

**INGENIX®**

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Pocket Coder  
for  
ICD-9-CM Codes

*Special version for  
long-term or advanced illness*

**Codes valid 10/01/10 to 09/30/11**

**Convenient pocket guide for coding diagnoses  
commonly encountered by Providers.**

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This Pocket Coder provides you with those diagnoses most frequently encountered in the older population with long-term or advanced illnesses. It is not intended to guide or replace your independent clinical diagnostic decision-making, but to help you quickly locate the codes for **common** conditions that affect the Medicare population.

Additional resources may be required for accurate coding. Additional coding resources include Code-It-Fast or ICD-9-CM coding manuals published by Ingenix.

Codes are arranged by category. Five digit codes represent the highest specificity in ICD-9-CM, but for some codes the highest specificity may be accomplished with four, or rarely, three digits. Codes in this guide listed with "XX," for example, 250.XX, indicate you must use another resource to determine the most specific code. Codes that are bolded are included in the Centers for Medicare and Medicaid Services (CMS) Hierarchical Condition Category (HCC) model (codes included in the RxHCC model may not be bolded). This guide contains **only the most frequently encountered** diagnoses by Providers for their members that are part of the Medicare population, whether they are in the CMS HCC model or not. It is not intended to be comprehensive, and you should reference additional resources to accurately code and report identified diagnoses that are not included in this list. The expectations of CMS are that the documentation and coding of diagnoses must be **complete, accurate** and **specific**. CMS\* indicates that data in the medical record impacts:

- Accurate reimbursement
- Communication among all members of the health care team
- Evaluation of the care provided
- Research and education
- Practice patterns

# CMS Documentation Requirements<sup>1</sup>

## Physician and NP/PA responsibilities:

Physicians and providers should report **all diagnoses that impact the patient's care**, and ensure that these diagnoses are accurately documented in the medical record. **This includes the main reason for the episode of care, and all co-existing, acute or chronic conditions, and pertinent past conditions that impact clinical evaluation and therapeutic treatment.** Symptoms that are common to the main reportable diagnosis should not be coded. Coding to the highest degree of specificity provides the most accurate coding and helps ensure appropriate grouping in the risk adjustment model.

- Report ICD-9 diagnosis codes to the highest level of specificity and report these codes accurately,
- Maintain accurate and complete medical record documentation,
- Follow the procedures for correcting erroneous data, and
- Report data in a timely manner.

## Important Points About Risk Adjustment Documentation

**Accurate, specific and complete** documentation and coding provides program planning and evaluation data, helps facilitate compliance with federal guidelines and supports appropriate payment. **These are the most important concepts to keep in mind when documenting and coding under risk adjustment.**

- **Do enter diagnosis code(s) for the condition(s) noted in the medical record according to CMS guidelines. Include the main reason for the episode of care, and all co-existing, acute or chronic conditions, and pertinent past conditions that impact clinical evaluation and therapeutic treatment. Note that CMS coding instructions for Risk Adjustment encourage complete diagnosis code submission, specifically instructing to include coding for co-existing and pertinent past conditions.**
- **Do not enter diagnosis codes for diagnoses that you do *not* consider in your evaluation of the patient, or that you have not *noted* in the medical record.**
- Each applicable code must be submitted at least once in each reporting period (first and second 6 months of each year).

<sup>1</sup>"2008 Risk Adjustment Data Technical Assistance for Medicare Advantage Organization Participant Guide". Centers for Medicare & Medicaid Services. 01-27-10 <[www.cms.gov](http://www.cms.gov)>.

**STATUS CODES**

DNR Status	V49.86
Noncompliance with Medical Treatment	V15.81
<b>Noncompliance with Renal Dialysis</b>	<b>V45.12</b>
Renal Dialysis Status	V45.11
Tracheostomy Status	V44.0
Tracheostomy, Attention To	V55.0
Gastrostomy Status	V44.1
Gastrostomy, Attention To	V55.1
Ileostomy Status	V44.2
Ileostomy, Attention To	V55.2
Colostomy Status	V44.3
Colostomy, Attention To	V55.3
Enterostomy Status NEC	V44.4
Enterostomy NEC, Attention To	V55.4
Cystostomy Status NOS	V44.50
Cystostomy, Attention To	V55.5
Artificial Opening Status NOS	V44.9
Artificial opening NOS, Attention To	V55.9
Above Knee Amputation (AKA) Status Post	V49.76
Below Knee Amputation (BKA) Status Post	V49.75
Phantom Limb Syndrome	353.6
Infection Amputated Stump	997.62
Lower Limb Amputation, Unspecified Level, Status	V49.70
Amputation Great Toe, Status	V49.71

