1-) severe acute respiratory syndrome [SARS] (U04.9)

..

#### **ICD-10-AM Alphabetic Index**

#### C

COVID-19 (coronavirus disease 2019) (clinically diagnosed) (virus not identified) U07.2

- associated with multisystem inflammatory syndrome U07.5
- confirmed by laboratory testing (PCR) (RAT) U07.1-
- in pregnancy, childbirth or puerperium O98.5
- long U07.4
- personal history of U07.3
- post coronavirus disease 2019 condition U07.4
- ruled out by laberatory testing (PCR) (RAT) see Observation/disease/coronavirus disease 2019, ruled out
- virus identified U07.1-

S

SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) U07.1-

- ruled out by laboratory testing (PCR) (RAT) — see Observation/disease/coronavirus disease 2019, ruled out

#### **ACHI Tabular List**

1866

Other diagnostic tests, measures or investigations

96273-00 <del>▼0113</del> Testing for severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2]

Diagnostic specimen collection to identify antibodies for SARS-CoV-2. Laboratory testing for COVID-19

Includes: testing for surveillance purposes

*Note:* This code is assigned once only in an episode of care.

#### **Australian Coding Standards**

#### 0113 CORONAVIRUS DISEASE 2019 (COVID-19)

. . .

- **1.2** Assign a code for any manifestation(s) of COVID-19 (see Example 3).
- **1.3 Do not** assign additional diagnosis codes for symptoms of COVID-19 classified to Chapter 18 *Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00–R99).*

. . .

3.3 Assign a code from subcategory U07.7 Coronavirus disease 2019 [COVID-19] vaccines causing adverse effect in therapeutic use for an adverse effect due to a COVID-19 vaccination, in addition to adverse effect and external cause codes (see Example 6).

. .

The following table summarises classification guidelines for COVID-19.

COVID-19 TABLE		
STAGE	CODE/BLOCK/DESCRIPTION	GENERAL GUIDELINES
<del>Diagnosis</del>	96273-00 [1866] Testing for severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2]	Assign 96273-00 [1866] where laboratory testing (eg polymerase chain reaction (PCR), serology) has been performed during an episode of care to identify a SARS-CoV-2 infection (see Examples 1, 3, 4 and 6).      Assign 96273-00 [1866] only once for an episode of care.

- - -

#### **EXAMPLE 4:**

Patient presented to the Emergency Department (ED) with shortness of breath and fever for investigation of suspected COVID-19. The patient was admitted and a laboratory test was performed to exclude a diagnosis of COVID-19. The test result ruled out COVID-19. Clinical documentation stated 'admitted with suspected COVID-19, ruled out'.

Codes: R06.0 Dyspnoea

R50.9 Fever, unspecified

96273 00 [1866] Testing for severe acute respiratory syndrome coronavirus 2

[SARS CoV 2]

In this example, the symptoms of shortness of breath and fever are assigned, and Z03.81 is not assigned, in accordance with ACS 0001 and ACS 0012. 96273 00 [1866] is assigned to identify laboratory testing for SARS CoV 2 during the episode of care.

# 1.4 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

# **ICD-10-AM Tabular List**

# **CHAPTER 1**

# CERTAIN INFECTIOUS AND PARASITIC DISEASES (A00–B99)

OTHER BACTERIAL DISEASES (A30-A49)

• • •

A49

#### Bacterial infection of unspecified site

Excludes: bacterial agents as cause of diseases classified to other chapters (B95 B96)

chlamydial infection NOS (A74.9) meningococcal infection NOS (A39.9) rickettsial infection NOS (A79.9) spirochaetal infection NOS (A69.9)

# **ICD-10-AM Alphabetic Index**

Infection, infected (opportunistic) (see also Infestation) B99

- bloodstream see also Infection/by type
- - bacterial NEC (see also Infection/by type of agentbacterial) A49.9
- - healthcare associated Staphylococcus aureus U92
- SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2) U07.1-
- - ruled out by laboratory testing (PCR) (RAT) see Observation/disease/coronavirus disease 2019, ruled out

# 1.5 Revised ACS Chapter 1

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in the ACS:

Australian Coding Standard	Revision
0111 Healthcare associated Staphylococcus aureus bloodstream infection	Amended Example 1.
0112 Infection with drug resistant microorganisms	Addition of Exception 1 and Directive 5.2 for carrier status.

# **Australian Coding Standards**

# 0111 HEALTHCARE ASSOCIATED STAPHYLOCOCCUS AUREUS BLOODSTREAM INFECTION

. . .

# **EXAMPLE 1:**

Patient was admitted with septic arthritis due to a previous internal fixation of bimalleolar left ankle fracture (performed at the same facility). Cultures obtained during the current admission identified *Staphylococcus aureus* (*S. Aureus*) in the joint and bloodstream. Clinical documentation confirmed HA-SABSI. A six week course of vancomycin was administered to treat the infections.

Assign: T84.6 Infection and inflammatory reaction due to internal fixation device [any site]

M00.07 Staphylococcal arthritis and polyarthritis, ankle and foot

B95.6 Staphylococcus aureus as the cause of diseases classified to other chapters

<u>U92</u> Healthcare associated Staphylococcus aureus bloodstream infection [HA-SABSI]

Rationale: T84.6 — ACS 0001 Principal diagnosis and ACS 1904 Complications of surgical or medical care

M00.07 — for the infection in the joint (*Directive* 1)

<u>B95.6</u> — for the infectious agent causing the joint infection, as per the *Instructional* note at block B95–B97 *Bacterial and viral agents as the cause of diseases classified to other chapters* 

<u>U92</u> — for HA-SABSI (*Directive* 1)

A49.01 Staphylococcus aureus infection, unspecified site is not assigned as the infection site is

known (Directive 1).

# 0112 INFECTION WITH DRUG RESISTANT MICROORGANISMS

. . .

# Exception(s)

1. **Do not** assign codes from block Z14–Z16 based on documentation of drug susceptibility, to imply or inform the classification of drug resistance. Use the pathology results to identify the specific drug(s), but **do not** assign Z14–Z16 based on pathology results alone.

. . .

# Directive(s)

- **5.1** Assign the following for a drug resistant microorganism, in the absence of an infection caused by that microorganism:
  - a code from category Z22 Carrier of infectious disease (see Example 4)
  - one or more codes from block Z14–Z16 to identify resistance to antimicrobial drugs (see Example 4)
  - U93 Extended spectrum beta-lactamase [ESBL] producing organism only for ESBL resistance.
- **5.2** Assign a code from category Z22 *Carrier of infectious disease* for carrier status in the absence of an infection and drug resistance.

. . .

# 2. Neoplasms

# 2.1 Morphology

Refinements to Appendix A *Morphology of neoplasms* include formatting changes with the inclusion of a table, minor wording amendments and the addition of Examples consistent with those in the ACS.

# **ICD-10-AM Tabular List**

# **APPENDIX A**

# MORPHOLOGY OF NEOPLASMS

#### **▼**0050, 0233

The International Classification of Diseases for Oncology Third Edition (ICD-O-3) was published in 2000. It is a coded nomenclature for the morphology of neoplasms, and is reproduced in ICD-10-AM to use in conjunction with Chapter 2. The morphology codes in Appendix A were updated for consistency with ICD-O-3.2 (ICD-O-3 Second Revision), which was implemented internationally in January 2020. Morphology codes in Appendix A identified with the Australian code symbol are not included in ICD-O-3.2.

ICD-10-AM morphology codes consist of the letter 'M', followed by five digits. The first four digits identify the neoplasm's histological type, and the fifth digit, following a slash (or solidus), indicates the neoplasm's behaviour. The following table shows the fifth digit behaviour codes are as follows:

#### /0 Benign

/1 Uncertain whether benign or malignant

Borderline malignancy

Low malignant potential

Uncertain malignant potential

#### /2 Carcinoma in situ

**Intraepithelial** 

Noninfiltrating

**Noninvasive** 

# /3 Malignant, primary site

/6 Malignant, metastatic site
Malignant, secondary site

# /9 Malignant, uncertain whether primary or metastatic site

#### Table 1. Behaviour codes and descriptors

Behaviour code	<u>Descriptor</u>
<u>/0</u>	Benign Control of the
<u>/1</u>	Uncertain whether benign or malignant  Borderline malignancy Low malignant potential Uncertain malignant potential
<u>/2</u>	In situ Carcinoma in situ

	Intraepithelial Noninfiltrating Noninvasive
<u>/3</u>	Malignant, primary Carcinoma NOS Malignant: • primary site • stated or presumed to be primary
<u>/6</u>	Malignant, metastatic Malignant, stated or presumed to be secondary Metastatic
<u>/9</u>	Malignant, uncertain whether primary or metastatic

In the nomenclature listed here, the morphology codes include the behaviour code appropriate to the histological type of neoplasm; it is appropriate to assign a different behaviour code if supported by documentation in the clinical record. For example, chordoma is assumed to be malignant and is therefore indexed to the default morphology code M9370/3; 'benign chordoma', however, is classified to M9370/0. Similarly, superficial spreading adenocarcinoma (M8143/3) is classified to M8143/2 when documented as 'noninvasive'.

In Appendix A *Morphology of neoplasms*, the morphology codes include a behaviour code appropriate to the neoplasm histological type. The Alphabetic Index provides a default morphology and behaviour code, however it is appropriate to assign a different behaviour code if supported by documentation in the health care record, provided that the code is listed in Appendix A (see Examples 1 and 2).

# **EXAMPLE 1:**

Benign chordoma.

Index: Chordoma (M9370/3) — see also Neoplasm/malignant

<u>Tabular List:</u> M9370/0Benign notochordal cell tumour

M9370/3Chordoma NOS

Assign: M9370/0 Benign notochordal cell tumour

**Rationale:** Chordoma classification defaults to malignant as per the Alphabetic Index. Benign chordoma is

classified to M9370/0 (M9370 with a behaviour code /0 benign) which is listed in the Tabular

List Appendix A.

#### **EXAMPLE 2:**

Noninvasive superficial spreading adenocarcinoma.

Index: Adenocarcinoma

- superficial spreading (M8143/3)

Tabular List: M8143/2Superficial spreading adenocarcinoma, in situ

M8143/3Superficial spreading adenocarcinoma

Assign: M8143/2 Superficial spreading adenocarcinoma, in situ

**Rationale:** Superficial spreading adenocarcinoma classification defaults to malignant as per the Alphabetic

Index. Noninvasive superficial spreading adenocarcinoma is classified to M8143/2 (M8143 with behaviour code /2 *in situ*) (see Table 1) which is listed in the Tabular List

Appendix A.

The following table shows the correspondence between the behaviour code and the different sections of Chapter 2

Behaviour code Chapter 2 categories

<del>/0</del>	Benign neoplasms	D10-D36
/1	Neoplasms of uncertain and unknown behaviour	D37-D48
<del>/2</del>	In situ neoplasms	<del>D00 D09</del>
/3	Malignant neoplasms, stated or presumed to be primary	C00-C76 C80-C96
<del>/6</del>	Malignant neoplasms, stated or presumed to be secondary	<del>C77 C79</del>

The following table shows behaviour codes and corresponding ICD-10-AM Chapter 2 *Neoplasms* blocks and categories: Table 2. Behaviour codes and corresponding blocks and categories in ICD-10-AM Chapter 2 *Neoplasms*.

Behaviour code	Chapter 2 blocks and categories
<u>/0</u>	D10–D36 Benign neoplasms
<u>/1</u>	D37–D44, D48 Neoplasms of uncertain or unknown behaviour
<u>/2</u>	D00–D09 In situ neoplasms
<u>/3</u>	C00–C75 Malignant neoplasms, stated or presumed to be primary, of specified sites, except of lymphoid, haematopoietic and related tissue  C76 Malignant neoplasm of other and ill-defined sites  C80 Malignant neoplasm without specification of site  C81–C96 Malignant neoplasms of lymphoid, haematopoietic and related tissue  D45 Polycythaemia vera  D46 Myelodysplastic syndromes
<u>/6</u>	C77 Secondary and unspecified malignant neoplasm of lymph nodes  C78 Secondary malignant neoplasm of respiratory and digestive organs  C79 Secondary malignant neoplasm of other and unspecified sites

# **Exception(s)**

1. Codes in category D47 Other neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue are assigned morphology codes with behaviour /1 or /3 in accordance with the Alphabetic Index (regardless of category D47 being located in the Chapter 2 block for Neoplasms of uncertain and unknown behaviour).

A documented neoplasm site may differ from the default site listed in the Alphabetic Index. In such instances, the listed default Chapter 2 code in the Alphabetic Index should not be assigned, and the more appropriate site specific code should be assigned from the *Neoplasm* table. For example, C69.9 *Malignant neoplasm of eye, unspecified* is the default site code listed in the Alphabetic Index with type A spindle cell melanoma (M8773/3). However, if the site of the neoplasm documented in the clinical record is specified as the choroid, assign C69.3 *Malignant neoplasm of choroid*. Similarly, infiltrating duct carcinoma (M8500/3) usually arises in the breast (classified to category C50 *Malignant neoplasm of breast*). However, if primary infiltrating duct carcinoma of the pancreas is documented in the clinical record, assign a site code from category C25 *Malignant neoplasm of pancreas*.

A neoplasm site specified in the health care record may differ from the default site listed in the Alphabetic Index. In such instances, the default Chapter 2 code in the Alphabetic Index is not assigned, but a more appropriate site specific code is assigned, usually in accordance with the *Table of neoplasms* (see Alphabetic Index: *Neoplasm, neoplastic*) (see Examples 3 and 4).

EXAMPLE 3:		
<u>Duodenal gastri</u>	noma.	
Index:	Gastrinoma (M8153/3) C25.4	
	Neoplasm, neoplastic Malignant	
	Primary O17.0	
	- duodenum	
Tabular List:	C25.4 Malignant neoplasm of endocrine pancreas	
	C17.0 Malignant neoplasm of duodenum	
Assign:	C17.0 Malignant neoplasm of duodenum	
	Morphology code	
Rationale:	Gastrinoma is indexed with a default Chapter 2 code (C25.4). However, the site of the gastrinoma	
	is the duodenum, therefore C17.0 is assigned by following the Alphabetic Index:	
	Neoplasm, neoplastic/duodenum.	

EXAMPLE 4	<u>.</u>
Infiltrating duc	ct carcinoma of the pancreas.
Index:	<u>Carcinoma</u>
	<u>- infiltrating</u>
	duct — see also Neoplasm/breast/malignant
	Neoplasm, neoplastic Malignant
	<u>Primary</u>
	<u>- pancreas</u>
	<u> body</u>
	<u> duct C25.3</u>
	<u> head</u>
	<u> islet cellsC25.4</u>
	<u> neckC25.7</u>
	<u> tailC25.2</u>
Assign:	C25.9 Malignant neoplasm of pancreas, part unspecified
	Morphology code
Rationale:	Infiltrating duct carcinoma usually arises in the breast, as per the cross reference to
	Neoplasm/breast/malignant. However, where the site of the infiltrating duct carcinoma is the
	pancreas, a code from category C25 Malignant neoplasm of pancreas is assigned by following
	the Alphabetic Index: Neoplasm, neoplastic/pancreas.

Where a documented morphology contains more than one qualifying term classifiable to different morphology codes, assign the morphology code with the higher number. An example is 'transitional cell epidermoid carcinoma'. 'Transitional cell carcinoma NOS' is classified to M8120/3 and 'epidermoid carcinoma NOS' is classified to M8070/3. In such circumstances, the higher number (M8120/3 in this example) is assigned, as it is usually more specific. For further information regarding the coding of morphology, see the *Australian Coding Standards*.

Where the morphology contains more than one qualifying term classifiable to different morphology codes, assign the morphology code with the higher number, as it is usually more specific (see Example 5).

For further information regarding the coding of morphology, see ACS 0233 Morphology.

EXAMPLE 5:	
Transitional cel	l epidermoid carcinoma.
Index:	Carcinoma  - epidermoid (M8070/3)  - transitional (cell) (M8120/3)
Assign:	Topography (site) code  M8120/3 Transitional cell carcinoma NOS
Rationale:	Transitional cell carcinoma NOS is classified to M8120/3 and epidermoid carcinoma NOS is classified to M8070/3. Transitional cell epidermoid carcinoma is assigned M8120/3, as this is the higher number.

. . .

# **Coded Nomenclature for Morphology of Neoplasms**

M8361/0	Juxtaglomerular tumour, benign
	Juxtaglomerular tumour, in situ
© M8361/3	Juxtaglomerular tumour, malignant
	Juxtaglomerular tumour, malignant, metastatic
• M8361/6	
<b>○</b> M8361/9	Juxtaglomerular tumour, malignant, uncertain whether primary or metastatic
 M8482/3	Mucinous carcinoma, gastric type
<b>№</b> M8482/6	Mucinous carcinoma, gastric type, metastatic
<b>№</b> M8482/9	Mucinous carcinoma, gastric type, uncertain whether primary or metastatic
<b>№</b> M8490/2	Signet ring cell carcinoma, in situ
<b>₩</b> 1010-130/2	olgitet mig och odromoma, m sita
 M9050/0	Mesothelioma, benign
<b>№</b> M9050/0	Mesothelioma, uncertain whether benign or malignant
<b>№</b> M9050/1	Mesothelioma, in situ
M9050/3	Mesothelioma, malignant
<b>○</b> M9050/6	Mesothelioma, malignant, metastatic
<b>○</b> M9050/9	Mesothelioma, malignant, uncertain whether primary or metastatic
 <b>№</b> M9061/2	Seminoma, in situ
M9061/3	Seminoma NOS
M9061/6  M9061/6	Seminoma NOS, metastatic
<b>○</b> M9061/9	Seminoma NOS, uncertain whether primary or metastatic
• M9070/2	Embryonal carcinoma NOS, in situ
M9070/3	Embryonal carcinoma NOS
<b>№</b> M9070/6	Embryonal carcinoma NOS, metastatic
• M9070/9	Embryonal carcinoma NOS, uncertain whether primary or metastatic
<b>3</b> 1019070/9	Embryonal carcinoma NOS, uncertain whether primary of metastatic
<b>№</b> M9071/2	Yolk sac tumour, in situ
M9071/3	Yolk sac tumour
<b>№</b> M9071/6	Yolk sac tumour, metastatic
<b>№</b> M9071/9	Yolk sac tumour, uncertain whether primary or metastatic
	romodo tamodi, uncortam unonor primary or motacidado
M9080/0	Teratoma, benign
M9080/1	Teratoma NOS
<b>○</b> M9080/2	Teratoma, in situ, NOS
M9080/3	Teratoma, malignant NOS
<b>№</b> M9080/6	Teratoma, malignant NOS, metastatic
• M9080/9	Teratoma, malignant NOS, uncertain whether primary or metastatic
	. 5.5.5, mangham 1100, anostam whomor primary or motacidate
M9104/1	Placental site trophoblastic tumour
◆ M9104/2	Placental site trophoblastic tumour, in situ
	Placental site trophoblastic tumour, malignant
	Placental site trophoblastic tumour, metastatic
<b>○</b> M9104/9	Placental site trophoblastic tumour, uncertain whether primary or metastatic

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

M9174/0	Lymphangiomyoma
M9174/1	Lymphangioleiomyomatosis
<b>№</b> M9174/3	Lymphangioleiomyomatosis, malignant
M9175/0	Haemolymphangioma
M9421/1	Pilocytic astrocytoma
	Pilocytic astrocytoma, malignant
	Pilocytic astrocytoma, metastatic
	Pilocytic astrocytoma, uncertain whether primary or metastatic
<b>○</b> M9508/9	Atypical teratoid/rhabdoid tumour, uncertain whether primary or metastatic
M9509/1	Papillary glioneuronal tumour
M9510/0	Retinocytoma
M9742/3	Mast cell leukaemia
M9749/3	Erdheim-Chester disease
M9751/3	Langerhans cell histiocytosis disseminated
M9754/3	Langerhans cell histiocytosis, disseminated
M9751/3	Langerhans cell histiocytosis disseminated

# **ICD-10-AM Alphabetic Index**

#### L

**Lymphangioleiomyomatosis** (M9174/1) — see also Neoplasm/connective tissue/uncertain behaviour - malignant (M9174/3) — see also Neoplasm/connective tissue/malignant

Lymphangioma (M9170/0) D18.1

- capillary (M9171/0) D18.1
- cavernous (M9172/0) D18.1
- cystic (M9173/0) D18.1
- malignant (M9170/3) see also Neoplasm/connective tissue/malignant

Lymphangiomyoma (M9174/0) D18.1

**Lymphangiomyomatosis** (M9174/1) — see also Neoplasm/connective tissue/uncertain behaviour - malignant (M9174/3) — see also Neoplasm/connective tissue/malignant

Lymphoma (malignant) (M9590/3)

- B-cell NEC (M9591/3) C85.1
- - diffuse large (anaplastic) (centroblastic) (DLBCL) (M9680/3) C83.3
- - with chronic inflammation (M9680/3)
- - EBV positive (M9680/3)

...

- diffuse (M9591/3) C83.9
- - histiocytic (M9680/3) C83.9
- - large
- - B-cell (B-cell subtype) (centroblastic) (M9680/3) see also-Lymphoma/B-cell/diffuse large
- - cell (cleaved) (noncleaved) (M9680/3) C83.3

# M

Mesothelioma (malignant) (M9050/3) — see also Mesothelioma/site classification/malignant

Note: Except where otherwise indicated, the morphological varieties of mesothelioma in the list below are also classified by site — see Mesothelioma/site classification/malignant

- benign (M9050/0) see also Mesothelioma/site classification/benign
- biphasic (M9053/3)
- cystic (M9055/0) see also Mesothelioma/site classification/benign
- desmoplastic (M9051/3)
- epithelioid (M9052/3)
- - benign (M9052/0) see also Mesothelioma/site classification/benign
- fibrous (M9051/3)
- - benign (M9051/0) see also Mesothelioma/site classification/benign
- in situ (M9050/2) see also Neoplasm/in situ
- multicystic (M9055/0) see also Mesothelioma/site classification/benign
- papillary, well differentiated (M9052/0) see also Mesothelioma/site classification/benign
- - pleura (M9052/1) D38.2
- sarcomatoid (M9051/3)

```
- site classification
- - benign D19.9
- - - mesentery D19.1
- - - mesocolon D19.1
- - - omentum D19.1
- - - peritoneum D19.1
- - - pleura D19.0
- - - specified site NEC D19.7
- - malignant C45.9
- - - liver C45.7
- - - lung C45.7
- - - mediastinum C45.7
- - - mesentery C45.1
- - - mesocolon C45.1
- - - omentum C45.1
- - - pericardium C45.2
- - - peritoneum C45.1
- - - pleura, pleural (parietal) C45.0
- - - retroperitoneum C45.7
- - - specified site NEC C45.7
- spindled (M9051/3)
T
Teratoma (solid) (M9080/1) — see also Neoplasm/uncertain behaviour
- immature (M9080/3) — see also Neoplasm/malignant
- - lung (M9080/1) D38.1
- - thymus (M9080/1) D38.4
- - thyroid (M9080/1) D44.0
- in situ (M9080/2) — see also Neoplasm/in situ
- liver (M9080/3) C22.7
Tumour (M8000/1)
- gonadal stromal (M8590/1)
- - sex cord
- - - benign (M8590/0) — see also Neoplasm/benign
- - - incompletely differentiated (M8591/1)
- - - mixed forms (M8592/1)
- granular cell (M9580/0) — see also Neoplasm/connective tissue/benign
- placental site trophoblastic (M9104/1) D39.2
- sex cord(-stromal) NEC (M8590/1)
- - with annular tubules (M8623/1) D39.1
```

# **Australian Coding Standards**

- benign (M8590/0) — see also Neoplasm/benign
- mixed germ cell (unclassified) (M8594/1)

# 0233 MORPHOLOGY

. . .

<b>EXAMPLE 1:</b>		
A histopatholog	y report confirme	d superficial spreading noninvasive adenocarcinoma.
Index:	Adenocarcino	na
	- superficial spi	reading (M8143/3)
Tabular List:	M8143/2	Superficial spreading adenocarcinoma, in situ
	M8143/3	Superficial spreading adenocarcinoma

Assign:	Topography (site) code	
	M8143/2 Superficial spreading adenocarcinoma, in situ	
Rationale:	M8143/2 — for the behaviour described in the health care record (noninvasive), even though the	
	default behaviour listed in the index is malignant (Directive 1)	

. . .

# 2.2 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

# **ICD-10-AM Tabular List**

# **CHAPTER 2**

# NEOPLASMS(C00-D48)

•••

Note:

• • •

#### 3. **Morphology**

There are a number of major morphological (histological) groups of malignant neoplasms: carcinomas including squamous (cell) and adenocarcinomas adeno carcinomas; sarcomas; other soft tissue tumours including mesotheliomas; lymphomas (Hodgkin and non-Hodgkin); leukaemia; other specified and site-specific types; and unspecified cancers. Cancer is a generic term and may be used for any of the above groups, although it is rarely applied to the malignant neoplasms of lymphatic, haematopoietic and related tissue. 'Carcinoma' is sometimes used incorrectly as a synonym for 'cancer'.

In Chapter 2, neoplasms are classified predominantly by site within broad groupings for behaviour. In a few exceptional cases morphology is indicated in the category and subcategory titles.

A comprehensive list of morphology codes are is provided in this volumethe ICD-10-AM Tabular List (see Appendix A). These morphology codes are primarily derived from the third edition of International Classification of Diseases for Oncology (ICD-O-3.2), which is a dual-axis classification providing independent coding systems for topography and morphology. The first four digits of the morphology code identify the histological type; the fifth digit is the behaviour code (malignant primary, malignant secondary (metastatic), in situ, benign, uncertain whether malignant or benign). A sixth digit is used in ICD-O-3.2 as a grading code (differentiation) for solid tumours, and is also used as a special code for lymphomas and leukaemias, however, this sixth digit is not included in ICD-10-AM.

•••

# C88

# Malignant immunoproliferative diseases

**V** 0222, 0245

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

② 0 without mention of remission
Partial remission

1 in remission

Complete remission

..



# Multiple myeloma and malignant plasma cell neoplasms

▼ 0245

The following fifth character subdivisions are for use with subcategories C90.0–C90.3:

O without mention of remission

Partial remission

1 in remission

Complete remission

. . .



# Lymphoid leukaemia

▼ 0245

The following fifth character subdivisions are for use with subcategories C91.0–C91.9:

O without mention of remission

Partial remission

1 in remission

Complete remission

...



# Myeloid leukaemia

▼ 0245

The following fifth character subdivisions are for use with subcategories C92.0–C92.9:

② 0 without mention of remission

Partial remission

1 in remission

Complete remission

. . .



# Monocytic leukaemia

▼ 0245

Includes: monocytoid leukaemia

The following fifth character subdivisions are for use with subcategories C93.0-C93.9:

O without mention of remission

Partial remission

1 in remission

Complete remission

...



# Other leukaemias of specified cell type

**V** 0245

Excludes: leukaemic reticuloendotheliosis (C91.4-) plasma cell leukaemia (C90.1-)

The following fifth character subdivisions are for use with subcategories C94.0–C94.7:

O without mention of remission

Partial remission

1 in remission

Complete remission



# Leukaemia of unspecified cell type

▼ 0245

The following fifth character subdivisions are for use with subcategories C95.0–C95.9:

② 0 without mention of remission

Partial remission

1 in remission

Complete remission

**D47** 

# Other neoplasms of uncertain or unknown behaviour of lymphoid, haematopoietic and related tissue

Note:

Chronic myeloproliferative disorders are classified in ICD-O-3.2 with a malignant behaviour code (/3).

Assign codes from category D47 with an appropriate morphology code and behaviour code (/1 or /3) (regardless of category D47 being located in the Chapter 2 block for Neoplasms of uncertain and unknown behaviour) — see Alphabetic Index.

D47.0 Histiocytic and mast cell tumours of uncertain and unknown behaviour

Indolent systemic mastocytosis

Mast cell tumour NOS Mastocytoma NOS

Systematic mastocytosis, associated with clonal haematopoietic non-mast-cell disease (SM-AHNMD)

Excludes: mastocytosis (congenital) (cutaneous) (Q82.2)

# **ICD-10-AM Alphabetic Index**

#### Α

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

- endocrine, multiple (2-two or more specified sites) (M8360/1) D44.8

- multiple endocrine (two or more specified sites) (M8360/1) D44.8

C

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

- renal (cell (RCC)) (M8312/3) C64
- spinous cell (M8070/3)
- squamoid eccrine ductal (M8560/3) C44.-
- squamotransitional (M8120/3)

Ε

Ependymoma (cellular) (clear cell) (epithelial) (malignant) (tanycytic) (M9391/3) — see also Neoplasm/brain/malignant

- anaplastic (M9392/3)
- cellular (M9391/3) clear cell (M9391/3)
- myxopapillary (M9394/1) D43.4
- papillary (M9393/3)
- RELA fusion positive (M9396/3)
- sellar (M9391/1) D44.3
- subependymoma, mixed (M9383/1) D43.2
- tanycytic (M9391/3)

# L

Leukaemia (M9800/3) C95.9-

Note: The following fifth character subdivision is for use with categories C90–C95:

0 without mention of remission (partial remission)

in remission (complete remission)

S

Seminoma (M9061/3) C62.9

- with high mitotic index (M9062/3)
- anaplastic (M9062/3)
- in situ (M9061/2) D07.6

# 2.3 Revised ACS Chapter 2

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in the ACS:

Australian Coding Standard	Revision
0206 Pharmacotherapy for neoplasms	Addition of <i>Directive</i> for drug trial.
0229 Admission for Rradiotherapy	Revised ACS title and removal of multi- day episode guidelines due to redundancy.
0234 Neoplasms of contiguous or overlapping sites, or with localised spread	Amended scenarios in <i>Examples</i> 3 and 4.
0236 General guidance for Nneoplasm coding and sequencing	Revised ACS title and removal of sequencing guidelines due to redundancy.

# **Australian Coding Standards**

# 0206 PHARMACOTHERAPY FOR NEOPLASMS

. . .

# **Directive(s)**

# Pharmacotherapy for neoplasm

- **1.1** Assign the following where pharmacotherapy is administered for a neoplasm, including if administered as part of a drug trial:
  - Z51.1 Pharmacotherapy session for neoplasm as principal diagnosis
  - additional diagnosis code(s) for the neoplasm(s)
  - ACHI code(s) from block [1920] *Administration of pharmacotherapy* with extension -00 *antineoplastic agent* (see Examples 1 and 7).

# **EXAMPLE 3:**

Patient was admitted with progressive paraesthesia across the back for investigation. Magnetic resonance imaging of the spine revealed a collapsed vertebra at T4 causing the neurological symptoms. After further investigations, the patient was diagnosed with non-Hodgkin lymphoma involving the vertebrae. They were managed by the haematology team and commenced on intravenous chemotherapy. A final diagnosis of non-Hodgkin lymphoma with collapsed vertebra was confirmed. The patient was discharged for follow up at the cancer clinic.

Assign: C85.9 Non-Hodgkin lymphoma, unspecified

M9591/3 Malignant lymphoma, non-Hodgkin NOS

M48.54 Collapsed vertebra, not elsewhere classified, thoracic region

**Rationale:** C85.9 — for the primary lymphoma, regardless of the spread to the vertebrae, as lymphomas are

never classified as metastatic neoplasms (*Directive* 1)

M9591/3 — ACS 0233 *Morphology* 

M48.54 — ACS 0002 Additional diagnoses

# 0229 ADMISSION FOR RADIOTHERAPY

. . .

# **Multi-day episodes of care**

- Assign the principal diagnosis as per the guidelines in ACS 0001 Principal diagnosis
- Do not assign Z51.0 Radiotherapy session as an additional diagnosis

Note: Refer to ACS 1902 Adverse effects for guidelines regarding classification of adverse effects of radiotherapy

# 0234 NEOPLASMS OF CONTIGUOUS OR OVERLAPPING SITES, OR WITH LOCALISED SPREAD

. . .

#### **EXAMPLE 3:**

Patient was admitted with a mass in the tracheobronchial region. A biopsy was performed via a bronchoscopy under sedation. Histopathology report indicated squamous cell carcinoma.

Assign: C39.8 Overlapping lesion of respiratory and intrathoracic organs

M8070/3 Squamous cell carcinoma NOS

**Rationale:** C39.8 — for a neoplasm where the site of origin in the tracheobronchial region cannot be

determined and overlaps boundaries between multiple subcategories for respiratory and

intrathoracic organs (ie C33 Malignant neoplasm of trachea and C34 Malignant neoplasm of

bronchus and lung) (Directive 3)

M8070/3 — ACS 0233 Morphology

# 0236 GENERAL GUIDANCE FOR NEOPLASM CODING-AND SEQUENCING

. .

The sequencing of primary and secondary (metastatic) neoplasm codes is dependent on the clinical care, diagnostic interventions or therapeutic treatment performed in each episode of care. Assign the principal diagnosis in accordance with guidelines in ACS 0001 *Principal diagnosis*.

# 3. Diseases of the blood and bloodforming organs and certain disorders involving the immune mechanism

# 3.1 Extracorporeal photopheresis

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

# **ACHI Tabular List**

**CHAPTER 19** 

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) THERAPEUTIC INTERVENTIONS

THERAPEUTIC INTERVENTIONS — BLOOD AND BLOOD-FORMING ORGANS

. . .



#### **Apheresis**

▼0030

Includes: non-engineered:

- · cell therapy
- · gene therapy

Code also when performed:

• in vitro processing of bone marrow or blood for stem cell transplantation (13760 [1891])

Excludes: with genetically engineered:

- cell therapy (see block [1924])
- gene therapy (96263-00 [1925])

13755-00 Donor haemapheresis

Collection of blood products for transfusion following apheresis

13750-00 Therapeutic plasmapheresis

13750-01 Therapeutic leukopheresis

Therapeutic leukocytapheresis

13750-02 Therapeutic erythropheresis

Therapeutic erythrocytapheresis

13750-03 Therapeutic plateletpheresis

13750-04 Apheresis of stem cells

13750-05 Apheresis of stem cells with cryopreservation

#### 13761-00 Extracorporeal photopheresis

**Note:** Performed for:

• chronic graft-versus-host disease [cGVHD] • erythrodermic cutaneous T-cell lymphoma.

13750-06 Other therapeutic haemapheresis

Molecular adsorbent recirculating system ([MARS]) treatment

...

# **ACHI Alphabetic Index**

P

Photomydriasis, laser 42764-03 [190]

Photopheresis, extracorporeal 13761-00 [1892]

Phototherapy (skin) 90677-00 [1611]

- joint 96160-00 [1905]
- newborn 90677-00 [1611]
- soft tissue 96161-00 [1905]
- specified NEC 90677-00 [1611]
- ultraviolet see Therapy/ultraviolet

...

# 3.2 Anticoagulant use

Application of the ACS template and incorporation of National Coding Advice led to refinements in ICD-10-AM and the ACS with the replacement of 'INR' with 'coagulation assay', the addition of common assays performed and additional clarification regarding assignment of R79.83 *Abnormal coagulation profile*.

# ICD-10-AM Tabular List

# **CHAPTER 3**

# DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS AND CERTAIN DISORDERS INVOLVING THE IMMUNE MECHANISM (D50–D89)

D68

Other coagulation defects

...

D68.3

**▼**0303,1902

Haemorrhagic disorder due to circulating anticoagulants

Haem

Haemorrhage during long term use of anticoagulants

Hyperheparinaemia

Increase in:

- anti-VIIIa
- anti-IXa
- <u> anti-Xa</u>
- anti-XIa
- antithrombin

**Includes:** abnormal coagulation profile with bleeding

that due to increase in:

- anti-factor VIIIa
- anti-factor IXa
- anti-factor Xa

• anti-factor XIa

• antithrombin

Use additional code (L98.8) to identify nontraumatic haematoma of skin and subcutaneous tissue.

Use additional code (M79.8-) to identify nontraumatic haematoma of soft tissue.

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

Excludes: abnormal coagulation profile without bleeding (R79.83)

long term use of anticoagulants without haemorrhagic disorder (Z92.1)

. . .

# **CHAPTER 18**

# SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED (R00-R99)

...

R79.8

Other specified abnormal findings of blood chemistry

▼0010

♣R79.83 Abnormal coagulation profile

▼0303

Nontherapeutic coagulation assay due to anticoagulants.

Abnormal or prolonged:

- activated:
- clotting time [ACT]
- partial thromboplastin time [aPTT]
- anti-factor Xa
- bleeding time
- coagulation time
- international normalised ratio ([INR])
- partial thromboplastin time ([PTT])
- prothrombin time ([PT])
- thrombin clotting time [TCT]

Overwarfarinisation

Supratherapeutic/subtherapeutic INR (due to anticoagulants)

Supratherapeutic/subtherapeutic warfarinisation

Underwarfarinisation

Unstable INR

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

Excludes: haemorrhagic disorder due to circulating anticoagulants (D68.3) long term use of anticoagulants without haemorrhagic disorder (Z92.1)

♣R79.89 Other specified abnormal findings of blood chemistry

# **ICD-10-AM Alphabetic Index**

Ε

Epistaxis (multiple) R04.0

- due to circulating anticoagulant D68.3
- vicarious menstruation N94.8

# **Australian Coding Standards**

# 0303 ANTICOAGULANT USE AND ABNORMAL COAGULATION PROFILE

# Description(s)

Anticoagulant therapy is commonly used for the treatment and prevention of thromboembolic disease. Anticoagulants can be monitored with different coagulation assays (see *Note* 1) to maintain the coagulation profile of the patient within the normal range.

# **Directive(s)**

#### Personal history of long term (current) use of anticoagulants

- **1.** Assign Z92.1 *Personal history of long term (current) use of anticoagulants* as an additional diagnosis if a patient is on long term anticoagulants **and**:
  - bridging anticoagulant therapy was administered during an episode of care prior to, or following a planned procedure (see Example 1) **or**
  - anticoagulant therapy was withheld because the patient had a medical condition that contraindicated the continued use of anticoagulants (see Example 2) **or**
  - anticoagulant level monitoring was undertaken during the episode of care and the coagulation assay level was within the target therapeutic range (ie where supratherapeutic or subtherapeutic coagulation assay level is not documented) (see Example 3 and *Note* 1).

# Abnormal coagulation profile without bleeding

- 2. Assign R79.83 Abnormal coagulation profile if the coagulation assay level was documented outside the targeted anticoagulant therapeutic range (eg supratherapeutic or subtherapeutic level of the coagulation assay) but no bleeding occurs (see Example 4).
- **3.** Assign external cause codes to indicate the abnormal coagulation profile is related to the administration of an anticoagulant (see Example 4).
- 4. Do not assign abnormal coagulation profile without bleeding more than once in an episode of care.

<u>...</u>

# Note(s)

- 1. Anticoagulant assay includes:
  - activated clotting time (ACT)
  - activated partial thromboplastin time (aPTT)
  - anti-factor Xa
  - International Normalised Ratio (INR)
  - partial thromboplastin time (PTT)
  - prothrombin time (PT)
  - thrombin clotting time (TCT).

. . . .

# **EXAMPLE 5:**

Patient admitted with epistaxis due to long term rivaroxaban use.

Assign: D68.3 Haemorrhagic disorder due to circulating anticoagulants

Y44.2 Anticoagulants causing adverse effects in therapeutic use

**Rationale:** D68.3 — for bleeding due to the anticoagulant use (*Directive* 5)

Y44.2 — ACS 1902 Adverse effects of drugs and radiotherapy

# 3.3 Retired ACS Chapter 3

Application of the ACS template led to ACS 0304 *Pancytopenia* being retired as guidelines within are redundant if following the *General standards* and the ICD-10-AM Alphabetic Index.

# **ICD-10-AM Tabular List**

# **CHAPTER 3**

# DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS AND CERTAIN DISORDERS INVOLVING THE IMMUNE MECHANISM (D50-D89)

. .

# D61

#### Other aplastic anaemias

D61.9

Aplastic anaemia, unspecified

<del>▼-0304</del>

Hypoplastic anaemia NOS Medullary hypoplasia Pancytopenia NOS Panmyelophthisis

..

# OTHER DISEASES OF BLOOD AND BLOOD-FORMING ORGANS (D70-D77)

# D70

#### Agranulocytosis

▼ 0110<del>, 0304</del>

Agranulocytic angina Infantile genetic agranulocytosis

Kostmann's disease

Neutropenia:

- congenital
- cyclic
- drug-induced
- NOS
- periodic
- splenic (primary)
- toxic

Neutropenic splenomegaly

Werner-Schultz disease

Code first sepsis (Chapter 1), if applicable - see Alphabetic Index: Sepsis/by type.

 $\label{thm:code} \textit{Use additional code (R50.-) to identify neutropenic fever without sepsis.}$ 

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

Excludes: transient neonatal neutropenia (P61.5)

# 4. Endocrine, nutritional and metabolic diseases

# 4.1 Thymectomy

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

# **ACHI Tabular List**

**CHAPTER 2** 

# PROCEDURES ON ENDOCRINE SYSTEM (BLOCKS 110-129)

# **THYMUS**

#### **EXCISION**

- - -

128

# Removal of thymus

Removal of thymoma Thymectomy

# 90049-01 Endoscopic thymectomy

Mediastinoscopic thymeetomy
Thoracoscopic thymeetomy

Video assisted thoracoscopic surgery [VATS] thymectomy

Excludes: that with transcervical thymectomy (38448-02 [128])

#### 38838-00 Endoscopic thymectomy

Mediastinoscopic thymectomy

Thoracoscopic thymectomy

Video assisted thoracoscopic surgery [VATS] thymectomy

Excludes: transcervical thymectomy (38448-02 [128])

# 38446-04 Removal of thymus

Includes: that via:

mediastinotomy

• sternotomy

thoracotomy

# 38838-01 Removal of thymus

Includes: that via:

• mediastinotomy
• sternotomy

• thoracotomy

# 38448-02 Removal of thymus via cervical route

Transcervical thymectomy

*Includes:* endoscopy

video assisted

# **ACHI Alphabetic Index**

# E

```
Excision — see also Removal
- thymus (open) (thymoma) NEC 38446-0438838-01 [128]
- - endoscopic (closed) (mediastinoscopic) (thoracoscopic) (video assisted) 90049-0138838-00 [128]
- tumour — see also Excision/lesion(s)
- - thymus (open) (thymoma) NEC 38446 0438838-01 [128]
- - - endoscopic (closed) (mediastinoscopic) (thoracoscopic) (video assisted) 90049-0138838-00 [128]
- - - via cervical route (transcervical) 38448-02 [128]
Exploration — see also Examination AND Incision/by site
- mediastinum
- - performed with any other procedure on respiratory system — omit code
- - via
- - - cervical route (with biopsy) 38448-00 [561]
- - - mediastinotomy 30320-00 [561]
--- with thymectomy 38446-0438838-01 [128]
---- endoscopic 38838-00 [128]
- middle ear 41629-00 [307]
M
Mediastinotomy 30320-00 [561]
- with removal of thymus (thymoma) 38446-0438838-01 [128]
R
Removal — see also Excision
- thymus (open) (thymoma) NEC 38446 0438838-01 [128]
- - endoscopic (closed) (mediastinoscopic) (thoracoscopic) (video assisted) 90049-0138838-00 [128]
- - via cervical route (transcervical) 38448-02 [128]
S
Sternotomy
- with removal of thymus (thymoma) 38446-04 [128]
- - division of adhesions 38647-00 [644]
- - removal of thymus (thymoma) 38838-01 [128]
- median 38418-00 [561]
- - as operative approach -

omit code

- reopening of site, postoperative
- - for control of postoperative haemorrhage 38656-01 [562]
Т
Thoracotomy
- as operative approach — omit code
- with
- - decompression of spinal cord
- - - thoracic (1 level) 51011-01 [46]
---- 2 or more levels 51012-01 [46]
--- thoracolumbar (1 level) (high lumbar) 51011-02 [46]
---- 2 or more levels 51012-02 [46]
- - removal of thymus (thymoma) 38446-0438838-01 [128]
Thymectomy (open) NEC 38446-0438838-01 [128]
- endoscopic (closed) (mediastinoscopic) (thoracoscopic) (video assisted) 90049-0138838-00 [128]
- via cervical route (transcervical) 38448-02 [128]
```

#### V

#### Vasovasostomy

- bilateral 37619-01 [1185]
- - microsurgical 37616-01 [1185]
- unilateral 37619-00 [1185]
- - microsurgical 37616-00 [1185]

VATS (video assisted thoracoscopic surgery) thymectomy 38838-00 [128]

**Veneer** — see Restoration

...

Vestibuloplasty (Obwegeser technique) (open) (oral) (submucosal) 45837-02 [406]

Video assisted thoracoscopic surgery (VATS) thymectomy 38838-00 [128]

Virag procedure (microvascular small vessel bypass for penile erection failure) 90405-01 [1202]

# 4.2 Diabetes mellitus

Application of the ACS template and incorporation of National Coding Advice have led to *Glossary descriptions* added in ICD-10-AM. Refinements to the ACS include an Example that has been relocated from ACS 1438 *Chronic kidney disease* and Figure 1: Flowchart of criteria for assignment of E11.72, E13.72, E14.72 \*Diabetes mellitus with features of insulin resistance or E09.72 *Intermediate hyperglycaemia with features of insulin resistance* has been removed.

# **ICD-10-AM Tabular List**

# **CHAPTER 4**

# ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES (E00–E89) INTERMEDIATE HYPERGLYCAEMIA AND DIABETES MELLITUS (E09–E14)

▼ 0401

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

Use additional code (Z86.3) to identify successful eradication of endocrinopathy.

#### **②** E09

# Intermediate hyperglycaemia

A metabolic disorder characterised by glucose levels too high to be considered normal, though not high enough to meet the criteria for diabetes.

Includes: abnormal glucose (carbohydrate):

- regulation
- tolerance

diabetes, chemical diabetes

diabetes, latent

impaired:

- fasting glycaemia (IFG)
- glucose (carbohydrate):
  - regulation (IGR)
- tolerance (IGT)

latent diabetes

prediabetes

Code also underlying cause or associated genetic syndrome.

Excludes: diabetes mellitus (E10-E14)

elevated blood glucose level (R73)

. . .

# E10

# Type 1 diabetes mellitus

Type 1 diabetes mellitus is a form of diabetes mellitus that results from destruction of insulin-producing beta cells, mostly by autoimmune mechanisms. The subsequent lack of insulin leads to increased blood and urine glucose.

Includes: diabetes (mellitus):

- autoimmune
- brittle
- idiopathic
- insulin dependent [IDDM]
- juvenile-onset
- ketosis-prone

Excludes: diabetes mellitus:

- neonatal (P70.2)
- NOS (E14.-)
- other specified (E13.-)
- **T**type 2 (E11.-) glycosuria: • NOS (R81)
- renal (E74.8)

intermediate hyperglycaemia [IH] (E09.-) postprocedural hypoinsulinaemia (E89.1)

# E10.2

# Type 1 diabetes mellitus with kidney complication



# **©**E10.21

Type 1 diabetes mellitus with incipient diabetic nephropathy

Type 1 diabetes mellitus with:

- chronic kidney disease: [CKD] stage 1-2

- glomerular:
- · basement-membrane thickening
- mesangial expansion
- incipient nephropathy (early)(mild)(reversible)
- · microalbuminuria:
- constant
- persistent
- tubulo-interstitial changes

**Excludes:** with condition classified to E10.22

#### **©**E10.22

# Type 1 diabetes mellitus with established diabetic nephropathy

Type 1 diabetes mellitus with:

- · advanced kidney disease
- · chronic kidney:
- disease [CKD] stage 3–5
- 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

# ♣E10.29 Type 1 diabetes mellitus with other specified kidney complication

Type 1 diabetes mellitus with:

- · acute kidney:
- failure
- impairment
- medullary (papillary) necrosis

# 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
- · hard exudates
- · microaneurysms
- · venous dilatation
- · retinopathy NOS

Excludes: with any condition listed in E10.32 with condition classified to E10.32, E10.33 or E10.35

# ©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
- ischaemia
- venous:
- · beading
- looping
- reduplication

Excludes: with condition classified to E10.33 or E10.35

# ©E10.33 Type 1 diabetes mellitus with proliferative retinopathy

Type 1 diabetes mellitus with:

- · haemorrhage:
- preretinal
- vitreous
- new vessel formation (neovascularisation)
- retinal traction without detachment

**Excludes:** with condition classified to E10.35

# ©E10.34 Type 1 diabetes mellitus with other retinopathy

Type 1 diabetes mellitus with:

- macular:
- oedema (focal)(generalised)(intraretinal)
- star
- maculopathy (circinate)(ischaemic)
- · retinal thickening

# E10.35 Type 1 diabetes mellitus with advanced ophthalmic disease

Type 1 diabetes mellitus with:

- neovascular glaucoma
- rubeosis of iris [rubeosis iridis]
- traction detachment of retina

# E10.36 Type 1 diabetes mellitus with diabetic cataract

Excludes: Ttype 1 diabetes mellitus with early onset age-related cataract (E10.39)

**©**E10.39 Type 1 diabetes mellitus with other specified ophthalmic complication

Type 1 diabetes mellitus with early onset age-related cataract

. . .

E10.6 Type 1 diabetes mellitus with other specified complication

. . .

©E10.64 Type 1 diabetes mellitus with hypoglycaemia

Type 1 diabetes mellitus with hypoglycaemia(ic):

- coma
- NOS
- seizure (convulsion)(fit)
- ₱E10.65 Type 1 diabetes mellitus with poor control

Type 1 diabetes mellitus:

- for stabilisation
- labile
- · poorly controlled
- unstable
- E10.69 Type 1 diabetes mellitus with other specified complication

Type 1 diabetes mellitus with:

- diabetic:
- fibrous breast disease (mastopathy)(sclerosing lymphocytic lobulitis)
- muscle infarction (aseptic myonecrosis)(ischaemic myonecrosis)(tumoriform focal muscular degeneration)
- gangrene (acute dermal)(bacterial)(haemolytic):
- Fournier's
- Meleney's (progressive bacterial synergistic)
- · necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E10.73)
- neuropathy (E10.73)

# E10.7 Type 1 diabetes mellitus with multiple complications

- Type 1 diabetes mellitus with multiple microvascular and other specified nonvascular complications. Two or more of conditions classifiable to E10.2-, E10.3-, E10.4-, E10.53 or E10.62
- ©E10.73 Type 1 diabetes mellitus with foot ulcer due to multiple causes

Diabetic foot [diabetic foot ulcer] refers to chronic foot ulcers where the underlying aetiology is a combination of disturbed sensation from diabetic neuropathy and impaired perfusion from diabetic vasculopathy. The ulcers typically occur in areas of increased plantar pressure, especially beneath the metatarsal heads.

Type 1 diabetes mellitus with foot ulcer and peripheral:

- angiopathy
- neuropathy
- E10.8 Type 1 diabetes mellitus with unspecified complication
- E10.9 Type 1 diabetes mellitus without complication

# E11 Type 2 diabetes mellitus

Type 2 diabetes mellitus is a metabolic disorder that is characterised by high blood glucose in the context of insulin resistance and relative insulin deficiency.

Includes: diabetes (mellitus)(nonobese)(obese):

- adult onset
- due to insulin secretory defect
- · insulin resistant
- maturity onset
- noninsulin dependent [NIDDM]
- nonketotic

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Excludes: diabetes mellitus:

- maturity onset (of the young) ([MODY]) (E13.-)
- neonatal (P70.2)
- NOS (E14.-)
- other specified (E13.-)
- **<u>Ttype 1 (E10.-)</u>**
- glycosuria:
- NOS (R81) • renal (E74.8)

intermediate hyperglycaemia [IH] (E09.-) postprocedural hypoinsulinaemia (E89.1)

# E11.2

#### Type 2 diabetes mellitus with kidney complication

**▼** 1438

# **©**E11.21

Type 2 diabetes mellitus with incipient diabetic nephropathy

Type 2 diabetes mellitus with:

• chronic kidney disease: [CKD] stage 1-2

• stage 1

#### • stage 2

- glomerular:
- · basement-membrane thickening
- · mesangial expansion
- incipient nephropathy (early)(mild)(reversible)
- microalbuminuria:
- persistent
- constant
- · tubulo-interstitial changes

Excludes: with condition classified to E11.22

E11.22 Type 2 diabetes mellitus with established diabetic nephropathy

Type 2 diabetes mellitus with:

- · advanced kidney disease
- chronic kidney:
- disease [CKD] stage 3-5
- 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

#### **©**E11.29 Type 2 diabetes mellitus with other specified kidney complication

Type 2 diabetes mellitus with:

- acute kidney:
- failure
- impairment
- medullary (papillary) necrosis

# 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
- · hard exudates
- · microaneurysms
- · venous dilatation
- · retinopathy NOS

Excludes: that with any condition listed in E11.32 with condition classified to E11.32, E11.33 or E11.35

# ©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
- ischaemia
- venous:
- · beading
- looping
- reduplication

#### Excludes: with condition classified to E11.33 or E11.35

# ©E11.33 Type 2 diabetes mellitus with proliferative retinopathy

Type 2 diabetes mellitus with:

- · haemorrhage:
- preretinal
- vitreous
- new vessel formation (neovascularisation)
- · retinal traction without detachment

#### Excludes: with condition classified to E11.35

# E11.34 Type 2 diabetes mellitus with other retinopathy

Type 2 diabetes mellitus with:

- macular:
- oedema (focal)(generalised)(intraretinal)
- star
- maculopathy (circinate)(ischaemic)
- retinal thickening

# ©E11.35 Type 2 diabetes mellitus with advanced ophthalmic disease

Type 2 diabetes mellitus with:

- neovascular glaucoma
- rubeosis of iris [rubeosis iridis]
- traction detachment of retina

# ♠E11.36 Type 2 diabetes mellitus with diabetic cataract

Excludes: Type 2 diabetes mellitus with early onset age-related cataract (E11.39)

# ♠E11.39 Type 2 diabetes mellitus with other specified ophthalmic complication

Type 2 diabetes mellitus with early onset age-related cataract

...

# E11.6 Type 2 diabetes mellitus with other specified complication

..

# ©E11.64 Type 2 diabetes mellitus with hypoglycaemia

Type 2 diabetes mellitus with hypoglycaemia(ic):

- coma
- NOS
- seizure (convulsion)(fit)

# ©E11.65 Type 2 diabetes mellitus with poor control

Type 2 diabetes mellitus:

- for stabilisation
- labile
- · poorly controlled
- unstable
- · with secondary treatment failure

# ©E11.69 Type 2 diabetes mellitus with other specified complication

Type 2 diabetes mellitus with:

- · diabetic:
- fibrous breast disease (mastopathy)(sclerosing lymphocytic lobulitis)
- muscle infarction (aseptic myonecrosis)(ischaemic myonecrosis)(tumoriform focal muscular degeneration)
- gangrene (acute dermal)(bacterial)(haemolytic):
- Fournier's
- Meleney's (progressive bacterial synergistic)
- · necrotising fasciitis
- ulcer (lower extremity)

Excludes: foot ulcer with peripheral:

- angiopathy (E11.73)
- neuropathy (E11.73)

pressure ulcer not meeting the criteria for diabetic foot (L89.-)

# E11.7 Type 2 diabetes mellitus with multiple complications

# Type 2 diabetes mellitus with multiple microvascular and other specified nonvascular complications. Two or more of conditions classifiable to E11.2-, E11.3-, E11.4-, E11.53 or E11.62

# E11.72 Type 2 diabetes mellitus with features of insulin resistance

Insulin resistance syndrome [metabolic syndrome or syndrome X] refers to a cluster of disorders which are often present together. The features of insulin resistance are most commonly associated with T2DM.

Type 2 diabetes mellitus 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)
- fatty (change of) liver disease [NAFLD]
- steatohepatitis [NASH]
- nonalcoholic steatohepatitis (NASH)
- · 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.

#### E11.73 Type 2 diabetes mellitus with foot ulcer due to multiple causes

Diabetic foot [diabetic foot ulcer] refers to chronic foot ulcers where the underlying aetiology is a combination of disturbed sensation from diabetic neuropathy and impaired perfusion from diabetic vasculopathy. The ulcers typically occur in areas of increased plantar pressure, especially beneath the metatarsal heads.

Type 2 diabetes mellitus with foot ulcer and peripheral:

- · angiopathy
- · neuropathy

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E11.8 Type 2 diabetes mellitus with unspecified complication
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#### E11.9 Type 2 diabetes mellitus without complication

. . .

# E13

#### Other specified diabetes mellitus

Diabetes mellitus which cannot be classified as either type 1 or type 2 diabetes mellitus.

Includes: diabetes mellitus (due to) (in) (secondary to) (with):

- cystic fibrosis
- drug-induced or chemical-induced
- endocrinopathy
- genetic: defect of:
- defect of:
- beta-cell function
- insulin action
- syndrome
- genetic syndrome
- immune-mediated disease
- · infection
- maturity onset of the young [(MODY)]
- pancreatic exocrine disease

Code also underlying cause or associated genetic syndrome.

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

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Excludes: diabetes mellitus:

- neonatal (P70.2)
- NOS (E14.-)
- \* Type 1 (E10.-)
- Type 2 (E11. )
- type:
- 1 (E10.-)
- 2 (E11.-)
- glycosuria:
- NOS (R81)
- renal (E74.8)

intermediate hyperglycaemia [IH] (E09.-)

• •

# E13.2

# Other specified diabetes mellitus with kidney complication

**▼** 1438

# **©**E13.21

Other specified diabetes mellitus with incipient diabetic nephropathy

Diabetes mellitus NEC with:

- chronic kidney disease: [CKD] stage 1-2
- stage 1
- stage 2
- glomerular:
- basement-membrane thickening
- · mesangial expansion
- incipient nephropathy (early)(mild)(reversible)
- microalbuminuria:
- constant
- persistent
- tubulo-interstitial changes

Excludes: with condition classified to E13.22

# E13.22 Other specified diabetes mellitus with established diabetic nephropathy

Diabetes mellitus NEC with:

- advanced kidney disease
- chronic kidney:
- disease [CKD] stage 3-5

- 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

# ©E13.29 Other specified diabetes mellitus with other specified kidney complication

Diabetes mellitus NEC with:

- acute kidney:
- failure
- impairment
- medullary (papillary) necrosis

# Other specified diabetes mellitus with ophthalmic complication

# ©E13.31 Other specified diabetes mellitus with background retinopathy

Diabetes mellitus NEC with:

• retinal:

E13.3

- · haemorrhages:
- dot-and-blot
- flame-shaped
- · hard exudates
- microaneurysms
- venous dilatation
- retinopathy NOS

Excludes: that with any condition listed in E13.32 with condition classified to E13.32, E13.33 or E13.35

# ©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
- ischaemia
- venous:
- · beading
- looping
- reduplication

Excludes: with condition classified to E13.33 or E13.35

# E13.33 Other specified diabetes mellitus with proliferative retinopathy

Diabetes mellitus NEC with:

- · haemorrhage:
- preretinal
- vitreous
- new vessel formation (neovascularisation)
- retinal traction without detachment

Excludes: with condition classified to E13.35

# ©E13.34 Other specified diabetes mellitus with other retinopathy

Diabetes mellitus NEC with:

- · macular:
- oedema (focal)(generalised)(intraretinal)
- star
- maculopathy (circinate)(ischaemic)
- retinal thickening

# ©E13.35 Other specified diabetes mellitus with advanced ophthalmic disease

Diabetes mellitus NEC with:

- neovascular glaucoma
- rubeosis of iris [rubeosis iridis]
- traction detachment of retina

# ©E13.36 Other specified diabetes mellitus with diabetic cataract

Excludes: diabetes mellitus NEC with early onset age-related cataract (E13.39)

# ©E13.39 Other specified diabetes mellitus with other specified ophthalmic complication

Diabetes mellitus NEC with early onset age-related cataract

...

# E13.6 Other specified diabetes mellitus with other specified complication

...

# ©E13.64 Other specified diabetes mellitus with hypoglycaemia

Diabetes mellitus NEC with hypoglycaemia(ic):

- coma
- NOS
- seizure (convulsion)(fit)

# ©E13.65 Other specified diabetes mellitus with poor control

Other specified diabetes mellitus:

- for stabilisation
- labile
- poorly controlled
- unstable
- with secondary treatment failure

# ©E13.69 Other specified diabetes mellitus with other specified complication

Diabetes mellitus NEC with:

- diabetic:
- fibrous breast disease (mastopathy)(sclerosing lymphocytic lobulitis)
- muscle infarction (aseptic myonecrosis)(ischaemic myonecrosis)(tumoriform focal muscular degeneration)
- gangrene (acute dermal)(bacterial)(haemolytic):
- Fournier's
- Meleney's (progressive bacterial synergistic)
- · necrotising fasciitis
- ulcer (lower extremity)

**Excludes:** foot ulcer with peripheral:

- angiopathy (E13.73)
- neuropathy (E13.73)

pressure ulcer not meeting the criteria for diabetic foot (L89.-)

# E13.7 Other specified diabetes mellitus with multiple complications

# ©E13.71 Other specified diabetes mellitus with multiple microvascular and other specified nonvascular complications

Two or more of conditions classifiable to E13.2-, E13.3-, E13.4-, E13.53 or E13.62

# ©E13.72 Other specified diabetes mellitus with features of insulin resistance

Insulin resistance syndrome [metabolic syndrome or syndrome X] refers to a cluster of disorders which are often present together.

Other specified diabetes mellitus 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)
- fatty (change of) liver disease [NAFLD]
- steatohepatitis [NASH]
- nonalcoholic steatohepatitis (NASH)
- 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.

# ♠E13.73 Other specified diabetes mellitus with foot ulcer due to multiple causes

Diabetic foot [diabetic foot ulcer] refers to chronic foot ulcers where the underlying aetiology is a combination of disturbed sensation from diabetic neuropathy and impaired perfusion from diabetic vasculopathy. The ulcers typically occur in areas of increased plantar pressure, especially beneath the metatarsal heads.

Diabetes mellitus NEC with foot ulcer and peripheral:

- · angiopathy
- · neuropathy

# E13.8 Other specified diabetes mellitus with unspecified complication

# E13.9 Other specified diabetes mellitus without complication

# E14

#### Unspecified diabetes mellitus

Diabetes mellitus without mention of type.

Diabetes mellitus NOS

Use additional code (Z92.22) to identify current pre-admission or ongoing insulin treatment.

Excludes: diabetes mellitus:

- neonatal (P70.2)
- noninsulin dependent [NIDDM] (E11.-)
- Type 1 (E10. )
- Type 2 (E11.-)
- type:
  - 1 (E10.-)
- 2 (E11.-)

glycosuria:

- NOS (R81)
- renal (E74.8)

intermediate hyperglycaemia [IH] (E09.-) postprocedural hypoinsulinaemia (E89.1)

. .

# E14.2

# Unspecified diabetes mellitus with kidney complication

**▼** 1438

#### **©**E14.21

Unspecified diabetes mellitus with incipient diabetic nephropathy

Diabetes mellitus NOS with:

- chronic kidney disease: [CKD] stage 1-2
- \*stage 1
- stage 2
- glomerular:
- basement-membrane thickening
- · mesangial expansion
- incipient nephropathy (early)(mild)(reversible)
- microalbuminuria:
- constant

- persistent
- tubulo-interstitial changes

# Excludes: with condition classified to E14.22

# ©E14.22 Unspecified diabetes mellitus with established diabetic nephropathy

Diabetes mellitus NOS with:

- advanced kidney disease
- chronic kidney:
- disease [CKD] stage 3–5
- 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

# ©E14.29 Unspecified diabetes mellitus with other specified kidney complication

Diabetes mellitus NOS with:

- acute kidney:
- failure
- impairment
- medullary (papillary) necrosis

# 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
  - hard exudates
  - microaneurysmsvenous dilatation
- retinopathy NOS

Excludes: that with any condition listed in E14.32 with condition classified to E14.32, E14.33 or E14.35

# ©E14.32 Unspecified diabetes mellitus with preproliferative retinopathy

Diabetes mellitus NOS with:

- intraretinal microvascular abnormalities [IRMA]
- retinal:
- cotton-wool spots
- haemorrhages:
- blotchy
- round
- small
- ischaemia
- venous:beading
- looping
- reduplication

Excludes: with condition classified to E14.33 or E14.35

# ©E14.33 Unspecified diabetes mellitus with proliferative retinopathy

Diabetes mellitus NOS with:

- · haemorrhage:
- preretinal
- · vitreous
- new vessel formation (neovascularisation)
- retinal traction without detachment

Excludes: with condition classified to E14.35

# ©E14.34 Unspecified diabetes mellitus with other retinopathy

Diabetes mellitus NOS with:

- macular:
- oedema (focal)(generalised)(intraretinal)
- star
- maculopathy (circinate)(ischaemic)
- retinal thickening

# ₱E14.35 Unspecified diabetes mellitus with advanced ophthalmic disease

Diabetes mellitus NOS with:

- neovascular glaucoma
- rubeosis of iris [rubeosis iridis]
- traction detachment of retina

# ©E14.36 Unspecified diabetes mellitus with diabetic cataract

Excludes: diabetes mellitus NOS with early onset age-related cataract (E14.39)

# ♠E14.39 Unspecified diabetes mellitus with other specified ophthalmic complication

Diabetes mellitus NOS with early onset age-related cataract

• • •

#### E14.6 Unspecified diabetes mellitus with other specified complication

. . .

# ©E14.64 Unspecified diabetes mellitus with hypoglycaemia

Diabetes mellitus NOS with hypoglycaemia(ic):

- coma
- NOS
- seizure (convulsion)(fit)

# ©E14.65 Unspecified diabetes mellitus with poor control

Unspecified diabetes mellitus:

- for stabilisation
- labile
- · poorly controlled
- unstable
- with secondary treatment failure

# E14.69 Unspecified diabetes mellitus with other specified complication

Diabetes mellitus NOS with:

- diabetic:
- fibrous breast disease (mastopathy)(sclerosing lymphocytic lobulitis)
- muscle infarction (aseptic myonecrosis)(ischaemic myonecrosis)(tumoriform focal muscular degeneration)
- gangrene (acute dermal)(bacterial)(haemolytic):
- Fournier's
- Meleney's (progressive bacterial synergistic)
- · necrotising fasciitis
- ulcer (lower extremity)

#### Excludes: foot ulcer with peripheral:

- angiopathy (E14.73)
- neuropathy (E14.73)

pressure ulcer not meeting the criteria for diabetic foot (L89.-)

# E14.7 Unspecified diabetes mellitus with multiple complications

**©**E14.71 Unspecified diabetes mellitus with multiple microvascular and other specified nonvascular complications Two or more of conditions classifiable to E14.2-, E14.3-, E14.4-, E14.53 or E14.62

# ©E14.72 Unspecified diabetes mellitus with features of insulin resistance

Insulin resistance syndrome [metabolic syndrome or syndrome X] refers to a cluster of disorders which are often present together.

Unspecified diabetes mellitus 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)
  - fatty (change of) liver disease [NAFLD]
- steatohepatitis [NASH]
- nonalcoholic steatohenatitis (NASH)
- · 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.

# **②**E14.73 Unspecified diabetes mellitus with foot ulcer due to multiple causes

Diabetic foot [diabetic foot ulcer] refers to chronic foot ulcers where the underlying aetiology is a combination of disturbed sensation from diabetic neuropathy and impaired perfusion from diabetic vasculopathy. The ulcers typically occur in areas of increased plantar pressure, especially beneath the metatarsal heads.

Diabetes mellitus NOS with foot ulcer and peripheral:

- · angiopathy
- · neuropathy
- E14.8 Unspecified diabetes mellitus with unspecified complication
- E14.9 Unspecified diabetes mellitus without complication

. . .

# E16 Other disorders of pancreatic internal secretion

...

E16.2 Hypoglycaemia, unspecified

. . .

E88

# Other metabolic disorders

 ${\it Use additional external cause code (Chapter 20) to identify cause.}$ 

Excludes: histiocytosis X (chronic) (C96.6)

. . .

# E88.3 Tumour lysis syndrome

Tumour lysis:

- following antineoplastic drug therapy
- NOS
- spontaneous

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

# **CHAPTER 15**

# PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (000–099)

O24

Diabetes mellitus and intermediate hyperglycaemia in pregnancy, childbirth and the puerperium

**▼**0401, 1521

O24.0

Pre-existing Type 1 diabetes mellitus in pregnancy, childbirth and the puerperium

Use additional code (E10.-) to identify diabetes mellitus.

. . .

024.4

Diabetes mellitus arising during pregnancy

See subdivisions

Any degree of glucose intolerance with onset or first recognition during pregnancy.

Gestational diabetes mellitus [GDM] NOS

Use additional code (E16.2) to identify hypoglycaemia.

# **Australian Coding Standards**

# 0401 DIABETES MELLITUS AND INTERMEDIATE HYPERGLYCAEMIA

See also section 14.7 Revised ACS

#### **EXAMPLE 8:**

Patient was admitted with chronic kidney disease and diabetic nephropathy (type 2 diabetes mellitus), for review of kidney function. Biochemistry results showed an eGFR = 41 mL/min, down from 47 mL/min one month previously.

Assign: N18.3 Chronic kidney disease, stage 3

E11.22 Type 2 diabetes mellitus with established diabetic nephropathy

**Rationale:** N18.3 — for complication or condition associated with DM classified outside block

E09–E14 Intermediate hyperglycaemia and diabetes mellitus (Directive 1.7)

E11.22 — for 'diabetic' nephropathy (Directives 1.2 and 1.6)

# 3. DM AND IH WITH FEATURES OF INSULIN RESISTANCE

. . .

# **Directive(s)**

<u>...</u>

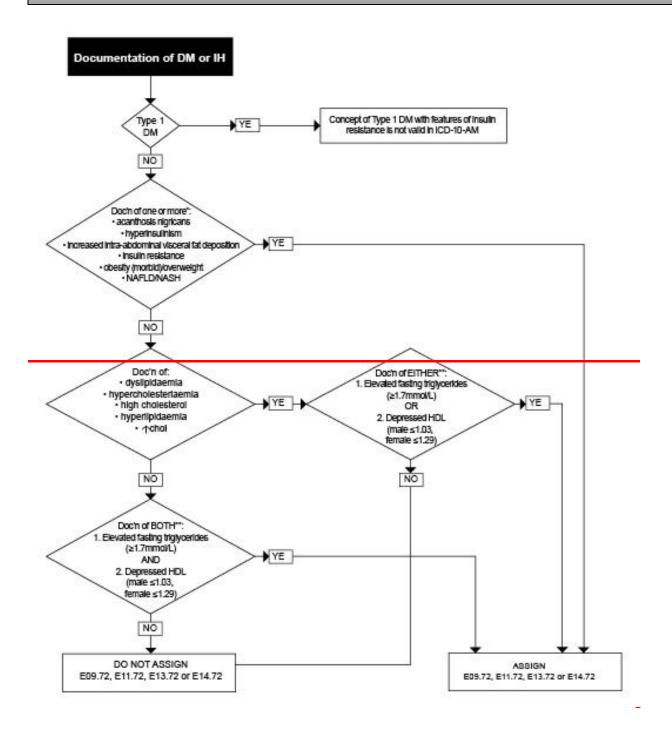
# **Dyslipidaemia**

- **3.3** Assign E1-.72 \*diabetes mellitus with features of insulin resistance or E09.72 Intermediate hyperglycaemia with features of insulin resistance if:
  - increased cholesterol is documented with **either** increased fasting **or** non-fasting triglycerides or if decreased HDL is documented, as this can be considered as dyslipidaemia **or**
  - increased cholesterol is not documented but **both** increased fasting **or** non-fasting triglycerides and decreased HDL are documented.

3.4 Do not assign E1-.72 \*diabetes mellitus with features of insulin resistance or E09.72 Intermediate

hyperglycaemia with features of insulin resistance if increased cholesterol only and no increased fasting or non fasting triglycerides or decreased HDL are specified.

...



# 4.3 Minor addenda

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

# **ACHI Tabular List**

# **CHAPTER 2**

# PROCEDURES ON ENDOCRINE SYSTEM (BLOCKS 110–129) PITUITARY GLAND [HYPOPHYSIS]

# **EXCISION**



Other excision procedures on pituitary gland

• • •

39715-01

Partial excision of pituitary gland, transsphenoidal approach Removal of lesion of pituitary gland via transsphenoidal approach

Includes: dermis graft

dermofat graft fascia graft stereotaxy

transethmoidal approach transnasal approach

Excludes: that for removal of craniopharyngioma (39712-02 [125])

# 4.4 Retired ACS Chapter 4

Application of the ACS template has led to ACS 0402 *Cystic fibrosis* being retired with the information relocated to the ICD-10-AM Tabular List.

# **ICD-10-AM Tabular List**



# **Cystic fibrosis**

<del>▼-0402</del>

Cystic fibrosis [CF] is a genetic disorder characterised by the production of sweat with a high salt content and mucus secretions with an abnormal viscosity. The disease is chronic and generally progressive, with onset usually occurring during early childhood or, occasionally, at birth.

Meconium ileus in cystic fibrosis† (P75\*)

Includes: mucoviscidosis

**Note:** Commonly occurring manifestations of CF include:

- CF liver disease
- CF-related diabetes
- chronic suppurative lung disease
- distal intestinal obstruction syndrome
- male infertility (absent or altered vas deferens)
- meconium ileus
- nasal polyps
- pancreatic exocrine insufficiency, leading to malabsorption
- sweat gland salt loss.

# 5. Mental and behavioural disorders

# 5.1 Repetitive transcranial magnetic stimulation

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

# **ACHI Tabular List**

**CHAPTER 19** 

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) THERAPEUTIC INTERVENTIONS

# OTHER THERAPEUTIC INTERVENTIONS

. . .

•••		
1908	Other therapeutic interventions	
93173-00	Acupuncture	
96252-00	Repetitive transcranial magnetic stimulation, 1 treatment Repetitive transcranial magnetic stimulation NOS	
14220-00	Repetitive transcranial magnetic stimulation [rTMS], 1 treatment	
96253-00	Repetitive transcranial magnetic stimulation, 2–20 treatments	
14220-01	Repetitive transcranial magnetic stimulation [rTMS], 2 to 15 treatments	
96254-00	Repetitive transcranial magnetic stimulation, 21 or more treatments	
14217-00	Repetitive transcranial magnetic stimulation [rTMS], 16 to 35 treatments	
14217-01	Repetitive transcranial magnetic stimulation [rTMS], more than 35 treatments	
92195-00	Irrigation of catheter, not elsewhere classified	
	Excludes: indwelling urinary (92101-00 [1901]) peritoneal port (92058-01 [1922])	

# **ACHI Alphabetic Index**

R

Repetitive transcranial magnetic stimulation (rTMS) (1 treatment) 96252-00 14220-00 [1908]

ureteral (92100-00 **[1901]**) vascular (92058-01 **[1922]**) ventricular (90002-00 **[5]**)

- 2-152-20 treatments 96253-00-14220-01 [1908]
- 16-35 treatments 14217-00 [1908]
- more than 35 treatments 14217-01 [1908]
- -21 or more treatments 96254-00 [1908]

# S

#### Stimulation — see also Insertion/device

. . . .

- transcranial magnetic, repetitive (rTMS) (1 treatment) 96252-00-14220-00 [1908]
- - 2-15-2-20 treatments 96253-00-14220-01 [1908]
- -- 21 and more treatments 96254-00 [1908]
- - 16-35 treatments 14217-00 [1908]
- - more than 35 treatments 14217-01 [1908]
- unerupted tooth (packing) 97381-00 [461]
- vagus nerve, therapy 40707-00 [1880]

#### T

..

Transcranial magnetic stimulation, repetitive (rTMS) (1 treatment) 96252-00-14220-00 [1908]

- 2-152-20 treatments 96253-0014220-01 [1908]
- 16-35 treatments 14217-00 [1908]
- more than 35 treatments 14217-01 [1908]
- 21 or more treatments 96254-00 [1908]

Transection — see also Division

# 5.2 Suicidal and homicidal ideation, and intentional self-harm

The inability to classify homicidal ideation led to the creation of an ICD-10-AM code to enable data collection.

Clinical advice also recommended changes to the classification to allow homicidal ideation and suicidal ideation to be assigned in addition to a mental health disorder leading to the following amendments in ICD-10-AM.

The activity code U73.8 *Other specified activity* has also been expanded to identify intentional self-harm.

# **ICD-10-AM Tabular List**

# **CHAPTER 5**

# MENTAL AND BEHAVIOURAL DISORDERS (F00–F99)

. . .

Note:

The *Glossary description/definitions* in Chapter 5 are clinical descriptions and are included in ICD-10-AM in accordance with ICD-10 (see ICD-10 AM Tabular List: Conventions used in the ICD-10-AM Tabular List/7.1 Glossary description/Definitions). While the *Glossary descriptions* have been retained, they may contain outdated terminology and definitions.

Certain conditions listed in Chapter 5 are no longer considered disorders of mental health according to the World Health Organization. These conditions remain listed in this chapter due to limitations of the structure of ICD-10-AM.

Code also suicidal ideation (R45.81) or homicidal ideation (R45.82) if applicable.

Excludes: symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00–R39, R47–R99)

# SYMPTOMS AND SIGNS INVOLVING COGNITION, PERCEPTION, EMOTIONAL STATE AND BEHAVIOUR (R40–R46)

Excludes: those constituting part of a pattern of mental disorder (F00 F99)

R40

#### Somnolence, stupor and coma

**▼**1905

**Note:** For classification purposes, where there are multiple GCS scores documented in an episode of care, code assignment should be based on the lowest GCS score, that is, the most severe level of consciousness

impairment.

Excludes: as part of a mental or behavioural disorder (F00–F99)

. . .

R41 Other symptoms and signs involving cognitive functions and awareness

Excludes: as part of a mental or behavioural disorder (F00–F99)

dissociative [conversion] disorders (F44.-)

. . .

R42 Dizziness and giddiness

Light-headedness Vertigo NOS

Excludes: as part of a mental or behavioural disorder (F00–F99)

vertiginous syndromes (H81.-)

R43 Disturbances of smell and taste

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R43.0 Anosmia

• • •

R44 Other symptoms and signs involving general sensations and perceptions

Excludes: as part of a mental or behavioural disorder (F00–F99)

disturbances of skin sensation (R20.-)

R44.0 Auditory hallucinations

• • •

R45 Symptoms and signs involving emotional state

R45.0 Nervousness

Nervous tension

Excludes: as part of a mental or behavioural disorder (F00–F99)

R45.1 Restlessness and agitation

Excludes: as part of a mental or behavioural disorder (F00–F99)

R45.2 Unhappiness

Worries NOS

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R45.3 Demoralisation and apathy

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R45.4 Irritability and anger

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R45.5 Hostility

Excludes: as part of a mental or behavioural disorder (F00–F99)

R45.6 Physical violence

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R45.7 State of emotional shock and stress, unspecified

Excludes: as part of a mental or behavioural disorder (F00–F99)

R45.8 Other symptoms and signs involving emotional state

♣R45.81 Suicidal ideation

Thoughts, ideas, or ruminations about the possibility of ending one's life, ranging from thinking that one would be better off dead to formulation of elaborate plans.

Suicidal tendencies

Code first any associated mental or behavioural disorder (F00-F99), if applicable.

Excludes: signs and symptoms constituting part of a mental disorder (F00 F99)

©R45.82 Homicidal ideation

Thoughts, ideas, or ruminations about killing another person, which range from vague ideas of revenge to detailed and fully formulated plans but do not include actual homicidal attempts.

Homicidal tendencies

Code first any associated mental or behavioural disorder (F00–F99), if applicable.

©R45.89 Other symptoms and signs involving emotional state

Excludes: as part of a mental or behavioural disorder (F00–F99)

R46 Symptoms and signs involving appearance and behaviour

**Excludes:** as part of a mental or behavioural disorder (F00–F99)

R46.0 Very low level of personal hygiene

# **CHAPTER 20**

# EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, V00–Y98)

# While engaged in other activity (U73)

**♦**U73 Other activity

**Note:** When multiple activity codes apply, assign the code appearing highest on the list.

**♥U73.8** Other specified activity

U73.81 Intentional self-harm

Other specified activity, not elsewhere classified

**O**U73.9 Unspecified activity

# **ICD-10-AM Alphabetic Index**

Id reaction (due to bacteria) L30.2

#### Ideation, suicidal R45.81

- homicidal R45.82
- suicidal R45.81

Idioglossia F80.0

# R

Rise, venous pressure 187.8

#### Risk, suicidal R45.81

- constituting part of a mental disorder see condition
- homicidal R45.82
- suicidal R45.81

Ritter's disease L00

# S

# Suicide, suicidal (attempted)

- by poisoning see Table of drugs and chemicals
- history of (personal) Z91.5
- in family Z81.8
- ideation (risk) R45.81
- observation following alleged attempt Z03.89
- tendencies R45.81
- trauma NEC (see also nature and site of injury) T14.9

# Tendency, tendencies

- bleeding (see also Defect/coagulation) D68.9
- homicidal R45.82
- paranoid F61
- suicidal suicide R45.81
- mental disorder
- to fall NEC R29.6

# **SECTION II**

# **EXTERNAL CAUSES OF INJURY**

# Α

# **Activity U73.9**

- hobby NEC U72
- intentional self-harm U73.81
- learning activities U73.1
- sleeping U73.2
- specified NEC <u>U73.89</u><del>U73.8</del>
- sport see Sport
- suicide (attempt) U73.81 U73.8
- vital activities U73.2

# 5.3 Vaping

To facilitate data collection for vaping use and adverse effects from vaping, as a health issue of national significance, the following refinements have been made to ICD-10-AM and the ACS:

# **ICD-10-AM Tabular List**

# **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

# PERSONS ENCOUNTERING HEALTH SERVICES IN OTHER CIRCUMSTANCES (Z70–Z76)

# **Z72**

# Problems related to lifestyle

Note:

Hazardous use is a pattern of substance use that increases the risk of harmful consequences for the user. In contrast to harmful use, hazardous use refers to patterns of use that are of public health significance despite the absence of any current disorder in the individual user.

Excludes: problems related to:

• life-management difficulty (Z73.-)

• socioeconomic and psychosocial circumstances (Z55–Z65)

...

Z72.6 Gambling and betting

Excludes: compulsive or pathological gambling (F63.0)

**©**Z72.7 Use of vaping device, current

**▼**0050, 0503

**Excludes:** personal history of use of vaping device (Z91.81) vaping related disorder (U07.0)

Z91

# Personal history of risk-factors, not elsewhere classified

Excludes: exposure to pollution and other problems related to physical environment (Z58.-)

occupational exposure to risk-factors (Z57.-) personal history of psychoactive substance use disorder (Z86.4)

Z91.0 Personal history of allergy, other than to drugs and biological substances

Excludes: personal history of allergy to drugs and biological substances (Z88.-)

...

Z91.8 Personal history of other specified risk-factors, not elsewhere classified

©Z91.81 Personal history of use of vaping device

**▼**0503

**Excludes:** vaping related disorder (U07.0)

291.89 Personal history of other specified risk-factors, not elsewhere classified

Z92 Personal history of medical treatment

• • •

# **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

# PERSONS ENCOUNTERING HEALTH SERVICES IN OTHER CIRCUMSTANCES (Z70–Z76)

Z72

#### Problems related to lifestyle

Note:

Hazardous use is a pattern of substance use that increases the risk of harmful consequences for the user. In contrast to harmful use, hazardous use refers to patterns of use that are of public health significance despite the absence of any current disorder in the individual user.

Excludes: problems related to:

• life-management difficulty (Z73.-)

• socioeconomic and psychosocial circumstances (Z55–Z65)

. . .

Z72.6 Gambling and betting

Excludes: compulsive or pathological gambling (F63.0)

©Z72.7 Use of vaping device, current

**V**0050, 0503

Excludes: personal history of use of vaping device (Z91.81) vaping related disorder (U07.0)

Z91

# Personal history of risk-factors, not elsewhere classified

Engl

Excludes: exposure to pollution and other problems related to physical environment (Z58.-)

occupational exposure to risk-factors (Z57.-)

personal history of psychoactive substance use disorder (Z86.4)

Z91.0

Personal history of allergy, other than to drugs and biological substances

Excludes: personal history of allergy to drugs and biological substances (Z88.-)

. . .

Z91.8

Personal history of other specified risk-factors, not elsewhere classified

**©**Z91.81

Personal history of use of vaping device

<u>▼0503</u>

**Excludes:** vaping related disorder (U07.0)

©Z91.89 Personal history of other specified risk-factors, not elsewhere classified

Z92

Personal history of medical treatment

...

# **CHAPTER 22**

CODES FOR SPECIAL PURPOSES (U00-U49, U75-U77, U78-U88, U91-U93)

U07

**Emergency use of U07** 

▼0012

# U07.0

Vaping related disorder

▼0050

Disorder resulting from inhaling a vaporised solution (aerosol) which frequently contains flavourants, usually dissolved into propylene glycol or glycerine, or both, and may or may not contain doses of nicotine, and other substances and additives with the use of electronic nicotine delivery systems (ENDS) or electronic non-nicotine delivery systems (ENNDS).

Code first manifestation(s).

U07.1

- tobacco Z72.0

- vaping device, current Z72.7

Usher-Senear disease or syndrome L10.4

Coronavirus disease 2019 [COVID-19], virus identified

# **ICD-10-AM Alphabetic Index**

# Н

```
History (of) (personal)
- abuse (adult) (not affecting childhood) NEC
- poisoning NEC <del>Z91.8</del>Z91.89
- - self-harm or suicide attempt Z91.5
- risk factors NEC Z91.8291.89
- use of-medicaments (current) (long term) NEC Z92.28
-- anticoagulants Z92.1
   aspirin Z92.21
  insulin Z92.22
- - medicaments (current) (long term) NEC Z92.28
- - - anticoagulants Z92.1
- - - aspirin Z92.21
- - - insulin Z92.22

    - - vaping device Z91.81

His-Werner disease A79.0
Injury (traumatic) — continued - instrumental (during surgery) NEC (see also Complication(s)/accidental puncture or laceration
 during procedure) T81.2
- lung NEC S27.38
- - associated with e-cigarette, or vaping, product use (EVALI) U07.0
P
Problem (related to) (with)
- health
- - specified NEC Z75.8
- - status NEC Z91.89
- hearing H91.9
- urinary system NEC N39.9
- vaping device use, current Z72.7
- voice production R47.8
U
Use (of)
- medicaments for a long term (current) NEC Z92.28
```

# V

Vanillism L23.6

Vaping related disorder U07.0

- device use
- - current Z72.7
- - personal history Z91.81
- related disorder U07.0

Vapour asphyxia or suffocation NEC T59.9

- specified agent — see Table of drugs and chemicals

. . .

# **Australian Coding Standards**

# 0503 DRUG, ALCOHOL AND TOBACCO USE DISORDERS

. . .

# 4. VAPING

# **Description(s)**

Vapes are a type of electronic delivery system (e-cigarette) designed to vaporise liquid and deliver it into the lungs during inhalation. Ingredients in vapes regardless of labelling have been found to include propylene glycol, vegetable glycerine, propylene glycerol, flavours, nicotine and other chemicals such as formaldehyde, acetone, nickel, tin and lead. Other illicit drugs such as marijuana can also be used in vapes.

E-cigarettes may also be known as electronic cigarettes, e-cigs, electronic nicotine delivery systems (ENDS), electronic non-nicotine delivery systems (ENDS), alternative nicotine delivery systems (ANDS), nicotine vaping products (NVP), personal vaporisers, e-hookahs, vape pens or vapes (Australian Government Department of Health 2024).

# 4.1. Use of vaping device

# Directive(s)

# **Current use of vaping device**

- **4.1.1** Assign Z72.7 *Use of vaping device, current* for any of the following:
  - use of a vaping device within the month prior to admission
  - current use of vaping device where there is insufficient evidence to assign U07.0 Vaping related disorder.

Z72.7 does not have to meet the criteria in ACS 0002 Additional diagnoses (see Examples 10 and 12).

# Personal history of use of vaping device

**4.1.2** Assign Z91.81 *Personal history of use of vaping device* where there is use of a vaping device in the past but excluding the month prior to the episode of care.

Z91.81 does not have to meet the criteria in ACS 0002.

#### Note(s)

5. Where there is a documented relationship between a condition and a drug use disorder (eg nicotine) and the mode of delivery is a vaping device, assign codes as per Directives 1.1.1, 1.1.2, 4.1.1 and 4.1.2.

# **EXAMPLE 10:**

Patient admitted with nausea, restlessness, and dizziness after an attempt to quit vaping. The diagnosis was withdrawal from nicotine inhaled through a vaping device.

Assign: F17.3 Mental and behavioural disorders due to use of tobacco, withdrawal state

Z72.7 Use of vaping device, current

**Rationale:** F17.3 — for withdrawal from nicotine (*Directive* 1.4.1)

<u>Z72.7</u> — for the current use of vaping device (Directive 4.1.1)

# 4.2. Vaping related disorder

# **Description(s)**

<u>Vaping related disorders result from inhaling a vaporised solution (aerosol) via a vaping device (that may or may not contain nicotine). Vaping related disorders are a direct result of the substance inhaled (eg vitamin E acetate) which are not always known or able to be identified.</u>

# **Directive(s)**

- **4.2.1** Assign the following where the clinician has documented a vaping related disorder (even if vaping use is not current):
  - a code for the condition or manifestation (eg lipoid pneumonia, pneumonitis, acute respiratory failure) (see Example 11)
  - U07.0 Vaping related disorder as an additional diagnosis (see Examples 11 and 12).

# Note(s)

- 6. Where it is unclear from the documentation if a diagnosis is synonymous with a vaping related disorder, seek clinical clarification.
- 7. **Do not** assign U07.0 to indicate that a patient uses a vape device, where there is no associated disorder (see Example 12).

# **EXAMPLE 11:**

Patient admitted with suspected pneumonitis. Following investigations the patient was diagnosed with pneumonitis due to e-cigarette or vaping product use-associated lung injury (EVALI).

Assign: J68.0 Bronchitis and pneumonitis due to chemicals, gases, fumes and vapours

U07.0 Vaping related disorder

**Rationale:** J68.0 — for pneumonitis due to use of vaping device (*Directive* 4.2.1)

<u>U07.0</u> — for the use of vaping device resulting in a disorder (Directive 4.2.1)

# **EXAMPLE 12:**

Patient admitted with shortness of breath, nausea and vomiting. CT scan and other investigations were clear. Patient then revealed they had been chain vaping (substances unknown) over the past 15 hours. The clinician advised the patient that the symptoms were likely related to the vaping of unknown substances and recommended the patient cease vaping immediately.

Assign: R06.0 Dyspnoea

R11 Nausea and vomiting

Z72.7 Use of vaping device, current

**Rationale:** R06.0, R11 — ACS 0001 *Principal diagnosis* and ACS 0002 *Additional diagnoses* 

Z72.7 — for the current use of vaping device (*Directive* 4.1.1)

<u>U07.0 Vaping related disorder is not assigned as the clinician did not document a vaping related disorder (Directive 4.2.1 and Note 7).</u>

# 5.4 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

# **ICD-10-AM Tabular List**

# **CHAPTER 5**

# MENTAL AND BEHAVIOURAL DISORDERS (F00-F99)

F59

Unspecified behavioural syndromes associated with physiological disturbances and physical factors

Psychogenic physiological dysfunction NOS

. .

# **CHAPTER 15**

# PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00-O99)

# OTHER OBSTETRIC CONDITIONS, NOT ELSEWHERE CLASSIFIED (094-099)

Ogg Other maternal diseases classifiable elsewhere in pregnancy, childbirth and the puerperium

. . .

O99.3 Mental disorders and diseases of the nervous system in pregnancy, childbirth and the puerperium

O99.31 Mental disorders in pregnancy, childbirth and the puerperium

**V** 0503, 0505

Excludes: depressive episode arising in postnatal period (F32.-1)

mental disorder in puerperium NEC (F53.-)

postnatal depression NOS (F53.0)

postpartum:

- blues NOS (F53.8)
- dysphoria NOS (F53.8)
- mood disturbance NOS (F53.8)
- sadness NOS (F53.8)

puerperal psychosis (F53.1)

vomiting associated with other psychological disturbances (F50.5)

O99.32 Diseases of the nervous system in pregnancy, childbirth and the puerperium

# **ICD-10-AM Alphabetic Index**

# D

```
Disorder (of) — see also Disease
- anxiolytic use F13.9-F13.1-
- cocaine use F14.9F14.1
- hallucinogen use F16.9-F16.1-
- hypnotic use <u>F13.9-F13.1-</u>
- mental (nonpsychotic) (or behavioural) F99
- - due to (secondary to)
- - - cannabis use F12.9F12.1
- - - hypnotic use F13.9-F13.1-
- - - sedative use F13.9-F13.1-
- - - tobacco (nicotine) use F17.9F17.1
- nicotine use <u>F17.9</u>F17.1
- opioid use F11.9F11.1
- phencyclidine use F19.9F19.1
- psychoactive substance use NEC F19.9F19.1
- sedative use F13.9-F13.1-
- tobacco use <u>F17.9</u>F17.1
- use
- - alcohol
- - - acute intoxication F10.0
- - - dependence F10.2
- - - harmful F10.1
- - drug(s)
- - - amphetamine (or related substance) — code to F15.0 F15.9 with fifth character 9F15.19
- - - anxiolytics — code to F13.0 – F13.9 with fifth character 0F13.10
--- barbiturates — code to F13.0-F13.9 with fifth character 9F13.19
- - - caffeine -
                code to F15.0-F15.9 with fifth character 9F15.19
- - - cannabis, cannabinoids F12.-F12.1
- - - cocaine <del>F14.-</del>F14.1
--- ecstasy — code to F15.0 F15.9 with fifth character 2F15.12
- - - gamma hydroxybutyrate (GHB) — code to F13.0 F13.9 with fifth character 1 F13.11
                     code to F16.0-F16.9 with fifth character 0F16.10
- - - hallucinogen -
- - - - specified NEC -
                          ode to F16.0-F16.9 with fifth character 9F16.19
- - - hashish <del>F12.-</del>F12.1
- - - hypnotic - code to F13.0-F13.9 with fifth character 0F13.10
---- specified NEC — code to F13.0 F13.9 with fifth character 9F13.19
- - - inhalants <del>F18.-</del>F18.1
- - - ketamine — code to F16.0 F16.9 with fifth character 1F16.11
- - - LSD <del>code to F16.0 F16.9 with fifth character 9</del>F16.19
- - - marijuana, marihuana F12.-F12.1
- - - metamphetamine — code to F15.0 - F15.9 with fifth character 1F15.11
- - - methamphetamine — code to F15.0 F15.9 with fifth character 1F15.11
- - - methylamphetamine — code to F15.0 F15.9 with fifth character 1F15.11
- - - methylenedioxy methamphetamine (MDMA) — code to F15.0 F15.9 with fifth character 2F15.12
- - - mixed <del>F19.-</del>F19.1
- - - morphine-type (opioids) F11.-F11.1
- - - opioids <del>F11.-</del> F11.1
```

```
- - - PCP (or related substance) (phencyclidine) F19.1
- - - sedative
                 code to F13.0-F13.9 with fifth character 0F13.10
                       - code to F13.0-F13.9 with fifth character 9F13.19
- - - - specified NEC -
- - - solvent <del>F18.-</del>F18.1
- - - specified drug NEC F19. F19.1
- - - stimulants NEC -
- - - tobacco <del>F17.-</del><u>F17.1</u>
- - - tranquillisers -
                       ode to F13.0-F13.9 with fifth character 0F13.10
- - psychoactive substance NEC F19.-F19.1
- volatile solvent use F18.9F18.1
Dysfunction
- physiological NEC R68.8
- - psychogenic F45.9
- - - with behaviour syndrome NEC F59
- pineal gland E34.8
- psychophysiological F45.9
- - with behaviour syndrome NEC F59
- rectum K59.9
```

# 5.5 Retired and revised ACS Chapter 5

Application of the ACS template led to the following refinements for the ACS:

Australian Coding Standard	Revision
0503 Drug, alcohol and tobacco use disorders	Amended scenario in Example 3 to match the criteria of ACS 0002 <i>Additional diagnoses</i> and addition of section <u>5.3 Vaping</u> 5.3 Vaping
0505 Mental illness health disorder in pregnancy, childbirth and the puerperium	Removed Example 2 and amended Example 3 to be within the postnatal period.
0506 Adjustment/depressive reaction	Retired – clinical coders should be guided by the <i>General standards</i> and the Alphabetic Index.
0512 Personality trait/disorder	Created an Example.
0530 Drug overdose	Retired - clinical coders should be guided by the <i>General standards</i> and the Alphabetic Index.
0534 Specific interventions related to mental health care services	Amended the scenario in Example 1 to match the criteria of ACS 0002 Additional diagnoses.

# **ICD-10-AM Tabular List**

# **CHAPTER 19**

# INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00-T98)

# TOXIC EFFECTS OF SUBSTANCES CHIEFLY NONMEDICINAL AS TO SOURCE (T51–T65)

Excludes: corrosions (T20–T31)

localised toxic effects classified elsewhere (A00–R99) respiratory conditions due to external agents (J60–J70)

T51

Toxic effect of alcohol

T51.0

Ethanol

**▼**-0503

Ethyl alcohol Methylated spirits

Use additional code (Y90.0-Y90.8) to indicate blood alcohol level.

Excludes: acute alcohol intoxication or "hangover" effects (F10.0)

drunkenness (F10.0)

pathological alcohol intoxication (F10.0)

# **CHAPTER 20**

# EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50-U73, V00-Y98)

# SUPPLEMENTARY FACTORS RELATED TO CAUSES OF MORBIDITY AND MORTALITY CLASSIFIED ELSEWHERE (Y90-Y98)

. . .



Evidence of alcohol involvement determined by level of intoxication

**▼** 0049<del>, 0503</del>

Excludes: evidence of alcohol involvement determined by blood alcohol content (Y90.-)

Y91.0 Mild alcohol intoxication

Smell of alcohol on breath, slight behavioural disturbance in functions and responses, or slight difficulty in coordination.

# **Australian Coding Standards**

# 0503 DRUG, ALCOHOL AND TOBACCO USE DISORDERS

# **EXAMPLE 3:**

Patient was admitted following a seizure. After clinical review a care plan of continuing observation and monitoring was required for seizures, alcoholic dementia and alcohol abuse.

Assign: R56.8 *Other and unspecified convulsions* 

F10.7 Mental and behavioural disorders due to use of alcohol, residual and late-onset psychotic disorder

R56.8 — ACS 0001 Principal diagnosis

F10.7 — for documented relationship between dementia and alcohol with the condition inherent in the code by following the Alphabetic Index: Dementia/alcoholic (Directive 1.1.2)

F10.1 Mental and behavioural disorders due to use of alcohol, harmful use is not assigned as alcohol harmful use is inherent in F10.7 (Exception 1).

# 0505 MENTAL <u>ILLNESS HEALTH DISORDER</u> IN PREGNANCY, CHILDBIRTH AND THE PUERPERIUM

EXAMPLE 3:		
Patient was admitted six months post delivery with postnatal depression (not further qualified) and discharged one		
week later.		
Assign:	F53.0 Mild mental and behavioural disorders associated with the puerperium, not elsewhere	
	<u>classified</u>	
<b>Rationale:</b>	F53.0 — for postnatal depression NOS, up to one year post delivery ( <i>Directive</i> 2.1 and <i>Note</i> 1)	
	O99.31 Mental disorders in pregnancy, childbirth and the puerperium is not assigned	
	(Exception 1).	

#### EXAMPLE 2:

Patient delivered liveborn twins by elective lower segment eacsarean 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 Multiple delivery, all by caesarean section

O30.0 Twin pregnancy

O32.9 Maternal care for malpresentation of fetus, unspecified

F53.8 Other mental and behavioural disorders associated with the puerperium, not elsewhere classified

Z37.2 Twins, both liveborn

# 0512 PERSONALITY TRAIT/DISORDER

# Patient was admitted for treatment of cluster B personality disorder with borderline and antisocial personality disorders. Clinician confirmed that borderline personality was the predominant disorder. Assign: F60.31 Emotionally unstable personality disorder, borderline type F60.2 Dissocial personality disorder Rationale: F60.31, F60.2 — for the multiple personality disorders (Directives 1 and 2) F60.31 is sequenced first based on confirmation of the predominant personality disorder (Directive 2).

# 0534 SPECIFIC INTERVENTIONS RELATED TO MENTAL HEALTH CARE SERVICES

# **EXAMPLE 1:**

Patient was admitted with an eating disorder. During the episode of care, two sessions of family therapy were provided to the parents and patient to improve family interaction.

Assign: 96102-00 [1873] Family/carer-focussed therapy

**Rationale:** 96102-00 [**1873**] — assigned once only (*Directive* 1.1)

# 6. Nervous system

# 6.1 Nervous system interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

# **ACHI Tabular List**

# **CHAPTER 1**

# PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1-86)

# SKULL, MENINGES AND BRAIN

# **EXAMINATION**



Examination of skull, meninges or brain

40803-00

Intracranial stereotactic localisation

**▼**0629

Stereotactic localisation for:

- brachytherapy
- intracranial surgery
- radiosurgery

Includes: angiography

application of head frame

computer assisted coordinate determination

computerised tomography [CT]

localisation

magnetic resonance imaging [MRI]

targeting ventriculography

#### Note:

- Performed for:
   brachytherapy
- intracranial surgery
- radiosurgery
- · radiotherapy.

# Code also when performed:

- brachytherapy (90764 [**1791**])
- burr holes NEC (39012 0039007-03 [7])
- intracranial electrode:
  - adjustment (40709-02 [6])
  - insertion (40709-00 [6])
  - replacement (40709-03 [6])
- radiosurgery (15600-00<del>, 15600-01</del> [1789]<del>, 90764 [1791]</del>)
- radiotherapy (15600-01 [1789])
- stereo electroencephalography [SEEG] (92011-01 [1825])

# Code also:

• surgical procedure(s) performed

Excludes: functional stereotactic procedure (40801-00 [27])

stereotactic:

• cingulotomy (40801-00 **[27]**) • pallidotomy (40801-00 **[27]**)

• thalamotomy (40801-00 [27])

stereotaxy as a component of another intervention — omit code

# APPLICATION, INSERTION, REMOVAL

2 Cranial tap or puncture

39009-00 Tap for subdural haemorrhage

Tap through fontanelle

Excludes: drainage via burr holes (39600-00 [8])

39003-00 Cisternal puncture

39007-00 Cisternal puncture

**Includes:** by percutaneous puncture

39006-00 Ventricular puncture

Ventricular puncture through previously implanted catheter

39007-01 Ventricular puncture

Ventricular puncture through previously implanted catheter

**Includes:** by percutaneous puncture

39703-03 Aspiration of brain cyst

Excludes: drainage of infected cyst (39900-00 [8])

90000-00 Other cranial puncture

Aspiration of:

• subarachnoid space

\* subdural space NOS

Cranial againstian NOS

Cranial aspiration NOS

39007-02 Other cranial puncture

Aspiration of:

subarachnoid space

• subdural space NOS

Cranial aspiration NOS

**Includes:** by percutaneous puncture

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3

Insertion of intracranial cerebrospinal fluid devices

Replacement of cerebrospinal fluid devices Revision of cerebrospinal fluid devices

39015-00 Insertion of external ventricular drain

<del>▼0634</del>

Excludes: insertion of ventricular cerebrospinal fluid shunt (40003-00, 40003-01, 40003-02 [5])

that with any other intracranial intervention — omit code

39015-01 Insertion of ventricular reservoir

Insertion of reservoir:

• Ommaya

Rickham's

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# 5

# Irrigation, insertion or removal of intracranial cerebrospinal fluid shunt

Code also when performed:

• neuroendoscopy (40903-00 [1])

Excludes: insertion of external ventricular drain (39015-00 [3])

revision of cerebrospinal fluid shunt (40009-00, 40009-01 [24])

90002-00 Irrigation of cerebrospinal fluid shunt

40003-00 Insertion of ventriculo-atrial shunt

<del>▼0634</del>

**Includes:** that via burr hole

stereotaxy

40003-01 Insertion of ventriculopleural shunt

<del>▼0634</del>

Includes: that via burr hole

stereotaxy

40003-02 Insertion of ventriculoperitoneal shunt

<del>▼0634</del>

Ventriculoperitoneostomy

**Includes:** that via burr hole

stereotaxy

40003-03 Insertion of ventricular shunt to other extracranial site

<del>▼0634</del>

Includes: that via burr hole

stereotaxy

40003-04 Insertion of cisternal shunt

Insertion of shunt:

- cisterno-atrial
- cisternoperitoneal
- cisternopleural

Includes: stereotaxy

40009-03 Removal of ventricular shunt

▼0634

Excludes: that with replacement (40009-00 [24])

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# **INCISION**



# Incisional exploration of meninges or brain

39012-00 Burr holes

Burr holes for:

- brachytherapy
- inspection purpose

Intracranial exploration

Excludes: that as operative approach for surgery omit code

39007-03 Burr holes

Intracranial exploration

Includes: that for:

brachytherapyinspection

Excludes: that as operative approach for surgery — omit code

# 8 Intracranial drainage

Includes: that via burr hole

Excludes: cerebrospinal fluid shunt (40003 [5], 40000-00, 40012 [19])

# 39900-00 Drainage of intracranial infection

Drainage of:

• infected brain cyst

· intracranial abscess

Excludes: postoperative reopening of craniotomy or craniectomy site (39721-00 [10])

# 39600-00 Drainage of intracranial haemorrhage

Drainage of haemorrhage:

- extradural
- intracerebral
- subdural

Includes: stereotaxy

Excludes: postoperative reopening of craniotomy or craniectomy site (39721-00 [10])

removal of intracranial haematoma:

- via osteoplastic craniotomy (39603-00 [14])
- with craniectomy (39603-01 [14])

tap of subdural haemorrhage through fontanelle (39009-00 [2])

# 39703-01 Drainage of intracranial lesion or cyst

Intracranial drainage NOS

**Includes**: cranioplasty

stereotaxy

Excludes: that of infected cyst (39900-00 [8])

# 9 Intracranial decompression

#### 40015-00 Subtemporal decompression

Includes: stereotaxy

#### 39706-01 Decompression of intracranial tumour via osteoplastic craniotomy

Includes: <u>cranioplasty</u> osteoplastic flap

stereotaxy

# 40106-00 Hind brain decompression

Decompression of:

- of Arnold-Chiari malformation
- of Chiari malformation

Includes: duraplasty

. . .

# **DESTRUCTION**

# 11 Destruction of intracranial aneurysm or other vascular lesion

# 35412-00 Endovascular occlusion of cerebral aneurysm or arteriovenous malformation

Transcatheter embolisation of cerebral aneurysm or arteriovenous malformation

Includes: administration of:

- coils
- intracranial:
- balloons
- stents

catheterisation

# 39812-00 Ligation of cervical vessel for intracranial aneurysm

39806-00 Clipping of intracranial proximal artery

Includes: cranioplasty

stereotaxy

*Note:* Performed for aneurysm or arteriovenous malformation.

39800-00 Clipping of cerebral aneurysm

Includes: cranioplasty

stereotaxy

39815-00 Obliteration of carotid cavernous fistula

Includes: combined cervical and intracranial procedure

# **EXCISION**

# 12 Biopsy of brain or meninges

39703-00 Biopsy of brain via burr holes

Closed biopsy of brain

Excludes: that with neuroendoscopy (40903-01 [12])

40903-01 Biopsy of brain via neuroendoscopy

Intraventricular neuroendoscopy with biopsy

Includes: burr holes

39706-00 Biopsy of brain via osteoplastic craniotomy

Open biopsy of brain

Includes: cranioplasty

osteoplastic flap stereotaxy

stereotaxy

39703-02 Biopsy of cerebral meninges via burr holes

Closed biopsy of cerebral meninges

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14

# Removal of intracranial haematoma or abscess

Excludes: drainage via burr holes (39600, 39900 [8])

postoperative reopening of craniotomy or craniectomy site (39721-00 [10])

39603-00 Removal of intracranial haematoma via osteoplastic craniotomy

Removal of intracranial haematoma via osteoplastic flap

**Includes**: stereotaxy

39603-01 Removal of intracranial haematoma with craniectomy

Includes: stereotaxy

39903-00 Removal of intracranial abscess

#### 15 Removal of intracranial lesion

Excludes: that by skull base surgery (see block 39640-00, 39642-00, 39646-00, 41581-00, 39650-00,

39653-00, 39658-00, 39660-02, 39662-02, 90032-00 [17])

39712-00 Removal of lesion of cerebral meninges

39709-00 Removal of lesion of cerebrum

Partial lobectomy of brain for tumour

39712-03 Removal of intraventricular lesion

39709-01 Removal of lesion of brain stem

39709-02 Removal of lesion of cerebellum

41575-00 Removal of lesion of cerebellopontine angle

Removal of acoustic neuroma

Includes: that via craniotomy

39712-04 Removal of other intracranial lesion

Removal of intracranial tumour NOS

Includes: cranioplasty

stereotaxy

Excludes: craniopharyngioma (39712-02 [125])

intracranial neuroblastoma (43987-02 [80]) that involving infratemporal fossa (41581-00 [17])

that of pineal body (39712-01 [122])

# 16 Other intracranial excision

Excludes: excision by skull base surgery (see block 39640 00, 39642 00, 39646 00, 41581 00, 39650 00, 39653 00,

39658-00, 39660-02, 39662-02, 90032-00 [17])

39718-00 Removal of brain cyst

Marsupialisation of brain cyst Removal of arachnoidal cyst

39803-00 Excision of intracranial arteriovenous malformation

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# Skull base surgery for lesion

Includes: any associated reparative or reconstructive surgery

that for vascular lesions

39640-00 Removal of lesion involving anterior cranial fossa

Includes: craniotomy

dural repair

radical excision of skull base

39638-00 Removal of lesion involving anterior or middle cranial fossa

Includes: cranioplasty

stereotaxy

Excludes: that involving middle cranial and infratemporal fossae (39650-00 [17])

39642-00 Removal of lesion involving anterior cranial fossa with clearance of paranasal sinus extension

Includes: dural repair

frontal craniotomy lateral rhinotomy

radical excision of skull base

39646-00 Removal of lesion involving anterior cranial fossa with radical clearance of paranasal sinus and orbital fossa extensions

Includes: decompression of optic nerve

dural repair frontal craniotomy lateral rhinotomy

radical excision of skull base

41581-00 Removal of lesion involving infratemporal fossa

39650-00 Removal of lesion involving middle cranial and infratemporal fossae

Includes: division and reconstruction of zygomatic arch

# 90032-00 Removal of lesion involving posterior cranial fossa

Includes: via:

translabyrinth approachtransmastoid approachtransoral approach

# 39653-00 Removal of lesion of petroclivus and clivus

Includes: via:

infratentorial approach
 supratentorial approach

# 39651-00 Removal of lesion of petroclivus or clivus

Includes: cranioplasty

radical excision of lesion

stereotaxy

# 39658-00 Excision of lesion of clivus

Includes: via:

- transmaxillary approach
   transoral approach
- 39660-02 Excision of lesion of cavernous sinus

Includes: with intracranial carotid artery exposure

# 39638-01 Removal of lesion involving cavernous sinus

Includes: cranioplasty stereotaxy

# 39662-02 Excision of lesion of foramen magnum

Includes: via:

far lateral suboccipital approach
 transcondylar approach

# 39651-01 Removal of lesion of foramen magnum

**Includes:** cranioplasty

radical excision of lesion

stereotaxy

#### **REPAIR**

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# 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:

- for repair of syringomyelia or hydromyelia (51170-00 [22])
- with:
  - intracranial decompression (40106-00, 40106-01 [9])
  - reduction of skull fracture (39612 [25])
  - skull base surgery for lesion involving anterior cranial fossa (39640-0039638-00, 39642-00, 39646-00 [17])

# 39615-00 Repair of dura of brain via craniotomy

Delayed repair of dura following fractured skull via craniotomy

Excludes: that with cranioplasty (39615-01 [20])

. . .

# 22 Other repair of meninges or brain

39800-01 Reinforcement of cerebral aneurysm

Includes: cranioplasty

stereotaxy

40109-00 Repair of encephalocele

Excision and closure of encephalocele

*Note:* Performed for:

cerebral meningocelemeningoencephalocele

51170-00 Repair of syringomyelia or hydromyelia via craniotomy

Includes: duraplasty

intradural dissection

local cerebrospinal fluid shunt

plugging of obex syringotomy

Excludes: posterior cranial fossa decompression (40106-01 [9])

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# **REVISION**

# 24

# Revision of intracranial cerebrospinal fluid shunt

<del>▼0634</del>

Includes: removal and reinsertion of cerebrospinal fluid shunt

replacement of cerebrospinal fluid shunt

Excludes: revision at distal site:

atrial (90200-00 [605])
peritoneal (90330-00 [1001])
pleural (90174-00 [557])

40009-00 Revision of ventricular shunt

**Includes:** stereotaxy

40009-01 Revision of cisternal shunt

Includes: stereotaxy

# **OTHER PROCEDURES**

# 25 Procedures for skull fracture

Cranioplasty for skull fracture

39606-00 Elevation of closed skull fracture

Reduction of closed depressed skull fracture

39606-01 Reduction of closed skull fracture

Repair of closed comminuted skull fracture

Includes: dermofat graft internal fixation

stereotaxy

39609-00 Debridement of compound skull fracture

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# Functional intracranial stereotactic procedure

# <del>▼-0633</del>

40801-00 Functional intracranial stereotactic procedure

Stereotactic:

- · cingulotomy
- pallidotomy
- · thalamotomy

Includes: angiography

application of head frame

computer assisted coordinate determination

computerised tomography [CT]

destruction of lesion

intracranial stereotactic localisation magnetic resonance imaging [MRI]

physiological localisation production of lesion

targeting ventriculography

# SPINAL CANAL AND SPINAL CORD STRUCTURES

# **EXAMINATION**



# Examination of spinal canal and spinal cord structures

**▼**-0629

90011-05 Spinal stereotactic localisation

Stereotactic localisation for spinal surgery

Includes: angiography

application of head frame

computer assisted coordinate determination

computerised tomography [CT] magnetic resonance imaging [MRI]

physiological localisation

targeting

Code also:

• surgical procedure(s) performed

Excludes: functional stereotactic procedure (39121-00 [58])

stereotactic:

• cordotomy (39121<u>-00</u> [**58**]) • tractotomy (39121<u>-00</u> [**58**])

that with spinal shunt:
• insertion (40006-00 [42])
• revision (40009-06 [42])

# APPLICATION, INSERTION, REMOVAL

31

# Application, insertion or removal procedures on vertebra or intervertebral disc

39013-00 Administration of agent into <a href="mailto:zygo-apophyseal-zygapophyseal-zy

- corticosteroid
- local anaesthetic

. . .

39

# Insertion of spinal catheter, infusion device or pump

**Note:** Performed for management of:

- · chronic spasticity
- pain

# 39125-00 Insertion or replacement of spinal catheter

Insertion or replacement of catheter:

- caudal
- epidural
- intrathecal
- · subarachnoid

#### Excludes: that with:

- administration of therapeutic agent see Alphabetic Index:
- Administration/specified site/spinal
- insertion of implantable spinal infusion device or pump 39127-00 [39])

# 39127-00 Insertion of implantable spinal infusion device or pump

Subcutaneous implantation of infusion pump (components)

Includes: connection of pump to catheter

loading of reservoir programming of pump spinal catheterisation

Excludes: that with replacement (39126-00 [56])

# 40 Removal of spinal catheter, infusion device or pump

# 39133-01 Removal of spinal catheter

Excludes: that connected to implantable spinal infusion device or pump (39133-02 [40])

that with replacement (39125-00 [39])

# 39133-02 Removal of implantable spinal infusion device or pump

Includes: removal of-catheter:

catheter

• components of infusion pump

Excludes: that with replacement (39126-00 [56])

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# 41

# Insertion and removal of spinal cerebrospinal fluid drain

<del>▼-0634</del>

Excludes: cerebrospinal fluid shunt (40006-00, 40009-05, 40009-06 [42])

#### 40018-00 Insertion of lumbar cerebrospinal fluid drain

Insertion of external lumbar drain

Replacement of lumbar cerebrospinal fluid drain Revision of lumbar cerebrospinal fluid drain

Includes: lumbar puncture

# 90008-00 Removal of lumbar cerebrospinal fluid drain

Excludes: that with replacement (40018-00 [41])

42

# Insertion, removal and revision of spinal cerebrospinal fluid shunt

Includes: insertion, removal and revision of:

- lumboperitoneal shunt
- syringoperitoneal shunt
- syringopleural shunt
- syringosubarachnoid shunt
- syringosubdural shunt

**Note:** Performed for:

- hydromyelia
- · syringomyelia

Excludes: lumbar cerebrospinal fluid drain (40018-00, 90008-00 [41])

40006-00 Insertion of spinal shunt

Includes: stereotaxy

40009-05 Removal of spinal shunt

Excludes: that with replacement (40009-06 [42])

40009-06 Revision of spinal shunt

Replacement of spinal shunt

**Includes:** stereotaxy

Excludes: revision of distal peritoneal site (90330-00 [1001])

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# **REVISION**

56 Revision procedures on spinal canal or spinal cord structures

39125-01 Revision of spinal catheter

39126-00 Revision of implantable spinal infusion device or pump

Replacement of implantable spinal infusion device or pump

*Includes:* connection of pump to catheter

loading of reservoir programming of pump

replacement of components of infusion pump

spinal catheterisation

51145-00 Postoperative reopening of laminotomy or laminectomy site

▼0039

**Note:** Performed for:

• haemorrhage

• infection

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# Functional spinal stereotactic procedure

39121-00 Functional spinal stereotactic procedure

Percutaneous spinal:

- cordotomy
- tractotomy

Includes: angiography

application of frame

computer assisted coordinate determination

computerised tomography [CT]

lumbar puncture

magnetic resonance imaging [MRI]

physiological localisation production of lesion

spinal stereotactic localisation stimulation of spinal cord

targeting

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# PERIPHERAL NERVOUS SYSTEM

Includes: peripheral (cranial) (spinal) nerves

sympathetic nerves

# APPLICATION, INSERTION, REMOVAL

67

# Insertion, replacement or removal of peripheral nerve electrodes

40705-01 Removal of vagus nerve electrodes

Excludes: that with replacement (40704-01 [67])

39138-00 Insertion of other peripheral nerve electrodes

Includes: intraoperative test stimulation

Note: Performed for chronic neuropathic pain. 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])

# **INCISION**

72

# Percutaneous neurotomy of other peripheral nerve

Excludes: that of:

• primary posterior rami of spinal nerve (39115-00 [71])

• trigeminal nerve (ganglion) (39109 [70])

39118-00 Percutaneous neurotomy for facet joint denervation by radiofrequency

Percutaneous denervation of zygapophyseal joint by radiofrequency

Includes: radiofrequency:

• ablation

• probe

that for:

cervical facet joint

• lumbar facet joint

• thoracic facet joint

Other percutaneous neurotomy by radiofrequency 39323-00

Includes: radiofrequency:

• ablation

· lesion generator

thermocoagulation

Percutaneous neurotomy for facet joint denervation by cryoprobe 39118-01

Percutaneous denervation of zygapophyseal joint by cryoprobe

Includes: cryoablation

cryoneurotomy

that for:

cervical facet joint

• lumbar facet joint

· thoracic facet joint

39323-01 Other percutaneous neurotomy by cryoprobe

Includes: cryoablation

cryoneurotomy

# 75 Decompression of intracranial nerve

41569-00 Intracranial decompression of facial nerve

Excludes: that with partial resection of temporal bone (41584-01 [324])

39112-00 Intracranial decompression of other cranial nerve

Intracranial decompression of trigeminal nerve

Includes: cranioplasty

stereotaxy

using microsurgical techniques

# **CHAPTER 1**

# PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1-86)

# PERIPHERAL NERVOUS SYSTEM

Includes: peripheral (cranial) (spinal) nerves

sympathetic nerves

. . .

76

# Release of carpal tunnel and tarsal tunnel

Neurolysis for carpal and tarsal tunnel syndrome

# 39331-00 Endoscopic release of carpal tunnel

Endoscopic:

- decompression of median nerve
- · division of transverse carpal ligament

Excludes: endoscopic revision of carpal tunnel release (39332-00 [76])

# 39331-01 Release of carpal tunnel

Open:

- decompression of median nerve
- division of transverse carpal ligament

**Excludes:** revision of carpal tunnel release (39332-01 [76])

# 39332-00 Endoscopic revision of carpal tunnel release

*Includes:* endoscopic:

- division of transverse carpal ligament
- release of median nerve

neurolysis synovectomy

# 39332-01 Revision of carpal tunnel release

Includes: neurolysis

open:

- division of transverse carpal ligament
- release of median nerve

synovectomy

# 39330-01 Release of tarsal tunnel



# Other neurolysis of peripheral nerve and nerve trunk

**Includes**: decompression

39312-00 Open neurolysis of interfascicular peripheral nerve trunk

Excludes: neurolysis of nerve trunk at forearm or arm (39329-00 [77])

# 39329-00 Neurolysis of nerve trunk at forearm or arm

Includes: that for:

median nerve trunkradial nerve trunkulnar nerve trunk

# 39330-00 Open neurolysis of peripheral nerve, not elsewhere classified

Peripheral nerve decompression NOS

Excludes: decompression of spinal nerve roots (40330-00 [49])

neurolysis of:

• nerve at forearm (39345-00 [77])

• ulnar nerve at elbow and wrist (39336-00 [77])

revision of neurolysis of ulnar nerve at elbow (39339-00 [77])

that with transposition of nerve (39321-00 [83]):

• nerve NOS (39321-00 [83])

• ulnar nerve at elbow (39342-00 [83])

# 39345-00 Neurolysis of nerve at forearm

**Includes:** that for:

- median nerve
- radial nerve
- ulnar nerve

Excludes: neurolysis of ulnar nerve at elbow and wrist (39336-00 [77])

# 39336-00 Neurolysis of ulnar nerve at elbow and wrist

Cubital tunnel release
Guyon's canal release

Excludes: neurolysis of ulnar nerve at forearm (39345-00 [77])

revision of neurolysis of ulnar nerve at elbow (39339-00 [77])

that with transposition of nerve (39342-00 [83])

# 39339-00 Revision of neurolysis of ulnar nerve at elbow

Revision of cubital tunnel

Excludes: that with transposition of nerve (39342-00 [83])

# **DESTRUCTION**

. . .

# 81 Surgical sympathectomy

Division of sympathetic nerve Neurectomy of sympathetic nerve

Excludes: reoperation for previous surgical sympathectomy (35006-00, 35009-00, 90015-00see block [85])

35003-00 Cervical surgical sympathectomy

35003-01 Thoracic surgical sympathectomy

35000-00 Lumbar surgical sympathectomy

35012-00 Sacral surgical sympathectomy

Presacral surgical sympathectomy

# 46364-00 Digital surgical sympathectomy of hand

Includes: using microsurgical techniques

# 90014-00 Other surgical sympathectomy

Periarterial surgical sympathectomy

Surgical ganglionectomy:

- sphenopalatine
- sympathetic NOS

82 Other neurectomy

39324-00 Neurectomy of superficial peripheral nerve

39327-00 Neurectomy of deep peripheral nerve

Excludes: intracranial neurectomy for trigeminal neuralgia (39106-00 [73])

39327-04 Neurectomy of intracranial nerve

Removal of tumour from cranial nerve

Includes: cranioplasty

stereotaxy

using microsurgical techniques

Excludes: intracranial neuroblastoma (43987-02 [80])

removal of cerebellopontine angle tumour (41575-00 [15])

#### **REPAIR**

83 Repair of nerve or nerve trunk

Excludes: secondary repair (39303, 39309 see block [84])

39300-00 Primary repair of nerve

Anastomosis of nerve Suture of nerve

Includes: anastomosis of nerve

using microsurgical techniques

Excludes: anastomosis of:

• facio-accessory nerve (39503-01 [83])

• faciohypoglossal nerve (39503-00 [83])

39306-00 Primary repair of nerve trunk

Anastomosis of nerve trunk

Suture of nerve trunk

**Includes:** anastomosis of nerve trunk

using microsurgical techniques

39503-00 Anastomosis of faciohypoglossal nerve

39503-01 Anastomosis of facio-accessory nerve

39318-00 Nerve graft

Includes: procurement of nerve for graft

39315-00 Nerve graft to nerve trunk

Cable graft to peripheral nerve trunk

Includes: procurement of nerve for graft

39342-00 Transposition of ulnar nerve at elbow

Includes: decompression of ulnar nerve at elbow

medial epicondylectomy

neurolysis

osteotomy and reconstruction of flexor origin subcutaneous or submuscular transposition of nerve

39321-00 Transposition of nerve, not elsewhere classified

Includes: neurolysis

Excludes: transposition of ulnar nerve at elbow (39342-00 [83])

- - -

# **REVISION**



# Secondary repair of nerve or nerve trunk

Secondary repair of nerve or nerve trunk by:

- anastomosis
- graft
- suture
- using microsurgical techniques

39303-00 Secondary repair of nerve

. . .

# **OTHER PROCEDURES**



Other procedures on nerves

39307-00 Reconstruction of nerve trunk

Includes: that using:

• biological or synthetic nerve conduit

• microsurgical techniques

39319-00 Reconstruction of digital or cutaneous nerve

Includes: that using:

• biological or synthetic nerve conduit

• microsurgical techniques

90016-00 Other diagnostic procedures on nerves

Note: For nonsurgical diagnostic interventions see Chapter 19

90016-01 Other procedures on nerves

Neurectasis

# **CHAPTER 18**

# **RADIATION ONCOLOGY PROCEDURES (BLOCKS 1786-1800)**

# RADIATION ONCOLOGY PROCEDURES

# **BRACHYTHERAPY USING SEALED SOURCES**



#### Brachytherapy, other intracavitary sites

Includes: stereotactic brachytherapy

Code also when performed:

- burr holes (39012 0039007-03 [7])
- intracranial stereotactic localisation (40803-00 [1])

Excludes: that for gynaecological sites (see block [1790])

# **CHAPTER 19**

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) DIAGNOSTIC INTERVENTIONS

DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS - NERVOUS SYSTEM

# 1830 Other diagnostic neurological tests, measures or investigations Intracarotid amobarbital test 92013-00 WADA activation test Includes: angiogram electroencephalogram [EEG] Note: Performed to examine language and memory in each hemisphere of the brain 39131-02 Testing of implanted neurostimulator Implanted neurostimulator pulse generator: · adjustment • electronic analysis · reprogramming Code also when performed: • brain neuromodulation [deep brain stimulation] [DBS] (40709-04 [1880]) **ACHI Alphabetic Index** Α Adjustment - neurostimulator (epidural) (intracranial) (peripheral) (pulse generator) 39131-02 [1830] Administration (around) (into) (local) (of) (therapeutic agent) NEC — code to block [1920] with extension -19 - specified site — see also Administration/indication OR Administration/type of agent - - joint NEC 50124-01 [1552] - - - costotransverse (corticosteroid) (local anaesthetic) 39013-01 [31] - - - facet (articular processes) (corticosteroid) (local anaesthetic) 39013-00 [31] - - - zygo-apophyseal zygapophyseal (articular processes) (corticosteroid) (local anaesthetic) 39013-00 [31] - - vocal cord (collagen) (fat) (Gelfoam) (Teflon) 41870-01 [521] - - zygapophyseal zygo-apophyseal joint (articular processes) (corticosteroid) (facet) (local anaesthetic) 39013-00 [31] - type of agent — see also Administration/indication OR Administration/specified site - - 5-FU (fluorouracil) 42824-01 [251] - - acetylcysteine — code to block [1920] with extension -04 **Analysis** - neurostimulator (electronic) (pulse generator) 39131-02 [1830] - periodontal, clinical, with recording 97221-00 [456] **Anastomosis** - nerve (cranial) (peripheral) (primary) (sympathetic) 39300-00 [83] - - facio-accessory 39503-01 [83] - - faciohypoglossal 39503-00 [83] secondary 39303-00 [84] - trunk 39309-00 [84]

- trunk 39306-00 [83]
- oesophagogastric

Aspiration

- brain 90000 0039007-02 [2]
- - cyst 39703-03 [2]

- cranial NEC 90000 0039007-02 [2]

- intracranial NEC 90000-0039007-02 [2]

- subarachnoid space, cerebral 90000 0039007-02 [2]
- subdural space, cerebral 90000 0039007-02 [2]

```
- - for haemorrhage (through fontanelle) 39009-00 [2]
B
Burr holes 39007-03 [7]
- as operative approach — omit code
- for intracranial electrode(s)
- - adjustment 40709-02 [6]
- - insertion 40709-00 [6]
 - replacement 40709-03 [6]
  brachytherapy 39012-00 [7]
  inspection purposes 39012-00 [7]
  - intracranial electrode(s)
   - adjustment 40709-02 [6]
    insertion 40709-00 [6]
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- for
- - removal of lesion (tumour) involving anterior or middle cranial fossa (skull base surgery) 39640 0039638-00 [17]
- - - with clearance of paranasal sinus extension 39642-00 [17]
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   - brachytherapy 39012-00 [7]
- postoperative (osteoplastic) (reopening) 39721-00 [10]
Cystectomy — see also Excision/cyst
- urinary
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- - - via laparoscopy 37000-00 [1102]
- - total (radical) 37014-00 [1102]
- - - with anterior pelvic exenteration 37019-00 [989]
Cystography
Cytoreduction surgery (CRS) 96211-0030732-00 [989]
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Decompression
- nerve
- - cranial (intracranial) 39112-00 [75]
- - facial (intracranial) 41569-00 [75]
- - - with partial resection of temporal bone 41584-01 [324]
- - forearm 39345-00 [77]
- - median (open) 39331-01 [76]
- - - with revision 39332-01 [76]
---- endoscopic 39332-00 [76]
--- endoscopic <u>NEC</u> 39331-00 [76]
- - peripheral NEC (see also Neurolysis) 39330-00 [77]
- - - interfascicular trunk 39312-00 [77]
---- arm 39329-00 [77]
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- - - median (open) 39331-01 [76]
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- - spinal <u>NEC</u> 39330-00 [77]
- - - roots 40330-00 [49]
- - trigeminal (intracranial) 39112-00 [75]
- - ulnar, at elbow and wrist 39336-00 [77]
```

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---- revision at elbow 39339-00 [77]
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- - - roots (rhizolysis) 40330-00 [49]
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- by
- - radiofrequency (percutaneous) (peripheral nerve) 39323-00 [72]
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- - - interphalangeal (proximal) 39323-00 [72]
- facet (zygapophyseal) joint
- - peripheral nerve, by
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- - - radiofrequency (percutaneous percutaneous) 39118-00 [72]
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- adhesions
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--- radiofrequency 39118-00 [72]
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---- cryoprobe 39323-01 [72]
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# 6.2 Postural orthostatic tachycardia syndrome

The following refinements have been made in ICD-10-AM to enable classification of Postural orthostatic tachycardia syndrome (POTS) to a specific code:

#### **ICD-10-AM Tabular List**

#### **CHAPTER 6**

### DISEASES OF THE NERVOUS SYSTEM (G00-G99)

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G90 Disorders of autonomic nervous system

. . .

G90.8 Other disorders of autonomic nervous system

Sympathetic storm

G90.81 Postural orthostatic tachycardia syndrome [POTS]

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- autonomic nervous system G90.9
- - specified NEC <u>G90.89</u>G90.8
- avoidant, child or adolescent F93.2
- nervous system G98
- - autonomic (peripheral) G90.9
- - - specified NEC G90.89 G90.8
- - central G96.9
- - - specified NEC G96.8
G
Ganglionopathy, autoimmune autonomic G90.89 G90.8
Imbalance R26.8
- autonomic <u>G90.89</u>G90.8
- constituents of food intake E63.1
- protein-energy (see also Malnutrition) E46
- sympathetic G90.89G90.8
- urethra N36.8
Irritable, irritability R45.4
- stomach K31.88
- - psychogenic F45.32
- sympathetic G90.89G90.8
- urethra N36.8
Irritation
- anus K62.8
- perineum NEC L29.3
- peripheral autonomic nervous system G90.89G90.8
- stomach K31.88
- - psychogenic F45.32
- sympathetic nerve NEC G90.89G90.8
- vagina N89.8
```

#### Ν

```
Neuropathy, neuropathic G62.9
peripheral (nerve) (see also Polyneuropathy) G62.9autonomic G90.9
- - - specified NEC <u>G90.89</u><del>G90.8</del>
- - idiopathic G60.9
- radicular NEC M54.1-
P
Paralysis, paralytic (complete) (incomplete) (see also Paresis) G83.9
- sympathetic G90.89G90.8
- - cervical G90.2
- - nervous system — see Neuropathy/peripheral/autonomic
- syndrome G83.9
- uvula K13.8
- - postdiphtheritic A36.0
- vasomotor NEC G90.89G90.8
- velum palatinum K13.8
Postural — see also condition
- orthostatic tachycardia syndrome (POTS) G90.81 G90.8
- talipes equinovarus Q66.02
Postvalvulotomy syndrome 197.0
POTS (postural orthostatic tachycardia syndrome) G90.81
Potter's
S
Steinbrocker's syndrome G90.89G90.8
Storm
- sympathetic G90.89G90.8
- thyroid E05.5
Sympatheticotonia G90.89 G90.8
Syndrome NEC (see also Disease) U91
- Hand-Schüller-Christian (M9751/3) C96.5
- hand-shoulder G90.89G90.8
- Hanhart's Q87.09
- postural orthostatic tachycardia (POTS) G90.81 G90.8
- Steele-Richardson-Olszewski G23.1
- Steinbrocker's G90.89G90.8
- Stein-Leventhal E28.2
```

# 6.3 Retired and revised ACS Chapter 6

See also <u>6.1 Nervous system interventions</u>6.1 Nervous system interventions.

Application of the ACS template led to the following refinements in ICD-10-AM, ACHI and the ACS:

Australian Coding Standard		Revision
0604	Stroke Gerebrovascular accident (CVA)	Revised ACS title to align with updated terminology.
0625	Quadriplegia and paraplegia, nontraumatic	Retired – relevant content relocated to the ICD-10-AM Tabular List.
0629	Stereotactic radiosurgery, radiotherapy and localisation	Retired – ACHI Alphabetic Index updated to direct the correct code assignment.
0633	Stereotactic neurosurgery	Retired – relevant content relocated to the ACHI Tabular List.
0634	Cerebrospinal fluid drain, shunt and ventriculostomy	Retired – clinical coders should be guided by the <i>General standards</i> and the ACHI Alphabetic Index.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 6**

#### DISEASES OF THE NERVOUS SYSTEM (G00-G99)

#### CEREBRAL PALSY AND OTHER PARALYTIC SYNDROMES (G80-G83)



#### Paraplegia and tetraplegia

**▼**00080625

Acute, (nontraumatic):

- paraplegia
- quadriplegia
- tetraplegia

Chronic (nontraumatic):

- paraplegia
- · quadriplegia
- tetraplegia

Note:

Acute (initial) phase — first episode of admitted patient care for paraplegia or tetraplegia (quadriplegia) due to a nontraumatic condition (such as viral infection, spinal neoplasm, multiple sclerosis).

Chronic (subsequent) phase — any episode of admitted patient care (eg acute care or rehabilitation) after the acute (initial) phase or where nontraumatic paraplegia or tetraplegia is a comorbidity.

<u>Code first any underlying nontraumatic condition, in the acute (initial) phase, if applicable — see Alphabetic Index.</u>

Code also any underlying nontraumatic chronic condition, in the chronic (subsequent) phase — see Alphabetic Index.

Excludes: acute, traumatic paraplegia and tetraplegia (S14.-, S24.-, S34.-) congenital cerebral palsy (G80.-)

transient paresis (R29.88)

The following fifth character subdivisions are for use with subcategories G82.0–G82.5:

• 0 unspecified

1 unspecified, acute

- ② 2 unspecified, chronic
- **3** complete, acute
- 4 complete, chronic
- 5 incomplete, acute
- 6 incomplete, chronic

#### **ACHI Tabular List**

#### **CHAPTER 1**

# PROCEDURES ON NERVOUS SYSTEM (BLOCKS 1–86) SKULL, MENINGES AND BRAIN

#### **EXAMINATION**



#### Examination of skull, meninges or brain

40903-00

Neuroendoscopy

<del>▼0634</del>

Intraventricular neuroendoscopy

Code also when performed:

- insertion of shunt (40003-00, 40003-01, 40003-02, 40003-03 [5])
- third ventriculostomy (40012-00, 40012-01 [19])

**Excludes:** that with biopsy (40903-01 [12])

. . .



#### Removal of intracranial cerebrospinal fluid devices

Excludes: that with replacement (39015 [3])

90001-00

Removal of external ventricular drain

<del>▼0634</del>

...



#### Other application, insertion or removal procedures on skull, meninges or brain

40709-00

Insertion of intracranial electrode via burr holes

<del>▼0629</del>

Implantation of intracranial electrode(s)

Includes: insertion of extension wire connecting electrodes to neurostimulator

that for:

- deep brain stimulation [DBS]
- stereo electroencephalography [SEEG]

Note:

- Performed for:
- epilepsy
- multiple sclerosis
- pain control
- Parkinson's disease.

Code also when performed:

- brain neuromodulation ([deep brain stimulation]) [DBS] (40709-04 [1880])
- intracranial stereotactic localisation (40803-00 [1])
- stereo electroencephalography [SEEG] (92011-01 [1825])
- subcutaneous implantation of neurostimulator (39134-01 [1604])

. . .

#### 40709-02 Adjustment of intracranial electrodes via burr holes

Revision of intracranial electrodes via burr holes

Includes: revision of extension wire connecting electrodes to neurostimulator

hat for:

- deep brain stimulation [DBS]
- stereo electroencephalography [SEEG]

Code also when performed:

- brain neuromodulation ([deep brain stimulation]) [DBS] (40709-04 [1880])
- intracranial stereotactic localisation (40803-00 [1])

#### 40709-03 Replacement of intracranial electrodes via burr holes

Includes: replacement of extension wire connecting electrodes to neurostimulator

that for:

- deep brain stimulation [DBS]
- stereo electroencephalography [SEEG]

Code also when performed:

- brain neuromodulation ([deep brain stimulation]) [DBS] (40709-04 [1880])
- intracranial stereotactic localisation (40803-00 [1])

• • •

#### **REPAIR**



#### Ventriculostomy

<del>▼0634</del>

Excludes: cerebrospinal fluid shunt (40003 [5])

insertion of external ventricular drain (39015-00 [3])

40000-00 Ventriculocisternostomy

Torkildsen's procedure

40012-00 Endoscopic third ventriculostomy

Includes: septum pellucidotomy

40012-01 Third ventriculostomy

Includes: septum pellucidotomy

...

#### **CHAPTER 7**

# PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520–572) LUNG AND PLEURA

. . .

#### **REVISION**



#### Revision procedures on lung or pleura

<del>▼063</del>4

90174-00 Revision of cerebrospinal fluid [CSF] shunt at pleural site

Revision of shunt, distal site:

- cisternopleural
- · ventriculopleural

. . .

#### **CHAPTER 8**

# PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600–777) HEART – ATRIUM

. . .

#### **REVISION**



#### Revision procedures on atrium

<del>▼0634</del>

90200-00

Revision of cerebrospinal fluid [CSF] shunt at atrial site

Revision of shunt:

- · cisternoatrial, atrial site
- ventriculoatrial, distal site

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

. . .

#### **CHAPTER 10**

# PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011) ABDOMEN, PERITONEUM AND OMENTUM

. . .

#### **REVISION**

1001

Revision procedures on abdomen, peritoneum or omentum

90330-00

Revision of cerebrospinal fluid shunt at peritoneal site

<del>▼0634</del>

Revision of shunt, distal site:

- · cisternoperitoneal
- lumboperitoneal
- · ventriculoperitoneal

. . .

#### **CHAPTER 18**

# RADIATION ONCOLOGY PROCEDURES (BLOCKS 1786–1800) RADIATION ONCOLOGY PROCEDURES

▼0229

#### **EXTERNAL BEAM THERAPY**

. . .



#### Other megavoltage radiation treatment

15600-00 St

Stereotactic radiation treatment, single dose

Stereotactic radiosurgery, single dose

15600-01

Stereotactic radiation treatment, fractionated

Stereotactic radiosurgery, fractionated

#### **CHAPTER 19**

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) **DIAGNOSTIC INTERVENTIONS**

#### DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS - NERVOUS SYSTEM

1825

Electroencephalography [EEG]

▼0042

92011-01 Stereo electroencephalography [SEEG]

<del>▼0629</del>

Code also:

- insertion of intracranial electrodes (40709-00 [6])
- stereotactic localisation (40803-00 [1])

### **ACHI Alphabetic Index**

#### R

#### Radiosurgery

- stereotactic
- 15600-01 [1789]
- - single dose 15600-00 [1789]

#### Radiotherapy

- stereotactic
- - fractionated 15600-01 [1789]
- -- single dose 15600-00 [1789]
- superficial
- - 1 field 15000-00 [1786]
- - 2 or more fields 15003-00 [1786]

# **Australian Coding Standards**

# **0604 STROKECEREBROVASCULAR ACCIDENT (CVA)**

# 1. INITIAL AND SUBSEQUENT EPISODES OF CARE FOR STROKE (CEREBROVASCULAR ACCIDENT (CVA))

#### **Directive(s)**

#### Initial episode of care

- **1.1** Assign the following in the initial episode of care for stroke:
  - a code from categories I60–I64
  - a code for any deficit or condition resulting from a stroke

(see Example 1).

#### Subsequent episode of care (initial episode of care complete)

- **1.2** Assign the following for a residual deficit of stroke after the initial episode of care is complete:
  - code first the residual deficit or condition
  - a code from category I69 Sequelae of cerebrovascular disease.

#### 2. HISTORY OF STROKE (OLD CVA)

#### **Directive(s)**

#### History of stroke with residual deficit

- **2.1** Assign the following for residual deficit of a previous stroke:
  - code first the residual deficit
  - a code from category I69 *Sequelae of cerebrovascular disease* for the underlying cause of the sequela (residual deficit)

(see Example 2).

#### History of stroke without residual deficit

**2.2** Assign Z86.71 *Personal history of cerebrovascular disease* where history of stroke is related to a condition being managed or an intervention performed in the current episode of care.

# 7. Eye and adnexa

# 7.1 Injections into the eye

In previous editions intravitreal injections were incorrectly classified to injections of the posterior chamber which was anatomically incorrect. This has been rectified and now aligns with the underpinning MBS item.

#### **ACHI Tabular List**

#### **CHAPTER 3**

# PROCEDURES ON EYE AND ADNEXA (BLOCKS 160–256) AQUEOUS, VITREOUS APPLICATION, INSERTION, REMOVAL

204

Aspiration of aqueous or vitreous

Includes: injection of therapeutic substances

that by paracentesis

42740-00 Aspiration of aqueous

42740-01 Aspiration of vitreous

Other application, insertion or removal procedures on aqueous or vitreous

42815-00 Removal of vitreous substitutes

Removal of silicone oil

42740-06 Intravitreal injection of therapeutic substances

**Includes:** aspiration of vitreous

#### **DESTRUCTION**

206

Destruction procedures on aqueous or vitreous

42791-03

Destruction procedures on aqueous or vitreous

Aqueous or vitreous:

- fibrinolysis
- vitreolysis

Includes: that by laser

. . .

# POSTERIOR SEGMENT – RETINA, CHOROID AND POSTERIOR CHAMBER APPLICATION, INSERTION, REMOVAL

209

Application, insertion or removal procedures on retina, choroid or posterior chamber

42740-03 Administration of therapeutic agent into posterior chamber Posterior juxtascleral depot injection

Includes: paracentesis

```
42812-00 Removal of surgically implanted material from posterior segment of eye Removal of:
```

- encircling silicone:
- band
- tube
- implant:
- posterior ocular segment
- retinal
- scleral (buckle)

Excludes: removal of foreign body from posterior segment by incision (42569-00 [210])

90080-03 Administration of therapeutic agent into posterior segment, not elsewhere classified Posterior juxtascleral depot injection

Excludes: intravitreal injection of therapeutic substances (42740-06 [205])

...

### **ACHI Alphabetic Index**

#### Α

```
Administration (around) (into) (local) (of) (therapeutic agent) NEC — code to block [1920] with extension -19
- indication — see also Administration/specified site OR Administration/type of agent
- - lesion
- - - vascular (anomaly) (malformation) 45027-02 [742]
- - - - eye (posterior segment) (retina) 90080-0342740-03 [209]
---- intravitreal 42740-06 [205
- - lymphangioma 45027-02 [742]
- - telangiectasis
- - - eye __ see Administration/indication/lesion/vascular/eye (posterior chamber) (retina) 42740-03 [209]
- - - head 45027-02 [742]
- - - neck 45027-02 [742]
- - termination of pregnancy (abortion) NEC 90462-01 [1330]
- - - multiple 32500-01 [722]
- - vascular lesion (anomaly) (malformation) 45027-02 [742]
- - - eye — see Administration/indication/lesion/vascular/eye 42740-03 [209]
- - venular flares (micro) 32500-00 [722]
- specified site — see also Administration/indication OR Administration/type of agent
- - intratympanic 90114-01 [316]
- - intravesical, endoscopic 36851-00 [1092]
- - intravitreal (eye) 42740-06 [205]
- - joint NEC 50124-01 [1552]
- - pleura 18228-00 [548]
- - plexus, nerve — see Administration/specified site/nerve
- - posterior segment (chamber) (by paracentesis) (eye) (juxtascleral) NEC 90080-03 42740-03 [209]
- - - intravitreal (drug delivery implant) (injection) 42740-06 [205]
- - prostate 37218-01 [1160]
- specified site — see also Administration/indication OR Administration/type of agent
- - vitreous (by paracentesis) (eye) (humour) NEC 90080-03 42740-03 [209]
- - vocal cord (collagen) (fat) (Gelfoam) (Teflon) 41870-01 [521]
P
```

#### **Paracentesis**

- abdominal 30406-00 [983]
- anterior chamber (diagnostic) (eye) (therapeutic)
- - with injection of therapeutic agent 42740-02 [185]
- aqueous (diagnostic) (eye) (humour) (therapeutic) 42740-00 [204]

- bladder 37041-00 [1092]
- intravitreal, with injection of therapeutic agent (eye) 42740-06 [205]
- pericardium 38359-00 [643]
- posterior (chamber) (eye)
- with injection of therapeutic agent 42740-03 [209]
- thoracic
- - diagnostic 38800-00 [560]
- - and therapeutic 38803-00 [560]
- - therapeutic 38803-00 [560]
- - and diagnostic 38803-00 [560]
- vitreous (diagnostic) (eye) (humour) (therapeutic) 42740-01 [204]
- - with injection of therapeutic agent 42740-06 [205]

### 7.2 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 3**

### PROCEDURES ON EYE AND ADNEXA (BLOCKS 160-256)

#### OCULAR ADNEXA — EXTRAOCULAR MUSCLES

#### **REPAIR**



#### **Procedures for strabismus**

Repair of strabismus by:

- advancement
- lengthening
- · recession
- resection
- shortening

Excludes: correction by adjustment of sutures, following previous surgery (see block [218]) reoperation procedures for strabismus (see block [219])

18366-01 Administration of agent into extraocular muscles for strabismus

#### OCULAR ADNEXA – ORBIT

#### **EXCISION**

224

#### Orbitotomy with biopsy or excision

Excludes: that with removal and replacement of bone (see block [227])

42542-00 Exploratory orbitotomy with excision of lesion

42542-01 Exploratory orbitotomy with removal of foreign body

Removal of orbital foreign body by incision

42545-01 Decompression orbitotomy by removal of intraorbital fat

Includes: peribulbar and retrobulbar fat

via endonasal approach

*Note:* Performed for dysthyroid eye disease.

42533-01 Exploratory orbitotomy with biopsy

. . .

#### **REPAIR**

227

#### Orbitotomy with removal and replacement of bone

Decompression orbitotomy with removal and replacement of bone

...

42545-00 Decompression orbitotomy by fenestration of 2 or more walls

Includes: removal and replacement of bone

via endonasal approach

**Note:** Performed for dysthyroid eye disease.

### **ACHI Alphabetic Index**

#### Α

#### Advancement

...

 extraocular muscle, for strabismus repair (1 eye) (for nystagmus repair) — see <u>Intervention/for specified</u> condition/strabismus<del>Procedure/for/strabismus</del>

Anderson-Kestenbaum procedure (repair of nystagmus) — see Procedure/for/nystagmus

- 1 eye

- -- 1 or 2 muscles 42833-00 [216]
- - 3 or more muscles 42839-00 [216]
- both eyes
- - 1 or 2 muscles 42833-01 [216]
- - 3 or more muscles 42839-01 [216]

#### ī.

#### Length, lengthening

- muscle NEC 47957-00 [1572]

- - extraocular - see Intervention/for specified condition/strabismusProcedure/for/strabismus

#### P

Procedure — see also Intervention OR specified intervention(s) performed

Note: Terms listed under the lead term 'Procedure' are eponyms and types of procedures.

- Anderson-Kestenbaum (repair of nystagmus) — see Anderson-Kestenbaum procedure Proced

#### R

#### Recession

 extraocular muscle, for strabismus repair (for nystagmus repair) — see <u>Intervention/for specified</u> condition/strabismus<u>Procedure/for/strabismus</u>

#### Repair

- nystagmus — see block [216]Procedure/for/nystagmus

- squint — see <u>Intervention/for specified condition/strabismus</u><del>Procedure/for/strabismus</del>

- stomach NEC 90304-00 [887]
- strabismus see Intervention/for specified condition/strabismus Procedure/for/strabismus

#### Resection

- muscle
- extraocular, for strabismus repair (for nystagmus repair) see <u>Intervention/for specified</u> <u>condition/strabismus</u><u>Procedure/for/strabismus</u>
- - levator palpebrae (eyelid) 45623-02 [1677]

#### S

#### **Shortening**

- muscle
- - extraocular see <u>Intervention/for specified condition/strabismus</u><del>Procedure/for/strabismus</del>
- - levator palpebrae (eyelid) 45623-02 [1677]

# 7.3 Retired ACS Chapter 7

Application of the ACS template led to ACS 0701 *Cataract* being retired as it contained unnecessary clinical information and the guidelines within are redundant if following the ICD-10-AM Alphabetic Index.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 7**

**H26** 

#### DISEASES OF THE EYE AND ADNEXA (H00-H59)

#### **DISORDERS OF LENS (H25-H28)**

Other cataract

H26.4	After-cataract
<del>▼-0701</del>	Secondary cataract Soemmering's ring
H26.8	Other specified cataract
H26.9 <del>▼ 0701</del>	Cataract, unspecified
•••	
H27	Other disorders of lens
	Excludes: congenital lens malformations (Q12)

mechanical complications of intraocular lens (T85.2)

pseudophakia (Z96.1)

H27.0 Aphakia
<del>▼ 0701</del>

H27.1 Dislocation of lens

٠..

### GLAUCOMA (H40-H42)



#### Glaucoma

Excludes: absolute glaucoma (H44.5)

congenital glaucoma (Q15.0) traumatic glaucoma due to birth trauma (P15.3)

H40.0 Glaucoma suspect

Ocular hypertension

# 8. Ear, nose, mouth and throat (ENMT)

# 8.1 Ear, nose, mouth and throat interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 5**

# PROCEDURES ON NOSE, MOUTH AND PHARYNX (BLOCKS 370-422)

#### **NASAL SINUSES**

#### **OTHER PROCEDURES**

389

Other procedures on nasal sinuses

41749-00 External procedure on ethmoidal sinus

Excludes: that with functional endoscopic sinus surgery [FESS] (96257-01 [389])

96257-01 Functional endoscopic sinus surgery [FESS]

Note:

FESS is performed to improve the ventilation and drainage of the sinuses, and to remove disease from the sinuses. FESS may includes (but is not limited to) the following any of the following endoscopic sinus procedures performed in any combination in a single operative episode and specified as FESS:

- biopsy of sinus (any sinus) (bilateral) (ostiomeatal unit) (unilateral)
- creation of single sinus cavity
- ethmoidectomy (bilateral) (unilateral)
- extended drilling of frontal sinuses
- incision procedures of sinus (any sinus) (bilateral) (ostiomeatal unit) (sinusotomy) (unilateral)
- intranasal antrostomy (bilateral) (unilateral)
- removal of: foreign body from sinus (antrum)
  - foreign body from sinus (antrum)
  - polyp from sinus (any sinus) (ostiomeatal unit)
- oval of polyp from sinus (any sinus)
- sinoscopy
- sinusectomy (any sinus) (bilateral) (unilateral).

Code also when performed:

• nasal procedure(s) (see blocks [371] to [381])

Excludes: sinus procedures not specified as FESS — code procedure(s) performed — see Alphabetic Index

#### SALIVARY GLANDS AND DUCTS

#### OTHER PROCEDURES

399

Other procedures on salivary gland or duct

18360-02 Administration of agent into salivary gland

Includes: botulinum toxin

#### 30257-00 Sialendoscopy

Code also when performed:

- dilation of salivary gland or duct (30262-00 [398])
- removal of calculus from salivary gland or duct (30266-02 [395])

90140-00 Other procedures on salivary gland or duct

. . .

#### **CHAPTER 19**

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) DIAGNOSTIC INTERVENTIONS

#### DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS - EAR, NOSE, MOUTH AND THROAT

Excludes: dental diagnostic tests, measures or investigations (see blocks [451] and [452])

...

### 1836 Auditory function tests

Pure tone audiometry

Code also when performed:

• speech discrimination test (11315 [1837])

11309-00 Air conduction audiometry, standard technique

11309-01 Air conduction audiometry using visual reinforcement

• • •

#### 1845 Vestibular function tests

11333-00 Caloric test of labyrinth

Oculovestibular test

11336-00 Simultaneous bithermal caloric test of labyrinths

Simultaneous bithermal oculovestibular test

11339-00 Electronystagmography [ENG]

96063-00 Rotating chair evaluation of vestibular function

Includes: fixation suppression

simple harmonic acceleration

spontaneous nystagmus

trapezoids

96064-00 Other vestibular function tests

11340-00 Other vestibular function tests

. . .

# **ACHI Alphabetic Index**

S

Shunt

**Sialendoscopy** 30257-00 [399]

Sialoadenectomy

. . .

#### Т

Test, testing (for) NEC (see also Investigation) 92204-00 [1866]

- vestibular function 96064-0011340-00 [1845]
- - caloric test of labyrinth 11333-00 [1845]
- - simultaneous bithermal 11336-00 [1845]
- - electronystagmography 11339-00 **[1845]**
- - rotating chair 96063-00 [1845]

# 8.2 Minor addenda

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### ACHI Tabular List

#### **CHAPTER 5**

#### PROCEDURES ON NOSE, MOUTH AND PHARYNX (BLOCKS 370-422)



Excision procedures on salivary gland or duct

30253-00 Partial excision of parotid gland

Partial parotidectomy

Includes: exposure of facial nerve facial nerve monitoring

#### CHAPTER 19

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) PLASTIC PROCEDURES ON SOFT TISSUE

#### **REPAIR**

1678

Repair of ear

Excludes: reconstruction of ear (45660-00, 45661-00 [1684])

45659-00 Correction of bat ear

Correction of prominent or protruding ear

Ear pinning or setback

45659-01 Other correction of external ear deformity

> Correction of: constricted ear

- lop ear

Repair of external ear deformity NOS

Performed for:

 constricted ear • lop ear

Excludes: reconstruction of external auditory canal (41521 [304], 41512-00 [305])

# 9. Circulatory system

### 9.1 Heart valve interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 8**

# PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600–777) HEART – AORTIC VALVE

#### **REPAIR**

Repair of aortic valve
------------------------

Excludes: that with repair or replacement of ascending thoracic aorta (see blocks [685], [687] and [688])

#### 38483-00 Decalcification of aortic valve leaflet

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

#### 38270-01 Percutaneous balloon aortic valvuloplasty

Percutaneous balloon aortic valvotomy

Includes: cardiac catheterisation

38475-02 Aortic valve annuloplasty

#### 38477-02 Aortic valve annuloplasty with ring insertion

Aortic valve annuloplasty with Cosgrove (-Edwards) ring insertion

#### 38480-00 Repair of aortic valve, 1 leaflet

Code also when performed:

- \* cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- + valve annuloplasty (38475, 38477 [622], [627] and [633])

Excludes: decalcification of aortic valve (38483-00 [622])

#### 38481-00 Repair of aortic valve, 2 or more leaflets

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

Excludes: decaleification of aortic valve (38483-00 [622])

#### 38516-00 Repair of aortic valve

Includes: cleft closure

patch augmentation
quadrangular resection

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

623

#### Replacement of native or prosthetic aortic valve

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- operative management of acute infective endocarditis during heart valve procedure (38493-00 [666])

#### 38488-08 Percutaneous replacement of aortic valve with bioprosthesis

Transcatheter aortic valve implantation [TAVI]

Includes: cardiac catheterisation

use of embolic protection device

valvuloplasty

38488-00 Replacement of aortic valve with mechanical prosthesis

38488-01 Replacement of aortic valve with bioprosthesis

38489-00 Replacement of aortic valve with homograft

38489-01 Replacement of aortic valve with unstented heterograft

#### 38519-00 Replacement of prosthetic aortic valve with prosthesis

Aortic valve-in-valve replacement

Includes: bioprosthesis

<u>mechanical prosthesis</u> removal of prosthetic valve

**Note:** Assign this code for removal of an in situ prosthetic valve and replacement with another prosthetic valve.

Excludes: replacement of aortic valve (38488-00, 38488-01, 38489 [623])

#### 38519-04 Percutaneous replacement of prosthetic aortic valve with prosthesis

Valve-in-valve transcatheter aortic valve implantation [ViV TAVI]

**Includes:** bioprosthesis

mechanical prosthesis

transcatheter removal of prosthetic valve

Note: Assign this code for transcatheter removal of an in situ prosthetic valve and replacement with another

prosthetic valve.

Excludes: replacement of aortic valve (38488-08 [623])

#### OTHER PROCEDURES

624

#### Other procedures on aortic valve

38456-15 Other intrathoracic procedures on aortic valve without cardiopulmonary bypass

38864-04 Other intrathoracic procedures on aortic valve without cardiopulmonary bypass

### **HEART - MITRAL VALVE**

#### **REPAIR**

626

#### Repair of mitral valve

38485-01 Decalcification of mitral valve

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

#### 38270-02 Transcatheter [Ppercutaneous] balloon mitral valvuloplasty

Percutaneous balloon mitral valvotomy

Includes: cardiac catheterisation

transapical, transeptal, transvenous approach

#### 96222-00 Percutaneous mitral valvuloplasty using closure device

Includes: cardiac catheterisation

using:

• Evalve

• MitraClip

#### 38461-00 Transcatheter [percutaneous] mitral valvuloplasty using closure device

Includes: cardiac catheterisation

transapical, transeptal, transvenous approach

using MitraClip®

#### 38480-01 Repair of mitral valve, 1 leaflet

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

Excludes: decalcification of mitral valve (38485-01 [626])

#### 38481-01 Repair of mitral valve, 2 or more leaflets

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

Excludes: decalcification of mitral valve (38485-01 [626])

#### 38516-01 Repair of mitral valve

**Includes:** cleft closure

patch augmentation quadrangular resection

#### **Code also when performed:**

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

#### 627 Mitral valve annuloplasty

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

#### 38475-00 Mitral valve annuloplasty

#### 38477-00 Mitral valve annuloplasty with ring insertion

Mitral valve annuloplasty with Cosgrove (-Edwards) ring insertion

#### Replacement of <u>native or prosthetic</u> mitral valve

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 **[642]**)
- operative management of acute infective endocarditis during heart valve procedure (38493-00 [666])

#### 38488-09 Percutaneous replacement of mitral valve with bioprosthesis

Includes: cardiac catheterisation

valvuloplasty

38488-02 Replacement of mitral valve with mechanical prosthesis

38488-03 Replacement of mitral valve with bioprosthesis

38489-02 Replacement of mitral valve with homograft

38519-01 Replacement of prosthetic mitral valve with prosthesis

Mitral valve-in-valve replacement

**Includes:** bioprosthesis

mechanical prosthesis removal of prosthetic valve

**Note:** Assign this code for removal of an in situ prosthetic valve and replacement with another prosthetic valve.

Excludes: replacement of mitral valve (38488-02, 38488-03, 38489-02 [628])

38519-05 Percutaneous replacement of prosthetic mitral valve with prosthesis

Valve-in-valve transcatheter mitral valve replacement [ViV TMVR]

Includes: bioprosthesis

mechanical prosthesis

transcatheter removal of prosthetic valve

Note: Assign this code for transcatheter removal of an in situ prosthetic valve and replacement with another

prosthetic valve.

Excludes: replacement of mitral valve (38488-09 [628])

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#### **OTHER PROCEDURES**

630 Other procedures on mitral valve

38456-16 Other intrathoracic procedures on mitral valve without cardiopulmonary bypass

38864-05 Other intrathoracic procedures on mitral valve without cardiopulmonary bypass

38653-05 Other intrathoracic procedures on mitral valve with cardiopulmonary bypass

#### **HEART - TRICUSPID VALVE**

#### INCISION

631 Incision procedures on tricuspid valve

38456-11 Open valvotomy of tricuspid valve

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

#### **REPAIR**

632 Repair of tricuspid valve

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

38480-02 Repair of tricuspid valve, 1 leaflet

38481-02 Repair of tricuspid valve, 2 or more leaflets

38516-02 Repair of tricuspid valve

Includes: cleft closure

patch augmentation quadrangular resection Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- reconstruction of subvalvular structures (38490-00 [662])
- valve annuloplasty (38475, 38477 [622], [627] and [633])

#### 633 Tricuspid valve annuloplasty

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

38475-01 Tricuspid valve annuloplasty

38477-01 Tricuspid valve annuloplasty with ring insertion

Tricuspid valve annuloplasty with Cosgrove (-Edwards) ring insertion

#### Replacement of <u>native or prosthetic</u> tricuspid valve

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- operative management of acute infective endocarditis during heart valve procedure (38493-00 [666])

#### 38488-10 Percutaneous replacement of tricuspid valve with bioprosthesis

Includes: cardiac catheterisation

valvuloplasty

38488-04 Replacement of tricuspid valve with mechanical prosthesis

38488-05 Replacement of tricuspid valve with bioprosthesis

38489-03 Replacement of tricuspid valve with homograft

#### 38519-02 Replacement of prosthetic tricuspid valve with prosthesis

Tricuspid valve-in-valve replacement

Includes: bioprosthesis

mechanical prosthesis removal of prosthetic valve

**Note:** Assign this code for removal of an in situ prosthetic valve and replacement with another prosthetic valve.

Excludes: replacement of tricuspid valve (38488-04, 38488-05, 38489-03 [634])

#### 38519-06 Percutaneous replacement of prosthetic tricuspid valve with prosthesis

Valve-in-valve transcatheter tricuspid valve replacement [ViV TTVR]

**Includes:** bioprosthesis

mechanical prosthesis

transcatheter removal of prosthetic valve

Note: Assign this code for transcatheter removal of an in situ prosthetic valve and replacement with another

prosthetic valve.

Excludes: replacement of tricuspid valve (38488-10 [634])

#### **OTHER PROCEDURES**

# Other procedures on tricuspid valve

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38864-06 Other intrathoracic procedures on tricuspid valve without cardiopulmonary bypass

38653-06 Other intrathoracic procedures on tricuspid valve with cardiopulmonary bypass

#### **HEART – PULMONARY VALVE**

#### **INCISION**

### 636 Incision procedures on pulmonary valve

38456-01 Open valvotomy of pulmonary valve

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

#### **REPAIR**

### Repair or replacement of <u>native or prosthetic</u> pulmonary valve

38270-03 Percutaneous balloon pulmonary valvuloplasty

Percutaneous balloon pulmonary valvotomy

Includes: cardiac catheterisation

38488-11 Percutaneous replacement of pulmonary valve with bioprosthesis

Transcatheter pulmonary valve implantation

Includes: cardiac catheterisation

valvuloplasty

38516-03 Repair of pulmonary valve

Pulmonary valvuloplasty

Includes: cleft closure

patch augmentation quadrangular resection

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

• reconstruction of subvalvular structures (38490-00 [662])

• valve annuloplasty (38475, 38477 [622], [627] and [633])

. . .

#### 38519-03 Replacement of prosthetic pulmonary valve with prosthesis

Pulmonary valve-in-valve replacement

**Includes:** bioprosthesis

mechanical prosthesis removal of prosthetic valve

**Note:** Assign this code for removal of an in situ prosthetic valve and replacement with another prosthetic valve.

Excludes: replacement of pulmonary valve (38488-06, 38488-07, 38489 [637])

#### 38519-07 Percutaneous replacement of prosthetic pulmonary valve with prosthesis

Valve-in-valve transcatheter pulmonary valve replacement [ViV TPVR]

Includes: bioprosthesis

mechanical prosthesis

transcatheter removal of prosthetic valve

Note: Assign this code for transcatheter removal of an in situ prosthetic valve and replacement with another

prosthetic valve.

Excludes: replacement of pulmonary valve (38488-11 [637])

#### OTHER PROCEDURES

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38864-07 Other intrathoracic procedures on pulmonary valve without cardiopulmonary bypass

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### 9.2 Cardiac defibrillator

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### CHAPTER 8

# PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600–777) HEART – OTHER SITES

#### APPLICATION, INSERTION, REMOVAL

648

Insertion of permanent transvenous electrode for subcutaneous cardiac pacemaker or defibrillator

▼0936

Insertion of permanent endocardial electrode

Includes: that by percutaneous approach

• • •

38390-01 Insertion of permanent transvenous electrode into left ventricle for cardiac defibrillator

Includes: insertion via coronary sinus

Code also when performed:

- insertion of:
- insertion of cardiac defibrillator generator (automatic) (implantable) (38393-00-38472-00 [653])
- insertion of permanent transvenous electrode into other heart chamber(s) for cardiac defibrillator (38390-02 [648])

38350-00 Insertion of permanent transvenous electrode into other heart chamber(s) for subcutaneous cardiac pacemaker

Insertion of permanent transvenous electrode for subcutaneous cardiac pacemaker

Includes: cardiac electrophysiological studies [EPS] that into left atrium, right atrium or right ventricle

Code also when performed:

- insertion of:
- permanent transvenous electrode into left ventricle for subcutaneous cardiac pacemaker (38368-00 [648])
- subcutaneous cardiac pacemaker generator (38353-00 [650])

Excludes: that with defibrillator functionality (38390-02 [648])

38390-02 Insertion of permanent transvenous electrode into other heart chamber(s) for cardiac defibrillator Insertion of permanent transvenous electrode for cardiac defibrillator NOS

Includes: that into left atrium, right atrium or right ventricle

Code also when performed:

- insertion of:
- insertion of cardiac defibrillator generator (automatic) (implantable) (38393-0038472-00 [653])
- insertion of permanent transvenous electrode into left ventricle for cardiac defibrillator (38390-01 [648])



#### Insertion of other electrode or patch for subcutaneous cardiac pacemaker or defibrillator

. . . .

38390-00

Insertion of patches for cardiac defibrillator

Insertion of patches for cardiac defibrillator:

- epicardial
- myocardial

Includes: connecting lead between patches and generator

that via:

- · sternotomy
- · subxyphoid approach
- · thoracotomy

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- insertion of cardiac defibrillator generator (automatic) (implantable) (38393-00-38472-00 [653])

38473-00 Insertion of permanent epicardial electrode for subcutaneous cardiac pacemaker via subxyphoid approach

Insertion of permanent myocardial electrode for subcutaneous cardiac pacemaker via subxyphoid approach

Code also when performed:

• insertion of subcutaneous cardiac pacemaker generator (38353-00 [650])

Excludes: that with defibrillator functionality (38473-01 [649])

38473-01 Insertion of permanent epicardial electrode for cardiac defibrillator via subxyphoid approach Insertion of permanent myocardial electrode for cardiac defibrillator via subxyphoid approach

Code also when performed:

• insertion of cardiac defibrillator generator (automatic) (implantable) (38393-00-38472-00 [653])

38470-00 Insertion of permanent epicardial electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Insertion of permanent myocardial electrode for subcutaneous cardiac pacemaker via:

- sternotomy
- thoracotomy

Code also when performed:

• insertion of subcutaneous cardiac pacemaker generator (38353-00 [650])

Excludes: that with defibrillator functionality (38470-01 [649])

38470-01 Insertion of permanent epicardial electrode for cardiac defibrillator via thoracotomy or sternotomy Insertion of permanent myocardial electrode for cardiac defibrillator via:

- sternotomy
- · thoracotomy

Code also when performed:

• insertion of cardiac defibrillator generator (automatic) (implantable) (38393-00-38472-00 [653])

38654-00 Insertion of permanent left ventricular electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Code also when performed:

• insertion of subcutaneous cardiac pacemaker generator (38353-00 [650])

Excludes: that with defibrillator functionality (38654-03 [649])

38654-03 Insertion of permanent left ventricular electrode for cardiac defibrillator via thoracotomy or sternotomy

Code also when performed:

insertion of cardiac defibrillator generator (automatic) (implantable) (38393 00 38472 00 [653])

650

#### Insertion of cardiac pacemaker generator

**V**0936

Excludes: cardiac:

- event monitor (loop recorder) (38285-00 [1604])
- resynchronisation device with defibrillator capability (38393 00 38472 00 [653])

pacemaker combined with automatic implantable cardioverter defibrillator (38393-00-38472-00 [653])

#### 38353-00 Insertion of subcutaneous cardiac pacemaker generator

Insertion of:

- biventricular pacemaker
- · cardiac:
- pacemaker device
- resynchronisation therapy [CRT] device
- dual chamber pacemaker
- single chamber pacemaker
- triple chamber pacemaker

Includes: cardiac electrophysiological studies [EPS]

formation of pocket (abdominal) (chest) for implantation of generator

testing of implanted cardiac pacemaker or defibrillator

Code also when performed:

• insertion of permanent electrode (38350-00, 38368-00 [648], 38470-00, 38473-00, 38654-00 [649])

Excludes: replacement of subcutaneous cardiac pacemaker generator (38353-01 [655])

. . .



#### Insertion of cardiac defibrillator generator

<del>▼0936</del>

#### 38393-00 Insertion of cardiac defibrillator generator

Automatic defibrillator implantation

Implantation of (automatic) cardiac defibrillator with pacemaker functionality

Insertion of:

- automatic implantable cardioverter defibrillator [AICD] [ICD]
- cardiac resynchronisation device with defibrillator capability
- dual chamber ICD
- implantable cardioverter
- implantable cardioverter defibrillator (generator)
- single chamber ICD

Includes: formation of pocket (abdominal) (chest) for implantation of generator

intraoperative defibrillator measurements or testing testing of implanted cardiac pacemaker or defibrillator

#### Code also when performed:

- insertion of:
  - patches (38390-00 [649])
- permanent electrode (38390-01, 38390-02 [648], 38470-01, 38473-01, 38654-03 [649])

Excludes: replacement of defibrillator generator (automatic) (implantable) (38393-01 [656])

## 38472-00 Insertion of cardiac defibrillator generator

## **▼**0936

Automatic defibrillator implantation

Implantation of (automatic) cardiac defibrillator with pacemaker functionality

**Insertion of:** 

- automatic implantable cardioverter defibrillator [AICD] [ICD]
- cardiac resynchronisation device with defibrillator capability
- dual chamber ICD
- implantable cardioverter defibrillator (generator)
- single chamber ICD

Includes: formation of pocket (abdominal) (chest) for implantation of generator

intraoperative defibrillator measurements or testing testing of implanted cardiac pacemaker or defibrillator

## Code also when performed:

- insertion of:
  - patches (38390-00 **[649]**)
- permanent electrode (38390-01, 38390-02 [648], 38470-01, 38473-01, 38654-03 [649])

Excludes: replacement of defibrillator generator (38472-01 [656])



## Adjustment, replacement or removal of electrode for cardiac pacemaker or defibrillator

**V**0936

## 38456-29 Replacement of temporary epicardial electrode for cardiac defibrillator

Replacement of temporary myocardial electrode for cardiac defibrillator

Includes: that via:

- sternotomy
- · thoracotomy

#### 38390-03 Replacement of patches for cardiac defibrillator

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393-01-38472-01 [656])

## 38368-01 Replacement of permanent transvenous electrode of left ventricle for subcutaneous cardiac pacemaker

Code also when performed:

• replacement of subcutaneous cardiac pacemaker (38353-01 [655])

Excludes: that:

- via thoracotomy or sternotomy (38654-01 [654])
- with defibrillator functionality (38368-03 [654])

#### 38368-03 Replacement of permanent transvenous electrode of left ventricle for cardiac defibrillator

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393-01-38472-01 [656])

Excludes: that via thoracotomy or sternotomy (38654-01 [654])

## 38350-01 Replacement of permanent transvenous electrode of other heart chamber(s) for subcutaneous cardiac pacemaker

Replacement of permanent transvenous electrode for subcutaneous cardiac pacemaker

Includes: that of left atrium, right atrium or right ventricle

Code also when performed:

• replacement of subcutaneous cardiac pacemaker (38353-01 [655])

Excludes: that with defibrillator functionality (38350-03 [654])

38350-03 Replacement of permanent transvenous electrode of other heart chamber(s) for cardiac defibrillator Replacement of permanent transvenous electrode for cardiac defibrillator NOS

Includes: that of left atrium, right atrium or right ventricle

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393 01 38472-01 [656])

38654-01 Replacement of permanent left ventricular electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Code also when performed:

• replacement of subcutaneous cardiac pacemaker (38353-01 [655])

Excludes: that with defibrillator functionality (38654-04 [654])

38654-04 Replacement of permanent left ventricular electrode for cardiac defibrillator via thoracotomy or sternotomy

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393 01 38472-01 [656])

38456-23 Replacement of permanent epicardial electrode for subcutaneous cardiac pacemaker via subxyphoid approach

Replacement of permanent myocardial electrode for subcutaneous cardiac pacemaker via subxyphoid approach

Code also when performed:

• replacement of subcutaneous cardiac pacemaker (38353-01 [655])

Excludes: that with defibrillator functionality (38456-30 [654])

38456-30 Replacement of permanent epicardial electrode for cardiac defibrillator via subxyphoid approach Replacement of permanent myocardial electrode for cardiac defibrillator via subxyphoid approach

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393-01-38472-01 [656])

38456-24 Replacement of permanent epicardial electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Replacement of permanent myocardial electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Code also when performed:

• replacement of subcutaneous cardiac pacemaker (38353-01 [655])

Excludes: that with defibrillator functionality (38456-31 [654])

38456-31 Replacement of permanent epicardial electrode for cardiac defibrillator via thoracotomy or sternotomy Replacement of permanent myocardial electrode for cardiac defibrillator via thoracotomy or sternotomy

Code also when performed:

• replacement of defibrillator generator (automatic) (implantable) (38393-01-38472-01 [656])

90203-04 Removal of temporary transvenous electrode for cardiac pacemaker

Excludes: that with defibrillator functionality (90203-11 [654])

...

38456-32 Removal of temporary epicardial electrode for cardiac defibrillator

Removal of temporary myocardial electrode for cardiac defibrillator

Includes: that via:

- sternotomy
- · subxyphoid approach
- thoracotomy

38390-04 Removal of patches for cardiac defibrillator

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

38368-02 Removal of permanent transvenous electrode of left ventricle for subcutaneous cardiac pacemaker

**Includes:** that by manual traction

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38368-04 [654])

38368-04 Removal of permanent transvenous electrode of left ventricle for cardiac defibrillator

**Includes:** that by manual traction

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

38350-02 Removal of permanent transvenous electrode of other heart chamber(s) for subcutaneous cardiac pacemaker

Removal of permanent transvenous electrode for subcutaneous cardiac pacemaker

Includes: that:

· by manual traction

• from left atrium, right atrium or right ventricle

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38350-04 [654])

38350-04 Removal of permanent transvenous electrode of other heart chamber(s) for cardiac defibrillator Removal of permanent transvenous electrode for cardiac defibrillator NOS

Includes: that:

• by manual traction

• from left atrium, right atrium or right ventricle

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

38358-01 Removal of permanent transvenous electrode of left ventricle for subcutaneous cardiac pacemaker using extraction device

Includes: use of:

· extraction sheath

• locking stylet

• snares

Note: Performed for extraction of chronically (more than 6 months) implanted electrode

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38358-02 [654])

38358-02 Removal of permanent transvenous electrode of left ventricle for cardiac defibrillator using extraction device

Includes: use of:

extraction sheath

• locking stylet

• snares

Note: Performed for extraction of chronically (more than 6 months) implanted electrode

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

## 38358-00 Removal of permanent transvenous electrode of other heart chamber(s) for subcutaneous cardiac pacemaker using extraction device

Removal of permanent transvenous electrode NOS for subcutaneous cardiac pacemaker using extraction device

Includes: that from left atrium, right atrium or right ventricle

use of:

- · extraction sheath
- · locking stylet
- snares

*Note:* Performed for extraction of chronically (more than 6 months) implanted electrode

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38358-03 [654])

## 38358-03 Removal of permanent transvenous electrode of other heart chamber(s) for cardiac defibrillator using extraction device

Removal of permanent transvenous electrode NOS for cardiac defibrillator using extraction device

Includes: that from left atrium, right atrium or right ventricle

use of:

- · extraction sheath
- locking stylet
- · snares

*Note:* Performed for extraction of chronically (more than 6 months) implanted electrode

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

## 38654-02 Removal of permanent left ventricular electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38654-05 [654])

## 38654-05 Removal of permanent left ventricular electrode for cardiac defibrillator via thoracotomy or sternotomy

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203 07 38472-02 [656])

## 38456-26 Removal of permanent epicardial electrode for subcutaneous cardiac pacemaker via subxyphoid

Removal of permanent myocardial electrode for subcutaneous cardiac pacemaker by subxyphoid approach

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38456-33 [654])

## 38456-33 Removal of permanent epicardial electrode for cardiac defibrillator via subxyphoid approach

Removal of permanent myocardial electrode for cardiac defibrillator by subxyphoid approach

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

## 38456-27 Removal of permanent epicardial electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Removal of permanent myocardial electrode for subcutaneous cardiac pacemaker via thoracotomy or sternotomy

Code also when performed:

• removal of subcutaneous cardiac pacemaker (38353-02 [655])

Excludes: that with defibrillator functionality (38456-34 [654])

38456-34 Removal of permanent epicardial electrode for cardiac defibrillator via thoracotomy or sternotomy Removal of permanent myocardial electrode for cardiac defibrillator via thoracotomy or sternotomy

Code also when performed:

• removal of defibrillator generator (automatic) (implantable) (90203-07-38472-02 [656])

- - -



## Adjustment, replacement or removal of cardiac defibrillator generator

**V**0936

## 90203-06 Adjustment of cardiac defibrillator generator

Cardiac defibrillator generator:

- repair
- · repositioning
- revision

Includes: revision or relocation of skin pocket

testing of implanted cardiac pacemaker or defibrillator

Excludes: revision or relocation of skin pocket alone (90219-00 [663])

## 38393-01 Replacement of cardiac defibrillator generator

Includes: revision or relocation of skin pocket testing of implanted cardiac pacemaker or defibrillator

Code also when performed:

- replacement of:
- electrode (38350-03, 38368-03, 38456-30, 38456-31, 38654-04 [654])
- \* patches (38390-03 [654])

## 38472-01 Replacement of cardiac defibrillator generator

Includes: revision or relocation of skin pocket

testing of implanted cardiac pacemaker or defibrillator

## Code also when performed:

- replacement of:
- electrode (38350-03, 38368-03, 38456-30, 38456-31, 38654-04 [654])
- patches (38390-03 [654])

## 90203-07 Removal of cardiac defibrillator generator

Code also when performed:

- removal of:
- \*electrode (38350-04, 38358-02, 38358-03, 38368-04, 38456-33, 38456-34, 38654-05 [654])
- patches (38390-04 [654])

## 38472-02 Removal of cardiac defibrillator generator

Code also when performed:

- removal of:
- <u>electrode (38350-04, 38358-02, 38358-03, 38368-04, 38456-33, 38456-34, 38654-05 [654])</u>
- patches (38390-04 [654])

. . .

## **CHAPTER 19**

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1926) DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS – CARDIOVASCULAR SYSTEM



#### Testing of cardiac pacemaker or defibrillator

Includes: electrocardiography

interrogation

measurement of stimulus:

• amplitude

• rate

• width reprogramming

telemetry

testing of pulse generator or electrode

Excludes: that performed with initial insertion or with adjustment or replacement — omit code

11721-03 Testing of atrioventricular [AV] sequential, rate responsive or antitachycardia cardiac pacemaker

Testing of DDD, DDI or DVI pacemaker

• pacemaker with pacemaker classification fourth character "R" (rate modulation)

11718-00 Testing of other cardiac pacemaker

Testing of implanted cardiac device NOS

. . .

## **ACHI Alphabetic Index**

## D

#### Deactivation

- implantable cardiac defibrillator (ICD) 90203-06 [656]
- leadless pacemaker (intracardiac) 96259-03 [655]
- - pressure ventilation (NIPV) see block [570]
- positive end expiratory pressure (PEEP) see also block [569]
- - noninvasive see block [570]
- synchronised intermittent mandatory (SIMV) see block [569]
- via endotracheal tube or tracheostomy (with continuous ventilatory support) see block [569]

#### I

## Implant, implantation — see also Insertion

••

- cardioverter, generator (automatic) (with pacemaker functionality) 38393-0038472-00 [653]
- - with replacement 38393-0138472-01 [656]
- defibrillator, generator (automatic) (cardioverter) (with pacemaker functionality) 38393-0038472-00 [653]
- - with replacement 38393 0138472-01 [656]
- generato
- - defibrillator, cardiac (automatic) (with pacemaker functionality) 38393-0038472-00 [653]
- - with replacement 38393-0138472-01 [656]
- - pacemaker, cardiac (subcutaneous) 38353-00 [650]
- - with
- ---- defibrillator functionality 38393-0038472-00 [653]
- ---- with replacement 38393-0138472-01 [656]
- - replacement 38353-01 [655]

. . .

## Insertion

...

- cardioverter, automatic generator 38393-0038472-00 [653]
- catheter
- defibrillator, cardiac
- - electrode see Insertion/electrode(s) lead(s)/cardiac
- - generator (automatic) (cardioverter) (with pacemaker functionality) 38393-0038472-00 [653]
- - with replacement 38393-0138472-01 [656]
- - lead (electrode) see Insertion/electrode(s) lead(s)/cardiac
- - patch (epicardial) (myocardial) 38390-00 [649]

...