**ABNORMAL TEST/RESULT**

Hypoglycemia, Unspecified (excludes that with diabetes)	251.2
Hyperlipidemia, Mixed	272.2
Hyperlipidemia, Other & Unspecified	272.4
Sedimentation Rate, Elevated	790.1
Blood Chemistry, Other, Abnormal	790.6
Blood Coagulation Profile, Abnormal (excludes 286.x)	790.92
Stool, Abnormal	792.1
Infections with drug-resistant organisms** (specify organism) Code also infectious condition	V09.XX

**CANCER (Partial Listing)**

<b>Malignant Neoplasms: Site</b>	
<b>Primary Breast,</b>	
Female, Unspecified	174.9
Colon, Unspecified Site	153.9
Kidney (Except Pelvis)	189.0
Lung/Bronchus, Unspecified	162.9
Prostate	185
Uterus, Part Unspecified	179

**Other Misc. Cancers and Code Ranges**

Carcinoma In Situ Of Breast	233.0
Mastectomy S/P	V45.71
<b>Cancer, Malignant (Specify Site) (4-5 digits)</b>	<b>140.-195.XX</b>
<b>Cancer, Metastatic (Specify Site) (4-5 digits)</b>	<b>196.-199.XX</b>
<b>Lymphosarcoma &amp; Reticulosarcoma (Specify Site) (4-5 digits)</b>	<b>200.XX</b>
<b>Hodgkin's Disease (Specify Site) (4-5 digits)</b>	<b>201.XX</b>
<b>Other Malignant Neoplasm Of Lymphoid &amp; Histiocytic Tissue (Specify Site) (4-5 digits)</b>	<b>202.XX</b>
<b>Multiple Myeloma &amp; Immunoproliferative Neoplasms (Specify Site) (4-5 digits)</b>	<b>203.XX</b>
<b>Leukemia (Specify Site; Full Coding Specificity)</b>	<b>204.-208.XX</b>
Neoplasms, benign (Specify Site; Full Coding Specificity)	210.-229.XX
Carcinoma In Situ (Specify Site; Full Coding Specificity)	230.-234.XX
Neoplasms Of Uncertain Behaviour (Specify Site; Full Coding Specificity)	235.-238.XX
Neoplasms Of Unspecified Nature (Specify Site; Full Coding Specificity)	239.X
Personal History Of Cancer (Specify Site)	V10.XX

**CARDIAC & VASCULAR**

Mitral Stenosis	
With Insufficiency	394.2
(Heart Failure – identify type of failure; CDK – identify Stage of disease)	
Hypertension, Unspec	401.9