```
    generator

- - cardiac
- - - defibrillator (automatic) (dual chamber) (single chamber) (with pacemaker functionality) 38393-00 [653] — see
      Insertion/defibrillator, cardiac/generator
- - - pacemaker (biventricular) (cardiac resynchronisation therapy) (dual chamber) (single chamber) (subcutaneous)
    (triple chamber) 38353-00 [650]
---- with defibrillator functionality 38393-0038472-00 [653]
--- leadless (intracardiac) 96259-00 [650]
- pacemaker
- - cardiac
- - - electrode — see Insertion/electrode(s) lead(s)/cardiac
- - - generator (biventricular) (cardiac resynchronisation therapy) (dual chamber) (single chamber) (subcutaneous)
    (triple chamber) 38353-00 [650]
--- with defibrillator functionality 38393-00 [653] — see Insertion/defibrillator, cardiac/generator
--- intracardiac (leadless) 96259-00 [650]
- - diaphragmatic 38456-03 [567]
- - gracilis neosphincter (electrical anal stimulator) 32206-00 [940]
R
Relocation
- skin pocket
- - for
- - - cardiac
- - - - defibrillator (automatic) 90219-00 [663]
---- adjustment, repair or repositioning of generator 90203-06 [656]
---- replacement of generator 38393-0138472-01 [656]
- - - - pacemaker 90219-00 [663]
---- with
---- adjustment, repair or repositioning of subcutaneous generator 90203-05 [655]
---- replacement of subcutaneous generator 38353-01 [655]
Removal — see also Excision
- AICD (automatic implantable cardioverter defibrillator) 90203-0738472-02 [656]
- - with replacement 38393-0138472-01 [656]
- defibrillator generator, cardiac (automatic) 90203-0738472-02 [656]
- - with replacement 38393-0138472-01 [656]
- - defibrillator (automatic) (heart) 90203-0738472-02 [656]
- - - with replacement 38393-0138472-01 [656]
- - pacemaker — see Removal/pacemaker
- - pulse (subcutaneous)
- - - anal, gracilis neosphincter 32210-02 [940]
- ICD (implantable cardioverter defibrillator) 90203-0738472-02 [656]
- - with replacement 38393-0138472-01 [656]
- implanon 30062-00 [1908]
- implant
Replacement
- AICD (automatic implantable cardioverter defibrillator) 38393-0138472-01 [656]
- defibrillator, generator (automatic) (cardioverter) 38393-0138472-01 [656]
- generator
- - cardiac
- - - defibrillator (automatic) 38393-0138472-01 [656]
- - - pacemaker (subcutaneous) 38353-01 [655]
---- leadless (intracardiac) 96259-01 [655]
- ICD (implantable cardioverter defibrillator) 38393-0138472-01 [656]
```

...

## Revision (partial) (total)

- skin pocket, for

- - cardiac

- - - defibrillator (automatic) 90219-00 [663]

- - - - with

---- adjustment, repair or repositioning of generator 90203-06 [656]

---- replacement of generator 38393-0138472-01 [656]

- - - pacemaker 90219-00 [663]

- - - with

---- adjustment, repair or repositioning of subcutaneous generator 90203-05 [655]

---- replacement of subcutaneous generator 38353-01 [655]

. . .

## 9.3 Aortic interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 8**

## PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600-777)

## **AORTA**

## **REPAIR**

Excludes: repair of wound of a orta (90210-02 [709], 90213-02 [710])

replacement of thoracic aneurysm (33103-00, 33145-00, 33109-00, 33148-00 [715])

684

## Repair of ascending thoracic aorta

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- 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

Includes: debranching and reimplantation of head and neck vessels deep hypothermic circulatory arrest

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- 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:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- 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])

38568-00 Repair of descending thoracic aorta

38571-00 Repair of descending thoracic aorta with shunt

687

## Replacement of ascending thoracic aorta

**Includes:** debranching and reimplantation of head and neck vessels

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 **[642]**)
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

Excludes: that with replacement of aortic arch (see block [688])

...

38554-00 Replacement of ascending thoracic aorta with reimplantation of aortic valve and coronary arteries Valve sparing aortic root replacement intervention

Include: retrograde cardioplegia

688

#### Replacement of aortic arch and ascending thoracic aorta

Includes: debranching and reimplantation of head and neck vessels deep hypothermic circulatory arrest

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 **[642]**)
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

•••

## 689

## Replacement of descending thoracic aorta

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 [642])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

38568-01 Replacement of descending thoracic aorta

38571-01 Replacement of descending thoracic aorta with shunt

690

## Closure of patent ductus arteriosus

Includes: clipping division

ligation

38700-00

Percutaneous closure of patent ductus arteriosus

Transcatheter closure of patent ductus arteriosus

Includes: that with prosthesis or device

38700-01 Closure of patent ductus arteriosus

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 [642])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

691 Closure of cardiac collateral vessel

38700-02 Percutaneous closure of cardiac collateral vessel

38700-03 Closure of cardiac collateral vessel

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 **[642]**)
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

. . .

693

## Other Rrepair procedures on aorta or aortic arch

Code also when performed:

- antegrade or retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])
- cardiopulmonary bypass (38600-00, 38603-00 [642])
- retrograde cerebral perfusion during hypothermic arrest (38577-00 [642])

38706-00 Repair of aorta

38706-01 Repair of aorta with anastomosis

38712-00 Repair of aortic interruption

38558-00 Repair of aorta with augmentation

Note: Performed for hypoplastic or interrupted aortic arch.

38555-00 Repair of aortic arch

Excludes: that with repair of ascending thoracic aorta (see block [685])

38555-01 Replacement of aortic arch

Excludes: that with replacement of ascending thoracic aorta (see block [688])

38572-00 Operative management of acute rupture or dissection of thoracic aorta

Code first:

- repair of thoracic aorta:
- ascending (see blocks [684] and [685])
- descending (see block [686])
- replacement of aneurysm with graft:
- thoraco-abdominal (33109-00 [715])
- thoraco-aortic (33103-00 [715])

## **ACHI Alphabetic Index**

#### Α

#### Augmentation

- alveolar ridge
- - by
- - graft (allograft) (bone) (synthetic) 45841-00 [1371]
- - insertion of tissue expander 45843-00 [1371]
- aorta for repair 38558-00 [693]
- artery, branch pulmonary 38474-01 [717]
- bladder (open) 37047-01 [1107]

```
- - via laparoscopy 37047-00 [1107]
P
Procedure — see also Intervention OR specified intervention(s) performed
- urethral lift, prostatic (PUL) (Urolift) 90409-00 [1160]
- valve sparing aortic root replacement 38554-00 [687
- Virag procedure (microvascular small vessel bypass for penile erection failure) 90405-01 [1202]
R
Repair
- aorta, aortic 38706-00 [693]
- - by aortopexy 43909-00 [693]
- - with anastomosis 38706-01 [693]
- - - anastomosis 38706-01 [693]
- - - augmentation 38558-00 [693]
- - aneurysm — see Repair/aneurysm
- - arch 38555-00 [693]
- - - with repair of thoracic aorta, ascending — see block [685]
- - dissection, endovascular (endoluminal) 33116-00 [762]
- - endovascular (AAA stent) (aneurysm) (dissection) (endoluminal) 33116-00 [762]
- - thoracic
Replacement
- aorta, aortic
- - aneurysm — see Replacement/aneurysm, with graft/aorta
- - arch 38555-01 [693]
- - - with ascending thoracic aorta replacement — see block [688]
- - root, with valve sparing 38554-00 [687]
- - thoracic
--- ascending — see block [687]
---- with aortic arch replacement — see block [688]
- - - descending 38568-01 [689]
- - - - with shunt 38571-01 [689]
```

## 9.4 Pulmonary artery interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 8**

## PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600-777) ARTERIES

Note: See also procedures on aorta (see blocks [682] to [693])

Excludes: coronary arteries (see blocks [667] to [681])

• • •

## **REPAIR**

## 717 Repair procedures on pulmonary artery Note: Performed for congenital heart disease 38715-00 Banding of main pulmonary artery 38715-01 Debanding of main pulmonary artery 38733-00 Creation of systemic pulmonary shunt Creation of shunt: · ascending aorta to pulmonary artery · descending aorta to pulmonary artery · subclavian to pulmonary artery 38474-01 Augmentation of branch pulmonary artery Code also when performed: • cardiopulmonary bypass (38600-00, 38603-00 [642]) 38715-02 Other repair of main pulmonary artery 38474-00 Other repair of branch pulmonary artery Code also when performed: • cardiopulmonary bypass (38600-00, 38603-00 [642]) 718 Other repair procedures on arteries 32703-00 Resection of carotid artery with reanastomosis Includes: endarterectomy Note: Performed for occlusive artery diseaseCoagulation

## **OTHER PROCEDURES**

## 720 Other procedures on arteries

38474-02 Replacement of branch pulmonary artery

**Note:** Performed for congenital heart disease.

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

32736-00 Other procedures on inferior mesenteric artery

90222-00 Other procedures on arteries

•••

## **ACHI Alphabetic Index**

#### Δ

## Augmentation

- alveolar ridge
- - by
- - graft (allograft) (bone) (synthetic) 45841-00 **[1371]**
- - insertion of tissue expander 45843-00 [1371]
- aorta for repair 38558-00 [693]
- artery, branch pulmonary 38474-01 [717]
- bladder (open) 37047-01 [1107]
- - via laparoscopy 37047-00 [1107]

. . .

## R

#### Repair

```
- pulmonary-artery (main) 38715-02 [717]
-- by
--- banding 38715-00 [717]
--- debanding 38715-01 [717]
--- artery
--- by
---- banding 38715-00 [717]
--- debanding 38715-01 [717]
--- branch 38474-00 [717]
--- main 38715-02 [717]
```

## Replacement

...

- appliance, oral for snoring and obstructive sleep apnoea (bi-maxillary) (single arch) 97985-01 [490]
- artery, pulmonary branch 38474-02 [720]
- artificia
- - heart 96229-02 [608]
- - sphincter
- - bowel 32221-00 **[940]**
- - urinary 37390-01 [1113]

...

## 9.5 Other circulatory system interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 8**

## PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600-777)

## **HEART – ATRIUM**

## **OTHER PROCEDURES**

Other procedures on atrium

96221-00 Other closed intrathoracic procedures on atrium

38864-00 Other closed intrathoracic procedures on atrium

Percutaneous intrathoracic procedures on atrium, not elsewhere classified

Percutaneous intrathoracic procedures on atrium, not elsewhere classified

96221-01 Other intrathoracic procedures on atrium

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

## 38864-01 Other intrathoracic procedures on atrium

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

## **HEART – VENTRICLE**

## **OTHER PROCEDURES**

615

Other procedures on ventricle

38456-14 Other intrathoracic procedures on ventricle of heart without cardiopulmonary bypass

38864-02 Other intrathoracic procedures on ventricle of heart without cardiopulmonary bypass

38653-02 Other intrathoracic procedures on ventricle of heart with cardiopulmonary bypass

## **HEART - SEPTUM**

## **OTHER PROCEDURES**

620

Other procedures on septum

38456-12 Other intrathoracic procedures on septum without cardiopulmonary bypass

38864-03 Other intrathoracic procedures on septum without cardiopulmonary bypass

38653-03 Other intrathoracic procedures on septum with cardiopulmonary bypass

...

## **HEART - PERICARDIUM**

## **INCISION**

. . .

644

Other incision procedures on pericardium

38647-00

Division of thoracic adhesions

▼0909

Division of adhesions of:

- chest wall
- pericardium

Includes: that via:

- sternotomy
- thoracotomy

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

## **EXCISION**

. . .

646

Other excision procedures on pericardium

. . .

38447-01 Thoracoscopic pericardiectomy, subtotal or complete

Thoracoscopic partial pericardiectomy for creation of pericardial window

38447-00 Pericardiectomy, subtotal or complete

Partial pericardiectomy for creation of pericardial window

Includes: that via:

- anterolateral thoracotomy
- sternotomy

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

..

## 661

## Other repair procedures on other sites of heart

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

#### 38727-00 Repair of intrathoracic vessels

Excludes: that with repair of:

- repair of:
- aorta (38706, <del>38712-00</del> <u>38558-00</u> **[693]**)
- aortic arch (38555-00 [693])
- •-main pulmonary artery (38715-02, 38474-00 [717])
- vena cava (90215-02 [732], 38721-01 [733], 90217-02 [734])
- replacement of aortic arch (38555-01 [693])

## 38727-01 Repair of intrathoracic vessels with anastomosis

Excludes: that with repair of:

- repair of:
- aorta (38706, <del>38712-00</del>-38558-00 **[693]**)
- aortic arch (38555-00 [693])
- main pulmonary artery (38715-02, 38474-00 [717])
- vena cava (90215-02 [732], 38721-01 [733], 90217-02 [734])
- replacement of aortic arch (38555-01 [693])

## RECONSTRUCTION

## 662

#### Reconstruction procedures on other sites of heart

38490-00 Reconstruction and reimplantation of subvalvular structures

Repair by reconstruction and reimplantation of:

- · chordae tendinae
- · papillary muscle

Replacement of chordae tendinae by neochords

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- valve replacement:
- mitral (38488, 38489-02, see block [628])
- tricuspid (38488, 38489 03 see block [634])

## **REVISION**

## 663

## Revision procedures on other sites of heart

90219-00 F

Revision or relocation of skin pocket for subcutaneous cardiac pacemaker or defibrillator

**▼**0934, 0936

Includes: debridement
Excludes: that with:

• repair, repositioning or revision of subcutaneous generator:

- defibrillator (90203-06 [656])
- pacemaker (90203-05 [655])
- $\bullet$  replacement of subcutaneous generator:
  - defibrillator (<del>38393-01</del>-<u>38472-01</u> **[656]**)
  - pacemaker (38353-01 [655])

#### REOPERATION

## **OTHER PROCEDURES**

## 666

## Other procedures on other sites of heart

38493-00 Operative management of acute infective endocarditis during heart valve procedure

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

Code first:

• heart valve procedure(s) performed (see blocks [621] to [638])

#### 38456-00 Other intrathoracic procedures on heart without cardiopulmonary bypass

Excludes: intrathoracic procedures on:

- aortic valve (38456-15 [624])
- atrium (96221-00 [606])
- mitral valve (38456-16 [630])
- pulmonary valve (38456-18 [638])
- septa (38456-12 [620])
- tricuspid valve (38456-17 [635])
- ventricle (38456-14 [615])
- vessels of heart (38456-19 [681])

## 38864-08 Other intrathoracic procedures on heart without cardiopulmonary bypass

Excludes: intrathoracic procedures on:

- aortic valve (38864-04 [624])
- arteries of heart (38864-09 [681])
- atrium (38864-00 **[606]**)
- mitral valve (38864-05 [630])
- pulmonary valve (38864-07 [638])
- septum (38864-03 [620])
- tricuspid valve (38864-06 [635])
- ventricle (38864-02 [615])

## 38653-00 Other intrathoracic procedures on heart with cardiopulmonary bypass

Open heart surgery with cardiopulmonary bypass NOS

Excludes: intrathoracic procedures on:

- aortic valve (38653-04 [624])
- arteries of heart (38653-08 [681])
- atrium (<del>96221-01</del>-<u>38864-01</u> **[606]**)
- mitral valve (38653-05 **[630]**)
- pulmonary valve (38653-07 **[638]**)
- septaseptum (38653-03 **[620]**)
- tricuspid valve (38653-06 **[635]**)
- ventricle (38653-02 **[615]**)
- vessels of heart (38653-08 [681])

. .

## **ARTERIES**

## **EXCISION**

## 702

## Arterial embolectomy or thrombectomy

Includes: revascularisation

that with stenting of same artery

transcatheter infusion of thrombolytic or other agent

Excludes: embolectomy or thrombectomy of arterial bypass graft:

- extremities (33806-12 [703])
- trunk (33803-02 [703])

35414-00 Embolectomy or thrombectomy of intracranial artery

Transcatheter embolectomy or thrombectomy of intracranial artery

. . .

33806-10 Embolectomy or thrombectomy of popliteal artery

33806-13 Embolectomy or thrombectomy of pulmonary artery

. . .

## **CHAPTER 19**

## INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) DIAGNOSTIC INTERVENTIONS

## DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS - CARDIOVASCULAR SYSTEM

1850

Vascular pressure monitoring

**▼**0042

11607-00 Continuous ambulatory blood pressure monitoring

Includes: recording for 24 hours or more

Code also when performed:

• ambulatory continuous ECG recording (11708-00 [1853])

Excludes: that performed for less than 24 hours — omit code

...

1853

Ambulatory continuous electrocardiography [ECG]

**▼**0042

Includes: interpretation and report of recordings

microprocessor based analysis

Excludes: that performed for less than 12 hours — omit code

11708-00 Ambulatory continuous ECG recording

*Code also when performed:* 

• continuous ambulatory blood pressure monitoring (11607-00 [1850])

11709-00 Holter ambulatory continuous ECG recording

Includes: that using a system capable of superimposition and full disclosure printout

1854

Patient activated ambulatory electrocardiography [ECG]

▼0042

Includes: single or multiple event recording

use of a looping memory recording device

11710-00 Patient activated ambulatory ECG monitoring, recording for at least 20 seconds prior to and 15 seconds

after each activation

11711-00 Patient activated ambulatory ECG monitoring, recording for at least 30 seconds after each activation

## 11722-00 Patient activated implantable cardiac event monitoring

Electronic analysis of patient activated implantable loop recorder ([ILR])

Includes: analysis and report of ECG data

clinical review and interpretation of ECG data

remote monitoring

reprogramming of monitoring device retrieval of recorded and stored ECG data

**Note:** Performed for investigation of:

• atrial fibrillation

• cryptogenic stroke

• recurrent unexplained syncope.

Code also when performed:

• insertion, removal or revision of monitoring device (see block [1604])

## 1855

## Other electrocardiography [ECG]

**V**0042

Excludes: ambulatory ECG (11708-00, 11709-00 [1853], 11710-00, 11711-00 [1854])

that for cardiovascular stress test (11712-00 [1857])

11713-00 Signal averaged ECG recording

Includes: analysis, interpretation and report of recording

that involving not more than 300 beats, using at least 3 leads with data acquisition at not less than 1000Hz of

at least 100 QRS complexes

11700-00 Other electrocardiography [ECG]

Excludes: that involving less than twelve leads omit code

11705-00 Twelve-lead electrocardiography [ECG]

Includes: report

Excludes: ECG involving less than twelve leads — omit code

. . .

## **CHAPTER 20**

## IMAGING SERVICES (BLOCKS 1940–2016) ULTRASOUND SCAN

▼0042

Echography Ultrasonography

. . .

## 1942

## Ultrasound of heart

Echocardiography

Includes: that performed:

- using:
- colour flow mapping
- Doppler techniques (continuous wave) (pulsed wave)
- mechanical sector scanner
- phased array transducer
- with recording on <u>digital media</u> video tape

55113-00 M-mode and 2 dimensional real time ultrasound of heart

55118-00 2 dimensional real time transoesophageal ultrasound of heart

- - -

## **ACHI Alphabetic Index**

## E

```
Electrocardiography (ECG)
- involving
- - 11 or fewer leads — omit code
- - 12 or more leads (or more) 11700-0011705-00 [1855]
Embolectomy
- artery (with stenting)
- - intracranial NEC 35414-00 [702]
- - mesenteric 33806-05 [702]
- - - bypass 33803-02 [703]
- - popliteal 33806-10 [702]
- - - bypass 33806-12 [703]
- - pulmonary 33806-13 [702]
- - radial 33806-02 [702]
- - - bypass 33806-12 [703]
M
Massage (connective tissue) (soft tissue) 96162-00 [1908]
- cardiac (closed) (external) (manual) 92053-00 [1890]
- - open 38456 0038864-08 [666]
- prostatic 92131-00 [1904]
- rectal 92094-00 [1899]
Monitoring
- blood
- - flow 92056-00 [1857]
- - pressure
- - - cardiac intracavity 11600-00 [1850]
- - - central venous 11600-02 [1850]
- - - continuous ambulatory (24 hours or more) 11607-00 [1850]
- - - pulmonary arterial 11600-01 [1850]
--- by right heart balloon catheter (Swan Ganz) 13818-00 [657]
--- wedge (by right heart balloon catheter) 13818-00 [657]
- - - systemic arterial 11600-03 [1850]
- - systemic arterial 11600-03 [1850]
- central venous pressure 11600-02 [1850]
- continuous ambulatory blood pressure (24 hours or more) 11607-00 [1850]
- electrocardiographic — see Electrocardiography (ECG)
R
Replacement
- choanal atresia stent 96190-01 [568]
- chordae tendineae (heart) 38490-00 [662]
- clasp on removable orthodontic appliance 97876-00 [483]
S
Sternotomy
- with removal of thymus (thymoma) 38446-04 [128]
- - division of adhesions 38647-00 [644]
- - removal of thymus (thymoma) 38838-01 [128]
- median 38418-00 [561]
- - as operative approach — omit code
- reopening of site, postoperative
- - for control of postoperative haemorrhage 38656-01 [562]
```

## Т

#### **Thoracotomy**

- as operative approach omit code
- with
- - decompression of spinal cord
- - thoracic (1 level) 51011-01 [46]
- ---- 2 or more levels 51012-01 [46]
- - thoracolumbar (1 level) (high lumbar) 51011-02 [46]
- ---- 2 or more levels 51012-02 [46]
- - division of adhesions 38647-00 [644]
- - removal of thymus (thymoma) 38446-04 [128]

. . .

## 9.6 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

## **ACHI Tabular List**

## **CHAPTER 8**

## PROCEDURES ON CARDIOVASCULAR SYSTEM (BLOCKS 600-777)

- - -

## 642

## Myocardial preservation

. . .

22075-00 Deep hypothermia with circulatory arrest

Deep hypothermic cardiac arrest

Hypothermic arrest

Excludes: that performed in conjunction with cardiac surgery omit code

that with other cardiac procedure in blocks [600] to [693] — omit code

38588-00 Cardioplegia

Antegrade/retrograde administration of blood or crystalloid for cardioplegia via coronary sinus

catheterisation/cannulation

Includes: that via:

• pump oxygenator

• roller pump

Excludes: that performed in conjunction with cardiac surgery - omit code

that with other cardiac procedure in blocks [600] to [693] — omit code

38577-00 Cerebral perfusion during hypothermic arrest

Antegrade or retrograde cerebral perfusion during hypothermic arrest

...



Insertion of temporary transvenous electrode for cardiac pacemaker or defibrillator

Insertion

Insertion of temporary endocardial electrode

Excludes: that performed in conjunction with cardiac surgery — omit code

that with other cardiac procedure in blocks [600] to [693] — omit code

38256-00 Insertion of temporary transvenous electrode into atrium

38256-01 Insertion of temporary transvenous electrode into ventricle

649

Insertion of other electrode or patch for subcutaneous cardiac pacemaker or defibrillator

▼0936

90202-01 Placement of temporary transcutaneous electrode for cardiac pacemaker

Excludes: that performed in conjunction with cardiac surgery omit code

that with other cardiac procedure in blocks [600] to [693] — omit code

90202-00 Insertion of temporary epicardial electrode for cardiac pacemaker Insertion of temporary myocardial electrode for cardiac pacemaker

insertion of temporary myocardial electrode for cardiac pacemai

*Includes:* that via:

- sternotomy
- · subxyphoid approach
- · thoracotomy

Excludes: that with:

- performed in conjunction with cardiac surgery omit code
- with defibrillator functionality (90202-02 [649])
- other cardiac procedure in blocks [600] to [693] omit code

90202-02 Insertion of temporary epicardial electrode for cardiac defibrillator Insertion of temporary myocardial electrode for cardiac defibrillator

*Includes:* that via:

- sternotomy
- · subxyphoid approach
- thoracotomy

Excludes: that performed in conjunction with cardiac surgery omit code

that with other cardiac procedure in blocks [600] to [693] — omit code

. . .

## **EXAMINATION**

...



## **Cardiac catheterisation**

▼0933

Includes: cardiac output measurement

dye dilation curves exercise stress test fluoroscopy oximetry shunt detection

Excludes: that:

- performed as operative approach only in cardiac catheter-based intervention omit code
- with coronary angiography (38218 [668])

. . .

668

## Coronary angiography

▼0933

Includes: injection of opaque material

that for native vessel or coronary graft

Code also when performed:

- aortography (59903-03 **[1990**])
- intravascular ultrasound [IVUS] (96272-00 [1949])
- optical coherence tomography (11219-00 [2016])
- ventriculography (59903 [607])

38218-01 Coronary angiography with right heart catheterisation

Includes: insertion of catheter (Swan Ganz)

## **ARTERIES**

See also procedures on aorta (see blocks [682] to [693])

Excludes: aorta (see blocks [682] to [693])

coronary arteries (see blocks [667] to [681])

## APPLICATION, INSERTION, REMOVAL

697

## Interruption of artery

Includes: clipping

division ligation

Excludes: that: for visceral arterial aneurysm (33133-00, 33169-00 [698])

• for visceral arterial aneurysm (33133-00, 33169-00 [698])

• with any other vascular procedure — omit code that with any other vascular procedure - omit code

## **REPAIR**

## 672

## Coronary artery bypass — saphenous vein graft

**V**0909

Includes: procurement of vein

tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
- arterial (see blocks [674] to [678])
- composite (38500-05, 38503-05 [679])
- specified material NEC (90201 [679])

673

## Coronary artery bypass — other vein graft

**V**0909

Includes: procurement of vein:

- basilic
- cephalic

tissue stabilisers

674

## Coronary artery bypass — left internal mammary artery [LIMA] graft

▼0909

**Includes:** procurement of artery

tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
- composite (38500-05, 38503-05 [679])
- specified material NEC (90201 [679])
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

. . .

675

## Coronary artery bypass — right internal mammary artery [RIMA] graft

**V**0909

**Includes:** procurement of artery tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
- composite (38500-05, 38503-05 **[679]**)
- specified material NEC (90201 **[679]**)
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

. . .

676

## Coronary artery bypass — radial artery graft

▼0909

Includes: procurement of artery

tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
- composite (38500-05, 38503-05 **[679]**)
- specified material NEC (90201 [679])
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

..

677

## Coronary artery bypass — epigastric artery graft

▼0909

*Includes:* procurement of artery:

- gastro-epiploic
- inferior epigastric <u>tissue stabilisers</u>

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
  - composite (38500-05, 38503-05 [679])
- specified material NEC (90201 **[679]**)
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

• • •

678

## Coronary artery bypass — other artery graft

▼0909

*Includes:* procurement of artery:

- intercostal
- splenic

- $\bullet \ subscapular \\$
- ulnar

tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 **[642]**)
- graft:
- arterial (see blocks [674] to [677])
- composite (38500-05, 38503-05 [679])
- specified material NEC (90201 **[679]**)
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

. . .



## Coronary artery bypass - other graft

▼0909

Includes: procurement of:

- artery or vein
- experimental artery or vein from bovine animals

synthetic material (Gore-tex)

tissue stabilisers

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- graft:
- arterial (see blocks [674] to [678])
- venous (see blocks [672] and [673])
- open coronary endarterectomy (38505-00 [669])

. . .

## OTHER PROCEDURES

681

#### Other procedures on coronary arteries

38456-19 Other intrathoracic procedures on arteries of heart without cardiopulmonary bypass

38864-09 Other intrathoracic procedures on arteries of heart without cardiopulmonary bypass

38653-08 Other intrathoracic procedures on arteries of heart with cardiopulmonary bypass

. . .

726

## Interruption of vein

Includes: clipping

division ligation

Excludes: that: for:

- for:
- perforating veins (see blocks [727] and [728])
- visceral arterial aneurysm (33133-00, 33169-00 [698])
- with any other vascular procedure omit code
- perforating veins (see blocks [727] and [728])
- visceral arterial aneurysm (33133-00, 33169-00 [698])
   that with any other vascular procedure—omit code

730

## Procurement of vein

33551-00 Procurement of vein from limb for patch graft

Excludes: that performed through same operative incision — omit code

32760-00 Procurement of vein from limb for bypass or replacement graft

Excludes: that: for coronary bypass graft omit code

• for coronary bypass graft — see Alphabetic Index: Bypass/arterial/coronary

• when vein is procured from same arm or leg on which bypass or graft is performed — omit code that when vein is procured from same arm or leg on which bypass or graft is performed — omit code

. . .

## **CHAPTER 19**

## **INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925)**

1890

Therapeutic interventions on cardiovascular system

...

13400-00 Cardioversion

Defibrillation

Electric countershock of heart

Restoration of cardiac rhythm by electrical stimulation

Excludes: that performed in conjunction with cardiac surgery with other cardiac procedure in blocks [600] to [693] —

omit code

. . .

## **CHAPTER 20**

## **IMAGING SERVICES (BLOCKS 1940–2016)**

## **NUCLEAR MEDICINE IMAGING**

∇ 0042

Nuclear medicine scan Radioisotope scan

Includes: radioisotope function study

Excludes: magnetic resonance imaging [MRI] (see block [2015])

- - -

## 2003

## Myocardial perfusion study

Includes: planar imaging

Excludes: that with single photon emission computerised tomography [SPECT] (61303, 61307-00 [2004])

61302-00 Stress myocardial perfusion study

61302-01 Rest myocardial perfusion study

Excludes: that with myocardial positron emission tomography [PET] (61644-00 [2003])

61306-00 Combined stress and rest myocardial perfusion study

90905-01 Myocardial positron emission tomography [PET]

Includes: administration of:

• radioactive traces

radioisotope

• radionuclides

## 61644-00 Myocardial positron emission tomography [PET]

Includes: administration of:

• radioactive tracer

• radioisotope

• radionuclides

```
2004
             Myocardial perfusion study with single photon emission computerised tomography [SPECT]
            Includes: planar imaging
61303-00
            Stress myocardial perfusion study with single photon emission computerised tomography [SPECT]
            Includes: blood pressure monitoring
                       continuous ECG monitoring during exercise (with recording)
                       recording of other parameters (including heart rate)
                       resting ECG
61303-01
            Rest myocardial perfusion study with single photon emission computerised tomography [SPECT]
            Includes: using a single rest:
                       • technetium-99m [Tc-99m] protocol
                       • thallous chloride-201 [Tl-201] protocol
61307-00
            Combined stress and rest myocardial perfusion study with single photon emission computerised
            tomography [SPECT]
            Includes: blood pressure monitoring
                       continuous ECG monitoring during exercise (with recording)
                       recording of other parameters (including heart rate)
                       resting ECG
ACHI Alphabetic Index
C
Closure (of)
- atrial
- - septal defect (open) (with patch graft) 38742-02 [617]
- - - percutaneous (closed) (with prosthesis or device) 38742-00 [617]
- patent ductus arteriosus 38700-01 [690]
- - ductus arteriosus 38700-01 [690]
- - - percutaneous (closed) (transcatheter) (with prosthesis or device) 38700-00 [690]
   percutaneous (closed) (transcatheter) (with prosthesis or device) 38700-00 [690]
- - foramen ovale — see Closure/atrial/septal defect
- perforation
- - nasal septum 41671-01 [379]
- persistent foramen ovale — see Closure/atrial/septal defect
- proctostomy 30562-05 [917]
Imaging (diagnostic)
- planar
- - with
- - - myocardial perfusion study
- - - - and
- - - - photon emission computerised tomography (single) (SPECT)
---- rest 61303-01 [2004]
---- and stress 61307-00 [2004]
---- stress 61303-00 [2004]
---- and rest 61307-00 [2004]
---- positron emission tomography (PET) 90905-0161644-00 [2003]
---- rest 61302-01 [2003]
----- with positron emission tomography (PET) 61644-00 [2003]
---- and stress 61306-00 [2003]
```

---- stress 61302-00 [2003]

```
---- and rest 61306-00 [2003]
- - - renal cortical study 61386-00 [2008]
- - - and photon emission computerised tomography (single) (SPECT) 61387-00 [2008]
N
Nuclear medicine
- imaging (study) 90910-00 [2014]
- - myocardial
- - - avid imaging for infarct 61310-00 [2005]
- - - perfusion (planar imaging)
- - - - photon emission computerised tomography (single) (SPECT)
---- rest 61303-01 [2004]
---- and stress 61307-00 [2004]
---- stress 61303-00 [2004]
---- and rest 61307-00 [2004]
---- positron emission tomography (PET) 90905-01-61644-00 [2003]
---- rest 61302-01 [2003]
---- and stress 61306-00 [2003]
---- stress 61302-00 [2003]
---- and rest 61306-00 [2003]
R
- atrial septal defect (open) (with patch graft) 38742-02 [617]
- - percutaneous (closed) (with prosthesis) 38742-00 [617]
- patent ductus arteriosus (open) 38700-01 [690]
-- percutaneous 38700-00 [690]
- - ductus arteriosus (open) 38700-01 [690]
- - - percutaneous 38700-00 [690]
- - foramen ovale — see Repair/atrial septal defect
- pectus deformity (chest)
- peritoneum NEC 90329-01 [1000]
- persistent foramen ovale — see Repair/atrial septal defect
- Peyronie's disease (plaque) 37417-00 [1197]
Т
Tomography NEC 60100-00 [1951]
- positron emission (PET)
- - brain 61559-00 [2000]
- - cerebral 61559-00 [2000]
- - localised NEC 90905-03 [2013]
- - myocardial 90905-0161644-00 [2003]
- - whole body 61523-00 [2012]
```

## 9.7 Retired and revised ACS Chapter 9

See also 19.3 Complications of surgical and medical care.

Application of the ACS template led to the following refinements for the ACS:

Australian Coding Standard	Revision
0909 Coronary artery bypass grafts (CABG)	Revised ACS title and relocation of some content to ACS 1904 Complications of surgical or medical care.
0934 Cardiac and vascular revision/reoperation interventionsprocedures	Revised ACS title and relocation of content to ACS 1904 Complications of surgical or medical care.
0936 Cardiac pacemakers and implanted implantable cardiac defibrillators (ICD)	Revised ACS title and relocation of content for complications of a pacemaker or defibrillator to the ICD-10-AM Alphabetic Index.
0941 Arterial disease	Retired – unnecessary clinical information and the guidelines within redundant if following the ICD-10-AM Alphabetic Index.

## **ICD-10-AM Tabular List**

## **CHAPTER 9**

## **DISEASES OF THE CIRCULATORY SYSTEM (100–199)**

## **ISCHAEMIC HEART DISEASES (120–125)**

Note:

For morbidity, duration as used in categories I21, I22, I24 and I25 refers to the interval elapsing between onset of the ischaemic episode and admission to care. For mortality, duration refers to the interval elapsing between onset and death.



## Angina pectoris

**▼**0940

Angina is considered a significant condition in its own right. Interventions such as coronary artery bypass graft [CABG] and angioplasty may be performed to relieve angina.

## I20.0 Unstable angina

Acute coronary syndrome without acute myocardial infarction

Angina:

- crescendo
- de novo effort
- worsening effort

Impending <u>myocardial</u> infarction Intermediate coronary syndrome

Postinfarction angina (occurring more than 24 hours after an infarction)

Preinfarction syndrome

## I20.1 Angina pectoris with documented spasm

Angina:

- angiospastic
- Prinzmetal
- · spasm-induced
- variant



## Acute myocardial infarction

▼ 0940<del>, 0941</del>

Acute coronary syndrome with acute myocardial infarction

*Includes:* myocardial infarction specified as acute or with a stated duration of 4 weeks (28 days) or less from onset *Use additional code (I23.-) to identify current complication following acute myocardial infarction.* 

Use additional code (I25.1-) to identify atherosclerosis (arteriosclerosis/atheroembolism).

Excludes: myocardial infarction:

- old (I25.2)
- specified as chronic or with a stated duration of more than 4 weeks (more than 28 days) from onset (I25.8)
- subsequent (I22.-)

postmyocardial infarction syndrome (I24.1)

#### 121.0 Acute transmural myocardial infarction of anterior wall

Transmural infarction (acute)(of)(STEMI):

- · anterior (wall) NOS
- · anteroapical
- · anterolateral
- · anteroseptal



## Subsequent myocardial infarction

Includes: myocardial:

- infarction:
  - · extension
- recurrent
- · reinfarction

Note:

For morbidity coding, assign a code from this category should be assigned for infarction of any myocardial site, occurring within 4 weeks (28 days) from onset of a previous infarction.

Use additional code (123.-) to identify current complication following acute myocardial infarction.

Excludes: specified as chronic or with a stated duration of more than 4 weeks (more than 28 days) from onset (I25.8)

#### 122.0 Subsequent myocardial infarction of anterior wall

Subsequent infarction (acute)(of):

- anterior (wall) NOS
- anteroapical
- · anterolateral
- · anteroseptal



## Other acute ischaemic heart diseases

▼ 0940

Excludes: angina pectoris (I20.-)

transient myocardial ischaemia of newborn (P29.4)

## 124.0

Coronary thrombosis not resulting in myocardial infarction

<del>▼ 0941</del>

Coronary (artery)(vein):

- embolism, not resulting in myocardial infarction
- · occlusion, not resulting in myocardial infarction
- thromboembolism, not resulting in myocardial infarction

Use additional code (I25.1-) to identify atherosclerosis (arteriosclerosis/atheroembolism).

Excludes: specified as chronic or with a stated duration of more than 4 weeks (more than 28 days) from onset (I25.8)

#### 124.1 Dressler's syndrome

Postmyocardial infarction syndrome



#### Chronic ischaemic heart disease

**▼** 0940 <del>0941</del>

Excludes: cardiovascular disease NOS (I51.6)

## 125.0 Atherosclerotic cardiovascular disease, so described

## 125.1

## Atherosclerotic heart disease

▼ 0909

Coronary atherosclerosis (atherosclerotic heart disease) is the build up of cholesterol, fatty acids, calcium, fibrous connective tissue and cells (mostly macrophages) inside the coronary arteries, referred to as plaque. The effect is reduction of blood flow through the coronary arteries to the heart muscle, which may result in heart damage, often with symptoms such as chest pain.

Coronary (artery):

- atheroma
- · atherosclerosis
- disease [CAD]
- · sclerosis

Use additional code (I21.-) to identify acute myocardial infarction [AMI].

Use additional code (124.0) to identify coronary thrombosis not resulting in myocardial infarction.

- **ൂ**125.10 Atherosclerotic heart disease of unspecified vessel
- ◆125.11 Atherosclerotic heart disease of native coronary artery
- ♣125.12 Atherosclerotic heart disease of autologous bypass graft
- ♣125.13 Atherosclerotic heart disease of nonautologous bypass graft
- I25.2 Old myocardial infarction

Old (or healed) myocardial infarction indicates past myocardial infarction, diagnosed by ECG or other special investigation, that occurred more than four weeks (28 days) ago but currently presenting with no symptoms.

Healed myocardial infarction

Past myocardial infarction diagnosed by ECG or other special investigation

I25.3 Aneurysm of heart

Aneurysm:

- mural
- ventricular
- 125.4 Coronary artery aneurysm and dissection

Coronary arteriovenous fistula, acquired

Excludes: congenital coronary (artery) aneurysm (Q24.5)

vascular dissection due to insertion of internal cardiac and vascular devices, implants and grafts (T82.85)

- I25.5 Ischaemic cardiomyopathy
- I25.6 Silent myocardial ischaemia
- 125.8 Other forms of chronic ischaemic heart disease

Any condition in <u>categories</u> I21–I22 and <u>124</u> <del>124.</del> specified as chronic or with a stated duration of more than 4 weeks (more than 28 days) from onset.

125.9 Chronic ischaemic heart disease, unspecified

Ischaemic heart disease (chronic) NOS

...

## DISEASES OF ARTERIES, ARTERIOLES AND CAPILLARIES (170-179)

170

## Atherosclerosis

• • •

## 170.2 Atherosclerosis of arteries of extremities

<del>▼ 0941</del>

Atherosclerotic gangrene

Mönckeberg's (medial) sclerosis [calcification of small arteries]

2170.20 Atherosclerosis of arteries of extremities, unspecified

. . .

## I73

## Other peripheral vascular diseases

. .

173.8 Other specified peripheral vascular diseases

Acrocyanosis

Acropara-aesthesia:

- simple [Schultze's type]
- vasomotor [Nothnagel's type]

Erythrocyanosis Erythromelalgia

173.9

Peripheral vascular disease, unspecified

<del>▼ 0941</del>

Intermittent claudication Spasm of artery

Excludes: ischaemic leg (chronic) (NOS) (I70.2-)

...

## 177

#### Other disorders of arteries and arterioles

. . .

177.0 Arteriovenous fistula, acquired

Aneurysmal varix

Arteriovenous aneurysm, acquired

Excludes: arteriovenous aneurysm NOS (Q27.3)

cerebral (I67.1) coronary (I25.4)

traumatic - see injury of blood vessel by body region

177.1 Stricture of artery

**▼**-0941

I77.2 Rupture of artery

Fistula of artery

Excludes: traumatic rupture of artery - see injury of blood vessel by body region

## **ICD-10-AM Alphabetic Index**

#### Δ

Aneurysm (anastomotic) (artery) (cirsoid) (diffuse) (false) (fusiform) (micro) (multiple) (saccular) 172.9

. . .

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- - arteriovenous, congenital Q24.5
- - congenital Q24.5
- - ruptured (see also Infarct/myocardium) I21.9
- - syphilitic A52.0
- - vein I25.8

•••

## D

Disease, diseased — see also Syndrome

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- - cardiovascular I25.0
- - coronary (artery) I25.10
- - autologous bypass graft I25.12
- - native 125.11
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- - cerebral 167.9
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- - - - not resulting in infarction I24.0
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- - specified type A93.8
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- atticoantral, chronic H66.2
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- - ischaemic (chronic or with a stated duration of over 4 weeks) I25.9
- - - acute or with a stated duration of 4 weeks or less I24.9
- - - specified NEC I24.8
- - - asymptomatic I25.6
- - - diagnosed on ECG or other special investigation, but currently presenting no symptoms I25.6
- - - specified NEC I25.8
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- - autonomic nervous system G90.9
- - nerves — see Polyneuropathy
- - vascular (PVD) NEC 170.2-
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---- embolism — see Embolism/by site
---- injury (see also Injury/blood vessel/by site) S85.9
---- microembolism — see Embolism/by site
- - - - Raynaud's syndrome I73.0-
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- - anterior (anteroapical) (anterolateral) (anteroseptal) (transmural) (wall) I21.0
- - chronic or with a stated duration of over 4 weeks I25.8
- - healed or old (diagnosed on ECG or other special investigation) I25.2
- - impending I20.0
- - inferior (diaphragmatic) (inferolateral) (inferoposterior) (transmural) (wall) I21.1
- - lateral (transmural) (wall) I21.2
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- - nontransmural I21.4
- - NSTEMI (non-ST elevation myocardial infarction) I21.4
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- - septal (transmural) I21.2
- - specified site (transmural) NEC I21.2
- - ST elevation NEC (see also Infarct/myocardium/by site) I21.3
- - STEMI (ST elevation myocardial) NEC (see also Infarct/myocardium/by site) I21.3
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- - - anterior (wall) I22.0
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```

```
- - - inferior (wall) I22.1
- - - specified NEC I22.8
- - syphilitic A52.0
- - transmural NEC (see also Infarct/myocardium/by site) I21.3
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- nontransmural I21.4
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- retinal H34.2
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- - - due to thrombosis (not resulting in infarction) I24.0
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- - due to stricture I77.1
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- - - basilar 165.1
- - - carotid I65.2
- - - multiple or bilateral I65.3
- - - specified NEC I65.8
- - - vertebral 165.0
- - pulmonary Q25.6
Stricture (see also Stenosis) R68.8
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- - - thrombus — see Thrombosis/artery
- - basilar (see also Occlusion/artery/basilar) I65.1
- - carotid (see also Occlusion/artery/carotid) 165.2
- - congenital (peripheral) Q27.8
- - - cerebral Q28.39
- - - coronary Q24.5
- - - retinal Q14.1
- - coronary I25.1-
- - precerebral (see also Occlusion/artery/precerebral) 165.9
- - pulmonary (congenital) Q25.6
- - - acquired I28.8
- - vertebral (see also Occlusion/artery/vertebral) I65.0
```

## **Syndrome**

..

- coronary
- - acute see ACS 0940 Ischaemic heart disease
- - with acute myocardial infarction see Infarct/myocardium
- - without acute myocardial infarction I20.0
- - intermediate I20.0
- - slow flow I20.8

## **Australian Coding Standards**

## 0909 CORONARY ARTERY BYPASS GRAFTS (CABG)

## 0934 CARDIAC AND VASCULAR REVISION/REOPERATION PROCEDURESINTERVENTIONS

## **EXAMPLE 2:**

Patient was admitted for an aortic bioprosthetic heart valve replacement following a previous CABG operation requiring resternotomy.

Assign: 38488-01 [623] Replacement of aortic valve with bioprosthesis

Rationale: A reoperation code is not assigned as the subsequent reopening of the sternotomy was for treatment

of an unrelated condition (Exception 2).

## 0936 CARDIAC PACEMAKERS AND IMPLANTED IMPLANTABLE CARDIAC DEFIBRILLATORS (ICD)

## 10. Respiratory system

## 10.1 Lung interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 7**

## PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520-572)

## **LUNG AND PLEURA**

## **INCISION**

549 Incision procedures on lung or pleura

38831-00 Endoscopic incision of pleura

Endoscopic chest drainage
Thoracoscopic incision of pleura

Includes: insertion of intercostal catheter

*Note:* Performed for:

• empyema

• parapneumonic effusion.

38415-00 Incision of pleura

Creation of pleural window for drainage

Drainage of empyema Open chest drainage

Includes: insertion of intercostal catheter

resection of rib [ostectomy]

*Note:* Performed for:

• empyema

• parapneumonic effusion.

38436-01 Endoscopic division of pleural adhesions

Thoracoscopy with division of adhesions

Includes: biopsy

insertion of intercostal catheter

90166-00 Division of pleural adhesions

. . .

## **EXCISION**

Partial resection of lung
Segmentectomy of lung

• • •

90170-00 Lung volume reduction surgery [LVRS]

Includes: excision of lung tissue

plication of emphysematous bleb surgical collapse of lung Excludes: insertion of endobronchial valve without excision (41905-06 [546])

## 38823-00 Radical segmental resection of lung

Radical segmentectomy of lung

**Includes:** dissection of thoracic structures

Code also when performed:

• excision of lymph nodes (96244, 96245 [**806**])

90170-00 Lung volume reduction surgery

## 552 Lobectomy of lung

38438-01 Lobectomy of lung

**Bilobectomy** 

Pneumonectomy:

- · completion, following previous removal of portion of lung
- partial

38441-00 Radical lobectomy

Radical: partial pneumonectomy

- bilobectomy
- partial pneumonectomy

Includes: dissection of thoracic structures

resection of:
• chest wall
• diaphragm
• pericardium

Code also when performed:

radical excision of lymph nodes (96245 [806])

. . .

## 554 Other excision procedures on lung or pleura

38833-01 Endoscopic pleurectomy

Thoracoscopic pleurectomy

Excludes: endoscopic decortication of lung (38421-00 [554])

radical decortication of lung (38834-00 [554])

38424-00 Pleurectomy

Excision of (lesion) (tissue) pleura

Excludes: decortication of lung (38421 [554] 38421-01 [554])

radical decortication of lung (38834-00 [554])

38424-01 Enucleation of pulmonary hydatid cyst

38421-00 Endoscopic pulmonary decortication

Thoracoscopic pulmonary decortication

96218-00 Other endoscopic excision procedures on lung

Endoscopic (thoracoscopic) excision of (lesion) (tissue) lung NEC

38421-01 Pulmonary decortication

38834-00 Radical pulmonary decortication

Radical lung preserving decortication and pleurectomy

#### **REPAIR**

. . .

Other repair procedures on lung or pleura

90171-00 Endoscopic pleurodesis

Thoracoscopic pleurodesis

Includes: insertion of intercostal catheter

38833-00 Endoscopic pleurodesis

<u>Thoracoscopic pleurodesis</u>

**Includes:** insertion of intercostal catheter

38424-02 Pleurodesis

Pleurosclerosis

Includes: insertion of intercostal catheter

## 10.2 Respiratory system interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### CHAPTER 7

## PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520–572) TRACHEA

. . .

539 Other repair procedures on trachea

. . .

41879-03 Closure of other fistula of trachea

41879-04 Repair of trachea, cervical approach

Cervical tracheoplasty

Code also when performed:

• tracheostomy (41880-00, 41881 [536])

38453-08 Repair of trachea, intrathoracic approach

Intrathoracic tracheoplasty

Includes: excision of trachea

Code also when performed:

• cardiopulmonary bypass (38600-00, 38603-00 [642])

Excludes: that for endotracheal:

- lesion (see block [537])
- stricture (see block [538])

38429-00 Repair of trachea, not elsewhere classified

Excision and repair of trachea NOS

**Tracheoplasty** 

Includes: cervical approach intrathoracic approach

Code also when performed:

- cardiopulmonary bypass (38600-00, 38603-00 [642])
- tracheostomy (41880-00, 41881 [536])
- revision of tracheostomy (41881-02 [541])

**Excludes:** that for endotracheal:

• lesion (see block [537])
• stricture (see block [538])

. . .

#### **BRONCHUS**

#### **EXAMINATION**

### 543

#### **Examination procedures on bronchus**

Includes: bronchial lavage

electromagnetic navigation fluoroscopic guidance

that using:

- fibreoptic bronchoscope
- rigid bronchoscope

Excludes: that with:

- argon plasma coagulation (lesion) (tissue):
- bronchus (96217-01 **[547]**)
- lung (90181-01 **[558]**)
- biopsy (washings for specimen collection):
  - bronchus (41898-04 **[544]**)
- lung (38418-06 **[550]**)
- destruction (lesion) (tissue):
- bronchus (96217-01 **[547]**)
- lung (90181-01 **[558]**)
- dilation (41904-00 [546])
- excision of lesion:
- bronchus (90163-01-38425-00 [545])
- lung (96218-00 **[554]**)
- insertion of bronchial device (stent) (valve) (41905-06 [546])
- removal of:
- bronchial device (stent) (valve) (41905-08 [546])
- foreign body (41895-02 [544])
- replacement of bronchial device (stent) (valve) (41905-07 [546])

. . .

## 545

#### Other excision procedures on bronchus

90163-01 Other endoscopic excision of bronchus

Bronchoscopy with excision of (lesion) (tissue) bronchus NEC

Includes: that with laser

38425-00 Other endoscopic excision of bronchus

Bronchoscopy with excision of (lesion) (tissue) bronchus NEC

Includes: that with laser

43912-02 Other open excision of bronchus

Excision of (lesion) (tissue) bronchus NEC

. . .

#### OTHER PROCEDURES

547

Other procedures on bronchus

96217-01

Endoscopic destruction procedures on bronchus

Bronchial thermoplasty

Bronchoscopy with Argon plasma coagulation (APC) to bronchus

Endoscopic destruction of (lesion) (tissue) bronchus

Excludes: endoscopic (laser) excision of (lesion) (tissue) bronchus (90163-01-38425-00 [545])

#### CHEST WALL, MEDIASTINUM AND DIAPHRAGM

Includes: thorax

#### **EXAMINATION**

559

Examination procedures on chest wall, mediastinum or diaphragm

38436-00

Thoracoscopy

**Includes:** biopsy

Excludes: endoscopic division of pleural adhesions (38436-01 [549])

that with ultrasound-guided biopsy of chest wall, mediastinum or diaphragm (38416-00 [563])

38448-01 Mediastinoscopy

#### APPLICATION, INSERTION, REMOVAL

560

Application, insertion or removal procedures on chest wall, mediastinum or diaphragm

38806-00

Insertion of intercostal catheter for drainage

Closed chest drainage

Excludes: that with:

- endoscopic [thoracoscopic]: division of pleural adhesions (38436-01 [549])
- chest drainage (38831-00 [**549**])
- division of pleural adhesions (38436-01 [549])
- incision of pleura (38831-00 **[549]**)
- exploratory thoracotomy (38418-00 [561])
- pleurodesis (90171-0038833-00, 38424-02 [556])

Removal of internal prosthesis following repair of pectus excavatum

Removal of concave bar [Nuss bar]

Diagnostic thoracentesis

38803-00 Therapeutic thoracentesis

#### **INCISION**

38849-00

38800-00



#### 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

insertion of intercostal catheter for drainage

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

• performed with any other open thoracic procedure — omit code

38448-00 Exploration of mediastinum via cervical route

Includes: biopsy

*Excludes:* that with any other procedure on the respiratory system — omit code

30320-00 Exploration of mediastinum via mediastinotomy

Includes: biopsy

Excludes: that with thymectomy (38446-0438838-01 [128])

#### **DESTRUCTION**

Destruction procedures on chest wall, mediastinum or diaphragm

38818-00 Endoscopic control of postoperative intrathoracic haemorrhage

. . .

#### **EXCISION**

563	Excision procedures on chest wall, mediastinum or diaphragm
38416-00	Endoscopic ultrasound-guided biopsy of chest wall, mediastinum or diaphragm Endobronchial ultrasound-guided transbronchial needle aspiration [EBUS-TBNA]
	Includes: fine needle aspiration or biopsy
96216-00	Percutaneous [needle] biopsy of chest wall, mediastinum or diaphragm Percutaneous fine needle: • aspiration of chest wall, mediastinum or diaphragm • biopsy of chest wall, mediastinum or diaphragm
43987-00	Excision of intrathoracic neuroblastoma
38838-02	Endoscopic removal of lesion of mediastinum

38446-02 Removal of lesion of mediastinum via thoracotomy

38838-03 Removal of lesion of mediastinum via thoracotomy

38446-03 Removal of lesion of mediastinum via sternotomy

38838-04 Removal of lesion of mediastinum via sternotomy

#### **REPAIR**

564	Repair of pectus carinatum or excavatum
38457-00	Repair of pectus carinatum Radical correction of pectus carinatum
38457-01	Repair of pectus excavatum Radical correction of pectus excavatum
38458-00	Repair of pectus excavatum with implantation of subcutaneous prosthesis
	Includes: insertion of concave bar [Nuss bar]

...

#### **CHAPTER 16**

## DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718) SKIN AND SUBCUTANEOUS TISSUE

#### APPLICATION, INSERTION, REMOVAL

90606-01 Removal of other soft tissue implant

Removal of implant from:

- buttock
- chest (pectorals)
- limb:
- lower (calf)
- upper (bicep) (tricep)

Excludes: removal of internal prosthesis following repair of pectus excavatum (38849-00 [560])

that from:

- abdominal wall (prosthetic mesh) (35585 [989])
- breast (45548 [1758])
- eye (42518-04 **[164]**, 42644-04 **[167]**, 42704-00 **[194]**, 42812-00 **[209]**, 90606-02 **[221]**)
- face (90606-00 [1661])

. . .

#### **CHAPTER 20**

## IMAGING SERVICES (BLOCKS 1940–2016) ULTRASOUND SCAN

▼0042

Echography Ultrasonography

. . .

#### 1949

#### Other ultrasound

30688-00

Endoscopic ultrasound

Endobronchial ultrasound ([EBUS])
Ultrasound in conjunction with endoscopy

Code also:

• endoscopic procedure(s) — see Alphabetic Index

Excludes: endobronchial ultrasound-guided:

- biopsy of chest wall, mediastinum or diaphragm (38416-00 [563])
- transbronchial needle aspiration [EBUS-TBNA] (38416-00 [563])

96272-00 Intravascular ultrasound [IVUS]

▼0042

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- - dental procedure 97399-00 [461]

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- - - gynaecological surgery 35759-00 [1299]
- - - intrathoracic surgery 38656-01 [562]
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--- extremity 33848-00 [746]
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- - - - intra-abdominal 33845-00 [746]
- - - - - with any other vascular procedure — omit code
- - - - intrathoracic 38656-01 [562]
---- endoscopic 38818-00
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- - intra-abdominal — see also Packing/intra-abdominal
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- - - thoracoscopy 38436-00 [559]
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- - - mediastinoscopy 38448-01 [559]
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- - - mediastinotomy 30320-00 [561]
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- - antegrade/retrograde administration of blood or crystalloids to effect cardioplegia 38588-00 [642]
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- - - following previous open biopsy or excision 31515-00 [1744]
- - bronchus (endoscopic) 90163-0138425-00 [545]
- - - open 43912-02 [545]
- - cartilage NEC 90574-00 [1561]
- - mediastinum, via
--- endoscopy 38838-02 [563]
- - - sternotomy 38446-0338838-04 [563]
--- thoracotomy <u>38446-0238838-03</u> [563]
- - pleura 38424-00 [554]
- - - endoscopic 38833-01 [554]
- - - open 38424-00 [554]
- - pouch of Douglas (laparoscopic) (rectouterine) 35637-10 [1299]
- - - via laparotomy 35713-14 [1299]
- pleura 38424-00 [554]
```

```
- - endoscopic 38833-01 [554]
- - open 38424-00 [554]
- plica (arthroscopic) 49557-02 [1503]
- teratoma
- - intra-abdominal (congenital) 90327-00 [989]
- - mediastinum, via — see Excision/lesion(s)/mediastinum, via
--- sternotomy 38446-03 [563]
--- thoracotomy 38446 02 [563]
- - sacrococcygeal
- trachea
- - with repair NEC , intrathoracic 38453 08 38429-00 [539]
- - stricture (endotracheal)
--- anastomosis 38453-04 [538]
---- with resection by laser 38453-05 [538]
--- repair by graft 38453-06 [538]
---- with resection by laser 38453-07 [538]
- trichoepithelioma, face or neck
- - by laser 30190-00 [1612]

    tumour — see also Excision/lesion(s)

...
- - mediastinum, via
--- endoscopy 38838-02 [563]
- - - sternotomy 38446 0338838-04 [563]
- - - thoracotomy 38446-0238838-03 [563]
- - teratoma
- - - intra-abdominal (congenital) 90327-00 [989]
- - - mediastinum, via ___ see Excision/lesion(s)/mediastinum, via
   -- sternotomy 38446-03 [563]
---- thoracotomy 38446-02 [563]
- - - sacrococcygeal
- - - - posterior approach 43876-00 [1385]
---- with abdominal approach 43879-00 [1385]
Incision
- pituitary gland 90044-00 [126]
- pleura (for empyema) (with resection of rib) 38415-00 [549]
- - endoscopic 38831-00 [549]
- - - with division of pleural adhesions 38436-01 [549]
- prostate 37212-02 [1161]
- - with drainage of abscess 37212-01 [1161]
Insertion
- catheter
- - chest (closed) (percutaneous) 38806-00 [560]
  - closed (endoscopic) 38806-00 [560]
    - with division of pleural adhesions 38436-01 [549]
- - - endoscopic 38831-00 [549]
- - - - with division of pleural adhesions 38436-01 [549]
- - - open 38415-00 [549]
-- common bile duct(s) (open) (with T- or Y- tube insertion) 30454-00 [963]
- - - endoscopic (closed) 30452-01 [958]
- - intercostal (closed) (percutaneous) 38806-00 [560]
--- closed (endescopic) (for drainage) 38806-00 [560]
    - with division of pleural adhesions 38436-01 [549]
- - - endoscopic 38831-00 [549]
- - - - with division of pleural adhesions 38436-01 [549]
--- open 38415-00 [549]
```

```
- drain
- - chest (closed) (percutaneous) 38806-00 [560]
    closed (endoscopic) 38806-00 [560]
     with division of pleural adhesions 38436 01 [549]
- - - endoscopic 38831-00 [549]
- - - - with division of pleural adhesions 38436-01 [549]
- - - open 38415-00 [549]
- - intercostal (closed) (percutaneous) 38806-00 [560]
         d (endoscopic) 38806-00 [560]
    - with division of pleural adhesions 38436-01 [549]
- - - endoscopic 38831-00 [549]
- - - - with division of pleural adhesions 38436-01 [549]
--- open 38415-00 [549]
- - lumbar (cerebrospinal fluid) (external) 40018-00 [41]
0
Ostectomy NEC 90572-00 [1563]
- rib
- - partial 48406-11 [1375]
     -drainage of pleura (empyema) 38415-00 [549]
- - - - internal fixation 48409-11 [1375]
- - - 1st rib, for decompression of thoracic outlet 34136-00 [1375]
- - total 48406-12 [1375]
---- drainage of pleura (empyema) 38415-00 [549]
- - - - internal fixation 48409-12 [1375]
- - - cervical, for decompression of thoracic outlet 34139-00 [1375]
P
Pleurectomy (open) NEC 38424-00 [554]
- with decortication of lung — see Decortication/lung
- endoscopic 38833-01 [554]
Pleurodesis (chemical) (talc) 38424-02 [556]
- endoscopic (thoracoscopic) 90171-0038833-00 [556]
Pneumonectomy (total removal of lung) 38438-02 [553]
- radical (with dissection of mediastinal nodes) 38441-01 [553]
- - partial 38441-00 [552]
R
Removal - see also Excision
- cochlear prosthetic device (multiple channel) (single channel) (total) (unilateral) 41617-04 [334]
- - bilateral 41617-06 [334]
- - partial, for adjustment 41617-03 [334]
- concave bar (Nuss bar) 38849-00 [560]
- concha bullosa (bulla ethmoidalis) — see Ethmoidectomy
- implant
- - chest (pectoral) 90606-01 [1661]
- - - following repair of pectus excavatum 38849-00 [560]
- - chin (mandible) 90606-00 [1661]
- - pectoral 90606-01 [1661]
- - - following repair of pectus excavatum 38849-00 [560]
- - sealed radioactive source (brachytherapy implant) 15339-00 [1793]
```

```
- prosthesis, prosthetic device — see also Removal/by type of device
- - chest (pectoral) 90606-01 [1661]
--- following repair of pectus excavatum 38849-00 [560]
- - chin (mandible) 90606-00 [1661]
- - pectoral 90606-01 [1661]
- - - following repair of pectus excavatum 38849-00 [560]
- - pouch, for gastroschisis 43867-01 [1003]
Repair
- trachea (cervical) (intrathoracic) NEC 41879 0438429-00 [539]
- - - construction of artificial larynx 41879-06 [540]
-- intrathoracic
    with resection 38453-08 [539]
- tracheo-oesophageal fistula 43900-00 [539]
- - with atresia — see Closure/fistula/tracheo-oesophageal/for oesophageal atresia
Resection — see also Excision
- bone — see also Resection/lesion/bone
- rib ...
- - with
                  <del>leura (empyema) 38415-00 [549]</del>
- - - internal fixation 48409-12 [1375]
- tooth root, per root 97241-00 [456]

    trachea

- - with repair, intrathoracic 38453-08 NEC 38429-00 [539]
- - stricture (endotracheal)
S
Segmentectomy
- lung 38438-00 [551]
- - radical 38823-00 [551]
Thoracoscopy 38436-00 [559]
- with
- - biopsy 38436-00 [559]
- - - and division of adhesions 38436-01 [549]
- - - pericardium 38436-02 [645]
- - control of postoperative haemorrhage 38818-00 [562]
- - creation of pericardial window 38450-01 [643]
--- with partial pericardiectomy 38447-01 [646]
- - decortication, pulmonary 38421-00 [554]
- - division of pleural adhesions (with biopsy) 38436-01 [549]
- - drainage 38831-00 [549]
- - excision of pericardial lesion (cyst) (tumour) 38456-06 [646]
- - incision of pleura 38831-00 [549]
- - insertion of intercostal catheter 38831-00 [549]
-- pleurectomy 38833-01 [554]
-- pleurodesis <del>90171-00</del>38833-00 [556]
- - resection of lung (wedge) 90169-00 [551]
Thoracotomy
- exploratory (with biopsy) 38418-00 [561]
- - performed with any other open thoracic procedure — omit code
- reopening of site, postoperative 38656-01 [562]
```

#### **Threading**

...

Tracheoplasty (cervical) (intrathoracic) 38429-00 41879-04-[539]

- with construction of artificial larynx 41879-06 [540]
- -- construction of artificial larynx 41879-06 [540]
- -intrathoracic
- -- with resection 38453-08 [539]

Tracheoscopy — see also Laryngoscopy

- through artificial stoma (with biopsy) 41764-04 [532]

#### U

**Ultrasound** (diagnostic) (scan) 90908-00 [1950]

- endobronchial 30688-00 [1949]
- - with biopsy of chest wall, mediastinum or diaphragm 38416-00 [563]
- endoscopic 30688-00 [1949]

### 10.3 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 10**

## DISEASES OF THE RESPIRATORY SYSTEM (J00-J99)

J40

Bronchitis, not specified as acute or chronic

Bronchitis:

- catarrhal
- NOS
- with tracheitis NOS

Tracheobronchitis NOS

Vote: B

Bronchitis not specified as acute or chronic in those under 15 years of age can be assumed to be of acute

nature and should be classified to J20.-.

Excludes: bronchitis:

- allergic NOS (J45.0)
  asthmatic NOS (J45.9)
  ashamical (asyta) (J68.0)
- chemical (acute) (J68.0)
- NOS (not specified as acute or chronic) in those under 15 years of age (J20.-)

#### **ACHI Tabular List**

#### **CHAPTER 7**

## PROCEDURES ON RESPIRATORY SYSTEM (BLOCKS 520-572)

• • • •



**Examination procedures on bronchus** 

Includes: bronchial lavage

electromagnetic navigation fluoroscopic guidance

that using:

- fibreoptic bronchoscope
- rigid bronchoscope

Excludes: that with:

- argon plasma coagulation (lesion) (tissue):
- bronchus (96217-01 [547])
- lung (90181-01 **[558]**)
- biopsy (washings for specimen collection):
  - bronchus (41898-04 [544])
- lung (38418-06 **[550]**)
- destruction (lesion) (tissue):
- bronchus (96217-01 [547])
- lung (90181-01 [558])
- dilation (41904-00 [546])
- excision of lesion:
- bronchus (90163-01 [545])
- lung (96218-00 [554])
- insertion of bronchial device (stent) (valve) (41905-06 [546])
- removal of:
- bronchial device (stent) (valve) (41905-08 **[546]**)
- foreign body (41895-02 [544])
- replacement of bronchial device (stent) (valve) (41905-07 [546])

• • •

#### 547

#### Other procedures on bronchus

96217-01 Endoscopic destruction procedures on bronchus

Bronchial thermoplasty

Bronchoscopy with Argon plasma coagulation (APC) to bronchus

Endoscopic (bronchoscopy with) destruction of (lesion) (tissue) bronchus

Includes: coagulation (Argon plasma [APC])

Excludes: endoscopic (laser) excision of (lesion) (tissue) bronchus (90163-01 [545])

•••

#### 558

#### Other procedures on lung or pleura

90181-01 Endoscopic destruction procedures on lung

Bronchoscopy with Argon plasma coagulation (APC) to lung

Endoscopic (bronchoscopy with) destruction of (lesion) (tissue) lung

Includes: coagulation (Argon plasma [APC])

## **ACHI Alphabetic Index**

#### В

**Bronchoscopy** (electromagnetic navigation) (with bronchial lavage) (with fluoroscopic guidance) 41889-05 **[543]** 

- -- Argon plasma coagulation -- see Coagulation, electrocoagulation/by site
- - biopsy (brush) (needle) (with brushing(s)) (with washing(s) for specimen collection) see Biopsy/by site
- - broncho-alveolar lavage (BAL) 41898-02 [544]
- - coagulation see Coagulation/by site
- - destruction see Destruction/by site

. . .

## 10.4 Revised ACS Chapter 10

Application of the ACS template led to the refinement of ACS 1008 *Chronic obstructive pulmonary disease (COPD)* with the removal of the diagram and relocation of some content to the ICD-10-AM Tabular List and Alphabetic Index.

#### ICD-10-AM Tabular List

#### **CHAPTER 10**

#### **DISEASES OF THE RESPIRATORY SYSTEM (J00–J99)**

. . .

#### J12

#### Viral pneumonia, not elsewhere classified

Includes: bronchopneumonia due to viruses other than influenza viruses

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: congenital rubella pneumonitis (P35.0)

pneumonia:

- aspiration (due to):
  - neonatal (P24.9)
  - NOS (J69.0)
  - solids and liquids (J69.-)
- in influenza (J09, J10.0, J11.0)
- interstitial NOS (J84.9)
- lipid (J69.1)
- viral, congenital (P23.0)
- J12.0 Adenoviral pneumonia
- J12.1 Respiratory syncytial virus pneumonia
- J12.2 Parainfluenza virus pneumonia
- J12.3 Human metapneumovirus pneumonia
- J12.8 Other viral pneumonia

Use additional code (B97.-) to identify viral agent.

Use additional code (<u>U07.12</u> <del>U07.1-</del> U07.2) to identify coronavirus disease 2019 [COVID-19].

J12.9 Viral pneumonia, unspecified

#### J13

#### Pneumonia due to Streptococcus pneumoniae

Bronchopneumonia due to S. pneumoniae

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: congenital pneumonia due to *S. pneumoniae* (P23.6) pneumonia due to other streptococci (J15.3–J15.4)

#### J14

#### Pneumonia due to Haemophilus influenzae

Bronchopneumonia due to H. influenzae

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: congenital pneumonia due to H. influenzae (P23.6)

#### J15

#### Bacterial pneumonia, not elsewhere classified

Includes: bronchopneumonia due to bacteria NEC

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: chlamydial pneumonia (J16.0)

congenital pneumonia (P23.-) Legionnaires' disease (A48.1)

pneumonia due to Haemophilus influenzae (J14)

J15.0 Pneumonia due to Klebsiella pneumoniae

J15.1 Pneumonia due to Pseudomonas

...

#### J16 Pneumonia due to other infectious organisms, not elsewhere classified

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: ornithosis (A70)

pneumonia:

• congenital (P23.-)

• NOS (J18.9)

J16.0 Chlamydial pneumonia

... J16.8

Pneumonia due to other specified infectious organisms

J17\* Pneumonia in diseases classified elsewhere

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

•••

## J18

#### Pneumonia, organism unspecified

**T** 1004

Use additional code (J44.0) to identify presence of chronic obstructive pulmonary disease [COPD].

Excludes: abscess of lung with pneumonia (J85.1)

drug-induced interstitial pneumonia (J70.2-J70.4)

pneumonia:

- aspiration (due to):
- neonatal (P24.9)
- NOS (J69.0)
- solids and liquids (J69.-)
- congenital (P23.9)
- interstitial:
  - drug-induced (J70.2–J70.4)
  - NOS (J84.9)
- lipid (J69.1)
- usual interstitial (J84.1)

pneumonitis, due to external agents (J67-J70)

• •

### J43 Emphysema

Excludes: emphysema:

- compensatory (J98.3)
- due to inhalation of chemicals, gases, fumes or vapours (J68.4)
- following a procedure (subcutaneous) (T81.84)
- interstitial:
  - neonatal (P25.0)
  - NOS (J98.2)
- mediastinal (J98.2)
- postprocedural (subcutaneous) (T81.84)
- surgical (subcutaneous) (T81.84)
- traumatic subcutaneous (T79.7)
- with chronic: (obstructive) bronchitis (J44. )
  - bronchitis (obstructive) (J44.-)
- obstructive pulmonary disease [COPD] (J44.-)

emphysematous (obstructive) bronchitis (J44.-)

J43.0 MacLeod's syndrome

Unilateral:

- · emphysema
- · transparency of lung

J44

#### Other chronic obstructive pulmonary disease [COPD]

▼ 1008

Chronic obstructive pulmonary disease [COPD] with:

- asthma
  - emphysema

Includes: chronic:

- asthmatic bronchitis (obstructive)
- bronchitis with:
- airways obstruction
- emphysema
- asthmatic (obstructive)
- <del>emphys</del>
- with
  - airways obstruction
  - emphysema
- emphysematous bronchitis
- obstructive:
  - · asthma
  - · bronchitis
  - · tracheobronchitis

Excludes: asthma (chronic) NEC (J45.-)

- NOS (J45.9)
- without mention of obstruction (J45.-)

asthmatic bronchitis NOS (J45.9)

bronchiectasis (J47)

chronic:

- bronchitis:
- childhood (J41.2)
- mixed simple and mucopurulent (J41.8)
- mucopurulent (J41.1)
- NOS (J42)
- simple (J41.0)
- tracheitis (J42)
- tracheobronchitis (J42) emphysema (J43.-)

lung diseases due to external agents (J60-J70)

protracted bacterial bronchitis (J41.2)

J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection

Chest infection NOS exacerbating COPD

Chronic obstructive pulmonary disease with infective exacerbation NOS

*Use additional code to identify pneumonia* — see Alphabetic Index: Pneumonia.

## **ACHI Alphabetic Index**

#### Ventilation

- invasive see Ventilation/mechanical, continuous
- mechanical, continuous
- - continuous
- - combined with noninvasive ventilatory support, for neonates see block [571]
- - endotracheal respiratory assistance see block [569]
- - intermittent mandatory ventilation (IMV) see block [569]
   - positive end expiratory pressure (PEEP) see block [569]

```
--- pressure support ventilation (PSV) — see block [569]
-- controlled — see block [569]
-- combined with noninvasive ventilatory support, for neonates — see block [571]
-- endotracheal respiratory assistance — see block [569]
...
- nonintubated — see block [570]
...
```

## 11. Digestive system

## 11.1 Oesophagectomy

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 10**

## PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011) OESOPHAGUS

#### **EXCISION**

• • •



#### Oesophagectomy by abdominal and thoracic mobilisation

Orringer (trans-hiatal) oesophagectomy

Code also when performed:

- microvascular anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])

Excludes: cervical oesophagectomy (30294-00 [861])

that by mobilisation, abdominal and:

- cervical (30541 [859])

\* transthoracic (30535-00, 30536 [860])

#### 30750-00 Oesophagectomy with colon or jejunal interposition graft

Includes: anastomosis:

• chest

• gastrointestinal

• neck

free flap (jejunal) (large intestine) (radial forearm [RFFF])

Excludes: replacement of oesophagus using intestine, paediatric (43903-00 [866])

#### 30753-00 Oesophagectomy, not elsewhere classified

Includes: anastomosis:

• chest

• neck

gastric reconstruction (by):

• abdominal mobilisation

thoracotomy

thoracoscopy

Code also when performed:

• reconstruction of oesophagus (90954-00 [868])

## 30545-00—Oesophagectomy by abdominal and thoracic mobilisation with thoracic anastomosis, large intestine interposition and anastomosis

30545-01 Oesophagectomy by abdominal and thoracic mobilisation with thoracic anastomosis using Roux-en-Y reconstruction

- 30550-00 Oesophagectomy by abdominal and thoracic mobilisation with cervical anastomosis, large intestine interposition and anastomosis
- 30550-01 Oesophagectomy by abdominal and thoracic mobilisation with cervical anastomosis using Roux-en-Y reconstruction

### Oesophagectomy by abdominal and cervical mobilisation

Includes: anterior or posterior mediastinal placement

Excludes: that by mobilisation, abdominal and:

- \* thoracic (30545, 30550 [858])
- transthoracic (30535-00, 30536 [860])
- 30541-00 Trans-hiatal oesophagectomy by abdominal and cervical mobilisation, with oesophagogastric anastomosis
- 30541-01 Trans-hiatal oesophagectomy by abdominal and cervical mobilisation, with oesophagojejunal anastomosis
- Oesophagectomy by abdominal and transthoracic mobilisation

Excludes: that by mobilisation, abdominal and:

- cervical (30541 [859])
- thoracic (30545, 30550 [858])
- 30535-00 Oesophagectomy by abdominal and transthoracic mobilisation, with thoracic oesophagogastric anastomosis
- 30536-00 Oesophagectomy by abdominal and transthoracic mobilisation, with cervical oesophagogastric anastomosis
- 30536-01 Oesophagectomy by abdominal and transtheracic mobilisation, with cervical oesophagostomy

. . .

#### RECONSTRUCTION

#### 868 Reconstruction procedures on oesophagus

Code also when performed:

- microsurgical anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])

Excludes: resection and replacement of oesophagus using intestine, paediatric (43903-00 [866])

- 30554-00 Oesophagectomy with reconstruction by free jejunal flap
- 30554-01 Oesophagectomy with reconstruction by other free flap

Oesophagectomy with reconstruction by free flap:

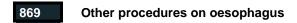
- large intestine
- \* radial forearm [RFFF]
- 90954-00 Other rReconstruction of oesophagus

Code also when performed:

- flap (see blocks [1671] to [1674])
- microsurgical anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])

Excludes: resection and replacement of oesophagus using intestine, paediatric (43903-00 [866])

#### **OTHER PROCEDURES**



38456-20 Other intrathoracic procedures on oesophagus

38864-10 Other intrathoracic procedures on oesophagus

90301-00 Other procedures on oesophagus

## **ACHI Alphabetic Index**

#### A

**Anastomosis** 

- - oesophagus

- - - intrathoracic NEC 38864-10 [869]

```
- oesophagogastric with gastrectomy, partial proximal 30518-02 [875]
    gastrectomy, partial proximal 30518-02 [875]
   - oesophagectomy, transhiatal 30541-00 [859]
  cervical, with oesophagectomy 30536-00 [860]
  - trans-hiatal 30541-00 [859]
  thoracic, with oesophagectomy 30535-00 [860]
   - trans-hiatal 30541-00 [859]
 <del>oesophagojejunal</del>
  with oesophagectomy, trans-hiatal 30541-01 [859]
- oesophagus
- - for atresia — see Anastomosis/for/atresia
- - with oesophagectomy, paediatric
- - - partial 43906-00 [857]
- - - total 43906-01 [857]
-- cervical, with oesophagectomy
--- and large intestine interposition 30550-00 [858]
  - using Roux en Y reconstruction 30550 01 [858]
  thoracic, with oesophagectomy
   and large intestine interposition 30545-00 [858]
--- using Roux-en-Y reconstruction 30545-01 [858]
- stomach
- - to small intestine (duodenum) (jejunum) 30515-00 [881]
- thoracic
- - with oesophagectomy
                                osis (colon) 30545-00 [858]
  - using Roux-en-Y reconstruction 30545-01 [858]
- trigone
F
Flap (repair)
- for
- - intestine
- - - for reconstruction of oesophagus 30753-00 [858]
--- jejunum, paediatric 43903-00 [866] (adult) 30554-00 [868]
        aediatric 43903-00 [866]
---- large intestine, paediatric 43903-00 [866] (adult) 30554-01 [868]
     - paediatric 43903-00 [866]
- - noninnervated 45562-00 [1674]
Formation (of)
- oesophagostomy (thoracic) 30293-00 [867]
- - cervical 30293-00 [867]
  - with oesophagectomy 30536-01 [860]
- pancreaticojejunostomy 30589-00 [980]
Intervention
Note: Terms listed under the lead term 'Intervention' are mainly split by anatomical site or condition; Intervention/for specified
      condition and Intervention/specified site.
     Where an eponym is used to describe an intervention, or a type of intervention is specified — see specified intervention(s)
      performed or the lead term Procedure.
- for specified condition
- specified site (anatomical)
```

#### 0

```
Oesophagectomy (Orringer) (trans-hiatal) 30753-00 [858]
- - interposition graft (colon) (jejunum) 30750-00 [858]
- - reconstruction by free flap
- - - jejunum, paediatric 43903-00 [866]
- - - large intestine, paediatric 43903-00 [866]
-- abdominal and
   cervical mobilisation
    - with anastomosis
   -- oesophagogastric 30541-00 [859]
    <del>- - oesophagojejunal 30541-01 [859]</del>
   - thoracic mobilisation
   - with anastomosis
    - - cervical
     -- and large intestine interposition (colon) 30550-00 [858]
      - using Roux-en-Y reconstruction 30550-01 [858]
       and large intestine interposition (colon) 30545-00 [858]
     -- using Roux-en-Y reconstruction 30545-01 [858]
    transthoracic mobilisation
   - with
    -- oesophagogastric anastomosis (cervical) 30536-00 [860]
   --- cervical 30536-00 [860]
     -- thoracic 30535-00 [860]
      oesophagostomy, cervical 30536-01 [860]
 with reconstruction by free flap
  - <del>jejunum (adult) 30554-00 [868]</del>
  - paediatric 43903-00 [866]
  large intestine (adult) 30554-01 [868]
    paediatric 43903-00 [866]
- cervical 30294-00 [861]

    paediatric

- - with replacement of oesophagus using intestine 43903-00 [866]
- - partial (with anastomosis) 43906-00 [857]
- - total (with anastomosis) 43906-01 [857]
- trans-hiatal 30753-00 [858]
- - with interposition graft (colon) (jejunum) 30750-00 [858]
 - by abdominal and cervical mobilisation
    with anastomosis
  -- oesophagogastric 30541-00 [859]
     oesophagojejunal 30541-01 [859]
Oesophagogastrectomy — see Oesophagectomy AND Gastrectomy/total
Oesophagoscopy (flexible) 30473-03 [850]
- with
- - control of gastrointestinal haemorrhage 90296-0030761-00 [887]
- - - by administration of agent 30478-07 [870]
- - repair of Mallory-Weiss laceration 90296-0030761-00 [887]
- - resection of mucosa of oesophagus 90297-00 [861]
Oesophagostomy (cervical) (thoracic) 30293-00 [867]
- with oesophagectomy 30536-01 [860]
Oesophagotomy 30293-02 [855]
R
Reconstruction
- oesophagus NEC 90954-00 [868]
- - by free flap
- - - jejunum, paediatric 43903-00 [866] (adult) 30554-00 [868]
---- paediatric 43903-00 [866]
- - - large intestine, paediatric 43903-00 [866] (adult) 30554-01 [868]
    - paediatric 43903-00 [866]
```

```
- orbital cavity (floor) (wall) 45590-00 [1716]
- Roux-en-Y
- - 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]
     and anastomosis
    - - cervical 30550-01 [858]
 --- thoracic 30545-01 [858]
- skull — see Cranioplasty
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

--- and anastomosis (cervical) 30550-01 [858]
  -- thoracic 30545-01 [858]
```

### 11.2 Stomach interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

Gastrotomy

- cholecystojejunostomy 30460-08 [970]

#### **CHAPTER 10**

#### PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011)

#### **STOMACH**

#### **INCISION**

871

V	ouen oronny
30375-06	Gastrotomy
	Includes: division of adhesions
30375-15	Gastrotomy with removal of foreign body
872	Vagotomy
	Code also when performed: • control of bleeding peptic ulcer (30505 0030761-01 [874], 30509 0030761-02 [880])
30496-00	Selective vagotomy Truncal vagotomy
	Code also when performed: • local excision of lesion of stomach (30520-00 [880])

Excludes: that with:

- gastro-enterostomy (30496-02 **[884]**) • partial gastrectomy and anastomosis:
- partial gastrectory and anastomosis.
  gastroduodenal (30497-00 [877], 30503-03 [878])
- gastroduodenal (30497-00 [877], 30503-03 [878])
   gastrojejunal (30497-01 [877], 30503-04 [878])
- Roux-en-Y reconstruction (30497-02 [877], 30503-05 [878])

30499-00 Highly selective vagotomy

Excludes: that with:

dilation of pylorus (30502-00 [884])duodenoplasty (30500-00 [884])

٠.

#### **DESTRUCTION**

874 Destruction procedures on stomach

30505-00 Control of bleeding peptic ulcer

Includes: wedge resection

Code also when performed:

vagotomy

- highly selective (30499-00 [872], 30500-00, 30502-00 [884])
- \* selective [truncal] (30496-00 [872], 30496 [884])

Excludes: that by gastric resection (30509-00 [880])

30761-01 Control of bleeding peptic ulcer

<u>Includes:</u> suture at site of bleeding wedge resection

Code also when performed:

- gastro-enterostomy (30515-00 [881])
- vagotomy:
- highly selective (30499-00 [872], 30500-00, 30502-00 [884])
- selective [truncal] (30496-00 [872], 30496 [884])

Excludes: that by gastric resection (30761-02 [880])

30476-03 Endoscopic banding of gastric varices

#### **EXCISION**

. . .

#### 877

#### Selective vagotomy with partial gastrectomy

Truncal vagotomy with partial gastrectomy

Code also when performed:

• control of bleeding peptic ulcer (30505-0030761-01 [874], 30509-0030761-02 [880])

Excludes: that following previous procedure for peptic ulcer disease (30503 [878])

30497-00 Selective vagotomy with partial gastrectomy and gastroduodenal anastomosis

30497-01 Selective vagotomy with partial gastrectomy and gastrojejunal anastomosis

30497-02 Selective vagotomy with partial gastrectomy and Roux-en-Y reconstruction

. . .

## 879

#### Other gastrectomy

Includes: anastomosis splenectomy

. . .

30521-00 Total gastrectomy

Code also when performed:

• oesophagectomy by abdominal and transthoracic mobilisation (see block [860858])

30524-00 Radical gastrectomy

Includes: distal pancreatectomy

extended node dissection

Excludes: subtotal radical gastrectomy (30523-00 [879])

880

Other excision procedures on stomach

30075-12 Biopsy of stomach

30520-00 Local excision of lesion of stomach

Excludes: endoscopic polypectomy of stomach (30478-04, 30478-18 [1008])

that with partial gastrectomy with anastomosis (30518 [875])

90297-01 Endoscopic mucosal resection of stomach

30509-00 Control of bleeding peptic ulcer by gastric resection

Excludes: that by wedge resection (30505-00 [874])

30761-02 Control of bleeding peptic ulcer by gastric resection

Code also when performed:

• gastro-enterostomy (30515-00 [881])

vagotomy:

• highly selective (30499-00 [872], 30500-00, 30502-00 [884])

• selective [truncal] (30496-00 [872], 30496 [884])

Excludes: that by wedge resection (30761-01 [874])

#### **REPAIR**

#### 881

#### Gastrostomy, gastro-enterostomy or gastro-gastrostomy

30722-00 Laparoscopic gastrostomy

Includes: passage of indwelling transanastomotic tube

30375-07 Gastrostomy

**Includes:** division of adhesions

90302-00 Gastrostomy with passage of indwelling transanastomotic tube

30515-00 Gastro-enterostomy

**Includes:** division of adhesions

gastroduodenostomy

Code also when performed:

• gastric bypass for obesity (30512-00, 30512-03 [889])

Excludes: that with:

• pancreaticoduodenectomy (30584-00 [978])

• selective [truncal] vagotomy (30496-02 [884])

. . .

#### 884

#### Other vagotomy with repair

Code also when performed:

• control of bleeding peptic ulcer (30505-0030761-01 [874], 30509-0030761-02 [880])

..

#### 886

#### **Fundoplasty**

**Note:** Performed for gastro-oesophageal reflux.

Code also when performed:

• gastrostomy (30375-07, 30722-00 [881])

30530-00 Fundoplasty with cardiopexy

Includes: division of adhesions

. . .

## 887

#### Other repair procedures on stomach

90296-00 Endoscopic control of upper gastrointestinal bleeding

Includes: clipping

**Note:** Performed for:

• bleeding peptic ulcer (duodenal) (gastric)

Mallory-Weiss laceration

Excludes: by administration of agent into lesion (30478-07 [870])

30761-00 Endoscopic control of upper gastrointestinal bleeding

Includes: clipping

suture

**Note:** Performed for:

• bleeding peptic ulcer (duodenal) (gastric)

• Mallory-Weiss laceration.

Code also when performed:

• gastro-enterostomy (30515-00 [881])

• vagotomy:

• highly selective (30499-00 [872], 30500-00, 30502-00 [884])

• selective [truncal] (30496-00 [872], 30496 [884])

Excludes: by administration of agent into lesion (30478-07 [870])

90342-02 Suture of laceration of stomach

Gastrorrhaphy

Note: Performed for Mallory-Weiss laceration

30761-03 Suture of laceration of stomach

**Gastrorrhaphy** 

**Note:** Performed for:

• bleeding peptic ulcer

• Mallory-Weiss laceration.

Code also when performed:

• gastro-enterostomy (30515-00 [881])

vagotomy:

• highly selective (30499-00 [872], 30500-00, 30502-00 [884])

• selective [truncal] (30496-00 [872], 30496 [884])

**Excludes:** that by endoscopy (30761-00 [887])

```
30375-10 Suture of perforated ulcer
             Includes: division of adhesions
             Note:
                        Performed for perforated peptic ulcer (duodenal) (gastric) (with diverticulum).
90339-00
            Closure of gastrostomy
             Reduction of gastric volvulus
30375-12
             Includes: division of adhesions
90303-00
            Repair of gastric duplication
             Excision of gastric duplication cyst
             Repair of pyloric duplication
90304-00 Other repair of stomach
ACHI Alphabetic Index
A
Arrest (of)
- haemorrhage
- - gastrointestinal (upper)
- - - by transcatheter embolisation 35321-05 [768]
- - - endoscopic <del>90296-00</del>30761-00 [887]
---- by administration of agent 30478-07 [870]
- - peptic ulcer (wedge resection) 30505-0030761-01 [874]
- - - by gastric resection 30761-02 [880]
    - gastric resection 30509-00 [880]
     wedge resection 30505-00 [874]
- - - endoscopic <del>90296-00</del>30761-00 [887]
C
Clipping (of)
- for control of upper gastrointestinal bleeding 90296-0030761-00 [887]
- Mallory-Weiss laceration 90342-0230761-03 [887]
- - endoscopic <del>90296-00</del>30761-00 [887]
- peptic ulcer, endoscopic (duodenal) (gastric) 90296-0030761-00 [887]
Closure (of)
- gastro-enterostomy 90304-00 [887]
D
Duodenoscopy 30473-00 [1005]
- with
- - control of upper gastrointestinal haemorrhage 90296-0030761-00 [887]
- - - by administration of agent 30478-07 [870]
- - repair of Mallory-Weiss laceration 90296-0030761-00 [887]
Ε
Excision — see also Removal
- lesion(s) — see also Excision/tumour AND Excision/cyst AND Excision/polyp
```

```
- - gastric (local) (wedge) 30520-00 [880]
<u>- - - polyp</u>
---- with panendoscopy (to duodenum) 30478-04 [1008]
---- to ileum (beyond duodenum) 30478-18 [1008]
- - hand (wrist) 90574-00 [1561]
- - stomach (local) (wedge) 30520-00 [880]
---- with panendoscopy (to duodenum) 30478-04 [1008]
---- to ileum (beyond duodenum) 30478-18 [1008]
- - tendon NEC (see also Excision/tumour/soft tissue) 31350-00 [1566]
- tumour — see also Excision/lesion(s)
- ulcer (skin) (subcutaneous tissue) 31205-01 [1630]
- - duodenum, for control of bleeding (wedge resection) 30761-01 [874]
- - - by gastric resection (other than wedge resection) 30509-0030761-02 [880]
         ge 30505-00 [874]
- - stomach, for control of bleeding (wedge resection) 30761-01 [874]
- - - by gastric resection (other than wedge resection) 30509-0030761-02 [880]
   - wedge 30505-00 [874]
- umbilicus (complete) (partial) 43948-02 [989]
F
Formation (of)
- gastro_enterostomy 30515-00 [881]
G
Gastrectomy
- for control of bleeding peptic ulcer 30509-0030761-02 [880]
Gastro_enterostomy 30515-00 [881]
- - pancreaticoduodenectomy 30584-00 [978]
- - vagotomy (selective) (truncal) 30496-02 [884]
Gastrorrhaphy 90342 0230761-03 [887]
Gastroscopy 30473-00 [1005]
- - control of gastrointestinal haemorrhage 90296-0030761-00 [887]
- - - by administration of agent 30478-07 [870]
- - repair of Mallory-Weiss laceration 90296-0030761-00 [887]
Graft (repair)
- intestine
- - jejunum with oesophagectomy 30750-00 [858]
- - large, patch, for Kimura procedure (use
                                                            patch for treatment of Hirschsprung's disease) 43993-01 [934]
- - - with oesophagectomy 30750-00 [858]
- - - patch, for Kimura procedure (use of right colon as a patch for treatment of Hirschsprung's disease) 43993-01 [934]
- lamellar
Ileoscopy (via panendoscopy) 30473-05 [1005]
- with
- - control of gastrointestinal haemorrhage 90296-0030761-00 [887]
- - - by administration of agent 30478-07 [870]
- - repair of Mallory-Weiss laceration 90296-0030761-00 [887]
```

```
0
Oversewing
- Mallory-Weiss laceration 90342-0230761-03 [887]
- - endoscopic <del>90296-00</del>30761-00 [887]
- ulcer, perforated (duodenal) (gastric) 30375-10 [887]
- - endoscopic <del>90296-00</del>30761-00 [887]
P
Panendoscopy (double balloon) (to duodenum) 30473-00 [1005]
- with
- - control of gastrointestinal haemorrhage 90296-0030761-00 [887]
- - - by administration of agent 30478-07 [870]
- - repair of Mallory-Weiss laceration 90296-0030761-00 [887]
R
Reconstruction
- gastro-enterostomy 30517-01 [888]
Repair
- laceration — see also Suture/by site AND Repair/wound
- - stomach 90342-0230761-03 [887]
- Mallory-Weiss laceration 90342-0230761-03 [887]
- - endoscopic <del>90296-00</del>30761-00 [887]
Revision (partial) (total)
- - gastrointestinal (gastro-enterostomy) 90304-00 [887]
S
Suture (laceration)
- Mallory-Weiss laceration 90342-0230761-03 [887]
- - endoscopic <del>90296-00</del>30761-00 [887]
- stomach 90342-0230761-03 [887]
- ulcer, perforated peptic (duodenal) (gastric) 30375-10 [887]
- - endoscopic 90296-0030761-00 [887]
Vagotomy (selective) (truncal) 30496-00 [872]
- with
- - gastro_enterostomy 30496-02 [884]
```

## 11.3 Procedures for obesity

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 10**

#### PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850-1011)

#### **RECONSTRUCTION**

#### **OTHER PROCEDURES**

889

Procedures for obesity

Excludes: implantable gastric stimulation (vagal block) (39134-01 [1604])

90950-03

Endoscopic removal of device from stomach

Removal of:

- · gastric balloon or bubble
- intragastric balloon or bubble

Excludes: removal of gastric band (90942-02 31585-02 [889]) with replacement of device (90950-04 [889])

...

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 (30511-11 [889])

31585-01 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 (30511-11 [889])

90942-02 Endoscopic removal of gastric band

Endoscopic removal of gastric band:

- adjustable
- nonadjustable (fixed)

Includes: removal of (implanted) gastric band reservoir/port

Code also when performed:

• insertion of gastric band (30511-13, 30511-14 [889])

31585-02 Endoscopic removal of gastric band

Endoscopic removal of gastric band:

- adjustable
- nonadjustable (fixed)

Includes: removal of (implanted) gastric band reservoir/port

90942-00 Removal of gastric band

Removal of:

- adjustable gastric band via laparotomy
- nonadjustable (fixed) gastric band via laparotomy

Includes: removal of (implanted) gastric band reservoir/port

Excludes: that with replacement (30511-12 [889])

```
31585-00
             Removal of gastric band
             Removal of:
             • adjustable gastric band via laparotomy
             • nonadjustable (fixed) gastric band via laparotomy
             Includes: removal of (implanted) gastric band reservoir/port
             Excludes: that with replacement (30511-12 [889])
31590-00
             Revision of gastric band reservoir
             Implanted gastric band reservoir/port:

    adjustment

             • repair

    replacement

             • repositioning
             Excludes: adjustment of gastric band by addition or removal of fluid via reservoir (port) (31587-00 [1895])
31441-01
             Removal of gastric band reservoir
```

with removal of gastric band (90942-31585 [889])

### **ACHI Alphabetic Index**

Removal of implanted reservoir/port *Excludes:* replacement (31590-00 [889])

#### R

Removal — see also Excision
...
- gastric
- balloon, for obesity (bubble) (endoscopic) 90950-03 [889]
- band (adjustable) (fixed) (nonadjustable) (open) (via laparotomy) 90942-0031585-00 [889]
- - with replacement 30511-12 [889]
- - laparoscopic 30511-11 [889]
- - laparoscopic 90942-0231585-02 [889]
- - laparoscopic 90942-0131585-01 [889]
- - with replacement 30511-11 [889]
- - reservoir 31441-01 [889]

## 11.4 Roux-en-Y biliary bypass

- - - - removal of gastric band — see Removal/gastric/band

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

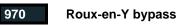
- - - - replacement 31590-00 [889]

#### **CHAPTER 10**

## PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011) GALLBLADDER AND BILIARY TRACT

...

30460-08



<del>\_\_\_\_\_</del>

Roux-en-Y intestinobiliary bypass

Cholecystojejunostomy

30466-00 Bypass of left hepatic ductal system by Roux en Y loop to peripheral ductal system

30780-00 Intrahepatic biliary bypass of left hepatic ductal system by Roux-en-Y loop to peripheral ductal system

30467-00 Bypass of right hepatic ductal system by Roux-en-Y loop to peripheral ductal system

30780-01 Intrahepatic biliary bypass of right hepatic ductal system by Roux-en-Y loop to peripheral ductal system

## **ACHI Alphabetic Index**

#### B

#### **Bypass**

- hepatic ductal system
- - by Roux-en-Y loop to peripheral ductal system
- - left 30466-0030780-00 [970]
- - right <del>30467-00</del>30780-01 **[970]**

... R

Roux-en-Y procedure (enteroenterostomy) 30515-02 [897]

- loop, to
- - pancreas (for pancreatic cyst) 30587-00 [980]
- - peripheral ductal system
- - with bypass of hepatic ductal system
- ---- left 30466-0030780-00 [970] ---- right 30467-0030780-01 [970]

### 11.5 Pancreas interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 10**

## PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850-1011)

#### **PANCREAS**

#### **INCISION**

976	Incision procedures on pancreas
30575-00	Incision and drainage of pancreatic abscess
30375-14	Incision and drainage of pancreas  Includes: division of adhesions
30375-27	Marsupialisation of pancreatic cyst
30581-00	Exploration of pancreas
	Excludes: that with excision of lesion of pancreas (30578-00 [979])

#### **EXCISION**

...

978

**Pancreatectomy** 

▼0030

Includes: procurement of associated artery and/or vein(s) for transplantation

. . .

30593-01 Pancreatectomy with splenectomy

30792-00 Distal pancreatectomy with splenectomy

. . .

979

Other excision procedures on pancreas or pancreatic duct

. . .

30577-00 Major pancreatic or retropancreatic dissection

Pancreatic necrosectomy

*Note:* Performed for:

- abscess formation
- pancreatic necrosis.

#### **REPAIR**

980

#### **Anastomosis of pancreas**

**Note:** Performed for:

- pancreatic cystpancreatitis.
- Excludes: cholecystopancreatostomy (30460-02 [969])

choledochopancreatostomy (30460-06 [969])

30586-00 Anastomosis of pancreas to duodenum

30790-00 Anastomosis of pancreas to duodenum

30586-01 Anastomosis of pancreas to stomach

30790-01 Anastomosis of pancreas to stomach

30790-02 Anastomosis of pancreas to small intestine, not elsewhere classified

Excludes: anastomosis of pancreas to Roux-en-Y loop of jejunum (30587-00 [980])

## **ACHI Alphabetic Index**

#### Δ

#### **Anastomosis**

- pancreas, pancreatic (duct)

- - to
- - common bile duct 30460-06 [969]
- - duodenum 30586-0030790-00 [980]
- - gallbladder 30460-02 [969]
- - jejunum 30589-00 **[980]**
- - - with pancreaticoduodenectomy 30584-00 [978]
- - Roux-en-Y loop (for pancreatic cyst) 30587-00 [980]
- - small intestine NEC 30790-02 [980]
- - stomach 30790-0130586-01 [980]

```
E
```

Excision — see also Removal

- lesion(s) see also Excision/tumour AND Excision/cyst AND Excision/polyp
- ...
- pancreas 30593-00 [978]
- - distal 30583-00 [978]
- - with splenectomy 30792-00 [978]
- paraganglioma 30321-00 [989]

Р

Pancreatectomy 30593-00 [978]

- distal 30583-00 [978]
- - with splenectomy 30792-00 [978]

Pancreaticocystoduodenostomy 30586 0030790-00 [980]

Pancreaticocystogastrostomy 30586-0130790-01 [980]

S

Splenectomy (by thoracoabdominal incision) (total) 30597-00 [815]

- with
- - pancreatectomy 30593-01 [978]
- - distal 30792-00 [978]
- laparoscopic 31470-00 [815]

# 11.6 Interventions on abdomen, peritoneum and omentum

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 10**

# PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011) ABDOMEN, PERITONEUM AND OMENTUM

#### **EXCISION**

989

Other excision procedures on abdomen, peritoneum or omentum

Excludes: hysterectomy with retroperitoneal dissection (35667-00, 35667-02 [1268])

. . .

#### 96211-00 Peritonectomy

Cytoreduction surgery (CRS)

Wote: 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

#### 30732-00 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], 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

#### 90450-00 Anterior pelvic exenteration

Anterior pelvic evisceration

#### Includes: removal of:

- bladder
- fallopian tubes
- ovaries
- prostate
- seminal vesicles
- urethra
- uterus
- vagina

#### 37019-00 Anterior pelvic exenteration

Anterior pelvic evisceration

#### *Includes:* removal of:

- bladder
- fallopian tubes
- ovaries
- prostate
- seminal vesicles
- urethra
- uterus
- vagina

. . .

#### **REPAIR**



#### Repair of other abdominal wall hernia

Repair of:

- incarcerated, obstructed, strangulated or other abdominal wall hernia
- ventral hernia

Includes: that following closure of: exomphalos or gastroschisis

• exomphalos or gastroschisis

• primary fascial closure by suture

Laparoscopic repair of other abdominal wall hernia

Excludes: with:

• muscle transposition (30655-00 [996])

• prosthesis (30651-01 **[996]**)

30403-01 Repair of other abdominal wall hernia

30655-00 Laparoscopic repair of other abdominal wall hernia with muscle transposition

Includes: using technique:

- pre-peritoneal
- retro-rectus
- sublay

with advancement of rectus muscles

30405-03 Repair of other abdominal wall hernia with muscle transposition

Includes: using technique:

- pre-peritoneal
- retro-rectus
- sublay

with advancement of rectus muscles

30651-01 Laparoscopic repair of other abdominal wall hernia with prosthesis

Includes: insertion of intraperitoneal onlay mesh

30405-04 Repair of other abdominal wall hernia with prosthesis

**Includes:** insertion of intraperitoneal onlay mesh

30405-05 Repair of other abdominal wall hernia with resection of strangulated intestine

Includes: anastomosis

1000

Other repair procedures on abdomen, peritoneum or omentum

30657-00 Reconstruction of abdominal wall

Includes: mobilising rectus abdominis muscles to midline

release of:

- external oblique
- transversus abdominus

that with component separation

## **ACHI Alphabetic Index**

Debulking — see also Excision/by site

- flap (free) (see also Revision/flap) 45496-00 [1686]
- - intra-abdominal (radical) (with omentectomy) 30392-00 [989]
- - pelvic cavity, female 35720-00 [1299]
- neurofibroma
- - bone 30241-00 [1563]
- - nerve, peripheral
- - deep 39327-02 [80]

```
- - - superficial 39324-02 [80]
- - skin — see Excision/lesion(s)/skin and subcutaneous tissue/specified site
- - soft tissue NEC 31350-00 [1566]
- - - affecting long bones — see Excision/tumour/soft tissue/by en bloc resection - ovary, for lesion (tumour) 35720-00 [1299]
- tumour — see Debulking/lesion
- uterus, preceding vaginal hysterectomy 35658-00 [1270]
- - for lesion (tumour) 35720-00 [1299]
Ε
Evisceration
- pelvic
- - anterior 90450-0037019-00 [989]
Excision — see also Removal
- lesion(s) — see also Excision/tumour AND Excision/cyst AND Excision/polyp
- peritoneum with cytoreduction surgery 96211-0030732-00 [989]
Exenteration
- pelvic
- - anterior 90450-0037019-00 [989]
Peritonectomy 96211 0030732-00 [989]
R
Reconstruction
- by
- - osseointegration procedure — see Osseointegration
- - tarsal strip procedure — see Tarsal strip
- abdominal wall 30657-00 [1000]
- Achilles' tendon 49724-01 [1545]
Repair
- hernia
- - by manual reduction 92071-00 [1899]
- - abdominal wall NEC 30403-01 [996]
- - - with
- - - - muscle transposition 30405-03 [996]
---- incarcerated (obstructed) (strangulated) — see block [996]
---- laparoscopic 30655-00 [996]
--- prosthesis (mesh) NEC 30405-04 [996]
---- incarcerated (obstructed) (strangulated) — see block [996]
- - - - - laparoscopic 30651-01 [996]
- - - resection of strangulated intestine 30405-05 [996]
---- incarcerated (obstructed) (strangulated) — see block [996]
- - - laparoscopic 30651-00 [996]
- - diaphragmatic (hiatus)
- - ventral — see Repair/hernia/abdominal wall-30403-01 [996]
     - muscle transposition 30405-03 [996]
      - incarcerated (obstructed) (strangulated)
     prosthesis (mesh) 30405-04 [996]
       incarcerated (obstructed) (strangulated)
      resection of strangulated intestine 30405-05 [996]
       incarcerated (obstructed) (strangulated)
- hip NEC 90552-00 [1491]
```

#### S

#### Suspension

. . .

- rectum, rectal, abdominal (for rectal prolapse) 32117-00 [940]
- - with ventral mesh 32118-00 [940]
- transvaginal, needle

## 11.7 Intestinal interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 10**

### PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850-1011)

#### **SMALL INTESTINE**

#### **INCISION**

### 893

#### **Enterotomy**

30375-03 Enterotomy of small intestine

Duodenotomy Ileotomy Jejunotomy

Includes: division of adhesions

removal of calculus

Excludes: that performed intraoperatively for endoscopic examination of small bowel (30568-00 [893])

30568-00 Endoscopic examination of small intestine via intraoperative enterotomy

Includes: biopsy

that using flexible endoscope

. . .

#### **EXCISION**

#### 895

#### Resection of small intestine

30566-00 Resection of small intestine with anastomosis

Excision of Meckel's diverticulum with resection of small intestine with anastomosis

Includes: strictureplasty of small intestine

30565-00 Resection of small intestine with formation of stoma

. . .

#### **REPAIR**

## 897

#### Stomas of small intestine

• • •

30375-01 Other enterostomy

Duodenostomy Permanent ileostomy Excludes: ileostomy with:

colectomy, total (32009-00 [913])
proctocolectomy, total (32015-00 [936])
jejunostomy (31462-00, 90306-00 [892])

30515-01 Enterocolostomy

Ileocolonic anastomosis

**Includes:** division of adhesions

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])

43807-00 Duodenoduodenostomy

Duodenojejunostomy for neonatal atresia or stenosis

898 Reduction procedures on small intestine

30375-08 Reduction of intussusception of small intestine

Includes: division of adhesions

30375-18 Reduction of volvulus of small intestine

. . .

901 Other repair procedures on small intestine

30564-00 Strictureplasty of small intestine

Excludes: that with resection of small intestine with anastomosis (30566-00 [895])

...

## LARGE INTESTINE

## **INCISION**

907 Incision procedures on large intestine

30375-02 Colotomy

**Includes:** division of adhesions

30375-23 Endoscopic examination of large intestine via laparotomy

. . .

## **EXCISION**

. . .

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])

32230-00 Endoscopic mucosal resection of large intestine

**Includes:** using electrocautery

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])

. . .

## **REPAIR**

915

Other stomas of large intestine

30375-00 Caecostomy

Includes: division of adhesions

...

## **RECTUM, ANUS**

## **EXCISION**

933

Excision of lesion or tissue of rectum or anus

32099-00

Per anal excision of lesion or tissue of rectum

Transanal endoscopic microsurgery ([TEMS]) of rectal mucosa

Includes: pneumorectum

rectoscopy

Excludes: polypectomy via:

• colonoscopy (32087-00, 32093-00 [911])

• sigmoidoscopy:

• flexible (32087-00 **[911]**)

• rigid (32078-00, 32081-00 **[910]**)

32111-00

Excision of rectal mucosa for rectal prolapse

Delorme procedure

Stapled transanal rectal resection ([STARR])

Includes: plication of rectal muscle

32230-01

Endoscopic mucosal resection of rectum

**Includes:** using electrocautery

90341-00

Other excision of lesion of rectum

Excision of perirectal lesion or tissue

Trans-sphincteric excision of lesion or tissue

Excludes: per anal excision of lesion of rectum (32099-00 [933])

polypectomy via:

- colonoscopy (32087-00, 32093-00 [911])
- rectoscopy (32099-00 **[933]**)
- sigmoidoscopy:
  - flexible (32087-00 **[911]**)
- rigid (32078-00, 32081-00 [910])

. . .

## **REPAIR**

940

Other repair procedures on rectum or anus

. . .

32131-00 Perineal repair of rectocele

Transanal repair of rectocele

Note: Performed for rectal prolapse.

32117-00 Abdominal rectopexy

**Note:** Performed for rectal prolapse

**Excludes:** with ventral mesh (32118-00 [940])

32118-00 Ventral mesh rectopexy

## **ACHI Alphabetic Index**

## C

Colonoscopy (beyond hepatic flexure) (fibreoptic) (long) (to caecum) 32090-00 [905]

- with
- - resection of mucosa of large intestine 90297-0232230-00 [914]

## E

Excision — see also Removal

- lesion(s) see also Excision/tumour AND Excision/cyst AND Excision/polyp
- mucosa
- - anal, with restorative proctectomy 32060-00 [934]
- - rectal (endoscopic) 32230-01 [933]
- - with plication of rectal muscle (Delorme) (transanal) 32111-00 [933]

•••

#### Intervention

**Note:** Terms listed under the lead term 'Intervention' are mainly split by anatomical site or condition; *Intervention/for specified condition* and *Intervention/specified site*.

Where an eponym is used to describe an intervention, or a type of intervention is specified — see specified intervention(s) performed or the lead term Procedure.

- for specified condition
- <u>...</u>
- - prolapse
- <u>...</u>
- --- rectal (mucosa) (perirectal) (submucosal)
- <u>----by</u>
- <u>...</u>
- - - rectopexy, abdominal
- ---- with ventral mesh 32118-00 [940]
- - urethra

P

#### **Proctopexy**

- abdominal 32117-00 [940]
- - with ventral mesh 32118-00 [940]

Proctoscopy 32171-00 [928]

## R

## Rectopexy

- with ventral mesh 32118-00 [940]
- abdominal 32117-00 [940]

#### Reduction

- mucosa
- - rectal, for rectal prolapse (Delorme procedure) 32111-00 [933]
- - for rectal prolapse (Delorme procedure) 32111-00 [933]
- - endoscopic 32230-01 [933]

```
- - - manual 90313-01 [940]
- rectum
- - mucosa, for rectal prolapse (Delorme procedure) 32111-00 [933]
- - - for rectal prolapse (Delorme procedure) 32111-00 [933]
- - - endoscopic 32230-01 [933]
- - - manual 90313-01 [940]
Repair
- intestine (bowel)
- - for
- - - malrotation 43801-00 [916]
- - large (with stoma formation) 43816-02 [917]
- - small NEC 30375-19 [901]
- - - for stricture 30564-00 [901]
- - - - with resection and anastomosis 30566-00 [895]
---- stricture 30564-00 [901]
- - - with anastomosis
- - - - multiple 43810-01 [900]
- - - single 43810-00 [900]
- prolapse, prolapsed
- - rectum (mucosa) (perirectal) (submucosal)
...
---- rectopexy, abdominal 32117-00 [940]
---- with ventral mesh 32118-00 [940]
--- reduction of rectal mucosa (by excision) 32111-00 [933]
---- manual 90313-01 [940]
- rectum NEC 90313-00 [940]
- - prolapse (mucosa) (perirectal) (submucosal)
- - - by
- - - - rectopexy, abdominal 32117-00 [940]
---- with ventral mesh 32118-00 [940]
--- reduction of rectal mucosa (by excision) 32111-00 [933]
---- manual 90313-01 [940]
- stricture
- - intestine
- - - small 30564-00 [901]
- - - - with resection and anastomosis 30566-00 [895]
- symblepharon
Resection — see also Excision
- mucosa, endoscopic
- - large intestine 90297-0232230-00 [914]
- - - for polypectomy — see Polypectomy
- - oesophagus 90297-00 [861]
- - rectum 32230-01 [93
- - stomach 90297-01 [880]
- muscle
- rectum
- - anterior (restorative) (with covering stoma) 92208-00 [935]
- - - high 32024-00 [935]
- - - low 32025-00 [935]
- - - ultra low (stapled) 32026-00 [935]
--- hand sutured anastomosis (coloanal) 32028-00 [935]
- - mucosa, endoscopic 32230-01 [933]
- - perineal 32047-00 [934]
- - transanal, stapled 32111-00 [933]
```

S

#### Strictureplasty

- intestine
- - small 30564-00 [901]
- - with resection and anastomosis 30566-00 [895]

Stripped down, adhesions — see Division/adhesions

## 11.8 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

## **ACHI Tabular List**

## **CHAPTER 10**

## PROCEDURES ON DIGESTIVE SYSTEM (BLOCKS 850–1011)

. .

# 856

## **Destruction procedures on oesophagus**

30478-22 Endoscopic destruction of lesion or tissue of oesophagus

Endoscopic (oesophagoscopy with) destruction of lesion (tissue) of oesophagus lesion or tissue of oesophagus (by):

- coagulation (Argon plasma) (heater probe)
- diathermy
- laser
- radiofrequency ablation (Halo procedure) (Stretta procedure)

Includes: coagulation (Argon plasma [APC])

diathermy

<u>laser</u>

radiofrequency ablation

. . .

## 866

## Repair of oesophageal atresia

Excludes: oesophagostomy (30293-00 [867])

43903-00

Replacement of oesophagus using intestine, paediatric

Includes: resection of oesophagus

Note: Performed for oesophageal:

- atresia
- stricture

Code also when performed:

- microsurgical anastomosis of blood vessels (see block [1695])
- microvascular anastomosis (artery and/or vein) (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])

. . .

# 870

### Application, insertion or removal procedures on stomach

30483-00

 Insertion of percutaneous nonendoscopic gastrostomy button Replacement of nonendoscopic gastrostomy button

#### Removal of gastrostomy tube 30478-08

Removal of:

- gastro-jejunal tube
- gastrostomy button (percutaneous nonendoscopic)
- \* nonendoscopic gastrostomy button
- percutaneous endoscopic gastrostomy [PEG] tube

Excludes: that with replacement percutaneous:

- endoscopic gastrostomy [PEG] tube (30482-00 [870])
  nonendoscopic gastrostomy button (30483-00 [870])
- percutaneous endoscopic gastrostomy tube (30482-00 [870])

908

## Destruction procedures on large intestine

#### Endoscopic laser therapy to large intestine 30479-02

Endoscopic laser therapy for colonic:

- · benign vascular lesions
- neoplasia
- stricture

## 90308-00

Endoscopic destruction of lesion or tissue of large intestine

Endoscopic (colonoscopy with):

- coagulation (Argon plasma)
- control of colonic bleeding
- destruction of <u>lesion</u> (tissue) of <u>large</u> intestine [colon] <u>lesion</u> (tissue) of <u>large</u> intestine (colon) by:
- ablation
- coagulation (Argon plasma)
- injection of sclerosing agent (sclerotherapy)

Includes: ablation

coagulation (Argon plasma [APC])

injection of sclerosing agent [sclerotherapy]

Excludes: that by laser (30479-02 [908])

## 931

#### Destruction procedures on rectum or anus

#### 32135-02 Rubber band ligation of rectal mucosal prolapse

#### 32135-03 Destruction of rectal mucosal prolapse

Includes: cauterisation cryotherapy

infrared therapy

#### 30479-01 Endoscopic laser therapy to rectum

Endoscopic laser therapy for rectal:

- · benign vascular lesions
- neoplasia
- stricture

## 90312-00

## ElectrocCoagulation of tissue of rectum

Electrocoagulation of lesion of rectum

**Includes:** Argon plasma coagulation [APC]

electrocoagulation

Excludes: that for haemorrhage (postoperative) (90345-00 [931])

#### Cryotherapy of tissue of rectum 90312-01

Cryosurgery of lesion of rectum

Excludes: that for:

• haemorrhage (postoperative) (90345-00 **[931]**)

• rectal mucosal prolapse (32135-03 [931])

## **GALLBLADDER AND BILIARY TRACT**

#### **REPAIR**

969

Stoma of gallbladder or bile duct

30375-05 Cholecystostomy

**Includes:** division of adhesions

30460-00 Cholecystoduodenostomy

30460-01 Cholecystoenterostomy

Cholecystoileostomy Cholecystoileostomy

Excludes: cholecystoduodenostomy (30460-00 [969])

cholecystojejunostomy (30460-08 [970])

. . .



#### Panendoscopy with destruction

∇ 0024

Destruction via:

- duodenoscopy
- gastroscopy
- oesophagogastroduodenoscopy [EGD]

Code also when performed:

• balloon enteroscopy (30680-00 [1005])

30478-01 Panendoscopy to duodenum with diathermy

30478-02 Panendoscopy to duodenum with heater probe coagulation

30478-03 Panendoscopy to duodenum with laser coagulation

30478-20 Panendoscopy to duodenum with other coagulation

Panendoscopy to duodenum with Argon plasma coagulation

Includes: Argon plasma coagulation [APC]

30478-15 Panendoscopy to ileum with diathermy

30478-16 Panendoscopy to ileum with heater probe coagulation

30478-17 Panendoscopy to ileum with laser coagulation

30478-21 Panendoscopy to ileum with other coagulation

Panendoscopy to ileum with Argon plasma coagulation

**Includes:** Argon plasma coagulation [APC]

# **ACHI Alphabetic Index**

#### C

Coagulation, electrocoagulation (lesion) (tissue) — see also Destruction/by site

- blood vessels
- - cornea (laser) 42797-03 [168]
- - sclera (laser) 90068-00 [179]
- cornea see Destruction/cornea
- duodenum NEC 30478-20 [1007]
- - by

--- Argon plasma (APC) 30478-20 [1007]

- - diathermy 30478-01 [1007]
- - heater probe 30478-02 [1007]
- - laser 30478-03 [1007]

```
- ileum NEC 30478-21 [1007]
- - by
    Argon plasma (APC) 30478-21 [1007]
- - - diathermy 30478-15 [1007]
- - - heater probe 30478-16 [1007]
- - - laser 30478-17 [1007]
- prostatic bed (control of postoperative haemorrhage) 90392-00 [1162]
- rectum (lesion) (radical) (tissue) 90312-00 [931]
- retina (laser) 42809-00 [211]
- sclera — see Destruction/sclera
- stomach
- - - diathermy 30478-01 [1007]
- - - heater probe 30478-02 [1007]
- - - laser 30478-03 [1007]
D
Destruction (ablation) (cauterisation) (coagulation) (cryotherapy) (diathermy) (electrocoagulation) (HIFUS) (irreversible
electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)
- bronchus (Argon plasma) (endoscopic) (tissue) 96217-01 [547]
- - open 96217-00 [547]
- lesion (tissue) (tumour) — see also Destruction/by site
- - intestine, large
- - - endoscopic-(Argon plasma coagulation) (closed) 90308-00 [908]
- - - - by laser 30479-02 [908]
- - oesophagus, endoscopic (Argon plasma) (Halo procedure) (heater probe) (Stretta procedure) 30478-22 [856]
- - rectum
---- coagulation (radical) 90312-00 [931]
--- cryotherapy (cryosurgery) 90312-01 [931]
      electrocoagulation (radical) 90312-00 [931]
- - - - laser 30479-01 [931]
- lung (Argon plasma) (endoscopic) (tissue) 90181-01 [558]
- - open 90181-00 [558]
- - percutaneous 90181-02 [558]
- oesophagus, endoscopic (Argon plasma) (Halo procedure) (heater probe) (Stretta procedure) 30478-22 [856]
- rectum
- - by
- - - coagulation (radical) 90312-00 [931]
- - - cryosurgery 90312-01 [931]
- - - cryotherapy (cryosurgery) 90312-01 [931]
--- electrocoagulation 90312-00 [931]
- - mucosal prolapse 32135-03 [931]
Duodenoscopy 30473-00 [1005]
- with
- - administration
- - - agent to lesion (sclerosing) (varices) 30478-07 [870]
- - - tattooing agent (India ink) (markers) (radiolucent) (SPOT) 30473-07 [1005]
- - biopsy 30473-01 [1008]
- - - via
- - - - artificial stoma 32095-00 [891]
- - - - laparotomy 30569-00 [894]
- - coagulation NEC 30478-20 [1007]
- - - heater probe 30478-02 [1007]
...
E
```

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

Electrocoagulation — see Coagulation, electrocoagulation

## F

#### Formation (of)

..

- gastrostomy 30375-07 [881]
- - with enterostomy 30515-00 [881]
- - button (percutaneous nonendoscopic) 30483-00 [870]
- - laparoscopic 30722-00 [881]
- - percutaneous endoscopic (initial) (PEG) 30481-00 [870]
- - repeat insertion 30482-00 [870]

## G

#### Gastrostomy 30375-07 [881]

- with
- - enterostomy 30515-00 [881]
- - passage of indwelling transanastomotic tube 90302-00 [881]
- button (percutaneous nonendoscopic) 30483-00 [870]
- laparoscopic 30722-00 [881]
- percutaneous endoscopic (initial) (PEG) 30481-00 [870]
- - repeat insertion 30482-00 [870]

#### ı

#### Ileoscopy (via panendoscopy) 30473-05 [1005]

- with
- - administration of tattooing agent (India ink) (markers) (radiolucent) (SPOT) 30473-08 [1005]
- - biopsy 30473-06 [1008]
- - via
- - - artificial stoma 32095-00 [891]
- - - laparotomy 30569-00 [894]
- - coagulation NEC 30478-21 [1007]
- --- Argon plasma (APC) 30478-21 [1007]
- - heater probe 30478-16 [1007]

#### Insertion

- but

- - gastrostomy, (percutaneous nonendoscopic) 30483-00 [870]
- - nasal septum 41907-00 [371]
- - patella 90562-00 [1524]
- gastrostomy button (percutaneous nonendoscopic) 30483-00 [870]

#### 0

## Oesophagoscopy (flexible) 30473-03 [850]

- with
- - ablation of lesion (Halo procedure) (Stretta procedure) (tissue) 30478-22 [856]
- - administration of tattooing agent (India ink) (markers) (radiolucent) (SPOT) 30473-07 [1005]
- - biopsy 30473-04 [861]
- - through artificial stoma 41822-00 [861]
- - using rigid endoscope 41822-00 [861]
- - coagulation (APC) (Argon plasma) (heater probe) 30478-22 [856]

#### P

#### Panendoscopy (double balloon) (to duodenum) 30473-00 [1005]

- by
- - balloon enteroscopy 30680-00 [1005]
- - camera capsule 11820-00 [1005]
- with
- - administration
- - agent to lesion (sclerosing) (varices) 30478-07 [870]
- - tattooing agent (India ink) (markers) (radiolucent) (SPOT) 30473-07 [1005]
- - - to ileum (beyond duodenum) (jejunum) 30473-08 [1005]
- - biopsy (campylobacter like organism test) (urease test) 30473-01 [1008]
- - ileum (beyond duodenum) (jejunum) 30473-06 [1008]
- - coagulation NEC 30478-20 [1007]
- --- Argon plasma (APC) 30478-20 [1007]
- ---- to ileum (beyond duodenum) (jejunum) 30478-21 [1007]
- - heater probe 30478-02 [1007]

- - - to ileum (beyond duodenum) (jejunum) 30478-16 **[1007]**
- - laser 30478-03 [1007]
- --- to ileum (beyond duodenum) (jejunum) 30478-17 [1007]
- - to ileum (beyond duodenum) (jejunum) 30478-21 [1007]

## R

## Replacement

... - button

- - gastrostomy, (percutaneous nonendoscopic) 30483-00 [870]

# 12. Skin and subcutaneous tissue

## 12.1 Skin interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 16**

# DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718) SKIN AND SUBCUTANEOUS TISSUE

Includes: hair follicles

1602

mucous membrane

nails

sweat glands

## APPLICATION, INSERTION, REMOVAL

Administration of agent into skin and subcutaneous tissue

90660-00 Administration of agent into skin and subcutaneous tissue

Includes: autologous fat

botulinum toxin collagen poly-L-lactic acid

silicone

**Note:** Performed for:

- contour deformities
- depressed scar
- dimples
- hyperhidrosis
- lipoatrophy
- muscle related wrinkles

Excludes: administration of: agent into lesion of skin (30207-00 [1602])

- agent into lesion of skin (30207-00 [1602])
- fat into:
  - breast for reconstruction (45534-00 [1756])
  - skin and subcutaneous tissue (45589-00 [1602])

45589-00 Administration of autologous fat into skin and subcutaneous tissue

Administration of autologous fat graft into skin and subcutaneous tissue

Injection of adipocytes into skin and subcutaneous tissue

**Includes:** harvesting and preparation of adipocytes

Excludes: administration of fat into breast for reconstruction (45534-00 [1756])

30207-00 Administration of agent into skin lesion

Injection into keloid scar

. . .

## 1604

#### Other application, insertion or removal procedures on skin and subcutaneous tissue

. . .

38285-01 Revision of subcutaneously implanted monitoring device

Replacement of:

- cardiac event monitor
- patient activated implantable loop recorder ([ILR])

Code also when performed:

• monitoring of cardiac event (11722-00 [1854])

38286-00 Removal of subcutaneously implanted monitoring device

Removal of:

- cardiac event monitor
- patient activated implantable loop recorder ([ILR])

Excludes: that with revision (38285-01 [1604])

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 (40705-01 [67])

Excludes: that with replacement (39135-01 [1604])

39135-01 Replacement of subcutaneously implanted neurostimulator

Replacement of neurostimulator receiver

Includes: placement and connection of extension wire to electrode programming

. . .

## **REVISION**



#### Revision of other scar of skin

Scar:

- excision
- freeing
- release
- Z-plasty

Excludes: administration of agent into scar (90660-00, 45589-00, 30207-00 [1602])

laser to scar (45025, 45026-00 **[1615]**)

release of contracture (45515-01 [1607], 45519-00 [1656]) removal of scar incidental to other procedure — omit code

that for burn scar (45519-00 [1656])

# **ACHI Alphabetic Index**

#### Λ

Administration (around) (into) (local) (of) (therapeutic agent) NEC — code to block [1920] with extension -19

- specified site — see also Administration/indication OR Administration/type of agent

-- skin (collagen)-(fat) (poly-L-lactic acid) (silicone) (subcutaneous tissue) 90660-00 [1602]

- - - lesion (glucocorticoid) (hydrocortisone) (Interferon) 30207-00 [1602]

- - soft tissue NEC 18360-01 [1552]

- type of agent — see also Administration/indication OR Administration/specified site

```
- - 5-FU (fluorouracil) 42824-01 [251]
- - acetylcysteine — code to block [1920] with extension -04
- - adipocytes 45589-00 [1602]
- - antivenom — code to block [1920] with extension -04
- - autologous fat 45589-00 [1602]
G
Graft (repair)
- fat 45018-02 [1668]
- - by injection (into) 90660-0045589-00 [1602]
- - - breast (for reconstruction) 45534-00 [1756]
- gingival, dental procedure 97235-00 [456]
R
Removal — see also Excision
- device — see also Removal/prosthesis, prosthetic device
- - neurostimulator (epidural) (intracranial) (peripheral) (sacral) (subcutaneous) (vagus) 39135-00 [1604]
- - - with replacement 39135-01 [1604]
- - peritoneal access (port-catheter) 90376-02 [983]
- - neurostimulator, for obesity (IGS) (subcutaneous) 39135-00 [1604]
--- with replacement 39135-01 [1604]
- generator
- neurostimulator (epidural) (intracranial) (peripheral) (sacral) (subcutaneous) (vagus) 39135-00 [1604]
- - with replacement 39135-01 [1604]
- oil (from posterior chamber) (silicone) 42815-00 [205]
- vagal block, for obesity (subcutaneous) 39135-00 [1604]
- - with replacement 39135-01 [1604]

    valve

Replacement
- device — see also Replacement/by type of device
- - neurostimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] — see Insertion/neurostimulator AND
- neurostimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] — see Insertion/neurostimulator AND
- stimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] - see also Insertion/neurostimulator AND
- - bladder, electronic 90359-00 [1091]
- - ureteral, electronic 90355-00 [1069]
Revision (partial) (total)
- device — see also Revision/by type of device
- - neurostimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] — see Insertion/neurostimulator AND
- neurostimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] -- see Insertion/neurostimulator AND
- receiver (implanted) (radiofrequency) (subcutaneous) 39135-01 [1604] — see Revision/neurostimulator
- stimulator (implanted) (receiver) (subcutaneous) 39135-01 [1604] -- see Insertion/neurostimulator AND Removal/
- stoma
```

# 12.2 Microvascular repair

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

## **ACHI Tabular List**

## **CHAPTER 16**

## **DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718)**

1655

Other repair procedures on skin and subcutaneous tissue

٠..

90674-00 Replantation of scalp

Code also when performed:

- microvascular: microsurgical repair of blood vessels (45500 [1694], 45502 [1695], 45503 [1696])
  - anastomosis (artery and/or vein) (45502 [1695])
- graft (45503 [1696])

90675-00 Other repair of skin and subcutaneous tissue

• • •

1674

## Free flap

Resected flap of tissue transferred to another site, where vessels within the flap are anastomosed to vessels at the recipient site

Free tissue transfer

Includes: bone

composite tissue:

- · fasciocutaneous
- · fasciomyocutaneous
- myocutaneous

intestine

microsurgical anastomosis of blood vessels microvascular anastomosis (artery and/or vein)

muscle

raising and setting of free transfer of tissue repair of secondary cutaneous defect by suture

Code also when performed:

- repair of secondary defect:
  - by graft see Alphabetic Index: Graft/by site or type
  - noncutaneous (eg muscle), by suture see Alphabetic Index: Suture/by site

## **REPAIR**



Microsurgical repair for restoration of continuity of blood vessel of distal extremity or digit Microvascular repair of distal extremity or digit

<u>Includes:</u> anastomosis of blood vessel using microsurgical techniques

Note: Performed for restoration of continuity of blood vessel. Code also when performed: • micro-arterial or microvenous graft (45503 [1696]) Excludes: repair by: anastomosis (45502 [1695]) • micro-arterial or microvenous graft (45503 [1696]) 45500-00 Microsurgical repair of artery Micro-arterial repair of distal extremity or digit Microsurgical repair of vein Microvenous repair of distal extremity or digit 45500-01 45500-02 Microsurgical repair of artery and vein-Micro-arterial and microvenous repair of distal extremity or digit 1695 Microsurgical anastomosis of blood vessel Microvascular anastomosis **Includes:** creation of micro-arterial or microvenous: • graft-to-graft extension • T-graft • Y-graft using microsurgical techniques Code also when performed: • nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83]) Code first: • oesophagus reconstruction (see block [868]) • reconstruction procedure(s) — see Alphabetic Index: Reconstruction • replacement of oesophagus using intestine (paediatric) (43903-00 [866]) • replantation of scalp (90674-00 [1655]) **Excludes:** that with: free flap (45562 [1674]) • free flap (45562 [1674]) • graft (microvascular) of blood vessel (45503 [1696]) • repair (microvascular) blood vessel distal extremity or digit (45500 [1694]) 45502-00 Microsurgical anastomosis of artery Micro-arterial anastomosis 45502-01 Microsurgical anastomosis of vein-Microvenous anastomosis 45502-02 Microsurgical anastomosis of artery and vein-Micro-arterial and microvenous anastomosis 1696 Microsurgical graft of blood vessel Microvascular graft **Includes:** anastomosis of blood vessel using microsurgical techniques Excludes: repair by anastomosis (45502 [1695])

Microsurgical graft of artery Micro-arterial graft 45503-00

Microsurgical graft of voin Microvenous graft 45503-01

45503-02 Microsurgical graft of artery and vein Micro-arterial and microvenous graft

# **ACHI Alphabetic Index**

## Α

#### **Anastomosis**

- artery, arterial (see also Anastomosis/micro-arterial) 32766-00 [709] - - for free flap 45562 [1674] free flap 45562 [1674] - with anastomosis of vein 45502-02 [1695] reimplantation of limb or digit 45502-00 [1695] stomosis of vein 45502-02 [1695] - - with repair of aneurysm

```
- - mesenteric 33836-03 [709]
-- microsurgical 45502-00 [1695]
    with anastomosis of vein 45502-02 [1695]
- - peroneal 33818-07 [709]
- lymphatic (channel) (peripheral) 90283-00 [812]
- micro-arterial 45502-00 [1695]
- - and microvenous 45502-02 [1695]
- microvascular 45502 [1695]-
                                     Anastomosis/artery/microsurgical AND Anastomosis/vein/microsurgical
- microvenous 45502-01 [1695]
- - and micro-arterial 45502-02 [1695]
- nephropyeloureterostomy 90350-00 [1059]
- vein, venous (see also Anastomosis/microvenous) 32766-01 [733]
- - for free flap 45562 [1674]
    free flap 45562 [1674]
   - - with anastomosis of artery 45502-02 [1695]
    reimplantation of limb or digit 45502-01 [1695]
    - with anastomosis of artery 45502-02 [1695]
- - abdominal NEC 33836-09 [733]
- - mesenteric 33836-07 [733]
   microsurgical 45502-01 [1695]
    with anastomosis of artery 45502-02 [1695]
- - popliteal 33818-12 [733]
G
Graft (repair)

    artery, arterial — see also Graft/micro-arterial

   by microsurgical technique 45503-00 [1696]
    with venous graft 45503-02 [1696]
- - for aneurysm — see Graft/for/aneurysm
- - bypass — see Bypass/arterial
- - interposition 90213-03 [710]
- - - ulnar 33821-03 [710]
-- microsurgical 45503-00 [1696]
--- with venous graft 45503-02 [1696]
- - patch (of bypass graft) (using autologous material) 33548-00 [707]
- lamellar
- - cornea — see Keratoplasty
- - sclera — see Graft/sclera/patch
- micro-arterial 45503-00 [1696]
- - and microvenous 45503-02 [1696]
- microvascular 45503 [1696] (microarterial) (microvenous)
- microvenous 45503-01 [1696]

    - and micro-arterial 45503-02 [1696]

- mucous membrane — see also Graft/skin
- vein, venous — <u>see also Graft/microvenous</u>
-- by microsurgical technique 45503-01 [1696]
    with arterial graft 45503-02 [1696]
- - for aneurysm — see Graft/for/aneurysm
- - bypass — see Bypass/vein, venous
- - interposition
- - - vena cava 90217-02 [734]
- microsurgical 45503-01 [1696]
    with arterial graft 45503 02 [1696]
- - patch (of bypass graft) (using autologous material) 33548-02 [731]
M
Microsurgery, microsurgical
 microvascular (microarterial) (microvenous)
                                                 see Repair/artery/microvascular AND Repair/vein/microvascular
- technique — code specific procedure(s) performed
- transanal endoscopic, via endoscopy (rectal mucosa) (TEMS) 32099-00 [933]
```

```
R
Repair
- artery, arterial — see also Repair/micro-arterial, distal extremity or digit
- - - anastomosis — see Anastomosis/artery
- - - clipping — see Clipping/artery
- - - excision — see Excision/artery
- - - graft — see Graft/artery
- - - ligation — see Ligation/artery
- - - suture — see Suture/artery
- - aneurysm — see also Repair/aneurysm
- - - by replacement — see Replacement/aneurysm, with graft
- - - with prosthesis (graft) — see Replacement/aneurysm, with graft
- - digital (radial (RDA)) (ulnar (UDA)) — see Repair/micro-arterial, distal extremity or digit
  microvascular (digit) (distal extremity) (microsurgery) (with restoration of continuity) 45500-00 [1694]
      anastomosis 45502-00 [1695]

    with anastomosis of vein 45502-02 [1695]

     microarterial graft 45503-00 [1696]
       with microvenous graft 45503-02 [1696]
    with repair of vein 45500-02 [1694]
- - pulmonary (main) 38715-02 [717]
- - - by
- - - - banding 38715-00 [717]
- - - debanding 38715-01 [717]
- blood vessel — see Repair/artery, arterial AND Repair/vein, venous
- bone NEC 90589-00 [1571]
- metal
- - casting, dental 97769-00 [476]
- - clasp or spring, on removal orthodontic appliance 97876-00 [483]
- micro-arterial, distal extremity or digit 45500-00 [1694]
- - and microvenous repair 45500-02 [1694]
                      ee Repair/artery/microvascular AND Repair/vein/microvascular
- microvascular, distal extremity or digit 45500 [1694] --
                                                        see Repair/artery/microvascular AND Repair/vein/microvascular
- microvenous, distal extremity or digit 45500-01 [1694]
- - and micro-arterial repair 45500-02 [1694]
- mouth NEC 45676-00 [406]
- vein, venous — see also Repair/microvenous, distal extremity or digit
- - aneurysm — see also Repair/aneurysm
- - - by replacement — see Replacement/aneurysm, with graft
- - - with prosthesis (graft) — see Replacement/aneurysm, with graft
  microvascular (digit) (distal extremity) (microsurgery) (with restoration of continuity) 45500-01 [1694]
   -- anastomosis 45502-01 [1695]
    - - with anastomosis of artery 45502-02 [1695]
   -- microvenous graft 45503-01 [1696]
    -- with microarterial graft 45503-02 [1696]
  - with microvascular repair of artery 45500-02 [1694]
- - valve 34818-00 [736]
```

## S

### Suture (laceration)

```
- artery (see also Repair/artery, arterial) 90209-03 [708]
- by microsurgical techniques, for restoration of continuity of artery of distal extremity or digit 45500-00 [1694]
- with suture of vein 45500-02 [1694]
- for aneurysm — see Suture/aneurysm
- vein — see also Repair/vein, venous
- by microsurgical techniques, for restoration of continuity of vein of distal extremity or digit 45500-01 [1694]
- with suture of artery 45500-02 [1694]
- for aneurysm — see Suture/aneurysm
```

## 12.3 Breast reconstruction

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 17**

## PLASTIC PROCEDURES ON SOFT TISSUE

## **EXCISION**

1666

## Liposuction and lipectomy

Reduction of adipose tissue Size reduction

30177-00

Lipectomy of abdominal apron, radical

Abdominoplasty:

- Pitanguy
- radical

Includes: excision of skin and subcutaneous tissue repair of: musculo-aponeurotic layer

- musculo-aponeurotic layer
- rectus diastasis

transposition of umbilicus

45018-04

Procurement of fat for graft via separate incision

Excludes: that: from the same incision

- from the same incision omit code
- with administration of autologous fat into:
- breast for reconstruction (45534-00 [1756])
- skin and subcutaneous tissue (45589-00 [1602])

1671

#### Myocutaneous flap

A flap of composite tissue (skin and subcutaneous tissue/muscle/fascia), with its own blood supply, taken from a donor site adjacent to the defect and transferred to recipient site

Includes: fasciomyocutaneous flap

Excludes: myocutaneous flap:

- free (see block [1674])
- island (see block [1673])

that for reconstruction of breast (45530-02 [1756])

1673

#### Island flap

Flap using transferred tissue completely separated from the surrounding and underlying tissue, except for a pedicle containing arteries and veins. Tissue is tunnelled under skin and brought out at the recipient site (with pedicle remaining under skin and attached to donor site)

Includes: fasciocutaneous island flap

fasciomyocutaneous island flap

muscle island flap myocutaneous island flap Excludes: free flap (see block [1674])

...

that for reconstruction of breast (45530-02 [1756])

..

# PROCEDURES ON BREAST (BLOCKS 1740-1759) BREAST

Includes: procedures on male breast

...

#### **EXCISION**

1747

#### Subcutaneous mastectomy

Excision of breast tissue with preservation of skin and nipple

Includes: formation of mound using autologous cutaneous mastectomy tissue

that with or without frozen section biopsy

Code also when performed:

- excision of axillary lymph nodes (96244-02, 96245-02 [806])
- implant of prosthesis (45527<u>-02</u> [1753<u>1756</u>])
- sentinel lymph node biopsy or excision (96243 [805])

. . .

## **REPAIR**

1753

## **Augmentation mammoplasty**

Includes: insertion of prosthesis

Excludes: that by injection (90723 [1741])

45524-00 Augmentation mammoplasty, unilateral

45528-00 Augmentation mammoplasty, bilateral

45527-00 Augmentation mammoplasty following mastectomy, unilateral

45527-01 Augmentation mammoplasty following mastectomy, bilateral

...

## RECONSTRUCTION

## 1756

## Reconstruction procedures on breast

45539-00 Reconstruction of breast with insertion of tissue expander

45530-02 Reconstruction of breast using flap

Includes: deep inferior epigastric:

• artery [DIEA] flap

• perforator [DIEP] flap

free trans rectal abdominus myocutaneous [TRAM] flap

gluteal artery flap (inferior) (superior)

myocutaneous flap

omental flap

pedicle flap

repair of secondary cutaneous defect by suture

subcutaneous tissue and fat flap

## Code also when performed:

- insertion of prosthesis (45527 [1753])
- microsurgical anastomosis of blood vessels (see block [1695])
- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])
- reconstruction of nipple or areola (45545 [1757])
- repair of secondary defect:
- \*abdominal wall (muscle) (30403-05 [1000])
- by graft see Alphabetic Index: Graft/by site or type
- muscle, by flap (45009-01 [1672])
- noncutaneous, by suture see Alphabetic Index: Suture/by site

#### 45533-00 Reconstruction of breast using breast sharing technique, first stage

Includes: breast reduction

split skin graft to pedicle of flap

tissue flap

transfer of complex skin and breast

## 45536-00 Reconstruction of breast using breast sharing technique, second stage

**Includes:** closure of donor site

division of pedicle insetting of breast flap

#### 45534-00 Reconstruction of breast using autologous fat graft

Includes: harvesting and preparation of adipocytes

## 45527-02 Reconstruction of breast using permanent prosthesis

**Includes:** following mastectomy

### 45530-03 Reconstruction of breast using free [microsurgical] flap

#### **Includes:** deep inferior epigastric:

- artery [DIEA] flap
- perforator [DIEP] flap

free flap:

- myocutaneous
- perforator
- transverse rectus abdominis myocutaneous [TRAM]

insertion of prosthesis

gluteal artery flap (inferior [iGAP]) or (superior [sGAP])

microvascular anastomosis (artery and/or vein) repair of secondary cutaneous defect by suture

## Code also when performed:

- nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])
- reconstruction of nipple or areola (45545 [1757])
- repair of secondary defect:
- abdominal wall (muscle) (30403-05 [1000])
- by graft see Alphabetic Index: Graft/by site or type
- muscle, by flap (45009-01 [1672])
- noncutaneous, by suture see Alphabetic Index: Suture/by site

## 45530-04 Reconstruction of breast using pedicled flap

## **Includes:** insertion of prosthesis

latissimus dorsi flap

microvascular anastomosis (artery and/or vein)

myocutaneous flap omental flap pedicled flap: • myocutaneous

• transverse rectus abdominis myocutaneous [TRAM]

repair of secondary cutaneous defect by suture

subcutaneous tissue and fat flap

```
Code also when performed:
             • nerve repair (39300-00, 39306-00, 39315-00, 39318-00 [83])
             • reconstruction of nipple or areola (45545 [1757])
             • repair of secondary defect:
                 • abdominal wall (muscle) (30403-05 [1000])
                 • by graft — see Alphabetic Index: Graft/by site or type
• muscle, by flap (45009-01 [1672])
                 • noncutaneous, by suture — see Alphabetic Index: Suture/by site
             Reconstruction of breast, not elsewhere classified
96279-00
             Therapeutic mammoplasty NOS
             Includes: with glandular remodelling
             Code also when performed:
             • excision of lesion of breast (31500-00 [1744])
ACHI Alphabetic Index
Α
Administration (around) (into) (local) (of) (therapeutic agent) NEC — code to block [1920] with extension -19
- type of agent — see also Administration/indication OR Administration/specified site
- - 5-FU (fluorouracil) 42824-01 [251]
- - acetylcysteine — code to block [1920] with extension -04
--- breast (for reconstruction) 45534-00 [1756]
- - adipose-derived stem cells 14203-01 [1906]
- - antivenom — code to block [1920] with extension -04
- - - breast (for reconstruction) 45534-00 [1756]
- - bacteriophage — code to block [1920] with extension -11
D
DIEA (deep inferior epigastric artery) flap, for breast reconstruction 45530-0245530-03 [1756]
DIEP (deep inferior epigastric perforator) flap, for breast reconstruction 45530-0245530-03 [1756]
F
Flap (repair)
- for
- - burn — see Flap/by site
- - reconstruction of breast 45530-02 [1756] see Reconstruction/breast/with/flap
- breast, (tissue) skin — see Flap/skin/by type
-- for reconstruction of breast 45530-02 [1756]
   skin - see Flap/skin/by type
- buccinator — see Flap/myocutaneous
- free
          nstruction of breast 45530-02 [1756]
- - innervated 45562-01 [1674]
- island
-- for reconstruction of breast 45530-02 [1756]
- - with
- - - neurovascular pedicle (innervated) 45563-01 [1673]
- muscle 45009-01 [1672]
                                5530-02 [1756]
```

- - with reoperation on sternum (for dehiscence or infection) 38466-00 [1379]

30-02 [1756]

- myocutaneous 45003-01 [1671]

- - delay (of) 45015-01 [1671]

```
- - free
- - - innervated 45562-01 [1674]
- - - noninnervated 45562-00 [1674]
- - island — see Flap/island
- - revision — see block [1686]
- omentum, omental
        construction of breast 45530-02 [1756]
- - - closure of vesicovaginal fistula
- - - - abdominal approach 37029-01 [1105]
- - - reoperation on sternum (for dehiscence or infection) 38466-00 [1379]
- pedicle, tubed — see also-block [1654]
             truction of breast 45
- periodontal (1 to 8 teeth) 97232-00 [456]
Insertion
- prosthesis, prosthetic device
- - breast (permanent)
- - - for reconstruction 45527-02 [1756]
- - - bilateral 45528-00 [1753]
- - - - with removal of tissue expander 45542-00 [1758]
   -- following mastectomy 45527-01 [1753]
- - - unilateral 45524-00 [1753]
- - - - with removal of tissue expander 45542-00 [1758]
    - following mastectomy 45527-00 [1753]
- - button (nasal septum) 41907-00 [371]
Lipofilling breast (for reconstruction) 45534-00 [1756]
    east 90660-00 [1602]
Lipolysis (suction assisted) — see Liposuction
Lipomodelling breast (for reconstruction) 45534-00 [1756]
Liposuction 45584-00 [1666]
M
Mammoplasty
- augmentation (bilateral) 45528-00 [1753]
- - by injection into breast 90723-01 [1741]
-- following mastectomy 45527-01 [1753]
- - unilateral 45524-00 [1753]
- - - by injection into breast 90723-00 [1741]
    following mastectomy 45527-00 [1753]
- reduction (bilateral) 45522-01 [1754]
- - for reconstruction by breast sharing technique 45533-00 [1756]
- - with nipple (areola)
- - - reconstruction (with flap) (with graft) 45520-03 [1754]
- - - repositioning 45520-01 [1754]
- - unilateral 45522-00 [1754]
- - - for reconstruction by breast sharing technique 45533-00 [1756]
- - - with nipple (areola)
- - - reconstruction (with flap) (with graft) 45520-02 [1754]
- - - repositioning 45520-00 [1754]
- therapeutic (batwing) (crescent) (round block) NEC 96279-00 [1756]
Mammotomy 31551-00 [1742]
R
Reconstruction
- breast (batwing) (crescent) (round block) NEC 96279-00 [1756]
- - by breast sharing technique
```

```
- - - 1st stage 45533-00 [1756]
```

- - 2<sup>nd</sup> stage 45536-00 [1756]
- - with
- - autologous fat graft 45534-00 [1756]
- - flap<del>-45530-</del>02 **[1756]**
- - - free (microsurgical) 45530-03 [1756]
- - - pedicled 45530-04 [1756]
- - insertion of tissue expander 45539-00 [1756]
- - prosthesis (permanent) 45527-02 [1756]
- - areola (with flap) (with graft) 45545-01 [1757]

#### Т

TRAM (transverse rectus abdominis myocutaneous) (free trans rectus abdominus myocutaneous) flap, for breast reconstruction 45530-02 [1756]

- free, for reconstruction of breast (microsurgical) 45530-03 [1756]
- pedicled, for reconstruction of breast 45530-04 [1756]

Transanal endoscopic microsurgery (TEMS) 32099-00 [933]

• • •

## **Transfer**

... - tissue

- for reconstruction of breast 45530-02 [1756]
- - innervated 45562-01 [1674]
- - noninnervated 45562-00 [1674]
- - subcutaneous and fat flap for reconstruction of breast 45530-04 [1756]
- zygote intrafallopian (ZIFT) 13215-02 [1297]

## 12.4 Craniostenosis

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## PLASTIC PROCEDURES ON BONE

## **REPAIR**

## 1711

#### Correction of skull deformity

Includes: bone graft

*Excludes:* frontal bone advancement (45782, 45785 [1710])

procedures for craniostenosis (40115 00, 40118 00 40119 00 [1718])

reconstruction of glenoid fossa, zygomatic arch and temporal bone (45788-00 [1717])

reconstruction of orbital cavity (45590, 45593 [1716]) total cranial vault reconstruction (45785-03 [1717])

45773-00 Periorbital correction of Treacher Collins syndrome

Bilateral reconstruction of lateral and inferior portions of orbit

Includes: bone:

flap (skull calvaria)graft (iliac) (rib)

45776-00 Intracranial correction of orbital dystopia

Total repositioning of one orbit for dystopia, intracranial

. . .

#### OTHER PROCEDURES

## 1718 Other procedures for craniostenosis Includes: craniectomy: • lambdoid • linear • parasagittal • sagittal • strip frontal bone reshaping by osteotomy and recession occipital osteotomy and advancement opening of cranial suture temporoparietal osteotomy and expansion Performed also for craniosynostosis Excludes: frontal bone advancement (45782, 45785 [1710]) total cranial vault reconstruction (45785-03 [1717]) 40115-00 Other procedure for craniostenosis, 1 suture 40118-00 Other procedure for craniostenosis, 2 or more sutures 40119-00 Other procedure for craniostenosis Includes: craniectomy: • lambdoid • linear • parasagittal sagittal strip frontal bone reshaping by osteotomy and recession occipital osteotomy and advancement opening of cranial suture temporoparietal osteotomy and expansion Performed also for craniosynostosis. Excludes: frontal bone advancement (45782, 45785 [1710]) total cranial vault reconstruction (45785-03 [1717]) **ACHI Alphabetic Index**

#### Α

## Advancement

- bone
- - occipital
- - for craniostenosis (1 suture) 40115 0040119-00 [1718]
- - - with surgery to frontal or temporoparietal region 45785-03 [1717]
- --- 2 or more sutures 40118-00 [1718]
- --- with surgery to frontal or temporoparietal region 45785-03 [1717]
- - orbital

## C

## Craniectomy NEC 90007-01 [28]

- as operative approach omit code
- for
- - craniostenosis (1-suture) (lambdoid) (linear) (parasagittal) (sagittal) (strip) 40115-0040119-00 [1718]
- - infection of skull 39906-00 [13]

## E

```
Expansion
- temporoparietal bone
- - for craniostenosis (1 suture) 40115-0040119-00 [1718]
   2 or more sutures 40118-00 [1718]
- tissue (skin) (soft tissue) (subcutaneous tissue)
Intervention
Note: Terms listed under the lead term 'Intervention' are mainly split by anatomical site or condition; Intervention/for specified
      condition and Intervention/specified site.
      Where an eponym is used to describe an intervention, or a type of intervention is specified — see specified intervention(s)
      performed or the lead term Procedure.
- for specified condition
- - craniostenosis 40119-00 [1718]
- - - - frontal bone advancement — see Advancement/bone/frontal
- - - - total cranial vault reconstruction 45785-03 [1717]
- - craniosynostosis — see Intervention/for specified condition/craniostenosis
0
Opening
- cranial suture, for craniostenosis (1 suture) 40115-0040119-00 [1718]
- 2 or more sutures 40118-00 [1718]
Operation - see Procedure
Osteotomy NEC 90569-00 [1556]
- frontal (repositioning)
- - for craniostenosis
- - - with surgery to occipital or temporoparietal region 45785-03 [1717]
- - - advancement — see Advancement/bone/frontal
--- recession (1-suture) 40115-0040119-00 [1718]
     2 or more sutures 40118-00 [1718]
- - with surgery to occipital or temporoparietal region 45785-03 [1717]
- occipital (advancement) (repositioning)
- - for craniostenosis (1 suture) 40115-0040119-00 [1718]
- - - with surgery to frontal or temporoparietal region 45785-03 [1717]
    2 or more sutures 40118-00 [1718]
- - with surgery to frontal or temporoparietal region 45785-03 [1717]
- temporoparietal (bilateral) (expansion) (repositioning)
- - for craniostenosis (1 suture) 40115-0040119-00 [1718]
- - - with surgery to frontal or occipital regions 45785-03 [1717]
               sutures 40118-00 [1718]
- - with surgery to frontal or occipital regions 45785-03 [1717]
P
Procedure — see also Intervention OR specified intervention(s) performed
- for
```

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

nosis (1 suture) 40115-00 [1718]

total cranial vault reconstruction 45785-03 [1717]

craniosynostosis see Procedure/for/craniostenosis

2 or more sutures 40118-00 [1718]

## R

## Recession

- bone
- - frontal
- - by osteotomy
- ---- for craniostenosis (1 suture) 40115-0040119-00 [1718] ---- with surgery to occipital or temporoparietal region 45785-03 [1717]
- ----2 or more sutures 40118-00 [1718]
- - with surgery to occipital or temporoparietal region (for craniostenosis) 45785-03 [1717]

# 13. Musculoskeletal system and connective tissue

# 13.1 Thoracic interventions

See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 15**

## PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580)

## **NECK AND THORAX**

## **EXCISION**

1375	Ostectomy of rib
48406-11	Partial ostectomy of rib
	Excludes: with reconstruction (38858-00 [1378])
48409-11	Partial ostectomy of rib with internal fixation
	Excludes: with reconstruction (38858-00 [1378])
34136-00	Partial ostectomy of first rib for decompression of thoracic outlet
48406-12	Total ostectomy of rib
	Excludes: with reconstruction (38858-00 [1378])
48409-12	Total ostectomy of rib with internal fixation
	Excludes: with reconstruction (38858-00 [1378])
34139-00	Total ostectomy of cervical rib for decompression of thoracic outlet
1376	Other excision procedures on neck or thorax

38857-00 Resection of chest wall or sternum

Excludes: with reconstruction (38858-00 [1378])

. . .

## REDUCTION

1377 Reduction of fracture/dislocation of neck or thorax

*Includes:* internal fixation

. . .

90610-01 Open reduction of rib

Excludes: plating of multiple ribs (38859-00 [1378])

. . .

#### **REPAIR**

1378 Repair procedures on neck or thorax

90596-00 Rewiring of sternum

Excludes: that involving reopening of mediastinum (38466-00 [1379])

38858-00 Resection of chest wall, sternum or rib, with reconstruction

38859-00 Plating of multiple ribs

**Includes:** open reduction

**Note:** Performed for flail (chest) segment.

# 13.2 Shoulder / humerus / forearm and elbow interventions

See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 15**

# PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580) SHOULDER

Includes: acromioclavicular joint

clavicle scapula

scapulothoracic joint sternoclavicular joint

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## **EXCISION**

. . .

## 1400 Other excision on shoulder

48900-00 Excision of coraco-acromial ligament

**Excludes:** that with:

decompression of subacromial space (48903-00 [1400])
repair of rotator cuff (48906-00, 48909-00 [1404])

48900-01 Excision of calcium deposit from rotator cuff

Excludes: that with repair of rotator cuff (48906-00 [1404])

## 48980-00 Excision of lesion of shoulder girdle

Excision of ossifying lesion of shoulder girdle

**Note**: Performed for ossification [ossificans]:

heterotopicmyositispost traumatic.

Excludes: that with wide excision of soft tissue involving scapula (50221-03 [1400], 50224 [1405])

#### 48951-00 Arthroscopic decompression of subacromial space

Arthroscopic acromioplasty

Includes: acromionectomy

bursectomy

division of coraco-acromial ligament

excision of:

acromioclavicular jointcoraco-acromial ligament

· distal clavicle

Excludes: that with repair rotator cuff (48960-00 [1405])

#### REDUCTION

. . .

1402

## Reduction of dislocation of clavicle, scapula or shoulder

47003-00 Closed reduction of dislocation of clavicle

Closed reduction of dislocation of:

acromioclavicular joint

• sternoclavicular joint

Excludes: repair of acromioclavicular or sternoclavicular joint dislocation (47007-00, 47007-01 [1404])

## 47006-00 Open reduction of dislocation of clavicle

Open reduction of dislocation of:

- acromioclavicular joint

• sternoclavicular joint

#### 47009-00 Closed reduction of dislocation of shoulder

Closed reduction of dislocation of glenohumeral joint

. . .

## 1404 Other repair procedures on shoulder

Code also when performed:

- bone graft (48239-00, 48242-00 [1569])
- internal fixation (47921-00 [1554])

## 48957-00 Arthroscopic stabilisation of shoulder

Includes: labral repair or reattachment

**Note:** Performed for recurrent dislocation or multidirectional instability.

Code also when performed:

• removal of internal fixation (47927-00, 47930-00 [1554])

Excludes: stabilisation of acromioclavicular or scapulothoracic joint (47792-00 [1404])

#### 48930-00 Stabilisation of shoulder

Includes: labral repair or reattachment

Note: Performed for recurrent dislocation or multidirectional instability.

Code also when performed:

• removal of internal fixation (47927-00, 47930-00 [1554])

Excludes: stabilisation of acromioclavicular or scapulothoracic joint (47792-00 [1404])

47792-00 Stabilisation of acromioclavicular or scapulothoracic joint

Includes: arthrotomy

joint debridement

local tendon transfer, lengthening or release

osteotomy

...

47007-00 Arthroscopic repair of acromioclavicular or sternoclavicular joint dislocation

Includes: ligament augmentation

tendon transfer

47007-01 Open repair of acromioclavicular or sternoclavicular joint dislocation

**Includes:** ligament augmentation

tendon transfer

47967-01 Shoulder function restoration by muscle and tendon transfer

Includes: dissection of neurovascular pedicle

Code also when performed:

• biceps tenodesis (48972 [1404])

48972-00 Arthroscopic tenodesis of biceps

48972-01 Tenodesis of biceps

90533-00 Other repair of shoulder

. . .

#### RECONSTRUCTION

## 1405 Reconstruction procedures on shoulder

48960-00 Arthroscopic reconstruction of shoulder

Includes: acromioplasty

bursectomy

division of coraco-acromial ligament

excision of:

- acromioclavicular joint
- · coraco-acromial ligament
- distal clavicle rotator cuff repair

Code also when performed:

• biceps tenodesis (48972 [1404]47963-01 [1572])

## **CHAPTER 15**

# PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580) HUMERUS AND ELBOW EXCISION

. . .

1412 Other ex

Other excision procedures on humerus or elbow

• • •

96261-00 Excision of prosthesis of humerus

Removal of humeral prosthesis without replacement

Includes: debridement

insertion or removal of spacer:

antibioticbeadscementplastictissue sampling

Excludes: that with revision (48921-00, 48924-00 [1406])

48983-00 Excision of lesion of elbow

Excision of ossifying lesion of elbow

*Note:* Performed for ossification [ossificans]:

- heterotopic • myositis
- post traumatic.

. . .

## 1415 Closed reduction of dislocation of humerus or elbow

. . .

47024-00 Closed reduction of dislocation of proximal radio-ulnar radioulnar joint

47024-01 Closed reduction of dislocation of proximal radio ulnar radioulnar joint with internal fixation

1416 Open reduction of dislocation of humerus or elbow

...

47027-00 Open reduction of dislocation of proximal radio-ulnar radioulnar joint

47027-01 Open reduction of dislocation of proximal radio-ulnar radioulnar joint with internal fixation

## **REPAIR**

٠..

## 1418 Other repair procedures on humerus or elbow

. . .

49121-05 Osteoplasty of elbow

50405-00 Flexorplasty of elbow

Tendon transfer to elbow

47967-00 Elbow function restoration by muscle and tendon transfer

Includes: dissection of neurovascular pedicle

Code also when performed:

• biceps tenodesis (48972 [1404])

49103-01 Arthroscopic stabilisation of elbow

49103-00 Stabilisation of elbow

49104-00 Stabilisation or repair of ligament of elbow

Includes: procurement of tendon for graft through same incision

tendon graft

**Note:** Performed for acute or chronic instability.

47953-00 Repair of distal biceps [brachii] tendon

Excludes: biceps tenodesis (48972 [1404])

that with any other musculoskeletal procedure at same site — omit code

49106-00 Arthrodesis of elbow

Replacement of radial head of elbow Unicompartmental elbow replacement

. .

### **FOREARM**

## **EXCISION**

46342-00 Synovectomy of distal radio ulnar radioulnar joint

48406-03 Ostectomy of radius

. . .

96261-01 Excision of prosthesis of radius

Removal of radial prosthesis without replacement

Includes: debridement

insertion or removal of spacer:

- antibiotic
- beads
- cement
- plastic
- tissue sampling

**Excludes:** that with revision (49116-00, 49117-00 [1419])

49124-00 Excision of olecranon bursa

Includes: excision of bony prominence (ulna)

Excludes: that with any other joint procedure at same site — omit code

48986-00 Excision of lesion of forearm, not elsewhere classified

Excision of ossifying lesion of forearm

**Note:** Performed for ossification [ossificans]:

- heterotopic
- myositis
- post traumatic.

## REDUCTION

## 1427

## Closed reduction of fracture of radius

---

47385-00 Closed reduction of fracture of shaft of radius with dislocation

Includes: that for dislocation of:

- distal radio-ulnar radioulnar joint
- proximal radiohumeral joint

47385-02 Closed reduction of fracture of shaft of radius with dislocation and internal fixation

Includes: that for dislocation of:

- distal radio-ulnar radioulnar joint
- proximal radiohumeral joint

..

## 1428 Closed reduction of fracture of ulna or olecranon

. . .

47385-01 Closed reduction of fracture of shaft of ulna with dislocation

Includes: that for dislocation of:

- distal radio ulnar radioulnar joint
   proximal radiohumeral joint
- 47385-03 Closed reduction of fracture of shaft of ulna with dislocation and internal fixation

**Includes:** that for dislocation of:

distal radio ulnar radioulnar joint
proximal radiohumeral joint

. . .

## Open reduction of fracture of shaft of radius or ulna with dislocation

Includes: dislocation of:

- distal radio ulnar radioulnar joint
  proximal radiohumeral joint
- 47386-00 Open reduction of fracture of shaft of radius with dislocation

. . .

## 1433 Reduction of dislocation of radius or ulna

47024-02 Closed reduction of dislocation of distal radio-ulnar joint

**Excludes:** that with fracture of:

- radius (47385 [1427])
- ulna (47385 [1428])
- 47024-03 Closed reduction of dislocation of distal radio-ulnar radioulnar joint with internal fixation

Excludes: that with fracture of:

- radius (47385 [1427])
- ulna (47385 **[1428]**)
- 47027-02 Open reduction of dislocation of distal radio-ulnar-radioulnar joint

Excludes: that with fracture of:

- radius (47386-00, 47386-01 **[1432]**)
- ulna (47386-02, 47386-03 **[1432]**)
- 47027-03 Open reduction of dislocation of distal radio-ulnar radioulnar joint with internal fixation

Excludes: that with fracture of:

- radius (47386-00, 47386-01 [**1432**])
- ulna (47386-02, 47386-03 [1432])

# 13.3 Hand and wrist interventions

## See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 15**

## PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360-1580)

#### HAND, WRIST

## **INCISION**

1440

Incision procedures on muscle, tendon or fascia of hand

..

46363-00 Release of tendon sheath of hand

Incision of tendon sheath of:

- hand
- wrist

Release of:

- tendon sheath of wrist
- trigger finger

Includes: retinaculum reconstruction

synovectomy of:

- abductor pollicis longus tendons
- extensor pollicis brevis

**Note:** Performed for: stenosing tenovaginitis

- de Quervain's tenosynovitis
- stenosing tenovaginitis.

47981-02 Decompression fasciotomy of hand

Decompression fasciotomy of interosseous muscle space of hand

46366-00 Subcutaneous Percutaneous fasciotomy for Dupuytren's contracture

**Includes:** manipulation

that by needle or chemical method

46381-00 Release of interphalangeal joint capsule for Dupuytren's contracture

Code also when performed:

palmar-fasciotomy or fasciectomy (46366-00 [1440], 46369-00, 46372-00, 46375-00, 46378-00 see block [1447], 46387-00, 46390-00, 46393-00 [1471])

...

1443 Incision procedures on wrist

Excludes: incision of tendon sheath of wrist (46363-00 [1440])

49218-00 Arthroscopy of wrist

Arthroscopy of carpometacarpal joint:

- digit
- thumb

Excludes: that with:

- biopsy (49218-01 **[1444]**)
- debridement (49224-00 **[1451]**)
- synovectomy (49224-01 **[1451]**)

## **EXCISION**

1444

**Biopsy of wrist** 

49218-01 Arthroscopic biopsy of wrist

Arthroscopic biopsy of carpometacarpal joint:

- digit
- thumb

Synovectomy of joint of hand

46336-00 Synovectomy of interphalangeal joint of hand

46336-01 Synovectomy of metacarpal joint

Excludes: that with excision of osteophyte of metacarpal base (46493-00 [1450])

46342-01 Synovectomy of carpometacarpal joint

Synovectomy of tendon of hand or wrist

. . .

1446

46339-00 Synovectomy of flexor or extensor tendon of hand or wrist

Synovectomy of digital extensor tendon of hand, distal to wrist flexor or extensor tendon of wrist

Includes: reconstruction of flexor or extensor retinaculum

release of median nerve and carpal tunnel

removal of tendon nodules

tenolysis tenoplasty

**Note:** Performed for:

- inflammatory: • arthritis
- tenosynovitis
- non-inflammatory tenosynovitis
- post traumatic synovitis.

• • •

#### **EXCISION**

. . .

#### 1447

#### **Fasciectomy for Dupuytren's contracture**

**Includes:** dissection of nerves

Code also when performed:

- fasciotomy (46366-00 [**1440**])
- local skin flap repair (46384-00 [1467])
- release of interphalangeal joint capsule (46381-00 [1440])
- Z-plasty (46384-00 [1467])

Excludes: that for revision (46387-00, 46390-00, 46393-00, 46394-00, 46395-00 [1471])

46369-00 Palmar fasciectomy-Fasciectomy for Dupuytren's contracture

Palmar fasciectomy NOS

46372-00 Palmar fasciectomy for Dupuytren's contracture involving 1 digit ([ray])

46375-00 Palmar fasciectomy for Dupuytren's contracture involving 2 digits ([rays])

46378-00 Palmar fasciectomy-Fasciectomy for Dupuytren's contracture involving 3 or more digits ([rays])

46379-00 Fasciectomy for Dupuytren's contracture involving 4 digits [rays]

46380-00 Fasciectomy for Dupuytren's contracture involving 5 digits [rays]

...

# 1450

### Other excision procedures on hand

96261-02

Excision of prosthesis of hand or finger

Removal of interphalangeal joint prosthesis without replacement

Includes: debridement

insertion or removal of spacer:

antibioticbeadscement

• plastic tissue sampling

**Excludes:** that with revision (96261-0346322-00 [1471])

46493-00 Excision of osteophyte of metacarpal base of hand

Excision of boss of metacarpal base of hand

Includes: excision of ganglion

synovectomy

46365-00 Excision of lesion of joint of hand

**Note:** Performed for rheumatoid nodule.

1451 Other excision procedures on wrist

49224-00 Arthroscopic debridement of wrist

49224-01 Arthroscopic synovectomy of wrist

Excludes: synovectomy of tendon of wrist (46339-00 [1446])

49239-00 Excision of pisiform or hook of hamate

Includes: release of ulnar nerve

48406-14 Ostectomy of carpal bone, not elsewhere classified

Excludes: pisiform or hook of hamate (49239-00 [1451])

that with joint replacement of wrist (46324 00 [1468])

48409-14 Ostectomy of carpal bone with internal fixation

Excludes: that with joint replacement of wrist (46324-00 [1468])

. . .

#### **REPAIR**

. . .

## 1466 Repair of tendon of hand or wrist

Repair of tendon of wrist

46417-00 Transfer of tendon of hand

**Opponensplasty** 

Transplantation of tendon of hand

46426-00 Primary repair of flexor tendon of hand, proximal to A1 pulley

46429-00 Secondary repair of flexor tendon of hand, proximal to A1 pulley

46432-00 Primary repair of flexor tendon of hand, distal to A1 pulley

46434-00 Delayed repair of flexor tendon of hand or wrist

Secondary repair of flexor tendon of hand, distal or proximal to A1 pulley

**Includes:** tenolysis

46435-00 Secondary repair of flexor tendon of hand, distal to A1 pulley

46420-00 Primary repair of extensor tendon of hand or wrist

46423-00 Secondary Delayed repair of extensor tendon of hand or wrist

Includes: tenolysis

1467

Other repair procedures on hand

. . .

46324-01 Arthroplasty of carpometacarpal joint of thumb

Interposition prosthetic replacement of carpometacarpal joint of thumb

Trapezium replacement arthroplasty

**Includes:** ligament or tendon transfers

rebalancing procedures

47963-02 Repair of tendon of hand, not elsewhere classified

Tenoplasty of hand NOS

. . .

46492-00 Correction of contracture of digit of hand

Includes: soft tissue NOS

**Excludes:** correction of Dupuytren's contracture:

• fasciectomy (46369-00, 46372-00, 46375-00, 46378-00see block [1447])

• fasciotomy (46366-00 [1440])

• release of joint capsule (46381-00 **[1440]**)

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## 1468

#### Other repair procedures on wrist

. . .

49200-00 Arthrodesis of radiocarpal joint

Arthrodesis of wrist NOS

Includes: bone graft

internal fixation

procurement of graft material through same incision

Code also when performed:

• procurement of graft material through separate incision (47726-00 [1563])

49213-00 Arthrodesis of distal radioulnar joint

Sauve-Kapandji procedure

Includes: fusion

osteotomy

soft tissue reconstruction

Excludes: distal radioulnar joint reconstruction (46345-00 [1469])

49230-00 Arthroplasty of carpal bone of wrist

Total, hemi or interposition prosthetic replacement of carpal bone of wrist

Includes: bone graft

ligament or tendon rebalancing procedure

procurement of graft material through same incision

wrist fusion

Excludes: excision arthroplasty of carpal bone of wrist (49233-00 [1468])

prosthetic interposition replacement of carpometacarpal joint of thumb (46324-01 [1467])

revision arthroplasty of wrist (49210-00 [1472]) trapezium replacement arthroplasty (46324-01 [1467])

49233-00 Excision arthroplasty of carpal bone of wrist

Includes: partial scaphoid

proximal hamate

radial or ulnar styloidectomy

#### Excludes: distal radioulnar joint reconstruction (46345-00 [1469])

#### 46324-00 Arthroplasty of carpal bone

Replacement of carpal bone using adjacent tendon or other soft tissue

Resection arthroplasty of carpal bone

Includes: carpectomy

formation of a tendon sling/suspensionplasty

synovectomy

tendon transfer or realignment

trapeziectomy with abductor pollicis longus (APL) suspensionplasty

#### 49206-00 Excision arthroplasty of wrist

Arthrectomy of wrist

Removal of wrist prosthesis without replacement

Includes: debridement

insertion or removal of spacer:

- antibiotic
- · beads
- cement
- plastic

proximal carpectomy styloidectomy synovectomy tissue sampling

**Excludes:** excision arthroplasty of carpal bone of wrist (49233-00 [1468])

that with revision (49210-00, 49211-00 [1472])

Arthroplasty of wrist 49209-00

Hemiarthroplasty of wrist

Prosthetic replacement of wrist or distal radioulnar joint

Total joint replacement of wrist

Includes: ligament or tendon realignment

Excludes: excision arthroplasty of wrist (49206-00 [1468])

90542-00 Other repair of wrist

#### RECONSTRUCTION

#### 1469 Reconstruction procedures on hand or wrist

#### 46345-00 Reconstruction of distal radio-ulnar radioulnar joint

Stabilisation of distal radio-ulna joint

Resection arthroplasty of distal radioulnar joint of hand

Includes: joint stabilisation excision of distal ulna

**fusion** 

ligamentous arthroplasty

ligament or tendon reconstruction

synovectomy

#### Stabilisation of distal radioulnar joint 49236-00

Stabilisation of soft tissue of distal radioulnar joint

**Includes:** ligament or tendon graft

procurement of graft

triangular fibrocartilage complex [TFCC] repair or reconstruction

Excludes: with reconstruction (46345-00 [1469])

50396-01 Amputation of phalanx of hand with ligament or joint reconstruction

> Note: Performed for:

- · congenital abnormality
- duplication of digits.

Reconstruction of wrist, not elsewhere classified 49215-01

> Includes: repair of: • capsule

• ligament

Reconstruction procedures on wrist

Reconstruction of wrist

Includes: repair of:

- capsule
- ligament
- triangular fibrocartilage complex (TFCC)

#### **REVISION**

1471 Revision procedures on hand or finger

46483-00 Revision of amputation stump of hand or finger

Reamputation of amputation stump of hand or finger

96261-03 Revision arthroplasty of hand or finger

Includes: removal of prosthesis

46322-00 Revision arthroplasty of hand or finger

Revision arthroplasty or hemiarthroplasty of interphalangeal or metacarpal joint of hand

**Includes:** bone graft

ligament reconstruction or realignment

procurement of graft material through same incision

removal of prosthesis

synovectomy

tendon reconstruction or transfer

Revision of palmar Revision of fasciectomy for Dupuytren's contracture involving 1 digit ([ray]) 46387-00

**Includes:** dissection of nerves

neurolysis

46390-00 Revision of palmar Revision of fasciectomy for Dupuytren's contracture involving 2 digits ([rays])

**Includes:** dissection of nerves

neurolysis

46393-00 Revision of palmar-Revision of fasciectomy for Dupuytren's contracture involving 3 digits [rays]er more

digits (rays)

**Includes:** dissection of nerves

neurolysis

46394-00 Revision of fasciectomy for Dupuytren's contracture involving 4 digits [rays]

**Includes:** dissection of nerves

neurolysis

46395-00 Revision of fasciectomy for Dupuytren's contracture involving 5 digits [rays]

Includes: dissection of nerves

neurolysis

...

#### **OTHER PROCEDURES**

. . .

1474 Procedures for mucous cyst or ganglion of hand or wrist

Excludes: with excision of osteophyte of metacarpal base of hand (46493-00 [1450])

46495-00 Excision of mucous cyst of digit of hand

46494-00 Excision of ganglion of hand

Ganglionectomy of hand NOS

## 13.4 Pelvis and Hip

See also <u>13.9 Musculoskeletal indexing</u><del>13.9 Musculoskeletal indexing</del>.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 15**

## PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360-1580)

#### PELVIS, HIP

Includes: femur, proximal and shaft

sacro-iliac sacroiliac joint

thigh

• • •

#### **INCISION**

1478 Osteotomy of pelvis, hip or femur

Includes: wedge osteotomy

48424-00 Osteotomy of pelvis

Includes: bone graft

procurement of graft material through same incision

48427-00 Osteotomy of pelvis with internal fixation

Includes: bone graft

procurement of graft material through same incision

48426-00 Osteotomy of femur, not elsewhere classified

Osteotomy and distillation of greater trochanter

Includes: bone graft

internal fixation

procurement of graft material through same incision

that for proximal or mid femur

48424-01 Osteotomy of proximal femur

48427-01 Osteotomy of proximal femur with internal fixation

#### 48424-02 Osteotomy of mid femur

50394-00 Multiple peri-acetabular osteotomies

Includes: internal fixation

**Note:** Performed for acetabular dysplasia.

48427-02 Osteotomy of mid femur with internal fixation

1479

Reduction and fixation of fracture of pelvis or femur

. . .

47513-00 Internal fixation of disruption of sacro-iliac sacroiliac joint

Excludes: that with reduction of fracture (47486-00, 47489, 47501-00, 47528-01, 47531-00 [1486])

. . .

1481 Other incision of hip

...

47982-00 Forage of neck or head of femur

Drill decompression of neck or head of femur, or both

Forage of neck and head of femur

**Includes:** pressure testing

47964-00 Arthroscopic iliopsoas tenotomy

Excludes: that with any other hip procedure in Chapter 15 — omit code

47964-01 Iliopsoas tenotomy

Excludes: that with any other hip procedure in Chapter 15 — omit code

..

#### REDUCTION

186	Doduction	of fracture	of polyic	or familie

47486-00 Open reduction of fracture of pelvis with internal fixation of anterior segment

Includes: diastasis of pubic symphysis

47489-00 Open reduction of fracture of pelvis with internal fixation of posterior segment

Includes: sacro iliae sacroiliae joint

47489-01 Open reduction of pelvic-fracture of pelvis with internal fixation of anterior and posterior segments

Open reduction and internal fixation of both anterior and posterior ring segments

Includes: sacroiliac joint

47501-00 Open reduction of fracture of acetabulum with internal fixation

Includes: capsular stabilisation

capsulotomy

fixation of posterior wall fracture

ostectomy osteotomy

Note: Performed for combined column T-Type, transverse, anterior column or posterior hemitransverse fractures

of acetabulum.

Excludes: that with open reduction fracture of femoral head (47514-00 [1486])

47516-01 Closed reduction of fracture of femur

Closed reduction of fracture of shaft of femur

. . .

47528-00 Open reduction of fracture of femur

Open reduction of fracture of shaft of femur

Excludes: that with open reduction posterior wall fracture of acetabulum (47514-00 [1486])

47528-01 Open reduction of fracture of femur with internal fixation

Open reduction of fracture of shaft of femur with internal fixation

Includes: cross fixation

intramedullary fixation

**Excludes:** that for fracture:

condyle region (47537-00 [1500])
head (of) femur (47519-00 [1479])
neck (of) femur (47519-00 [1479])
pertrochanteric femur (47519-00 [1479])
proximal femur (47519-00 [1479])

subcapital femur (47519-00 [1479])
subtrochanteric femur (47519-00 [1479])

• trochanteric femur (47519-00 [1479])

47514-00 Open reduction of posterior wall fracture of acetabulum and femoral head fracture with internal fixation

. .

#### 1487 Reduction of dislocation of hip

**Includes:** that for dislocation of hip prosthesis

47048-00 Closed reduction of dislocation of hip

Closed reduction of dislocation of hip prosthesis

47051-00 Open reduction of dislocation of hip

Includes: internal fixation

. . .

#### **REPAIR**

1491 O

Other repair procedures on pelvis or hip

49300-00 Arthrodesis of sacro-iliac sacroiliac joint

. . .

47955-00 Arthroscopic repair of gluteal or rectus femoris tendon

Includes: bursectomy

preparation of greater trochanter

47955-01 Repair of gluteal or rectus femoris tendon

Includes: bursectomy

preparation of greater trochanter

...

#### 50107-00 Stabilisation of hip

Includes: capsulorrhaphy internal fixation labrum repair of: • capsule

• ligament

96225-00 Arthroscopic repair of hip

Arthroscopic: microfracture of hip

• microfracture of hip

• repair labral tear

Arthroscopic repair labral tear

90552-00 Other repair of hip

. . .

49306-00 Arthrodesis of hip

48500-00 Epiphysiodesis of femur

Excludes: that for slipped capital femoral epiphysis (47983-00, 47984-00 [1493])

48506-00 Epiphysiodesis of femur and tibia and fibula

Excludes: that for slipped capital femoral epiphysis (47983-00, 47984-00 [1493])

#### **REVISION**

#### 1492 Revision arthroplasty of hip

#### 49372-00 Revision arthroplasty of hip

Revision or replacement [exchange] of hip joint device:

• acetabular component (cup) (liner) (shell)

• femoral component (head)

**Includes:** bone graft

internal fixation osteotomy

procurement of graft material through same incision

**Note:** Performed for:

• pelvic discontinuity

• periprosthetic fracture.

#### 49346-00 Revision of partial arthroplasty of hip

Revision of hemiarthroplasty of hip

Includes: replacement of:

• acetabular lining

• ceramic head

Excludes: conversion of hemiarthroplasty to total hip joint replacement (49324-00 [1492])

that with:

• anatomic specific allograft (49339-00, 49342-00, 49345-00 [1492])

• bone graft (49327-00, 49330-00, 49333-00 [1492])

#### 49324-00 Revision of total arthroplasty of hip

Conversion of hemiarthroplasty to total hip joint replacement

Partial revision of total hip replacement

Revision of total joint replacement of hip

Includes: removal of prosthesis

Excludes: that with:

- anatomic specific allograft (49339-00, 49342-00, 49345-00 [1492])

• bone graft (49327-00, 49330-00, 49333-00 [1492])

#### 49327-00 Revision of total arthroplasty of hip with bone graft to acetabulum

Conversion of hemiarthroplasty to total hip joint replacement with bone graft to acetabulum Revision of total joint replacement of hip with bone graft to acetabulum

Includes: procurement of bone graft

#### 49330-00 Revision of total arthroplasty of hip with bone graft to femur

Conversion of hemiarthroplasty to total hip joint replacement with bone graft to femur

Revision of total joint replacement of hip with bone graft to femur

Includes: procurement of bone graft 49333-00 Revision of total arthroplasty of hip with bone graft to acetabulum and femur Conversion of hemiarthroplasty to total hip joint replacement with bone graft to acetabulum and femur Revision of total joint replacement of hip with bone graft to acetabulum and femur Includes: procurement of bone graft 49339-00 Revision of total arthroplasty of hip with anatomic specific allograft to acetabulum Conversion of hemiarthroplasty to total hip joint replacement with anatomic specific allograft to acetabulum 49342-00 Revision of total arthroplasty of hip with anatomic specific allograft to femur Conversion of hemiarthroplasty to total hip joint replacement with anatomic specific allograft to femur Revision of total joint replacement of hip with anatomic specific allograft to femur 49345-00 Revision of total arthroplasty of hip with anatomic specific allograft to acetabulum and femur Conversion of hemiarthroplasty to total hip joint replacement with anatomic specific allograft to acetabulum and femur

Revision of total joint replacement of hip with anatomic specific allograft to acetabulum and femur

#### OTHER PROCEDURES

1493	Procedures for slipped capital femoral epiphysis
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**Includes:** internal fixation

47525-00 Closed reduction of slipped capital femoral epiphysis

47525-01 Open reduction of slipped capital femoral epiphysis

47983-00 Stabilisation of slipped capital femoral epiphysis

47984-00 Open subcapital realignment of slipped capital femoral epiphysis

## 13.5 Knee or leg interventions

See also 13.9 Musculoskeletal indexing13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### CHAPTER 15

#### PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580)

#### **KNEE JOINT, LEG**

#### APPLICATION, INSERTION, REMOVAL

1495 **V**0042

Immobilisation of fracture of fibula, patella or tibia

Nonsurgical treatment of fracture

Excludes: that with any other musculoskeletal procedure at same site — omit code

47543-00 Immobilisation of fracture of medial or lateral tibial plateau

*Includes:* application of bridging external fixator to plateau

47552-00 Immobilisation of fracture of medial and lateral tibial plateau

Includes: application of bridging external fixator to plateau

47561-00 Immobilisation by application of cast of fracture of shaft of tibia

. . .

1496 Other application, insertion or removal procedures on knee or leg

49584-00 Arthroscopic chondral, osteochondral or meniscal graft of knee

90551-00 Implantation of prosthetic device of leg

#### **INCISION**

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])

48424-06 Osteotomy of distal femur

48427-06 Osteotomy of distal femur with internal fixation

48422-00 Osteotomy of distal femur

Includes: internal fixation

Note: Performed to alter lower limb alignment or rotation (or both).

90555-00 Osteotomy of patella

48418-00 Osteotomy of tibia

**Includes:** excision of surrounding osteophytes

release of joint removal of bone synovectomy

48421-00 Osteotomy of tibia with internal fixation

**Includes:** excision of surrounding osteophytes

release of joint removal of bone synovectomy

48406-00 Osteotomy of fibula

48409-00 Osteotomy of fibula with internal fixation

• • •

1501 Other incision procedures on knee

49557-00 Arthroscopy of knee

Includes: lavage

Excludes: that with:

- biopsy (49557-01 **[1502]**)
- debridement (49558-00 [1503])
- excision of meniscal margin or plica (49557-02 [1503])
- meniscectomy (49560-03 [1503])
- synovectomy (49566-00 [1503])
- trimming of ligament (49560-01 [1503])

• •

49500-02 Removal of loose body of knee

Removal of foreign body of knee

Excludes: that with arthroscopy (49560-00 [1501])

49560-02 Arthroscopic lateral release of knee

Arthroscopic release of adhesions of knee

49578-00 Arthroscopic soft tissue or lateral release of knee

Arthroscopic release of adhesions of knee

*Excludes:* that with patellofemoral stabilisation (49503-01 **[1520]**)

49500-04 Release of capsule of knee

Release of adhesions of knee

#### **EXCISION**

. . .

49566-00 Arthroscopic synovectomy of knee

*Note:* Performed for neoplasia or inflammatory arthropathy.

49557-02 Arthroscopic excision of meniscal margin or plica of knee

49560-03 Arthroscopic meniscectomy of knee

**Note:** Performed for meniscus tear (nontraumatic) (traumatic).

Excludes: that with reconstruction (49542-00 [1522])

49590-00 Arthroscopic excision of ganglion, cyst or bursa of knee

96261-06 Arthroscopic notchplasty of knee

Excludes: that with arthroscopic:

- reconstruction of knee:
- NOS (49539-00 **[1522**])
- with repair of meniscus (49542-00 [1522])

. . .

#### 1505 Other excision procedures on knee or leg

49590-01 Excision of ganglion, cyst or bursa of knee

30114-00 Excision of Baker's cyst

49509-00 Synovectomy of knee

. . .

#### REDUCTION

1509 Closed reduction of fracture of tibia or fibulashaft of tibia or fibula

Excludes: closed reduction of fracture of tibial plateau (see block [1507])

47564-00 Closed reduction of fracture of shaft of tibia

47568-00 Closed reduction of fracture of distal, proximal or shaft of tibia

Includes: that for intra-articular fracture of tibia

Excludes: that for fracture of shaft of tibia with internal fixation (47566-00 [1509])

47566-00 Closed reduction of fracture of shaft of tibia with internal fixation

Includes: cross fixation

intramedullary fixation

that for intra-articular fracture of tibia

47567-00 Closed reduction of intra-articular fracture of shaft of tibia

47566-02 Closed reduction of intra-articular fracture of shaft of tibia with internal fixation

Includes: cross fixation

intramedullary fixation

#### REPAIR

#### 1518 Arthroplasty of knee

49517-00 Hemiarthroplasty of knee

Partial joint replacement of knee Unicompartmental knee replacement

Excludes: revision of hemiarthroplasty of knee (49527-00-[1524])

49517-01 Unicompartmental arthroplasty of knee, unilateral

**Excludes:** revision (49527-00 [1524])

49516-00 Unicompartmental arthroplasty of knee, bilateral

Bilateral unicompartmental arthroplasty of femur and proximal tibia of knee

Excludes: revision (49527-00 [1524])

49518-00 Total arthroplasty of knee, unilateral

Total joint replacement of knee, unilateral

Includes: patella resurfacing

Excludes: revision of total arthroplasty of knee (49527-00 [1524])

49519-00 Total arthroplasty of knee, bilateral

Total joint replacement of knee, bilateral

Includes: patella resurfacing

Excludes: revision of total arthroplasty of knee (49527-00 [1524])

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#### 1520 Other repair procedures on knee or leg

49563-00 Arthroscopic repair of meniscus of knee

Includes: graft:

• chondral

osteochondral

Code also when performed:

• arthroscopic chondral, osteochondral or meniscal graft (49584-00 [1496])

• • •

#### 49558-01 Arthroscopic chondroplasty of knee

Arthroscopic:

• microfracture of knee

mosaicplasty

Includes: debridement

osteoplasty

Excludes: that with drilling or implant (49503-06 [1520])

49576-00 Arthroscopic chondroplasty of knee

Arthroscopic repair of chondral lesion

**Includes:** microdrilling

microfracture osteochondral graft

procurement of bone and cartilage for osteochondral graft

49503-02 Chondroplasty of knee

Mosaicplasty

Includes: microdrilling

microfracture osteochondral graft

procurement of bone and cartilage for osteochondral graft

Excludes: that with multiple drilling or implant (49559-01 [1520])

49503-06 Arthroscopic chondroplasty of knee with implant-multiple drilling or implant

Includes: debridement

implant (carbon fibre)

osteoplasty

Excludes: repair distal femoral and/or proximal tibial articular surfaces (47592-00, 47593-00 [1520])

49559-01 Chondroplasty of knee with implant-multiple drilling or implant

Includes: debridement

implant (carbon fibre)

osteoplasty

Excludes: repair distal femoral and/or proximal tibial articular surfaces (47592-00, 47593-00 [1520])

49558-02 Arthroscopic osteoplasty of knee

Excludes: that with patellofemoral stabilisation (49503-01 [1520])

49503-05 Osteoplasty of knee

Excludes: that with patellofemoral stabilisation (49503-01 [1520])

49569-00 Quadricepsplasty of knee

Includes: muscle or tendon release

47592-00 Repair of distal femoral or proximal tibial articular surfaces of knee

Includes: chondral or osteochondral implant or transfer

**Note:** Performed for acute traumatic chondral injury.

Excludes: with reconstruction (47592-01 [1522])

47593-00 Repair of distal femoral and proximal tibial articular surfaces of knee

Includes: chondral or osteochondral implant or transfer

**Note:** Performed for acute traumatic chondral injury.

Excludes: with reconstruction (47593-01 [1522])

47956-00 Repair of proximal hamstring tendon

Excludes: that with any other hip procedure in Chapter 15 — omit code

90598-00 Other repair of knee

#### RECONSTRUCTION

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1522

#### Reconstruction procedures on knee

Includes: notchplasty

Excludes: revision of reconstruction (49551-00 [1524])

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#### 49565-00 Combined open and arthroscopic reconstruction of patellofemoral joint of knee

**Includes:** bone graft

internal fixation

medial soft tissue reconstruction

procurement of graft material through same incision

tibial tuberosity transfer

trochleoplasty

#### 49539-01 Reconstruction of knee

Includes: debridement

repair or reconstruction of ligaments:

collateralcruciate

Excludes: with: repair of meniscus (49542-01 [1522])

• reconstruction distal femur or proximal tibia (47592-01, 47593-01 [1522])

• repair of meniscus (49542-01 [1522])

. . .

#### 47592-01 Reconstruction of distal femoral or proximal tibial articular surfaces of knee

Includes: chondral or osteochondral implant or transfer

**Note:** Performed for acute traumatic chondral injury.

47593-01 Reconstruction of distal femoral and proximal tibial articular surfaces of knee

Includes: chondral or osteochondral implant or transfer

**Note:** Performed for acute traumatic chondral injury.

90611-00 Patellar tendon shortening

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#### **REVISION**

1523

#### Revision of arthroplasty of knee with bone graft to femur or tibia

Conversion of <u>unicompartmental arthroplasty</u> [hemiarthroplasty] to total joint replacement of knee with bone graft Revision of (hemi) (total) joint replacement of knee with bone graft

Includes: patella resurfacing

procurement of graft

49530-00 Revision of arthroplasty of knee with bone graft to femur

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1524

#### Other revision procedures on knee

• • •

#### 49527-00 Revision of arthroplasty of knee

Conversion of unicompartmental arthroplasty [hemiarthroplasty] to total joint replacement of knee

Replacement of femoral or tibial components of unicompartmental arthroplasty of knee with unicompartmental implants

Revision of (hemi) (total) (unicompartmental) joint replacement of knee

Includes: insertion of patellar component

<u>patella resurfacing</u> removal of prosthesis

replacement of polyethylene component

Excludes: revision of patella component only (49527-01 [1524])

that with:

- anatomic specific allograft (49554-00 [1523])
- bone graft (49530, 49533-00 [1523])
- patella resurfacing only (90562-00 [1524])

#### 49527-01 Revision of patella component of arthroplasty of knee

Insertion of patella:

- button
- dome
- implant

Patella resurfacing NEC

#### Excludes: patella resurfacing with:

- revision:
- arthroplasty of knee (49527-00 [1524], see block [1523])
- endoprosthetic replacement lower limb (50242-01 [1579])
- total arthroplasty of knee (49518-00, 49519-00 [1518], see block [1519])

#### 90562-00 Patella resurfacing

Insertion of patella:

- button
- dome
- implant

Excludes: that with total:

- arthroplasty of knee (49518-00 [1518], 49519-00 [1518])
- with bone graft to femur or tibia (see block [1519])
- replacement arthroplasty of patellofemoral joint of knee (49534-01 [1518])

## 13.6 Ankle or foot interventions

See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### ACHI Tabular List

#### **CHAPTER 15**

## PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360-1580)

#### ANKLE, FOOT

Includes: fibula involved in ankle

hindfoot (calcaneocuboid, subtalar and talonavicular joints) (calcaneus and talus bones)

malleoli metatarsus

midfoot (tarsometatarsal and naviculocuneiform joints) (cuboid, cuneiforms, navicular and tarsal bones)

tarsus toe

#### APPLICATION, INSERTION, REMOVAL

## **1526 ▼**0042

#### Immobilisation procedures on ankle or foot

Nonsurgical treatment of fracture or dislocation of ankle or foot

 $\textbf{\textit{Excludes:}} \ \ \text{that with any other musculoskeletal procedure at same site} \ -- \ \text{omit code}$ 

47606-02 Immobilisation of fracture of talus

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

#### 47627-00 Immobilisation of fracture of tarsus 47606-03 Immobilisation of dislocation of talus 47633-00 Immobilisation of fracture of metatarsus 47594-00 Immobilisation of fracture of ankle, not elsewhere classified 47595-00 Immobilisation of fracture of ankle, foot or toe, not elsewhere classified Nonsurgical treatment of fracture of: • ankle NOS • foot NOS • hindfoot NOS • midfoot NOS • tarsus NOS • toe(s) NOS **INCISION** 1528 Osteotomy of ankle or foot Includes: wedge osteotomy 48400-02 Osteotomy of metatarsal bone Excludes: osteotomy of first metata \* bilateral (49836-00 [1547]) • unilateral (49833-00 [1547]) for correction of hallux valgus or varus (49833-02, 49837-01, 49769-00 [1547]) with internal fixation (48403-00 [1528]) 48403-00 Osteotomy of metatarsal bone with internal fixation 48400-03 Osteotomy of toe Osteotomy of proximal or distal joint of toe Includes: capsulotomy joint release removal of osteophytes at joint synovectomy Excludes: with internal fixation (48403-01 [1528]) 48403-01 Osteotomy of toe with internal fixation Osteotomy of proximal or distal joint of toe with internal fixation Includes: capsulotomy joint release removal of osteophytes at joint synovectomy 1529 Other incision procedures on ankle 49700-00 Arthroscopy of ankle Excludes: that with: • biopsy of ankle (49700-01 [1531])

• debridement of ankle (49703-09 [1531])

• trimming excision of osteophyte (49703-01 [1531])

1530 Other incision procedures on foot

49732-00 Arthroscopy of foot

49730-01 Arthroscopic removal of loose body of foot or first metatarsophalangeal joint

Includes: hindfoot

49734-00 Arthrotomy of foot or metatarsophalangeal joint

Includes: debridement

<u>hindf</u>oot

midfoot

release of contracture

Incision of foot for paronychia 47912-00

Incision of pulp space infection of foot

90556-00 Tenolysis of Achilles' flexor or extensor tendon of foot

49734-01 Removal of loose body of foot or metatarsophalangeal joint

Includes: hindfoot

midfoot

49774-00 Release of tarsal tunnel

Includes: neurolysis

release of ligaments synovectomy

Revision of release of tarsal tunnel 49775-00

Includes: neurolysis

release of ligaments synovectomy

#### **EXCISION**

#### 1531 Arthroscopic excision procedures on ankle

49700-01 Arthroscopic biopsy of ankle

49703-01 Arthroscopic trimming excision of osteophyte of ankle

#### 1532 Excision of bone of foot

47933-01 Excision of exostosis of bone of foot

Includes: toe

Excludes: that with correction of hallux valgus or varus (see block [1547])49833 00, 49836 00, 49837 00, 49838 00

<del>[1547])</del>

#### Other excision procedures on ankle or foot 1534

49866-00 Neurectomy of foot

Excision of intermetatarsal or digital neuroma

Performed for neuritis: Note:

• digital

• plantar.