Hypertension Ess, Benign	401.1	<b>Chronic Pulmonary Heart Disease, NEC</b>	<b>416.8</b>
Hypertensive Ess, Malig	401.0	<b>Atrioventricular Block, Complete</b>	<b>426.0</b>
Hypertensive Heart Dis w/o Heart Failure, unspec	402.90	Bundle Branch (Heart) Block, NOS	426.50
<b>Hypertensive Heart Dis NOS w/Heart Failure</b>	<b>402.91</b>	<b>Paroxysmal Tachycardia, NOS</b>	<b>427.2</b>
Hyper CKD w/CKD Stage I-IV or unspec	403.90	<b>Atrial Fibrillation</b>	<b>427.31</b>
<b>Hyper CKD w/CKD Stage V or ESRD unspec</b>	<b>403.91</b>	<b>Atrial Flutter</b>	<b>427.32</b>
Hyper Heart & CKD w/o Heart Fail w/CKD stage I-IV unspec	404.90	<b>Sinoatrial Node Dysfunction</b>	<b>427.81</b>
<b>Hyper Heart &amp; CKD w/Heart Fail &amp; CKD Stage I-IV unspec</b>	<b>404.91</b>	Cardiac Arrhythmia, NOS	427.9
<b>Hyper Heart &amp; CKD w/o Heart Fail w/CKD Stage V or ESRD, unspec</b>	<b>404.92</b>	<b>Chronic Systolic Heart Failure</b>	<b>428.22</b>
<b>Hyper Heart &amp; CKD w/Heart Fail &amp; CKD Stage V or ESRD, unspec</b>	<b>404.93</b>	<b>Chronic Diastolic Heart Failure</b>	<b>428.32</b>
<b>Acute Myocardial Infarction Anterior Wall, Initial</b>	<b>410.11</b>	<b>Chronic Systolic &amp; Diastolic Heart Failure</b>	<b>428.42</b>
<b>Acute Myocardial Infarction Inferior Wall, Initial</b>	<b>410.41</b>	<b>Heart Failure NOS</b>	<b>428.9</b>
<b>Acute Myocardial Infarction, Subendocardial, Initial</b>	<b>410.71</b>	ASCVD	
<b>Acute Myocardial Infarction NOS, Unspecified</b>	<b>410.90</b>	(Arteriosclerotic Cardiovascular Heart Disease)	429.2
<b>Acute Myocardial Infarction NOS, Initial</b>	<b>410.91</b>	Transient Cerebral Ischemia, NOS	435.9
<b>Acute Myocardial Infarction NOS, Subsequent</b>	<b>410.92</b>	<b>Atherosclerosis Of Native Arteries Of Extremities w/Intermittent Claudication</b>	<b>440.21</b>
<b>Acute Coronary Occlusion Without MI</b>	<b>411.81</b>	<b>Atherosclerosis Of Native Arteries Of Extremities w/Rest Pain</b>	<b>440.22</b>
<b>Old Myocardial Infarction</b>	<b>412</b>	<b>Atherosclerosis Of Native Arteries Of Extremities w/Ulceration (Code Also Ulcers)</b>	<b>440.23</b>
<b>Prinzmetal Angina</b>	<b>413.1</b>	<b>Atherosclerosis Of Native Arteries Of Extremities w/Gangrene (Code Also Ulcers)</b>	<b>440.24</b>
<b>Angina Pectoris NEC/NOS</b>	<b>413.9</b>	<b>Abdominal Aortic Aneurysm</b>	<b>441.4</b>
Coronary Atherosclerosis Native Vessel	414.01	<b>Aortic Aneurysm NOS</b>	<b>441.9</b>
Chronic Ischemic Heart Disease, NOS	414.9	<b>Aneurysm, NOS</b>	<b>442.9</b>
<b>Iatrogenic Pulmonary Embolism / Infarction</b>	<b>415.11</b>	<b>Peripheral Angiopathy In Disease Classified Elsewhere</b>	<b>443.81</b>
<b>Chronic Pulmonary Embolism Use additional code, if applicable, for associated long-term (current) use of anticoagulants (V58.61)</b>	<b>416.2</b>	<b>Peripheral Vascular Disease, NOS</b>	<b>443.9</b>
<b>Pulmonary Embolism / Infarction, Other (NEC)</b>	<b>415.19</b>	<b>Lower Extremity Embolism</b>	<b>444.22</b>
<b>Chronic Pulmonary Embolism</b>	<b>416.2</b>	<b>Aortic Ectasia, unspec Site</b>	<b>447.70</b>
		Phlebitis & Thrombophlebitis, Unspecified Site	451.9
		<b>DVT/Embolism Acute Lower Ext, NOS</b>	<b>453.40</b>
		<b>DVT/Embolism Acute Proximal Lower Ext</b>	<b>453.41</b>

<b>DVT/Embolism Acute Distal Lower Ext</b>	<b>453.42</b>
Varicose Veins, Lower Extremity, Asymptomatic	454.9
Orthostatic Hypotension	458.0
Hypotension, Unspecified	458.9
Venous Insufficiency, Chronic, NOS (Code Also Ulcers)	459.81
Syncope	780.2
Edema	782.3
Chest Pain, Unspecified	786.50
Chest Pain, Other (e.g., Discomfort, Tightness, Pressure)	786.59
Heart Valve Replacement, S/P	V43.3
Cardiac Pacemaker, S/P	V45.01
Aortocoronary Bypass (CABG), S/P	V45.81