Excludes: revision (49773-00 [1534])

49730-02 Arthroscopic synovectomy of foot or first metatarsophalangeal joint

Includes: hindfoot

#### 49730-03 Arthroscopic excision of osteophyte of foot or first metatarsophalangeal joint Includes: hindfoot Arthroscopic debridement of tendon of foot 49732-01 Includes: that for tendon sheath 49732-02 Arthroscopic excision of tendon of foot Note: Performed for tendon impingement. Excludes: with: • reconstruction of tendon of ankle (49724-01, 49814-00 [1545]) • repair of tendon of ankle (49718 [1542]) 49854-01 Plantar fasciectomy 50312-00 Synovectomy of ankle Synovectomy of tendon of ankle Includes: debridement excision of tubercule or osteophyte neurolysis reconstruction of tendon retinaculum release of ligament or tendon tenolysis Performed for extensive synovitis. Note: **Excludes:** that by arthroscopy (49703-04 [1531]) 96261-04 Excision of prosthesis of foot or toe Removal of foot or toe prosthesis without replacement Includes: debridement insertion or removal of spacer: • antibiotic • beads • cement • plastic tissue sampling **Excludes:** that with revision (96261-05 [1544]) Excision of lesion of interphalangeal or metatarsophalangeal joint, not elsewhere classified 49881-00 Excision of ganglia or bursae of: • interphalangeal joint • metatarsophalangeal joint Includes: arthrotomy excision of: • bony prominence or mucinous cyst osteophytes neurolysis synovectomy **Excludes:** revision (49887-00 [1534]) Excision of lesion of ankle, hindfoot or midfoot joint, not elsewhere classified Excision of ganglia or bursae of: • ankle • hindfoot midfoot Includes: arthrotomy capsular or ligament repair excision of bony prominence or mucinous cyst neurolysis

synovectomy

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Excludes: excision of osteophyte (48430-00 [1534])
                        revision (49890-00 [1534])
            Excision of osteophyte of ankle or foot
48430-00
             Includes: capsulotomy
                        release of ligaments
                        removal of:
                        • bone [ostectomy]
                        • bursa [bursectomy]
                        • ganglion [ganglionectomy]
                        synovectomy
             Excludes: arthroscopic excision of osteophyte:
                        • ankle (49703-01 [1531])
                        • foot or first metatarsophalangeal joint (49730-03 [1534])
49773-00
            Revision of excision of intermetatarsal or digital neuroma
             Includes: excision of bursae
                        neurolysis
                        release of tissues
49887-00
             Revision of excision of lesion of interphalangeal or metatarsophalangeal joint
             Revision of excision of ganglia or bursae of:
             • interphalangeal joint
             · metatarsophalangeal joint
             Includes: arthrotomy
                        excision of:
                        • bony prominence or mucinous cyst
                        osteophytes
                        neurolysis
                        synovectomy
            Revision of excision of lesion of ankle, hindfoot or midfoot joint
49890-00
             Revision of excision of ganglia or bursae of:
             ankle
             • hindfoot
             • midfoot
             Includes: arthrotomy
                        capsular or ligament repair
                        excision of:
                        • bony prominence or mucinous cyst
                        osteophytes
                        neurolysis
                        synovectomy
REPAIR
1542
             Repair of tendon or ligament of ankle or foot
49812-00
             Transfer of tendon or ligament of foot
             Excludes: that with transfer of: tibialis tendon:
                        • tendon of ankle (49736-00 [1542])
                        • tibialis tendon (50339-01 [1542])
                        • anterior (50339 00 [1542])
                        * posterior (50342-00 [1542])
```

50339-00 Transfer of anterior tibialis tendon to lateral column

Includes: split or whole transfer

50339-01 Transfer of anterior or posterior tibialis tendon

Includes: split or whole transfer

## 50342-00 Transfer of posterior tibialis tendon through interesseous membrane to anterior or posterior aspect of

#### 49736-00 Transfer of tendon of ankle and foot

**Includes:** insetting of tendon

passage of posterior or anterior tendon to, or through, interosseous membrane

split or whole transfer to contralateral side of foot

synovectomy synovial biopsy tendon lengthening

Excludes: transfer of tibialis tendon (50339-01 [1542])

with reconstruction of tendon of ankle (49814-00 [1545])

#### 49709-01 Arthroscopic stabilisation of ankle

#### 50335-00 Percutaneous stabilisation of talonavicular joint and Achilles' tenotomy

**Vote:** Performed for (congenital) vertical talus.

#### 49709-00 Stabilisation of ankle

#### 49738-00 Stabilisation of ligament of foot

Stabilisation of ligament of talonavicular or metatarsophalangeal joint

Includes: capsulotomy
debridement
joint release
local tendon transfer
synovectomy

#### 49761-00 Stabilisation of metatarsophalangeal joint at metatarsal

Includes: capsulotomy
debridement
joint release
ligament repair

local tendon transfer, lengthening or release

osteotomy, with or without fixation

synovectomy

#### 50335-01 Stabilisation of talonavicular joint and Achilles' tenotomy

**Note:** Performed for (congenital) vertical talus.

#### 49718-01 Repair of Achilles' tendon

Achillotenotomy

Division of Achilles' tendon Incision of Achilles' tendon

#### 49724-00 Secondary (delayed) repair of Achilles' tendon

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#### 1543 Arthrodesis of ankle, foot or toe

#### 49712-00 Arthrodesis of ankle

<u>Excludes:</u> revision (49740-00 [**1543**]) with hindfoot (49742-00 [**1543**])

#### 49815-00 Triple arthrodesis of foot

Triple arthrodesis of hindfoot (calcaneocuboid, subtalar and talonavicular joints)

**Includes:** capsulotomy

joint release

removal of osteophytes

synovectomy

#### 49845-00 Arthrodesis of first metatarsophalangeal joint

Arthrodesis of hallux interphalangeal joint

Includes: capsulotomy

internal or external fixation

joint release

removal of osteophytes

synovectomy

Excludes: revision (49790-00 [1543])

#### 49742-00 Arthrodesis of ankle and hindfoot

**Includes:** capsulotomy

internal or external fixation

joint release

removal of osteophytes

synovectomy

Excludes: revision (49744-00 [1543])

#### 49777-00 Arthrodesis of midfoot

Includes: capsulotomy

internal or external fixation

joint release

removal of osteophytes at joint

synovectomy

Excludes: revision (49781-00 [1543])

#### 50118-00 Arthrodesis of subtalar joint

#### 50118-01 Arthrodesis of hindfoot

Arthrodesis of subtalar joint

*Includes:* capsulotomy

internal or external fixation

joint release

removal of osteophytes at joint

synovectomy

Excludes: revision (49776-00 [1543])

that with ankle (49742-00 [1543])

triple arthrodesis of hindfoot joints (49815-00 [1543])

#### 96274-00 Arthrodesis of foot, not elsewhere classified

Arthrodesis of foot NOS

Includes: capsulotomy

internal fixation joint release

removal of osteophytes at joint

synovectomy

Excludes: revision (96274-01 [1543])

triple arthrodesis of foot (49815-00 [1543])

#### 49792-00 Arthrodesis of toe

Arthrodesis of proximal or distal joint of lesser toe

**Includes:** capsulotomy

internal fixation

joint release

removal of osteophytes at joint

synovectomy

Excludes: revision (49792-01 [1543])

that for claw toe or hammer toe (49848, 49851 [1548])

#### 90559-00 Arthrodesis of toe

Includes: interphalangeal fusion

Excludes: that for:

• claw toe (49848-01, 49851-01 [1548]) • hammer toe (49848-00, 49851-00 [1548])

#### 49740-00 Revision of arthrodesis of ankle

Includes: capsulotomy

internal or external fixation

joint release neurolysis

osteotomy of non-union or malunion

removal of:
• internal fixation
• osteophytes at joint synovectomy

#### 49790-00 Revision of arthrodesis of first metatarsophalangeal joint

Includes: capsulotomy

joint release

osteotomy of non-union or malunion

removal of:
• exostosis at joint
• internal fixation
synovectomy

#### 49744-00 Revision of arthrodesis of ankle and hindfoot

*Includes:* capsulotomy

internal or external fixation

joint release neurolysis

osteotomy of non-union or malunion

removal of:
• internal fixation
• osteophytes at joint
synovectomy

#### 49781-00 Revision of arthrodesis of midfoot

Includes: capsulotomy

internal or external fixation

joint release

osteotomy of non-union or malunion

removal of:
• internal fixation
• osteophytes at joint synovectomy

#### 49776-00 Revision of arthrodesis of hindfoot

**Includes:** capsulotomy

internal or external fixation

joint release neurolysis

osteotomy of non-union or malunion

removal of:
• internal fixation
• osteophytes at joint
synovectomy

#### 49792-01 Revision of arthrodesis of toe

Includes: capsulotomy

internal or external fixation

joint release neurolysis osteotomy of non-union or malunion

removal of:

- internal fixation
- osteophytes at joint

synovectomy

#### 96274-01 Revision of arthrodesis of foot, not elsewhere classified

Revision of arthrodesis of foot NOS

Includes: capsulotomy

internal or external fixation

joint release neurolysis

osteotomy of non-union or malunion

removal of:
• internal fixation
• osteophytes at joint synovectomy

. . .

## 1544 Other repair procedures on ankle or foot

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49703-05 Arthroscopic chondroplasty of ankle

Arthroscopic microfracture of ankle

49730-00 Arthroscopic chondroplasty of foot or first metatarsophalangeal joint

Includes: hindfoot

49703-07 Chondroplasty of ankle

- -

49857-00 Arthroplasty of foot or toe

Excision or interposition arthroplasty of metatarsophalangeal or tarsometatarsal joints

Interposition arthroplasty of proximal or distal joint of toe

Replacement of metatarsophalangeal joint

Includes: capsulotomy

debridement joint release local tendon transfer synovectomy

Excludes: arthroplasty of ankle (49715-00 [1544])

96261-05 Revision arthroplasty of foot or toe

Revision of (hemi) (total) joint replacement of foot

Includes: removal of prosthesis

insertion or removal of spacer:

- antibiotic
- beads
- cement
- plastic

*Excludes:* revision arthroplasty of ankle (49716-00, 49717-00 [1544])

• • •

#### 49717-00 Revision arthroplasty of ankle with bone graft

Revision of (hemi) (total) joint replacement of ankle with bone graft

Includes: capsulotomy

debridement joint release neurolysis

procurement of graft material through same incision

removal of prosthesis synovectomy

90612-00 Os calcis lengthening

Code also when performed:

• bone graft (48239-00, 48242-00 [1569])

49760-00 Arthroereisis of subtalar joint

Includes: capsulotomy debridement synovectomy

#### RECONSTRUCTION

#### 1545 Reconstruction procedures on ankle or foot

Excludes: lengthening of Achilles' tendon (49727-00 [1542])

repair of Achilles' tendon: • primary (49718-01 [1542])

• secondary (delayed) (49724-00 [1542])

. . .

50336-00 Reconstruction of congenital vertical talus

Reconstruction of congenital rocker bottom foot

49814-00 Reconstruction of tendon of ankle, not elsewhere classified

Includes: internal fixation

lengthening of tendon osteotomy of hindfoot synovectomy synovial biopsy tendon transfer turn down flaps

#### **OTHER PROCEDURES**

. . .

#### 1547 Procedures for hallux valgus, hallux varus or hallux rigidus

Includes: bunionectomy

49821-00 Correction of hallux valgus or rigidus by arthroplasty, unilateral

49824-00 Correction of hallux valgus or rigidus by arthroplasty, bilateral

49839-00 Correction of hallux valgus or rigidus by arthroplasty with insertion of prosthesis, unilateral

49842-00 Correction of hallux valgus or rigidus by arthroplasty with insertion of prosthesis, bilateral

49827-00 Correction of hallux valgus by transfer of adductor hallucis tendon, unilateral

49827-01 Correction of hallux valgus or varus deformity, by local tendon transfer

Correction of hallux valgus or varus deformity by transfer of adductor hallucis tendon

**Includes:** bursectomy

capsule repair

excision of exostosis [exostectomy]

synovectomy tendon release

49830-00 Correction of hallux valgus by transfer of adductor hallucis tendon, bilateral

49833-00 Correction of hallux valgus by osteotomy of first metatarsal, unilateral

Bunionectomy, unilateral NOS

Includes: excision of exostosis internal fixation prosthesis

49833-02 Correction of hallux valgus or varus deformity, by osteotomy of first metatarsal

**Bunionectomy NOS** 

**Includes:** bursectomy

<u>capsule release, repair or transfer</u> excision of exostosis [exostectomy]

internal fixation prosthesis synovectomy

tendon release or transfer

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,

<del>unilateral</del>

Includes: excision of exostosis internal fixation prosthesis

49837-01 Correction of hallux valgus or varus deformity, by osteotomy of first metatarsal and local tendon transfer

Correction of hallux valgus or varus deformity by osteotomy of first metatarsal and transfer of adductor hallucis tendon

*Includes:* bursectomy

capsule repair

excision of exostosis [exostectomy]

internal fixation prosthesis synovectomy tendon release

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

49769-00 Correction of hallux valgus or varus deformity, by osteotomy of first metatarsal and proximal phalanx of

first toe

**Includes:** bursectomy

capsule repair

excision of exostosis [exostectomy]

internal fixation

release or transfer of capsule or tendon

synovectomy

## 13.7 Wide excision of lesion

See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 15**

# PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580) SPINE ([VERTEBRAL COLUMN])

#### **EXCISION**

1384	En bloc resection Wide excision of lesion of soft tissue involving sacrum or spine	
	<b>Note:</b> Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of sacrum or spine.	
50221-01	En bloc resection Wide excision of lesion of soft tissue involving sacrum	
50221-02	En bloc resection Wide excision of lesion of soft tissue involving spine	
	Excludes: that of sacrum (50221-01 [1384])	
50224-00	En bloc resection Wide excision of lesion of soft tissue involving sacrum with reconstruction using prosthesis	
	Excludes: that with revision (50245-00 [1576])	
50224-01	En bloc resection Wide excision of lesion of soft tissue involving sacrum with reconstruction using allograft	
	Excludes: that with revision (50245-00 [1576])	
50224-02	En bloc resection Wide excision of lesion of soft tissue involving sacrum with reconstruction using autograft	
	Excludes: that with revision (50245-00 [1576])	
50224-03	En bloc resection Wide excision of lesion of soft tissue involving spine with reconstruction using prosthesis	
	Excludes: that: of sacrum (50224-00 [1384]) of sacrum (50224-00 [1384]) with revision (50245-00 [1576])	
50224-04	En bloc resection Wide excision of lesion of soft tissue involving spine with reconstruction using allograft	
	Excludes: that: of sacrum (50224-01 [1384]) of sacrum (50224-01 [1384]) with revision (50245-00 [1576])	
50224-05	En bloc resection Wide excision of lesion of soft tissue involving spine with reconstruction using autograft	
	Excludes: that: of sacrum (50224-02 [1384])	

. . .

#### **SHOULDER**

#### **EXCISION**

1400	Other excision on shoulder

50221-03 En bloc resection Wide excision of lesion of soft tissue involving scapula

Includes: that involving shoulder joint

*Note:* Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of

scapula or shoulder joint.

Excludes: that with reconstruction using prosthesis, allograft or autograft (50224 [1405])

. . .

#### RECONSTRUCTION

1405 Reconstruction procedures on shoulder

50224-06 En bloc resection Wide excision of lesion of soft tissue involving scapula with reconstruction using prosthesis

**Includes:** that involving shoulder joint

**Note:** Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of

scapula or shoulder joint.

**Excludes:** that with revision (50245-00 [1576])

50224-07 En bloc resection Wide excision of lesion of soft tissue involving scapula with reconstruction using

allograft

Includes: that involving shoulder joint

Note: Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of

scapula or shoulder joint.

**Excludes:** that with revision (50245-00 [1576])

50224-08 En bloc resection Wide excision of lesion of soft tissue involving scapula with reconstruction using

autograft

Includes: that involving shoulder joint

**Note:** Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of

scapula or shoulder joint.

**Excludes:** that with revision (50245-00 [1576])

. .

#### PELVIS, HIP

#### **EXCISION**

1485 Other excision procedures on pelvis or hip

50221-00 En bloc resection Wide excision of lesion of soft tissue involving pelvis

Performed for aggressive or malignant lesion of soft tissue arising in or eroding adjacent bone cortex of

pelvis.

Excludes: that with reconstruction using prosthesis, allograft or autograft (50224 [1491])

. . .

#### **MUSCULOSKELETAL - OTHER SITES**

Includes: bone

bursa fascia joint:

Note:

• capsule

• NOS joint capsule

ligament muscle soft tissue

synovial cavity

tendon

...

#### **EXCISION**

1562

En bloc resection Wide excision of lesion of soft tissue affecting long bones

En bloc resection Wide excision [en bloc resection] of:

- desmoid tumour
- fibromatosis
- neurofibromatosis
- · neurofibrosis

Includes: compartmental excision of soft tissue

wide excision of soft tissue

**Note:** Performed for malignant or aggressive soft tissue lesion affecting long bones.

Excludes: that with intercalary reconstruction (see block [1575])

50212-00 En bloc resection Wide excision of lesion of soft tissue affecting the long bones of upper limb

Includes: humerus

radius ulna

50212-01 En bloc resectionWide excision of lesion of soft tissue affecting the long bones of lower limb

Includes: femur

fibula tibia

. . .

#### **REPAIR**

1570

En bloc resection Wide excision of lesion of bone or total resection of bone with repair of other musculoskeletal sites

50227-00 En bloc resection Wide excision of lesion of bone with anatomic specific allograft

50227-01 En bloc resection Wide excision of lesion of bone with anatomic specific autograft

Reimplantation of resected bone segment following extracorporeal irradiation

Code also when performed:

• extracorporeal irradiation (15269-00 [1788])

50218-00 En bloc resection Wide excision of lesion of long bone of upper limb with arthrodesis of adjacent joint

Includes: that for lesion of:

- humerus
- radius
- ulna

50218-01 En bloc resection Wide excision of lesion of long bone of upper limb with replacement of adjacent joint

Includes: that for lesion of:

- humerus
- radius
- ulna

50218-02 En bloc resection Wide excision of lesion of long bone of lower limb with arthrodesis of adjacent joint

Includes: that for lesion of:

- femur
- fibula
- tibia

50218-03 En bloc resectionWide excision of lesion of long bone of lower limb with replacement of adjacent joint

**Includes:** that for lesion of:

- femur
- fibula
- tibia

•••

#### RECONSTRUCTION

1575	En bloc resection Wide excision of lesion of soft tissue affecting long bones with reconstruction
	<b>Excludes:</b> that with revision (50245-00 [1576])
50215-00	En bloc resectionWide excision of lesion of soft tissue affecting long bones of upper limb, with intercalary reconstruction using prosthesis
50215-01	En bloc resectionWide excision of lesion of soft tissue affecting long bones of upper limb, with intercalary reconstruction using allograft
50215-02	En bloc resectionWide excision of lesion of soft tissue affecting long bones of upper limb, with intercalary reconstruction using autograft
50215-03	En bloc resectionWide excision of lesion of soft tissue affecting the long bones of lower limb, with intercalary reconstruction using prosthesis
50215-04	En bloc resectionWide excision of lesion of soft tissue affecting the long bones of lower limb, with intercalary reconstruction using allograft
50215-05	En bloc resection Wide excision of lesion of soft tissue affecting the long bones of lower limb, with intercalary reconstruction using autograft

## 13.8 Other musculoskeletal system interventions

See also 13.9 Musculoskeletal indexing 13.9 Musculoskeletal indexing.

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 15**

## PROCEDURES ON MUSCULOSKELETAL SYSTEM (BLOCKS 1360–1580)

## SPINE ([VERTEBRAL COLUMN])

#### **OTHER PROCEDURES**

#### 1393

#### Other spinal procedures

Includes: fat graft

Code also when performed:

- procurement of:
- bone graft material through separate incision (47726-00 [1563])
- fat for graft via separate incision (45018-04 [1666])
- via percutaneous endoscopic (minimally invasive) approach (96234-01 [1923])

#### 35400-00 Vertebroplasty, 1 vertebral body

Injection of polymethylmethacrylate [PMMA] into 1 vertebral body

Includes: bilateral (bipedicular) injection

Performed for osteoporotic thoracolumbar vertebral compression fracture of the thoracolumbar spinal Note:

segment (T11, T12, L1 or L2).

35400-01 Vertebroplasty, 2 or more vertebral bodies

Injection of polymethylmethacrylate [PMMA] into 2 or more vertebral bodies

Includes: bilateral (bipedicular) injection

Performed for osteoporotic thoracolumbar vertebral compression fracture of the thoracolumbar spinal Note:

segment (T11, T12, L1 or L2).

51140-01 Other revision of spinal procedure

Includes: adjustment of spinal fixation

bone graft

removal of spinal fixation

Excludes: revision of spinal fusion (51140-00 [1389])

43533-00 Other procedures on spine

90011-10 Other procedures on spine

. . .

#### **MUSCULOSKELETAL - OTHER SITES**

Includes: bone

> bursa fascia joint: capsule

NOS

ligament muscle soft tissue synovial cavity tendon

#### **EXCISION**



#### Excision procedures on joint of other musculoskeletal sites

**V**0030

Excision of lesion of joint, not elsewhere classified

Excision of lesion of:

• cartilage

• ligament

49772-00 Excision of lesion of joint, not elsewhere classified

**Excision of:** 

• gouty tophi NOS

• rheumatoid nodule NOS

*Includes:* capsulotomy

debridement

excision of tubercle or osteophyte release of ligament or tendon

that from: • cartilage

ligament

Synovectomy of joint, not elsewhere classified 50104-00

90574-01 Excision of joint, not elsewhere classified

Debridement of joint NOS

Excision of:

• cartilage NOS

• ligament NOS

Excludes: excision of:

- cartilage involved with lesion of skin (31340-00 [1566])
- lesion of joint NEC (90574-0049772-00 [1561])

1563

Other excision procedures on bone of other musculoskeletal sites

▼0030

4<u>8251-00</u> Procurement of bone and cartilage for osteochondral graft via separate incision

Excludes: that:

- from the same incision omit code
- with mosaicplasty (49503-02, 49576-00 [1520])

#### **EXCISION**

1566

Excision procedures on other musculoskeletal sites

31350-00 Excision of lesion of soft tissue, not elsewhere classified

Excision of lesion of soft tissue NOS

Includes: desmoid tumour

fibromatosis neurofibromatosis neurofibrosis

Excludes: Baker's cyst of knee (Baker's) (30114-0049590-01 [1505])

excision of muscle, bone or cartilage involved with lesion of skin (31340-00 [1566]) resection of lesion of soft tissue affecting or involving:

· long bones of:

- lower limb (50212-01 **[1562]**, 50215-03, 50215-04, 50215-05 **[1575]**)
- upper limb (50212-00 [1562], 50215-00, 50215-01, 50215-02 [1575])
- pelvis (50221-00 [1485])
- sacrum (50221-01 [1384])
- scapula (50221-03 [1400])
- shoulder joint (50221-03 [1400])
- spine NOS (50221-02 [1384])

that for ossifying lesion:

- elbow (48983-00 [1412])
- forearm (48986-00 [1426])
- shoulder (48980-00 [1400])

90575-00 Excision of soft tissue, not elsewhere classified

1567

Reduction procedures on other musculoskeletal sites

90581-00 Reduction of separated epiphysis, not elsewhere classified

Excludes: that of:

- femur (4752547983-00, 47984-00 [1493])
- radius (90541 [1434])
- ulna (90541 [1434])

#### REPAIR

1569

Graft or flap of other musculoskeletal sites

48239-00 Bone graft, not elsewhere classified

Code also when performed:

• procurement of bone for graft via separate incision (47726-00 [1563])

48242-00 Bone graft with internal fixation, not elsewhere classified

**Includes:** fusion fixation

Code also when performed:

• procurement of bone for graft via separate incision (47726-00 [1563])

. . .

90583-01 Muscle graft, not elsewhere classified

48251-01 Osteochondral graft, not elsewhere classified

Excludes: arthroscopic osteochondral graft of knee (49584-00 [1496]) that with mosaicplasty (49503-02, 49576-00 [1520])

48257-00 Metallic, cortical or other bone graft substitute [allograft], not elsewhere classified

**Includes:** internal fixation

48254-00 Pedicled bone flap, not elsewhere classified

**Includes:** internal fixation

50206-01 Marginal excision of lesion of bone with autograft to defect

. . .

#### **REPAIR**

. . .

#### 1570

## En bloc resection Wide excision of lesion of bone or total resection of bone with repair of other musculoskeletal sites

. . .

50218-04 Total resection of long bone of upper limb with endoprosthetic replacement

Γotal:

- arthroplasty of long bone of upper limb
- resection of bone with reconstruction using endoprosthetic replacement of upper limb

Includes: that of:

- humerus
- radius
- ulna

Excludes: revision of endoprosthetic replacement (50242-00 [1579])

50218-05

Total resection of long bone of lower limb with endoprosthetic replacement Total:

- arthroplasty of long bone of lower limb
- resection of bone with reconstruction using endoprosthetic replacement of lower limb

Includes: that of:

- femur
- fibula
- tibia

Excludes: revision of endoprosthetic replacement (50242-01 [1579])

...

Other repair procedures on tendon of other musculoskeletal sites

Excludes: repair of:

• Achilles' tendon (major ankle tendon) (49718-01 [1542])

• tendon of foot (49809-01 [1544])

. . .

47954-00 Repair of tendon, not elsewhere classified

Advancement of tendon NOS Recession of tendon NOS

Excludes: that of: hand (47963-02 [1467])

- distal biceps [brachii] tendon (47953-00 [1418])
- gluteal or rectus femoris (47955 [1491])

• hand (47963-02 [1467])

• proximal hamstring (47956-00 [1520])

...

#### RECONSTRUCTION

...

1576 Other reconstruction procedures on other musculoskeletal sites

90590-00 Tendon pulley reconstruction, not elsewhere classified

50245-00 Revision of musculoskeletal reconstructive procedure

Revision of wide excision of lesion of soft tissue involving bone, with reconstruction

#### **OTHER PROCEDURES**

. . .

1579

Other procedures for other musculoskeletal sites

90609-00 Destruction of bone

Destruction of bone lesion

Includes: laser

radiofrequency ablation

50428-00 Percutaneous drilling of bone lesion

Note: Performed for osteochondritis dessicans or other osteochondral lesion (with open growth plates).

50242-00 Revision of endoprosthetic replacement, upper limb

Includes: polyethylene exchange

rebushing

50242-01 Revision of endoprosthetic replacement, lower limb

Includes: patella resurfacing

polyethylene exchange

rebushing

90593-00 Other diagnostic procedures on muscle, tendon, fascia or bursa, not elsewhere classified

. . .

#### **CHAPTER 16**

# DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718) PLASTIC PROCEDURES ON SOFT TISSUE

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1673

#### Island flap

Flap using transferred tissue completely separated from the surrounding and underlying tissue, except for a pedicle containing arteries and veins. Tissue is tunnelled under skin and brought out at the recipient site (with pedicle remaining under skin and attached to donor site).

Includes: fasciocutaneous island flap

fasciomyocutaneous island flap

muscle island flap myocutaneous island flap

Excludes: free flap (see block [1674])

pedicled bone flap (48254-00 [1569])

that for reconstruction of breast (45530-02 [1756])

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## 13.9 Musculoskeletal indexing

Due to the extensive nature of changes for the musculoskeletal system, the ACHI Alphabetic Index refinements are presented in a consolidated view.

## **ACHI Alphabetic Index**

#### Α

```
Allograft
- bone
- - for augmentation of alveolar ridge 45841-00 [1371]
- - - exploration and repair of temporomandibular joint 45873-00 [1362]
- - - intercalary reconstruction
- - - and wide excision en bloc resection of lesion (tumour) of soft tissue affecting long bone
- - - - arm (humerus) (radius) (ulna) 50215-01 [1575]
---- leg (femur) (fibula) (tibia) 50215-04 [1575]
- - anatomic specific (massive)
- - - with
- - - resection of lesion (tumour) of bone 50230-00 [1563]
        en bloc 50227-00 [1570]
- - - - - wide excision 50227-00 [1570]
- - - revision of total joint replacement, knee 49554-00 [1523] (arthroplasty)
      - hip, with graft (to)
       - acetabulum 49339-00 [1492]
       - - and femur 49345-00 [1492]
      - - femur 49342-00 [1492]
       and acetabulum 49345 00 [1492]
knee 49554-00 [1523]
- cortical or other bone graft substitute NEC 48257-00 [1569]
- skin 90670-00 [1640]
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    - calcaneum 47606-01 [1526]
     - hip 50352-00 [1476]
      talus 47606-03 [1526]
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    - with reduction - see Reduction/fracture
      acetabulum (with dislocation of hip) 47492-00 [1476]
      ankle 47594-00 [1526]
     - Barton's 47361-00 [1421]
      calcaneum 47606-00 [1526]
      Colles' 47361-00 [1421]
      fibula 47576-00 [1495]
     - humerus
      - distal 47453-00 [1408]
       - proximal 47423-00 [1408]
       shaft 47444-00 [1408]
      metatarsus 47633-00 [1526]
     - patella 47579-00 [1495]
      radius (radial) NEC 47361-00 [1421]
      - distal (with distal ulna) 47361-00 [1421]
     - - shaft 47378-00 [1421]
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     - talus 47606-02 [1526]
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   - - tibia, tibial

    plateau

        - lateral 47543-00 [1495]
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```
with medial plateau 47552-00 [1495]
        - medial 47543-00 [1495]
         - with lateral plateau 47552-00 [1495]
       shaft 47561-00 [1495]
       -upper end (head) (proximal) --- see Application/cast/for/fracture/tibia, tibial/plateau
      ulna NEC 47361-00 [1421]
       distal (with distal radius) 47361-00 [1421]
       shaft 47378-01 [1421]
   ---- with radial shaft 47387-00 [1421]
Achilles' tendon 49721-00 [1526]
- collar, cervical 96092-00 [1870]
Arthrodesis (with fixation device) NEC 50109-00 [1571]
- adjacent joint
- - with wide excision en bloc resection of lesion (tumour) of long bone of limb
- - - lower 50218-02 [1570]
- - - upper 50218-00 [1570]
- ankle 49712-00 [1543]
- - and hindfoot 49742-00 [1543]
- - - revision 49744-00 [1543]
- - revision 49740-00 [1543]

    - subtalar (Grice procedure)

                               50118-00 [1543]
- carpometacarpal 46303-00 [1460]
- claw toe 49851-01 [1548]
- foot 96274-00 [1543] 50109-00 [1571]
- - metatarsophalangeal, 1st <u>— see Arthrodesis/metatarsophalangeal/1st</u> 49845-00 [1543]
- - revision 96274-01 [1543]
- - triple (calcaneocuboid, subtalar and talonavicular joints) 49815-00 [1543]
- hammer toe 49851-00 [1548]
- hand
- - carpometacarpal 46303-00 [1460]
- - intercarpal (with bone graft) 49203-00 [1460]
- - interphalangeal 46300-00 [1460]
- - metacarpophalangeal 46300-01 [1460]
- hindfoot 50118-01 [1543]
- - and ankle — see Arthrodesis/ankle/and hindfoot
- - revision 49776-00 [1543]
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- hip 49306-00 [1491]
- intercarpal (limited) 49203-00 [1460]
- interphalangeal
- - foot <u>— see Arthrodesis/toe 90559-00 [1543]</u>
- - hand 46300-00 [1460]
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- - with
- - - removal of prosthesis 49512-00 [1512]
- - - resection of distal femur and proximal tibia 50411-00 [1515]
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- - revision 49545-00 [1524]
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- - 1st 49845-00 [1543]
- - - revision 49790-00 [1543]
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- - revision 49781-00 [1543]
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- radio-ulnar, distal

    with reconstruction 46345-00 [1469]

- radioulnar, distal 49213-00 [1468]
- - with reconstruction 46345-00 [1469]
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- - with removal of prosthesis 48942-00 [1403]
- specified joint NEC 50109-00 [1571]
- subtalar 50118-01 50118-00 [1543]
- temporomandibular 45877-00 [1371]
- toe (proximal or distal joint) NEC 49792-00 90559-00 [1543]
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- hammer toe 49851-00 [1548]
- - metatarsophalangeal, 1st <u>— see Arthrodesis/metatarsophalangeal/1st</u>49845-00 [1543]
- - revision 49792-01 [1543]
- wrist NEC 49200-00 [1468]
- - carpometacarpal 46303-00 [1460]
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- - radioulnar, distal 49213-00 [1468]
- - - with reconstruction 46345-00 [1469]
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Arthroplasty (see also Repair/joint) 50127-00 [1571]
- by osseointegration (implantation of titanium fixture) — see Osseointegration
- for correction hallux valgus or rigidus (hallux rigidus) (unilateral) 49821-00 [1547]
- - with prosthesis 49839-00 [1547]
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- - - volar plate 46307-00 [1464]
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- - revision — see Revision/joint replacement/knee
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- - - with bone graft — see block [1519]
- - - bilateral NEC 49519-00 [1518]
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- - - bilateral 49516-00 [1518]
- metacarpophalangeal (1 joint) (hemi) (total) 46309-01 [1463]
- - revision 46322-00 96261-03 [1471]
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- joint (with fixation device) (see also Arthrodesis/by site) 50109-00 [1571]
- - with wide excision of lesion (tumour) of long bone en bloc resection or
                                                                             on (tumour) of long bone
- - - - lower 50218-02 [1570]
- - - - upper 50218-00 [1570]
 - ankle 49712-00 [1543]
   - subtalar (Grice procedure) 50118-00 [1543]
   carpometacarpal 46303-00 [1460]
   elbow 49106-00 [1418]
  - foot
    metatarsophalangeal, 1st 49845-00 [1543]
   - triple 49815-00 [1543]
  - hand
   - carpometacarpal 46303-00 [1460]
   - intercarpal (with bone graft) 49203-00 [1460]
   - interphalangeal 46300-00 [1460]
   - metacarpophalangeal 46300-01 [1460]
  - hip 49306-00 [1491]
   intercarpal (limited) 49203-00 [1460]
  -interphalangeal
   - foot 90559-00 [1543]
   - hand 46300-00 [1460]
   knee 49509-01 [1512]
    - with
   - - removal of prosthesis 49512-00 [1512]
    - resection of distal femur and proximal
                                            .
tibia 50411-00 [1515]
     -- with rotationplasty 50414-00 [1515]
    revision 49545-00 [1524]
   metacarpophalangeal 46300-01 [1460]
   metatarsophalangeal, 1st 49845-00 [1543]
   radiocarpal (with bone graft) 49200-00 [1468]
   radio-ulnar, distal
   - with reconstruction 46345-00 [1469]
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sacro-iliac 49300-00 [1491]
  shoulder 48939-00 [1403]
   - with removal of prosthesis 48942-00 [1403]
   specified joint NEC 50109-00 [1571]
  -subtalar 50118-00 [1543]
   toc 90559-00 [1543]
    claw toe 49851-01 [1548]
    hammer toe 49851-00 [1548]
    metatarsophalangeal, 1st 49845-00 [1543]
   wrist 49200-00 [1468]
    carpometacarpal 46303-00 [1460]
    radio-ulnar, distal
      with reconstruction 46345-00 [1469]
- midline lumbar interbody fusion (MidLIF) (MLIF) — see Fusion/spinal/anterior column
G
Graft (repair)
- bone 48239-00 [1569]
- - - intercalary reconstruction and wide excision en bloc resection of lesion (tumour) affecting long bone — see
      Reconstruction/bone/limb
- - anatomic specific
- - - with wide excision en bloc resection of lesion (tumour) of bone
- - - - allograft 50227-00 [1570]
- - - - autograft 50227-01 [1570]
- - specified site NEC 48239-00 [1569]
- - - with internal fixation NEC 48242-00 [1569]
- - substitute (cortical) (metallic) 48257-00 [1569]
- - tibia 48206-00 [1513]
- chondral
                           of meniscus of knee 49563-00 [1520]
- - knee (arthroscopic) 49584-00 [1496]

    chondrocutaneous — see Graft/composite

- lamellar
- - cornea — see Keratoplasty
- - sclera — see Graft/sclera/patch
- meniscal, knee (arthroscopic) 49584-00 [1496]
- microvascular (microarterial) (microvenous)
- osteochondral NEC 48251-01 [1569]
   with arthroscopic repair of meniscus
                                       of knee 49563-00 [1520]
- - knee (arthroscopic) 49584-00 [1496]
Grice procedure (subtalar arthrodesis) (with bone graft) 50118-0150118-00 [1543]
Н
Hemiarthroplasty (unicompartmental arthroplasty)
- elbow (radial head replacement) (unicompartmental replacement) 96261-10 [1418]
- femur (fracture) (neck) 47522-00 [1489]
- interphalangeal
- - hand (1 joint)-(hemi) (total) 46309-00 [1462]
- - - by osseointegration (implantation of titanium fixture) 45794-07 [1698]
- - - 2 joints 46312-00 [1462]
- - - 3 joints 46315-00 [1462]
- - - 4 joints 46318-00 [1462]
- - - 5 or more joints 46321-00 [1462]
- knee (unilateral) 49517-01 49517-00 [1518]
- - bilateral 49516-00 [1518]
- metacarpophalangeal (1 joint) (hemi) (total) 46309-01 [1463]
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Immobilisation (by) (of) 96092-00 [1870]
- fracture (noninvasive) (nonsurgical) 96092-00 [1870]
- - with reduction — see Reduction/fracture
- - acetabulum (with dislocation of hip) 47492-00 [1476]
- - ankle 47595-00 47594-00 [1526]
- - Barton's 47361-00 [1421]
- - calcaneum 47606-00 [1526]
- - Colles' 47361-00 [1421]
- - fibula 47576-00 [1495]
- - foot 47595-00 [1526]
- - hindfoot 47595-00 [1526]
- - humerus
- - - distal 47453-00 [1408]
- - - proximal 47423-00 [1408]
- - - shaft 47444-00 [1408]
- - invasive in nature (attached to bone) NEC 50130-00 [1550]
- - mandible 53403-00 [1360]
- - maxilla 53400-00 [1360]
- - metatarsus 47633-00 [1526]
- - midfoot 47595-00 [1
- - patella 47579-00 [1495]
- - pelvis 47483-00 [1479]
- - radius, radial (with distal ulna) 47361-00 [1421]
- - - shaft 47378-00 [1421]
- - - - with ulna shaft 47387-00 [1421]
- - rib 47471-00 [1373]
- - Smith's 47361-00 [1421]
- - spine (calipers) (halo) (jacket) 51110-00 [1381]
- - talus 47606-02 [1526]
- - tarsus 475<u>95-00</u> 47627-00 [1526]
- - tibia, tibial
- - - plateau
- - - - lateral 47543-00 [1495]
- - - - with medial plateau 47552-00 [1495]
- - - - medial 47543-00 [1495]
- - - - with lateral plateau 47552-00 [1495]
- - - shaft 47561-00 [1495]
- - - upper end (head) (proximal) — see Immobilisation/fracture/tibia, tibial/plateau
- - toe(s) 47595-00 [1526]
- - ulna (with distal radius) 47361-00 [1421]
- - - shaft 47378-01 [1421]
- - - - with radial shaft 47387-00 [1421]
- - zygoma, zygomatic arch (malar) 53410-00 [1360]
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- button
- - gastrostomy, nonendoscopic 30483-00 [870]
- - nasal septum 41907-00 [371]
- - patella 49527-01 90562-00 [1524]
- diaphragm
- - vagina 92106-00 [1900]
- dome, patella 49527-01 [1524]
- implant — see also Insertion/device OR Insertion/prosthesis, prosthetic device
- - patella 49527-01 [1524]
- intra-aortic balloon pump (IABP) 38362-00 [682]
Note: Terms listed under the lead term 'Intervention' are mainly split by anatomical site or condition; Intervention/for specified
      condition and Intervention/specified site.
      Where an eponym is used to describe an intervention, or a type of intervention is specified — see specified intervention(s)
      performed or the lead term Procedure.
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- for specified condition
- - Dupuytren's contracture
- - - - fasciectomy — see also Fasciectomy/for Dupuytren's contracture
---- revision — see Revision/fasciectomy, for Dupuytren's contracture
- - - - fasciotomy (percutaneous) 46366-00 [1440]
- - - flap repair, local 46384-00 [1467]
- - - Z-plasty 46384-00 [1467]
- - tarsal tunnel — see Release/tarsal tunnel
- specified site (anatomical)
- - spine NEC 43533-00 [1393]
K
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 bilateral 49824-00 [1547]
 unilateral 49821-00 [1547]
Kelly procedure (-Kennedy) (urethrovesical plication) (with prosthesis) 37043-00 [1110]
M
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- ankle 49703-05 [1544]
- hip 96225-00 [1491]
- shoulder 48948-02 [1404]
Mosaicplasty (knee) 49503-02 [1520]
- arthroscopic 49576-00 49558-01 [1520]
Ν
Neurectomy
- cranial 39327-04 [82]
- - trigeminal — see Neurectomy/trigeminal
- digital — see Neurectomy/foot
- foot (for neuroma) 49866-00 [1534]
- - revision 49773-00 [1534]
- intermetatarsal — see Neurectomy/foot
- plantar (for neuroma) (for digital neuritis) (for Morton's neuroma) (for plantar neuritis) 49866-00 [1534]
- - revision 49773-00 [1534]
- sympathetic — see Sympathectomy/surgical
- trigeminal (intracranial) 39106-00 [73]
- - extracranial 39327-00 [82]
- vestibular, intracranial approach 39500-00 [73]
- vidian (transantral)
- - with antrostomy, radical (maxillary) 41713-01 [387]
Neurolysis (open) (peripheral) 39330-00 [77]
- tarsal tunnel — see Release/tarsal tunnel 39330-01 [76]
0
Ophthalmoscopy (under general anaesthesia) 42503-00 [160]
- with any other procedure on eye — omit code
Opponensplasty 46417-00 [1466]
Optical coherence tomography 11219-00 [2016]
Ostectomy NEC 90572-00 [1563]
- for graft
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- - living donor .
- - posthumous donor ...
- accessory bone NEC 48400-01 [1563]
- acromion (scapula) 48406-09 [1398]
- - for decompression of subacromial space 48903-00 [1400]
- - - with rotator cuff repair (open) 48909-00 [1404]
- - - - arthroscopic (mini-open) 48960-00 [1405]
- - - internal fixation 48409-09 [1398]
- - - rotator cuff repair (open) 48909-00 [1404]
- - - - arthroscopic (mini-open) 48960-00 [1405]
- bone NEC 90572-00 [1563]
  -- flap, via separate incision 47732-00 [1563]
   - graft, via separate incision 47726-00 [1563]
 - accessory 48400-01 [1563]
- carpal — see Carpectomy 48406-14 [1451]
- - with internal fixation 48409-14 [1451]
- - partial NEC 48406-11 [1375]
- - - with
- - - - drainage of pleura (empyema) 38415-00 [549]
- - - - internal fixation 48409-11 [1375]
--- reconstruction 38858-00 [1378]
- - - 1st rib, for decompression of thoracic outlet 34136-00 [1375]
- - total NEC 48406-12 [1375]
- - - with
- - - - drainage of pleura (empyema) 38415-00 [549]
--- internal fixation 48409-12 [1375]
--- reconstruction 38858-00 [1378]
- - - cervical, for decompression of thoracic outlet 34139-00 [1375]
Osteotomy NEC 90569-00 [1556]
- femur_NEC 48426-00 [1478]
- - distal 48422-0048424-06 [1499]
     with internal fixation 48427 06 [1499]
- - mid 48424-02 [1478]
 -- with internal fixation 48427-02 [1478]
-- proximal 48424-01 [1478]

    with internal fixation 48427-01 [1478]

- fibula 48406-00 [1499]
- metatarsal 48400-02 [1528]
- - for correction hallux
- - - valgus — see Correction/hallux/valgus
- - - varus — see Correction/hallux/varus
- - with internal fixation 48403-00 [1528]
   1st, for correction of hallux valgus
   - bilateral (with internal fixation) (with prosthesis) 49836-00 [1547]
   -- with transfer of adductor hallucis tendon 49838-00 [1547]

    unilateral (with internal fixation) (with prosthesis) 49833-00 [1547]

      with transfer of adductor hallucis tendon 49837-00 [1547]
 mid
   facial (3 or more osteotomies of midface) (Le Fort II or III) 45753-00 [1709]
    -- internal fixation 45754-00 [1709]
    -- intracranial correction of hypertelorism 45767-01 [1711]
   femur 48424-02 [1478]
   - with internal fixation 48427-02 [1478]
- midfacial (3 or more osteotomies of midface) (Le Fort II or III) 45753-00 [1709]
- - with
- - - internal fixation 45754-00 [1709]
- - - intracranial correction of hypertelorism 45767-01 [1711]
- toe (proximal or distal joint) NEC 48400-03 [1528]
- - with internal fixation 48403-01 [1528]
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- trochanter, greater (with distillation) 48426-00 [1478]
- ulna 48406-04 [1424]
P
Plateletpheresis, therapeutic 13750-03 [1892]
Plating, multiple ribs 38859-00 [1378]
Plethysmography
Procedure — see also Intervention OR specified intervention(s) performed
Note:
- for
- - tarsal tunnel 39330-01 [76]
- Grice (subtalar arthrodesis) (with bone graft) 50118-00-50118-01 [1543]
- Keller's (correction of hallux valgus or rigidus) 49821-00 [1547]
- bilateral 49824-00 [1547]
 - unilateral 49821-00 [1547]
- Kelly (-Kennedy) (urethrovesical plication) (with prosthesis) 37043-00 [1110]
- spine NEC 90011-10 [1393]
- Wilson's (correction of hallux valgus) 49833-02 [1547] (with internal fixation) (with prosthesis)
-- bilateral 49836-00 [1547]
-- unilateral 49833-00 [1547]
- Zadek's (radical excision of ingrown toenail) (Zadik's) 47918-00 [1632]
Procurement (for graft, flap or transplantation)
- bone ...
- - and cartilage 48251-00 [1563]
- cartilage ...
- - and bone 48251-00 [1563]
- fascia 90577-00 [1565]
-- for graft 90577-00 [1565]
- fat, via separate incision for graft, via separate incision 45018-04 [1666]
- flap of bone for graft 47732-00 [1563]
- heart ...
- intestine, for transplantation
- muscle 90577-00 [1565]
-- for graft 90577-00 [1565]
- nerve — see Graft/nerve
- tendon 90578-00 [1564]
-- for graft 90578-00 [1564]
- vein
- - for coronary artery bypass — see Bypass/arterial/coronary
- - limb, for graft
- - - bypass 32760-00 [730]
- - - patch 33551-00 [730]
- - - replacement 32760-00 [730]
R
Radiography (diagnostic) 90909-00 [1988]
- ribs (unilateral) 58521-01 [1972]
- - and sternum 58524-01 [1972]
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- - bilateral 58524-00 [1972]
- - - and sternum 58527-00 [1972]

    sacro-iliac joint

    with contrast 59751-00 [1985]

- sacroiliac joint, with contrast 59751-00 [1985]
- salivary gland 57918-00 [1967]
Realignment
- femoral epiphysis (capital) (open) (slipped) 47984-00 [1493]
- tendon — see Transfer/tendon
Reconstruction
- by
- - osseointegration procedure — see Osseointegration
- - tarsal strip procedure — see Tarsal strip
- with resection chest wall, sternum or rib 38858-00 [1378]
- Achilles' tendon 49724-01 [1545]
- bone
- - limb
- - - lower (femur) (fibula) (tibia)
- - - - intercalary, with wide excision en bloc resection of lesion (tumour) affecting bone
- - - - using
- - - - - allograft 50215-04 [1575]
- - - - - autograft 50215-05 [1575]
- - - - - prosthesis 50215-03 [1575]
- - - upper (humerus) (radius) (ulna)
- - - - intercalary, with wide excision en bloc resection of lesion (tumour) affecting bone
- - - - using
- - - - - allograft 50215-01 [1575]
- - - - - autograft 50215-02 [1575]
- - - - - prosthesis 50215-00 [1575]
- joint — see also Arthroplasty
- - ankle, by ligamentous repair 49709-00 [1542]
- - knee (open) 49539-01 [1522]
- - - with repair of meniscus 49542-01 [1522]
- - - - arthroscopic (closed) 49542-00 [1522]
- - - - transfer of fibula or tibia and repair of quadriceps mechanism 50417-00 [1522]
- - - arthroscopic (closed) NEC 49539-00 [1522]
- - - distal femoral articular surface 47592-01 [1522]
- - - - and proximal tibial articular surface 47593-01 [1522]
- - - proximal tibial articular surface 47592-01 [1522]
- - - - and distal femoral articular surface 47593-01 [1522]
- - - revision 49551-00 [1524]
- - phalanx
- - - hand (finger) (thumb)
- - - - with splitting of phalanx 50396-00 [1449]
-- radio-ulnar (distal) 46345-00 [1469]
- - radioulnar (distal) 46345-00 [1469]
- - shoulder NEC (see also Repair/joint/shoulder) 90533-00 [1404]
- - wrist NEC 49215-01 [1469] 49215-00 [1470]
    - radio-ulnar 46345-00 [1469]
 - - radioulnar 46345-00 [1469]
- laryngopharynx (plastic)
- papillary muscle (heart) 38490-00 [662]
- patellofemoral joint, combined open and arthroscopic 49565-00 [1522]
- pharynx
- tendon
- - Achilles' 49724-01 [1545]
- - ankle NEC 49814-00 [1545]
- - hand, by tendon graft 46408-00 [1469]
- - - flexor tendon pulley 46411-00 [1469]
- - pulley NEC 90590-00 [1576]
- wrist NEC 49215-01 [1469] 49215-00 [1470]
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- radio-ulnar 46345-00 [1469]
- - radioulnar 46345-00 [1469]
- zygoma (arch) 90683-00 [1715]
Reduction
- dislocation (bone) (with cast) (with splint)
- - with fracture — see Reduction/fracture/by site
- - acromioclavicular joint (arthroscopic) 47007-00 [1404](closed) 47003-00 [1402]
- - - open 47007-01 [1404] 47006-00 [1402]
- - ankle (closed) (tarsus) 47063-00 [1540]
- - clavicle (closed) 47003-00 [1402]
--- open 47006-00 [1402]
- - elbow (closed) 47018-00 [1415]
- - hip (closed) (prosthesis) 47048-00 [1487]
- - - open (with internal fixation) (prosthesis) 47051-00 [1487]
- - radiohumeral joint
- - - proximal
- - - - with reduction of fracture
- - - - radius — see Reduction/fracture/radius/shaft
- - - - - ulna — see Reduction/fracture/ulna/shaft
- - radioulnar radio-ulnar joint
- - - distal (closed) 47024-02 [1433]
- - - - internal fixation 47024-03 [1433]
- - - - reduction of fracture
---- radius — see Reduction/fracture/radius/shaft
- - - - - ulna — see Reduction/fracture/ulna/shaft
- - - - open 47027-02 [1433]
- - - - with internal fixation 47027-03 [1433]
- - - proximal (closed) 47024-00 [1415]
- - - with internal fixation 47024-01 [1415]
--- open 47027-00 [1416]
- - - - with internal fixation 47027-01 [1416]
- - rib (closed) (with internal fixation) 90610-00 [1377]
- - - open 90610-01 [1377]
- sacro iliac joint (closed) (open)
--- with internal fixation 47513-00 [1479]
- - sacroiliac joint, with internal fixation (closed) (open) 47513-00 [1479]
- - shoulder (closed) 47009-00 [1402]
- - sternoclavicular joint (arthroscopic) 47007-00 [1404](closed) 47003-00 [1402]
- - - open 47007-01 [1404] 47006-00 [1402]
- - sternum (closed) (with fixation) 47466-00 [1377]
- epiphysis, separated 90581-00 [1567]
- - femur (capital) (slipped) (closed) (with fixation) 47525-00 [1493]
---- realignment — see Realignment/femoral epiphysis
---- stabilisation — see Stabilisation/femoral epiphysis
     open 47525-01 [1493]
- - radius (closed) (with fixation) 90541-00 [1434]
- - - open 90541-01 [1434]
- - ulna (closed) (with fixation) 90541-00 [1434]
- - - open 90541-01 [1434]
- fracture (bone) (with cast) (with splint)
- - acetabulum (closed) 47492-01 [1479]
- - - with internal fixation 47498-00 [1479]
- - - posterior wall and femoral head (open) (with internal fixation) 47514-00 [1486]
- - femur, femoral (closed) NEC 47516-01 [1486]
- - - with internal fixation (cross) (intramedullary) NEC 47531-00 [1486]
- - - epiphysis (capital) (slipped) 47525-00 [1493]
- - - - with
- - - - realignment — see Realignment/femoral epiphysis
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--- stabilisation — see Stabilisation/femoral epiphysis
   -- with internal fixation 47525-00 [1493]
      open 47525-01 [1493]
   --- with internal fixation 47525-01 [1493]
- - - head 47516-01 [1486]
- - - - with internal fixation 47519-00 [1479]
- - - - and posterior wall acetabulum, open (with internal fixation) 47514-00 [1486]
- - - - open <u>NEC</u> 47528-00 [1486]
- - - - with internal fixation 47519-00 [1479]
- - - neck 47516-01 [1486]
- - pelvis (open)
- - - with internal fixation
- - - - anterior segment 47486-00 [1486]
- - - - and posterior segment (ring) (sacroiliac sacro-iliac joint) 47489-01 [1486]
- - - - posterior segment (<u>sacroiliac</u> joint) 47489-00 [1486]
---- and anterior segment <u>(ring)</u> 47489-01 [1486]
- - radius, radial
- - - shaft (closed) 47381-00 [1427]
- - - - internal fixation 47381-02 [1427]
- - - - reduction of dislocation (radiohumeral) (<u>radioulnar-radio-ulnar</u>) 47385-00 [1427]
- - - open 47384-00 [1429]
- - - - - internal fixation 47384-02 [1429]
- - - - - reduction of dislocation (radiohumeral) (radioulnar-radio-ulnar) 47386-00 [1432]
- - tibia, tibial (closed) (distal) (proximal) NEC 47568-00 [1509]
- - - plateau
- - - lateral (closed) 47546-00 [1507]
- - - - with internal fixation 47546-01 [1507]
- - - - and medial plateau 47555-00 [1507]
- - - - - with internal fixation 47555-01 [1507]
- - - - open 47549-00 [1508]
---- with internal fixation 47549-01 [1508]
- - - - - and medial plateau 47558-00 [1508]
---- with internal fixation 47558-01 [1508]
- - - - medial-(closed) 47546-00 [1507]
- - - - with internal fixation 47546-01 [1507]
   --- and lateral plateau 47555 00 [1507]
        - with internal fixation 47555-01 [1507]
---- open 47549-00 [1508]
- - - - - with internal fixation 47549-01 [1508]
    --- and lateral plateau 47558-00 [1508]
---- with internal fixation 47558-01 [1508]
-- shaft (closed) 47568-00 47564-00 [1509]
- - - - with internal fixation (cross) (intramedullary) 47566-00 [1509]
   -- intra-articular 47567-00 [1509]
    -- with internal fixation (cross) (intramedullary) 47566-02 [1509]
--- open 47570-00 [1510]
- - - - with internal fixation (cross) (intramedullary) 47566-01 [1510]
- - - - intra-articular 47573-00 [1510]
---- with internal fixation (cross) (intramedullary) 47566-03 [1510]
--- upper end (head) (proximal)
- - ulna
- - - shaft (closed) 47381-01 [1428]
- - - - with
- - - - internal fixation 47381-03 [1428]
- - - - reduction of dislocation (radiohumeral) (radioulnar radio-ulnar) 47385-01 [1428]
- - - - open 47384-01 [1430]
- - - - with
- - - - - internal fixation 47384-03 [1430]
- - - - - reduction of dislocation (radiohumeral) (radioulnar-radio-ulnar) 47386-02 [1432]
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Release, released

    adhesions

- - elbow (open) 49100-02 [1410]
- - - arthroscopic 49121-04 [1410]
- - knee (open) 49500-04 [1501]
- - - arthroscopic 49578-00 49560-02 [1501]
- contracture
- - capsule, for
- - - Dupuytren's 46381-00 [1440]
- - - hyperextension deformity of toe 50345-00 [1548]
- - digit (extension) (flexion)
- - - hand (finger) (thumb) 46492-00 [1467]
- - Dupuytren's
- - - bv
- - - fasciectomy — see also Fasciectomy/for Dupuytren's contracture (palmar) 46369-00 [1447]
        1 digit (ray) 46372-00 [1447]
        2 digits (rays) 46375-00 [1447]
       3 or more digits (rays) 46378 00 [1447]
---- revision — see Revision/fasciectomy, for Dupuytren's contracture block [1471]
- - - - fasciotomy (percutaneous) (subcutaneous) 46366-00 [1440]
- joint NEC 50115-00 [1905]
- - capsule — see Release/capsule/joint
- - knee
- - - lateral, arthroscopic (closed) 49578-00 49560-02 [1501]
- tarsal tunnel 49774-00 [1530] 39330-01 [76]
- - revision 49775-00 [1530]
- tendon — see Tenotomy
Removal — see also Excision
- loose body
- - bone — see Sequestrectomy/bone
- - joint <u>NEC 50103-00</u> [1555]
- - - ankle (open) 49706-02 [1529]
- - - - arthroscopic (closed) 49703-02 [1529]
--- arthroscopic (closed) NEC 50100-00 [1555]
--- elbow (open) 49100-01 [1410]
- - - - arthroscopic (closed) 49121-01 [1410]
--- foot 49734-01 [1530]
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      secondary (delayed) 46423-00 [1466]
    flexor (distal to A1 pulley) (primary) 46432-00 [1466]
     - proximal to A1 pulley 46426-00 [1466]
     - secondary (delayed) (distal to A1 pulley) 46435-00 [1466]
      - proximal to A1 pulley 46429-00 [1466]
    sheath NEC 47972-00 [1572]
- - sheath NEC 47972-00 [1572]
Synovectomy
   arthroplasty of carpal bone 46324-00 [1468]
- - excision of tendon — see Tenosynovectomy
- foot (arthroscopic) 49730-02 [1534]
- joint 50104-00 [1561]
```

```
- - metacarpal 46336-01 [1445]
- - - with excision of osteophyte 46493-00 [1450]
- - metacarpophalangeal
- - - with arthroplasty (joint replacement) — see Arthroplasty/metacarpophalangeal
- - metatarsophalangeal, 1st 49860-00 [1534]
- - - arthroscopic 49730-02 [1534]
-- radio-ulnar (distal) 46342-00 [1426]
- - radioulnar (distal) 46342-00 [1426]
- tendon
-- ankle 50312-00 [1534]
- - - arthroscopic 49703-04 [1531]
- - digital extensor, distal to wrist 46339-00 [1446]
- - hand-(wrist)
- - - extensor 46339-00 [1446]
- - - flexor 46339-00 [1446]
- - - 1 digit 46348-00 [1446]
- - - 2 digits 46351-00 [1446]
- - - - 3 digits 46354-00 [1446]
- - - 4 digits 46357-00 [1446]
- - - - 5 or more digits 46360-00 [1446]
- - wrist (extensor) (flexor) 46339-00 [1446]
Т
Tenodesis NEC 47963-01 [1572]
- biceps 48972-01 [1404]
- - arthroscopic 48972-00 [1404]
Tenolysis
Tenotomy (open) 47963-00 [1557]
- Achilles' 49718-01 [1542]
- - with stabilisation talonavicular joint 50335-01 [1542]
- - - percutaneous 50335-00 [1542]
- finger (thumb)
- hip (adductor) (psoas)
- - for release of hip contracture
- - - bilateral 50378-01 [1480]
- - - unilateral 50375-01 [1480]
- iliopsoas 47964-01 [1481]
- - arthroscopic 47964-00 [1481]
- knee
Transfer
- tendon 47966-00 [1572]
- - ankle and foot 49736-00 [1542]
    tibialis
    - anterior 50339-00 [1542]
   - - posterior 50342-00 [1542]
- - elbow, for restoration (function) 47967-00 50405-00-[1418]
- - foot 49812-00 [1542]
 - - for correction of hallux valgus or varus 49827-01 [1547]
    adductor hallucis, for correction of hallux valgus (unilateral) 49827-00 [1547]
      with osteotomy 1st metatarsal (with internal fixation) (with prosthesis) 49837-00 [1547]
     bilateral 49830-00 [1547]

    with osteotomy 1st metatarsal (with internal fixation) (with prosthesis) 49838-00 [1547]

 - - and ankle 49736-00 [1542]
     anterior 50339-00 [1542]
    - posterior 50342-00 [1542]
- - hamstring ...
- - hand 46417-00 [1466]
- - - with arthroplasty
       arpal bone 46324-00 [1468]
--- interphalangeal — see Arthroplasty/interphalangeal
- - - - metacarpophalangeal — see Arthroplasty/metacarpophalangeal
```

```
- - tibialis (anterior) (posterior) 50339-01 [1542]
   - anterior 50339-00 [1542]
    posterior 50342-00 [1542]
- - toe, for correction of hallux valgus or varus 49827-01 [1547]
    -adductor hallucis, for correction of hallux valgus (unilateral) 49827-00 [1547]
    - bilateral 49830-00 [1547]
- thumb 46507-00 [1467]
Transplant, transplantation
- tendon 47966-00 [1572]
- - ankle and foot 49736-00 [1542]
  - tibialis
     anterior 50339-00 [1542]
    - posterior 50342-00 [1542]
- - elbow, for restoration (function) 47967-00-50405-00 [1418]
- - foot 49812-00 [1542]
- - - and ankle 49736-00 [1542]
    tibialis
    - anterior 50339-00 [1542]
   - - posterior 50342-00 [1542]
- - hand 46417-00 [1466]
- - - with arthroplasty
      carpal bone 46324-00 [1468]
- - - - interphalangeal — see Arthroplasty/interphalangeal
- - - - metacarpophalangeal — see Arthroplasty/metacarpophalangeal
- - tibia, tibialis (anterior) (posterior) 50339-01 [1542]
   - tibialis
    - anterior 50339-00 [1542]
     posterior 50342-00 [1542]
- - toe, for correction of hallux valgus or varus 49827-01 [1547]
- - - with osteotomy 1st metatarsal 49837-01 [1547]
     adductor hallucis, for correction of hallux valgus (unilateral) 49827-00 [1547]
     with osteotomy 1st metatarsal (with internal fixation) (with prosthesis) 49837-00 [1547]
     bilateral 49830-00 [1547]
                                   sal (with internal fixation) (with prosthesis) 49838-00 [1547]
- testis to scrotum — see Fixation/testis
Trapeziectomy with abductor pollicis longus suspensionplasty 46324-01 [1467] 46324-00 [1468]
Wilson's procedure (correction of hallux valgus) 49833-02 [1547] (with internal fixation) (with prosthesis)
- bilateral 49836-00 [1547]
- unilateral 49833-00 [1547]
```

## 13.10 Revised ACS Chapter 13

Window procedure

Application of the ACS template led to the following refinements:

Australian Coding Standard	Revision
1309 Dislocation or complication of joint prosthesis	Revised ACS title with addition of Examples.

## **Australian Coding Standards**

## 1309 DISLOCATION OR COMPLICATION OF JOINT PROSTHESIS

#### **Exception(s)**

1. <u>Do not assign a code from subcategory Z96.6 *Presence of orthopaedic joint implants* with a code from category T84.0 as the presence of an internal joint prosthesis is inherent (see Example 2).</u>

#### Example 1:

Patient was admitted with dislocated hip prosthesis following fall from bed.

Assign: S73.00 Dislocation of hip, unspecified

Z96.64 Presence of hip implant

**Rationale:** S73.00 — for the complication (dislocation) of a joint prosthesis resulting from falling from bed

(Directive 1)

<u>Z96.64 — to indicate the presence of a joint prosthesis (Directive 2)</u>

#### Example 2:

Patient was admitted with principal diagnosis of osteoarthritis of hip for revision of hip replacement due to displacement.

Assign: T84.0 Mechanical complication of internal prosthetic joint

**Rationale:** T84.0 — for the complication (displacement) of an existing hip prosthesis requiring replacement

(Directive 3)

A code from subcategory Z96.6 Presence of orthopaedic joint implants is not assigned as T84.0

already indicates the presence of an internal joint prosthesis (Exception 1).

# 14. Genitourinary system

# 14.1 Kidney interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 11**

## PROCEDURES ON URINARY SYSTEM (BLOCKS 1040-1129)

## **KIDNEY**

## **DESTRUCTION**

1046 Destruction procedures on kidney

Excludes: that for destruction of calculus of kidney (see block [1041])

90370-01 Endoscopic destruction procedures on kidney

Endoscopic destruction of (lesion) (tissue) kidney

Includes: cystoscopy

retrograde pyeloscopy ureteroscopy urethral dilation

36530-00 Endoscopic destruction procedures on kidney

Endoscopic destruction of (lesion) (tissue) kidney

Includes: cystoscopy

retrograde pyeloscopy ureteroscopy urethral dilation

90370-02 Other closed destruction procedures on kidney

Percutaneous destruction procedures on kidney

Includes: antegrade pyeloscopy percutaneous nephroscopy

36530-01 Other closed destruction procedures on kidney

Percutaneous destruction of (lesion) (tissue) kidney

Includes: antegrade pyeloscopy percutaneous nephroscopy

90370-00 Destruction procedures on kidney

36530-02 Destruction procedures on kidney

Excludes: destruction of (lesion) (tissue) kidney:

• endoscopic (36530-00 [1046])

• percutaneous (36530-01 [1046])

• • •

1060	Haemodialysis
13100-00	Haemodialysis
13100-01	Intermittent haemofiltration
13100-02	Continuous haemofiltration
13100-03	Intermittent haemodiafiltration
13100-04	Continuous haemodiafiltration Continuous venovenous: • haemodiafiltration [CVVHDF] • haemodialysis [CVVHD]
13100-05 	Haemoperfusion

## **ACHI Alphabetic Index**

## C

Calyorrhaphy 90370-0236530-01 [1046]

- - nephrolithotomy see Nephrolithotomy
- - pyelolithotomy see Pyelolithotomy

## D

### Delay, delayed

- puberty (constitutional) E30.0
- renal dialysis (noncompliance) Z91.1
- union, fracture M84.2-

Destruction (ablation) (cauterisation) (coagulation)(cryotherapy) (diathermy) (HIFUS) (irreversible electroporation) (laser) (microwave) (radiofrequency) (thermotherapy)

- kidney (percutaneous) 90370-0236530-01 [1046]
- - endoscopic 90370-0136530-00 [1046]
- - open <del>90370-00</del>36530-02 **[1046]**

## **Dialysis**

- haemodiafiltration
- - continuous (venovenous (CVVHDF)) 13100-04 [1060]
- - intermittent 13100-03 [1060]
- haemodialysis 13100-00 [1060]
- -- continuous venovenous (CVVHD) 13100-04 [1060]
   haemofiltration
- - continuous 13100-02 [1060]
- - intermittent 13100-01 [1060]
- haemoperfusion 13100-05 [1060]

## Н

#### Haemodiafiltration

- for renal dialysis
- - continuous (venovenous (CVVHDF)) 13100-04 [1060]
- - intermittent 13100-03 [1060]

### Haemodialysis 13100-00 [1060]

- continuous venovenous (CVVHD) 13100-04 [1060]

### Haemodilution 92063-00 [1893]

## M

#### Missed

- abortion O02.1
- delivery O36.4
- dialysis (noncompliance) Z91.1
- miscarriage O02.1

#### N

Nephroscopy (antegrade pyeloscopy) (percutaneous) 36627-00 [1043]

- with
- - biopsy 36627-01 [1047]
- - diathermy 90370-0236530-01 [1046]
- - extraction of calculus (stone) 30450-01 [1041]

. . .

## Noncompliance with medical treatment or regimen Z91.1

- medical treatment or regimen Z91.1
- renal dialysis (delayed) (missed) Z91.1

Nondescent (congenital) — see also Malposition/congenital

#### P

#### **Pyeloscopy**

- antegrade see Nephroscopy
- retrograde (endoscopic) 36652-00 [1040]
- - with
- - biopsy 36654-00 [1047]
- - diathermy 90370-0136530-00 [1046]
- - extraction of calculus (stone) 36654-02 [1041]
- - fragmentation of calculus (stone) 36656-02 [1041]
- - - and extraction 36656-03 [1041]
- - manipulation of calculus (stone) 36652-01 [1041]

## 14.2 Bladder interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## CHAPTER 11

## PROCEDURES ON URINARY SYSTEM (BLOCKS 1040-1129)

## **BLADDER**

## **OTHER PROCEDURES**

. . .

## 1111 Other procedures on bladder

90363-00 Other diagnostic procedures on bladder

**Note:** For nonsurgical diagnostic interventions see Chapter 19

90363-01 Other procedures on bladder

37048-00 Closure of bladder neck

**Note:** Performed for management of urinary incontinence.

## **EXCISION**

# 1128

Excision procedures on other sites of urinary system

30075-32 Biopsy of perirenal or perivesical tissue

Excision of prosthetic device, implant or graft, perineal or suprapubic approach 37046-00

## **ACHI Alphabetic Index**

## C

## Closure (of)

- bladder
- - exstrophy 37050-00 [1106]
- --- secondary 37842-02 [1106]
- --- with ureteric implantation 37842-03 [1106]
- - neck 37048-00 [1111]
- blind-sac see Closure auditory canal, external

## Ε

Excision — see also Removal

- graft
- - bypass (infected)
- - limb 34175-00 [753]
- - - axillo-femoral 34172-00 [753]
- ---- femoro-femoral 34172-00 [753]
- --- neck 34157-00 [753]
- - trunk 34169-00 [753]
- --- with replacement 90231-00 [762]
- - perineal approach 37046-00 [1128]
- - prosthetic (via)
- - abdominal approach (open) (pelvis, pelvic) 35585-01 [989]
- ---- laparoscopic 35585-00 [989]
- - perineal approach 37046-00 [1128]
- - suprapubic approach 37046-00 [1128]
- - vaginal approach 35581-00 [1282]
- - skin
- - xenogeneic (heterogenous) 90667-00 [1629]
- - - to burn 90667-01 **[1629]**  - suprapubic approach 37046-00 **[1128]**
- - vaginal approach 35581-00 [1282]
- prosthesis, prosthetic device
- - abdominal approach (open) (pelvis, pelvic) 35585-01 [989]
- - laparoscopic 35585-00 [989]
- - perineal approach 37046-00 [1128]
- - suprapubic approach 37046-00 [1128]
- - vaginal approach 35581-00 [1282]

## R

Removal — see also Excision

- graft
- - bypass
- - perineal approach 37046-00 [1128]
- - suprapubic approach 37046-00 [1128]
- - synthetic skin (skin substitute) 90668-00 [1629]

```
- implant
```

...

- - perineal approach 37046-00 [1128]
- - sealed radioactive source (brachytherapy implant) 15339-00 [1793]
- - soft tissue see also Removal/implant/by site
- - specified NEC 90606-01 [1661]
- - subdermal hormone 30062-00 [1908]
- - suprapubic approach 37046-00 [1128]
- - testicular 96227-02 [1171]

• • •

- prosthesis, prosthetic device — see also Removal/by type of Device

..

- - perineal approach 37046-00 [1128]

- - pouch, for gastroschisis 43867-01 [1003]

- - soft tissue — see also Removal/prosthesis, prosthetic device/by site

- - - specified NEC 90606-01 [1661]

- - suprapubic approach 37046-00 [1128]

- - testicular 96227-02 [1171]

. . .

## 14.3 Testicular interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 12**

# PROCEDURES ON MALE GENITAL ORGANS (BLOCKS 1160–1203) SCROTUM AND TUNICA VAGINALIS

## APPLICATION, INSERTION, REMOVAL

## 1171

Application, insertion or removal procedures on scrotum or tunica vaginalis

37604-17

Percutaneous aspiration or drainage of scrotum or tunica vaginalis

Percutaneous aspiration of:

- hydrocele
- spermatocele

Tapping of hydrocele

Excludes: for biopsy (37604-18 [1173])

96227-00 Insertion of testicular prosthesis, unilateral

Includes: exploration of scrotal contents

that via:

• inguinal approach
• scrotal approach

30630-00 Insertion of testicular prosthesis, unilateral

**Includes:** exploration of scrotal contents

that via:

• inguinal approach

• scrotal approach

## 96227-01 Insertion of testicular prosthesis, bilateral

Includes: exploration of scrotal contents

that via:

• inguinal approach

• scrotal approach

## 30630-01 Insertion of testicular prosthesis, bilateral

**Includes:** exploration of scrotal contents

that via:

- · inguinal approach
- scrotal approach

96227-02 Removal of foreign body or device from scrotum, with incision Removal of testicular prosthesis

#### **INCISION**

## 1172

#### **Exploration of scrotum**

Incision and drainage of:

- scrotum
- tunica vaginalis

Excludes: percutaneous aspiration or drainage (37604-17 [1171])

that with:

- biopsy of:
- scrotum (37604 [1173])
- seminal vesicle (37216-00, 37218-00, 37219-01 [1163], 37212-00 [1164])
- spermatic cord, epididymis, vas deferens (30644-06 [1180])
- testis (30644-04, 30644-05 [1180])
- tunica vaginalis (37604 [1173])
- fixation of testis (orchidopexy) (37604 [1175], 37604 [1188])
- insertion of testicular prosthesis (96227-0030630-00, 96227-0130630-01 [1171])
- removal of testicular prosthesis (96227-02 [1171])

37604-00 Exploration of scrotal contents, unilateral

37604-01 Exploration of scrotal contents, bilateral

. . .

# TESTIS, VAS DEFERENS, EPIDIDYMIS AND SPERMATIC CORD EXCISION

. . .

## 1184

## Orchidectomy

**Includes:** excision of hydrocele repair of varicocele

Code also when performed:

• insertion of testicular prosthesis (96227-0030630-00, 96227-0130630-01 [1171])

30641-00 Orchidectomy, unilateral

Excision of testis

Removal of remaining (solitary) testis

30641-01 Orchidectomy, bilateral

Excision of testes

30629-00 Radical orchidectomy, unilateral

Includes: excision of spermatic cord that via inguinal approach Includes: excision of spermatic cord that via inguinal approach

## **ACHI Alphabetic Index**

## Ī

#### Insertion

...

- - testicular
- - bilateral <del>96227-01</del>30630-01 **[1171]**
- - unilateral <del>96227-00</del>30630-00 **[1171]**

•••

## 0

Orchidectomy (unilateral) 30641-00 [1184]

- bilateral 30641-01 [1184]
- - radical 30629-01 [1184]
- unilateral 30641-00 [1184]
- - radical 30629-00 [1184]

## 14.4 Cervical interventions

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

## **ACHI Tabular List**

## **CHAPTER 13**

## **GYNAECOLOGICAL PROCEDURES (BLOCKS 1240–1299)**

## **CERVIX**

## **EXCISION**

1276 Excision procedures on cervi	ix
-----------------------------------	----

35608-02 Biopsy of cervix

Endocervical curettage Punch biopsy of cervix

35618-00 Cone biopsy of cervix

Excludes: that by laser (35618-01 [1276])

35609-00 Cone biopsy of cervix

**Excludes:** that by laser (35618-01 [1276])

35618-01 Cone biopsy of cervix by laser

35611-01 Partial excision of cervix

Cervical polypectomy

Includes: endoscopy

96235-00 Total excision of cervix, laparoscopic

Code also when performed:

• excision of pelvic lymph nodes (96244-05, 96245-05 [806])

```
35609-01
            Total excision of cervix, laparoscopic
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
             Excludes: that with laparoscopic abdominal hysterectomy:
                       • radical (35667-02 [1268])
                       • total (35653-07 [1268])
96235-01 Total excision of cervix, laparoscopically assisted vaginal approach
             Includes: endoscopy
             Code also when performed:

    excision of pelvic lymph nodes (96244-05, 96245-05 [806])

35609-02
            Total excision of cervix, laparoscopically assisted vaginal approach
             Includes: endoscopy
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
             Excludes: that with vaginal hysterectomy (see block [1269])
96235-02 Total excision of cervix, vaginal approach
             Includes: endoscopy
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
35609-03
            Total excision of cervix, vaginal approach
             Includes: endoscopy
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
             Excludes: that with vaginal hysterectomy (see block [1269])
96235-03 Total excision of cervix, abdominal approach
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
35609-04
            Total excision of cervix, abdominal approach
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
             Excludes: that with abdominal hysterectomy:
                       • radical (35667-00 [1268])
                       • total (35653-01 [1268])
             Radical excision of cervix, laparoscopic
96235-04
             Includes: excision of:

    paracolpos

                       • parametria
                       • upper 1-2 centimetres of vagina
             Code also when performed:
             • excision of pelvic lymph nodes (96244-05, 96245-05 [806])
```

## **ACHI Alphabetic Index**

#### В

Biopsy (brush) (with brushing(s)) (with washing(s) for specimen collection)

- cervix 35608-02 [1276]
- - with radical diathermy of cervix 35646-00 [1275]
- - cone <del>35618 00</del>35609-00 **[1276]**
- - by

```
- - - - laser 35618-01 [1276]
- - - - LLETZ (large loop excision of transformation zone) 35647-00 [1275]

E

Excision — see also Removal
...
- cervix, cervical (partial) 35611-01 [1276]
...
- total
- - - with partial excision of vagina and surrounding tissue — see Excision/cervix/radical
- - - abdominal approach (open) 96235 0335609-04 [1276]
- - - laparoscopic 96235 0035609-01 [1276]
- - - laparoscopically assisted vaginal approach 96235 0135609-02 [1276]
- - - vaginal approach 96235 0235609-03 [1276]
```

#### 14.5 Dialysis follow up care

Z49.3 *Dialysis follow-up care* has been created to classify admission for dialysis follow-up care, such as closure of an arteriovenous fistula.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

## FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES AND HEALTH CARE (Z40–Z54)

Z49

#### Care involving dialysis

**▼**1438

Excludes: kidney dialysis status (Z99.2)

malfunction or other complication of device or arteriovenous fistula - see Alphabetic Index

Z49.0 Preparatory care for dialysis

Admission for:

- · creation of arteriovenous fistula [graft]
- · insertion of peritoneal dialysis catheter

**Excludes**: admission for creation of new fistula due to complication of existing fistula (even when new fistula is created at different site) — see Alphabetic Index: Complication(s)/dialysis/catheter

Z49.1 Extracorporeal dialysis

**▼**1404

Dialysis (kidney) NOS

Z49.2 Other dialysis

**▼**1404

Peritoneal dialysis

**©**Z49.3 Dialysis follow-up care

Closure of arteriovenous fistula

#### **ICD-10-AM Alphabetic Index**

#### **SECTION I:**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

#### A

#### Admission (for)

- chemotherapy for neoplasm Z51.1
- - prophylactic Z29.21
- closure of arteriovenous fistula **Z48.8**Z49.3
- contraceptive management Z30.9
- reversal, sterilisation intervention
- - female (fallopian tube) Z31.02
- - male (vas deferens) (vasa deferentia) Z31.01
- stabilisation, diabetes mellitus E1-.65
- superficialisation of arteriovenous fistula Z49.0
- therapy

#### C

#### Closure

- arteriovenous fistula **Z48.8Z49.3**
- cranial sutures, premature (see also Craniosynostosis) Q75.09

#### Dialysis (intermittent) (treatment)

- adjustment of catheter **Z49.3Z49.0**
- amyloid, amyloidosis E85.3
- extracorporeal Z49.1
- - preparatory care only (without treatment) Z49.0
- fitting of catheter Z49.0
- kidney NEC Z49.1
- - preparatory care only (without treatment) Z49.0
- management of catheter Z49.3Z49.0
- peritoneal Z49.2
- - amyloid, amyloidosis E85.3
- - preparatory care only (without treatment) Z49.0
- preparatory care only (without treatment) Z49.0
- removal or replacement of catheter **Z49.3Z49.0**
- renal see Dialysis/kidney
- retina, retinal H33.0
- specified type NEC Z49.2
- - preparatory care only (without treatment) Z49.0

Diaphragm — see condition

#### R

#### Removal (from) (of)

- arteriovenous shunt **Z48.8Z49.3**
- cardiac device (artificial heart) (automatic implantable defibrillator) (battery) (defibrillator) (electrode) (end-of-life) (pacemaker) (pulse generator) (resynchronisation therapy) Z45.0
- catheter
- - dialysis <del>Z49.0</del>Z49.3
- - due to complication see Complication(s)/dialysis/catheter
- - from artificial opening see Attention/artificial/opening
- - peritoneal Z45.82
- - for dialysis <del>Z49.0</del><u>Z49.3</u>
- - due to complication see Complication(s)/dialysis/catheter/peritoneal, intraperitoneal
- - urinary (indwelling) Z46.6
- - vascular (central venous catheter) (Hickman's line) (permacath) (without reservoir) Z45.81

- - with reservoir (infusion port) (Port-A-Cath) Z45.2
- continuous ambulatory drug delivery device (CADD) Z45.1
- contraceptive device (intrauterine) (IUCD) Z30.5
- device
- - contraceptive (intrauterine) (IUCD) Z30.5
- - drug delivery or pump (CADD) (external) (implantable spinal) Z45.1
- - fixation (internal) Z47.0
- - external Z47.8
- - infusion or pump (external) (implantable spinal) Z45.1
- - myringotomy tube (grommet) Z45.83
- - traction Z47.8
- - tympanostomy tube (grommet) Z45.83
- - vascular access (infusion port) (Port-A-Cath) (reservoir) Z45.2
- dialysis catheter <del>Z49.0</del>Z49.3
- - due to complication see Complication(s)/dialysis/catheter

. . .

#### **Australian Coding Standards**

#### 1438 CHRONIC KIDNEY DISEASE

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## 1. CHRONIC KIDNEY DISEASE AND ESTIMATED GLOMERULAR FILTRATION RATE (eGFR)

• • •

#### **Directive(s)**

. . .

- **1.7** Assign one of the following codes as the principal diagnosis where a patient with CKD is admitted for care related to an AV fistula or catheter for haemodialysis:
  - Z49.0 Preparatory care for dialysis for creation of an AV fistula
  - Z49.3 *Dialysis follow-up care* for closure of an AV fistula.

#### 14.6 Minor addenda

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

#### **ACHI Tabular List**

#### **CHAPTER 11**

## PROCEDURES ON URINARY SYSTEM (BLOCKS 1040–1129) URETER

#### APPLICATION, INSERTION, REMOVAL

1066

Endoscopic ureteric catheterisation

Includes: cystoscopy

ureteric dilation urethral dilation

Ureteroscopy with bilateral retrograde pyelogram

1067

Endoscopic insertion, replacement or removal of ureteric stent

Includes: cystoscopy

ureteric dilation ureteroscopy urethral dilation

. . .

#### **BLADDER**

#### **EXCISION**

. . .

1102 Cystectomy

37000-00 Laparoscopic partial excision of bladder

37000-01 Partial excision of bladder

37014-00 Total excision of bladder

Code also when performed:

- excision of pelvic lymph nodes, radical (96245-05 [806])
- formation of incontinent intestinal urinary reservoir (ileal or colon conduit) (36600-02 [1129])
- hysterectomy (see block [1268])
- radical prostatectomy (37209-00 [1167])
- transplantation of ureter (see blocks [1080] to [1082])
- ureteric reimplantation (see blocks [1084] and [1085])
- urethrectomy (37330 [1118])

Excludes: with anterior pelvic exenteration (37019-00 [989])

. . .

#### **REPAIR**

#### **OTHER PROCEDURES**

1109

#### Procedures for male stress incontinence

Excludes: that for female stress incontinence (see block [1110])

37339-01 Injection of paraurethral bulk for stress incontinence, male

37044-00 Retropubic procedure for stress incontinence, male

Sling procedure for stress incontinence, male

Includes: nonautologous biological sling

that with prosthesis

37044-03 Revision of retropubic procedure for stress incontinence, male

Revision of sling procedure for stress incontinence, male

Includes: that with prosthesis

#### 1110

#### Procedures for female stress incontinence

. .

35599-00 Sling procedure for stress incontinence, female

Insertion of:

- transobturator suburethral tape ([TOT])
- transvaginal tension-free tape ([TVT)]

Intravaginal slingplasty

Tension-free vaginal tape procedure

Transobturator suburethral tape procedure

Includes: combined abdominovaginal or abdominal or vaginal approach

nonautologous biological sling

that with prosthesis

Excludes: revision of sling procedure for stress incontinence (35599-01 [1110])

that for male (37044-00 [1109])

35599-01 Revision of sling procedure for stress incontinence, female

Replacement of:

- transobturator suburethral tape ([TOT])
- transvaginal tension-free tape ([TVT])

Revision of:

- intravaginal slingplasty
- tension-free vaginal tape procedure
- transobturator suburethral tape procedure

Includes: that with prosthesis

**Excludes:** that for male (37044-03 [1109])

37340-00 Division of urethral sling following previous stress incontinence procedure

Removal of:

- transobturator suburethral tape (TOT)
- transvaginal tension-free tape ([TVT])
- urethral sling (autologous or other biological) following previous stress incontinence procedure

Note: Performed for

- pain or infection following previous surgery
- sling erosion
- urethral obstruction.

Excludes: revision of sling procedure for stress incontinence (35599-01 [1110])

..

1113

#### **URETHRA**

Includes: bulbourethral gland [Cowper's gland]

periurethral tissue

Insertion, replacement or removal of artificial urinary sphincter

Excludes: revision of artificial urinary sphincter (37390-00 [1124])

37387-00 Insertion of artificial urinary sphincter

*Includes:* insertion of:

balloon

• pump

Code also when performed:

• insertion of cuff (37381-00, 37384-00 [1113])

Excludes: that for replacement (37390-01 [1113])

#### **REVISION**

1124

Revision procedures on urethra

37390-00

Revision of artificial urinary sphincter

Adjustment (percutaneous) of artificial urinary sphincter (filling volume)

. . .

#### **CHAPTER 12**

## PROCEDURES ON MALE GENITAL ORGANS (BLOCKS 1160–1203) PROSTATE AND SEMINAL VESICLE

1167

Open prostatectomy

Includes: suprapubic stab cystotomy

. . .

37210-00 Radical prostatectomy with bladder neck reconstruction

Total prostatectomy with bladder neck reconstruction

Includes: excision of:

• seminal vesicles

vas deferens

sparing of nerves around the prostate

Excludes: laparoscopic radical prostatectomy with bladder neck reconstruction (37210-01 [1166])

37211-00 Radical

Radical prostatectomy with bladder neck reconstruction and pelvic lymphadenectomy

Total prostatectomy with bladder neck reconstruction and pelvic lymphadenectomy

Includes: excision of:

seminal vesicles

vas deferens

sparing of nerves around the prostate

Excludes: laparoscopic radical prostatectomy with bladder neck reconstruction and pelvic lymphadenectomy

(37211-01 [1166])

. . .

#### **CHAPTER 13**

#### **GYNAECOLOGICAL PROCEDURES (BLOCKS 1240–1299)**

## UTERUS EXCISION

1266

**Excision of lesion of uterus** 

- - -

35649-01 Myomectomy of uterus via laparoscopy

Removal of: fibroid via laparoscopy

• fibroid via laparoscopy

• myoma via laparoscopy

Includes: incision and repair of uterus

٠.

#### 1268 Abdominal hysterectomy

Note: Subtotal hysterectomy – involves removal of the uterus leaving the cervix attached to the vagina

Total hysterectomy – involves removal of the uterus, including the cervix

Radical hysterectomy – involves removal of the uterus including the cervix, upper 1–2 centimetres of vagina and parametrial tissue

•

Code also when performed:

• debulking of uterus (35658-00 [1270])

- radical excision of pelvic lymph nodes (96245-05 [806])
- removal of adnexa (fallopian tube, ovarian cyst, ovary (bilateral) (unilateral)) see Alphabetic Index

**Excludes**: with pelvic exenteration:

- anterior (37019-00 **[989]**) • posterior (90450-01 **[989]**)
- 35653-05 Laparoscopic subtotal abdominal hysterectomy

Laparoscopic:

- supracervical (partial) hysterectomy
- subtotal hysterectomy

Includes: endometrial sampling

morcellation

removal of uterus via:

- laparoscopic port
- vagina
- 35653-00 Subtotal abdominal hysterectomy

Subtotal hysterectomy NOS

35653-07 Laparoscopic total abdominal hysterectomy

Laparoscopic total hysterectomy Total laparoscopic hysterectomy

Includes: endometrial sampling

morcellation

removal of uterus via:
• laparoscopic port

- vagina
- 35653-01 Total abdominal hysterectomy
- 35667-02 Laparoscopic radical abdominal hysterectomy

Laparoscopic radical hysterectomy

Includes: endometrial sampling

extensive retroperitoneal dissection

mobilisation of ureters

morcellation

removal of uterus via:

- laparoscopic port
- vagina

#### 35667-00 Radical abdominal hysterectomy

Radical hysterectomy NEC

Includes: excision of:

- contiguous pelvic peritoneum (utilising nerve sparing techniques)
- paracolposparametrium
- upper vagina

extensive retroperitoneal dissection

mobilisation of ureters

ureterolysis

#### 1269

#### Vaginal hysterectomy

Note: Radical hysterectomy – involves removal of the uterus including the cervix, upper 1–2 centimetres of vagina and parametrial tissue.

Code also when performed:

- debulking of uterus (35658-00 [1270])
- radical excision of pelvic lymph nodes (96245-05 [806])
- removal of adnexa ([fallopian tube, ovarian cyst, ovary (bilateral) (unilateral)]) see Alphabetic Index

**Excludes:** with pelvic exenteration:

- anterior (37019-00 [989])
- posterior (90450-01 [989])

35750-00 Laparoscopically assisted vaginal hysterectomy

Laparoscopic guided vaginal hysterectomy

**Includes:** endometrial sampling

Excludes: laparoscopically assisted radical vaginal hysterectomy (35667-03 [1269])

35657-00 Vaginal hysterectomy

Includes: uterine curettage

Excludes: radical vaginal hysterectomy (35667-01 [1269])

35667-03 Laparoscopically assisted radical vaginal hysterectomy

Laparoscopically assisted Schauta procedure

Includes: endometrial sampling

. . .

#### **VAGINA**

#### **REPAIR**

- - -

#### 1284

#### Repair of vaginal fistula

35596-00 Repair of rectovaginal fistula

Includes: that via vaginal approach

. . .

#### **OTHER PROCEDURES**

#### 1297

#### **Procedures for reproductive medicine**

Code also when performed:

• falloposcopy (35710-00 [1248])

Excludes: intracytoplasmic sperm injection (13251-00 [1177])

preparation of semen for artificial insemination (13221-00 [1177])

13209-00 Planning and management for assisted reproductive technologies

#### 1299

#### Other procedures on female genital organs

Laparoscopic excision of lesion of pelvic cavity 35637-10

Laparoscopic excision of lesion involving:

- endometriosis
- lesion involving:
  - pelvic:
  - ligament (broad) (ovarian) (round) (uterosacral)
  - peritoneum
  - pouch of Douglas

Excludes: biopsy (30075-37 [988]) debulking of lesion:

- intra-abdominal (30392-00 [989])
- pelvic (35720-00 **[1299]**)

excision of lesion:

- fallopian tube (35638-07, 35638-08 [1251])
- ovary (35638-01 [1243])
- uterus (35649-01 [1266])

excisional diathermy (35637-02 [1299]) laparoscopic omentectomy (96189-01 [989])

#### 14.7 Revised ACS Chapter 14

See also 4.2 Diabetes mellitus and 16.2 Retired and revised ACS Chapter 16.

Application of the ACS template led to the following refinements in ICD-10-AM and the ACS:

Austra	alian Coding Standard	Revision
1428	Diethylstilboestrol (DES) syndrome	A Code first note added to the P04.1 Fetus and newborn affected by other maternal medication for manifestations.
		Addition of Example relocated from ACS 1605 Conditions originating in the perinatal period.
1438	Chronic kidney disease	Addition of reference to new code Z49.3 <i>Dialysis follow-up care</i> (see also 14.5 Dialysis follow up care).
		Addition of specific place of occurrence codes for kidney transplant rejection.
		Removal of section Diabetic nephropathy as overlap with ACS 0401 <i>Diabetes Mellitus</i> and relocated <i>Example</i> 6 into ACS 0401 as new <i>Example</i> 8.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 16**

## CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (P00–P96) FETUS AND NEWBORN AFFECTED BY MATERNAL FACTORS AND BY COMPLICATIONS OF PREGNANCY, LABOUR AND DELIVERY (P00–P04)

. . .



#### Fetus and newborn affected by noxious influences transmitted via placenta or breast milk

Includes: nonteratogenic effects of substances transmitted via placenta

Excludes: congenital malformations due to teratogenic effects of substances transmitted via placenta (Q00-Q99)

neonatal jaundice due to drugs or toxins transmitted from mother (P58.4)

P04.0 Fetus and newborn affected by maternal anaesthesia and analgesia in pregnancy, labour and delivery

Reactions and intoxications from maternal opiates and tranquillisers administered during labour and delivery

P04.1 Fetus and newborn affected by other maternal medication

**▼** 1428

Includes: that by:

· cytotoxic drugs

diethylstilbestrol [DES]

• pharmacotherapy for neoplasm

Code first genital tract anomaly, dysplasia or neoplasm to identify manifestation of diethylstilbestrol [DES] syndrome, if applicable — see Alphabetic Index.

Excludes: dysmorphism due to warfarin (Q86.2)

fetal hydantoin syndrome (Q86.1)

maternal use of drugs of addiction (P04.4)

#### **CHAPTER 21**

## FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO FAMILY AND PERSONAL HISTORY AND CERTAIN CONDITIONS INFLUENCING HEALTH STATUS (Z80–Z99)

. . .



#### Transplanted organ and tissue status

.

Includes: organ or tissue replaced by heterogenous or homogenous transplant

Excludes: complications of transplanted organ or tissue — see Alphabetic Index

presence of:

• vascular graft (Z95.-)

• xenogenic heart valve (Z95.3)

Z94.0

Kidney transplant status

**▼** 1438

Code also the stage of CKD (N18.3 N18.5)

Z94.1 Heart transplant status

#### **ACHI Alphabetic Index**

#### Α

```
Application
```

- tubal clips (bilateral) (closed) (Filshie) (for sterilisation) (laparoscopic) (unilateral) 35688-00 [1257]
- - via
- - laparotomy (open) 35688-02 [1257]
- - vaginal approach 35688-01 [1257]

#### C

#### Clipping (of)

- fallopian tube (bilateral) (closed) (Filshie) (for sterilisation) (laparoscopic) (unilateral) 35688-00 [1257]
- - via
- - laparotomy 35688-02 [1257]
- - vaginal approach 35688-01 [1257]

#### Ε

#### Electrodestruction

- fallopian tube (bilateral) (laparoscopic) (unilateral) 35688-03 [1257]
- - via laparotomy 35688-04 [1257]

#### L

#### Ligation

- fallopian tubes (bilateral) (for sterilisation) (laparoscopic) (unilateral) 35688-00 [1257]
- - via
- - laparotomy 35688-02 [1257]
- - vaginal approach 35688-01 [1257]

#### O

#### Occlusion

- fallopian tubes (bilateral) (for sterilisation) (laparoscopic) (unilateral) 35688-00 [1257]
- - by electrodestruction 35688-03 [1257]
- - open (via laparotomy) 35688-02 [1257]
- - by electrodestruction 35688-04 [1257]
- - vaginal approach 35688-01 [1257]

#### S

#### Sterilisation

- female (bilateral) (unilateral)
- - by
- - electrodestruction see Electrodestruction/fallopian tube
- - salpingectomy see Salpingectomy
- - laparoscopic 35688-00 [1257]
- <del>---by</del>
- ---- electrodestruction of fallopian tubes 35688-03 [1257]
- ---- salpingectomy (with tubal anastomosis)
- ---- bilateral 35638-10 **[1251]**
- ---- partial 35638-08 [1**251**]
- ---- unilateral 35638-09 [1251]
- ---- partial 35638-07 [1251]
- - open abdominal approach (via laparotomy) 35688-02 [1257]
- <del>- - by</del>
- --- electrodestruction of fallopian tubes 35688 04 [1257]
- --- salpingectomy (with tubal anastomosis)
- ---- bilateral 35717-03 [1251]
- ---- partial 35717-02 **[1251]**
- ---- unilateral 35713-09 [1251]
- ----- partial 35713-08 **[1251]**
- - vaginal approach 35688-01 [1257]
- male
- - by

- - ligation (bilateral) (unilateral) 30644-02 [1179]
- - vasectomy (bilateral) 37623-03 [1183]
- - unilateral 37623-02 [1183]

#### **Australian Coding Standards**

#### 1428 DIETHYLSTILBOESTROL (DES) SYNDROME

#### **EXAMPLE 1:**

Patient (25 years of age) was admitted with vaginal clear cell adenocarcinoma due to intrauterine exposure to DES (diethylstilboestrol).

<u>(dictify istributes</u>	<del>uoij.</del>			
Assign:	C52 Malignant neoplasm of vagina			
	M8310/3 Clear cell adenocarcinoma NOS			
	P04.1 Fetus and newborn affected by other maternal medication			
	Y42.5 Other oestrogens and progestogens causing adverse effects in therapeutic use			
	Y92.23 Place of occurrence, health service area, not specified as this facility			
Rationale:	C52 — for vaginal clear cell adenocarcinoma, a manifestation resulting from DES syndrome			
(identified as the underlying cause) (Directive 1)				
	<u>M8310/3 — ACS 0233 Morphology</u>			
P04.1, Y42.5, Y92.23 — where DES syndrome is identified as the underlying cause of the genital				
	tract anomaly (Directive 1)			

#### 1438 CHRONIC KIDNEY DISEASE

#### Directive(s)

- **3.1** Assign the following codes for acute kidney transplant rejection:
  - T86.1 Kidney transplant failure and rejection
  - Y83.02 Kidney transplant as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure
  - a place of occurrence code:
    - Y92.23 Place of occurrence, health service area, not specified as this facility or
    - Y92.24 Place of occurrence, health service area, this facility.

#### **DIABETIC NEPHROPATHY**

Diabetic nephropathy or diabetic kidney disease is defined by structural and functional changes. Structural changes such as thickening of the glomeruli of the kidneys, referred to as glomerulosclerosis, slowly create scarring within the kidneys. Functional characteristics include hyperfiltration, microalbuminuria and macroalbuminuria with incipient progressive proteinuria. Glomerular filtration rate (eGFR/GFR) progressively decreases until the final stage of chronic kidney failure, or end-stage renal disease (ESRD) requiring renal replacement therapy (Onuigbo & Agbasi 2015).

#### **CLASSIFICATION**

Assign a code from category N18 with the diabetic nephropathy code, to indicate the severity of the kidney disease, if CKD meets the criteria in ACS 0002 (see also ACS 0401 Diabetes mellitus and intermediate hyperglycaemia).

#### **EXAMPLE 6:**

A 74 year old man with chronic kidney disease and diabetic nephropathy (Type 2 diabetes) was admitted for review of his kidney function. Biochemistry results included a decreased eGFR = 41 mL/min, down from 47 mL/min one month previously.

Codes: N18.3 Chronic kidney disease, stage 3

E11.22 Type 2 diabetes mellitus with established diabetic nephropathy

## 15. Pregnancy, childbirth and the puerperium

#### 15.1 Imaging

Refinements have been made in ACHI to align with Medicare Benefits Schedule (MBS) updates between July 2020 and March 2023.

#### **ACHI Tabular List**

#### **CHAPTER 20**

#### **IMAGING SERVICES (BLOCKS 1940–2016) ULTRASOUND SCAN**

▼0042

**Echography** Ultrasonography

1943	Ultrasound of	of abdomen	or pelvis

55700-00 Ultrasound for detection of fetal abnormality

**Includes:** measurement of nuchal translucency

55700-01 Ultrasound for fetal growth measurement

Includes: fetal cephalometry by ultrasound

55700-02

Ultrasound of abdomen or pelvis for other pregnancy related conditions

Ultrasonic:

• localisation of placenta

pelvimetry

Ultrasound of gravid uterus NOS

Performed for cervical length assessment.

#### 15.2 Streptococcal group B infection/carrier in pregnancy

Application of the ACS template led to the retirement of ACS 1549 Streptococcal group B infection/carrier in pregnancy with content transferred to ICD-10-AM and ACS 1500 General guidelines for obstetric episodes of care.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 15**

## PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00–O99) OTHER MATERNAL DISORDERS PREDOMINANTLY RELATED TO PREGNANCY (O20–O28)

. . .



#### Infections of genitourinary tract in pregnancy

**▼** 1521<del>, 1549</del>

Use additional code to identify specific type of genitourinary tract infection.

Use additional code (Chapter 1) to identify infectious agent.

Excludes: gonococcal infections (O98.2)

infections with a predominantly sexual mode of transmission classified to A55–A64 (O98.3)

syphilis (O98.1)

tuberculosis of genitourinary system (O98.0)

venereal disease NOS (O98.3)

. . .

#### **CHAPTER 21**

## FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

- - -



#### Carrier of infectious disease

**▼**0112

Includes: suspected carrier

Note: Assign a code from category Z22 only if (asymptomatic) carrier of an infectious agent is specified. Do not

assign Z22.- if there is an active infection with the same infectious agent.

Use additional code (Z14–Z16) to identify resistance to antimicrobial drugs.

Use additional code (Z29.29) to identify administration of prophylactic pharmacotherapy for carrier of group B

Streptococcus [GBS] in a pregnant patient.

Z22.0 Carrier of typhoid

Z22.1 Carrier of other intestinal infectious diseases

Z22.2 Carrier of diphtheria

Carrier of other specified bacterial diseases

**▼**15001549

Z22.3

Carrier of bacterial disease due to:

- meningococci
- staphylococci
- streptococci

Includes: group B Streptococcus [GBS] (in pregnancy)

Z22.4 Carrier of infections with a predominantly sexual mode of transmission

Carrier of:

- gonorrhoea
- syphilis

#### **Z29.2** Prophylactic pharmacotherapy

©Z29.21 Prophylactic pharmacotherapy for neoplasm

**▼**0206

Prophylactic chemotherapy for neoplasm

**Note:** Assign this code for prophylactic administration of pharmacological agent for neoplasm.

©Z29.29 Prophylactic pharmacotherapy, not elsewhere classified

▼0044, 0102, <del>1549, 1500,1617</del>

Chemoprophylaxis NOS Prophylactic antibiotic therapy

**Note:** Assign this code for prophylactic administration of pharmacological agent for condition other than

neoplasm

Excludes: prophylactic pharmacotherapy for neoplasm (Z29.21)

Z29.8 Other specified prophylactic measures

Z29.9 Prophylactic measure, unspecified

- - -

#### **Australian Coding Standards**

## 1500 DIAGNOSIS SEQUENCING IN GENERAL GUIDELINES FOR OBSTETRIC EPISODES OF CARE

#### 2. OTHER ADDITIONAL DIAGNOSES IN OBSTETRIC EPISODES OF CARE

#### **Directive(s)**

- **2.1** Assign the following where applicable to an obstetric episode of care:
  - O09.- Duration of pregnancy as per the Instructional notes in the Tabular List
  - O30.- *Multiple gestation*
  - O60.- *Preterm labour and delivery* where onset of labour and/or delivery occurs before 37 completed weeks gestation
  - Z22.3 Carrier of other specified bacterial diseases to identify a carrier of group B Streptococci (GBS)
  - Z29.1 <u>Prophylactic immunotherapy</u> to identify administration of anti-D in the episode of care. Also assign 92173-00 [1884] Passive immunisation with Rh(D) immunoglobulin
  - Z29.29 <u>Prophylactic pharmacotherapy</u>, not elsewhere classified to identify administration of prophylactic pharmacotherapy in the episode of care for carrier of GBS
  - Z37.- Outcome of delivery as per the Instructional note at block O80–O84 Delivery
  - Prophylactic vaccination/need for immunisation codes by following the ICD-10-AM Alphabetic Index: Vaccination/prophylactic and the ACHI Alphabetic Index: Vaccination
  - codes for other conditions/complications (in pregnancy, childbirth, puerperal or nonobstetric) from Chapter 15 *Pregnancy*, *childbirth and the puerperium* (*O00–O99*)
  - code from another chapter where it adds specificity to the Chapter 15 code, or as per any *Instructional* notes.

The following **do not** need to meet the criteria in ACS 0002 *Additional diagnoses*: O09.-, O30.-, O60.-, Z22.3, Z29.1, Z37.- and prophylactic vaccination.

#### 15.3 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 15**

## PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00–O99) PREGNANCY WITH ABORTIVE OUTCOME (O00–O08)

Fetal viability is defined as 20 completed weeks (140 days) gestation and/or fetal weight greater than or equal to 400g or more.

Excludes: continuing pregnancy in multiple gestation after abortion of one fetus or more (O31.1)

ECTOPIC PREGNANCY, HYDATIDIFORM MOLE
AND OTHER ABNORMAL PRODUCTS OF CONCEPTION
(000–002)

O00 Ectop

Ectopic pregnancy

Other abnormal products of conception

• • •

O02.9 Abnormal product of conception, unspecified

SPONTANEOUS ABORTION, MEDICAL
ABORTION AND ABORTION NOT
ELSEWHERE CLASSIFIED
(003-006)

The following fourth character subdivisions are for use with categories O03–O06:

Subdivisions .0—.4 are assigned for incomplete abortion (ie where there are retained products of conception following abortion). Subdivisions .5—.9 are assigned for complete or unspecified abortion (ie where there is no documentation of retained products of conception).

. . .

O06 Unspecified abortion

**▼**0110, 1544

See subdivisions
Induced abortion NOS

Use additional code (O09.-) to identify duration of pregnancy.

FAILED ATTEMPTED ABORTION, AND COMPLICATIONS FOLLOWING ABORTION AND ECTOPIC AND MOLAR PREGNANCY (007–008)



Failed attempted abortion

**▼**1544

Continuing pregnancy after failed attempt to terminate the pregnancy

Failed attempt to induce abortion

*Use additional code (O09.-) to identify duration of pregnancy.* 

Excludes: incomplete abortion (O03–O06)



#### Complications following abortion and ectopic and molar pregnancy

Note:

Codes from category O08 are assigned for complication(s) of:

- abortion, where the abortion was treated, performed or occurred prior to the episode of care
- ectopic and molar pregnancy.

Excludes: complication(s) during episode of care:

- for staged abortion (O04.5–O04.9)
- in which an abortion is treated, performed or occurred (current episode) (O03–O06) retained products of conception (O03-O06)

#### OTHER OBSTETRIC CONDITIONS, NOT ELSEWHERE CLASSIFIED (094-099) **DELIVERY (080–084)**

**T** 1500, 1505, 1511, 1550

Note:

Codes from O80-O84 are assigned when delivery is completed within the episode of care (for classification purposes delivery is not complete until after expulsion of the placenta, excluding any retained portion(s), expelled or requiring removal post delivery).

Use additional code (Z37.-) to identify outcome of delivery.

O80

#### Single spontaneous delivery

Cases with minimal or no assistance

Single spontaneous delivery:

- breech
- NOS
- · vaginal
- vertex

Includes: that with:

- · administration of Syntocinon in third stage of labour
- controlled cord traction (CCT)
- epidural injection/infusion
- episiotomy with repair
- · fetal monitoring
- · medical or surgical:
- augmentation of labour
- · induction of labour
- suture of obstetric perineal laceration

A delivery is not classified as spontaneous once an assistance procedure is performed during the delivery *Note:* episode of care (eg McRoberts manoeuvre, version, breech extraction).

Excludes: pregnancy with abortive outcome before fetal viability (O00–O08)

single delivery (by) (with):

- assisted NOS (O83)
- breech extraction (O83) • caesarean section (O82)
- forceps:
- NOS (O81)
- with forceps rotation of fetal head (O81)
- · manual:
- removal of placenta (O83)
- rotation of fetal head (O83)
- McRoberts manoeuvre (O83)
- rotation of fetal head without forceps delivery (O83)
- vacuum extraction (O81)
- version (with extraction) (O83)

#### **ACHI Tabular List**

#### **CHAPTER 14**

## OBSTETRIC PROCEDURES (BLOCKS 1330–1347) BREECH DELIVERY AND ASSISTED VERTEX DELIVERY

Excludes: spontaneous breech delivery (90470-05 [1336])

1339

Assisted breech delivery and extraction, and assisted vertex delivery

. . .

#### **REPAIR**



#### Postpartum suture

**▼**1551

. . .

#### 90485-00 Other suture of current obstetric laceration or rupture without perineal involvement

Suture of:

- · caesarean uterine wound dehiscence
- current obstetric:
- laceration (of):
  - NOS
  - uterus
- uterine rupture

Excludes: reclosure of caesarean abdominal wound dehiscence (30403-03 [1000])

#### 90481-00 Suture of first or second degree tear of perineum

Secondary repair of episiotomy

Suture of current obstetric perineal laceration, rupture or tear (involving) (with):

- tourchette
- labia (bilateral) (unilateral)
- pelvic floor
- skin
- vaginal involvement NOS
- vulva

#### **Includes:** suture of:

- fourchette
- labia (bilateral) (unilateral)
- pelvic floor
- skin
- vaginal involvement NOS
- vulva

Excludes: suture of vaginal laceration only (90479-00 [1344])

#### 16573-00 Suture of third or fourth degree tear of perineum

Suture of perineal laceration with vaginal involvement and:

- rectum
- sphincter ani
- subcutaneous muscle

#### Includes: suture of sites listed in 90481-00 [1344]

suture of:

- fourchette
- labia (bilateral) (unilateral)
- pelvic floor
- skin
- vulva

#### 15.4 Revised ACS Chapter 15

See also <u>15.2 Streptococcal group B infection/carrier in pregnancy</u>, <u>19.3 Complications of surgical and medical care</u> and <u>19.5 Adult and child abuse (neglect or maltreatment)</u>.

Application of the ACS template led to the following refinements in the ACS:

Australian Coding Standard	Revision
1500 Diagnosis sequencing in General guidelines for obstetric episodes of care	Incorporation of Obstetric procedural complications relocated from ACS 1904 Complications of surgical or medical care with three Examples.
1505 Delivery and assisted delivery codes	Addition of 90468-03 [1337] Forceps rotation of fetal head.
1506 Fetal presentation, disproportion and abnormality of maternal pelvic organs	Inclusion of terminology for trial of labour following previous caesarean section.
1511 Abortion/Ttermination of pregnancy (abortion)	Revised ACS title and removal of section on Fetal death in utero as inappropriate and clinical coders should follow the ICD-10-AM Alphabetic Index.
1551 Obstetric perineal grazes and perineal lacerations/grazes	Revised ACS title.

#### **Australian Coding Standards**

## 1500 DIAGNOSIS SEQUENCING IN GENERAL GUIDELINES FOR OBSTETRIC EPISODES OF CARE

. . .

#### 3. HEALTHCARE RELATED COMPLICATIONS IN OBSTETRIC EPISODES OF CARE

#### **Description(s)**

An obstetric healthcare related complication is a current condition (injury or harm) that arises due to surgical or medical care during pregnancy, childbirth or the puerperium.

#### Directive(s)

#### Obstetric healthcare related complications

- 3.1 Assign one of the following for an obstetric healthcare related complication, by following the Alphabetic Index:
  - a code from Chapter 15 Pregnancy, childbirth and the puerperium (O00–O99) (see Example 1)
  - where there is no appropriate code in Chapter 15, a code from another chapter in accordance with ACS 1904

    Complications of surgical or medical care (see Examples 2 and 3).

#### External cause of obstetric healthcare related complications

3.2 Do not assign external cause and place of occurrence codes for the healthcare related complication where the external cause concept is included in the Chapter 15 code (see Example 1).

#### Note(s)

3. *Directives* 3.1 and 3.2 also apply to antenatal episodes of care with or without delivery, and postpartum episodes of care.

#### Example 1:

Patient was admitted for management of a haematoma of their caesarean section wound.

Assign: O90.2 Haematoma of obstetric wound

**Rationale:** O90.2 – for an obstetric healthcare related complication by following the Alphabetic Index:

Haematoma/caesarean section wound (Directive 3.1)

External cause codes are not assigned as the concept is included in the Chapter 15 code

(Directive 3.2).

#### Example 2:

Patient was admitted for elective caesarean delivery. During the caesarean section, the initial incision extended into the upper cervix resulting in cervical laceration requiring repair.

Assign: Codes from Chapter 15 for the delivery

O71.3 Obstetric laceration of cervix

Y60.0 Unintentional cut, puncture, perforation or haemorrhage during surgical operation

**Rationale:** O71.3 — for an obstetric healthcare related complication by following the Alphabetic Index:

*Injury/obstetric trauma/cervix (Directive* 3.1)

Y60.0 — for the concept not included in the Chapter 15 code (*Directive* 3.2)

#### Example 3:

Patient was diagnosed with Mendelson's syndrome due to aspiration of gastric contents during caesarean section under general anaesthesia.

Assign: Codes from Chapter 15 for the delivery

O99.5 Diseases of the respiratory system in pregnancy, childbirth and the puerperium

J95.4 Chemical pneumonitis due to inhalation or aspiration of gastric contents during

anaesthesia

**Rationale:** O99.5 — for an obstetric healthcare related complication by following the Alphabetic Index:

Pregnancy/complicated by/conditions in/J00-J99 (Directive 3.1)

J95.4 — for Mendelson's syndrome (*Directive* 3.1)

#### 1505 DELIVERY AND ASSISTED DELIVERY CODES

. . .

Table 1: ICD-10-AM and ACHI delivery codes

ICD-10-AM code	ACHI delivery codes
O83 Other assisted single delivery	90470-01 [1339] Assisted breech delivery 90470-03 [1339] Breech extraction 90477-02 [1339] Assisted vertex delivery 90468-03 [1337] Forceps rotation of fetal head
O84.81 Multiple delivery, all  assisted, not elsewhere classified	90470-01 [1339] Assisted breech delivery 90470-03 [1339] Breech extraction 90477-02 [1339] Assisted vertex delivery 90468-03 [1337] Forceps rotation of fetal head

## 1506 FETAL PRESENTATION, DISPROPORTION AND ABNORMALITY OF MATERNAL PELVIC ORGANS

#### Note(s)

1. Trial of labour following previous caesarean section may also be documented as vaginal birth after caesarean section (VBAC), trial of scar, trial of labour (TOL) or trial of labour after caesarean (TOLAC).

#### 1511 ABORTION/TERMINATION OF PREGNANCY (ABORTION)

1551 OBSTETRIC PERINEAL GRAZES AND PERINEAL LACERATIONS/GRAZES

# 16. Certain conditions originating in the perinatal period

#### 16.1 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 16**

## CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (P00–P96) INFECTIONS SPECIFIC TO THE PERINATAL PERIOD (P35–P39)

Includes: infections acquired in utero or during birth

<u>Use additional code (P00–P04) to identify that the infection is due to a maternal condition.</u>

Excludes:

asymptomatic human immunodeficiency virus [HIV] infection status (Z21) congenital:

congenitar.

- gonococcal infection (A54.-)
- pneumonia (P23.-)
- syphilis (A50.-)

human immunodeficiency virus [HIV] disease (B20–B24) infectious diseases acquired after birth (A00–B99, J09–J11)

intestinal infectious diseases (A00-A09)

laboratory evidence of human immunodeficiency virus [HIV] (R75)

maternal infectious disease as a cause of mortality or morbidity in fetus or newborn not itself manifesting the disease (P00.2)

tetanus neonatorum (A33) whooping cough (A37.-)

P35

Congenital viral diseases

. .

#### **CHAPTER 18**

## SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED (R00–R99)

...

R68 Other general symptoms and signs

R68.1 **1**610

Nonspecific symptoms peculiar to infancy

Acute/apparent life threatening event/episode [ALTE] Brief resolved unexplained event [BRUE]

Excessive crying of infant

Irritable infant

Excludes: neonatal cerebral irritability (P91.3) teething syndrome (K00.7)

#### **CHAPTER 21**

## FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

...



#### Medical observation and evaluation for suspected diseases and conditions, ruled out

▼ 0012

Persons who present some symptoms or evidence of an abnormal condition which requires study, but who, after examination and observation, show no need for further treatment or medical care

**Excludes:** person with feared complaint in whom no diagnosis is made (Z71.1)

•••

**©**Z03.7

#### Observation and evaluation of newborn for suspected condition not found

▼1607<del>, 1611, 1617</del>

Note:

Assign code(s) from this <u>sub</u>category for newborns (infants less than 28 days old) (without signs or symptoms), who are suspected of having an abnormal condition that is ruled out after examination and observation.

Use additional code (Z38.-) to identify liveborn infant according to place of birth.

©Z03.70 Observation of newborn for unspecified suspected condition

©Z03.71 Observation of newborn for suspected infectious condition

**▼**1617

**Note:** Assign Z03.71 for newborns (with or without signs or symptoms) who are suspected of having an infection,

such as sepsis, that is ruled out after examination and observation.

Excludes: suspected coronavirus disease 2019 [COVID-19], ruled out (Z03.81)

#### **ICD-10-AM Alphabetic Index**

#### **SECTION I**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

#### B

**Brevicollis** Q76.49

**Brief resolved unexplained event (BRUE)** R68.1

Bright's

Bruck's disease M21.8-

**BRUE (brief resolved unexplained event)** R68.1

Brugada syndrome 149.8

P

Pneumonia (acute) (double) (migratory) (purulent) (septic) (unresolved) J18.9

• • •

- aspiration J69.0
- - due to
- - food (regurgitated), milk, vomit J69.0
- - gastric secretions J69.0
- - oils, essences J69.1
- - solids, liquids NEC J69.8
- - newborn (see also Aspiration) P24.9
- - meconium P24.0
- atypical NEC J18.9

...

- neonatal P23.9
- - aspiration (see also Aspiration) P24.9
- parainfluenza virus J12.2

#### **ACHI Tabular List**

#### **CHAPTER 19**

## INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925) THERAPEUTIC INTERVENTIONS

#### THERAPIES USING AGENTS OR DEVICES, NOT ELSEWHERE CLASSIFIED

1880

Therapies using agents or devices, not elsewhere classified

. . .

22065-00 Cold therapy

▼1615

Cold therapy involves the application of cold in the therapeutic treatment of disease or injury. Hypothermia may be induced by ice packs or compresses, cooling blankets, immersion in cold water (bath or tub) or by extracorporeal cooling of the blood. Hypothermia may 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.

Therapeutic hypothermia is used in neonates who are at risk of lack of oxygen to the brain, that can destroy brain cells. Inducing hypothermia is one method to stop this damage continuing. Cooling is commenced as soon as possible after birth and involves keeping the core temperature at 33–34°C for a period of 72 hours.

Hypothermic therapy (therapeutic hypothermia) Total body hypothermia

Excludes: cryotherapeutic destruction of tissue — see Alphabetic Index: Cryotherapy/by site

deep hypothermia (22075-00 [642])

hypothermic therapy in conjunction with cardiac or circulatory arrest (22075-00 [642])

that performed in conjunction with surgery — omit code

. . .

1889

Other therapeutic interventions on respiratory system

---

92044-00 Other oxygen enrichment

▼1615

Catalytic oxygen therapy Cytoreductive effect Oxygen therapy Oxygenators

*Note:* Performed for transient tachypnoea or respiratory distress of newborn.

Excludes: high flow therapy (nasal high flow cannula) (see block [570])

hyperbaric oxygenation (see block [1888])

#### 16.2 Retired and revised ACS Chapter 16

See also 14.7 Revised ACS Chapter 1414.7 Revised ACS Chapter 14.

Application of the ACS template led to the following refinements in ICD-10-AM, ACHI and the ACS:

Australian Coding Standard	Revision
1605 Conditions originating in the perinatal period	Incorporation of neonatal jaundice content from ACS 1615 Interventions for neonates.  Example 4 relocated to ACS 1428  Diethylstilbestrol (DES) syndrome.
1610 Sudden infant death syndrome/_apparent_and acute_life threatening event	Revised ACS title.  Refinement of sudden infant death syndrome and acute (apparent) life threatening event descriptions with removal of terminology of near miss SIDS.
1611 Observation and evaluation of newborn and infants for suspected condition not found	Retired with relocation of content to ACS 0012 Suspected conditions.
1613 Massive Neonatal aspiration syndromes and transient tachypnoea of newborn	Revised ACS title for currency and to better reflect the classification guidelines.
1615 Specific diseases and interventions related to the sick neonate Interventions for neonates	Revised ACS title.  Relocation of jaundice guidelines to ACS 1605 Conditions originating in the perinatal period.  Addition of a Note at 92044-00 [1889] Other oxygen enrichment.  Addition of Glossary description at 22065-00 [1880] Cold therapy for therapeutic hypothermia.
1617 Neonatal Suspected neonatal sepsis/risk of sepsis	Revised ACS title.  Addition of an <i>Instructional</i> note at ICD-10-AM Tabular List (block P35–P39) for code assignment from block P00–P04.

#### **Australian Coding Standards**

#### 1605 CONDITIONS ORIGINATING IN THE PERINATAL PERIOD

#### Directive(s)

#### **Neonatal jaundice**

- **3.** Assign a code for neonatal jaundice:
  - if more than 12 hours of phototherapy was provided (see Example 1)
  - if the neonate was readmitted for neonatal jaundice, regardless of whether phototherapy was provided (ie jaundice was specified as the reason for admission).

Most conditions originating in the perinatal period disappear after a short time. Some, however, can persist throughout life and should be classified to the codes in this chapter regardless of the patient's age.

#### **EXAMPLE 4:**

Vaginal clear cell adenocarcinoma due to intrauterine exposure to DES (diethylstilboestrol). Patient is now 25 years old.

Codes: C52 Malignant neoplasm of vagina

M8310/3 Clear cell adenocarcinoma NOS

P04.1 Fetus and newborn affected by other maternal medication

¥42.5 ther oestrogens and progestogens causing adverse effects in therapeutic use

An appropriate place of occurrence code (Y92.-).

## 1610 SUDDEN INFANT DEATH SYNDROME AND ACUTE APPARENT LIFE THREATENING EVENT

## 1613 MASSIVE NEONATAL ASPIRATION SYNDROMES AND TRANSIENT TACHYPNOEA OF NEWBORN

## 1615 SPECIFIC DISEASES AND INTERVENTIONS RELATED TO THE SICK NEONATE INTERVENTIONS FOR NEONATES

#### **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*).

#### **Jaundice**

A diagnosis code for jaundice of the newborn should only be assigned when more than 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.

#### 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.

#### 1617 SUSPECTED NEONATAL SEPSIS/RISK OF SEPSIS

# 17. Congenital malformations, deformations and chromosomal abnormalities

#### 17.1 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

#### **ICD-10-AM Tabular List**

**CHAPTER 17** 

### CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES (Q00–Q99)

Q71

Reduction defects of upper limb

• • •

Longitudinal reduction defects of radius

Excludes: clubhand (congenital) (Q68.11)

Fanconi's anaemia with absent radius (D61.0)

thrombocytopenia with absent radius [TAR] syndrome (Q87.26)

...

Q87

Q71.4

Other specified congenital malformation syndromes affecting multiple systems

▼0005

Q87.2

Congenital malformation syndromes predominantly involving limbs

Excludes: Fanconi's anaemia with absent radius (D61.0)

•••

Q87.26 Thrombocytopenia with absent radius syndrome

Thrombocytopenia absent radius [TAR] syndrome

Q87.27 VATER association

VACTERL association

Note: Each letter of the acronyms VATER and VACTERL represents a specific diagnostic feature:

V — vertebral (defects)

A — anal/anus (atresia) (imperforate)

<u>C — cardiac (anomalies)</u> <u>TE — transoesophageal (fistula)</u>

<u>R — renal (anomalies)</u> <u>L — limb (anomalies).</u>

...

#### **ICD-10-AM Alphabetic Index**

V

VACTERL association or syndrome Q87.27

•••

VATER association or syndrome Q87.27

# 18. Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified

#### 18.1 Male and female pelvic and perineal pain

IHACPA expanded R10.2 *Pelvic and perineal pain* to enable distinction between the male and female pelvis, completing the work commenced in Twelfth Edition to eliminate the need to use sex as a classification variable in the AR-DRG classification.

#### **ICD-10-AM Tabular List**

**CHAPTER 14** 

## DISEASES OF THE GENITOURINARY SYSTEM (N00-N99) DISEASES OF MALE GENITAL ORGANS (N40-N51)

. . .

N50

Other disorders of male genital organs

Excludes: torsion of testis (N44)

N50.0 Atrophy of testis

N50.1 Vascular disorders of male genital organs

Male genital organ:
haematocele NOShaemorrhage

• thrombosis

N50.8 Other specified disorders of male genital organs

Chylocele, tunica vaginalis (nonfilarial) NOS

Fistula, urethroscrotal Male genital organ:

atrophy

• hypertrophy

• oedema

• pain <del>(pelvic)</del> NOS

• stricture

• ulcer

Includes: scrotum

seminal vesicle spermatic cord testis tunica vaginalis vas deferens

Excludes: atrophy of testis (N50.0)

N50.9 Disorder of male genital organs, unspecified

#### **CHAPTER 18**

## SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED (R00-R99)

### SYMPTOMS AND SIGNS INVOLVING THE DIGESTIVE SYSTEM AND ABDOMEN (R10-R19)

R10

Abdominal and pelvic pain

. . .

R10.2

Pelvic and perineal pain

Use additional code (R52.2) to identify chronic pain.

Excludes: pain involving:

female genital organ(s) NEC (N94.8)
 male genital organ(s) NEC (N50.8)
 menstrual cycle NEC (N94.6)
 musculoskeletal system NEC (R29.89)

• penis (N48.8)

• urinary system NEC (R39.8)

♣R10.21 Pelvic and perineal pain associated with male pelvis

Excludes: pain involving:

• male genital organ(s) NEC (N50.8)

• penis (N48.8)

♣ R10.22 Pelvic and perineal pain associated with female pelvis

Excludes: pain involving:

female genital organ(s) NEC (N94.8)
menstrual cycle NEC (N94.6)

R10.3 Pain localised to other parts of lower abdomen

Use additional code (R52.2) to identify chronic pain.

. . .

#### **ICD-10-AM Alphabetic Index**

#### P

#### Pain(s) R52.9

- abdominal R10.4
- - with
- - histological confirmation of
- - - appendiceal condition see condition
- - - mesenteric adenitis I88.0
- - lower abdomen R10.3
- - pelvic or perineal R10.2
- ---- female R10.22
- ---- male R10.21
- - severe (generalised) (localised) R10.0
- - upper abdomen R10.1
- ...
- lower abdomen R10.3
- - pelvic or perineal R10.2
- - female R10.22
- - male R10.21
- lumbar region M54.5

- pelvic R10.2
- <u>- female R10.22</u> - girdle M25.55
- - in pregnancy, childbirth or puerperium O26.7
- - involving
- - female genital organ NEC N94.8
- - male genital organ NEC N50.8
- - musculoskeletal system NEC R29.89
- - penis N48.8
- - urinary system NEC R39.8
- -- male R10.21
- penis N48.8
- - psychogenic F45.4
- pericardial (see also Pain(s)/precordial) R07.2
- perineal R10.2
- - female R10.22
- - male R10.21
- phantom limb (syndrome) G54.6

#### 18.2 Retired ACS Chapter 18

Application of the ACS template led to ACS 1805 Acopia being retired as the guidelines within are redundant if applying the Conventions used in the ICD-10-AM Alphabetic Index/10. Residual ('other' and 'unspecified') codes

# 19. Injury, poisoning and certain other consequences of external causes

#### 19.1 Adverse effect of anaesthetic

Nitrous oxide poisoning has been reported in health care facilities to be increasing however there was no specific ICD-10-AM code to collect the data. The following refinements have been undertaken in ICD-10-AM:

#### **ICD-10-AM Tabular List**

#### **CHAPTER 19**

## INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00-T98)

. . .

T41 Poisoning by anaesthetics and therapeutic gases

Excludes: benzodiazepines (T42.4) cocaine (T40.5) opioids (T40.0–T40.2)

T41.0 Inhaled anaesthetics

Excludes: oxygen (T41.5)

✿T41.00 Unspecified inhaled anaesthetic

**O**T41.01 Nitrous oxide

✿T41.09 Other inhaled anaesthetic

T41.1 Intravenous anaesthetics

Thiobarbiturates

. . .

#### **ICD-10-AM Alphabetic Index**

#### **SECTION I**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

C

Convulsions (idiopathic) (see also Seizure(s)) R56.8

- apoplectiform (cerebral ischaemia) 167.8
- ether (anaesthetic)
- - correct substance properly administered R56.8
- - overdose or wrong substance given T41.09 T41.0
- febrile (no underlying cause) R56.0

#### **SECTION III**

#### **TABLE OF DRUGS AND CHEMICALS**

Substance	Poisoning				Adverse	
Key: Generic Names (Brand Names)  Note: digits are ignored in the alphabetical sequencing of terms in this table.	Chapter 19	Accidental		Undetermined intent	effect in therapeution use	
Anaesthesia						
· caudal	T41.3	X44	X64	Y14	Y48.3	
endotracheal	T41.0 <mark>0</mark>	X44	X64	Y14	Y48.0	
· - specified NEC	T41.0 <del>9</del>	X44	X64	Y14	Y48.0	
epidural	T41.3	X44	X64	<u>Y14</u>	Y48.3	
inhalation		X44	X64	Y14	Y48.0	
specified NEC	T41.09	X44	X64	Y14	Y48.0	
- local		X44	X64	Y14	Y48.3	
 Anaesthetic NEC (see also Anaesthesia)	T41.4	X44	X64	Y14	Y48.4	
- with muscle relaxant	T41.20	X44	X64	Y14	Y48.2	
- gaseous NEC	T41.0 <u>0</u>	X44	X64	Y14	Y48.0	
specified NEC	T41.09	X44	<u>X64</u>	<u>Y14</u>	Y48.0	
- general NEC		X44	X64	Y14	Y48.2	
- infiltration NEC	T41.3	X44	X64	Y14	Y48.3	
- inhaled	T41.0 <mark>0</mark>	X44	X64	Y14	Y48.0	
specified NEC	T41.09	X44	X64	Y14	Y48.0	
- intravenous NEC		X44	X64	Y14	Y48.1	
local NEC		X44	X64	Y14	Y48.3	
 Chloroform (fumes) (vapour)	T53.1	X46	X66	Y16	_	
- anaesthetic		X44	X64	Y14	Y48.0	
- solvent	T53.1	X46	X66	Y16	-	
- water, concentrated	T41.09	X44	X64	Y14	Y48.0	
Chloronitrobenzene	T53.7	X49	X69	Y19	-	
 Endrin	T60.1	X48	X68	Y18	_	
Enflurane	T41.0 <mark>9</mark>	X44	X64	Y14	Y48.0	
Enhexymal	T42.3	X41	X61	Y11	Y47.0	
 Ethenzamide	T39.0	X40	X60	Y10	Y45.1	
Ether (vapour)	T41.0 <u>9</u>	X47.8	X67.8	Y17.8	Y48.0	
- anaesthetic	T41.0 <mark>9</mark>	X44	X64	Y14	Y48.0	
- divinyl	T41.0 <u>9</u>	X44	X64	Y14	Y48.0	
- ethyl (medicinal)	T41.0 <u>9</u>	X44	X64	Y14	Y48.0	
nonmedicinal	T52.8	X46	X66	Y16	-	
- petroleum — see Ligroin(e)		-	-	-	-	
Ethyl						
- acetate	T52.8	X46	X66	Y16	-	
- chloride (anaesthetic)	T41 09	X44	X64	Y14	Y48.0	
local		X44	X64	Y14	Y56.4	
 Flurotyl	T43.2	X41	X61	Y11	Y49.2	
Fluroxene		X44	X64	Y14	Y48.0	
Fluspirilene		X41	X61	Y11	Y49.5	
 Gas	T59.9	X47.9	X67.9	Y17.9	_	
- acetylene		X47.1	X67.1	Y17.1	-	
- air contaminants, source or type not specified		X47.9	X67.9	Y17.9	-	
- anaesthetic		X44	X64	Y14	Y48.0	
specified NEC		X44	X64	Y14	Y48.0	
- blast furnace		X47.3	X67.3	Y17.3	-	
 Haloprogin	T49.0	X44	X64	Y14	Y56.0	
Halothane		X44	X64	Y14	Y48.0	
Haloxazolam		X41	X61	Y11	Y47.1	
naioxazoiaiii	172.7	771	7.01		1 77.1	

Isoflurane	X44	X64	Y14	Y48.0
IsoflurophateT44.0	X43	X63	Y13	Y51.0
Laudanum	X42	X62	Y12	Y45.0
	X42 X44	X64	Y14	Y48.0
Laughing gas				
Lauryl sulfoacetate	X44	X64	Y14	Y56.2
2-Methoxyethanol	X46	X66	Y16	-
Methoxyflurane	X44	X64	Y14	Y48.0
Methoxyphenamine	X44	X64	Y14	Y55.6
Nandrolone T38.7	X44	X64	Y14	Y42.7
Naphazoline T48.5	X44	X64	Y14	Y55.5
	777	7,04	117	100.0
Nitrous				
 - oxide	X44	X64	Y14	Y48.0
Nitroxoline T37.8	X44	X64	Y14	Y41.8
Tall Oxoline 157.0	744	7.04	114	141.0
Setoperone	X41	X61	Y11	Y49.5
Sevoflurane T41.09	X44	X64	Y14	Y48.0
Sewer gas	X47.8	X67.8	Y17.8	-
Trichloroethylene	X46	X66	Y16	_
- vapour NEC	X44	X64	Y14	_
Trichlorofluoromethane NEC	X46	X66	Y16	_
Trichloromethane	X44	X64	Y14	Y48.0
Trichloronat(e) T60.0	X48	X68	Y18	-
	71.0	7.00	110	
Trifluoperazine	X41	X61	Y11	Y49.3
Trifluoroethyl vinyl ether	X44	X64	Y14	Y48.0
Trifluperidol	X41	X61	Y11	Y49.4
Triflupromazine	X41	X61	Y11	Y49.3
Trifluridine	X44	X64	Y14	Y41.5
 Vinyl				
- acetate	X49	X69	Y19	_
- bromide T65.8	X47.8	X67.8	Y17.8	_
- chloride	X47.8	X67.8	Y17.8	-
- ether	X44	X64	Y14	Y48.0
Vinylbital T42.3	X41	X61	Y11	Y47.0
172.0		7.01		

#### 19.2 Place of occurrence

See also 19.3 Complications of surgical and medical care.

Refinements have been undertaken in ICD-10-AM to category Y92 *Place of occurrence* to provide additional detail.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 20**

EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, V00–Y98) SUPPLEMENTARY FACTORS RELATED TO CAUSES OF MORBIDITY AND MORTALITY CLASSIFIED ELSEWHERE (Y90–Y98)

#### **⊕**Y92

#### Place of occurrence

Note:

A place of occurrence code describes where the external cause occurred, not where the adverse effect manifested.

The following category is for use with categories V00-Y89, to identify the place where the injury or poisoning (external cause) occurred.

The place of occurrence code is assigned in addition to the activity code. When multiple categories apply, assign the code appearing highest on the list.

#### **⊘**Y92.2

#### School, other institution and public administrative area

**Excludes:** building under construction (Y92.6-)

residential institution (Y92.1-) sports and athletics area (Y92.3-)

#### **O**Y92.23 Health service area, not specified as this facility

Health service area NOS, or specified as another facility

Day procedure centre

Health-centre Hospice

Hospital:

• in the home (HITH)

• NOS

Outpatient clinic

Includes: day procedure centre

GP clinic health centre **hospice** hospital:

• in the home [HITH]

• NOS

outpatient clinic

Note:

'This facility' includes satellite units managed and staffed by the same health care provider. These units may be located on the hospital campus or off the hospital campus and treat movements of patients between sites as ward transfers.

For an adverse effect of a prescribed drug, the place of occurrence is where the drug was prescribed (ie the health facility) not where the drug was administered or where the manifestation occurred.

#### **○**Y92.24 Health service area, this facility

Day procedure centre

Health centre

Hospice

Hospital:

• in the home (HITH)

Outpatient clinic

Includes: day procedure centre

GP clinic health centre **hospice** hospital: • in the home [HITH]

• NOS

outpatient clinic

Note:

'This facility' includes satellite units managed and staffed by the same health care provider. These units may be located on the hospital campus or off the hospital campus and treat movements of patients between sites as ward transfers.

For an adverse effect of a prescribed drug, the place of occurrence is where the drug was prescribed (ie the health facility) not where the drug was administered or where the manifestation occurred.

### 19.3 Complications of surgical and medical care

See also 19.4 Difficult intubation 19.4 Difficult intubation.

Stakeholders have continued to identify ambiguity when assigning codes for procedural complications and in application of ACS 1904 *Complications of surgical or medical care*. This was in part caused by the end of chapter residual codes that duplicated concepts.

Revisions for ICD-10-AM/ACHI/ACS Thirteenth Edition are aimed at eliminating ambiguities and supporting consistency of code assignment for procedural complications.

Extensive refinements have been made in the ICD-10-AM Tabular List, including the external cause codes to identify body systems of the intervention and the Alphabetic Index. The title of the ACS has been revised to ACS 1904 *Complications of surgical or medical care*, however the intent of the ACS remains the same.

#### **ICD-10-AM Tabular List**

### LIST OF THREE CHARACTER CATEGORIES

#### Metabolic disorders (E70-E89)

E70 Disorders of aromatic amino-acid metabolism

. . .

E88 Other metabolic disorders

E89 Intraoperative and postprocedural disorders of endocrine and metabolic system, not elsewhere

classified

. . .

#### Other disorders of the nervous system (G90-G99)

G90	Disorders of	autonomic	nervous system
-----	--------------	-----------	----------------

. . .

G96 Other disorders of central nervous system

G97 Intraoperative and postprocedural disorders of nervous system, not elsewhere classified

G98 Other disorders of nervous system, not elsewhere classified

G99\* Other disorders of nervous system in diseases classified elsewhere

...

#### Other disorders of eye and adnexa (H55-H59)

H55	Nystagmus and	l other irregul	ar eye movements
-----	---------------	-----------------	------------------

H57 Other disorders of eye and adnexa

H58\* Other disorders of eye and adnexa in diseases classified elsewhere

H59 Intraoperative and postprocedural disorders of eye and adnexa, not elsewhere classified

. . .

#### Other disorders of ear (H90-H95)

H90	Conductive and ser	nsorineural he	earing loss

H91 Other hearing loss

H92 Otalgia and effusion of ear

H93 Other disorders of ear, not elsewhere classified

H94\* Other disorders of ear in diseases classified elsewhere

H95 Intraoperative and postprocedural disorders of ear and mastoid process, not elsewhere classified

. . .

#### Other and unspecified disorders of the circulatory system (I95-I99)

195 Hypotension

197 Intraoperative and postprocedural disorders of circulatory system, not elsewhere classified

198\* Other disorders of circulatory system in diseases classified elsewhere

199 Other and unspecified disorders of circulatory system

. . .

#### Other diseases of the respiratory system (J95-J99)

10.5	
J95	Intraoperative and postprocedural disorders of respiratory system, not elsewhere classified
000	Intraductative and postprocedural disorders of respiratory system. Hot elsewhere diagonica

J96 Respiratory failure, not elsewhere classified

J98 Other respiratory disorders

J99\* Respiratory disorders in diseases classified elsewhere

. . .

#### Other diseases of the digestive system (K90-K93)

K90 Intestinal malabsorption

K91 Intraoperative and postprocedural disorders of digestive system, not elsewhere classified

K92 Other diseases of digestive system

K93\* Disorders of other digestive organs in diseases classified elsewhere

. . .

#### Other disorders of the musculoskeletal system and connective tissue (M95-M99)

M95 Other acquired deformities of musculoskeletal system and connective tissue

M96 Intraoperative and postprocedural disorders of musculoskeletal system, not elsewhere classified

M99 Biomechanical lesions, not elsewhere classified

. . .

#### Other disorders of genitourinary tract (N99)

N99 Intraoperative and postprocedural disorders of genitourinary system, not elsewhere classified

. . .

#### Complications of surgical and medical care, not elsewhere classified (T80-T88)

180	Complications due to tollowing infusion, transfusion and therapeutic injection
T81	Complications of procedures, not elsewhere classified
T82	Complications of internal cardiac and vascular prosthetic devices, implants and grafts
T83	Complications of internal genitourinary prosthetic devices, implants and grafts
T84	Complications of internal orthopaedic prosthetic devices, implants and grafts
T85	Complications of other internal prosthetic devices, implants and grafts
T86	Failure and rejection and other complications of transplanted [grafted] organs and tissues

Complications due to following influsion, transfusion and therenquis injection

Failure and rejection and other complications of transplanted <a href="grafted">[grafted</a>] organs and tissues

T87 Complications peculiar to reattachment and amputation

T88 Other complications of surgical and medical care, not elsewhere classified

. . .

#### Complications of <u>surgical and medical</u> and <u>surgical</u> care (Y40-Y84)

Drugs, medicaments and biological substances causing adverse effects in therapeutic use (Y40–Y59)

Y40 Systemic antibiotics

Y41 Other systemic anti-infectives and antiparasitics

. . .

#### **CHAPTER 4**

## ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES (E00–E89)

...

E89	

Intraoperative and postprocedural disorders of endocrine and metabolic system<del>, not elsewhere classified</del>

**▼**1904

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/
mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

E89.0 Postprocedural hypothyroidism Postirradiation hypothyroidism

E89.1 Postprocedural hypoinsulinaemia

▼0401

Postpancreatectomy hyperglycaemia

**©**E89.7

Accidental puncture and laceration of endocrine system organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

...

©E89.79 Accidental puncture and laceration of endocrine system organ or structure during a procedure, not elsewhere classified

E89.8 Other intraoperative and postprocedural disorders of endocrine and metabolic system

E89.9 Intraoperative and postprocedural disorders of endocrine and metabolic system, unspecified

#### **CHAPTER 6**

## DISEASES OF THE NERVOUS SYSTEM (G00–G99)

. . .



#### Other disorders of brain

G93.1 Anoxic brain damage, not elsewhere classified

Excludes: complicating surgical and medical care (G97.8)

neonatal anoxia (P21.9)

. . .



Intraoperative and postprocedural disorders of nervous system, not elsewhere classified

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

G97.0 Postprocedural cerebrospinal fluid leak
Cerebrospinal fluid leak following spinal puncture

Excludes: cerebrospinal fluid leak due to accidental puncture or laceration of dura (dural tear) (durotomy) (G97.31)

#### G97.1 Reaction to spinal and lumbar puncture, not elsewhere classified

Excludes: cerebrospinal fluid leak (G97.0)

that specified as due to anaesthesia (T88.5-)

**©**G97.11 Headache following spinal and lumbar puncture

**©**G97.19 Other reaction to spinal and lumbar puncture. Reaction to spinal and lumbar puncture, not elsewhere

classified

G97.2 Intracranial hypotension following ventricular shunting

**©**G97.3 Accidental puncture and laceration of nervous system organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81,

T83.81, T84.81, T85.83)

**©**G97.39 Accidental puncture and laceration of nervous system organ or structure during a procedure, not

elsewhere classified

G97.8 Other intraoperative and postprocedural disorders of nervous system

• neuroma

neuropraxia

Intraoperative and postprocedural disorder of nervous system, unspecified

#### CHAPTER 7

### **DISEASES OF THE EYE AND ADNEXA** (H00-H59)

#### H27

#### Other disorders of lens

**Excludes:** congenital lens malformations (Q12.-)

mechanical complications of intraocular lens (T85.2)

pseudophakia (Z96.1)

H27.0 **Aphakia** 

<del>▼0701</del> H27.1

Dislocation of lens

### H59 **▼**1904

#### Intraoperative and postprocedural disorders of eye and adnexa, not elsewhere classified

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/ mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

• intraocular lens (T85.2)

• other ocular prosthetic devices, implants and grafts (T85.3)

pseudophakia (Z96.1)

H59.0 Postprocedural keratopathy [bullous aphakic]

Keratopathy [bullous aphakic] following cataract surgery

Syndrome:

- vitreal corneal
- vitreous (touch)

#### **O**H59.1

#### Accidental puncture and laceration of eye and adnexa during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T85.83)

**○**H59.11 Accidental puncture and laceration of cornea during a procedure OH59.12 Accidental puncture and laceration of conjunctiva during a procedure

OH59.13 Accidental puncture and laceration of capsule of lens during a procedure

Capsular breach or tear NOS, during a procedure

Dropped nucleus due to capsular breach or tear during a procedure

. . .

H59.8 Other intraoperative and postprocedural disorders of eye and adnexa

OH59.81 Postprocedural cystoid macula oedema

Irvine-Gass syndrome

. . .

OH59.85 Postprocedural hyphaema

⊕H59.89 Other intraoperative and postprocedural disorders of eye and adnexa, not elsewhere classified

Dropped nucleus during eye procedure NOS

Excludes: dropped nucleus due to capsular breach or tear during a procedure (H59.13)

H59.9 Intraoperative and postprocedural disorder of eye and adnexa, unspecified

#### **CHAPTER 8**

## DISEASES OF THE EAR AND MASTOID PROCESS (H60–H95)

. . .

H95 Intraoperative and postprocedural disorders of ear and mastoid process<del>, not elsewhere classified</del>

**▼**1904

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/
mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

H95.0 Recurrent cholesteatoma of postmastoidectomy cavity

H95.1 Other disorders following mastoidectomy

. . .

OH95.2 Accidental puncture and laceration of structure of ear and mastoid process during a procedure, not

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

H95.8 Other intraoperative and postprocedural disorders of ear and masteid process

H95.9 Intraoperative and postprocedural disorder of ear and mastoid process, unspecified

#### **CHAPTER 9**

## DISEASES OF THE CIRCULATORY SYSTEM (100–199)

. . .

### I26 Pulmonary embolism

Includes: pulmonary (artery)(vein):

- infarction
- thromboembolism
- thrombosis

126.0 Pulmonary embolism with mention of acute cor pulmonale

Acute cor pulmonale NOS

126.9 Pulmonary embolism without mention of acute cor pulmonale

Pulmonary embolism NOS

### Phlebitis and thrombophlebitis

Includes: endophlebitis

inflammation, vein periphlebitis suppurative phlebitis

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

Excludes: phlebitis and thrombophlebitis (of):

- intracranial:
- nonpyogenic (I67.6)
- NOS (G08)
- septic (G08)
- intraspinal:
- nonpyogenic (G95.1)
- NOS (G08)
- septic (G08)
- portal (vein) (K75.1)

postphlebitic syndrome (I87.0) thrombophlebitis migrans (I82.1)

180.0 Phlebitis and thrombophlebitis of superficial vessels of lower extremities

180.1 Phlebitis and thrombophlebitis of femoral vein

#### Phlebitis and thrombophlebitis of other deep vessels of lower extremities

Use additional external cause code (X51) to identify DVT due to travel.

• • •

180.2

#### 195 Hypotension

Excludes: cardiovascular collapse (R57.9)

maternal hypotension syndrome (O26.5)

nonspecific low blood pressure reading NOS (R03.1)

. . .

195.2 Hypotension due to drugs

Hypotension due to specified anaesthetic drug

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

Excludes: drug-induced orthostatic (postural) hypotension (I95.19)

that due to anaesthesia NOS (T88.54 T88.59)

•••

#### Intraoperative and postprocedural disorders of circulatory system, not elsewhere classified

¶97 ▼1904

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/
mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

postprocedural shock (T81.1)

197.0 Postcardiotomy syndrome

197.2 Postmastectomy lymphoedema syndrome

Elephantiasis due to mastectomy

Obliteration of lymphatic vessels due to mastectomy

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

◆197.31 Accidental puncture and laceration of aorta during a procedure

. . .

197.8 Other intraoperative and postprocedural disorders of circulatory system, not elsewhere classified

◆197.81 Postprocedural steal syndrome

Haemodialysis associated steal syndrome

◆197.82 Pacemaker syndrome

◆197.83 Postprocedural lymphocele, lymphoedema and chylothorax

Excludes: postmastectomy (I97.2)

●197.84 Haemorrhage and haematoma of access site, from percutaneous cardiovascular procedure

Includes: access site:

- transbrachial
- · transfemoral
- transradial
- transulnar

♣197.89 — Other intraoperative and postprocedural disorders of circulatory system, not elsewhere classified

97.9 Intraoperative and postprocedural disorder of circulatory system, unspecified

#### **CHAPTER 10**

## DISEASES OF THE RESPIRATORY SYSTEM (J00–J99)

٠.



Intraoperative and postprocedural disorders of respiratory system, not elsewhere classified

Excludes: mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/
mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

postprocedural emphysema (subcutaneous) (T81.84) pulmonary manifestations due to radiation (J70.0–J70.1)

J95.0 Malfunction of tracheostomy

♣J95.01 Haemorrhage from tracheostomy

•••

©J95.6 Accidental puncture and laceration of respiratory system organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

**②**J95.61 Accidental puncture and laceration of larynx during a procedure

. . .

J95.8 Other intraoperative and postprocedural disorders of respiratory system

OJ95.81 Postprocedural tracheal stenosis

**○**J95.82 Ventilation associated pneumonia

Use additional code (B95–B97) to identify infectious agent.

**○**J95.83 Transfusion related acute lung injury [TRALI]

**☉**J95.84 Postprocedural pneumothorax

**○**J95.85 Postprocedural haemothorax

Postprocedural haemopneumothorax

**⇔**J95.89 Other intraoperative and postprocedural disorders of respiratory system, not elsewhere classified

<del>J95.9</del> Intraoperative and postprocedural disorders of respiratory system, unspecified

J96 Respiratory failure, not elsewhere classified

Excludes: newborn (P28.5)

spiratory failure (J95.-)

J96.0 Acute respiratory failure

#### **CHAPTER 11**

### **DISEASES OF THE DIGESTIVE SYSTEM** (K00-K93)

K91 **▼**1904

Intraoperative and postprocedural disorders of digestive system, not elsewhere classified

Excludes: gastrojejunal ulcer (K28.-)

mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/ mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical radiation:

- colitis (K52.0)
- gastroenteritis (K52.0)
- proctitis (K62.7)

K91.2 Postprocedural malabsorption, not elsewhere classified

Postprocedural blind loop syndrome

Excludes: postprocedural malabsorption:

- osteomalacia in adults (M83.2-)
- osteoporosis<del>, postprocedural</del> (M81.3-)

#### K91.4 Malfunction of stoma of the digestive system

Includes: cholecystostomy

colostomy enterostomy gastrostomy ileostomy jejunostomy oesophagostomy

Excludes: parastomal hernia (K43.-)

**©**K91.41 Haemorrhage from stoma of the digestive system

**©**K91.42 Infection of stoma of the digestive system **©**K91.43 Leak from stoma of the digestive system

Leak from gastrostomy tube (exit site)

**©**K91.49 Malfunction of stoma of the digestive system, not elsewhere classified

High output ileostomy

Mechanical complication of digestive system stoma

Stenosis or stricture of stoma

K91.5 Postcholecystectomy syndrome

K91.6 Accidental puncture and laceration of digestive system organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

**©**K91.64 Accidental puncture and laceration of gallbladder or bile duct during a procedure

Includes: bile leak

spilled gallstones

**©**K91.7 Retained calculi postcholecystectomy

Use additional code (Chapter 1-18) to identify manifestation resulting from retained calculi.

Excludes: spilled stones due to accidental tear, perforation or rupture of gallbladder (K91.64)

K91.8 Other intraoperative and postprocedural disorders of digestive system, not elsewhere classified

**©**K91.81 Haemorrhage from surgical anastomosis of digestive tract

**©**K91.82 Stenosis of surgical anastomosis of digestive tract

Stricture of surgical anastomosis of digestive tract

**©**K91.83 Leak from surgical anastomosis of digestive tract

Excludes: bile leak:

- due to accidental puncture or laceration (K91.64)
- NOS (K91.84)

**©**K91.84 Postprocedural bile leak, not elsewhere classified

Excludes: that due to accidental puncture and laceration (K91.64)

**©**K91.85 Postprocedural adhesions [peritoneal], not elsewhere classified

**Excludes:** that due to foreign body accidently left in body (T81.5)

**★** K91.89 Other intraoperative and postprocedural disorders of digestive system, not elsewhere classified

Calculi (stones) spilling from the biliary tract during a procedure NOS

Intraoperative and postprocedural disorder of digestive system, unspecified

#### **CHAPTER 12**

## DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE (L00-L99)

. . .

L27

#### Dermatitis due to substances taken internally

Excludes: adverse food reaction, except dermatitis (T78.0–T78.1):

• effect NOS of drugs (T88.7)

• food reaction, except dermatitis (T78.0 T78.1)

allergy NOS (T78.4)

contact dermatitis (L23-L25)

drug:

• photoallergic response (L56.1)

• phototoxic response (L56.0)

urticaria (L50.-)

L27.0 Generalised skin eruption due to drugs and medicaments

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

L27.1 Localised skin eruption due to drugs and medicaments

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

...

#### **CHAPTER 13**

## DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE (M00–M99)

- - -

M00

#### Pyogenic arthritis

See site code

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

. . .

M25

#### Other joint disorders, not elsewhere classified

See site code

...

M25.3

#### Other instability of joint

[0-5,7-9]

Excludes: instability of joint secondary to old ligament injury (M24.2):

• old ligament injury (M24.2-)

• removal of joint prosthesis (M96.8)

M95

#### Other acquired deformities of musculoskeletal system and connective tissue

Excludes: acquired:

• absence of limbs and organs (Z89–Z90)

• deformities of limbs (M20–M21)

congenital malformations and deformations of the musculoskeletal system (Q65–Q79)

deforming dorsopathies (M40–M43)

dentofacial anomalies [including malocclusion] (K07.-) postprocedural musculoskeletal disorders (M96.-)

M96

#### Intraoperative and postprocedural disorders of musculoskeletal system, not elsewhere classified

**V**1904

Excludes: arthropathy following intestinal bypass (M02.0-)

disorders associated with osteoporosis (M80-M81)

instability of joint secondary to removal of joint prosthesis (T81.89)

mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/ mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

presence of functional implants and other devices (Z95–Z97)

M96.0 Pseudarthrosis after fusion or arthrodesis

M96.1 Postlaminectomy syndrome, not elsewhere classified

Excludes: with:

• arachnoiditis (G03.-) • discitis (M46.3-, M46.4-) • instability (M53.2-)

M96.2 Postradiation kyphosis

M96.3 Postlaminectomy kyphosis

M96.4 Postprocedural lordosis

M96.5 Postradiation scoliosis

M96.6 Fracture of bone following insertion of orthopaedic implant and postprocedural osteolysis

Fracture of bone following insertion of orthopaedic implant, joint prosthesis, or bone plate

Excludes: complication of internal orthopaedic devices, implants or grafts (T84.-)

Fracture of bone following insertion of orthopaedic implant [joint prosthesis or bone plate] **©**M96.61

**⊘**M96.62 Postprocedural osteolysis

**⊘**M96.7 Accidental puncture and laceration of musculoskeletal organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81,

T83.81, T84.81, T85.83)

Other intraoperative and postprocedural disorders of musculoskeletal system M96.8 Instability of joint secondary to removal of joint prosthesis

Intraoperative and postprocedural disorders of musculoskeletal system, unspecified

#### **CHAPTER 14**

### **DISEASES OF THE GENITOURINARY SYSTEM (N00-N99)**

#### OTHER DISORDERS OF GENITOURINARY TRACT (N99)



Intraoperative and postprocedural disorders of genitourinary system, not elsewhere classified

**▼**1904

Excludes: irradiation cystitis (N30.4)

mechanical complication of devices, implants and grafts — see Alphabetic Index: Complication(s)/ mechanical, of device, implant or graft/by site OR Complication(s)/by site and type/mechanical

postoophorectomy osteoporosis:

• NOS (M81.1-)

• with pathological fracture (M80.1-)

states associated with artificial menopause (N95.3)

N99.1 Postprocedural urethral stricture

Postcatheterisation urethral stricture

ON99.6

#### Accidental puncture and laceration of genitourinary system organ or structure during a procedure

Excludes: that with haemorrhage and haematoma due to insertion of internal devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)

1100.0	
N99.8	Other intraoperative and postprocedural disorder of genitourinary system

**♥**N99.81 Haemorrhage from surgical anastomosis of genitourinary tract

♠N99.82 Stenosis of surgical anastomosis of genitourinary tract

Stricture of surgical anastomosis of genitourinary tract

♠N99.83 Leak from surgical anastomosis of genitourinary tract

**②**N99.84 Residual ovary syndrome

Other intraoperative and postprocedural disorder of genitourinary system

Intraoperative and postprocedural disorder of genitourinary system, unspecified

#### **CHAPTER 19**

### INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL **CAUSES (S00-T98)**

### POISONING BY DRUGS, MEDICAMENTS AND BIOLOGICAL SUBSTANCES (T36-T50)

**▼** 1901, 1903

Includes: adverse effects of prescribed drugs taken in combination with self-prescribed drugs and intoxication

overdose due to drugs, medicaments and biological substances

suicide or homicide due to poisoning wrong substance given or taken in error

Note: Poisoning involves improper use of drugs, medicaments and biological substances.

Excludes: adverse effects of correct substance properly administered - code condition - see Alphabetic Index

aspirin gastritis - see Alphabetic Index: Gastritis

blood disorders due to adverse effects of drugs (D50-D76)

dermatitis:

• contact (L23–L25)

• due to substances taken internally (L27.-)

drug reaction and poisoning affecting the fetus and newborn (P00-P96)

intoxication meaning inebriation (F10-F19)

nephropathy due to adverse effects of drugs (N14.0–N14.2) nondependence-producing substance use disorder (F55)

pathological drug intoxication (F10-F19) unspecified adverse effect of drug (T88.7)

### COMPLICATIONS OF SURGICAL AND MEDICAL CARE, NOT ELSEWHERE CLASSIFIED (T80-T88)

**▼**1904

Use additional code (B95–B97) to identify infectious agent.

Use additional external cause code (Chapter 20) to identify devices involved and details of circumstances.

Excludes:

adverse effects of drugs and medicaments NEC (T78.-)

any encounters with medical care for postprocedural conditions in which no complications are present, such as:

- artificial opening status (Z93.-)
- closure of external stoma (Z43.-)

• fitting and adjustment of (external) prosthetic device (Z44.-) burns from local applications and irradiation (T20–T31) poisoning and toxic effects of drugs and chemicals (T36–T65) specified adverse effects of drugs and medicaments — see Alphabetic Index

## COMPLICATIONS DUE TO INTERVENTIONS (T80–T81)

T80

<u>Complications due to infusion, transfusion and therapeutic injection</u> <u>Complications following infusion, transfusion and therapeutic injection</u>

Includes: perfusion

Excludes: bone marrow transplant rejection (T86.0)

T80.0 <u>Air embolism due to infusion, transfusion and therapeutic injection</u> Air embolism following infusion, transfusion and therapeutic injection

T80.1 Vascular complications due to infusion, transfusion and therapeutic injection Vascular complications following infusion, transfusion and therapeutic injection

Phlebitis due tofollowing infusion, transfusion and therapeutic injection

Thromboembolism <u>due tofollowing</u> infusion, transfusion and therapeutic injection Thrombophlebitis <u>due tofollowing</u> infusion, transfusion and therapeutic injection

Use additional code (Chapter 1–18) to identify condition.

Excludes: phlebitis and thrombophlebitis due to the listed conditions when specified as:

intervention NOS (T81.7)intravascular catheter (T82.7-)

thromboembolism due to:

• internal devices, implants and grafts (T82.82, T83.82, T84.82, T85.84)

• intervention NOS (T81.7)

• due to or associated with prosthetic devices, implants and grafts (T82.82, T83.82, T84.82, T85.84)

• postprocedural (T81.7)

vaccine induced thrombosis with thrombocytopenia syndrome [VITTS] (D69.5)

T80.2 <u>Infections due to infusion, transfusion and therapeutic injection</u> <u>Infections following infusion, transfusion and therapeutic injection</u>

**▼**0110, <del>1904</del>

**Note:** Infusion/transfusion associated infection refers to the sudden onset of symptoms of bloodstream infection after the initiation of infusion.

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type

Use additional code to identify specific type of infection.

Excludes: hepatitis, post-transfusion (B16-B19)

infection due to immunisation (T88.0)

intravascular catheter infection or sepsis (T82.7-)

when due to internal devices, implants and grafts (T82.6, T83.5-T83.6-, T84.5-T84.7, T85.7-)

when specified as:

due to or associated with prosthetic devices, implants and grafts (T82.6 T82.7 T83.5 T83.6 T83.6 T84.5

<del>T84.7, T85.7-)</del>

• postprocedural (T81.4)

T80.3 ABO incompatibility reaction

Incompatible blood transfusion

Reaction to blood group incompatibility in infusion or transfusion

T80.4 Rh incompatibility reaction

Reaction due to Rh factor in infusion or transfusion

T80.5 Anaphylaxis and anaphylactic shock due to serum

Antivenom

Excludes: allergic reaction NOS (T78.2)

anaphylaxis and anaphylactic shock:

• due to adverse:

• effect of correct medicinal substance (except serum) properly administered (T88.6)

• food reaction (T78.0)

• NOS (T78.2)

#### T80.6 Other serum reactions

Eczema due to adverse effects of serum

Intoxication by serum Protein sickness

Rash due to adverse effects of serum

Serum sickness

Urticaria due to adverse effects of serum

Excludes: anaphylaxis or anaphylactic shock due to serum (T80.5)

complication of vaccine (non-serum based) NEC (T88.1)

serum hepatitis (B16-B19)

T80.8 Other complications due to infusion, transfusion and therapeutic injection Other complications following infusion, transfusion and therapeutic injection

Use additional code (Chapter 1–18) to identify condition.

Excludes: dialysis dysequilibrium syndrome (T81.85)

T80.9 <u>Unspecified complication due to infusion, transfusion and therapeutic injection</u> <del>Unspecified complication</del>

following infusion, transfusion and therapeutic injection

Transfusion reaction NOS

T81

Note: Assign this code only when specific details regarding the complication and intervention cannot be obtained.

#### Complications of procedures, not elsewhere classified

Excludes: adverse effect of drug NOS (T88.7)

complication <u>due tofollowing</u>:

- immunisation (T88.0–T88.1)
- infusion, transfusion and therapeutic injection (T80.-) specified complications classified elsewhere, such as:
- adverse effect of drugs and medicaments see Alphabetic Index
- complications of serum (T80.5–T80.6)
- dermatitis due to drugs and medicaments, except serum (L23.3, L24.4, L25.1, L27.0–L27.1)
- failure and rejection of transplanted [grafted] organs and tissues (T86-)
- poisoning and toxic effects of drugs and chemicals (T36–T65)

#### T81.0 Haemorrhage and haematoma complicating a procedure, not elsewhere classified

Haemorrhage and haematoma at any site resulting from a procedure

**Excludes:** haemorrhage and haematoma:

- access site, from percutaneous cardiovascular procedure (I97.84)
- amputation stump (T87.61)
- due to or associated with internal prosthetic devices, implants and grafts (T82.81, T83.81, T84.81, T85.83)
- from:
  - digestive system stoma (K91.41)
  - surgical anastomosis:
  - digestive tract (K91.81)
  - genitourinary tract (N99.81)
- tracheostomy (J95.01)
- urinary tract stoma (N99.51)
- obstetric wound (O90.2)

that with accidental puncture and laceration:

- NOS (T81.2)
- of specified organ or structure:
  - circulatory system (I97.3-)
- digestive system (K91.6-)
- ear and mastoid process (H95.2)
- endocrine system (E89.7-)
- eye and adnexa (H59.1-)
- genitourinary system (N99.6-)
- musculoskeletal system (M96.7-)
- nervous system (G97.3-)
- respiratory system (J95.6-)

#### T81.1 Shock during or resulting from a procedure, not elsewhere classified

Collapse NOS during or following a procedure

Postprocedural shock NOS

Shock (endotoxic) (hypovolaemic) during or following a procedure

Excludes: shock:

- anaesthetic (T88.2)
- anaphylactic:
- due to:
  - correct medicinal substance (except serum) properly administered (T88.6)
  - serum (T80.5)
- NOS (T78.2)
- due to anaesthesia (T88.2)
- electric (T75.4)
- following abortion or ectopic or molar pregnancy (O00–O07, O08.3)
- obstetric (O75.1)
- septic (R57.2)
- traumatic (T79.4)

#### T81.2 Accidental puncture and laceration during a procedure, not elsewhere classified

Excludes: damage from instruments during delivery (O70–O71)

perforation, puncture or laceration caused by device or implant intentionally left in operation wound (T82–T85)

specified complications classified elsewhere, such as broad ligament laceration syndrome [Allen-Masters] (N83.8)

that of specified organ or structure:

- circulatory system (I97.3-)
- digestive system (K91.6-)
- ear and mastoid process (H95.2)
- endocrine system (E89.7-)
- eye and adnexa (H59.1-)
- genitourinary system (N99.6-)
- musculoskeletal system (M96.7-)
- nervous system (G97.3-)
- respiratory system (J95.6-)

#### T81.3 Disruption of operation wound, not elsewhere classified

Dehiscence of operation wound

Rupture of operation wound

Includes: that with internal prosthetic devices, implants and grafts

Excludes: disruption (dehiscence) (rupture) of:

- amputation stump wound (T87.62)
- caesarean section wound (O90.0)
- perineal obstetric wound (O90.1)

#### T81.4 Postprocedural Wwound infection following a procedure, not elsewhere classified

<del>▼1904</del>

#### Postprocedural:

- abscess:
- intra-abdominal
- stitch
- subphrenic
- wound
- infection NOS

Wound sepsis following a procedure

Excludes: amputation stump wound infection (T87.4)

infection due to:

- infusion, transfusion and therapeutic injection (T80.2)
- <u>internal prosthetic</u> devices, implants and grafts (T82.6–T82.7-, T83.5–T83.6, T84.5–T84.7, T85.7-) obstetric surgical wound infection or wound sepsis (O86.0)

#### T81.5 Foreign body accidentally left in body cavity or operation wound following a procedure

Adhesions due to foreign body accidentally left in operation wound or body cavity Obstruction due to foreign body accidentally left in operation wound or body cavity Perforation due to foreign body accidentally left in operation wound or body cavity

Includes: that with foreign body accidentally left during insertion of internal prosthetic devices, implants and grafts

Excludes: obstruction or perforation due to or associated with prosthetic internal devices and implants intentionally left

in body (T82.0–T82.5-, T83.0–T83.4-, T84.0–T84.4, T85.0–T85.6-)

#### T81.6 Acute reaction to foreign substance accidentally left during a procedure

Includes: that with internal prosthetic devices, implants and grafts

*Use additional code (K65.2-) to identify secondary peritonitis.* 

#### T81.7 Vascular complications following Circulatory system complications due to a procedure, not elsewhere classified

Air embolism following procedure NEC

Vascular complications due to a procedure NEC

*Use additional code (Chapter 1–18) to identify condition.* 

Excludes: deep venous thrombosis (I80.-)

embolism or thrombosis:

- complicating abortion or ectopic or molar pregnancy (O00–O07, O08.2)
- due to:
  - infusion, transfusion and therapeutic injection (T80.0, T80.1)
  - internal devices, implants and grafts (T82.82, T83.82, T84.82, T85.84)
- due to or associated with prosthetic devices, implants and grafts (T82.82, T83.82, T84.82, T85.84)
- following infusion, transfusion and therapeutic injection (T80.0)
- in pregnancy, childbirth and the puerperium NEC (O88.-)
- pulmonary embolism (I26.-)
- traumatic (T79.0)

#### T81.8 Other complications of procedures, not elsewhere classified

Excludes: complications of following anaesthesia (T88.5-)

malignant hyperthermia due to anaesthesia (T88.3)

#### **©**T81.81 Complication of inhalation therapy

#### ◆T81.82 Persistent postprocedural fistula, not elsewhere classified

*Use additional code (Chapter 1–18) to identify fistula — see Alphabetic Index: Fistula/by type.* 

#### **©**T81.83 Pain due to a procedure, not elsewhere classified Pain following a procedure, not elsewhere classified

Excludes: pain due to or associated with prosthetic internal devices, implants and grafts (T82.83, T83.83, T84.83, T85.85)

#### **©**T81.84 Postprocedural emphysema

Emphysema (subcutaneous) following a procedure

#### **©**T81.85 Nervous system complications due to a procedure, not elsewhere classified

Use additional code (Chapter 1–18) to identify condition.

#### Respiratory system complications due to a procedure, not elsewhere classified **©**T81.86

*Use additional code (Chapter 1–18) to identify condition.* 

#### **©**T81.87 Digestive system complications due to a procedure, not elsewhere classified

Use additional code (Chapter 1–18) to identify condition.

#### ©T81.88 Genitourinary system complications due to a procedure, not elsewhere classified

*Use additional code (Chapter 1–18) to identify condition.* 

## ◆T81.89 Other complications of a procedure, not elsewhere classified Other complications following a procedure, not elsewhere classified

*Use additional code (Chapter 1–18) to identify condition.* 

Excludes: circulatory system complication due to procedure NEC (T81.7)

digestive system complication due to procedure NEC (T81.87) genitourinary system complication due to procedure NEC (T81.88) nervous system complication due to procedure NEC (T81.85) respiratory system complication due to procedure NEC (T81.86)

#### T81.9 Unspecified complication of procedure

### <u>COMPLICATIONS OF DEVICES, IMPLANTS AND GRAFTS</u> (T82–T86)

Includes: artificial device, implant or graft

tissue graft

Excludes: complications from transplant interventions other than failure and rejection (T81.-)

T82

## Complications of internal cardiac and vascular devices, implants and grafts-Complications of cardiac and vascular prosthetic devices, implants and grafts

Excludes: specified complications classified elsewhere, such as:

- acute reaction to foreign substance accidentally left during a procedure (T81.6)
- disruption of operation wound (wound dehiscence) (T81.3)
- failure and rejection of transplanted [grafted] organs and tissues (T86.-)
- foreign body accidentally left in operation wound or body cavity (T81.5)
- postoperative wound infection NEC (superficial) (vein donor site) (T81.4)

#### T82.0 Mechanical complication of prosthetic heart valve Mechanical complication of heart valve prosthesis

Includes: breakdown (mechanical)

displacement (migration)

leakage loosening malposition

mechanical obstruction

perforation (other than accidental puncture or laceration during a procedure)

protrusion

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

#### T82.1 Mechanical complication of electronic cardiac device

Complications-Conditions listed in *Includes* note at T82.0 due to cardiac:

- defibrillator
- electrode(s)
- pacemaker (intracardiac) (subcutaneous)
- pulse generator (battery).

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

#### T82.2 Mechanical complication of coronary artery bypass and valve grafts

Conditions Complications listed in *Includes* note at T82.0 due to coronary artery bypass and valve grafts.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

#### T82.3 Mechanical complication of other vascular grafts

Conditions Complications listed in *Includes* note at T82.0 due to:

- aortic (bifurcation) graft (replacement)
- arterial (carotid)(femoral) graft (bypass).

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T82.4 Mechanical complication of vascular dialysis catheter

Conditions Complications listed in *Includes* note at T82.0 due to vascular dialysis catheter.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

Excludes: mechanical complication of intraperitoneal dialysis catheter (T85.63)

T82.5 Mechanical complication of other internal cardiac and vascular devices and implants

Complications listed in *Includes* note at T82.0 due to other internal cardiac and vascular devices and implants.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

Excludes: mechanical complication of epidural or subdural infusion catheter (T85.64)

©T82.51 Mechanical complication of central vascular catheter

Mechanical complication of:

- central vascular line (infusion port) (Port-A-Cath)
- peripherally inserted central catheter (PICC)

. . .

T82.59 Mechanical complication of other specified cardiac and vascular devices and implants

T82.6 Infection and inflammatory reaction due to cardiac valve prosthesis

▼0110

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.

Use additional code to identify specific type of infection.

T82.7 Infection and inflammatory reaction due to <u>internal</u> cardiac and vascular devices, implants and grafts, not elsewhere classified

**▼**0110

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.

Use additional code to identify specific type of infection.

©T82.71 Infection and inflammatory reaction due to electronic cardiac device

Infection and inflammatory reaction due to cardiac:

- defibrillator
- electrode(s)
- pacemaker (intracardiac) (subcutaneous)
- pulse generator (battery)

**©**T82.72 Infection and inflammatory reaction due to coronary artery bypass and valve grafts

©T82.73 Infection and inflammatory reaction due to other vascular grafts

©T82.74 Infection and inflammatory reaction due to central vascular catheter

Infection and inflammation of:

- central vascular line (infusion port) (insertion site) (Port-A-Cath)
- peripherally inserted central catheter (PICC)

*Use additional code (Chapter 1–18) to identify condition.* 

©T82.75 Infection and inflammatory reaction due to peripheral vascular catheter

Localised infection at site of insertion of peripheral intravascular device

Peripheral line infection

*Use additional code (Chapter 1–18) to identify condition.* 

T82.76 Infection and inflammatory reaction due to surgically created arteriovenous fistula and shunt

©T82.77 Infection and inflammatory reaction due to vascular dialysis catheter

©T82.79 Infection and inflammatory reaction due to cardiac and vascular devices, implants and grafts, not

elsewhere classified

#### T82.8 Other specified complications of internal cardiac and vascular devices, implants and grafts

♣T82.81 Haemorrhage and haematoma due to insertion of internal cardiac and vascular devices, implants and grafts-Haemorrhage and haematoma following insertion of cardiac and vascular prosthetic devices, implants and grafts

Excludes: haemorrhage and haematoma of access site, for percutaneous cardiovascular procedure (I97.84)

©T82.82 Embolism and thrombosis due to insertion of internal cardiac and vascular devices, implants and grafts

Embolism and thrombosis following insertion of cardiac and vascular prosthetic devices, implants and grafts

Embolism and thrombosis of coronary artery and other vascular bypass grafts

Use additional code (I26.-) to identify pulmonary embolism.

Use additional code (I80.-) to identify deep venous thrombosis.

Excludes: postprocedural:

deep venous thrombosis (I80. )pulmonary embolism (I26. )

©T82.83 Pain due to insertion of internal cardiac and vascular devices, implants and grafts Pain following insertion of cardiac and vascular prosthetic devices, implants and grafts

©T82.84 Stenosis due to insertion of internal cardiac and vascular devices, implants and grafts Stenosis following insertion of cardiac and vascular prosthetic devices, implants and grafts

♦ Vascular dissection due to insertion of internal cardiac and vascular devices, implants and grafts

Vascular dissection insertion of cardiac and vascular prosthetic devices, implants and grafts

Vascular dissection during insertion of internal cardiac and vascular prosthetic devices, implants and grafts

◆T82.86 Aneurysm due to insertion of internal cardiac and vascular devices, implants and grafts Aneurysm following insertion of cardiac and vascular prosthetic devices, implants and grafts

Other complications of internal cardiac and vascular devices, implants and grafts Other specified complications of cardiac and vascular prosthetic devices, implants and grafts
 Fibrosis due to internal cardiac and vascular prosthetic devices, implants and grafts

*Use additional code (Chapter 1–18) to identify condition.* 

Excludes: lymphocele post femoral cannulation (I97.83)

T82.9 Unspecified complication of internal cardiac and vascular device, implant and graft-Unspecified complication of cardiac and vascular prosthetic device, implant and graft

Note: Assign this code only when specific details regarding the complication and intervention cannot be obtained.

T83 <u>Complications of internal genitourinary devices, implants and grafts Complications of genitourinary prosthetic devices, implants and grafts</u>

Excludes: specified complications classified elsewhere, such as:

- acute reaction to foreign substance accidentally left during a procedure (T81.6)
- disruption of operation wound (wound dehiscence) (T81.3)
- failure and rejection of transplanted organs and tissues (T86.-)
- foreign body accidentally left in operation wound or body cavity (T81.5)
- postoperative wound infection (superficial) NEC (T81.4)

### T83.0 Mechanical complication of urinary (indwelling) catheter

Conditions listed in T82.0 due to urethral indwelling catheter

Includes: breakdown (mechanical)

displacement (migration)

leakage loosening malposition

mechanical obstruction

perforation (other than accidental puncture or laceration during a procedure)

protrusion

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

Excludes: complications of cystostomy (N99.5-)

T83.1 Mechanical complication of other urinary devices and implants

Conditions Complications listed in *Includes* note at T83.0T82.0 due to urinary:

- electronic stimulator device
- sphincter implant
- stent.
- urinary:
- electronic stimulator device
- sphincter implant
- stent

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T83.2 Mechanical complication of graft of urinary organ

Conditions Complications listed in *Includes* note at T83.0T82.0 due to graft of urinary organ.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T83.3 Mechanical complication of intrauterine device

Conditions Complications listed in *Includes* note at T83.0T82.0 due to intrauterine (contraceptive) device.

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

T83.4 Mechanical complication of other <u>internal prosthetic</u> devices, implants and grafts in genital tract

Complications listed in Includes note at T83.0 due to other internal devices, implants and grafts in the genital tract.

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

Excludes: erosion of mesh due to displacement, perforation or protrusion (T83.85)

©T83.41 Mechanical complication of other <u>internal prosthetic</u> devices, implants and grafts in male genital tract Conditions listed in T82.0 due to (implanted) penile prosthesis

**T83.42** Mechanical complication of other internal prosthetic devices, implants and grafts in female genital tract

T83.5 Infection and inflammatory reaction due to internal prosthetic device, implant and graft in urinary system

**▼**0110

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.

Use additional code to identify specific type of infection.

*Use additional code (K65.2-) to identify secondary peritonitis.* 

Excludes: catheter associated urinary tract infection (CAUTI) without further specification (N39.0)

Infection and inflammatory reaction due to <u>internal prosthetic</u>device, implant and graft in genital tract

▼0110

T83.6

*Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.* 

Use additional code to identify specific type of infection.

*Use additional code (K65.2-) to identify secondary peritonitis.* 

©T83.61 Infection and inflammatory reaction due to internal prosthetic device, implant and graft in male genital tract

©T83.62 Infection and inflammatory reaction due to <u>internal</u> prosthetic device, implant and graft in female genital tract

T83.8 Other complications of genitourinary internal prosthetic devices, implants and grafts

◆T83.81 Haemorrhage and haematoma due to internal genitourinary devices, implants and grafts Haemorrhage and haematoma following insertion of genitourinary prosthetic devices, implants and grafts

©T83.82 Embolism and thrombosis due to internal genitourinary devices, implants and grafts Embolism and thrombosis following insertion ofgenitourinary prosthetic devices, implants and grafts

*Use additional code (I26.-) to identify pulmonary embolism.* 

Use additional code (I80.-) to identify deep venous thrombosis.

Excludes: postprocedural:

deep venous thrombosis (I80.-)pulmonary embolism (I26.-)

**②**T83.83 Pain due to insertion of internal genitourinary devices, implants and grafts Pain following insertion of genitourinary prosthetic devices, implants and grafts

©T83.84 Stenosis due to insertion of internal genitourinary devices, implants and grafts Stenosis following insertion of genitourinary prosthetic devices, implants and grafts

Excludes: postcatheterisation urethral stricture (N99.1)

©T83.85 Erosion of genitourinary mesh and other-prosthetic implant materials

Erosion of implanted genitourinary mesh and other prosthetic materials

◆T83.89 Other complications of internal genitourinary devices, implants and grafts—Other specified complications

of genitourinary devices, implants and grafts

Fibrosis due to genitourinary internal prosthetic devices, implants and grafts

*Use additional code (Chapter 1–18) to identify condition.* 

T83.9 <u>Unspecified complication of internal genitourinary device, implant and graft-Unspecified complication of genitourinary prosthetic device, implant and graft</u>

Note: Assign this code only when specific details regarding the complication and intervention cannot be obtained.

T84

#### Complications of internal orthopaedic prosthetic devices, implants and grafts

**▼**1309

Excludes: specified complications classified elsewhere, such as:

- acute reaction to foreign substance accidentally left during a procedure (T81.6)
- disruption of operation wound (wound dehiscence) (T81.3)
- failure and rejection of transplanted organs and tissues (T86.-)
- foreign body accidentally left in operation wound or body cavity (T81.5)
- fracture of bone following insertion of orthopaedic implant, joint prosthesis or bone plate (M96.61 M96.6)
- postoperative wound infection (superficial) NEC (T81.4)
- postprocedural osteolysis (M96.62)

#### T84.0 Mechanical complication of internal prosthetic joint prosthesis

Conditions listed in T82.0 due to joint prosthesis

Includes: breakdown (mechanical)

displacement (migration)

leakage loosening malposition

mechanical obstruction

perforation (other than accidental puncture or laceration during a procedure)

protrusion

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

#### T84.1 Mechanical complication of internal fixation device of bones of limb

Conditions Complications listed in *Includes* note at T84.0T82.0 due to internal fixation device of bones of limb.

Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.

#### T84.2 Mechanical complication of internal fixation device of other bones

Conditions Complications listed in *Includes* note at T84.0T82.0 due to internal fixation device of other bones.

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

T84.3 Mechanical complication of other <u>internal</u> bone devices, implants and grafts

Conditions Complications listed in *Includes* note at T84.0T82.0 due to:

- · bone graft
- electronic bone stimulator
- internal components (pins) of external fixator device.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T84.4 Mechanical complication of other internal orthopaedic devices, implants and grafts Conditions Complications listed in *Includes* note at T84.0T82.0 due to muscle and tendon graft.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T84.5 Infection and inflammatory reaction due to internal joint prosthesis

▼0110

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.

Use additional code to identify specific type of infection.

T84.6 Infection and inflammatory reaction due to internal fixation device [any site]

**▼**0110

*Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.* 

Use additional code to identify specific type of infection.

T84.7 Infection and inflammatory reaction due to other internal orthopaedic prosthetic devices, implants and grafts

▼0110

Infection due to internal components (pins) of external fixator device

*Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.* 

Use additional code to identify specific type of infection.

T84.8 Other complications of internal orthopaedic prosthetic devices, implants and grafts

Includes: internal components (pins) of external fixator device

◆T84.81 Haemorrhage and haematoma due to insertion of internal orthopaedic devices, implants and grafts Haemorrhage and haematoma following insertion of internal orthopaedic prosthetic devices, implants and grafts

©T84.82 Embolism and thrombosis due to insertion of internal orthopaedic devices, implants and grafts

Embolism and thrombosis following insertion of internal orthopaedic prosthetic devices, implants and grafts

*Use additional code (I26.-) to identify pulmonary embolism.* 

Use additional code (I80.-) to identify deep venous thrombosis.

Excludes: postprocedural:

- deep venous thrombosis (I80.-)
- pulmonary embolism (I26.-)
- ©T84.83 Pain due to insertion of internal orthopaedic devices, implants and grafts—Pain following insertion of internal orthopaedic prosthetic devices, implants and grafts
- Stenosis due to insertion of internal orthopaedic devices, implants and grafts-Stenosis following insertion of internal orthopaedic prosthetic devices, implants and grafts
- T84.85 Metallosis due to insertion of internal orthopaedic devices, implants and grafts—Metallosis following insertion of internal orthopaedic prosthetic devices, implants and grafts
- Other complications of internal orthopaedic devices, implants and grafts Other specified complications following insertion of internal orthopaedic prosthetic devices, implants and grafts
  Fibrosis due to internal orthopaedic prosthetic devices, implants and grafts

*Use additional code (Chapter 1–18) to identify condition.* 

T84.9 Unspecified complication of internal orthopaedic prosthetic device, implant and graft

Note: Assign this code only when specific details regarding the complication and intervention cannot be obtained.

T85

#### Complications of other internal prosthetic devices, implants and grafts

Excludes: specified complications classified elsewhere, such as:

- acute reaction to foreign substance accidentally left during a procedure (T81.6)
- disruption of operation wound (wound dehiscence) (T81.3)
- failure and rejection of transplanted organs and tissues (T86.-)
- foreign body accidentally left in operation wound or body cavity (T81.5)
- postoperative wound infection (superficial) NEC (T81.4)
- T85.0 Mechanical complication of ventricular intracranial (communicating) shunt Conditions listed in T82.0 due to ventricular intracranial (communicating) shunt

Includes: breakdown (mechanical)

displacement (migration)

<u>leakage</u> <u>loosening</u> malposition

mechanical obstruction

perforation (other than accidental puncture or laceration during a procedure)

protrusion

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

T85.1 Mechanical complication of implanted electronic stimulator of nervous system

Conditions Complications listed in *Includes* note at T85.0 T82.0 due to electronic neurostimulator (electrode) of:

- brain
- peripheral nerve
- spinal cord.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T85.2 Mechanical complication of intraocular lens

Conditions Complications listed in *Includes* note at T85.0 T82.0 due to intraocular lens.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

- T85.3 Mechanical complication of other <u>internal</u> ocular <u>prosthetic</u> devices, implants and grafts <u>Conditions Complications</u> listed in <u>Includes note at T85.0 T82.0 due to:</u>
  - corneal graft
  - prosthetic orbit of eye.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T85.4 Mechanical complication of breast prostheses and implants

Conditions Complications listed in *Includes* note at T85.0 T82.0 due to breast prostheses and implants.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

T85.5 <u>Mechanical complication of internal gastrointestinal devices, implants and grafts</u> <del>Mechanical complication of gastrointestinal prosthetic devices, implants and grafts</del>

Conditions Complications listed in <u>Includes</u> note at <u>T85.0</u> T82.0 due to:

- bile duct prosthesis
- gastric band
- oesophageal antireflux device.

*Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.* 

Excludes: erosion of mesh due to displacement, perforation or protrusion (T85.82) leaking gastrostomy tube (stoma) (K91.43)

T85.6

## Mechanical complication of internal prosthetic devices, implants and grafts, not elsewhere classified

Complications listed in *Includes* note at T85.0 due to internal devices, implants and grafts NEC.

<u>Use additional code (Chapter 1–18) to identify condition resulting from mechanical complication.</u>

<b>⊙</b> T85.61	Mechanical complication of internal respiratory devices, implants and grafts-Mechanical complication of respiratory prosthetic devices, implants and grafts  Conditions listed in T82.0 due to respiratory prosthetic devices, implants and grafts
<b>≎</b> T85.62	Mechanical complication of internal auditory devices, implants and grafts-Mechanical complication of auditory prosthetic devices, implants and grafts  Conditions listed in T82.0 due to auditory prosthetic devices, implants and grafts
<b>⊙</b> T85.63	Mechanical complication of intraperitoneal dialysis catheter  Conditions listed in T82.0 due to intraperitoneal dialysis catheter
<b>©</b> T85.64	Mechanical complication of epidural and subdural infusion catheter Conditions listed in T82.0 due to epidural and subdural infusion catheter
<b>©</b> T85.65	Mechanical complication of surgical material and sutures  Conditions listed in T82.0 due to surgical material and sutures
<b>©</b> T85.69	Mechanical complication of internal prosthetic devices, implants and grafts, not elsewhere classified Conditions listed in T82.0 due to internal prosthetic devices, implants and grafts, not elsewhere classified
<b>T85.7 ▼</b> 0110	Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts
	Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.
	Use additional code to identify specific type of infection.
<b>©</b> T85.71	Infection and inflammatory reaction due to peritoneal dialysis catheter  Peritoneal dialysis-associated peritonitis
	Use additional code (K65.29) to identify secondary peritonitis.
<b>©</b> T85.72	Infection and inflammatory reaction due to internal nervous system devices, implants and grafts Infection and inflammatory reaction due to nervous system prosthetic devices, implants and grafts
<b>©</b> T85.73	Infection and inflammatory reaction due to internal gastrointestinal devices, implants and grafts Infection and inflammatory reaction due to gastrointestinal prosthetic devices, implants and grafts
<b>©</b> T85.74	Infection and inflammatory reaction due to internal respiratory devices, implants and grafts Infection and inflammatory reaction due to respiratory prosthetic devices, implants and grafts
<b>©</b> T85.75	Infection and inflammatory reaction due to internal breast devices, implants and grafts Infection and inflammatory reaction due to breast prostheses and implants
<b>©</b> T85.76	Infection and inflammatory reaction due to internal ocular devices, implants and grafts Infection and inflammatory reaction due to ocular prosthetic devices, implants and grafts
<b>©</b> T85.77	Infection and inflammatory reaction due to internal hearing devices, implants and grafts Infection and inflammation of:  • auditory brainstem implant • cochlear implant • middle ear implant
<b>©</b> T85.78	Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts
T85.8	Other complications of internal prosthetic devices, implants and grafts, not elsewhere classified
<b>©</b> T85.81	Other complications of internal nervous system devices, implants and grafts-Other complications following insertion of nervous system prosthetic devices, implants and grafts
	Use additional code (Chapter 1–18) to identify condition.
<b>©</b> T85.82	Other complications of internal gastrointestinal devices, implants and grafts-Other complications following insertion of gastrointestinal prosthetic devices, implants and grafts  Erosion of gastrointestinal mesh or other surgical prosthetic materials
	Use additional code (Chapter 1–18) to identify condition.
	Evaludas: Jacking gastrostomy tubo (K01.43)

**©**T85.83 Haemorrhage and haematoma due to insertion of other internal devices, implants and grafts Haemorrhage and haematoma following insertion of other prosthetic devices, implants and grafts **©**T85.84 Embolism and thrombosis due to insertion of other internal devices, implants and grafts-Embolism and thrombosis following insertion of other prosthetic devices, implants and grafts Use additional code (I26.-) to identify pulmonary embolism. Use additional code (180.-) to identify deep venous thrombosis. • deep venous thrombosis (I80.-) • pulmonary embolism (I26.-) Pain due to insertion of other internal devices, implants and grafts Pain following insertion of other **©**T85.85 prosthetic devices, implants and grafts Stenosis due to insertion of other internal devices, implants and grafts Stenosis following insertion of **©**T85.86 other prosthetic devices, implants and grafts **©**T85.88 Other complications of internal presthetic device, implant and graft, not elsewhere classified Capsular contracture of breast implant *Use additional code (Chapter 1–18) to identify condition.* T85.9 Unspecified complication of other internal device, implant and graft-Unspecified complication of internal prosthetic device, implant and graft Complication of internal prosthetic device, implant and graft NOS Assign this code only when specific details regarding the complication and intervention cannot be obtained. T86 Failure and rejection of transplanted [grafted] organs and tissues Failure and rejection and other complications of transplanted organs and tissues T86.0 Bone marrow transplant rejection Graft-versus-host reaction or disease following bone marrow transplantation Includes: stem cells from bone marrow Excludes: transplant failure and rejection of stem cells from blood (T86.5) T86.1 Kidney transplant failure and rejection **▼**1438 T86.2 Heart transplant failure and rejection Excludes: complication of failure and rejection of heart-lung transplant (T86.3) artificial heart device (T82.5-) • heart-lung transplant (T86.3) mechanical complication of artificial heart device (T82.55) T86.3 Heart-lung transplant failure and rejection T86.4 Liver transplant failure and rejection Stem cell transplant failure and rejection, not elsewhere classified Graft-versus-host reaction or disease NOS *Includes:* stem cells from blood (cord) (peripheral) Excludes: transplant failure and rejection of stem cells from bone marrow (T86.0) T86.8 Failure and rejection of other transplanted [grafted] organs and tissues-Failure and rejection and other complications of transplanted organs and tissues, not elsewhere classified **©**T86.81 Lung transplant failure and rejection ©T86.82 Pancreas or pancreatic islet cell transplant failure and rejection **©**T86.83 Intestinal transplant [graft] failure and rejection

**©**T86.84 Bone <u>transplant [graft]</u> failure and rejection

©T86.85 Corneal transplant [graft] failure and rejection

Use additional code to identify any condition associated with corneal graft rejection or failure.

Use additional code (H18.2) to identify corneal oedema NOS.

*Use additional code (Z96.1) to identify presence of intraocular lens.* 

✿T86.86 Skin graft and flap failure and rejection

Failure and rejection of transplanted skin (allograft) (autograft)

T86.88 Failure and rejection of other transplanted organs and tissues, not elsewhere classified

♣T86.89 Other complications of transplanted organs and tissues, not elsewhere classified

## OTHER COMPLICATIONS OF SURGICAL AND MEDICAL CARE, NOT ELSEWHERE CLASSIFIED (T87–T88)

#### Complications peculiar to reattachment and amputation

T87.0 Complications of reattached (part of) upper extremity

T87.1 Complications of reattached (part of) lower extremity

T87.2 Complications of other reattached body part

T87.3 Neuroma of amputation stump

T87.4 Infection of amputation stump

Amputation stump:

· abscess:

T87

- · stitch
- wound
- wound sepsis

Excludes: infection (cellulitis) due to ill-fitting external prosthetic limb (T88.8)

T87.5 Necrosis of amputation stump

#### T87.6 Other and unspecified complications of amputation stump

◆T87.60 Complication of amputation stump, unspecified

✿T87.61 Haemorrhage and haematoma of amputation stump

**©**T87.62 Disruption of amputation stump

Dehiscence of amputation stump Rupture of amputation stump

◆T87.69 Other complications of amputation stump

Amputation stump:

- contracture (flexion) (of next proximal joint)
- oedema
- pain

Use additional code (Chapter 1–18) to identify condition.

Excludes: phantom limb syndrome/pain (G54.6–G54.7)

#### T88

#### Other complications of surgical and medical care, not elsewhere classified

Use additional code (U07.7-) to identify coronavirus disease 2019 [COVID-19] vaccine causing adverse effect in therapeutic use.

Excludes: accidental puncture or laceration during a procedure — see Alphabetic Index: Complication(s)/accidental puncture or laceration during procedure

adverse effect of drugs and medicaments NEC - see Alphabetic Index

complication of:

- infusion, transfusion and therapeutic injection (T80.-)
- internal devices, implants and grafts (T82-T85)
- procedure NEC (T81.-)
- serum (T80.5-T80.6)

dermatitis due to drugs and medicaments except serum (L23.3, L24.4, L25.1, L27.0-L27.1)

poisoning and toxic effects of drugs and chemicals (T36–T65)

- infusion, transfusion and therapeutic injection (T80.-)
- procedure NEC (T81.-)

specified complications classified elsewhere, such as:

- complications of devices, implants and grafts (T82 T85)
- dermatitis due to drugs and medicaments (L23.3, L24.4, L25.1, L27.0 L27.1)
- poisoning and toxic effects of drugs and chemicals (T36-T65)

### T88.0

#### Infection due tofollowing immunisation

**▼**0110

Use additional code (Chapter 1) to identify sepsis — see Alphabetic Index: Sepsis/by type.

*Use additional code to identify specific type of infection.* 

#### T88.1

Other complications due to following immunisation, not elsewhere classified

Complication NEC due to vaccination NOS

Eczema due to adverse effects of vaccine

Rash due to adverse effects of vaccine

Urticaria due to adverse effects of vaccine

Excludes: anaphylaxis and anaphylactic shock due to serum (T80.5)

other serum reactions (T80.6)

postimmunisation:

- arthropathy (M02.2-)
- encephalitis (G04.0)

vaccine induced thrombosis with thrombocytopenia syndrome [VITTS] (D69.5)

#### T88.2

#### Shock due to anaesthesia

correct substance was properly administered

Note:

Classification of anaesthesia related complications may be one of the following:

• an adverse effect of the drug(s) administered, or

• due to other (physical) or unknown aspects of the intervention.

Excludes: complications of anaesthesia from overdose or wrong substance given (T36–T50)

postprocedural shock NOS (T81.1)

#### T88.3

#### Malignant hyperthermia due to anaesthesia

Classification of anaesthesia related complications may be one of the following:

• an adverse effect of the drug(s) administered, or

• due to other (physical) or unknown aspects of the intervention.

#### T88.5

#### Complications of anaesthesia, not elsewhere classified

Anaesthesia related complications may be one of the following:

- an adverse effect of the drug(s) administered, or
- due to other (physical) or unknown aspects of the intervention.

#### **©**T88.51

#### Hypothermia due tofollowing anaesthesia

◆T88.52 Headache due to anaesthesia

Headache due to spinal anaesthesia

Excludes: spinal [lumbar] puncture headache (G97.11) headache following spinal and lumbar puncture (G97.11)

◆T88.53 Failed anaesthesia

Awareness during anaesthesia

©T88.54 Hypotension due to anaesthesia, not elsewhere classified

Excludes: hypotension due to a specified anaesthetic drug (I95.2)

©T88.59 Complications of anaesthesia, not elsewhere classified

T88.6 Anaphylaxis and anaphylactic shock due to adverse effect of correct drug or medicament properly

administered

**▼**2115

Anaphylaxis and anaphylactic shock due to vaccination

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

Excludes: anaphylaxis and anaphylactic shock due to serum reaction (T80.5)

T88.7 Unspecified adverse effect of drug or medicament

Drug:

• allergic reaction NOS

- hypersensitivity NOS
- idiosyncratic reaction NOS
- reaction NOS

**Note**: Assign this code only when specific details regarding the adverse effect are unavailable.

Excludes: specified adverse effects of drugs and medicaments — see Alphabetic Index

T88.8 Other specified complications of surgical and medical care, not elsewhere classified

*Use additional code (Chapter 1–18) to identify condition.* 

T88.9 Complication of surgical and medical care, unspecified

**▼**0049

Excludes: adverse effect NOS (T78.9)

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#### **CHAPTER 20**

## EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, V00–Y98)

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#### This chapter contains the following blocks:

#### U50-U73 Activity

U50–U72 While engaged in sports or leisure U73 While engaged in other activity

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Y40–Y84 Complications of surgical and medical and surgical care

Y40–Y59 Drugs, medicaments and biological substances causing adverse effects in therapeutic use

Y60-Y69 Unintentional events during surgical and medical care

Y70–Y82 Medical devices associated with unintentional events in diagnostic and therapeutic use Y83–Y84 Surgical and other medical procedures as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure

٠.

## COMPLICATIONS OF <u>SURGICAL AND MEDICAL AND SURGICAL</u> CARE (Y40–Y84)

**▼1904** 

Includes: complications of medical devices

correct drug properly administered in therapeutic or prophylactic dosage as the cause of any adverse effect surgical and medical procedures as the cause of abnormal reaction, or of later complication, without mention of

unintentional events at the time of the procedure unintentional events during surgical and medical care

Excludes: accidental overdose of drug or wrong drug given or taken in error (X40-X44)

. . .

#### UNINTENTIONAL EVENTS 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 (including those associated with medical devices) as the cause of abnormal reaction,

without mention of unintentional events at the time of the procedure (Y83–Y84)

. . .

Y65	Other unintentional events during surgical and medical care
Y65.0	Mismatched blood used in transfusion
Y65.1	Wrong fluid used in infusion
Y65.2	Failure in suture or ligature during surgical operation
Y65.3	Endotracheal tube wrongly placed during anaesthetic procedure
Y65.4	Failure to introduce or to remove other tube or instrument
Y65.5	Performance of inappropriate operation
Y65.8	Other specified unintentional events during surgical and medical care
<b>⊙</b> Y65.81	During cardiopulmonary resuscitation
<b>⊙</b> Y65.89	Other specified unintentional events during surgical and medical care

## MEDICAL DEVICES ASSOCIATED WITH UNINTENTIONAL EVENTS 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)

unintentional events during surgical and medical care, classifiable to Y60-Y69

. .

# SURGICAL AND OTHER MEDICAL PROCEDURES AS THE CAUSE OF ABNORMAL REACTION, OR OF LATER COMPLICATION, WITHOUT MENTION OF UNINTENTIONAL EVENTS 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)

medical devices associated with:

- adverse incidents due to external causes classified elsewhere (V00-Y59, Y85-Y87, Y89)
- breakdown or malfunctioning (unintentional event) (Y70–Y82)

unintentional events during surgical and medical care classifiable to Y60-Y69

. . .

Y83

Surgical operation and other surgical procedures as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure

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Y83.1 Surgical operation with implant of artificial internal device

Includes: catheter based minimally invasive therapeutic procedure with implant of internal device

<u>**©**Y83.11</u> Surgical operation with implant of cardiovascular internal device

Insertion of infusion port (Port-A-Cath)

Surgical operation with implant of otorhinolaryngological internal device

Output

Description:

Output

D

<u>Implantation of cochlear prosthetic device</u> <u>Maxillo-facial surgery with internal fixation</u>

**Note:** Otorhinolaryngological — relating to medical specialty for ear, nose and throat and related parts of the head

and neck.

Surgical operation with implant of gastrointestinal or genitourinary internal device

Implantation of brachytherapy applicator for prostate

Insertion of ureteric stent

**Excludes:** surgical operation with insertion of obstetric or gynaecological device (Y83.15)

©Y83.14 Surgical operation with implant of neurological internal device

Insertion, revision, removal of ventricular shunt

<u>©Y83.15</u> <u>Surgical operation with implant of obstetric or gynaecological internal device</u>

<u>**©**Y83.16</u> Surgical operation with implant of ophthalmic internal device

Insertion, revision, removal of intraocular lens

©Y83.17 Surgical operation with implant of orthopaedic internal device

Joint replacement

Vertebral column fusion with internal fixation

**②**Y83.18 Surgical operation with implant of plastic surgery internal device

<u>Insertion of breast implant [augmentation]</u>

Y83.2 Surgical operation with anastomosis, bypass or graft

**Includes:** artificial or natural tissues

catheter based interventional procedure

microvascular tissue grafts tissue transplant NEC

Excludes: surgical operation with transplant of organ (Y83.0-)

Y83.21 Surgical operation with cardiovascular anastomosis, bypass or graft

Repair of aorta with anastomosis

Y83.22 Surgical operation with otorhinolaryngological anastomosis, bypass or graft

**Note:** Otorhinolaryngological — relating to medical specialty for ear, nose and throat and related parts of the head

and neck.

<u><b>○</b>Y83.23</u>	Surgical operation with gastrointestinal anastomosis, bypass or graft
<b>⊙</b> Y83.24	Surgical operation with genitourinary anastomosis, bypass or graft
<b>⊙</b> Y83.25	Surgical operation with neurological anastomosis, bypass or graft
<b>⊙</b> Y83.26	Surgical operation with gynaecological anastomosis, bypass or graft
<b>⊙</b> Y83.27	Surgical operation with ophthalmic anastomosis, bypass or graft
<b>⊙</b> Y83.28	Surgical operation with orthopaedic anastomosis, bypass or graft Repair of muscle with graft Vertebral column fusion without internal fixation
<b>⊙</b> Y83.29	Surgical operation with anastomosis, bypass or graft, not elsewhere classified Mammoplasty with flap Respiratory anastomosis, bypass and graft
Y83.3	Surgical operation with formation of external stoma
	Includes: with anastomosis, bypass or graft
<b>©</b> Y83.31	Tracheostomy
•Y83.32	Gastrostomy
•Y83.33	Enterostomy Ileostomy Jejunostomy
Y83.4	Other reconstructive surgery
	Includes: reconstructive surgery without graft or flap tissue remodelling
	Excludes: complication of procedure using:  • anastomosis, bypass or graft (Y83.2-)  • device (Y83.1-)
Y83.5	Amputation of limb(s)
<del>Y83.6</del>	Removal of other organ (partial)(total)
<b>OY83.7</b>	Other surgical operations on body systems
	Includes: open:  • biopsy • tissue sampling or repair surgical evacuation of fluid collection
<b>⊙</b> Y83.71	Surgical operation on nervous system
<b>⊙</b> Y83.72	Surgical operation on endocrine system
<b>⊙</b> Y83.73	Surgical operation on respiratory system
<b>⊙</b> Y83.74	Surgical operation on cardiovascular system
<b>⊙</b> Y83.75	Surgical operation on digestive system
<b>⊙</b> Y83.76	Surgical operation on urinary system
<b>⊙</b> Y83.77	Surgical operation on male genital system
<b>⊙</b> Y83.78	Surgical operation on musculoskeletal system

Y83.8	Other surgical procedures, not elsewhere classified
	Includes: open:  • biopsy • tissue sampling or repair surgical evacuation of fluid collection
	Excludes: amputation of limb(s) (Y83.5)
<b>⊙</b> Y83.81	Surgical procedure on eye and adnexa
<b>⊙</b> Y83.82	Surgical procedure on ear and mastoid process
<b>⊙</b> Y83.83	Surgical procedure on nose, mouth and pharynx
<b>⊙</b> Y83.84	Surgical procedure, dental
<b>⊙</b> Y83.85	Surgical procedure on blood and blood-forming organs
<b>⊙</b> Y83.86	Surgical procedure, gynaecological
<b>⊙</b> Y83.87	Surgical procedure, obstetric
<b>⊙</b> Y83.88	Surgical procedure on breast
<b>⊙</b> Y83.89	Other surgical procedure Skin or integument procedure
Y83.9	Surgical procedure, unspecified
Y84	Other medical procedures as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure
	Includes: biopsy (closed)  diagnostic [investigative] procedures injection nonsurgical procedures tissue sampling (closed)  Excludes: complications of procedures with:
	anastomosis, bypass or graft (Y83.2-)     implant of internal device (Y83.1-)     surgical component NOS (Y83)
Y84.0	Medical procedures on cardiovascular system Cardiac catheterisation
<b>⊙</b> Y84.01	Cardiac catheterisation and coronary angiography
<b>⊙</b> Y84.09	Medical procedure on cardiovascular system, not elsewhere classified  Catheter based cardiac and vascular intervention without implant of device
Y84.1	Kidney dialysis
Y84.2	Radiological procedure and radiotherapy
Y84.3	Medical procedures on nervous system Shock therapy
<b>⊙</b> Y84.31	Shock therapy
<b>⊙</b> Y84.39	Medical procedure on nervous system, not elsewhere classified
Y84.4	Aspiration and drainage of body cavity or ef-fluid collection  Drainage of fluid collection (catheter)  Joint aspiration  Paracentesis  Thoracentesis

Excludes: surgical evacuation of fluid collection (Y83.8-)

Y84.5	<u>Medical procedures on digestive system</u> <u>Insertion of gastric or duodenal sound</u>
<b>⊙</b> Y84.51	Insertion of gastric and duodenal sound
<b>⊙</b> Y84.59	Medical procedure on digestive system, not elsewhere classified
Y84.6	Medical procedures on genitourinary system Urinary catheterisation
<b>⊙</b> Y84.61	Urinary catheterisation
<b>⊙</b> Y84.69	Medical procedure on genitourinary system, not elsewhere classified
Y84.7	Medical procedures on blood and blood-forming organs Blood-sampling
<b>⊙</b> Y84.71	Blood specimen sampling [collection]
	Includes: sampling [collection]:  • arterial
	• fingerstick • venepuncture
<b>⊙</b> Y84.79	Medical procedure on blood and blood-forming organs, not elsewhere classified
Y84.8	Other medical procedures, not elsewhere classified
10110	Hyperbaric oxygen therapy
<b>⊙</b> Y84.81	Medical procedure on endocrine system, not elsewhere classified
<b>⊙</b> Y84.82	Medical procedure on eye and adnexa, not elsewhere classified
<u>•Y84.83</u>	Medical procedure on ear and mastoid process, not elsewhere classified
<u><b>©</b>Y84.84</u>	Medical procedure on nose, mouth [dental] and pharynx, not elsewhere classified
<b>⊙</b> Y84.85	Medical procedure for respiratory system, not elsewhere classified
<b>⊙</b> Y84.86	Medical procedure on breast and gynaecological system, not elsewhere classified
<b>⊙</b> Y84.87	Medical procedure for obstetrics, not elsewhere classified
<u>•Y84.88</u>	Medical procedure on musculoskeletal system, not elsewhere classified
<b>⊙</b> Y84.89	Other medical procedure
700	Processors of other formational involved
Z96 ▼0050	Presence of other functional implants
	Excludes: complications of internal-prosthetic devices, implants and grafts (T82–T85)
	fitting and adjustment of prosthetic and other devices (Z44–Z46)
Z97	Presence of other devices
▼0050	Excludes: complications of internal-prosthetic devices, implants and grafts (T82–T85)
	fitting and adjustment of prosthetic and other devices (Z44–Z46) presence of cerebrospinal fluid drainage device (Z98.2)
	presence of cereorospinal ridia dramage device (270.2)
Z98	Other postprocedural states
▼0050	Excludes: complication of surgical and medical care — see Alphabetic Index
	follow-up medical care and convalescence (Z42–Z51, Z54)

Z98.0 Intestinal bypass and anastomosis status

...

Z98.8 Other specified postprocedural states

### **ICD-10-AM Alphabetic Index**

### **SECTION I**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

Α Abscess (embolic) (infective) (metastatic) (multiple) (pyogenic) (septic) L02.9 - postprocedural NEC (any site) (see also Complication(s)/infection) T81.4 Absence, absent (complete or partial) (organ or part) - endocrine gland (congenital) NEC Q89.29 - - acquired NEC (see also Complication(s)/by site and type) T81.89 E89.9 Adhesions, adhesive (postinfective) - peritoneum, peritoneal (male) K66.0 - - female pelvic (postpartal) (to uterus) N73.6 - - - affecting - - - - labour or delivery O65.5 - - - - pregnancy O34.8 postprocedural N99.4 - peritubal (see also Adhesions/peritoneum/female pelvic) N73.6 - postprocedural — see Complication(s)/postprocedural/adhesions due to foreign body accidentally left in wound T81.5 peritoneal NEC K91.89 --- pelvic N99.4 vagina N99.2 - preputial, prepuce Air - embolism (any site) (artery) (cerebral) (traumatic) T79.0 - - due to implanted device NEC — see Complication(s)/embolism/device, implant or graftby site and type/specified NEC Anoxia R09.0 - altitude T70.2 - cerebral G93.1 - - during or resulting from a procedure NEC (see also Complication(s)/by site and type) T81.85 G97.8 Atrophy, atrophic - uterus, uterine (acquired) (senile) N85.8 - - cervix N88.8 - - due to radiation (adverse effect) (intended effect) N85.8

#### В

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--- coronary (bypass) T82.2

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   catheter NEC T85.69
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    vascular infusion T82.52
      central vascular (infusion port) (PICC) (Port-A-Cath) T82.51
      peripheral vascular T82.52
   corneal T85.3
  electronic (electrode(s)) (pulse generator) (stimulator)
    bone T84.3
    cardiac (defibrillator) (pacemaker) T82.1
    nervous system (brain) (peripheral nerve) (spinal) T85.1
   - urinary T83.1
  fixation, internal (orthopaedic) NEC T84.2
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                         ceptive device T83.3
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- retained, postcholecystectomy K91.7
- specified NEC K80.8-
Complication(s) (due to surgical or medical care) (from) (of)
Note: The list of terms below relate to complications of surgical or medical care (intervention complications). For complications of
       disease or health condition, assign a code for the condition — see condition, or Obstetric/complication or lead terms
       Disease or Disorder.
- abortion — see Abortion/complicated (subsequent episode) (see also Abortion/complicated) NEC 008.9
- access site for percutaneous cardiovascular procedure, haemorrhage or haematoma 197.84
- accidental puncture or laceration during procedure NEC T81.2
- - digestive system organ or structure NEC K91.69
- - - stomach K91.62
- - dura (dural tear) (durotomy) G97.31
- - ear and mastoid process H95.2
- - eye and adnexa NEC H59.19
- - - conjunctiva H59.12
- - - cornea H59.11
- - - lens capsule (dropped nucleus) H59.13
- - - macula H59.16
- - - retina H59.14
- - - vitreous H59.15
- - nervous system organ or structure NEC G97.39
- - - cranial nerve G97.35
- - - dura (durotomy) G97.31
- - - nerve root and plexus G97.33
- - - peripheral nerve (phrenic) G97.34
- - - spinal cord G97.32
- acute reaction to foreign substance accidentally left during a procedure T81.6
- adrenocortical(-medullary) hypofunction E89.6
- amputation stump (late) (surgical) NEC T87.60
- anaesthesia, anaesthetic NEC T88.59
- - awareness (during) T88.53
  <del>due to</del>
    correct substance properly administered T88.59
   - overdose or wrong substance given T41.-
    - specified anaesthetic - see Table of drugs and chemicals
- - failed T88.53
- - headache T88.52
- - hyperthermia, malignant T88.3
- - hypotension NEC T88.54
- - - specified drug 195.2
- - hypothermia NEC T88.51
- - inhalation stomach contents due to anaesthesia or other sedation T88.59
- - - Mendelson's (syndrome) J95.4
- - intubation (endotracheal)
- - - difficult T88.42
- - - failed T88.41
- - malignant hyperthermia T88.3
- - Mendelson's (syndrome) J95.4
- - shock T88.2
- anastomosis (and bypass) NEC (see also Complication(s)/by type) T85.9
- - digestive tract NEC T81.87K91.89
- - - haemorrhage (bleeding) K91.81
- - - involving urinary tract — see Complication(s)/anastomosis/urinary tract
- - - leak K91.83
- - - stricture (stenosis) K91.82
- - genitourinary (involving intestinal tract) NEC T81.88N99.89
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- - - haemorrhage (bleeding) N99.81

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- - - leak N99.83
- - - stricture (stenosis) N99.82
- - intestinal (internal) — see Complication(s)/anastomosis/digestive tract
- - urinary tract (involving intestinal tract) NEC T81.88N99.89
- - - haemorrhage (bleeding) N99.81
- arteriovenous fistula or shunt, surgically created (for dialysis) T82.89T82.9
- - aneurysm T82.86
- - embolism T82.82
- - fibrosis T82.89
- - haemorrhage T82.81
- - infection or inflammation T82.76
- - mechanical T82.53
- - pain T82.83
- - specified NEC T82.89
- - stricture (stenosis) T82.84
- - thrombosis T82.82

    arthroplasty — see Complication(s)/orthopaedic/device, implant or graft/joint T84.9

   infection or inflammation T84.5
  mechanical T84.0
-- specified NEC T84.89
- artificial
- bladder device (auxiliary) T83.9
- - infection or inflammation T83.5
- - mechanical T83.1
- - specified NEC T83.89
- bleb, inflamed (infected) H59.82
- blebitis H59.82
- bone
- - graft — see Complication(s)/orthopaedic/device, implant or graft/bone graft T84.9
    failure and rejection T86.84
    infection or inflammation T84.7
    mechanical T84.3
    specified NEC T84.89
- - growth stimulator (electrode) — see Complication(s)/electronic stimulator device/bone T84.9
    infection or inflammation T84.7
     mechanical T84.3
    specified NEC T84.89
- brain neurostimulator (electrode) — see Complication(s)/nervous system/device, implant or graft/neurostimulator
- breakdown, mechanical — see Complication(s)/mechanical, of device, implant or graft
- breast implant (prosthetic) T85.9
- caesarean section wound (puerperal) — see Caesarean section/wound/complication NEC O90.8
   dehiscence 090.0
    - due to obstetric trauma

    before onset of labour (in pregnancy) O71.0-

     - during labour O71.1-
   disruption 090.0
    due to obstetric trauma
     - before onset of labour (in pregnancy) O71.0
   - - during labour O71.1-
  haematoma 090.2
  infection O86.0
- cardiac ___see also Complication(s)/by site and type) 151.9
- - defibrillator, automatic implantable — see Complication(s)/cardiac/device, implant and graft/defibrillator, automatic implantable
- - device, implant or graft T82.9
- - - aneurysm T82.86
- - - vena cava device (filter) (sieve) (umbrella) T82.9
- - - - infection or inflammation T82.79
- - - - mechanical T82.56
- - - specified NEC T82.89
- - due to intervention NEC (see also Complication(s)/by site and type) T81.7
- - erosion of pacemaker or defibrillator pocket site T82.89
   intraoperative or postpr
    specified NEC 197.89
- - pacemaker syndrome 197.82
- carotid artery (bypass) graft — see Complication(s)/graft/arterial
- catheter (device) NEC T85.9
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- - dialysis — see Complication(s)/dialysis/catheter
- - spinal — see Complication(s)/spinal/catheter
- - urethral, indwelling — see Complication(s)/urethral catheter (indwelling) - - urinary (indwelling) — see Complication(s)/urethral catheter (indwelling)
- - vascular infusion — see Complication(s)/vascular/device, implant or graft/infusion_catheter
- cerebrospinal fluid leak G97.0
- - accidental puncture or laceration of dura (dural tear) (durotomy) G97.31
- chin implant (prosthetic) T85.9
- - infection or inflammation T85.78
- - mechanical T85.69
- - specified NEC T85.88
- cholecystostomy (stoma) (tube) NEC K91.49
- - haemorrhage (bleeding) K91.41
- - infection K91.42
- - leak (exit site) NEC K91.43
- - obstruction (mechanical) K91.49
- - stenosis K91.49

    chorioretinal scars H59.84

- circulatory, due to intervention NEC (see also Complication(s)/by site and type) T81.7-199

    - intraoperative or postprod

    - specified NEC 197.89
- colostomy (stoma) NEC K91.49
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- counterpulsation device (balloon), intra-aortic intra-aortic — see Complication(s)/vascular/device, implant and
  graft/counterpulsation device (balloon)
- cystoid macula oedema H59.81
- cystostomy (catheter) (stoma) (tube) NEC N99.59
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 implantable
                 (see also condition) O75.9
  delivery NEC
       cified NEC 075.8
- dehiscence (operation wound) NEC T81.3
- dialysis (kidney) (see also Complication(s)/arteriovenous fistula or shunt, surgically created) T80.9
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- - - infection or inflammation T82.77
- - - mechanical T82.4
- - - peritoneal, intraperitoneal T85.9
- - - - with peritonitis (acute) T85.71
- - - infection or inflammation T85.71
- - - - mechanical T85.63
- - - - specified NEC T85.88
- - dysequilibrium syndrome T81.85
- haemodialysis-associated steal syndrome 197.81- specified NEC T80.8
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- - - due to accidental puncture and laceration K91.64
- - - - with calculi (stones) spilling from the biliary tract K91.64
- - calculi (gallstones), retained K91.7
- - device, implant or graft (gastric band) (oesophageal antireflux device) NEC T85.82
- - due to
- - - accidental puncture and laceration K91.64
- - - intervention NEC T81.87
  - retained cholelithiasis (postcholecystectomy) K91.7
   intraoperative and postprocedural K91.9
    bile leak NEC K91.84
      due to accidental puncture and laceration K91.64
    calculi (stones) spilling from the biliary tract K91.89
   - specified NEC K91.89
- displaced, displacement of device, implant or graft — see Complication(s)/mechanical, of device, implant or graft
- ear <u></u> fsee also Complication(s)/by site and type) H93.9
- - device, implant or graft (auditory brainstem implant) (cochlear) (middle ear) NEC T85.88
- - postprocedural NEC (see also Complication(s)/by site and type) T81.89
- - - following mastoidectomy NEC H95.19
- - - - granulation H95.12
- - - - inflammation (chronic) H95.11
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    following mastoidectomy NEC H95.19
    - granulation H95.12
    - inflammation (chronic) H95.11
     mucosal cyst H95.13
    specified NEC H95.8
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- - specified NEC T81.89
- electronic stimulator device (electrode(s)) (pulse generator)
- - nervous system (brain) (peripheral nerve) (spinal cord) T85.9
- - - infection or inflammation T85.72
- - - mechanical T85.1
- - - specified NEC T85.81
- electroshock therapy T88.9
  - specified NEC T88.8
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    embolism NEC T81.7

- - air, post intervention NEC T81.7
- - - infusion, transfusion or therapeutic injection T80.0
- - device, implant or graft NEC (see also Complication(s)/by site and type) T85.84
- - - arterial graft (bypass) (coronary) NEC T82.82
- - - arteriovenous fistula or shunt, surgically created T82.82
- - - breast T85.84
- - - cardiac (valve) T82.82
- - - catheter NEC T85.84
---- dialysis (kidney) T82.82
- - - - intraperitoneal T85.84
- - - - spinal (epidural) (subdural) T85.84
- - - - urinary (indwelling) T83.82
- - - - vascular infusion (central) (peripheral) T82.82
- - - electronic (electrode(s)) (pulse generator) (stimulator)
- - - - bone T84.82
- - - - cardiac T82.82
- - - - nervous system (brain) (peripheral nerve) (spinal) T85.84
- - - - urinary T83.82

    - - - fixation, internal (bone) NEC T84.82

- - - gastrointestinal (bile duct) (oesophagus) T85.84
- - - genital NEC T83.82
- - - heart (valve) T82.82
- - - joint prosthesis T84.82
- - - ocular (corneal) (orbital) T85.84
- - - orthopaedic (bone) NEC T84.82

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- - infection K91.42
- - leak K91.43
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- - - genitourinary T83.85
- external orthopaedic device or appliance T88.8
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- - device, implant or graft T85.9
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- - - haemorrhage (bleeding) T85.83
- - - infection or inflammation T85.76
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- - - occlusion T85.84
- - - pain T85.85
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- - - thrombosis T85.84
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- - - blebitis H59.82
- - - chorioretinal scars H59.84
- - - dropped lens, (nucleus) H59.13
- - - endophthalmitis H59.83
- - - hyphaema H59.85
- - - macula oedema (cystoid) H59.81
   intraoperative or postprocedural H59.9
   - blebitis H59.82
   - chorioretinal scars H59.84
    endophthalmitis H59.83
    hyphaema H59.85
  - macula oedema (cystoid) H59.81
    specified NEC H59.89
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- - - causing menorrhagia T83.81
- - - erosion (mesh) (surgical materials) T83.85
- - - infection or inflammation T83.62
- - - mechanical T83.42
- - - - intrauterine contraceptive device T83.3
- - - specified NEC T83.89
- - intervention NEC T81.88
- femoral artery (bypass) graft — see Complication(s)/graft/arterial
- fibrosis, fibrotic
- - device, implant or graft NEC (see also Complication(s)/by site and type/specified) T85.88
- - - arterial graft NEC T82.89
- - - - coronary artery (bypass) T82.89
- - - arteriovenous fistula or shunt, surgically created T82.89
- - - breast (implant) T85.88
- - - catheter NEC T85.88
- - - - dialysis (kidney) T82.89
- - - - intraperitoneal T85.88
- - - - spinal (epidural) (subdural) T85.88
- - - - urinary (indwelling) T83.89
- - - - vascular infusion (central) (peripheral) T85.88
- - - electronic (electrode(s)) (pulse generator) (stimulator)
- - - - bone T84.89
<u>- - - - cardiac T82.</u>89
- - - - nervous system (brain) (peripheral nerve) (spinal) T85.81
- - - - urinary T83.89
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- - - joint prosthesis T84.89
- - - ocular (corneal graft) (orbital implant) NEC T85.88
- - - orthopaedic NEC T84.89
- - - urinary NEC T83.89
- - - vascular NEC T82.89
 - - ventricular intracranial shunt T85.81
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- - arteriovenous surgically created (for dialysis) NEC
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- - infection or inflammation T84.6
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- - specified NEC T84.89

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     - cardiac wall I23.3
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- fusion, pseudarthrosis M96.0
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- - infection or inflammation T85.73
- - mechanical T85.5
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- gastrostomy (stoma) (tube) NEC K91.49
- - haemorrhage (bleeding) K91.41
- - infection K91.42
- - leak (exit site) NEC K91.43
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- - device, implant or graft T83.9
- - - embolism T83.82
- - - erosion (mesh) (surgical materials) T83.85
- - - female genital tract — see Complication(s)/female genital/device, implant or graft
- - - haemorrhage (bleeding) T83.81
- - - male genital tracttact -

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- - - stricture (stenosis) T83.84
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- - - - infection or inflammation (electronic stimulator device) (sphincter implant) (stent) T83.5
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- - device, implant or graft NEC (see also Complication(s)/by site and type) T85.83
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- - - - spinal (epidural) (subdural) T85.83
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- - - - vascular infusion (central) (peripheral) T82.81
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- - - - bone T84.81
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- - - - urinary T83.81
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- - - orthopaedic NEC T84.81
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- - transplant NEC __ see Complication(s)/organ or tissue transplant/by typeT86.89
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- - infection K91.42
- - leak K91.43
- - obstruction (mechanical) K91.49
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- - - arteriovenous fistula or shunt, surgically created T82.76
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- - - - dialysis (kidney) T82.77
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- - - - spinal (epidural) (infusion) (subdural) T85.72
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- - - - nervous system (brain) (peripheral nerve) (spinal) T85.72
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- - - due to puncture or laceration
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- - - meaning displacement T85.2
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- - mechanical T85.2
- - specified NEC T85.88
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- - failed T88.41 - see Failure, f
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- - haemorrhage (bleeding) K91.41
- - infection K91.42
- - leak K91.43
- - obstruction (mechanical) K91.49
- - stenosis K91.49
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- - transplant NEC — see also Complication(s)/organ or tissue transplant/by type-T86.89
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- - - - acute T86.1
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- labour NEC (see also condition) O75.9
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- - breast T85.4
- - catheter NEC T85.69
- - - dialysis (kidney) T82.4
- - - - intraperitoneal T85.63
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- - - urinary (indwelling) T83.0
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- - - central vascular (infusion port) (PICC) (Port-A-Cath) T82.51
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<u>- - - bone T84.3</u>
- - - cardiac (defibrillator) (pacemaker) T82.1
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- - - urinary T83.1
- - fixation, internal (bone) NEC T84.2
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- - - - intrauterine (contraceptive) device T83.3
- - - male NEC T83.41
- - heart NEC T82.59
- - - valve (prosthesis) T82.0
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- - joint prosthesis T84.0
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- - pacemaker, cardiac T82.1
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- - spinal catheter (epidural) (subdural) T85.64
- - urinary NEC T83.1
- - - catheter (indwelling) T83.0
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- - - graft or shunt NEC T82.3
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- - - - haemorrhage (bleeding) T85.83
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- - - - occlusion T85.84
- - - - pain T85.85
- - - - stricture (stenosis) T85.86
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   - specified NEC G97.8
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- nonabsorbable (permanent) sutures NEC T85.9
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    - - embolism T81.7

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  - - bone marrow T86.0
- - - corneal T86.85
- - - stem cell T86.5
- - - - from bone marrow T86.0
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- - - haemorrhage (bleeding) T84.81
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- - - - internal fixation device T84.6
- - - - joint prosthesis T84.5
- - - joint NEC T84.89
- - - fracture, bone M96.61 M96.6
- - - - infection or inflammation T84.5
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- - - - internal fixation device (any bone, except limb) T84.2
- - - - limb bone T84.1
- - - joint prosthesis T84.0
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- - - specified NEC T84.89
- - - stricture (stenosis) T84.84
- - - thrombosis T84.82
- - external device or appliance (components) T88.8
- - fracture, (following-post insertion of implant, joint prosthesis, bone plate) M96.61 M96.6
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- - device, implant or graft NEC (see also Complication(s)/by site/device, implant or graft/pain) T85.85
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- - - breast T85.85
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- - - - dialysis (kidney) T82.83
- - - - intraperitoneal T85.85
- - - - spinal infusion (epidural) (subdural) T85.85
- - - - urinary (indwelling) T83.83
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- - - nervous system (brain) (peripheral nerve) (spinal) T85.85
- - - - urinary T83.83
- - - fixation, internal (bone) NEC T84.83
- - - gastrointestinal (bile duct) (oesophagus) T85.85
- - - genital NEC T83.83
- - - heart NEC T82.83
- - - infusion NEC T85.85
- - - joint prosthesis T84.83
- - - ocular (corneal graft) (orbital implant) NEC T85.85
- - - orthopaedic NEC T84.83
- - - urinary NEC T83.83
- - - vascular NEC T82.83
 - - ventricular intracranial shunt T85.85
 - postprocedural NEC T81.83
- pancreas transplant-NEC — see Complication(s)/organ or tissue transplant/by type-T86.89
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- pancreatic islet cells transplant NEC T81.89 T86.89
 -- failure or rejection T86.82
- penile prosthesis (implant) T83.9
- - infection or inflammation T83.61
- - mechanical T83.41
- - specified NEC T83.89
- perforation from
- - accidental puncture (unintentional event) — see Complication(s)/accidental puncture or laceration during procedure/by site
- - device, implant or graft (in situ) — see Complication(s)/mechanical, of device, implant or graft/by site
- perfusion NEC T80.9
                       tetric (puerperal) NEC 090.8
   erineal wound, ob
   disruption 090.1
-- haematoma O90.2
- peripheral nerve device, implant or graft — see Complication(s)/nervous system/device, implant or graft/neurostimulator
- peritonitis with continuous ambulatory peritoneal dialysis (acute) (catheter) — see Complication(s)/postprocedural/peritoneal
 dialysis-associated peritonitis
- phlebitis (infective) (pyaemic) (septic)
<u>- - due to</u>
- - - infusion, therapeutic injection or transfusion T80.1
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- - - intervention NEC T81.7

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- - intravenous catheter (IVC) (peripheral) T82.75
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- - - specified device (implanted)
- peripheral (IV) line site T82.75
- phototherapy T88.8 T88.9
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- pneumonia, ventilation associated — see Complication(s)/postprocedural/ventilation-associated pneumonia
- pneumonitis, aspiration, due to anaesthesia J95.4
- post femoral cannulation lymphocele 197.83
- postcardiotomy syndrome 197.0
- postcholecystectomy syndrome K91.5
- postcommissurotomy syndrome 197.0
- postembolisation syndrome T81.89

    postgastrectomy dumping syndrome K91.1

- posthysterectomy vaginal vault prolapse N99.3

    postlaminectomy syndrome NEC M96.1

- - kyphosis M96.3
- postmastoidectomy NEC H95.19
- - granulation H95.12
- - inflammation (chronic) H95.11
- - mucosal cyst H95.13
- - recurrent cholesteatoma H95.0
- postoperative — see Complication(s)/postprocedural

    postprocedural T81.9

Note: Subterms listed under Complication(s)/postprocedural are considered an obvious result of a specific or broader group of
       clinical interventions where the causal (cause and effect) relationship can be assumed.
       Do not follow the subterm postprocedural where a different cause for the condition is documented in the health care
- - abscess (stitch) (wound) NEC T81.4
- - - amputation stump (late) (stitch) (surgical) (wound) T87.4
- - accidental puncture or laceration NEC (see also Complication(s)/accidental puncture or laceration during procedure) T81.2
- - adhesions (from) (of)
 - - foreign body accidently left in body cavity or operation wound T81.5
- - - peritoneal NEC K91.85 K91.89
- - - - pelvic N99.4
- - - vagina N99.2
- - adrenocortical(-medullary) hypofunction E89.6
- - amputation stump (late) NEC T87.60
- - - breakdown T87.62
- - - contracture T87.69
- - - dehiscence T87.62
- - - disruption T87.62
- - - haemorrhage or haematoma T87.61
- - - infection or inflammation T87.4
- - - necrosis T87.5
- - - neuroma T87.3
- - - oedema T87.69
- - - pain T87.69
- - - specified T87.69
- - anoxic brain damage — see Complication(s)/nervous system-G97.8
- - bile leak NEC K91.84
 - - due to accidental tear, perforation or rupture of gallbladder K91.64
- - - - with calculi (stones) spilling from the biliary tract K91.64
- - breakdown (of wound) - see Complication(s)/postprocedural/dehiscence NEC T81.3
                          <del>ite) (surg</del>
- - burst stitches or sutures — see Complication(s)/postprocedural/dehiscence

    - - calculi (gallstones), retained K91.7

- - capsular contracture of breast implant T85.88
- - cerebrospinal fluid leak G97.0
- - cholesteatoma, recurrent, postmastoidectomy (postmastoidectomy) H95.0

    - - chorioretinal scars H59.84

- - chylothorax 197.83
- - clot retention post transurethral resection of prostate T81.88
- - collapse T81.1
- - contracture, amputation stump T87.69
- - cystoid macula oedema H59.81
- - dehiscence (of wound) NEC T81.3
- - - amputation stump (late) (surgical) T87.62
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- - dialysis dysequilibrium syndrome T81.85
- - disruption of wound <u>— see Complication(s)/postprocedural/dehiscence</u> T81.3
       amputation stump (late) (surgical) T87.62
      -caesarean section --- see Complication(s)/caesarean section wound/disruption
       episiotomy 090.1
- - dumping syndrome (postgastrectomy) (postgastric surgery) K91.1
- - elephantiasis or lymphoedema <a href="197.83">197.83</a><a href="197.83
- - - postmastectomy I97.2
- - emphysema (subcutaneous) (surgical) T81.84
- - endophthalmitis H59.83
- - fistula (chest wall) (intestine) (intestinocolonic) (persistent) (rectovaginal) (respiratory) (urinary) NEC T81.82
- - - tracheo-oesophageal (following tracheostomy) J95.04
- - foreign body inadvertently left in wound (sponge) (suture) (swab) T81.5
- - fracture, post insertion of implant, joint prosthesis, bone plate M96.61
- - haemodialysis-associated steal syndrome I97.81
- - haemorrhage or haematoma (post tonsillectomy) NEC T81.0
- - - access site from percutaneous cardiovascular procedure 197.84
- - - amputation stump (late) (surgical) T87.61
- - - at site of
---- anastomosis — see Complication(s)/haemorrhage or haematoma/anastomosis site
---- device — see Complication(s)/haemorrhage or haematoma/device, implant or graft
---- stoma — see Complication(s)/by type/haemorrhage
- - haemothorax J95.85
- - - due to accidental puncture or laceration of lung J95.64
- - headache, lumbar puncture (post spinal) (reaction) G97.11
- - hyperbaric oxygen therapy T70.-
- - hyperglycaemia (postpancreatectomy) E89.1
- - hyphaema H59.8
- - hypoinsulinaemia (postpancreatectomy) E89.1
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- - hypopituitarism (posthypophysectomy) E89.3
- - hypothyroidism (postirradiation) (post-thyroidectomy) E89.0
- - impotence T81.88
- - infection, surgical (wound) NEC (see also Complication(s)/infection) T81.4
- - - at site of device, implant or graft — see Complication(s)/infection/device, implant or graft
- - inhalation therapy T81.81
- - intracranial hypotension following ventricular shunting (ventriculostomy) G97.2
- - keratopathy (bullous aphakic) H59.0
- - leak, leakage, cerebrospinal fluid (following spinal (lumbar) puncture) G97.0
- - - accidental puncture or laceration of dura (dural tear) (durotomy) G97.31
- - Iordosis M96.4
- - lymphocele (post femoral cannulation) 197.83
- - lymphoedema 197.83

    - - - postmastectomy (syndrome) 197.2

- - macula oedema (cystoid) H59.81
- - malabsorption (postsurgical) NEC K91.2
- - - osteoporosis M81.3-
- - mastoidectomy cavity NEC H95.19
- - - granulation H95.12
- - - inflammation (chronic) H95.11
- - - mucosal cyst H95.13
- - - recurrent cholesteatoma H95.0
- - neuropraxia NEC T81.85
- - osteolysis (postsurgical) M96.62
- - ovarian failure E89.4
- - pacemaker syndrome l97.82
- - pain NEC T81.83
- - - amputation stump T87.69
- - - at site of device, implant or graft — see Complication(s)/pain(s)/device, implant or graft
- - peritoneal
- - - abscess T81.4
- - - dialysis-associated peritonitis (acute) (catheter) T85.71
- - Petersen's defect T81.87
- - phlebitis, peripheral (IV) line site T82.75
- - pneumothorax J95.84
- - - due to accidental puncture or laceration J95.64
- - postcardiotomy syndrome 197.0
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- postcholecystectomy syndrome K91.5- postcommissurotomy syndrome I97.0

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    postgastrectomy dumping syndrome K91.1

- - postlaminectomy syndrome NEC M96.1
- - - kyphosis M96.3
- - postmastectomy lymphoedema syndrome 197.2
- - postmastoidectomy (cavity) NEC H95.19
- - - granulation H95.12
- - - inflammation (chronic) H95.11
- - - mucosal cyst H95.13
- - - recurrent cholesteatoma H95.0
- - postradiation
--- kyphosis M96.2
<u>- - - scoliosis M96.5</u>
- - postspinal intervention (lumbar) puncture (reaction) NEC G97.19
- - - accidental puncture or laceration of dura (dural tear) (durotomy) G97.31
- - - cerebrospinal fluid leak G97.0
- - - headache G97.11
- - postvagotomy syndrome K91.1
- - postvalvulotomy syndrome 197.0
- - pseudarthrosis, postfusion or postarthrodesis M96.0
- - reattached body part (infection) (rejection) NEC T87.2
- - - lower limb T87.1
- - - upper limb T87.0
- - residual ovary syndrome N99.84
- - retained calculi, postcholecystectomy (cholelithiasis) K91.7
- - rupture of wound <u>— see Complication(s)/postprocedural/dehiscence_NEC T81.3</u>
      mputation stump (late) (surgical) T87.62
- - sepsis — see also Sepsis/by type
- - - wound T81.4
- - shock (endotoxic) (hypovolaemic) T81.1
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- - steal syndrome 197.81
- - stenosis — see also Complication(s)/stenosis
- - - anastomosis (surgical), digestive tract K91.82
- - - at site of device, implant or graft — see Complication(s)/stenosis/device, implant or graft
- - - gastrointestinal (bile duct) (oesophagus) NEC T81.87
- - - respiratory (nasopharynx) NEC T81.86
- - - - subglottic (postsurgical) J95.5
- - - - newborn (postintubation) P28.82
 - - - tracheal J95.81
- - stitch abscess T81.4
   subglottic stenosis (postsurgical) J95.5
    newborn P28.82
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- - thrombophlebitis, peripheral (IV) line site T82.75
- - transfusion related acute lung injury (TRALI) J95.83
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- - urethral stricture (postcatheterisation) N99.1
-- urinary N99.9
    -specified NEC N99.89
- - vaginal
- - - adhesions N99.2
- - - vault prolapse (posthysterectomy) N99.3
- - ventilation-associated pneumonia (VAP) J95.82
- - vitreous (touch) syndrome H59.0
- - wound
- - - breakdown T81.3
- - - dehiscence T81.3
- - - infection T81.4
- - - sepsis T81.4
- postradiation (therapy)
- - kyphosis M96.2
- - scoliosis M96.5
- postspinal (lumbar) puncture (reaction) G97.19
- - accidental puncture or laceration of dura (dural tear) (durotomy) G97.31
- - cerebrospinal fluid leak G97.0
- - headache G97.11
- postsurgical osteolysis M96.62
- postvagotomy syndrome K91.1

    postvalvulotomy syndrome 197.0

- pregnancy — see Pregnancy/complicated by NEC (see also condition) O26.9
- procedure (surgical or medical care) — (see also Complication(s)/by site and type) T81.9
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- - specified NEC T81.89
- prosthetic internal device, implant or graft NEC (see also Complication(s)/by site and type/device, implant or graft) T85.9

    - specified T85.88

- protrusion — see Complication(s)/mechanical, of device, implant or graft
- pseudarthrosis, postfusion or postarthrodesis M96.0
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- puncture, spinal (reaction) G97.19
- - cerebrospinal fluid leak G97.0
- - - accidental puncture or laceration of dura (dural tear) (durotomy) G97.31
- - headache G97.11
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- radiation NEC T66
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- residual ovary syndrome N99.84
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- - - embolism T85.84
- - - haemorrhage (bleeding) T85.83
- - - infection or inflammation NEC T85.74
- - - mechanical T85.61
- - - occlusion T85.84
- - - pain T85.85
- - - specified NEC T85.88
- - - stricture (stenosis) T85.86
- - - thrombosis T85.84
- - postprocedural NEC T81.86
- - - pneumothorax J95.84
- - - tracheal stenosis J95.81
- - - transfusion related acute lung injury (TRALI) J95.83
  - - ventilation associated pneumonia J95.82
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- - therapy (inhalation) NEC T81.81
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- serum (intoxication) (sickness) NEC T80.6
- - anaphylaxis and anaphylactic shock T80.5
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EXTERNAL CAUSES OF INJURY
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- unintentional event during medical or surgical procedure (classifiable to Y60-Y69) Y88.1
- war operations Y89.1

### U

### Unintentional event(s) (during surgical and medical care) Y69

- breakdown of device see Unintentional event(s)/due to device
- cardiopulmonary resuscitation see Unintentional event(s)/during cardiopulmonary resuscitation
- contaminated medical or biological substance (blood) (drug) (fluid) Y64.9
- due to device (breakdown or malfunction) see also Unintentional event(s)/by type
- - without breakdown or malfunction NEC Y65.89
- - anaesthesiology, anaesthetic Y70.-
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- - gastroenterology, gastrointestinal Y73.-
- - general
- - hospital Y74.-
- - surgical, surgery Y81.-

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- - urological, urology Y73.-
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- - mechanical breakdown or malfunction, of instrument or apparatus (any) (during any procedure) — see Unintentional
   event(s)/due to device Y65.8
- - sterile precautions (during procedure) Y62.9
- - suture or ligature during surgical procedure Y65.2
- - to introduce or to remove tube or instrument Y65.4
- - - endotracheal tube during anaesthesia Y65.3
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- specified type NEC Y65.89 Y65.8

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# **Australian Coding Standards**

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### SPECIALTY STANDARDS

19 Injury, poisoning and certain other consequences of external causes 1901 Poisoning 1902 Adverse effects of drugs and radiotherapy 1903 Two or more drugs taken in combination 1904 Complications of surgical or medical care Procedural complications 1924 Difficult intubation

### **GLOSSARY**

The Glossary describes terms or phrases used in the Australian Coding Standards (ACS) to assist in the application of the ACS.

**Note:** Where a term listed below is also described in a specialty standard, the description in the specialty standard is to be used.

Term

**Description** 

. . .

**Routine care** 

Routine care is the services provided to a patient to support logistical, welfare, personal and health care requirements that do not require a care plan. Routine care may vary according to the services provided by the health facility, and should be considered in the context of the health service providing the care.

For example, routine care may include:

- · administering ordered medication
- meal services
- · personal hygiene
- assisting patients to complete other daily self care activities
- · preventative health care eg turning patients in bed
- · taking of vital signs and observations
- provision of equipment to enable the above care
- · recording of pre-existing conditions and statuses.

. . .

### Routine postoperative care

Postoperative care is the management of a patient after surgery. This includes care given during the immediate postoperative period, both in the operating room and the post anaesthesia care unit, as well as during the days following surgery. The goal of postoperative care is to prevent complications such as infection, ensure adequate pain management, promote healing of the surgical incision, and return the patient to a state of health (Wojahn, Kaczkowski 2020).

Particularly in the early postoperative period, there may be rapid changes in physiology and pathology. Recognition and management of these changes by trained and skilled staff is required until a patient's physiological variables are stable, allowing discharge to the ward or discharge from the facility (ANZCA 2021).

Routine postoperative care may vary according to the services provided by the health facility and should be considered in the context of the health service providing the care.

Routine postoperative care may include:

- prescribing and administering analgesic medication (eg for operative site pain)
- wound dressing and cleansing, wound site elevation, application of ice or other
  care for postoperative wounds such as swelling, wound ooze, serous exudate and
  erythema (redness) of skin surrounding the wound
- maintenance and care of intravenous (IV) access (without a complication eg infection, phlebitis, or extravasation injury) such as:
  - resiting or removing IV cannulas (eg for leaking or dislodged IV catheter, patient discomfort, oedema, redness, tissuing, or stretched skin at the insertion site)

- <u>readjustment or change of IV catheter securement devices (splints) and/or dressings</u>
- adjustment of IV infusion rates (for slowed or stopped infusion)
- other IV access site care (eg site hygiene, flushing, change of extension sets, elevation of limb, application of warm or cool compress)
- monitoring, dressing or other care of drainage tubes, stomas or other devices.

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# 1904 COMPLICATIONS OF SURGICAL OR MEDICAL CARE PROCEDURAL COMPLICATIONS

### For guidance regarding:

- abstraction and use of shorthand by clinicians in relation to causal relationship see ACS 0010 Clinical
   documentation and general abstraction guidelines/4.1 Shorthand in relation to a condition or finding and
   4.2 Shorthand in relation to a causal relationship
- sepsis see ACS 0110 Sepsis and septic shock
- healthcare related complications in obstetric episodes of care see ACS 1500 General guidelines for obstetric episodes of care
- adverse effects of radiation/radiotherapy or drugs see ACS 1902 Adverse effects of drugs and radiotherapy
- difficult intubation see ACS 1924 Difficult intubation
- external cause, place of occurrence and activity codes see ACS 2001 External cause code use and sequencing.

### **Description(s)**

Complications of surgical and medical care, also known as procedural complications, are complications of clinical interventions that result in injury or harm (a condition classifiable to Chapters 1–19) and may occur either during or after an intervention.

The term 'clinical intervention complication' used throughout this ACS refers to complications of surgical and medical care.

ICD-10-AM classifies clinical intervention complications that are:

- due to internal devices, implants and grafts
- a direct result of clinical interventions such as surgical wound infections
- identified by the classification as known complications that frequently develop after a (particular) intervention, eg a postprocedural condition such as postmastectomy lymphoedema
- unintentional events (iatrogenic) (misadventure) that are defined as injury or harm caused during surgical or medical care and may be identified as an incident at the time of the intervention or after completion of the intervention.

### **Unintentional events** may include:

- administration of contaminated medical or biological substances
- failure of sterile precautions during a clinical intervention
- foreign body accidentally left during a clinical intervention
- inadvertent exposure to radiation

- mismatched blood used in a transfusion
- unintentional puncture or perforation during a clinical intervention.

### Clinical intervention complications are classified to:

### • Specified intraoperative and postprocedural disorders of body systems

- E89 Intraoperative and postprocedural disorders of endocrine and metabolic system
- G97 Intraoperative and postprocedural disorders of nervous system
- H59 Intraoperative and postprocedural disorders of eye and adnexa
- H95 *Intraoperative and postprocedural disorders of ear and mastoid process*
- Intraoperative and postprocedural disorders of circulatory system
- J95 Intraoperative and postprocedural disorders of respiratory system
- K91 Intraoperative and postprocedural disorders of digestive system
- M96 Intraoperative and postprocedural disorders of musculoskeletal system
- N99 Intraoperative and postprocedural disorders of genitourinary system

Many of the conditions classified to these codes, have been identified as conditions that are known to frequently develop after a (particular) intervention.

### • T80–T88 Complications of surgical and medical care

- T80 Complications due to infusion, transfusion and therapeutic injection
- T81 Complications of procedures, not elsewhere classified
- T82–T86 Complications of devices, implants and grafts
- <u>T87</u> <u>Complications peculiar to reattachment and amputation</u>
- <u>T88</u> <u>Other complications of surgical and medical care, not elsewhere classified</u>
- <u>T98.3 Sequelae of complications of surgical and medical care, not elsewhere classified</u> (see section 2. Sequelae of a clinical intervention complication).

### 1. CLASSIFICATION OF CLINICAL INTERVENTION COMPLICATIONS

### Directive(s)

- **1.1** Assign a code for a clinical intervention complication with an established causal relationship (see Examples 2, 3, 5, 6, 9–11, 13, 15 and 16).
- **1.2** Assume a causal relationship for a condition listed as a subterm under *Complication(s)/postprocedural* (see Alphabetic Index *Note*) (see Examples 1, 4, 5, 7 and 12).
- <u>1.3</u> Assign an additional diagnosis code from Chapters 1–18 to add specificity to a clinical intervention complication code for a condition (not for anatomical site), only where directed by an *Instructional* note or an ACS *Directive* (see Examples 1, 2, 5, 10 and 16).
- **1.4** Assign the following for intravascular catheter infection or sepsis:
  - T82.74 Infection and inflammatory reaction due to central vascular catheter or
  - T82.75 Infection and inflammatory reaction due to peripheral vascular catheter and
  - a code for the specific condition (eg cellulitis, sepsis), if known.
- **1.5** Assign the following for infusion/transfusion infection or sepsis:
  - T80.2 Infections due to infusion, transfusion and therapeutic injection
  - a code for the specific condition (eg cellulitis, sepsis), if known.

### Exception(s)

1. Do not assign a code from block T82–T86 for a condition that is due to an accompanying intervention and not related to the insertion of an internal device, implant or graft (see Examples 4 and 7). Codes in block T82–T86 are used to indicate that the complication is due to an internal device, implant or graft.

### **EXAMPLE 1:**

Patient was admitted with acute peritonitis after receiving continuous ambulatory peritoneal dialysis (CAPD) without further qualification.

Assign: T85.71 Infection and inflammatory reaction due to peritoneal dialysis catheter

K65.29 Secondary peritonitis, not elsewhere classified

Rationale: T85.71 — for acute peritonitis on a background of CAPD by following the causal link provided

in the Alphabetic Index: Complication(s)/postprocedural/peritonitis with continuous

ambulatory peritoneal dialysis (Directive 1.2)

K65.29 — for the secondary peritonitis (*Directive 1.3* and *Use additional code* note at T85.71)

The *Note* in the Alphabetic Index at *Complication(s)/postprocedural* confirms that the subterms are considered a result of a clinical intervention and the causal relationship can be assumed.

### **EXAMPLE 2:**

Patient was admitted with dysphagia as a result of laparoscopic adjustable gastric banding.

Assign: T85.82 Other complications of internal gastrointestinal devices, implants and grafts

R13 Dysphagia

**Rationale:** T85.82 — for dysphagia classified as an intervention complication (*Directive* 1.1)

R13 — for the dysphagia (Directive 1.3 and Use additional code note at T85.82)

### **EXAMPLE 3:**

Patient was admitted with a leaking gastrostomy tube.

Assign: K91.43 Leak from stoma of the digestive system

**Rationale:** K91.43 — for a leaking gastrostomy tube (*Directive* 1.1)

### **EXAMPLE 4:**

Patient was admitted with a superficial wound infection at their saphenous vein donor site, following coronary artery bypass grafting. The infected donor site required skin grafting during the episode of care.

Assign: T81.4 Postprocedural wound infection, not elsewhere classified

Rationale: T81.4 — for superficial wound infection classified as a complication of donor vein site by

following the Alphabetic Index: Complication(s)/postprocedural/wound/infection

(Directive 1.2)

The *Note* in the Alphabetic Index at *Complication(s)/postprocedural* confirms that the subterms are considered a result of a clinical intervention and the causal relationship can be assumed.

### **EXAMPLE 5:**

Patient was admitted with a rectovaginal fistula caused by previous low anterior resection of the rectum.

Assign: T81.82 Persistent postprocedural fistula, not elsewhere classified

N82.3 Fistula of vagina to large intestine

Rationale: T81.82 — for rectovaginal fistula classified as a complication of anterior resection of rectum by

following the Alphabetic Index: Complication(s)/fistula (Directive 1.1)

N82.3 — for rectovaginal fistula (*Directive* 1.3 and *Use additional code* note at T81.82)

### **EXAMPLE 6:**

Patient was admitted for a laparoscopic cholecystectomy for gallbladder calculus and acute cholecystitis. A deep tear in segment 5 of the liver occurred during the dissection of the gallbladder from the fossa. Bleeding ceased following firm packing.

Assign: K80.00 Calculus of gallbladder with acute cholecystitis, without mention of obstruction

K91.65 Accidental puncture and laceration of liver during a procedure

**Rationale:** K80.00 — ACS 0001 *Principal diagnosis* 

K91.65 — for the deep liver tear that occurred during dissection of gallbladder (*Directive* 1.1)

### **EXAMPLE 7:**

<u>Patient was admitted with shoulder pain following laparoscopy and insertion of intrauterine device. The clinician confirmed that the shoulder pain was from the laparoscopy.</u>

Assign: T81.83 Pain due to a procedure, not elsewhere classified

**Rationale:** T81.83 — for the shoulder pain from laparoscopy by following the Alphabetic Index:

<u>Complication(s)/postprocedural/pain NEC (Directive 1.2 and Exception 1)</u>

### 2. SEQUELAE OF A CLINICAL INTERVENTION COMPLICATION

For guidance regarding:

- external cause code assignment for sequelae of a complication see section 3. External causes for clinical intervention complications-
- sequelae of a condition see ACS 0008 Sequelae.

### Description(s)

A sequela of a clinical intervention complication is a current residual condition caused by a previous complication (ie itself no longer present) from a clinical intervention.

## Directive(s)

- **2.1** Assign the following to classify sequelae of a previously occurring condition or injury caused by a clinical intervention complication:
  - code first the sequela (current, residual condition)
  - T98.3 Sequelae of complications of surgical and medical care, not elsewhere classified to identify the underlying cause of the sequela

(see Examples 8 and 14).

### **EXAMPLE 8:**

<u>Patient was admitted with ankylosis of the hip, from a previous infection due to an orthopaedic internal fixation</u> device.

Assign: M24.65 Ankylosis of joint, pelvic region and thigh

T98.3 Sequelae of complications of surgical and medical care, not elsewhere classified

**Rationale:** M24.65 — for sequela (hip ankylosis) from previous infection of internal fixation device

(Directive 2.1)

<u>T98.3</u> — for the underlying cause of the sequela by following the Alphabetic Index:

Complication(s)/sequela (Directive 2.1)

### 3. EXTERNAL CAUSES FOR CLINICAL INTERVENTION COMPLICATIONS

### 3.1 External cause codes

## **Description(s)**

External cause codes for clinical intervention complications are assigned to describe the causes of health care related harm or injury, including unintentional events and sequelae of a clinical intervention complication.

Clinical intervention complication external cause codes are classified to categories Y60–Y84 and Y88:

Y60–Y69 Unintentional events during surgical and medical care

Y70–Y82 Medical devices associated with unintentional events in diagnostic and therapeutic use

Y83–Y84 Surgical and other medical procedures as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure

Y88 Sequelae with surgical and medical care as external cause.

### Directive(s)

- **3.1.1** An external cause code is assigned with clinical intervention complication codes classified to body system categories and to block T80–T88 *Complications of surgical and medical care*.
  - a. Assign an external cause code from blocks Y60–Y69 or Y70–Y82 **only** when there is harm resulting from an unintentional event during the provision of a medical or surgical procedure (see Example 11).
  - b. Assign an external cause code from block Y83–Y84 as the cause of an abnormal reaction, or later complication, without mention of unintentional events at the time of the procedure, to describe the type of intervention causing a complication, irrespective of whether the complication was noted during or after the procedure (see Examples 9, 10, 12, 13, 15 and 16).
  - c. Assign an external cause code from category Y88 when the complication is a sequela (see Example 14).

### Note(s)

1. External cause codes in subcategories Y83.7, Y83.8, Y84.0 and Y84.5—Y84.8 classify complications of body system clinical interventions that are based on the body system headings in ICD-10-AM and ACHI. Follow the Alphabetic Index Section II External causes of injury: Complication(s)/by body system (eg Complication(s)/genital system procedure).

### 3.2 Place of occurrence codes

### Description(s)

A place of occurrence code is assigned to describe where the external cause (surgical or medical care) occurred, not where the complication (adverse effect) manifested. For example, a surgical site wound infection may not manifest until after discharge, however a place of occurrence code for health service area is appropriate as the external cause (surgery) occurred in a health care setting.

### Directive(s)

3.2.1 Assign one of the following place of occurrence codes for a clinical intervention complication, to describe where the external cause (clinical intervention) occurred:

Y92.23 Place of occurrence, health service area, not specified as this facility (see Examples 9, 12–14 and 16) Y92.24 Place of occurrence, health service area, this facility (see Examples 10, 11 and 15).

### **EXAMPLE 9:**

Patient was read	mitted wit	h a perinephric haematoma from a kidney transplant.	
Assign:	T81.0	Haemorrhage and haematoma complicating a procedure, not elsewhere classic	<u>fied</u>
	<u>Y83.02</u>	Kidney transplant as the cause of abnormal reaction, or of later complication,	without
		mention of unintentional events at the time of the procedure	
	<u>Y92.23</u>	Place of occurrence, health service area, not specified as this facility	
Rationale:	T81.0 <u></u>	for the perinephric haematoma from kidney transplant (Directive 1.1)	
	<u>Y83.02</u>	— for the underlying cause of the complication by following the Alphabetic	<u>Index</u>
	Secti	on II: Complication(s)/transplant, transplantation/kidney (Directive 3.1.1b)	

Y92.23 — for the place of occurrence where the transplant was performed (*Directive* 3.2.1)

### **EXAMPLE 10:**

Patient was admitted with ongoing right upper quadrant pain on a history of a laparoscopic cholecystectomy performed 17 months prior at the same hospital. Following investigations (computerised tomography, ultrasound and blood tests) a diagnosis was made of a subhepatic abscess due to a retained gallstone resulting from the cholecystectomy

cholecystectomy	±
Assign:	K91.7 Retained calculi postcholecystectomy
	K65.3 Peritoneal abscess
	Y83.75 Surgical operation on digestive system as the cause of abnormal reaction, or of later
	complication, without mention of unintentional events at the time of the procedure
	Y92.24 Place of occurrence, health service area, this facility
Rationale:	K91.7 — for retained gallstone resulting from laparoscopic cholecystectomy ( <i>Directive</i> 1.1)
	K65.3 — for subhepatic abscess ( <i>Directive</i> 1.3 and <i>Use additional code</i> note at K91.7)
	Y83.75 — for the underlying cause of the complication by following the Alphabetic Index
	Section II: Complication(s)/removal/organ (partial) (total) — see Complication(s)/by body
	system/surgical (Directive 3.1.1b)
	Y92.24 — for the place of occurrence where the cholecystectomy procedure was performed
	(Directive 3.2.1)

### **EXAMPLE 11:**

Patient was admitted for cystoscopy with diathermy, for trigonitis. The distal urethra was accidentally lacerated during the procedure and repaired with sutures.

Assign: N30.3 Trigonitis

N99.64 Accidental puncture and laceration of urethra during a procedure

Y60.4 Unintentional cut, puncture, perforation or haemorrhage during endoscopic

<u>examination</u>

Y92.24 Place of occurrence, health service area, this facility

**Rationale:** N30.3 — ACS 0001 Principal diagnosis

N99.64 — for the lacerated urethra (Directive 1.1)

Y60.4 — for underlying cause of complication (unintentional event) by following the

Alphabetic Index Section II: *Unintentional event(s)/cut, cutting, haemorrhage,*perforation or puncture/endoscopic examination (Directive 3.1.1a)

Y92.24 — for the place of occurrence where the laceration during the cystoscopy occurred

(Directive 3.2.1)

### **EXAMPLE 12:**

<u>Patient was admitted with a postcholecystectomy wound infection. The procedure was performed five days prior at</u> another hospital.

Assign: T81.4 Postprocedural wound infection, not elsewhere classified

Y83.75 Surgical operation on digestive system as the cause of abnormal reaction, or of later

<u>complication</u>, without mention of unintentional events at the time of the procedure

Y92.23 Place of occurrence, health service area, not specified as this facility

Rationale: T81.4 — for postsurgical wound infection by following the Alphabetic Index:

<u>Complication(s)/postprocedural/wound/infection (Directive 1.2)</u>

<u>Y83.75</u> — for the underlying cause of the complication by following the Alphabetic Index Section II: *Complication(s)/digestive system procedure/surgical (Directive* 3.1.1b and

*Note* 1).

<u>Y92.23</u> — for the place of occurrence where the cholecystectomy was performed

(*Directive* 3.2.1).

### **EXAMPLE 13:**

Patient was admitted with acute rejection of liver transplant, performed 4 months prior.

Assign: <u>T86.4</u> Liver transplant failure and rejection

Y83.06 Liver transplant as the cause of abnormal reaction, or of later complication, without

mention of unintentional events at the time of the procedure

Y92.23 Place of occurrence, health service area, not specified as this facility

**Rationale**: T86.4 — for rejection of liver transplant (*Directive* 1.1)

Y83.06 — for the underlying cause of the complication by following the Alphabetic Index

Section II: Complication(s)/transplant, transplantation/liver (Directive 3.1.1b)

Y92.23 — for the place of occurrence where the transplant was performed (*Directive* 3.2.1)

EXAMPLE 14	<u>.</u>
Patient was adm	nitted with ankylosis of the hip, from a previous infection of an orthopaedic internal fixation device.
Assign:	M24.65 Ankylosis of joint, pelvic region and thigh
	T98.3 Sequelae of complications of surgical and medical care, not elsewhere classified
	Y88.3 Sequelae of surgical and medical procedures as the cause of abnormal reaction, or of
	later complication, without mention of unintentional events at the time of the procedure
	Y92.23 Place of occurrence, health service area, not specified as this facility
Rationale:	M24.65 — assigned first for sequela (hip ankylosis) from previous infection of internal fixation
	device by following the Alphabetic Index: Ankylosis/hip (Directive 2.1)
	T98.3 — for the underlying cause of sequela by following the Alphabetic Index:
	Complication(s)/sequela (Directive 2.1)
	Y88.3 — for underlying cause of complication by following the Alphabetic Index Section II:
	Sequelae/surgical and medical procedures/as cause of abnormal reaction or later
	<u>complication</u> ( <u>Directive 3.1.1c</u> )
	Y92.23 — for the place of occurrence where the internal fixation was performed
	(Directive 3.2.1)

# **EXAMPLE 15:**

Patient was admitted for removal of a left occipital lipoma. The lipoma was excised under anaesthesia. Following transfer to recovery, the patient was noted to be hypotensive, and a review by the anaesthetist was requested. The

transfer to recov	very, the patient was noted to be hypotensive, and a review by the anaestheust was requested. The
anaesthetist dia	gnosed hypotension due to the anaesthesia without further information or specification and treated
with intravenou	<u>is fluids.</u>
Assign:	D17.0 Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
	M8850/0 Lipoma NOS
	T88.54 Hypotension due to anaesthesia, not elsewhere classified
	Y84.89 Other medical procedure as the cause of abnormal reaction, or of later complication,
	without mention of unintentional events at the time of the procedure
	Y92.24 Place of occurrence, health service area, this facility
Rationale:	D17.0 — ACS 0001 Principal diagnosis
	<u>M8850/0 — ACS 0233 Morphology</u>
	T88.54 — for hypotension due to anaesthesia with no further specification (Directive 1.1)
	Y84.89 — for external cause by following the Alphabetic Index Section II:
	Complication(s)/anaesthesia (Directive 3.1.1b)
	Y92.24— for the place of occurrence where the anaesthesia was administered ( <i>Directive</i> 3.2.1)

### **EXAMPLE 16:**

Patient was admitted for investigation of nasopharyngeal stricture on a background of previous tonsillectomy and adenoidectomy. Endoscopy of the nasopharyngeal region under general anaesthesia was performed. A computerised tomography scan was also performed. The discharge summary listed stenosis of nasopharynx from previous tonsillectomy and adenoidectomy as the principal diagnosis.

Assign: T81.86 Respiratory system complications due to a procedure, not elsewhere classified

Y83.83 Surgical procedure on nose, mouth and pharynx as the cause of abnormal reaction, or of

later complication, without mention of unintentional events at the time of the procedure

Y92.23 Place of occurrence, health service area, not specified as this facility

**Rationale**: T81.86 — for nasopharyngeal stricture as a complication of an intervention (*Directive* 1.1)

Y83.83 — for the underlying cause of the complication by following the Alphabetic Index Section II: Complication(s)/nose, mouth and pharynx procedure/surgical (Directive 3.1.1b and Note 1)

<u>Y92.23</u> — for the place of occurrence where the tonsillectomy and adenoidectomy was performed (*Directive* 3.2.1)

Nasopharyngeal stenosis is classified to J39.2 *Other diseases of pharynx*. J39.2 is not assigned as it does not provide additional specificity of the condition (*Directive* 1.3).

# 19.4 Difficult intubation

See also 19.3 Complications of surgical and medical care.

Stakeholders have continued to identify ambiguity when assigning codes for difficult airway and in application of ACS 1924 *Difficult intubation*.

Revisions for ICD-10-AM/ACHI/ACS Thirteenth Edition are aimed at eliminating ambiguities and supporting consistency of code assignment for difficult intubation.

### **ICD-10-AM Tabular List**



### Other complications of surgical and medical care, not elsewhere classified

Use additional code (U07.7-) to identify coronavirus disease 2019 [COVID-19] vaccine causing adverse effect in therapeutic use.

Excludes: accidental puncture or laceration during a procedure — see Alphabetic Index: Complication(s)/accidental puncture or laceration during procedure

adverse effect of drugs and medicaments NEC — see Alphabetic Index

complication of:

- infusion, transfusion and therapeutic injection (T80.-)
- internal devices, implants and grafts (T82-T85)
- procedure NEC (T81.-)
- serum (T80.5–T80.6)

dermatitis due to drugs and medicaments except serum (L23.3, L24.4, L25.1, L27.0-L27.1)

poisoning and toxic effects of drugs and chemicals (T36-T65)

complications following:

- infusion, transfusion and therapeutic injection (T80.-)
- procedure NEC (T81.-)

specified complications classified elsewhere, such as:

- complications of devices, implants and grafts (T82 T85)
- dermatitis due to drugs and medicaments (L23.3, L24.4, L25.1, L27.0 L27.1)
- poisoning and toxic effects of drugs and chemicals (T36 T65)

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### T88.4 Failed or difficult intubation

◆T88.41 Failed intubation

Failed endotracheal intubation requiring emergency airway management procedures (cricothyroidotomy/cricothyrotomy) (tracheostomy)

**©**T88.42

**Difficult**Complications due to difficult intubation

**▼**1924

Difficult airway complications

*Includes:* injury to head, neck or thorax:

• abrasion • contusion

Use additional code (Chapters 1-18) to identify harm resulting from difficult intubation.

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# Z98 Other postprocedural states

▼0050

Excludes: complication of surgical and medical care — see Alphabetic Index

follow-up medical care and convalescence (Z42–Z51, Z54.-)

postprocedural complication see Alphabetic Index

Z98.0 Intestinal bypass and anastomosis status

Z98.1 Arthrodesis status

Z98.2 Presence of cerebrospinal fluid drainage device

CSF shunt

**OZ98.3** Difficult airway for intubation status

**▼1924** 

Current or previous difficult airway event

**Difficult intubation NOS** 

Excludes: complication of difficult intubation (T88.42)

failed intubation (T88.41)

Z98.8 Other specified postprocedural states

# **ICD-10-AM Alphabetic Index**

### C

Complication(s) (due to surgical or medical care) (from) (of)

Note: The list of terms below relate to complications of surgical or medical care (intervention complications). For complications of disease or health condition, assign a code for the condition — see condition, or Obstetric/complication or lead terms

Disease or Disorder.

- intubation (endotracheal) see also Complication(s)/by type
- - difficult T88.42 see Difficult, difficulty/intubation
- - failed T88.41 see Failure, failed/intubation
- jejunostomy (stoma) NEC K91.49

### D

### Difficult, difficulty (in)

- acculturation Z60.3
- airway, intubation (history) (status) Z98.3
- - with resulting complication T88.42
- intubation, endotracheal (airway) (history) (status) Z98.3 T88.42
- - with resulting complication T88.42

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### Н

### History (of) (personal)

- ..
- deep venous thrombosis (DVT) Z86.72
- difficult intubation, endotracheal (airway) (status) Z98.3
- disease or disorder (of) Z87.8

\_

#### Intubation, endotracheal

- difficult, with complication T88.42
- failed (requiring emergency airway management procedures) T88.41

# **Australian Coding Standards**

### 1924 DIFFICULT INTUBATION

### For guidance regarding:

- ventilation see ACS 1006 Ventilatory support
- complications of surgical and medical care see ACS 1904 Complications of surgical or medical care
- sequelae of previous injury caused by difficult intubation see ACS 1904 Complications of surgical or medical care/2. Sequelae of a clinical intervention complication
- external cause code assignment for complications of intubation see ACS 1904 Complications of surgical or medical care/3.External causes for clinical intervention complications
- place of occurrence and activity codes see ACS 2001 External cause code use and sequencing.

### Description(s)

Intubation impacted by patient anatomy or physiology that complicates, prolongs or prevents intubation is described as difficult intubation. Past difficult intubation (difficult airway) may influence future intubations, however, it may not result in harm or injury. Difficult intubation resulting in harm or injury (a condition that is classifiable to Chapters 1–19) is classified as a complication of difficult intubation.

### Directive(s)

### Difficult intubation without harm or injury

1. Assign Z98.3 *Difficult airway for intubation status* for difficult intubation (current or previous) without harm or injury (see Examples 1 and 3).

Z98.3 does not have to meet the criteria in ACS 0002 Additional diagnoses.

### Difficult intubation with harm or injury

- **2.** Assign the following for difficult intubation with harm or injury:
  - T88.42 Complications due to difficult intubation for difficult intubation causing harm or injury
  - an additional diagnosis code for the injury or harm (condition) that resulted from the difficult intubation
  - an external cause code:
    - Y84.85 Medical procedure for respiratory system as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure, not elsewhere classified where there is no mention of unintentional events at the time of the intubation or

• a code from blocks Y60–Y69 *Unintentional events during surgical and medical care* or Y70–Y82 *Unintentional events during surgical and medical care* where harm resulted from an unintentional event during the intubation

(see Examples 2 and 4).

### **EXAMPLE 1:**

<u>Patient was admitted for hip replacement under general anaesthesia. Anaesthetist noted a difficult airway resulting from a cleft palate, grade 2 view, with second intubation attempt with bougie successful.</u>

Assign: Principal diagnosis: a code for the condition that required the hip replacement intervention

Additional diagnosis: Z98.3 Difficult airway for intubation status

Rationale: Principal diagnosis — ACS 0001 Principal diagnosis

<u>Z98.3</u> — for difficult intubation (airway) status without resulting harm or injury by following the

Alphabetic Index: Difficult/airway, intubation (Directive 1)

### **EXAMPLE 2:**

Patient was admitted with unstable angina. During the episode of care the patient had a cardiac arrest with successful resuscitation on the ward. Patient was noted to have had a difficult intubation. The following day a diagnosis of aspiration pneumonitis was made due to aspiration of gastric contents from the difficult intubation. The pneumonitis was treated with intravenous antibiotics.

Assign:	120.0	Unstable angina

I46.0 Cardiac arrest with successful resuscitation

T88.42 Complications due to difficult intubation

J69.0 Pneumonitis due to food and vomit

Y84.85 Medical procedure for respiratory system as the cause of abnormal reaction, or of later

complication, without mention of unintentional events at the time of the procedure, not

elsewhere classified

**Rationale:** I20.0 — ACS 0001 *Principal diagnosis* 

I46.0 — ACS 0002 Additional diagnoses

<u>T88.42</u> — for difficult intubation causing harm or injury by following the Alphabetic Index:

<u>Complication(s)/intubation/difficult (Directive 2)</u>

<u>J69.0</u> — for aspiration pneumonia (*Directive 2* and *Use additional code* note at T88.42)

Y84.85 — for external cause by following the Alphabetic Index Section II:

Complication(s)/intubation (Directive 2)

### **EXAMPLE 3:**

Patient was admitted for unstable angina. During the episode of care the patient had a cardiac arrest with successful resuscitation on the ward. During the intubation the patient was noted to have had a difficult intubation. The following day a diagnosis of aspiration pneumonitis was made on the background of the cardiac arrest and resuscitation the previous day. The pneumonitis was treated with intravenous antibiotics.

Assign:	I20.0 Unstable angina
	I46.0 Cardiac arrest with successful resuscitation
	Z98.3 Difficult airway for intubation status
	J69.0 Pneumonitis due to food and vomit
Rationale:	I20.0 — ACS 0001 Principal diagnosis
	<u>I46.0 — ACS 0002</u> <u>Additional diagnoses</u>
	Z98.3 — for difficult intubation (airway) status without resulting harm or injury by following the
	Alphabetic Index: Difficult/airway, intubation (Directive 1)
	J69.0 — ACS 0002 Additional diagnoses

### **EXAMPLE 4:**

Patient was admitted for ongoing dysphagia from a difficult intubation performed three months prior at the same hospital.

Assign: T88.42 Complications due to difficult intubation

R13 Dysphagia

Y84.85 Medical procedure for respiratory system as the cause of abnormal reaction, or of later complication, without mention of unintentional events at the time of the procedure, not elsewhere classified

**Rationale:** T88.42 — for difficult intubation causing harm or injury by following the Alphabetic Index:

Complication(s)/intubation/difficult (Directive 2)

R13 — for the ongoing dysphagia (*Directive 2*, *Use additional code* note at T88.42)

Y84.85 — for the external cause by following the Alphabetic Index Section II:

Complication(s)/intubation (Directive 2)

# 19.5 Adult and child abuse (neglect or maltreatment)

### See also 21.1 Social factors.

Refinements have been made to update terminology for clinical currency and to clarify concepts related to abuse, neglect and maltreatment across ICD-10-AM, ACHI and the ACS.

## **ICD-10-AM Tabular List**

### **CHAPTER 19**

# INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00-T98)

### OTHER AND UNSPECIFIED EFFECTS OF EXTERNAL CAUSES (T66-T78)

. . .

T74

### Abuse, neglect and other maltreatment-Maltreatment syndromes

▼ 1909

Non-accidental acts of physical force, forced or coerced sexual acts, verbal or symbolic acts, or significant caregiving omissions that result in harm or have a reasonable potential for harm. This category is applied to the victim of the maltreatment, not the perpetrator.

Known or suspected abuse, neglect and maltreatment with no specified injury or condition

Maltreatment syndrome

Includes: abuse of:

• adult

• child

victim of domestic or family violence

*Note:* Where multiple forms of abuse, neglect and maltreatment are specified — code each type separately.

Code first theany current injury or condition due to abuse, neglect or other maltreatment, if applicable.

T74.0 Neglect or abandonment

T74.1 Physical abuse

Battered:

- baby or child syndrome NOS
- spouse syndrome NOS

Munchhausen's (syndrome) by proxy

Physical violence

Note:

Munchhausen's (syndrome) by proxy is a disorder in which a carer (usually a parent) fabricates symptoms or induces an illness in the patient (usually a child).

Use additional external cause code (Y07.0-) to identify perpetrator

T74.2 Sexual abuse

Sexual violence

T74.3 Psychological abuse

Coercive control

Victim of emotional abuse

Includes: being isolated from friends and family

controlling [monitoring] behaviours of communications (eg social media), finances or movements

T74.8 Other forms of abuse, neglect and maltreatment-Other maltreatment syndromes

**Mixed forms** 

Intimidation by partner, family member or person with carer responsibilities

Other maltreatment syndromes

T74.9 Abuse, neglect and maltreatment Maltreatment syndrome, unspecified

Effects of:

- abuse of adult NOS
- child abuse NOS

. .

# PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO SOCIOECONOMIC AND PSYCHOSOCIAL CIRCUMSTANCES (Z55–Z65)

. . .

# Z65

### Problems related to other psychosocial circumstances

\_ \_ .

Z65.3 Problems related to other legal circumstances

Arrest

Child custody or support proceedings

Litigation

**Proceedings:** 

- child custody
- guardianship (adult) (child)

Prosecution

. . .

### PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO FAMILY AND PERSONAL HISTORY AND CERTAIN CONDITIONS INFLUENCING HEALTH STATUS (Z80-Z99)

**Z91** Personal history of risk-factors, not elsewhere classified ▼ 0050

Z91.1 Personal history of noncompliance with medical treatment and regimen Absconding

Z91.8 Personal history of other specified risk-factors, not elsewhere classified

**Maltreatment NOS** 

**©**Z91.89 Personal history of other specified risk-factors, not elsewhere classified

## **ICD-10-AM Alphabetic Index**

### **SECTION I**

### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

Abuse (adult) (alleged) (child) (domestic) (elder) NEC (see also Problem related to/abuse) T74.9

- child T74.9
- as reason for
- family seeking advice (including offender) Z61.6
- non-family member seeking advice (including offender) Z65.8
- affecting parent or family (including offender) Z61.6
- physical, alleged Z61.6
- sexual, alleged (by)
- family member Z61.4
- person outside family Z61.5
- specified NEC T74.8
- emotional T74.3
- financial T74.8
- personal history of
- adulthood Z91.8
- childhood Z61.8
- physical-(adult) (child) T74.1
- psychological (adult) (child) T74.3
- sexual T74.2
- <del>child, alleged (by)</del>
  - family member Z61.4
- n outside family Z61.5
- specified NEC T74.8

### Acalculia R48.8

Assault

- by poisoning (see also Poisoning) T65.9
- sexual T74.2
- trauma NEC (see also nature and site of injury) T14.9

B

Bankruptcy, anxiety concerning Z59.82<del>Z59.8</del>