### VENOUS EMBOLISM/THROMBOSIS

<b>Acute DVT, lower ext NOS</b>	<b>453.40</b>
<b>Acute DVT, proximal lower ext</b>	<b>453.41</b>
<b>Acute DVT, upper ext.</b>	<b>453.82</b>
<b>Acute VET*, axillary</b>	<b>453.84</b>
<b>Acute VET, internal jugular</b>	<b>453.86</b>
Acute VET, other spec	453.89
<b>Acute VET, other thoracic</b>	<b>453.87</b>
<b>Acute VET, subclavian</b>	<b>453.85</b>
Acute VET, superficial, upper ext	453.81
Acute VET, upper ext, NOS	453.83
Acute VET, NOS	453.9
<b>Chronic DVT, distal lower ext</b>	<b>453.52</b>
<b>Chronic DVT, lower ext NOS</b>	<b>453.50</b>
<b>Chronic DVT, proximal lower ext</b>	<b>453.51</b>
<b>Chronic DVT, upper ext</b>	<b>453.72</b>
Chronic DVT, upper ext NOS	453.73
<b>Chronic VET, axillary</b>	<b>453.74</b>
<b>Chronic VET, internal jugular</b>	<b>453.76</b>
Chronic VET, other spec	453.79
<b>Chronic VET, other thoracic</b>	<b>453.77</b>
<b>Chronic VET, subclavian</b>	<b>453.75</b>
Chronic VET, superficial, upper ext	53.71Z
Chronic VET, superficial, lower ext	453.6

*\*Venous Embolism and Thrombosis Use additional code, if applicable, for associated long-term (current use) of anticoagulants (V58.61)*

### COMPLICATIONS OF MEDICAL TREATMENT

<b>Surgical Complication - CNS</b>	<b>997.01</b>
<b>Malfunction Cardiac Device, Implant Or Graft, NOS</b>	<b>996.00</b>
<b>Malfunction Of Cardiac Pacemaker (Electrode)</b>	<b>996.01</b>
<b>Malfunction Of Urethral Catheter</b>	<b>996.31</b>
<b>Mechanical Loosening Prosthetic Joint</b>	<b>996.41</b>
<b>Dislocation Prosthetic Joint</b>	<b>996.42</b>
<b>Complication, Artificial Skin Graft &amp; Decellularized Allodermis</b>	<b>996.55</b>
<b>Infection/Inflammation d/t Indwelling Urinary Catheter (Use Additional Code To Specify Infection)</b>	<b>996.64</b>
<b>Other Complications Of Renal Dialysis Device/Implant/Graft</b>	<b>996.73</b>
<b>Other Complications Of Nervous System Device/Implant/Graft</b>	<b>996.75</b>
<b>Persistent Postoperative Fistula</b>	<b>998.6</b>

### DIABETES MELLITUS

The following 5th digifs are required for all DM codes.  
**Note: Category 250 is considered "Primary" DM; category 249 is considered "Secondary" DM**

- Primary DM (250 category only)**  
*0=Type II or unsp. type, not stated as uncontrolled*  
*1=Type I (juvenile type), not stated as uncontrolled*  
*2=Type II or unsp. type, uncontrolled*  
*3=Type I (juvenile type), uncontrolled*

- Secondary DM (249 category only)**  
*0=(Secondary), not stated as uncontrolled or unsp.*  
*1=(Secondary), uncontrolled*

<b>DM (prim) w/o mention of compl.</b>	<b>250.0x</b>
<b>DM (sec) w/o mention of compl.</b>	<b>249.0x</b>
<b>DM (prim) w/ketoacidosis</b>	<b>250.1x</b>
<b>DM (sec) w/ketoacidosis</b>	<b>249.1x</b>
<b>DM (prim) w/hypermolar</b>	<b>250.2x</b>
<b>DM (sec) w/hypermolar</b>	<b>249.2x</b>
<b>DM (prim) w/other coma</b>	<b>250.3x</b>
<b>DM (sec) w/other coma</b>	<b>249.3x</b>

*Note: Add 5th digits 0-3 above to the following primary DM codes; add 5th digits 0-1 above to the following secondary DM codes. Use additional italicized code(s) indented below to report manifestation(s).*

<b>DM (prim) w/renal manifestations</b>	<b>250.4x</b>
<b>DM (sec) w/renal manifestations</b>	<b>249.4x</b>
<b><i>CKD or chronic renal failure</i></b>	<b><i>585.x</i></b>
<b><i>Nephritis/nephropathy</i></b>	<b><i>583.81</i></b>
<b><i>Nephropathy w/HTN &amp; CRF</i></b>	<b><i>403.91</i></b>
<b><i>Nephrotic syndrome</i></b>	<b><i>581.81</i></b>
Proteinuria	791.0

<b>DM (prim) w/ophthalmic manifest.</b>	<b>250.5x</b>
<b>DM (sec) w/ophthalmic manifest.</b>	<b>249.5x</b>
<i>Cataracts (type I only)</i>	366.41
<i>Diabetic retinopathy, NOS</i>	362.01
<i>Glaucoma</i>	365.44
<b><i>Prolif diabetic retinopathy</i></b>	<b><i>362.02</i></b>

<b>DM (prim) w/neurologic manifest.</b>	<b>250.6x</b>
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<b>DM (sec) w/neurologic manifest.</b>	<b>249.6x</b>
<i>Amyotrophy</i>	353.5
<b><i>Autonomic (peripheral) neuropathy</i></b>	<b><i>337.1</i></b>
<i>Causalgia/mononeuropathy NOS</i>	355.9
<b><i>Dorsal sclerosis</i></b>	<b><i>340</i></b>
<i>Gastroparesis</i>	536.3
<b><i>Myasthenic syndromes in diseases classified elsewhere</i></b>	<b><i>358.1</i></b>

<b><i>Myelopathy in diseases classified elsewhere</i></b>	<b><i>336.3</i></b>
<i>Neurogenic/neuropathic arthropathy</i>	713.5
<b><i>Neuropathy/neuritis in DM</i></b>	<b><i>357.2</i></b>
<b>DM (prim) w/periph. circ. manifest.</b>	<b>250.7x</b>
<b>DM (sec) w/periph. circ. manifest.</b>	<b>249.7x</b>

***Atherosclerosis, ntv art extremities*** ***440.2x***  
*(add 5th digits: 0 = Unsp., 1 = w/ intermittent claudication, 2 = w/ rest pain, 3 = w/ ulceration, 4 = w/ gangrene, 9 = other. For 5th digits 3 & 4, code also assoc. ulcer 707.1x-707.9, see below.)*

<b><i>Gangrene</i></b>	<b><i>785.4</i></b>
<b><i>Peripheral angiopathy</i></b>	<b><i>443.81</i></b>
<b>DM (prim) w/other chronic manifest.</b>	<b>250.8x</b>
<b>DM (sec) w/other spec. manifest.</b>	<b>249.8x</b>

*Bone Changes (Use additional code to specify bone condition such as: Osteomyelitis, Periostitis and Other Infections Involving Bone 730.00-730.09)* 731.8

***Ulcers, L-limbs, exc. pressure ulcer when not due to Atherosclerosis*** ***707.1x***  
*(add 5th digits 0=unsp., 1=thigh, 2=calf, 3=ankle, 4=heel/midfoot, 5=oth. part of foot, 9=oth. part of L-limb)*

***Ulcer, chronic, other specified sites*** ***707.8***  
***Ulcer, chronic unspecified site*** ***707.9***

<b>DM (prim) w/unsp. complications</b>	<b>250.9x</b>
<b>DM (sec) w/unsp. complications</b>	<b>249.9x</b>

<b>ENDOCRINE (other than diabetes)</b>	
Hyperthyroidism, NOS	242.90
Hypothyroidism, Unspecified	244.9