```
Behaviour(s)
- antisocial, child or adolescent Z72.8
- child, causing problem or concern in family or household Z63.81
- disorder, disturbance — see Disorder/conduct
- disruptive (see also Disorder/conduct) F91.8
- drug seeking
- - due to drug dependence — see Dependence/due to
- - no underlying cause identified Z72.8Z64.2
- - underlying cause identified — see condition
- high-risk sexual Z72.5
- inexplicable R46.2
Bullosis diabeticorum E1-.62
Bullying (adult) (child) (playground) (school) Z60.8
- - domestic partner or person with carer responsibilities (parent) (teacher) T74.3
C
Coenurosis B71.8
Coercive control T74.3
Coffee-worker's lung J67.8
Contraction(s), contracture, contracted
- Volkmann's (ischaemic) T79.6
Control, coercive T74.3
Contusion (skin surface intact) (see also Injury/superficial) T14.05
Cyanotic heart disease 124.9
- congenital Q24.83
Cyberbullying — see Bullying
Cycle
Н
History (of) (personal)
- abuse (adult) (not affecting childhood) NEC Z91.89Z91.8
- - childhood — see Problem related to/abuse/child
- - physical NEC Z91.6Z91.8
    occurring in childhood Z61.6
- - psychological (trauma) Z91.4
- - sexual <u>NEC Z91.6<del>Z91.8</del></u>
    occurring in childhood Z61.8
    - perpetrator

    outside of primary support group Z61.5

      within primary support group Z61.4
- alcohol use disorder Z86.41
- maltreatment — see History/abuse 291.8
 - physical Z91.8
    occurring in childhood Z61.6
   sexual Z91.8
   - occurring in childhood Z61.8
     perpetrator
       outside of primary support group Z61.5
      - within primary support group Z61.4
- medical treatment Z92.9
Intestine, intestinal — see condition
Intimidation by partner, family member or person with carer responsibilities T74.8
Intolerance
```

### L

Lack of

```
- achievement in school Z55.3
- adequate food (access) NEC Z59.4
- appetite (see also Anorexia) R63.0
- care of dependant person (at or after birth) (infant) T74.0
-- in home Z74.2
   of infant (at or after birth) T74.0
- coordination R27.8
M
Malnutrition, malnourished, malnourishment E46
- lack of care, or neglect (aged care) (child) (disability care) (infant) T74.0-T74.8
Maltreatment (adult) (child) (of) (older adult) (syndrome) NEC (see also Abuse) T74.9
- child NEC T74.9
- syndrome
-- abuse of adult (effects of) T74.9
  child abuse (effects of) T74.9
Maltworker's lung J67.4
Ν
Neglect (see also Abuse) T74.0
- hemispatial R29.5
- in childhood Z62.5
- - emotional Z62.4
- left-sided R29.5
Nutrition, deficient or insufficient (see also Malnutrition) E46
- due to
- - insufficient food T73.0
- - lack of
- - - care (neglect) T74.0 T74.8
- - - food T73.0
P
Problem related to (due to) (of) (psychosocial) (related to) (with) ...
- absent family member Z63.3
- abuse (history) (see also History/abuse) Z91.4
- - child
- - - personal history NEC Z61.8
- - - physical Z61.6
- - - sexual (by)
- - - - family member (household) Z61.4
- - - - person outside family Z61.5
- - personal history in childhood Z61.8
- academic level Z55.8
- child
- - abuse (previous) — see Problem related to/abuse/child (affecting the child) (physical) Z61.6
     sexual, perpetrator
      outside primary support group Z61.5
      within primary support group Z61.4
- - behaviour Z63.81
- genital NEC
- - female N94.9
- - male N50.9
- guardianship Z65.3
- health care Z75.9
- - specified NEC Z75.8
Violence, (physical) (suspected) R45.6
- domestic T74.1
- family T74.1
```

- sexual T74.2
- threatened NEC Z60.8
- - by partner, family member or person with carer responsibilities T74.8
- victim of see also Abuse/by type
- - crime, by unknown perpetrator Z65.4

Violent behaviour (perpetrator) R45.6

Viosterol deficiency (see also Deficiency/calciferol) E55.9

### **ACHI Tabular List**

### **CHAPTER 19**

# **INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925)**

• • •

### 1824

### Other assessment, consultation, interview, examination or evaluation

### 96035-00 Genetic assessment

Assessment of a client's genetic history by construction of a family tree

Genetic tracing

Includes: general physical examination

### 96184-00 Developmental testing

Assessment of motor, language, social, adaptive and/or cognitive functioning by standardised developmental instruments Growth and development examination

### 96023-00 Ageing assessment

Evaluation of a client's ability to cope with the characteristics of the ageing process performed particularly to distinguish the effects of ageing from the effects of pathology in order to determine the most suitable care or treatment for the client

Includes: physiological and psychosocial assessment

### 96186-00 Spiritual assessment

Initial and subsequent assessment of wellbeing issues, needs and resources of a client. This intervention can often lead to other interventions.

*Includes:* informal explanatory dialogue to screen for immediate spiritual needs including religious and pastoral issues the use of a formal instrument or assessment tool

### 96037-01 Consultation liaison psychiatry [CLP]

### **▼**0032, 0534

Intervention by a psychiatric subspecialty focusing on the practice of psychiatry in collaboration with a range of other health professionals.

Includes: interventions performed as part of the multidisciplinary consultation liaison psychiatry service

paediatric consultation liaison psychiatry ([PCLP])

*Note:* This code is assigned once only in an episode of care.

### 96277-00 External agency [family] assessment

Includes: assessments undertaken (by a third party) on behalf of government agency for child protection government agencies responsible for child protection

### 96037-00 Other assessment, consultation or evaluation

Assessment NOS Consultation NOS Evaluation NOS Interview NOS

# **ACHI Alphabetic Index**

# SECTION I ALPHABETIC INDEX

### A

Assessment (of) 96037-00 [1824]

- for

- - child protection agency 96277-00 [1824]

- activities of daily living 96021-00 [1822]
- ageing 96023-00 [1824]
- behavioural (with cognitive) 96238-00 [1823]
- child protection 96277-00 [1824]
- cognitive (with behavioural) 96238-00 [1823]
- - in developmental testing 96184-00 [1824]
- consultation liaison psychiatry (CLP) 96037-01 [1824]
- developmental testing 96184-00 [1824]
- dietary 96026-00 [1822]
- disease/condition adjustment 96022-00 [1822]
- drug use 96034-00 [1823]
- environmental 96030-00 [1822]
- financial management 96029-00 [1822]
- genetic (tracing) 96035-00 [1824]

# **Australian Coding Standards**

# 1909 ADULT AND CHILD ABUSE (NEGLECT OR MALTREATMENT)

# 19.6 Minor addenda

Minor revisions have been made to the ICD-10-AM Tabular List and Alphabetic Index, ACHI Tabular List and Alphabetic Index and the ACS by incorporating published National Coding Advice, formatting consistency of code titles and *Instructional* notes and incidental refinements identified during classification development.

### ICD-10-AM Tabular List

### **CHAPTER 19**

# INJURY, POISONING AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00–T98)

- - -



Burns classified according to extent of body surface involved

**▼**1911

*Note:* This category must be used as a supplementary code with categories T20–T25, T29. The following fifth character subdivisions are for use with subcategories T31.0–T31.9 to indicate the <u>per cent percent</u> of body surface with full thickness burn. Valid fifth characters are in [brackets] under each code:

- 0 less than100-9 per cent or unspecified full thickness burns
- 1 10−19 per cent full thickness burns

- 2 20–29 per cent <u>full thickness burns</u>
- 3 30–39 per cent full thickness burns
- 4 40–49 per cent full thickness burns
- 5 50–59 per cent full thickness burns
- 6 60–69 per cent full thickness burns
- 7 70–79 per cent <u>full thickness burns</u>
- 8 80–89 per cent <u>full thickness burns</u>
- 9 90 per cent or more of body surface <u>full thickness burns</u>

. . .

# 19.7 Retired and revised ACS Chapter 19

See also <u>4. Revised ACS Specialty standards for multiple or unspecified diagnoses and interventions</u>, <u>19.2 Place of occurrence</u> and <u>20.2 Retired and revised ACS Chapter 20</u>.

Application of the ACS template led to the following refinements in the ACS:

Australian Coding Standard	Revision
1901 Poisoning by drugs	Revised ACS title.
1902 Adverse effects of drugs and radiotherapy	Revised ACS title, expanded place of occurrence guidelines. Addition of <i>Note</i> 1 and Example 3. Reflection of Examples into ACS 2001 <i>External cause code use and sequencing.</i>
1905 <u>Head injury and concussive injury Closed</u> head injury/loss of consciousness/concussion	Revised ACS title.
1907 Multiple traumatic injuries	Revised ACS title.
1908 Open wound with artery, nerve and/or tendon damage	Retired with transfer of Example 2 to ACS 1917 <i>Open wounds</i> .
1910 Skin loss	Retired as code assignment for 'skin loss' is directed by the ICD-10-AM Alphabetic Index at:  Loss/skin, due to/current open wound — see Wound, open/by site and Loss/skin, due to/sequela of open wound — see Sequelae/wound, open/by site.
1912 Sequelae of injuries, poisoning, toxic effects and other external causes	Retired with the content relocated to ACS 0008 Sequelae.
1915 Spinal <del>(cord)</del> injury	Revised ACS title.

Australian Coding Standard	Revision
1917 Open wounds	Incorporation of Example relocated from ACS 1908 Open wound with artery, nerve and/or tendon damage
1918 Fracture and dislocation, and fracture blisters	Revised ACS title.
1920 Open intrathoracic/or intra-abdominal injury	Revised ACS title.
1922 Crushing injury and crush syndrome	Revised ACS title and guidance added for crush injury where type of injury is unknown.

# ICD-10-AM Alphabetic Index

### **SECTION I**

## ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

### Ε

### Effect, adverse

- drug<del>s and medicaments</del> (correct substance properly administered) (medicament) (see also Table of drugs and chemicals) NEC T88.7
- -- correct substance properly administered T88.7
- - due to improper use see Poisoning/drug
- - nonmedicinal see Poisoning/drug
- - overdose see Poisoning/drug or wrong substance given or taken T50.9
- --- specified drug --- see Table of drugs and chemicals
- - specified see Table of drugs and chemicals
- - wrong substance given or taken see Poisoning/drug
- electric current, electricity (shock) T75.4
- toxic see Poisoning/drug

### Р

Poisoning (acute) (due to substance) (improper use) (see also Table of drugs and chemicals) T65.9

- drug (medicament) NEC— see also Table of drugs and chemicals T50.9
- - specified see Table of drugs and chemicals
- epidemic, fish (noxious) (see also Ichthyotoxism) T61.9
- - bacterial A05.9
- • •
- mussels (noxious) T61.2
- - bacterial (see also Intoxication/food-borne/by agent) A05.-A05.9
- noxious foodstuffs T62.9

### Т

Toxic (poisoning) (see also-condition\_Table of drugs and chemicals) T65.9

- from drug or medicaments nonmedicinal substance see Effect, adverse/drug Table of drugs and chemicals
- shock syndrome A48.3

. . .

Toxicity NEC (see also Table of drugs and chemicals) T65.9

- drug or medicaments see Effect, adverse/drug
- fava bean D55.0
- from drug or nonmedicinal substance see Table of drugs and chemicals

### **SECTION III**

### TABLE OF DRUGS AND CHEMICALS

Substance	Poisoning			
Key: Generic Names (Brand Names)				
Note:				Adverse effect in
Assign a code for the type (class) of drug where the		Intentional	Undetermined	
specified drug is not listed in this table.	Chapter 19 Accidental	self-harm	intent	use .

# **Australian Coding Standards**

## 1901 POISONING BY DRUGS

. . .

# 1902 ADVERSE EFFECTS OF DRUGS AND RADIOTHERAPY

. . .

1.3 Assign one of the following place of occurrence codes according to where the drug was prescribed (ie the health facility — see *Note* 1) not where the drug was administered or where the manifestation(s) occurred:
 Y92.23 Place of occurrence, health service area, not specified as this facility (see Examples 1 and 2)

Y92.23 Place of occurrence, health service area, not specified as this facility (see Examples 1 and 2) Y92.24 Place of occurrence, health service area, this facility (see Example 3).

• • •

## **Directive(s)**

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**2.4** Assign one of the following place of occurrence codes for the health service area where the radiotherapy was provided:

Y92.23 Place of occurrence, health service area, not specified as this facility (see Examples 5 and 7) Y92.24 Place of occurrence, health service area, this facility (see Examples 4 and 6).

### Note(s)

- 1. All prescribed drugs are considered to be prescribed within the health system. Where there is an adverse effect from a drug prescription completed outside of the hospital network (such as by a GP), it is still prescribed 'within' the health service area.
- 2. Certain adverse effects are classified in ICD-10-AM to complications of surgical and medical care categories, however this does not preclude the use of these codes to describe the adverse effect.

These include adverse effects relating to:

- administration of serum classified to T80.5 *Anaphylaxis and anaphylactic shock due to serum* or T80.6 *Other serum reactions* (see Example 2)
- anaphylaxis and anaphylactic shock from an adverse effect of a correct substance properly administered (excluding serum) classified to T88.6 *Anaphylaxis and anaphylactic shock due to adverse effect of correct drug or medicament properly administered*
- anaesthesia (such as hypotension due to anaesthesia NOS) classified to subcategory T88.5 Complications of anaesthesia, not elsewhere classified
- unspecified adverse effect of a correct substance properly administered classified to T88.7 Unspecified adverse effect of drug or medicament.

### **EXAMPLE 3:**

Patient was admitted for removal of a left occipital lipoma. The lipoma was excised under anaesthesia. Following transfer to recovery, the patient was noted to be hypotensive and a review by the anaesthetist was requested. The anaesthetist ordered an albumin transfusion and diagnosed hypotension due to the anaesthetic drug (propofol). The albumin was administered without incident.

albumin was ad	ministered without incident.
Assign:	D17.0 Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck
	M8850/0 Lipoma NOS
	195.2 Hypotension due to drugs
	Y48.2 Other and unspecified general anaesthetics causing adverse effects in therapeutic use
	Y92.24 Place of occurrence, health service area, this facility
Rationale:	D17.0 — ACS 0001 Principal diagnosis
	<u>M8850/0 — ACS 0233 Morphology</u>
	195.2 — for hypotension, the adverse effect of a correct substance properly administered
	(Directive 1.1)
	Y48.2 — for the type of anaesthetic drug (propofol) that caused the adverse effect ( <i>Directive</i> 1.2)
	Y92.24 — for the place of occurrence where the drug was prescribed (specified as this facility)
	(Directive 1.3)

- -

# 1905 CLOSED HEAD INJURY/LOSS OF CONSCIOUSNESS/ CONCUSSIONHEAD INJURY AND CONCUSSIVE INJURY

. . .

# 1907 MULTIPLE TRAUMATIC INJURIES

. . .

### Directive(s)

1. Assign codes from categories S00–T79 for all injuries resulting from a trauma. Multiple traumatic injuries do not need to meet the criteria in ACS 0002 *Additional diagnoses* in the initial episode of care (see Example 1).

...

# 1915 SPINAL (CORD) INJURY

. . .

### 1917 OPEN WOUNDS

. . .

### **EXAMPLE 1:**

Patient was admitted with a deep laceration over the extensor surface of the wrist. A wound exploration found a deep radial artery injury and several tendon lacerations, which were all repaired in theatre.

Assign: S65.1 Injury of radial artery at wrist and hand level

<u>S66.9</u> <u>Injury of unspecified muscles and tendons at wrist and hand level</u>

S61.88 Open wound of other parts of wrist and hand

Rationale: S65.1 — for the radial artery injury (*Directives* 2 and 3)

S66.9 — for the tendon lacerations (Directives 2 and 3)

<u>S61.88</u> — for the open wound (laceration of extensor surface) of the wrist by following the

Alphabetic Index: Wound, open/wrist/specified (Directives 1 and 3)

# 1918 FRACTURE AND DISLOCATION, AND FRACTURE BLISTERS

. . .

# 1920 OPEN INTRATHORACIC/OR INTRA-ABDOMINAL INJURY

. . .

# 1922 CRUSHING INJURY AND CRUSH SYNDROME

. . .

### Directive(s)

2. Assign a code for crush injury by following the Alphabetic Index: *Crush/by site* where the type of injury is not known.

# 20. External causes of morbidity

See also 19.3 Complications of surgical and medical care.

# 20.1 Mendelson's syndrome

Refinement to J95.4 to remove the eponym *Mendelson's syndrome* from the code title and replace it with *Chemical pneumonitis due to inhalation or aspiration of gastric contents during anaesthesia*. The *Use additional code* notes for external cause codes were also removed as unnecessary with all elements included in the code title.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 10**

# DISEASES OF THE RESPIRATORY SYSTEM (J00–J99) OTHER DISEASES OF THE RESPIRATORY SYSTEM (J95–J99)

<b>J</b> 95 <b>▼</b> 1904	Intraoperative and postprocedural disorders of respiratory system, not elsewhere classified
J95.4	Chemical pneumonitis due to inhalation or aspiration of gastric contents during anaesthesia Mendelson's syndrome Mendelson's syndromeChemical pneumonitis due to inhalation or aspiration of gastric contents during anaesthesia  Use additional code (W78) to identify aspiration of gastric contents.  Use additional code (Y48.) to identify anaesthesia causing adverse effect in therapeutic use.
J95.5	Postprocedural subglottic stenosis
	Excludes: acquired (postintubation) subglottic stenosis in newborn (P28.82)

# 20.2 Retired and revised ACS Chapter 20

See also 19.5 Adult and child abuse (neglect or maltreatment) 19.5 Adult and child abuse (neglect or maltreatment).

The application of the ACS template Application of the ACS template led to the following refinements in ICD-10-AM and the ACS:

Australian Coding Standard	Revision
2001 External cause code use and sequencing	Inclusion of examples from ACS 1902  Adverse effects of drugs and radiotherapy and ACS 1911 Burns.

Australian Coding Standard	Revision
2005 Poisonings and injuries – indication of intent	Retired as the content duplicated in the ICD-10-AM Tabular.
2008 Perpetrator of assault, abuse and neglect	Relocation of content regarding relationships of perpetrator of assault to the ICD-10-AM Alphabetic Index and Tabular List.
2009 Pedestrian accidents Mode of pedestrian conveyance	Revised ACS title and inclusion of 'powered' and 'nonpowered' terminology.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 20**

# EXTERNAL CAUSES OF MORBIDITY AND MORTALITY (U50–U73, V00–Y98)

. . .

Note: For codes V00–Y34, assign also place of occurrence (Y92.-) and activity (U50.- –U73.-).

For codes Y35-Y89, assign also place of occurrence (Y92.-).

This chapter, which in previous revisions of ICD constituted a supplementary classification, permits the classification of environmental events and circumstances as the cause of injury, poisoning and other adverse effects. Where a code from this section is applicable, it is intended that it shall be used in addition to a code from another chapter of the Classification indicating the nature of the condition. Most often, the condition will be classifiable to Chapter 19 *Injury*, *poisoning and certain other consequences of external causes* (S00–T98) and subcategories Z04.1–Z04.5. Other conditions that may be stated to be due to external causes are classified in Chapters 1 to 18.

Categories for sequelae of external causes of morbidity and mortality are included at Y85-Y89.

The code ranges U00-U49, U75-U77, U78-U88 and U91-U93 are listed in Chapter 22 Codes for special purposes.

. . .

#### ACCIDENTAL POISONING BY AND EXPOSURE TO NOXIOUS SUBSTANCES (X40-X49)

#### **▼**1901, 1903<del>, 2005</del>

Includes: accidental:

- administration of prescribed drugs taken in combination with self-prescribed drugs and intoxication
- improper use
- overdose due to drugs, medicaments and biological substances
- wrong substance given or taken in error

accidents in the use of drugs, medicaments and biological substances in medical and surgical procedures

*Note:* Intent cannot be assumed; it must be documented.

For list of specific drugs — see Alphabetic Index/Section III: Table of drugs and chemicals.

Excludes: administration with suicidal or homicidal intent, or intent to harm, or in other circumstances classifiable to X60-X69,

X85-X90, Y10-Y19

allergen, allergic reaction (Y37.-)

correct drug properly administered in therapeutic or prophylactic dosage as the cause of any adverse effect (Y40-Y59)

. . .

#### **INTENTIONAL SELF-HARM (X60-X84)**

#### <del>72005</del>

Includes: purposely self-inflicted poisoning or injury

suicide (attempted)

*Note:* Intent cannot be assumed; it must be documented.

Excludes: self-inflicted injuries without stated or implied intent (Y10–Y34)

The following fifth character subdivisions are for use with categories X85-Y09:

Insert fourth character filler digit '0' for categories X85–X87, X89–X91, X93, X96–X98, Y00–Y01 and Y04–Y09.

This subdivision is <u>hierarchical and is</u> used to describe the relationship of the perpetrator <u>of the assault</u> to the victim. <u>0 indicates the closest relationship and 8 the more distant relationship to the victim (with 9 indicating an unspecified relationship).</u>

**Note:** Where multiple categories apply, assign the code appearing highest on the list representing the closest relationship (ie 0 or closest to 0).

#### • 0 spouse or domestic partner

Ex-partner Ex-spouse

Partner (cohabitating)(noncohabitating)

#### 1 parent

Parent (cohabitating) (noncohabitating):

- adoptive (cohabiting)(noncohabiting)
- natural (cohabiting)(noncohabiting)
- step (cohabiting)(noncohabiting)
  Parent's partner, cohabitating:

• cohabitating

• NOS

Excludes: foster parent (.3)

parent's partner, noncohabiting (.4)

#### 2 other family member

Brother and or sister (half) (step)

Cousin Grandchild Grandparent In-law(s)

Niece and or nephew
Sibling (half) (step)
Son and or daughter (step)
Step sibling (brother)(sister)
Uncle and or aunt

# • 3 carer

Baby sitter Foster parent Health care-provider

Nursing home, hostel and boarding house carer

School teacher
Unrelated care giver

#### 4 acquaintance or friend

Co-student Colleague Date

Employer, employee and or co-worker

Family friend Flat mate
Neighbour

Parent's partner, noncohabiting

Room mate

**Excludes:** known to victim through official duty only (.5)

official authorities

Correctional services Immigration personnel

<u>Legal authority</u> Military personnel

Police Ranger Security guard Sheriff

Special constable

Note: Official authorities are persons granted authority over another person who, in the performance of their duty,

perpetrate assault, neglect or abuse.

**o** 6 person unknown to the victim

Stranger

**3** 7 multiple persons unknown to the victim

Gang Mob

other specified person

Patient in a health care facility

Prisoner or detainee

9 unspecified person

. . .

### **ACCIDENTS (V00-X59)**

#### TRANSPORT ACCIDENTS (V00-V99)

#### PEDESTRIAN INJURED IN TRANSPORT ACCIDENT (V00-V09)

#### **▼**2009

Includes: fall due to collision of pedestrian in transport accident

Excludes: collision of pedestrian on foot with another pedestrian on foot (W51):

· with subsequent fall (W03)

fall:

- · not due to collision with pedestrian or pedestrian conveyance (W02)
- · on or from:
- · escalator (W10.0)
- · same level involving adult walker with wheels (W01, W18.8)
- · travelator (W10.1)

. . .

#### ASSAULT (X85-Y09)

#### **▼**<del>2005,</del> 2008

Includes: homicide

injuries inflicted by another person with intent to injure or kill, by any means

**Note:** Intent cannot be assumed; it must be documented.

Excludes: injuries due to:

• legal intervention (Y35.-)

• operations of war (Y36.-)

#### **EVENT OF UNDETERMINED INTENT (Y10-Y34)**

<del>▼2005</del>

Note:

Codes from this category are designed for use when the intent is unspecified, unstated or cannot be determined. That is, the injuries are not specified as accidental (unintentional), self-inflicted with intent to self-harm, or assault.

Intent cannot be assumed; it must be documented.

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# **Australian Coding Standards**

### 2001 EXTERNAL CAUSE CODE USE AND SEQUENCING

. . .

Example 1:	
Patient was admitted with gastritis due to aspirin, taken as prescribed.	
Assign:	K29.70 Gastritis, unspecified, without mention of haemorrhage
	Y45.1 Salicylates causing adverse effects in therapeutic use
	Y92.23 Place of occurrence, health service area, not specified as this facility
Rationale:	K29.70 — ACS 0001 Principal diagnosis, ACS 1902 Adverse effects of drugs and radiotherapy
	Y45.1 — for the substance (aspirin) which caused the adverse effect ( <i>Directives</i> 1 and 2)
	Y92.23 — for the place of occurrence where the external cause occurred (Directives 1 and 2, and
	<u>Note 2)</u>

Example 2:	
Patient was adn	nitted with urticaria due to administration of serum vaccine at the general practitioner clinic.
Assign:	T80.6 Other serum reactions
	Y59.9 Vaccine or biological substance, unspecified causing adverse effects in therapeutic use
	Y92.23 Place of occurrence, health service area, not specified as this facility
Rationale:	T80.6 — ACS 0001 Principal diagnosis, ACS 1902 Adverse effects of drugs and radiotherapy
	Y59.9 — for the substance (serum vaccine) which caused the adverse effect ( <i>Directives</i> 1 and 2)
	Y92.23 — for the place of occurrence where the external cause occurred ( <i>Directives</i> 1 and 2, and
	<u>Note 2)</u>

Example 3:	
Patient was adn	nitted with scoliosis due to previous radiotherapy treatment for neuroblastoma.
Assign:	M96.5 Postradiation scoliosis
	Y84.2 Radiological procedure and radiotherapy as the cause of abnormal reaction, or of later
	complication, without mention of unintentional events at the time of the procedure
	Y92.23 Place of occurrence, health service area, not specified as this facility
Rationale:	M96.5 — ACS 0001 Principal diagnosis, ACS 1902 Adverse effects of drugs and radiotherapy
	Y84.2 — for the intervention (radiotherapy) which caused the adverse effect ( <i>Directives</i> 1 and 2)
	Y92.23 — for the place of occurrence where the external cause occurred ( <i>Directives</i> 1 and 2, and
	<u>Note 2)</u>

_	-	
Exam	nlc	\ /I •
LAGIII	nic	7

Patient was admitted from home with partial thickness burns to multiple areas of their right ankle (5 per cent BSA),

· ·	ver leg (4 per cent BSA). Burns were due to falling asleep too close to the radiator.
Assign:	T25.2 Partial thickness [blisters, epidermal loss] burn of ankle and foot
	T24.2 Partial thickness [blisters, epidermal loss] burn of hip and lower limb, except ankle and
	<u>foot</u>
	T31.00 Burns involving less than 10 per cent of body surface, 0-9 per cent or unspecified full
	thickness burns
	X16 Contact with hot heating appliances, radiators and pipes
	Y92.09 Place of occurrence, other and unspecified place in home
	<u>U73.2</u> While resting, sleeping, eating or engaging in other vital activities
Rationale:	T25.2, T24.2, T31.00 — ACS 0001 Principal diagnosis, ACS 1911 Burns
	X16 — for the external cause (contact with heating appliance) of the injury ( <i>Directives</i> 1 and 2)
	Y92.14 — for the place of occurrence where the injury occurred ( <i>Directives</i> 1 and 2)
	U73.2 — for the activity being undertaken when the external cause occurred ( <i>Directives</i> 1 and 2)

# 2009 PEDESTRIAN ACCIDENTS MODE OF PEDESTRIAN CONVEYANCE

### **Description(s)**

A pedestrian conveyance is a device which is designed primarily for, or being used at the time primarily for, conveying the person and is not a transport vehicle. These devices may be powered or nonpowered, and include scooters, roller-skates, wheelchairs, and skateboards.

Example 4:	
Patient was add	mitted with a distal fracture of the radius and ulna, following a fall from a powered skateboard.
Assign:	Injury code
	W02.1 Fall involving skateboard
Rationale:	W02.1 — for a fall involving a pedestrian conveyance (powered skateboard) not in collision with
	another pedestrian conveyance by following the Alphabetic Index: Fall/involving/skateboard(s)
	(Directive 4)

# 21. Factors influencing health status and contact with health services.

## 21.1 Social factors

See also 19.5 Adult and child abuse (neglect or maltreatment) 19.5 Adult and child abuse (neglect or maltreatment).

The collection of social and cultural determinants of health plays an important role in health care with amendments for Thirteenth Edition, continuing the work initiated in Twelfth Edition. Refinements across the classification address issues such as homelessness, workplace and cultural environments with the addition of Inclusion terms for context and consolidation of Indexing at lead term *Problem related to*.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

# PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO SOCIOECONOMIC AND PSYCHOSOCIAL CIRCUMSTANCES (Z55–Z65)

**▼**2119

Note: Block Z55–Z65 comprises a range of socioeconomic and psychosocial circumstances (ie social factors) that may affect health status or experience of care. These categories are provided for occasions when circumstances other than a disease, injury or external cause classifiable to A00–Y89 are recorded as diagnoses or problems.

<b>Z55</b>	Problems related to education and literacy
	Excludes: disorders of psychological development (F80–F89)
Z55.0	Illiteracy and low-level Problem related to literacy Illiteracy
Z55.1	Problem related to access to education—Schooling unavailable and unattainable Schooling unavailable or unattainable
<del>Z55.2</del>	Failed examinations
Z55.3	Problem related to achievement in education-Underachievement in school Failed examinations Underachievement in school
Z55.4	Problem in relationships with teacher and other students_Educational maladjustment and discord with teachers and classmates  Conflict or discord with teacher (instructor) or classmate  Educational maladjustment
	Excludes: problem with work colleague(s) (Z56.4-)
<b>♥</b> Z55.5	Problem related to level of health knowledge  Difficulty understanding health care related information NOS  Low health literacy

Includes: noncompliance with medical treatment and regimen due to lack of health knowledge

	Excludes: due to language barrier (Z60.3-)
Z55.8	Other problems related to education and literacy Inadequate teaching School refusal
Z55.9	Problems related to education and literacy, unspecified
<b>Z</b> 56	Problems related to employment and unemployment
	Excludes: occupational exposure to risk-factors (Z57) problems related to housing and economic circumstances (Z59)
Z56.0	Problem related to Unemployment, unspecified Unemployment NOS
Z56.1	Problem related to Cchange of job Problem with change of role or responsibility within current job
Z56.2	Problem related to Ithreat of job loss Perceived job instability
Z56.3	Problem related to Sstressful work schedule Difficult work schedule
<b>Z56.4</b>	Problem related to workplace relationships and culture-Discord with boss and workmates
<b>♥</b> Z56.41	Problem related to specified workplace relationships  Discord with manager, workmates or work colleagues  Inappropriate or unwelcome conduct by workmates  Uncongenial (unpleasant) workplace relationships
<b>♥</b> Z56.42	Problem related to workplace culture Uncongenial (toxic) (unpleasant) workplace culture
Z56.5	Problem related to difficult employment environment, not elsewhere classified Uncongenial work  Difficult employment:  • physical environment  • tasks and requirements  • terms and conditions  Uncongenial (unpleasant) work environment NOS
Z56.6	Other physical and mental strain related to employmentwork
Z56.7	Other and unspecified problems related to employment
<b>Z57</b>	Occupational exposure to risk-factors
Z57.0	Occupational exposure to noise
Z57.1	Occupational exposure to radiation
Z57.2	Occupational exposure to dust Occupational exposure to:  • asbestos (dust) NOS  • silica (dust) NOS
Z57.3	Occupational exposure to other air contaminants  Occupational bushfire smoke exposure
	Excludes: exposure to tobacco smoke (Z58.7)
Z57.4	Occupational exposure to toxic agents in agriculture Solids, liquids, gases or vapours
757 5	Occupational exposure to toxic agents in other industries

#### Solids, liquids, gases or vapours

Z57.9 Occupational exposure to unspecified risk-factors

**Z58** Problems related to physical environment

Excludes: occupational exposure (Z57.-)

Z58.0 Exposure to noise

Z58.1 Exposure to air pollution

Bushfire smoke exposure NOS

Exposure:

• asbestos (dust) NOS • silica (dust) NOS

Excludes: exposure to tobacco smoke (Z58.7)

Z58.8 Other problems related to physical environment

Problem with:

• physical environment change

• regulating environmental temperature

Excludes: problem related to living conditions (Z59.1)

Z58.9 Problems related to physical environment, unspecified

**Z59** Problems related to housing and financial economic circumstances

Excludes: inadequate drinking-water supply (Z58.6)

**Z59.0 Homelessness** 

**Z**59.00 Homelessness, not elsewhere classified

**Homelessness NOS** 

**♥**Z59.01 Sheltered homelessness

Includes: residing (in):

• boarding house

• hotel or motel

• temporary living situation:

• emergency

• transitional

• with friends or extended family

**♥**Z59.02 **Unsheltered homelessness** 

Residing in:

• public place

• structure not meant for human habitation

Problem related to living conditions Inadequate housing Z59.1

• ability to regulate household temperature (heating, cooling, air conditioning)

• utilities (electricity, gas, water services) Restriction (overcrowding) of living space Technical defects preventing adequate care

Unsatisfactory [uninhabitable] living conditions

Lack of heating

Restriction of space

Technical defects in home preventing adequate care

Unsatisfactory surroundings

Excludes: homelessness (Z59.0-)

housing instability (Z59.81)

problems related to physical environment (Z58.-)

Z59.2 Problem related to relationship with neighbours, lodgers and landlord Discord with neighbours, lodgers

and landlord

Discord with neighbours, lodgers or landlord

Z59.3 Problems related to living in residential institution

<del>Boarding-school resident</del>

Includes: aged care facility

boarding-school

Excludes: correctional institution (Z65.1)

institutional upbringing (Z62.2)

Z59.4 Lack of access to adequate food

Excludes: effects of hunger (T73.0)

inappropriate diet or eating habits (Z72.4)

malnutrition (E40-E46)

Z59.5 ExtremeProblem related to poverty

Extreme poverty

Z59.6 Problem related to low income Low income

Includes: reliance on income support

Z59.7 Insufficient social insurance and welfare support

**Excludes:** problem related to:

• low income (Z59.6) • poverty (Z59.5)

Z59.8 Other problems related to housing and financial economic circumstances

Foreclosure on loan
Isolated dwelling
Problems with creditors

259.81 Other problem related to housing circumstances

Isolated dwelling

Overcrowded living arrangements

Risk of homelessness

Stress related to multiple unwanted relocations

Excludes: stress related to moving house (Z63.79)

259.82 Other problem related to financial circumstances

**Bankruptcy** 

Economic circumstance affecting care

Financial strain or problem
Foreclosure on loan
Problems with creditors

Z59.9 Problems related to housing and financial economic circumstances, unspecified

Z60 Problems related to social and cultural environment

Z60.0 Problems of adjustment to life-cycle transitions

Adjustment to retirement [pension]

Difficulty dealing with life change

Empty nest syndrome

Problem with adjustment to:

- chronic health condition
- life phases NOS
- moving into new community (relocation)
- parenting (foster)

#### • retirement (pension)

#### Z60.1 Atypical parenting situation

Problems related to a parenting situation (rearing of children) with a single parent or other than that of two cohabiting biological parents.

#### Z60.2 Living alone

#### Z60.3 Problem related to cultural environment Acculturation difficulty

**Migration** 

Social transplantation

#### **♥**Z60.31 Problem related to migration culture

Cultural:

- deprivation
- differences
- shock

Language barrier

<u>Problems related to immigration NOS</u> Social transplantation due to migration

#### **♥**Z60.32 Problem related to Indigenous culture

Breakdown in community kinship relationships

Conflicting Indigenous cultural obligations with healthcare requirements

Disconnection with cultural:

- expression
- language
- self-determination

Lack of connection to Country

Includes: Aboriginal and/or Torres Strait Islander cultures

#### Z60.4 Social exclusion and rejection

Exclusion and rejection on the basis of personal characteristics, such as unusual physical appearance, illness or behaviour, gender identity or expression.

Social isolation

Excludes: target of adverse discrimination such as for racial or religious reasons (Z60.5)

#### Z60.5 Target of [perceived] adverse discrimination and persecution

Persecution or discrimination, perceived or real, on the basis of membership of some group (as defined by skin colour, religion, ethnic origin, <a href="mailto:sexual orientation">sexual orientation</a>, <a href="mailto:genderete">genderete</a>) rather than personal characteristics.

Includes: discrimination (perceived) based on:

- belief
- ethnicity
- gender
- group membership
- sexual orientation

#### Excludes: social exclusion and rejection (Z60.4)

#### Z60.8 Other problems related to social or cultural environment

**Bullying NEC** 

Cyberbullying NOS

Difficulty with cultural or religious beliefs NOS

Threatened violence NEC

#### Z60.9 Problems related to social or cultural environment, unspecified

Z61

#### Problems related to specified negative life events in childhood

▼ 1909

**Note:** The codes in this category describe specified adverse childhood events that potentially have a lasting impact

on health and wellbeing.

Excludes: current abuse, neglect or maltreatment-syndromes (T74.-)

#### Z61.0 Loss of love relationship [event] in childhood

Loss of an emotionally close relationship, such as that of a parent, a sibling, a very special friend or a loved pet, by death or permanent departure or rejection.

Excludes: with removal from home in childhood (Z61.1)

#### Z61.1 Removal from home [event] in childhood

Admission to a foster home, hospital or other institution causing psychosocial stress, or forced conscription into an activity away from home for a prolonged period.

#### Z61.2 Altered pattern of family relationships [event] in childhood

Departure of a family member or arrival of a new person into a family resulting in adverse change in child's relationships.

Arrival of a new person into a family resulting in adverse change in child's relationships. May include new marriage by a parent or birth of a sibling.

**Includes:** birth of a sibling

illness of parent or sibling in childhood new relationship or marriage by a parent

Excludes: resulting in:

- loss of love relationship in childhood (Z61.0)
- removal from home in childhood (Z61.1)

. . .

#### Z61.7 Problems related to Ppersonal frightening experience in childhood

Experience carrying a threat for the child's future, such as a kidnapping, natural disaster with a threat to life, injury with a threat to self-image or security, or witnessing a severe trauma to a loved one.

Excludes: events resulting in loss of self-esteem in childhood (Z61.3)

#### Z61.8 Other negative life events in childhood

#### Z61.9 Negative life event in childhood, unspecified

#### Z62 Other problems related to upbringing

Note: The codes in this category describe where there is a problem with the relationship between parent and child and are applied to the person (child) who experienced the upbringing.

Excludes: current abuse, neglect or other maltreatment syndromes (T74.-)

#### Z62.0 Inadequate parental supervision and control

Lack of parental knowledge of what the child is doing or where the child is; poor control; lack of concern or lack of attempted intervention when the child is in risky situations.

#### Z62.1 Parental overprotection

Pattern of upbringing resulting in infantilisation and prevention of independent behaviour.

Helicopter parenting

#### Z62.2 Institutional upbringing

Group foster care in which parenting responsibilities are largely taken over by some form of institution (such as residential nursery, orphanage, or children's home), or therapeutic care over a prolonged period in which the child is in a hospital, convalescent home or the like, without at least one parent living with the child.

Excludes: problem with boarding school (Z59.3)

#### Z62.3 Hostility towards and scapegoating of child

Negative parental behaviour specifically focused on the child as an individual, persistent over time and pervasive over several child behaviours (eg automatically blaming the child for any problems in the household or attributing negative characteristics to the child).

#### Z62.4 Emotional neglect of child

Parent talking to the child in a dismissive or insensitive way. Lack of interest in the child, of sympathy for the child's difficulties and of praise and encouragement. Irritated reaction to anxious behaviour and absence of sufficient physical comforting and emotional warmth.

Z62.5 Other problems related to neglect in upbringing Lack of learning and play experience 762.6 Inappropriate parental pressure and other abnormal qualities of upbringing Parents forcing the child to be different from the local norm, either sex inappropriate (eg dressing a boy in girl's clothes), age inappropriate (eg forcing a child to take on responsibilities above her or his own age) or otherwise inappropriate (eg pressing the child to engage in unwanted or too difficult activities). Parents forcing the child to be different from the local norm (eg forcing a child to take on responsibilities above their own age, pressing the child to engage in unwanted or too difficult activities). Z62.8 Other specified problems related to upbringing Problem related to (atypical) parenting (situation) (style) Z62.9 Problems related to upbringing, unspecified **Z63** Relationships and Oother problems related to primary support group, including family circumstances Excludes: current abuse, neglect or maltreatment syndromes (T74.-) problems related to: • negative life events in childhood (Z61.-) • upbringing (Z62.-) Z63.0 Problems in relationship with spouse or partner **T** 1909 Discord between partners resulting in severe or prolonged loss of control, in generalisation of hostile or critical feelings or in a persisting atmosphere of severe interpersonal violence (hitting or striking). Conflict, distress or disruption (threatened) in relationship (cohabitating) (noncohabiting): • civil union • de facto relationship • marriage significant other NOS **Excludes:** disruption of family by separation and divorce (Z63.5) Z63.1 Problems in relationship with parents or partner's parents and in-laws Problem in relationship with in-laws Z63.2 Problem with Inadequate family support Inadequate or lack of family support **Excludes:** lack of social support with parenting children (Z64.5) Z63.3 Absence of family member Z63.4 Disappearance and death of family member Assumed death of family member **Includes**: bereavement long term absence Disruption of family by separation and divorce **Z63.5** Estrangement Z63.6 Dependent family member relative needing care at home Z63.7 Stressful life events affecting family and household Anxiety (normal) about sick person in family **☼**Z63.70 Unspecified sStressful life events affecting family and household, unspecified Problem with alcohol misuse in family and household Alcoholism in family **☼**Z63.71 Problem with gambling in family and household Gambling in family **©**Z63.72

#### ©Z63.73 Problem with other substance misuse in family and household

Problem with illicit drug use in family and household

#### ©Z63.79 Other stressful life events affecting family and household

▼ 1909

Anxiety about sick person in family Health problems within family Ill or disturbed family member Isolated family or family member

Excludes: dependent family member needing care at home (Z63.6)

#### **Z63.8** Other specified problems related to primary support group <u>including family circumstances</u>

Family discord, distress or estrangement NOS
High expressed emotional level within family
Inadequate or distorted communication within family

#### ©Z63.81 Other specified problem related to family and household

Adult sibling relationship problem

Aged parent and adult child (carer) relationship problem

Family discord, distress or estrangement NOS
High expressed emotional level within family
Inadequate or distorted communication within family

#### ©Z63.82 Other specified problem related to other primary support group

Carer problems related to non-family carer:

• aged care

• NOS

Death of other primary support person (bereavement) (non family)

#### Z63.9 Problems related to primary support group, unspecified

#### Z64 Problems related to certain psychosocial circumstances

### Z64.0 Problems related to unwanted pregnancy

▼ 0050

Excludes: supervision of high-risk pregnancy due to social problems (Z35.7)

#### Z64.1 Problems related to multiparity

Excludes: problem related to child-rearing (Z64.5)

supervision of pregnancy with grand multiparity (Z35.4)

### Z64.2 Seeking and accepting physical, nutritional and chemical interventions known to be hazardous and

harmful

Excludes: substance dependence - see Alphabetic Index: Dependence/due to

#### Z64.3 Seeking and accepting behavioural and psychological interventions known to be hazardous and harmful

#### Z64.4 Problem related to relationship with counsellor Discord with counsellors

Discord with:

- probation officer
- social worker

#### **©**Z64.5 Problem related to child-rearing responsibilities

Lack of social support with parenting (child-rearing)

Unavailability of child care

**Includes**: admission for:

• early parenting training

• mothercraft

#### Z65 Problems related to other psychosocial circumstances

<u>Includes:</u> public or large scale traumatic events

<u>Excludes:</u> current injury — see Alphabetic Index

Z65.0 Conviction in civil and criminal proceedings without imprisonment Z65.1 Problem related to contact with correctional services. Imprisonment and other incarceration **Includes**: imprisonment or incarceration in custody awaiting trial or sentencing Z65.2 Problems related to release from prison Includes: need for prisoner reintegration support program Z65.3 Problems related to other legal circumstances Arrest Child custody or support proceedings Litigation **Proceedings:** • child custody • guardianship (adult) (child) Prosecution Z65.4 Victim of crime and terrorism Victim of torture Z65.5 Exposure to disaster, war and other hostilities Excludes: target of perceived discrimination or persecution (Z60.5) current injuries (S00–T98) related to: • exposure to forces of nature — see Alphabetic Index • other disasters — see Alphabetic Index • war or hostilities — see Alphabetic Index Disaster victim Displacement due to disaster Exposure to: • bushfire • destructive waters (flood) (tsunami) • disaster NOS • earth movements (earthquake) (landslide) • excessive: • forces of nature NOS • natural cold or heat • local (state) emergency • volcanic eruption **♥**Z65.52 Exposure to war Military personnel engaged in war activities Prisoner of war War victim (aide worker) (civilian) (media personnel) Exposure to other disasters or hostilities Exposure to civil military actions against government (attempted coup) (coup d'etat) State of emergency outside natural disasters Excludes: target of [perceived] discrimination or persecution (Z60.5) Z65.8 Other specified problems related to psychosocial circumstances

Problems related to unspecified psychosocial circumstances

Z65.9

#### PERSONS ENCOUNTERING HEALTH SERVICES IN OTHER CIRCUMSTANCES (Z70-Z76)

**Z72** 

#### Problems related to lifestyle and health behaviours

Includes: seeking and undertaking actions or behaviours known to be hazardous and harmful

Hazardous use is a pattern of substance use that increases the risk of harmful consequences for the user. In Note:

contrast to harmful use, hazardous use refers to patterns of use that are of public health significance despite

there being no the absence of any current disorder in the individual user.

Excludes: problem related to life-management difficulty (Z73.-)

problems related to:

• life management difficulty (Z73.)

socioeconomic and psychosocial circumstances (Z55 Z65)

#### Z72.0 Tobacco use, current

**V** 0050, 0503

Hazardous use

Use within the last month

Excludes: mental and behavioural disorders due to use of tobacco (F17.-)

harmful use of tobacco (F17.1) tobacco dependence (F17.2)

withdrawal from tobacco (nicotine) NOS (F17.3)

#### Z72.1 Alcohol use

**V** 0050, 0503

Hazardous use of alcohol

**Excludes:** mental and behavioural disorders due to use of alcohol (F10.-)

acute intoxication (F10.0) dependence (F10.2) harmful use (F10.1)

#### Z72.2 Drug use

**V** 0050, 0503

Hazardous use of drug(s)

A pattern of use of psychoactive substance(s) other than nicotine or alcohol that appreciably increases the Note:

risk of harmful physical or mental health consequences to the user or to others to an extent that warrants

attention and advice from health professionals.

Excludes: mental and behavioural disorders due to use of:

• cannabinoids (F12.-) • cocaine (F14.-) • drug(s) NOS (F19.-) • hallucinogens (F16.-) • opioids (F11.-)

• sedatives or hypnotics (F13.-) • stimulants, including caffeine (F15.-) • volatile solvents (glue) (petrol) (F18.-)

acute intoxication (F11-F16 with common fourth character .0 and F19.0) dependence (F11 F16 with common fourth character .2 and F19.2) harmful use (F11 F16 with common fourth character .1 and F19.1)

nondependence-producing substance use disorder (F55.-)

#### Z72.3 Lack of physical exercise

#### Z72.4 Problem with linappropriate diet and eating habits

Excludes: behavioural eating disorders of infancy or childhood (F98.2–F98.3)

eating disorders (F50.-)

lack of access to adequate food (Z59.4)

malnutrition and other nutritional deficiencies (E40–E64)

Z72.5 High-risk sexual behaviour

Includes: behaviour that increases the likelihood of sexually transmitted infection

Z72.6 Gambling and betting

**Excludes:** compulsive or pathological gambling (F63.0)

excessive gambling in manic episode (F30.-) gambling in dissocial personality disorder (F60.2) problem with gambling in family (household) (Z63.72)

Z72.8 Other problems related to health or lifestyle behaviours

Self-damaging behaviour

Excludes: mental and behavioural disorders due to the use of drug(s) (F10–F19)

Z72.9 Problems related to health or lifestyle behaviours, unspecified

Z73 Problems related to life-management difficulty

Excludes: problems related to socioeconomic and psychosocial circumstances (Z55-Z65)

• • •

Z74 Problems related to care-provider dependency

<del>▼ 2119</del>

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<del>▼2119</del>

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- - - occupational Z57.3
- - disaster NEC Z65.59
- - - natural Z65.51
- - discrimination Z60.5
- - dust NEC Z58.1
- - - occupational Z57.2
- - extreme temperature (environmental) Z58.8
- - - occupational Z57.6
- - hostilities (civil military actions) (coup) NEC Z65.59
- - - war Z65.52
- - noise Z58.0
- - - occupational Z57.0
- - occupational risk factor Z57.9
- - - specified NEC Z57.8
- - persecution Z60.5
- - pollution NEC (see also Problem related to/exposure/by type) Z58.5
- - - soil Z58.3
- - - water Z58.2
- - radiation NEC Z58.4

    - - - occupational Z57.1

- - silica Z58.1
- - - occupational Z57.2
- - terrorism Z65.4
- - tobacco (passive) (smoke) Z58.7
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- - - agricultural Z58.5
- - - - occupational Z57.4
- - - occupational NEC Z57.5
- - vibration Z58.8
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- - - occupational Z57.7
- - war Z65.52
- eye H57.9
- failed examinations (school) Z55.3Z55.2
- family Z63.9
- - specified NEC Z63.81Z63.8
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- - bankruptcy Z59.82
- - difficulty with creditors Z59.82
- - foreclosure on loan Z59.82
- - inadequate (low) income Z59.6
- - poverty (extreme) NEC Z59.5
- - reliance on income support Z59.6
- - specified NEC Z59.82<del>Z59.8</del>
- food insecurity Z59.4
- foreclosure on loan Z59.82Z59.8
- foster child (welfare custody) Z63.8
- - relationship within family Z63.81
- - removal from home event in childhood Z61.1
- frightening experience(s) in childhood Z61.7
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- - female N94.9
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- guardianship Z65.3
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- - knowledge level (low) Z55.5
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- hearing H91.9
- - expressed emotional level within family Z63.81
- - risk environment (physical) NEC Z58.9
- - - occupational NEC Z57.9
--- specified NEC Z57.8
- - specified NEC Z58.8
- homelessness Z59.00Z59
- - risk of Z59.81
- - sheltered Z59.01
- - unsheltered (residing in) Z59.02
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- housing Z59.9
- - isolated dwelling Z59.81Z59.8
- - lack of utilities (electricity) (gas) (water supply) Z59.1
- - living conditions (contamination) (damp) (mouldy) (overcrowded) Z59.1
- - multiple relocations (unwanted) Z59.81
- - residential institution (living in) Z59.3
- - restricted living space Z59.1
- - specified NEC Z59.81<del>Z59.8</del>
- - technical defects (leaking) Z59.1
- humiliating experience in childhood Z61.3
- identity (of childhood) F93.8
- illness of parent affecting child Z61.2
- impaired mobility (function) NEC R26.8
- - requiring care provider Z74.0
- imprisonment or incarceration Z65.1
- - family member Z63.79
- inadequate teaching, affe
- - achievement in school Z55.3
- - communication within family Z63.81
```