<b>FALLS</b>	
Fall From Chair	E884.2
Fall From Wheelchair	E884.3

Fall From Bed	E884.4	mention of hemorrhage or perforation	533.90
Fall From Toilet	E884.6	Gastritis, Unspecified	
Fall, Unspecified	E888.9	w/o mention	535.50
<b>FLUID &amp; ELECTROLYTE</b>			
Hypernatremia	276.0	Gastroparesis (See Also Diabetes & Neuropathy)	
Hyponatremia	276.1	code first underlying disease, such as: diabetes mellitus (250.6x)"	536.3
Volume Depletion, Unspecified	276.50	Inguinal hernia, w/obstruction, w/o mention of gangrene, unilateral	550.10
Fluid Overload, Other	276.69	Inguinal hernia, w/obstruction, w/o mention of gangrene, bilateral	550.12
Hyperpotassemia	276.7	Hernia, Umbilical	553.1
Hypopotassemia	276.8	Hernia, Ventral (Epigastric)	553.29
<b>GASTROINTESTINAL</b>			
H. Pylori	041.86	Hernia, Hiatal	553.3
Candidiasis Of The Mouth (Thrush)	112.0	<b>Colitis, Large Intestine</b>	<b>555.1</b>
<b>Candidal Esophagitis</b>	<b>112.84</b>	<b>Colitis, Ulcerative, Unspecified</b>	<b>556.9</b>
Hemorrhoids, NOS	455.6	Gastroenteritis, Unspecified	558.9
Esophagitis, NOS	530.10	<b>Fecal Impaction</b>	<b>560.32</b>
Esophagitis, Reflux	530.11	<b>Intestinal (Bowel)</b>	
Esophageal Stricture	530.3	<b>Obstruction, Unspecified</b>	<b>560.9</b>
Esophageal Reflux (GERD)	530.81	Diverticulosis Of Colon w/o Mention Of Hemorrhage	562.10
Disorders of function of stomach	536.xx	Diverticulitis Of Colon w/o Mention Of Hemorrhage	562.11
<b>Gastrostomy complication</b>	<b>536.4x</b>	Constipation, Unspecified	564.00
<b>Other disorders of intestine</b>	<b>569.xx</b>	Constipation, Slow-Transit	564.01
<b>Colostomy/Enterostomy, Complication</b>	<b>569.6x</b>	<b>Peritonitis, NOS</b>	<b>567.9</b>
<b>Esophagostomy infection</b>		Rectal Bleeding	569.3
<b>Use additional code to specify infection</b>	<b>530.86</b>	<b>Cirrhosis Of Liver, Alcoholic</b>	<b>571.2</b>
<b>Esophagostomy, Mechanical complications</b>	<b>530.87</b>	<b>Chronic Hepatitis, Unspecified</b>	<b>571.40</b>
<b>Ulcer, Acute Duodenal With Perforation, w/o Mention Of Obstruction</b>	<b>532.10</b>	<b>Hepatitis, Chronic Persistent</b>	<b>571.41</b>
<b>Ulcer, Chronic Duodenal With Perforation, w/o Mention Of Obstruction</b>	<b>532.50</b>	<b>Chronic Hepatitis, Cirrhosis Of Liver w/o Mention Of Alcohol</b>	<b>571.5</b>
Ulcer, Duodenal, w/o Mention Of Hemorrhage Or Perforation Or Obstruction	532.90	Cholecystitis, Unspecified	575.10
<b>Ulcer, Acute Peptic, w/Perforation w/o mention of obstruction</b>	<b>533.10</b>	<b>Pancreatitis, Acute</b>	<b>577.0</b>
<b>Ulcer, Peptic, Chronic Or Unspecified, w/Perforation w/o mention of obstruction</b>	<b>533.50</b>	<b>Pancreatitis, Chronic</b>	<b>577.1</b>
Ulcer, Peptic, Unspecified w/o		Bloody Stool	578.1
		Hemorrhage Of GI Tract, Unspecified	578.9
		Hiccough	786.8
		Nausea With Vomiting	787.01
		Vomiting	787.03
		Heartburn	787.1