- - economic resources NEC Z59.82

- family support Z63.2
- financial resources Z59.82
- food access (supply) NEC Z59.4

- - heating in home Z59.1

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- - housing — see Problem related to/housing
- - income Z59.6
- - literacy — see Problem related to/literacy
- - material resources Z59.82
- - parental supervision or control of child Z62.0
- - space in home Z59.1
- - supervision of child by parent Z62.0
- - teaching, affecting education Z55.8
- - welfare support Z59.7
- inappropriate (unwelcome) parental pressure Z62.6
- - conduct by work colleagues Z56.41
- - parental (adoptive) (biological) (foster) (legal)
- - - pressure on child Z62.6
- - - qualities of upbringing for child Z62.6
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    - parent affecting child Z61.2

- in-laws Z63.1
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- intrafamilial communication Z63.81Z63.8
- isolated
- - dwelling Z59.81
- - family member (social) Z63.79
- lack of — see also Problem related to/inadequate
- - connection to Indigenous ancestral community land Z60.32
- - physical exercise Z72.3
- - play experience in childhood Z62.5
- - shelter Z59.02
- support with parenting (child care) (child-rearing) Z64.5
- landlord Z59.2
- language (developmental) F80.9
- - barrier NEC Z60.31
- - - Indigenous Z60.32
- learning (developmental) F81.9
- legal <u>circumstances (justice system)</u> Z65.3
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- - - with imprisonment Z65.1
- life-cycle (phase) transition Z60.0
- life-management Z73.9
- - specified NEC Z73.8
- lifestyle Z72.9
   alcohol use Z72.1
  drug use Z72.2
  gambling Z72.6
  high-risk sexual behaviour Z72.5
  inappropriate eating habits Z72.4
   self-damaging behaviour NEC Z72.8
- - specified NEC Z72.8
   tobacco use Z72.0
- literacy, low (traditional) Z55.0-Z55.9
- - health Z55.5
<del>- - low level Z5</del>5.0
   specified NEC Z55.8
- litigation Z65.3
- living (in)
- - alone <del>Z60.2</del>— see Problem related to/by type
   in residential institution (boarding school) Z59.3
- - residential institution (aged care facility) (asylum seekers centre) (boarding school) (immigration detention centre) Z59.3
- lodgers Z59.2
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- loss (of) love
- - job Z56.0
- - relationship NEC Z65.8
- - - family Z63.81
- - - love, in childhood (event) (family member) (friend) (pet) Z61.0
- - - social support (friend) Z63.82
- - self-esteem, in childhood Z61.3
- maladjustment (life change) (to)

    - child-rearing responsibilities Z64.5

- - chronic health condition Z60.0
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- - conjugal (civil union) (de facto) Z63.0

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- - life-cycle (phase) transition Z60.0
- - marital (civil union) (de facto) Z63.0
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    gender identity F66
- marriage (civil union) (conjugal) (de facto) Z63.0
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· - - gender identity F66
- - - separation or divorce Z63.5
- mastication K08.88
- medical
- - care, within family Z63.6
- - facilities Z75.9
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- mental F48.9
- - strain or stress, work related Z56.6
- migration (immigration) Z60.31
- multiparity NEC Z64.1
- multiple housing relocations (unwanted) Z59.81
- musculoskeletal system NEC R29.89
- negative life events in childhood Z61.8Z61.9
- - altered pattern of family relationships Z61.2
- - frightening experience Z61.7
- neglect in childhood Z62.5
- - emotional Z62.4
- neighbour Z59.2
- neurological NEC R29.88
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- new person in family, in childhood (step-parent) step-parent, affecting child Z61.2
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- - neglect of child Z62.5
--- emotional Z62.4
- - overprotection (of child by parent) Z62.1
- - scapegoating, affecting child Z62.3
- parent-child relationship — see Problem related to/relationship(see also Problem/negative life events in childhood) Z61.9
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- phase-of-life transition, adjustment Z60.0
- physical (risk-factors)-environment Z58.9
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--- occupational Z57.9
- - - - specified NEC Z57.8
- - - specified NEC Z58.8
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   - specified NEC Z57.8
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- poverty (extreme) NEC Z59.5
- pregnancy (unwanted) Z64.0
- presence of sick or disabled (dependent) handicapped person in family or household Z63.79
- - needing care at home Z63.6
- primary support group (carer)(family) Z63.9
- - specified (non-family) (support provider) NEC Z63.82Z63.8
- - - related to family or household Z63.81
- probation officer Z64.4
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- psychosexual (development) disorder F66
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- - specified NEC Z65.8
- refugee meaning forced migration see Problem related to/displacement from home due to
- relationship (with)
- - adult children (carer to aged parent) (guardian) Z63.81
- - boss (employer) Z56.41
- - carer (aged care) (support provider)
- - family member Z63.81
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- -- child-parent (see also Problem/negative life events in childhood) Z61.9
- --- relating to upbringing (see also Problem/upbringing) Z62.8
- - childhood F93.8
- --- with parent, relating to upbringing see Problem related to/upbringing
- - classmates Z55.4
- - colleagues Z56.41
- - co-tenants (flatmates) Z59.2
- - counsellor Z64.4
- - employer Z56.41
- - family member Z63.81
- - in-laws Z63.1
- - landlord Z59.2
- - lodgers Z59.2
- - manager (employer) Z56.41
- - marital (civil union) (conjugal) (de facto) Z63.0
- - divorce causing disruption of family Z63.5
- - neighbours Z59.2
- - other students Z55.4
- - parent(s) Z63.1
- - during upbringing (childhood) Z62.8
- - partner's (in-laws) Z63.1
- -- partner see also Problem related to/relationship/spouse or partner
- - work related Z56.41
- - primary support group member (non-family) Z63.82
- - family member Z63.81
- - probation officer Z64.4
- - sibling
- - in adulthood Z63.81
- - rivalry in childhood Z61.2
- - social worker Z64.4
- - spouse or partner (civil union) (conjugal) (current) (de facto) (domestic) (former) Z63.0
- - separation or divorce causing disruption of family Z63.5
- - teacher (instructors) Z55.4
- - workmates Z56.41
- - workplace (uncongenial) (unpleasant) Z56.41
- release from prison (parole) Z65.2
- removal from home in childhood (to foster home or institution), affecting child Z61.1
- residing in
- -- public place (footpath) (park) (street) Z59.02
- - structure not meant for human habitation (abandoned building) (car) (swag) (tent) (unheated garage) Z59.02
- school refusal Z55.8
- seeking and accepting known hazardous and harmful
- -- behavioural or psychological interventions Z64.3
- -- chemical, nutritional or physical interventions Z64.2
- self damaging Z72.8
- sexual function (nonorganic) F52.9
- sick or disabled (dependent) person in family or household Z63.79
- - needing care at home Z63.6
- sight (see also Impaired, impairment/visual) H54.9
- smell (see also Anosmia) R43.1
- - and taste (mixed) R43.8
- social
- - discrimination or persecution (gender) (perceived) (racial) (religion) Z60.5
- - environment Z60.9
- - specified NEC Z60.8
- - exclusion and rejection Z60.4
- - transplantation Z60.31
- - worker Z64.4
- speech NEC R47.8
- - developmental F80.9
- spouse (civil union) (current) (de facto) (former) Z63.0

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- stress, stressful
- - life event(s) affecting family and household Z63.70
--- specified NEC Z63.79
 - mental or physical, work-related Z56.6
- - work schedule Z56.3
- substance misuse in family or household (chemicals) (drugs) NEC Z63.73
- - alcohol Z63.71
- - personal use (hazardous) Z72.2
- swallowing R13
- taste R43.2
- - and smell (mixed) R43.8
- threatened job loss Z56.2
- tobacco use NEC Z72.0
- unavailable
- - child care affecting medical care of parent (carer) Z64.5

    - - schooling Z55.1

- uncongenial workplace

    - - culture Z56.42

- - environment Z56.5
 - - relationships Z56.41
- underachievement in school Z55.3
- unemployment Z56.0
- - threatened Z56.2
- unpleasant workplace — see Problem related to/uncongenial workplace
- unsatisfactory living conditions (cooling) (heating) (see also Problem related to/housing) Z59.1
- unwanted pregnancy Z64.0
- upbringing (with) Z62.9
- - atypical NEC Z62.8

    - hostility towards child Z62.3
    - inadequate parental supervision or control of child Z62.0

- - inappropriate parental pressure Z62.6
- - institutionalisation, affecting child Z62.2
- - lack of learning or play experience in childhood Z62.5
- - neglect Z62.5
- - - emotional Z62.4
- - overprotection Z62.1
- - parental
- - - hostility towards child Z62.3
- - - neglect of child Z62.5
- - - emotional Z62.4
- - - overprotection Z62.1
- - - scapegoating affecting child Z62.3
- - specified NEC Z62.8
- urinary system NEC N39.9
- voice production R47.8

    work — see Problem related to/employment<del>Z56.7</del>

 - conditions NEC Z56.5
   mental strain Z56.6
-- physical strain Z56.6
  schedule (stressful) Z56.3
Prosecution, anxiety concerning Z65.3
S
Scapegoating, affecting child Z62.3
Seeking and accepting known hazardous and harmful — see also Problem related to/by type
- behavioural or psychological interventions Z72.8-Z64.3
- chemical, nutritional or physical interventions Z72.8Z64.2
Sick R69
- or disabled (dependent) handicapped person in family or household Z63.79
- - needing care at home Z63.6
- sinus (syndrome) I49.51
Smoke, smoking — see also Tobacco
- exposure to tobacco (involuntary) (passive) (secondhand) (sidestream) Z58.7
Smoker's
Social
- acculturation difficulty Z60.31
```

- exclusion Z60.4

```
- - due to discrimination or persecution (perceived) Z60.5
- migrant Z59.0
-- acculturation difficulty Z60.3
- rejection Z60.4
- - due to discrimination or persecution Z60.5
- role conflict NEC Z73.5
- skills inadequacy NEC Z73.4
- transplantation Z60.3
Т
Trait(s)
- type A personality Z73.1
Trance R41.8
Transfusion
- twin-to-twin O43.0
- - affecting fetus or newborn P02.3
Transient (meaning homeless) (___ see also condition) Z59.0
 meaning homeless — see Problem related to/homelessness
Translocation
U
Use (of)
- harmful (current disorder in individual user)
- - alcohol F10.1
- - analgesics F55.2
- - antacids F55.3
- - antidepressants F55.0
- - drugs — code to F11-F19 with fourth character .1
- hazardous, substance (public health significance) (risk of harm) NEC Z72.8
- - alcohol Z72.1
- - drug Z72.2
- - tobacco Z72.0
- insulin for a long term (current) Z92.22
- medicaments for a long term (current) NEC Z92.28
- tobacco Z72.0
Vacuum
- in sinus (accessory) (nasal) J34.8
Vagabond's disease B85.1
Vibration
- exposure (occupational) Z57.7
- vertigo T75.2
Vibrio vulnificus as cause of disease classified to other chapters B96.82
Victim (of)
- bushfire Z65.51
- crime Z65.4
- disaster <u>NEC</u> <u>Z65.59</u><u>Z65.5</u>
-- natural <u>Z65.51</u>
- terrorism Z65.4

    torture NEC Z65.4

- war Z65.52Z65.5
Vidal's disease L28.0
Violence, (physical) (suspected) R45.6
- domestic T74.1
- family T74.1
```

- sexual T74.2

- threatened NEC Z60.8

IHACPA Reference to Changes for ICD-10-AM/ACHI/ACS Thirteenth Edition 2025

- - by partner, family member or person with carer responsibilities T74.8

victim of — see also Abuse/by type
 - crime, by unknown perpetrator Z65.4
 Violent behaviour (perpetrator) R45.6
 Viosterol deficiency (see also Deficiency/calciferol) E55.9

### **Australian Coding Standards**

#### 2119 SOCIOECONOMIC AND PSYCHOSOCIAL CIRCUMSTANCES

Example 2:	
	d with a depressive episode for mental health care. The depressive episode was documented by the
clinician to be due to severe stress resulting from unemployment and financial problems with creditors.	
Assign:	F32.90 Depressive episode, unspecified, not specified as arising in the postnatal period
	Z56.0 Problem related to unemployment
	Z59.82 Other problem related to financial circumstances
Rationale:	F32.90 — ACS 0001 Principal diagnosis
	Z56.0 — for unemployment problem documented by the clinician (Directive 1)
	<u>Z59.82</u> — for financial problem documented by the clinician (Directive 1)

# 21.2 Voluntary assisted dying

The introduction of voluntary assisted dying (VAD) across Australia has led to the creation of codes in both ICD-10-AM and ACHI based on clinical advice.

#### **ICD-10-AM Tabular List**

**CHAPTER 21** 

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

# PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES AND HEALTH CARE (Z40–Z54)

•••

**Z51.6** Desensitisation to allergens

Excludes: allergen challenge (Z41.8-)

•••

©Z51.7 Supervision of voluntary assisted dying [VAD] substance administration

**▼** 0050

Voluntary assisted dying [VAD] is the decision to use medical assistance to end one's life due to an advanced medical condition. The VAD substance may be self or practitioner administered.

<u>Code first the underlying cause</u> — see Alphabetic Index.

...

### **ICD-10-AM Alphabetic Index**

#### **SECTION I:**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

# S

#### Supervision (of)

- child NEC Z76.22
- - awaiting adoption or foster placement Z76.21
- contraceptive method previously prescribed Z30.5
- dietary Z71.3
- infant NEC Z76.22
- - abandoned (foundling) Z76.1
- - awaiting adoption or foster placement Z76.21
- initial episode for staged medical abortion Z32.2
- lactation (without lactation disorder) Z39.1
- pregnancy (high-risk) see Pregnancy/supervision
- voluntary assisted dying substance administration Z51.7

#### Supplementary

- codes for chronic conditions

#### **ACHI Tabular List**

#### **CHAPTER 19**

# INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820-1925) DIAGNOSTIC INTERVENTIONS

ASSESSMENT, CONSULTATION, INTERVIEW, EXAMINATION, EVALUATION

. . .

1824

Other assessment, consultation, interview, examination or evaluation

96278-00 Assessment for voluntary assisted dying [VAD]

Assessment by an authorised practitioner for eligibility to participate in the voluntary assisted dying process.

**Note**: This code does not include administration of the voluntary assisted dying substance.

96037-00 Other assessment, consultation or evaluation

Assessment NOS Consultation NOS Evaluation NOS Interview NOS

. . .

# **ACHI Alphabetic Index**

#### Assessment (of) 96037-00 [1824]

<u>- for</u>

..

- - voluntary assisted dying (VAD) 96278-00 [1824]
- activities of daily living 96021-00 [1822]
- ageing 96023-00 [1824]
- alcohol use 96034-00 [1823]

### 21.3 Convalescence

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in ICD-10-AM and the ACS including a refinement to the ACS title:

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

. . .

Z48 Other surgical follow-up care

. . .

Z48.8 Other specified surgical follow-up care

**V** 2103

Post operative:
• acute care
• aftercare

Z48.9 Surgical follow-up care, unspecified

. . .

Z51.8 Other specified medical care

Excludes: respite care (Z75.5)

**©**Z51.81

**Apheresis** 

▼ 0030

Healthy donor admitted to donate cells for infusion into another person

Allogeneic apheresis

Excludes: autologous apheresis - code to condition - see Alphabetic Index

prophylactic therapy (plasmapheresis) for incompatible organ transplant (Z29.1)

**©**Z51.88

Other specified medical care

**▼** 2103

Aftercare following medical treatment

Excludes: postsurgical aftercare (Z48.8)

Z51.9 Medical care, unspecified

• • •

Z54 Convalescence

**▼** 2117

Convalescent care occurs when a patient does not require further complex assessment or stabilisation but continues to require care over an indefinite period.

Z54.0 Convalescence following surgery

Excludes: postsurgical aftercare (Z48.8)

### **Australian Coding Standard**

### 2103 ADMISSION FOR POST ACUTE CAREAFTERCARE

#### Directive(s)

• • •

4. Do not assign a code from category Z54 Convalescence for post acute care.

. . .

#### Note(s)

1. The terms 'post acute care' or 'aftercare' **do not** have to be documented to assign Z48.8 *Other specified surgical follow-up care* or Z51.88 *Other specified medical care*.

## 21.4 Ageing

To align with international classifications and current terminology the code title of R54 *Senility* has been revised to *Ageing associated decline*. Refinements have also been undertaken to R41.8 *Other and unspecified symptoms and signs involving cognitive functions and awareness* to provide a specific code for Age associated cognitive decline.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 18**

SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED (R00-R99)

SYMPTOMS AND SIGNS INVOLVING COGNITION, PERCEPTION, EMOTIONAL STATE AND BEHAVIOUR (R40–R46)

. . .

R41.8 Other and unspecified symptoms and signs involving cognitive functions and awareness

Excludes: due to general medical condition (F06.7)

●R41.81 Age associated cognitive decline

Age related cognitive impairment

©R41.89 Symptoms and signs involving cognitive functions and awareness, not elsewhere classified

. . .

#### **GENERAL SYMPTOMS AND SIGNS (R50–R69)**

R53

#### Malaise and fatigue

Asthenia NOS

Debility:

- chronic
- NOS

General physical deterioration

Lethargy Tiredness

Excludes: ageing associated (senile):

- asthenia (R54)
- debility (R54)
- decline (R54)
- exhaustion and fatigue (R54)

debility:

- congenital (P96.9)
- senile (R54)

exhaustion and fatigue (due to)(in):

- combat (F43.0)
- excessive exertion (T73.3)
- exposure (T73.2)
- heat (T67.-)
- neurasthenia (F48.0)

fatigue syndrome:

- NOS (F48.0)
- postviral (G93.3)

R54

#### Senility Ageing associated decline

Ageing associated (senile):

- decline in intrinsic capacity
- exhaustion and fatigue
- frailty

Old age without mention of psychosis

Senescence without mention of psychosis

Senile:

- asthenia
- debility

*Use additional code (Z74.-) to identify problems related to care-provider dependency.* 

Excludes: senile psychosis senile dementia (F03.0-)

### **ICD-10-AM Alphabetic Index**

#### **SECTION I:**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

Akinesia R29.88

Akinetic mutism R41.8R41.89 Akureyri's disease G93.3

Anosmia (see also Disturbance/sensation) R43.0

- hysterical F44.6

Anosognosia R41.8R41.89 Anovulatory cycle N97.0

Asthenia, asthenic R53

- age related R54
- cardiac (see also Failure/heart) 150.9

```
- - psychogenic F45.31
C
Change(s) (of)
- circulatory 199
- cognitive NEC R41.8R41.89
- - age related R41.81
- - - due to general medical condition F06.7
- - due to general medical condition F06.7
   due to or secondary to
--- age (age-associated) R41.8

    general medical condition F06.7

- - mild (organic) F06.7
- colour, tooth, teeth
D
Debility (chronic) (general) R53
- age related R54
- congenital or neonatal NEC P96.9
- nervous F48.0
- old age R54
- senile R54
Decalcification
Decline (general) (in) (see also Debility) R53
- age related R54
- cognitive NEC R41.8R41.89
- - age related R41.81
- - - due to general medical condition F06.7
- - due to general medical condition F06.7
  due to or secondary to
    age (age-associated) R41.8
   - general medical condition F06.7
- - mild (organic) F06.7
- intrinsic capacity, age related R54
Decompensation
Disorder (of)
- coccyx NEC M53.3
- cognitive (mild) (moderate) F06.7
- - due to or secondary to
- - - age (age-associated age associated) R41.8R41.81
- - - general medical condition F06.7
- - severe — see Dementia
- colon K63.9
- persisting
- - amnestic
- - - alcoholic F10.6
- - - sedative-induced F13.6-
- - cognitive impairment NEC R41.8R41.89
- - - due to
- - - - age (age associated) R41.81
- - - - alcohol F10.7
- - - - anxiolytic F13.7-
- - - cannabis F12.7
```

#### Ε

Exhaustion (physical) NEC R53

- - - - hallucinogens F16.7-

- age related R54
- battle F43.0
- cardiac (see also Failure/heart) I50.9

- - - - gamma hydroxybutyrate (GHB) F13.71 - - - - general medical condition F06.7

- delirium F43.0

#### F

Fatigue (see also Exhaustion) R53

- age related R54
- combat F43.0
- heat (transient) T67.6

Functioning, intellectual, borderline R41.8R41.89

Fundus — see condition

Fungaemia NEC B49

#### Impaired, impairment (function)

- auditory discrimination H93.2
- carbohydrate tolerance (glucose) see Hyperglycaemia, hyperglycaemic/intermediate
- cognitive NEC R41.8R41.89
- - age related R41.81
- - due to general medical condition F06.7
   - persisting (due to)
- - age (<del>age</del> sociatedage associated) R41.8R41.81
- - alcohol F10.7
- myocardium, myocardial (see also Insufficiency/myocardial) I50.9
- neurocognitive NEC (see also Impaired/cognitive) R41.8R41.89
- rectal sphincter R19.89

#### N

#### **Narcosis**

- carbon dioxide (respiratory) R06.8
- due to drug
- - correct substance properly administered R41.8R41.89
- - overdose or wrong substance given or taken T40.6

#### Symptoms specified NEC R68.8

- factitious, self-induced F68.1
- involving
- - abdomen NEC R19.89
- - appearance NEC R46.8
- - awareness NEC R41.8R41.89
- - behaviour NEC R46.8
- - cardiovascular system NEC R09.88
- - chest NEC R09.89
- - circulatory system NEC R09.88
- - cognitive functions NEC R41.8R41.89
- - age related R41.81
- - - due to general medical condition F06.7
- - development NEC R62.8
- - digestive system NEC R19.89

#### Т

Tramp Z59.0

Trance R41.8R41.89

- hysterical F44.3

Transection, trunk (abdomen) (thorax) T05.8

## 21.5 Awaiting admission elsewhere

The classification has been expanded in ICD-10-AM at category Z75 *Problems related to medical facilities and other health care* to enable the data capture for patients waiting for support services and admission to adequate facilities.

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00–Z99)

# PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES AND HEALTH CARE (Z40–Z54)

. . .

Z75	Problems related to medical facilities and other health care
Z75.0	Medical services not available in home
	Excludes: no other household member able to render care (Z74.2) respite care (Z75.5)
<b>Z</b> 75.1	Person awaiting admission to adequate facility elsewhere
▼ 2117	Includes: temporary evacuees
	Use additional code (Z55–Z65) to identify socioeconomic and psychosocial circumstances and problems.
<b>©</b> Z75.10	Person awaiting admission to acute hospital
<b>≎</b> Z75.11	Person awaiting admission to residential aged care service Nursing home
<b>©</b> Z75.12	Person awaiting admission to psychiatric facility/unit
<b>⊙</b> Z75.13	Person awaiting admission to rehabilitation facility/unit
<b>©</b> Z75.14	Person awaiting admission to palliative care facility/unit
<b>⊙</b> Z75.15	Person awaiting admission to specialist disability accommodation facility/unit  Specialist disability accommodation includes housing designed for people with extreme functional impairment or very high needs.
	Excludes: modification to an existing home (Z75.21)
<b>⊙</b> Z75.18	Person awaiting admission to other health care facility, not elsewhere classified Early parenting centre Hostel Mothercraft facility
<b>≎</b> Z75.19	Person awaiting admission to adequate facility elsewhere, unspecified

#### Z75.2 Other waiting period for investigation and treatment

#### Waiting period for disability support services **⊘**Z75.21

Includes: awaiting arrangement or processing (assessment) of services related to disability

*Use additional code (Z75.1-) to identify person awaiting admission elsewhere.* 

**♥**Z75.22 Waiting period for aged care support services

Includes: awaiting arrangement or processing (assessment) of services related to aged care

*Use additional code (Z75.1-) to identify person awaiting admission elsewhere.* 

**©**Z75.29 Waiting period for investigation and treatment, not elsewhere classified

Unavailability and inaccessibility of healthcare facilities Z75.3

**Excludes:** bed unavailable (Z75.1-)

#### **ICD-10-AM Alphabetic Index**

#### Α

#### **Awaiting**

- admission (to)
- - psychiatric facility/unit Z75.12
- - rehabilitation facility/unit Z75.13
- - residential aged care service Z75.11
- specialist disability accommodation service Z75.15
   specified health care facility NEC Z75.18
- adoption Z76.21

#### Inaccessible, inaccessibility

- health care NEC Z75.3
- - due to
- - remoteness from facility Z75.3
- - waiting period (for) Z75.2
- - - for admission to facility elsewhere Z75.19
- - - acute hospital Z75.10
- - - early parenting centre Z75.18
- - - hostel Z75.18
- - - mothercraft facility/unit Z75.18
- - - nursing home Z75.11
- - - other health care facility NEC Z75.18
- - - palliative care facility/unit Z75.14
- - - psychiatric facility/unit Z75.12
- - - rehabilitation facility/unit Z75.13
- - - residential aged care service Z75.11
- - - specialist disability accommodation service Z75.15
- - - arrangement of support services NEC Z75.29
- - - aged care Z75.22
- - - disability Z75.21
- other helping agencies Z75.40



#### Unavailability (of)

- medical facilities (at) Z75.3
- - due to
- - investigation by social service agency NEC Z75.29 Z75.2
- - - aged care support services Z75.2
- - - disability support services Z75.21
- - lack of services at home Z75.0
- - remoteness from facility Z75.3

- - - waiting list Z75.1-



Waardenburg's syndrome (with albinism) E70.3

Waiting list, person on Z75.1-

- undergoing social service agency investigation NEC Z75.2 Z75.29
- - aged care support services Z75.22
- - disability support services Z75.21

Waldenström

## 21.6 Factors influencing health status

Expansion of ICD-10-AM category Z74 *Problems related to care-provider dependency* has been undertaken to improve identification of need for assistance in areas of functional decline.

Application of the ACS template has also led to the following refinements in ICD-10-AM, ACHI and the ACS:

#### **ICD-10-AM Tabular List**

#### **CHAPTER 21**

# FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00-Z99)

PERSONS WITH POTENTIAL HEALTH HAZARDS RELATED TO SOCIOECONOMIC AND PSYCHOSOCIAL CIRCUMSTANCES (Z55–Z65)

**▼** 2119

Z58

Problems related to physical environment

Excludes: occupational exposure (Z57.-)

Z58.0 Exposure to noise

. . .

Z58.6 Inadequate drinking-water supply

Excludes: effects of thirst (T73.1)

Z58.7 Exposure to tobacco smoke

**▼** 0050, 2118

Secondhand smoke (exposure to tobacco smoke) is also known as environmental tobacco smoke (ETS), and the process of breathing it in is known as passive smoking or involuntary smoking and includes both exhaled mainstream smoke and sidestream smoke.

Passive (involuntary) smoking

Includes: exposure to secondhand tobacco smoke (from):

- cigarette
- cigars
- pipe
- waterpipe (hooka) (narghile) (shisha)

Excludes: electronic nicotine delivery systems (e-cigarettes) (vapes) — omit code

mental and behavioural disorders due to the use of tobacco (F17.-)

newborn affected by maternal use of tobacco (P04.2) personal history of tobacco use disorder (Z86.43)

tobacco use (Z72.0)

Z58.8 Other problems related to physical environment

Z58.9 Problem related to physical environment, unspecified

...

#### PERSONS ENCOUNTERING HEALTH SERVICES IN OTHER CIRCUMSTANCES (Z70-Z76)

. . .

## Z74

#### Problems related to care-provider dependency

<del>▼ 2119</del>

Use additional code (Z55–Z65) to identify socioeconomic and psychosocial circumstances and problems.

**Excludes:** dependence on enabling machines or devices NEC (Z99.-) respite care (Z75.5)

Z74.0 Need for assistance due to reduced mobility with mobility

Assistance required with:

- balance
- walking

Excludes: bedfast (R26.3) chairfast (R26.3)

Z74.1 Need for assistance with personal care

Assistance required with:

- dressing
- eating
- personal hygiene

Z74.2 Need for assistance at home and no other household member able to render care

Health services provided because no one available to provide care at home

Need for care provider (temporary) because no other household member able to render care

Includes: delayed discharge due to need for care at home

Z74.3 Need for continuous supervision

Need for care provider (ongoing) because continuous supervision required

- Z74.8 Other problems related to care-provider dependency
- Z74.9 Problems related to care-provider dependency, unspecified

Issues with activities of daily living NOS, with need for care provider support

Z75

Problems related to medical facilities and other health care

..

#### Z75.4 Unavailability and inaccessibility of other helping agencies

©Z75.40 Unavailability and inaccessibility of helping agency, unspecified

©Z75.41 Unavailability and inaccessibility of residential aged care service

**▼** 21052117

Long term nursing home resident

Admission as long term:

- · aged care facility resident
- nursing home resident

Excludes: person awaiting admission to residential aged care service (Z75.11)

©Z75.49 Unavailability and inaccessibility of other specified helping agency

#### Z75.5 Respite care

**▼** 2117

Respite care is an episode where the primary reason for admission is the short-term unavailability of the usual carer. The most common reason for respite care is to enable a carer to have 'respite' from the caring role, or for respite for the patient.

Provision of health care facilities to a person normally cared for at home, in order to enable relatives/carers to take a break or vacation

Use additional code (Z55-Z65) to identify socioeconomic and psychosocial circumstances and problems.

Use additional code (Z75.1-) to identify person awaiting admission elsewhere.

#### ©Z75.6 Transfer for suspected condition

**V** 0012, 0050

Z75.8 Other problems related to medical facilities and other health care

Z75.9 Unspecified problems related to medical facilities and other health care

• • •

### **ICD-10-AM Alphabetic Index**

#### **SECTION I:**

#### ALPHABETIC INDEX OF DISEASES AND NATURE OF INJURY

#### C

Care (following) (for) (of)

...

- preparatory
- - dialysis Z49.0
- - potential donor of organ and tissue Z00.5
- - subsequent treatment NEC Z51.4
- <u>- provider dependence see Dependence/on/care-provider</u>
- puerperal, postpartum NEC Z39.00...

#### D

#### Dependence

- on
- - artificial heart Z99.4
- - aspirator Z99.0
- - care-provider (because of) Z74.9
- --- impaired mobility Z74.0
- - need for
- - - assistance with personal care Z74.1
- - - care and no other household member able to render Z74.2
- - - mobility (balance) (walking) Z74.0
- - - personal care (dressing) (eating) (personal hygiene) Z74.1
- - continuous supervision Z74.3
- --- no other household member able to render care Z74.2
- - specified reason NEC Z74.8
- - kidney dialysis Z99.2

#### Dependency

- care-provider <u>Z74.9</u> see <u>Dependence/on/care-provider</u>
- passive F60.7
- reactions (persistent) F60.7

#### Н

#### Health

- advice Z71.9
- check-up (routine) Z00.0
- - infant or child Z00.1
- - occupational Z10.0

```
- education Z71.9
- instruction Z71.9
- services provided because (of)
- - with dependence on care-provider — see Dependence/on/care-provider
  bedfast status Z74.0
    assistance with personal care Z74.1
    continuous supervision Z74.3
   no care available in home Z74.2
   reduced mobility Z74.0
Impaired, impairment (function)
- mobility NEC R26.8
- - ear ossicles H74.3
- - requiring assistance by care provider Z74.0
- myocardium, myocardial (see also Insufficiency/myocardial) I50.9
Inadequate, inadequacy
- household care, due to
- - family member unable to render care Z74.2
    handicapped or ill Z74.2
    temporarily away from home Z74.2
- - temporary absence from home of person rendering care Z74.2
- housing (heating) (space) Z59.1
Lack of
- achievement in school Z55.3
- adequate food NEC Z59.4
- appetite (see also Anorexia) R63.0
- care
- - of infant (at or after birth) T74.0
- coordination R27.8
- financial resources Z59.6
- material resources Z59.6
- memory (see also Amnesia) R41.3
- - mild, following organic brain damage F06.7
- mobility, requiring assistance by care provider Z74.0
- ovulation N97.0
- parental supervision or control of child Z62.0
- person at home able to render necessary care Z74.2
- physical exercise Z72.3
Ν
Need for
- care provider (because (of) Z74.9
- - assistance with personal care Z74.1
- - - care and no other household member able to render Z74.2
- - - mobility (balance) (walking) Z74.0
- - - personal care (dressing) (eating) (personal hygiene) Z74.1
- - continuous supervision required Z74.3
   impaired mobility Z74.0
  no other household member able to render care Z74.2
- - specified reason NEC Z74.8
- immunisation — see Vaccination
```

- vaccination — see Vaccination

#### P

#### Poor

- contractions, uterine (during labour) O62.2
- - affecting fetus or newborn P03.6
- fetal growth NEC P05.9
- - affecting management of pregnancy O36.5
- mobility, requiring assistance by care provider Z74.0
- personal hygiene R46.0

...

#### Problem (related to) (with)

- behavioural (adult) (see also Behaviour) F69
- birth of sibling affecting child Z61.2
- care (of)
- - provider dependency <del>Z74.9</del> see <u>Dependence/on/care-provider</u>
  - --- specified NEC Z74.8

. . .

- career choice Z56.7
- ....
- illiteracy Z55.0
- impaired mobility (function) NEC R26.8
- - requiring assistance by care provider Z74.0
- imprisonment or incarceration Z65.1

. . .

#### **SECTION II:**

#### **EXTERNAL CAUSES OF INJURY**

#### A

Abandonment (causing exposure to weather conditions) (with intent to injure or kill) NEC Y06.09

- by
- - acquaintance or friend Y06.04
- - aunt Y06.02
- - baby sitter Y06.03
- - brother (half) (step) Y06.02
- - carer Y06.03
- - co-student Y06.04
- - cousin Y06.02
- - co-worker Y06.04
- - daughter (step) Y06.02
- - family member NEC Y06.02
- - flat mate Y06.04
- - grandchild Y06.02
- - grandparent Y06.02
- - health care provider Y06.03
- - legal authority Y06.05
- - neighbour Y06.04
- - nephew Y06.02
- - niece Y06.02
- - official authorities Y06.05
- - parent (adoptive) (natural) (step) Y06.01
- - foster Y06.03
- - partner of (cohabitating) Y06.01
- - - noncohabitating Y06.04
- - partner (ex-partner) Y06.00
- - person
- - specified NEC Y06.08
- - unknown to victim Y06.06
- - room mate Y06.04
- - sister (half) (step) Y06.02
- - son (step) Y06.02
- - specified person NEC Y06.08
- - spouse or domestic partner (ex-partner) (ex-spouse) Y06.00
- - stranger Y06.06
- - uncle Y06.02

...

### **Australian Coding Standards**

#### 2117 NON-ACUTE CARE

#### **Directive(s)**

. . .

- **4.** Assign Z75.41 *Unavailability and inaccessibility of residential aged care service* as principal diagnosis where a patient is admitted as a long term resident for aged care facility type of care (see *Note* 2) (see Example 1).
- **5.** Assign additional diagnosis codes in accordance with ACS 0002 Additional diagnoses or another specialty ACS
- 2. Due to the lack of aged care facilities and other types of support services in some areas, a patient may be admitted as a long term resident or aged care facility type patient. These admissions may arise as a direct admission from home (or elsewhere) without the need for acute care, or as an episode type change where the patient is no longer receiving acute care.

These patients are not awaiting placement to another facility. The intention is that they remain in hospital as a long term resident or aged care facility type patient.

### 21.7 Placeholder codes in ACHI

Allocated placeholder code titles have been updated as part of the new edition. Placeholder codes are flag codes paired with a best fit code (that enables AR-DRG grouping) to enable data collection that will inform future classification development for new health technologies. The National Coding Advice will remain for all placeholder codes until there is sufficient data to inform placement within ACHI or until an MBS item number is issued.

#### **ACHI Tabular List**

#### **CHAPTER 21**

# CODES FOR SPECIAL PURPOSES (BLOCKS 8888–8889)

#### **NEW OR EMERGING HEALTH TECHNOLOGIES**

8888

#### Provisional assignment of new or emerging health technologies

Note:

Codes 88000-00 to 88000-99 are reserved as placeholders to identify specific new or emerging health technologies. As codes are not always readily available in electronic systems, codes in block [8888] are reserved for provisional use so they can be used immediately upon instruction via National Coding Advice.

#### Code first:

- best fit ACHI code(s) from Chapters 1–20 for procedure performed (see National Coding Advice)
- 88000-00 Transapical transcatheter mitral valve replacement [provisional use] Provisional use of 88000-00 [8888]
- 88000-01 <u>Insertion of percutaneous ventricular assist device [provisional use] Provisional use of 88000-01 [8888]</u>
- 88000-02 Transplantation of uterus [provisional use] Provisional use of 88000-02 [8888]
- 88000-03 Personalised external aortic root support [PEARS] [provisional use]Provisional use of 88000-03 [8888]

88000-04 Transcatheter tricuspid valve repair [provisional use] Provisional use of 88000-04 [8888]

88000-05 Provisional use of 88000-05 [8888]

. . .

## 21.8 Retired and revised ACS Chapter 21

Application of the ACS template and incorporation of National Coding Advice led to the following refinements in the ACS:

Australian Coding Standard	Revision	
2105 Long term/nursing home type inpatients	Retired and content relocated into ACS 2117 Non-acute care. See also 21.6 Factors influencing health status.	
2108 Assessment	Retired – guidelines within redundant if applying the <i>General standards for ICD-10-AM</i> to assign a code for the reason for assessment.	
2116 Palliative care	Revised to incorporate National Coding Advice.	

### **Australian Coding Standards**

#### 2116 PALLIATIVE CARE

#### Directive(s)

. . .

#### **2. Do not** assign Z51.5 if:

- palliative care assessment was performed but no actual palliative care was provided (see Example 3)
- 'comfort measures' only are provided but palliative care or synonymous terms are not documented (see Example 4).

#### Note(s)

- 1. Documented evidence that palliative care was provided may be in the form of clinician entries or a care plan within the health care record.
- 2. Assignment of Z51.5 is independent of the admitted patient care type.
- 3. Terms such as 'end of life care' or 'terminal care' can be used in the context of palliative care. These may refer to different time periods over the palliative care journey. End of life care is care given during the last period of life. Palliative care can be provided at any stage of an illness and may be provided over a period of years.

#### Example 4:

Patient was admitted for treatment of hypercalcaemia due to end stage adenocarcinoma of the right upper lung.

During the episode, the hypercalcaemia was actively treated and the patient was provided with comfort measures for their neoplasm.

Assign: E83.5 Disorders of calcium metabolism

C34.1 Malignant neoplasm of upper lobe, bronchus or lung

M8140/3 Adenocarcinoma NOS

Rationale: E83.5 — ACS 0001 Principal diagnosis

C34.1 — ACS 0002 Additional diagnoses M8140/3 — ACS 0233 Morphology

Z51.5 Palliative care is not assigned as only 'comfort measures' were provided (Directive 2).

## 22. Dental

Refinements have been made in ACHI to align with *The Australian Schedule of Dental Services and Glossary Thirteenth Edition 2022.* 

#### **ACHI Tabular List**

#### INTRODUCTION

. . .

Specifications for the Australian Classification of Health Interventions (ACHI) are:

. . .

3. ACHI includes content from the Commonwealth Medicare Benefits Schedule (MBS) (with some exceptions). and the Australian Schedule of Dental Services and Glossary (ADA). A two digit extension number is attached to each MBS item number to represent individual interventional concepts (eg 36564-00).

ACHI also includes content from the Australian Schedule of Dental Services and Glossary (ADA). The 97000 range of codes is used to represent dental interventions (based upon the ADA item numbers) with a two digit extension number attached to represent individual intervention concepts (eg 97324-05).

Other ACHI concepts that are not represented in the MBS or the ADA are allocated a code number from the remainder of the 90000 series, or 88000 and 88006 series (ie provisional codes in Chapter 21 *Codes for special purposes*).

. .

#### CHAPTER 5

### PROCEDURES ON NOSE, MOUTH AND PHARYNX (BLOCKS 370-422)

#### MOUTH, PALATE AND UVULA

Excludes: dental interventions (see Chapter 6 Dental Services)

#### **APPLICATION, INSERTION, REMOVAL**

400

Application, insertion or removal procedures on mouth, palate or uvula

45845-00 Intraoral osseointegrated dental implant, first stage

Intraoral osseointegrated implant insertion is a one- or two stage procedure which involves the implantation of artificial tooth roots, used to support dentures or artificial tooth crowns.

One-stage endosseous implant involves surgical insertion of an implant into the bone of the maxilla or mandible. First stage of two stage endosseous implant (or fixture) is a subperiosteal procedure.

Implantation of titanium fixture

Includes: one or multiple implants

45847-00 Intraoral osseointegrated dental implant, second stage

Second stage of a two-stage endosseous implant involves application of a superstructure (abutment) to the previously buried implant.

Fixation of transcutaneous abutment

#### INCISION

401

Incision procedures on mouth, palate or uvula

41810-00 Uvulotomy

30281-00 Labial fraenotomy

Division of labial fraenulum

Excludes: lingual fraenotomy (30278-02 [390])

. . .

#### **CHAPTER 6**

### **DENTAL SERVICES (BLOCKS 450-490)**

#### ▼ 0020

Note:

The Australian Classification of Health Interventions (ACHI) <u>Chapter 6 Dental Services chapter</u> is based on the Australian Dental Association's (ADA) publication 'The Australian Schedule of Dental Services and Glossary, <u>Twelfth Thirteenth Edition'</u> (ADA Schedule).

The third, fourth and fifth characters of the <u>Australian Classification of Health Interventions ACHI</u> dental codes (97011-00 to 97986-00) directly relate to the item number in the ADA schedule.

For example:

97171-00 Odontoplasty, per tooth

#### ADA Item Number 171 Odontoplasty - per tooth

A stand alone procedure to modify the contour of the crown of a tooth or the anatomy of the fissure of a tooth to provide an improved contour.

ACHI code: 97171-00 Odontoplasty, per tooth

<u>ADA Schedule Number:</u> <u>171</u> <u>Odontoplasty – per tooth</u>

Some <u>ACHI</u> code descriptions vary slightly from the ADA's <u>Schedule</u> item number descriptions. Reference should be made to the ADA's <u>Schedule</u> where further definition of code descriptions is required. The <u>publication ADA Schedule</u> also contains diagrams which may be useful, especially in <u>understanding</u> regard to <u>defining</u> the terminology used by dentists. An example of a variation in code description follows.

97774-00 Provision of obturator

**ADA Item Number 774 Obturator** 

ACHI code: 97781-01 Provision of obturator
ADA Schedule Number: 781 Obturator

Those interventions included in both the MBS and ADA Schedule, are classified within Chapter 6 Dental Services.

Some services within the ADA's <u>Schedule</u> are not <u>incorporated intoincluded in ACHI</u>: the Australian <u>Classification of Health Interventions</u> for the following reasons:

1. Duplication of a service classified within the Medicare Benefits Schedule.

Certain procedures performed by Oral and Maxillofacial surgeons and Plastic and Reconstructive surgeons can also be performed by Dentists. An example is the procedures relating to osseointegration (see *Chapter 5*, *Procedures on Nose, Mouth and Pharynx, block [400]*). Wherever a duplication occurred, the ADA's item number is mapped to the relevant Australian Classification of Health Interventions code.

2.1.ADA Schedule item numbers for provision of services with similar concepts.

For example: item numbers 087, 088, 089, and 090 and 091 relating to <u>Cone cone</u> beam <u>computerised</u> volumetric tomography <u>analysis and/or interpretation</u> are all classified to 97091-00 [452] Cone beam <u>computerised</u> volumetric tomography [CBCT CBVT] <u>analysis of for</u> orofacial structures.

3.2.Other ADA <u>Schedule</u> item numbers not <u>incorporated intoincluded in ACHI</u> the Australian Classification of <u>Health Interventions</u>.

Certain ADA <u>Schedule</u> item numbers contain concepts which are not applicable to <u>ACHI</u>. the <u>Australian</u> <u>Classification of Health Interventions</u>. For example: 412 *Incomplete endodontic therapy* (tooth not suitable for further treatment). inoperable or fractured tooth).

#### **DIAGNOSTIC DENTAL SERVICES**

Dental examination

97019-00 Referral, dental Letter of referral, dental

451

Dental radiological examination and interpretation

▼0042

97022-00 Intraoral periapical or bitewing radiography, per exposure

97022-01 Intraoral radiography

Includes: radiography:

• bitewing • mandibular • maxillary

occlusalperiapical

97025-00 Intraoral occlusal radiography, per exposure

Includes: mandibular view maxillary view

97026-00 Cone beam computerised tomography [CBCT] for orofacial structures

Excludes: that with analysis or interpretation (97091-00 [452])

97039-00 Computerised Ttomography of skull, or part of skull

452 Other dental diagnostic services

Includes: analysis and/or interpretation

. . .

97047-01 Saliva screening test

97048-01 Bacteriological screening test

97048-02 Microbiological screening test

Dental microbiological screening test

Mucosal screening

Oral microbiological screening test

97052-00 Dental histopathological examination of tissue

97053-00 Dental cytological investigation

97054-00 Mucosal screening

97055-00 Collection of blood for dental diagnosis and treatment-Blood sample, for dental diagnosis

. . .

97071-00 Preparation of diagnostic model, per model

Includes: waxing up
Excludes: that for:

• mouthguards (97151-00 [455])

• prosthodontic services (see blocks [474] to [477])

• trays (97926-00 **[485]**)

97075-00 Diagnostic modelling

The use of diagnostic images for simulation of treatment for dental implant placement, crown and bridge work, orthognathic surgery and orthodontic tooth movement.

**Includes**: modelling:

• digital • physical

. . .

97082-00 Tooth-jaw size prediction analysis

97086-00 Electromyographic analysis

97083-00 Tomographic analysis

97091-00 Cone beam computerised tomography [CBCT] analysis of orofacial structures volumetric tomography

[CBVT] for orofacial structures

Cone beam <u>computerised</u> volumetric tomography for analysis and/or interpretation

Excludes: computerised tomography of skull, or part of skull (97039-00 [451])

#### PREVENTATIVE DENTAL SERVICES

#### 453 Dental prophylaxis and bleaching

97111-00 Removal of plaque or stain of teeth

Excludes: that with:

• periodontal debridement (97222-02, 97223-00 [456])

• removal of calculus:

subgingival (97114-00 [453])supragingival (97114-00 [453])

97113-00 Recontouring of pre-existing restoration(s)

Includes: polishing

. . .

454

97116-00 Enamel micro-abrasion, per tooth

97117-00 Bleaching, internal, per tooth

97118-00 Bleaching, external, per tooth

97119-00 Bleaching, home application, per arch

Code also when performed:

• provision of:

• medicaments (97927-00 [485])

• tray (97926-00 **[485]**)

#### Topical application of remineralisation or cariostatic agent

Topical fluoride application

Code also when performed:

• removal of plaque (97111-00 [453])

97121-01 Topical application of remineralisation agent, 1 treatment

Includes: activation of agent by laser or other intense light and heat sources

97121-03 Topical application of remineralisation agent

**Includes:** activation of agent

**Excludes:** that with tooth restoration — see Alphabetic Index: Restoration

97121-02 Topical application of cariostatic agent, 1 treatment

Includes: activation of agent by laser or other intense light and heat sources

97123-01 Application of concentrated remineralisation agent, per tooth

97123-02 Application of concentrated cariostatic agent, per tooth

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97123-03 Application of cariostatic agent

**Includes:** activation of agent

**Excludes:** that with tooth restoration — see Alphabetic Index: Restoration

455

Other preventative dental service

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97161-00 Fissure or tooth surface sealing, per tooth

Fissure sealing and tooth surface sealing, per tooth

Includes: preparation of pits or fissures

97163-00 Resin infiltration

Treatment of enamel lesions on smooth enamel surfaces by infiltration with a resin material.

**Includes:** preparation prior to application of resin infiltration

97165-01 Desensitising procedure, dental

Procedure to diminish or abolish sensitivity and discomfort in exposed dentine.

Application of desensitising agent to dentine

97171-00 Odontoplasty, per tooth

#### **ORAL SURGERY**

- -

458

#### Surgical removal of tooth

Incision of mucosa and raising of mucoperiosteal flap to remove tooth, followed by suturing of the wound. Surgical extraction of tooth or tooth fragment

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97324-01 Surgical removal of 1 tooth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 [458])
- upper (97322-09 **[458]**)

97324-02 Surgical removal of 2 teeth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 [458])
- upper (97322-09 [458])

#### 97324-03 Surgical removal of 3 teeth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 [458])
- upper (97322-09 [458])

#### 97324-04 Surgical removal of 4 teeth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 [458])
- upper (97322-09 [458])

#### 97324-05 Surgical removal of 5-9 teeth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap

removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 **[458]**)
- upper (97322-09 [458])

#### 97324-06 Surgical removal of 10–14 teeth requiring both removal of bone and tooth division

**Includes:** raising of a mucoperiosteal flap

removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 **[458]**)
- upper (97322-09 [458])

#### 97324-07 Surgical removal of 15 or more teeth requiring both removal of bone and tooth division

<u>Includes:</u> raising of a mucoperiosteal flap

removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

**Excludes:** that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 **[458]**)
- upper (97322-09 [458])

#### 97324-08 Surgical removal of unspecified number of teeth requiring both removal of bone and tooth division

**Includes:** raising of a mucoperiosteal flap

removal of tooth fragment

Code also when performed:

• surgical isolation and preservation of neurovascular tissue (97389-01 [461])

Excludes: that as part of full dental clearance:

- lower (97322-10 [458])
- NOS (97322-01 [458])
- upper (97322-09 [458])

459

#### Surgery for prosthetics

97331-00 Alveolectomy Alveoloplasty, per segment

Alveolectomy Alveoplasty

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### 460

#### General surgical dental procedure

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97377-00 Dental treatment involving removal or repair of soft tissue, not elsewhere classified

Includes: suturing

Excludes: cautery for endodontic access (97245-00 [456])

gingivoplasty (97245-00 [456])

#### 461

#### Other dental surgical procedure

97381-00 Surgical exposure of unerupted tooth, with stimulation and packing

97382-00 Surgical exposure of unerupted tooth with attachment of device for orthodontic traction

Excludes: applications of orthodontic force to malpositioned, erupted teeth:

• bonding of attachment (97862-00 [482])

#### 97384-00 Repositioning of displaced tooth

Repositioning of displaced tooth by manipulation

Code also when performed:

- stabilising procedures:
- replantation and splinting (97387-00 **[461]**)
- splinting (97386-01 **[461]**)

Excludes: surgical repositioning of unerupted tooth (97385-00 [461])

#### 97385-00 Surgical repositioning of unerupted tooth

Surgical exposure and manipulation of unerupted tooth

#### 97386-01 Splinting of displaced tooth

Stabilisation by splinting of displaced tooth

Code also when performed:

- provision of splint:
- metal (97773-00 [477])
- resin (97772-00 **[477]**)
- repositioning (manipulation) of tooth (97384-00 [461])

#### 97387-00 Replantation and splinting of tooth

**Includes:** that for avulsed or intentionally removed tooth

Code also when performed:

- provision of splint:
- metal (97773-00 [477])
- resin (97772-00 **[477]**)

#### 97388-00 Transplantation of tooth or tooth bud

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#### **ENDODONTICS**

462

**Pulp treatment** 

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97419-00 Extirpation of pulp or debridement of root canal(s) emergency or palliative procedure

Emergency or palliative procedure to remove pulp and debris from root canal system

Includes: closure of access cavity

Excludes: complete chemomechanical preparation of root canal non-emergency or nonpalliative removal of pulp and

debris (97415-00, 97416-00 [462])

97421-00 Resorbable root canal filling, primary tooth

Includes: pulpectomy

463

Periradicular surgery

97431-00 Periapical curettage, per root

Excludes: that with apicectomy (97432-00 [463]);

\* apical seal (filling) of root canal (97434-00 [463])

• apicectomy (97432-00 [463])

97432-00 Apicectomy, per root

Includes: periapical curettage

Excludes: that with apical seal (filling) of root canal (97434-00 [463])

97433-00 Exploratory periradicular surgery

Investigation of integrity of tooth root and surrounding structures

97434-00 Apical seal of root canal, per canal

Debridement and filling apical end of root canal

Includes: apicectomy
periapical curettage

Code also when performed:

• apicectomy (with periapical curettage) (97432-00 [463])

• periapical curettage NOS (97431-00 [463])

• • •

464

#### Other endodontic service

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97455-00 Irrigation and dressing of root canal system, per tooth

Debridement irrigation and dressing of root canal for infection or inflammation following prior opening and removal of

root canal contents.

Excludes: that with any other endodontic procedure — omit code

97457-00 Obturation of resorption defect or perforation

Nonsurgical repair of tooth root perforation

**Excludes:** surgical sealing of tooth root perforation (97436-00 [463])

97458-00 Interim therapeutic root filling

97459-00 Guided endodontic repair, per tooth

Excludes: complete chemomechanical preparation of root canal, 1 canal (97415-00 [462])

root canal obturation, 1 canal (97417-00 [462])

#### **RESTORATIVE DENTAL SERVICES**

469	Other restorative dental service
97571-01	Adaptation of new restoration to existing removable prosthesis
97572-01	Provisional restoration of tooth, per tooth Temporary [interim] ([intermediate]) restoration of a tooth
	Excludes: that with any other dental procedure — omit code
•••	
97586-00	Placement of preformed metallic crown Coronal restoration using preformed metallic crown
	<u>Includes:</u> tooth preparation
97588-00	Placement of preformed tooth-coloured crown Coronal restoration using preformed tooth-coloured crown
97597-00	Post cast, preformed or wrought Fabrication and cementation of cast, preformed or wrought post
97598-01	Restoration of root using capping, direct  Direct restoration of the root of a decoronated tooth.
	Excludes: cusp capping (97577-00 [469])
PROSTHODONTICS	
470	Crown
97611-01	Full crown, acrylic resin, indirect

470	Crown
97611-01	Full crown, acrylic resin, indirect
97611-02	Full crown, polymeric material, indirect
97613-00	Full-crown, nonmetallic, indirect
<u>97613-01</u>	Full crown, ceramic, indirect
97615-00	Full crown, veneered, indirect
97618-00	Full crown, metallic, indirect
97625-00	Core for crown including post, indirect
	Code also when performed: • crown (97611-02 97611-01, 97613-01 97613-00, 97615-00, 97618-00 [470])
•••	
471	Bridge

97645-00 Precision or magnetic attachment, bridge

97648-01 Bonded retainer, direct

<u>Code also when performed:</u>
• bridge pontic (97642-00, 97643-00 [471])

97649-00 Bonded retainer, indirect Retainer for bonded fixture, indirect, per tooth

Retainer and framework bonded to the abutment tooth for support of bridge pontic or precision attachment.

Code also when performed:

- bridge pontic (97642-00, 97643-00 [471])
- splint:
- metal (97773-00 [477])
- resin (97772-00 **[477]**)

#### 472

#### Other dental service on crown and bridge

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97656-00 Removal of bridge or splint

<u>Includes:</u> removal of all or part of a bridge or splint

97658-00 Repair of crown or bridge, indirect, per crown or pontic Repair of crown, bridge or splint, indirect

Extraoral repair of a crown or bridge

97659-00 Repair of crown, bridge or veneer, direct, per crown, pontic or veneer Repair of crown, bridge or splint,

direct

Intraoral repair of a cemented crown, bridge or veneer

473

#### Implant prosthesis

97661-00 Fitting of implant abutment, per abutment

Fitting of final implant abutment or replacement of an existing abutment

Includes: attachments designed to retain an overdenture

Excludes: fitting of provisional implant:

• abutment (97633-00 [471])

• restoration (97634-01 **[471]**)

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97666-00 Prosthesis with fixed metal frame attached to implants, per arch

**Includes:** sealing of the access to the abutment screw

Code also when performed:

• attachment of abutment to implant (97661-00 [473])

97667-00 Prosthesis with removable metal frame attached to implants, per arch

Code also when performed:

• attachment of abutment to implant (97661-00 [473])

denture precision or magnetic attachment or retention components within prosthesis (97735-00 [474])

97668-00 Replacement of prosthetic screw-Removal and replacement of fixture or abutment screw

97669-00 Removal and reattachment of prosthesis fixed to implant, per implant

Maintenance of prosthesis fixed to an osseointegrated implant

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97673-00 Full crown attached to osseointegrated implant, metallic, indirect

Artificial crown of east-metal attached to osseointegrated implant

97678-00 Provision of diagnostic template

A diagnostic radiographic template that facilitates oral and/or maxillofacial surgical planning.

Template incorporating radiopaque 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.

97684-00 Insertion of first stage of two-stage endosseous implant, per implant

Intraoral osseointegrated dental implant, first stage

97688-00 Insertion of a one-stage endosseous implant, per implant

<u>97686-00</u>	Insertion of a one-stage maxillofacial endosseous implant, per implant
97685-00	Insertion of first stage of two-stage maxillofacial endosseous implant, per implant
97691-00	Insertion of second stage endosseous implant, per implant  Intraoral osseointegrated dental implant, second stage
<u>97691-01</u>	Insertion of second stage maxillofacial endosseous implant, per implant
97687-00	Insertion of mini-implant, per implant
97689-00	Insertion of provisional implant Special purpose implant designed with the intention of it being removed at a later stage
97690-00	Insertion of provisional retention or anchorage device Special purpose provisional retention or anchorage device, attached to the jaws by screws or to implants, intended for later removal
97692-00	Closure of screw access chamber
97693-00	Remodelling of fixed implant prosthesis Remodelling of screw-retained, metal-resin, implant supported fixed prosthesis attached to implants
	Includes: replacement of veneering materials
	<u>Code also when performed:</u> • replacement or addition of prosthetic tooth (97765-00 [476])
97694-00	Repair or replacement of ceramic component of implant crown or bridge, per prosthetic tooth
	Includes: that for metal-ceramic or all ceramic crown or bridge
97695-00	Cleaning and polishing of implant prosthesis
	Includes: dental polishing disinfection removal of: • calculus • plaque
97696-00	Removal of abutment screw Removal of fractured abutment screw
	Excludes: with replacement (97668-00 [473])
474	Denture or denture component
	Includes: adjustment following insertion of prosthesis
97711-00	Provision of complete maxillary denture  Provision of a patient removable dental prosthesis replacing the natural teeth and adjacent tissues in the maxilla.
	Code also when performed:  • immediate tooth replacement (97736-00 [474])  • overlay (97734-00 [474])  • provision of metal palate or plate (97716-00 [474])  • resilient lining in addition to new denture (97737-00 [474])
	Excludes: that with mandibular denture (97719-00 [474])
97712-00	Provision of complete mandibular denture  Provision of a patient removable dental prosthesis replacing the natural teeth and adjacent tissues in the mandible.
	Code also when performed:

- immediate tooth replacement (97736-00 [474])
- overlay (97734-00 **[474]**)
- provision of metal palate or plate (97716-00 [474])
- resilient lining in addition to new denture (97737-00 [474])

Excludes: that with maxillary denture (97719-00 [474])

#### 97713-00 Provision of temporary complete maxillary denture

Provision of a patient removable dental prosthesis replacing the natural teeth and adjacent tissues in the maxilla that is designed to last until the definitive denture can be constructed.

Excludes: that with mandibular denture (97715-00 [474])

#### 97714-00 Provision of temporary complete mandibular denture

Provision of a patient removable dental prosthesis replacing the natural teeth and adjacent tissues in the mandible that is designed to last until the definitive prosthesis can be constructed.

Excludes: that with maxillary denture (97715-00 [474])

#### 97715-00 Provision of temporary complete mandibular and maxillary dentures

Provision of a patient removable dental prosthesis replacing the natural teeth and adjacent tissues in both the maxilla and the mandible that is designed to last until the definitive prosthesis can be constructed.

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#### 97727-00 Provision of partial maxillary denture, custom fabricated cast metal framework

Code also when performed:

- attachment of:
- occlusal rests (97732-00 **[474]**)
- retainer (97731-00 [474])
- tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 [474])

#### 97728-00 Provision of partial mandibular denture, custom fabricated east-metal framework

Code also when performed:

- attachment of:
- occlusal rests (97732-00 [474])
- retainer (97731-00 [474])
- tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 **[474]**)

#### 97723-00 Provision of temporary partial maxillary denture

Includes: provisional, clear, pressure or vacuum formed appliance with incorporated denture teeth

Code also when performed:

- attachment of:
- occlusal rests (97732-00 [474])
- retainer (97731-00 [474])
- tooth to partial denture (97733-00 **[474]**)
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 **[474]**)

Excludes: that with: temporary complete maxillary denture (97713-00 [474])

- partial maxillary denture, resin base (97721-00 [474])
- temporary complete maxillary denture (97713-00 [474])

#### 97724-00 Provision of temporary partial mandibular denture

<u>Includes:</u> provisional, clear, pressure or vacuum formed appliance with incorporated denture teeth

Code also when performed:

- attachment of:
- occlusal rests (97732-00 [474])
- retainer (97731-00 **[474]**)
- tooth to partial denture (97733-00 [474])
- immediate replacement of tooth (97736-00 [474])
- overlay (97734-00 **[474]**)

Excludes: that with: temporary complete mandibular denture (97714-00 [474])

- partial mandibular denture, resin base (97722-00 [474])
- temporary complete mandibular denture (97714-00 [474])

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97731-00
             Provision of retainer [clasp] to partial denture
              Code also when performed:
              • provision of partial resin base denture:
               • mandibular (97722-00 [474])
               • maxillary (97721-00 [474])
             Provision of tooth to partial denture, per tooth
97733-00
             Code also when performed:

    provision of partial: cast metal denture:

    custom fabricated denture:

                 • mandibular (97728-00 [474])
                 • maxillary (97727-00 [474])

    resin base denture:

                 • mandibular (97722-00 [474])
                 • maxillary (97721-00 [474])
              provision of partial resin base denture:
                 mandibular (97722-00 [474])
                • maxillary (97721-00 [474])
             Excludes: that to replace lost natural tooth or its coronal section (97768-00 [476])
97734-00
             Overlay, per tooth
             Code also when performed:

    provision of: complete denture:

    complete denture:

                 • mandibular (97712-00, 97719-00 [474])
                 • maxillary (97711-00, 97719-00 [474])
               provision of partial cast metal denture:
               • partial:

    custom fabricated denture:

                   • mandibular (97728-00 [474])
                   • maxillary (97727-00 [474])
              provision of partial resin base denture:
                 • resin base denture:
                   • mandibular (97722-00 [474])
                   • maxillary (97721-00 [474])
97735-00
             Precision or magnetic attachment, denture
97736-00
             Immediate replacement of tooth, per tooth
              Code also when performed:
              • adding tooth to partial denture to replace lost natural tooth or its coronal section (97768-00 [476])
              • provision of: complete denture:
               • complete denture:
                 • mandibular (97712-00, 97719-00 [474])
                 • maxillary (97711-00, 97719-00 [474])
                 • custom fabricated denture:
                   • mandibular (97728-00 [474])
                   • maxillary (97727-00 [474])
                 • resin base denture:
                   • mandibular (97722-00 [474])
```

• maxillary (97721-00 [474])

#### 97737-00 Resilient lining

Code also when performed:

- provision of: complete denture:
- · complete denture:
  - mandibular (97712-00, 97719-00 [474])
  - maxillary (97711-00, 97719-00 [474])
- provision of partial cast metal denture:
- partial:
  - custom fabricated denture:
  - mandibular (97728-00 [474])
  - maxillary (97727-00 [474])
- provision of partial resin base denture:
  - resin base denture:
  - mandibular (97722-00 [474])
  - maxillary (97721-00 [474])

#### 97739-00 Provision of metal backing for denture tooth, per backing

Extension of casting of cast-metal partial denture to provide backing for denture tooth.

475 Denture maintenance

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97754-00 Modification of denture base

#### 97755-00 Maintenance of overdenture attachment

Replacement of a polymer insert in an overdenture attachment

476 Denture repair

Code also when performed:

• impression for denture repair (97776-00 [477])

#### 97761-00 Reattachment of pre-existing retainer [clasp] to denture

Repair, insertion and adjustment of denture involving reattachment of pre-existing retainer ([clasp])

#### 97762-00 Replacement or addition of a new retainer [clasp] to denture

Repair, insertion and adjustment of denture involving replacement of a new retainer ([clasp])(s)

97763-00 Repair of broken base of complete denture

97764-00 Repair of broken base of partial denture

#### 97765-00 Replacement or addition of a new tooth on denture or implant prosthesis, per tooth

Repair, insertion and adjustment of denture involving replacement with a new tooth to a pre-existing denture or implant prosthesis

97766-01 Reattaching existing tooth on denture, per tooth

Repair, insertion and adjustment of a denture involving reattachment of a pre-existing denture tooth

#### 97768-00 Adding tooth to partial denture to replace extracted or decoronated tooth, per tooth

Modification, insertion and adjustment of partial denture involving addition to accommodate loss of natural tooth or its coronal section

Provision of a denture tooth on an existing partial denture to replace a natural tooth that has been removed or decoronated prior to or at the time of issue of the modified denture.

Replacement of an existing implant prosthetic screw

Includes: abutment tooth clasp

Code also when performed:

• immediate tooth replacement (97736-00 [474])

#### 97769-00 Repair or addition to metal casting frame

Repair or addition to metal east frame of partial denture

477	Other prosthodontic service
97771-00	Tissue conditioning preparatory to impressions, per application
97772-00	Provision of resin splint <del>, indirect</del>
97773-00	Provision of metal splint, indirect
<del>97774-00</del> 	Provision of obturator
97779-01	Provision of surgical guide for immediate denture
	<i>Note:</i> Provision of appliance to indicate final ridge contours following extraction of teeth, prior to immediate denture insertion
97781-01	Provision of obturator
	Excludes: interim obturator (97782-01 [477])
97782-01	Provision of interim obturator  A temporary maxillofacial prosthesis inserted during or immediately following surgical or traumatic loss of a portion or all of the maxilla and contiguous alveolar structures.
97783-01	Revision of interim obturator
97785-00	Provision of interim or diagnostic maxillofacial prosthesis
97786-00	Provision of mandibular resection prosthesis

#### **ORTHODONTICS**

97790-00

479 Removable orthodontic appliance

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97825-00 Provision of sequential plastic aligners, per arch

Adjustment of maxillofacial prosthesis

**Excludes:** provision of passive:

• fixed appliance (97845-00 [480]) • removable appliance (97811-00 [479])

trauma and/or surgery to the mandible and/or adjacent structures.

Adjustment of a maxillofacial prosthesis to improve comfort, function or aesthetics.

480 Fixed orthodontic appliance

97843-01 Insertion of fixed maxillary or mandibular expansion appliance

97844-00 Insertion of sagittal movement appliance

Insertion of an appliance fixed to the maxilla or mandible by temporary anchorage device(s). The appliance exerts force to move teeth sagittally.

A maxillofacial prosthesis used to maintain a functional position for the jaws, improve speech and deglutition following

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483 Other orthodontic service

97871-00 Adjustment of fixed or removable orthodontic appliance

**Excludes**: that with:

- bonding (97862-00 [482])
- provision of:
- extraoral appliance (97851-00 [481])
- fixed orthodontic appliance (see block [480])
- removable orthodontic appliance (see block [479])

97872-00 Reattachment of passive fixed orthodontic appliance

Includes: cleaning and polishing of appliance and/or teeth

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#### **GENERAL DENTAL SERVICES**

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97971-00

97972-00

485	Dental drug therapy
97926-00	Construction of individually made mandibular or maxillary tray for self application of medicament
97927-00	Provision of medication/medicament for dental procedure treatment
97928-00	Intravenous cannulation and establishment of infusion for dental procedure
	Excludes: anaesthesia during dental procedure (see blocks [1909] and [1910])
489	Occlusal therapy
97964-00	Registration and mounting of dental model for occlusal analysis
	Excludes: preparation of casts from impression (97071-00 [452])
97965-00	Provision of occlusal appliance splint
97966-00	Adjustment of pre-existing occlusal appliance splint
97967-00	Pantographic tracing
97968-00	Occlusal adjustment following occlusal analysis

Adjunctive dental Dental physical therapy for temporomandibular joint and associated structures

Excludes: adjustment of pre-existing occlusal appliance splint (97966-00 [489])

#### **MISCELLANEOUS DENTAL SERVICES**

#### 490 Miscellaneous dental services

97981-00 Splinting and stabilisation of tooth, direct

Repair/addition of occlusal splint Adjustment of occlusal splint

Excludes: that for: displaced tooth (97386-01 [461])

• displaced tooth (97386-01 [461])

• replantation and splinting of tooth (97387-00 [461])

97982-00 Enamel stripping of tooth

97945-01 Low level laser therapy for dental applications

Biostimulation Photobiomodulation

97983-01 Provision of oral appliance for snoring and obstructive sleep apnoea

• bi-maxillary
• single arch

Excludes: adjustment, repair or replacement of oral appliance (97985-01 [490])

97984-00 Provision of mandibular advancement appliance

**Note:** Performed for snoring and obstructive sleep apnoea.

97985-01 Replacement or adjustment of oral appliance for snoring and obstructive sleep apnoea

Adjustment of oral appliance for snoring and obstructive sleep apnoea Repair of oral appliance for snoring and obstructive sleep apnoea

Includes: repair

**Note:** Performed for snoring and obstructive sleep apnoea.

97986-00 Postoperative dental care, not elsewhere classified

#### **CHAPTER 16**

#### **DERMATOLOGICAL AND PLASTIC PROCEDURES (BLOCKS 1600–1718)**

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#### PLASTIC PROCEDURES ON BONE

#### APPLICATION, INSERTION, REMOVAL

#### 1697

#### Fixation of transcutaneous abutment (osseointegration procedure)

Attachment of framework to titanium fixture for osseointegration Connection of percutaneous abutment for osseointegration Osseointegration for attachment of prosthetic replacement, second stage

Includes: exposure of titanium fixture

skin graft of fixture site

thinning of skin flap over fixture site

*Note:* Procedures in this block are performed as the second stage of an osseointegration procedure, and involve

attachment of an abutment through the skin to the titanium implant that was previously implanted into the

patient's bone.

Excludes: bone anchored hearing aid [BAHA] (45797-07 [334])

intraoral (97684-00, 97688-00, 97686-00, 97685-00, 97691 [473]45845-00 [400])

45797-01 Osseointegration procedure, fixation of transcutaneous abutment for attachment of prosthetic ear

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#### 1698

#### Implantation of titanium fixture (osseointegration procedure)

Implantation of titanium screw for osseointegration Osseointegration for attachment of prosthetic replacement, first stage

Placement of titanium fixture for osseointegration

Note:

Procedures in this block are performed as the first stage of the osseointegration procedure, and involve insertion of a titanium implant into the patient's bone, in preparation for second stage, which is attachment of the transcutaneous abutment.

Code also when performed:

- bone graft see Alphabetic Index: Graft/bone
- fixation of transcutaneous abutment (45797 [1697])
- flap repair see Alphabetic Index: Flap/by site
- reconstruction see Alphabetic Index: Reconstruction/by site

Excludes: bone anchored hearing aid [BAHA] (45794-08 [334])

intraoral (97684-00, 97688-00, 97686-00, 97685-00, 97691 [473] 45845-00[400])

45794-01 Osseointegration procedure, implantation of titanium fixture for attachment of prosthetic ear

. . .

#### **REPAIR**

. . .

1705

#### Osteotomy or ostectomy of mandible or maxilla

Mandibular or maxillary osteoplasty by osteotomy or ostectomy

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- insertion of fixed maxillary or mandibular expansion appliance (97843-01 [480])
- procurement of bone for graft from other site (96275-1747726-00-[1563])

Excludes: complex combinations of osteotomy/ostectomy procedures on mandible or maxilla (45731, 45735-00,

45741-00, 45747-00 **[1707]**)

-multiple (more than two) procedures on:

• mandible (45731-00 [1707]) • maxilla (45731-01 [1707])

that with internal fixation (45723, 45729 [1706])

45720-00 Osteotomy of mandible, unilateral

. . .

1706

#### Osteotomy or ostectomy of mandible or maxilla with internal fixation

Mandibular or maxillary osteoplasty by osteotomy or ostectomy with internal fixation

Includes: bone graft

transposition of nerves and vessels

Code also when performed:

- genioplasty (45761 [1702])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: complex combinations of osteotomy/ostectomy procedures on mandible or maxilla (45732, 45738-00,

45744-00, 45752-00 **[1708]**)

multiple (more than two) procedures on:

mandible (45732-00 [1708])
maxilla (45732-01 [1708])

45723-00 Osteotomy of mandible with internal fixation, unilateral

. . .

1707

#### Osteotomy or ostectomy of mandible or maxilla, procedures in combination

Mandibular or maxillary osteoplasties by osteotomy or ostectomy, procedures in combination

Includes: bone graft

transposition of nerves and vessels

**Note:** This block includes multiple osteotomies or multiple osteotomies or a combination of both procedures on

mandible or maxilla or both bones

Code also when performed:

- genioplasty (45761 **[1702]**)
- insertion of fixed maxillary or mandibular expansion appliance (97843-01 [480])
- procurement of bone for graft from other site (96275-1747726-00 [1563])

Excludes: midfacial osteotomies (45753-00 [1709])

that with internal fixation (45732, 45738-00, 45744-00, 45752-00 [1708])

45731-00 Osteotomies or ostectomies of mandible, 1 to 3 procedures

. . .

1708

# Osteotomy or ostectomy of mandible or maxilla with internal fixation, procedures in combination

Mandibular or maxillary osteoplastics by osteotomy or ostectomy with internal fixation, procedures in combination

Includes: bone graft

transposition of nerves and vessels

*Note:* This block includes multiple osteotomies or multiple ostectomies or a combination of both procedures on

mandible or maxilla or both bones

Code also when performed:

- genioplasty (45761 [1702])
- insertion of fixed maxillary or mandibular expansion appliance (97843-01 [480])
- procurement of bone for graft from other site (96275-1747726-00-[1563])

Excludes: midfacial osteotomies (45754 [1709])

45732-00 Osteotomies or ostectomies of mandible, 1 to 3 procedures, with internal fixation

. . .

#### **CHAPTER 19**

#### **INTERVENTIONS NOT ELSEWHERE CLASSIFIED (BLOCKS 1820–1925)**

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#### DIAGNOSTIC INTERVENTIONS

#### ASSESSMENT, CONSULTATION, INTERVIEW, EXAMINATION, EVALUATION

Assessment involves the gathering, evaluation and recording of information relative to the client's problem, functional status or situation through the use of cognitive skills and simple measurements (eg observation, history taking, anthropometry)

...

Excludes: assessment or consultation with electroconvulsive therapy (see block [1907])

diagnostic dental examination services (see blocks [450] to [452])

specific diagnostic tests, measures, investigations or imaging classified elsewhere — see Alphabetic Index

. . .

# DIAGNOSTIC TESTS, MEASURES OR INVESTIGATIONS – BLOOD AND BLOOD-FORMING ORGANS

1858

Diagnostic tests, measures or investigations, blood and blood-forming organs

13839-00 Collection of blood for diagnostic purposes

Includes: that by arterial puncture

Excludes: adrenal vein sampling (13839-02 [1858])

adrenocorticotropic hormone stimulation test (30097-00 [1858])

collection of blood for transfusion (13709-00 [1891])

haemapheresis:

- donor (13755-00 [1892])
- therapeutic (13750 [1892])

intra-arterial cannulation for blood gas analysis (13842-00 [1858])

petrosal [venous] sinus sampling (13839-01 [1858])

that: in neonate (13312-00 [1858])

• for dental diagnosis and treatment (97055-00 [452])

• in neonate (13312-00 [1858])

13312-00 Collection of blood for diagnostic purpose in neonate

*Note:* Performed for neonates less than 28 days old

13842-00 Intra-arterial cannulation for blood gas analysis

▼0042

₩ 004

#### PHARMACOTHERAPY INTERVENTIONS

#### **PHARMACOTHERAPY**

### 1920

#### Administration of pharmacotherapy

**▼**0042, 0044, 0102, 0206, 0534, 1615, 1923

Administration of pharmacological agent for systemic effect

Excludes: administration of:

- blood and blood products (see block [1893])
- genetically engineered:
- cell therapy (see block [1924])
- gene therapy (96263-00 [1925])
- pharmacological agent (for) (with):
  - anaesthesia (see blocks [1333], [1909] and [1910])
- dental treatment (97927-00 [485])
- immunisation (see blocks [1881] to [1884])
- local effect see Alphabetic Index: Administration
- management of ectopic pregnancy (see block [1256])
- pain management (see blocks [31] to [37] and [60] to [66] and [1552])
- perfusion (see block [1886])
- peripheral arterial or venous catheterisation (see block [741])
- vaccination (see blocks [1881] to [1883])

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### **ACHI Alphabetic Index**

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