Dysphagia, Unspecified	787.20	Unspecified	604.90
Flatulence (Gas Pain)	787.3	Lump Or Mass In Breast	611.72
Incontinence, NOS, Fecal	787.60	Cystocele, Lateral	618.02
Diarrhea, NOS	787.91	Rectocele	618.04
Pain, Abdominal, Epigastric	789.06	Prolapse, Female Genital, Unspecified	618.9
Pain, abdominal, Generalized	789.07	Vaginal Discharge (Leukorrhea)	623.5
Pain, abdominal, multiple sites (See ICD-9 book for complete listing)	789.09	Urinary Stress Incontinence, Female	625.6
Ascites	789.50	Vaginal Bleeding, Postmenopausal	627.1
Ascites, Other	789.59	Dysuria	788.1
Pain - Abdominal (specify site) (5 digits)	789.0X	Urinary Retention, Unspecified	788.20
<b>Gastrostomy Status (e.g., Tube Feeding)</b>	<b>V44.1</b>	Urine Incontinence: Urge	788.31
<b>Ileostomy Status</b>	<b>V44.2</b>	Urinary Incontinence: Overflow	788.38
<b>Colostomy Status</b>	<b>V44.3</b>	Urine Incontinence: Mixed (Stress+Urge)	788.33
<b>Other Artificial Opening Of GI Tract (Enterostomy) Status</b>	<b>V44.4</b>	Urinary Frequency	788.41
<b>GENITOURINARY/RENAL/GYN</b>			
Candidiasis Of The Vagina & Vulva	112.1	<b>HEAD/ EYE/ ENT</b>	
<b>Renal Failure, Acute, Unspecified</b>	<b>584.9</b>	<b>Proliferative Diabetic Retinopathy (See Also Diabetes Mellitus)</b>	<b>362.02</b>
<b>Chronic Kidney Disease, Stage I GFR (<math>\geq 90</math> ml/min)</b>	<b>585.1</b>	Nonproliferative Diabetic Retinopathy, Mild	362.04
<b>Chronic Kidney Disease, Stage II GFR (Mild: 60-89 ml/min)</b>	<b>585.2</b>	Nonproliferative Diabetic Retinopathy, Moderate	362.05
<b>Chronic Kidney Disease, Stage III GFR (Moderate: 30-59 ml/min)</b>	<b>585.3</b>	Macular Degeneration, Unspecified	362.50
<b>Chronic Kidney Disease, Stage IV GFR (Severe: 15-29 ml/min)</b>	<b>585.4</b>	Glaucoma, Unspecified	365.9
<b>Chronic Kidney Disease, Stage V GFR (&lt;15 ml/min) (<u>may</u> be dialyzed but not deemed ESRD)</b>	<b>585.5</b>	Senile Cataract, Unspecified	366.10
<b>End Stage Renal Disease (on chronic dialysis, administratively deemed ESRD)</b>	<b>585.6</b>	Secondary Cataract, Unspecified	366.50
<b>Chronic Renal Insufficiency</b>	<b>585.9</b>	Conjunctivitis, Acute, Unspecified	372.00
<b>Renal Failure, Unspecified</b>	<b>586</b>	Blepharitis, Unspecified	373.00
Neurogenic Bladder, NOS	596.54	Inflammation Eyelid, Unspecified	373.9
UTI (Urinary Tract Infection), Unspecified	599.0	Dry Eyes	375.15
Hematuria	599.70	Senile Entropion	374.01
Benign Prostatic Hypertrophy (BPH) w/o LUTS	600.00	Otitis Externa, Other, Acute	380.22
Prostatitis, Unspecified	601.9	Impacted Cerumen	380.4
Orchitis & Epididymitis,		Tinnitus, Unspecified	388.30
		Ear Pain, Otogenic	388.71
		Hearing Loss, Unspecified	389.9
		Sinusitis, Acute NOS	461.9
		Upper Respiratory Infection (URI)	465.9
		Rhinitis, Chronic	472.0
		Sinusitis, Chronic NOS	473.9

Rhinitis, Allergic, Unspecified	477.9
Dental Caries, Unspecified	521.00
TMJ Disorder, Unspecified	524.60
Nosebleed (Epistaxis)	784.7

## HEMATOLOGY

<b>Septicemia, NOS</b>	<b>038.9</b>
Chemotherapy induced anemia	<b>285.3</b>
Anemia - Iron Deficiency, Unspecified	280.9
Anemia, Pernicious	281.0
Anemia, Other Specified Nutritional	281.8
Anemia, Unspecified Deficiency	281.9
<b>Other Specified Aplastic Anemia</b>	<b>284.89</b>
<b>Aplastic Anemia, Unspecified</b>	<b>284.9</b>
Anemia of Other Chronic Disease (this code does not include CKD or neoplastic disease)	285.29
Anemia, Unspecified	285.9
Thrombocytopenia, Unspecified	287.5

## MUSCULOSKELETAL

Osteomalacia, Unspecified	268.2
Gouty Arthropathy, NOS	274.00
Gouty Arthropathy-Acute	274.01
Gout With Manifestations	274.89
<b>Rheumatoid Arthritis</b>	<b>714.0</b>
Osteoarthritis, Generalized, Site Unspecified	715.00
Osteoarthrosis, Generalized, Multiple Sites	715.09
Osteoarthrosis, Unspecified Whether Generalized Or Localized	715.90
<b>Polymyalgia Rheumatica</b>	<b>725</b>
Bunion	727.1
Muscular Contractures, Unspecified	728.19
Muscle Spasm	728.85
Myalgia and Myositis, Unspecified	729.1
<b>Osteomyelitis-Acute, Unspecified Site</b>	<b>730.00</b>
Paget's Disease - Bone	731.0
<b>Vertebral Fracture, Pathologic</b>	<b>733.13</b>
<b>Femoral Neck Fracture, Pathologic</b>	<b>733.14</b>
<b>Fracture Of Other Specified Part Of Femur, Pathologic</b>	<b>733.15</b>
<b>Aseptic Necrosis Of Bone, Site Unspecified</b>	<b>733.40</b>
<b>Aseptic Necrosis, Head &amp;</b>	

<b>Neck Of Femur, NOS Hip</b>	<b>733.42</b>
Kyphosis (Acquired/Postural)	737.10
Kyphosis, Associated With Other Conditions, Code First Associated Condition	737.41
Osteoporosis, Unspecified	733.00
Osteoporosis, Senile	733.01
Gait Abnormality (Symptom)	781.2
<b>Pelvis Fracture, Closed, Unspecified</b>	<b>808.8</b>
<b>Hip Fracture, Closed, Unspecified</b>	<b>820.8</b>
<b>Hip Fracture, Open, Unspecified</b>	<b>820.9</b>
Osteoarthritis (Specify Site) (5 digits)	715.XX
Contracture Of Joint (Specify Site) (5 digits)	718.4X
Degenerative Disc Disease (Specify Site) (5 digits)	722.XX
Upper Extremity Fracture (Specify Site) (4-5 digits)	810.-813.XX
<b>Hip/Femur Fracture (Specify Site) (5 digits)</b>	<b>820.-821.XX</b>
Tibia/Fibula Fracture (Specify Site) (4-5 digits)	823.XX
Joint Replacement, Unspecified, Status Post	V43.60
<b>Amputation, Below The Knee (BKA), S/P</b>	<b>V49.75</b>
<b>Amputation, Above The Knee, (AKA), S/P</b>	<b>V49.76</b>

## NEUROLOGICAL

### Paralysis & Paralytic Conditions

Add the following 5th digit to  
groups 342 and 344.4X with "X"

Unspecified Side	0
Dominant Side	1
Non-dominant Side	2

### Hemiplegia:

Flaccid Hemiplegia	342.0X
Spastic Hemiplegia	342.1X
<b>Other Specified Hemiplegia</b>	<b>342.8X</b>
<b>Unspecified Hemiplegia</b>	<b>342.9X</b>

### Monoplegia

Monoplegia Lower Limb	344.3X
Monoplegia Upper Limb	344.4X

<b>Other Paralytic Conditions:</b>	
<b>Quadriplegia, Unspecified</b>	<b>344.00</b>
<b>Quadriplegia C1-C4, Complete</b>	<b>344.01</b>
<b>Quadriplegia C1-C4, Incomplete</b>	<b>344.02</b>
<b>Quadriplegia C5-C7, Complete</b>	<b>344.03</b>
<b>Quadriplegia C5-C7, Incomplete</b>	<b>344.04</b>
<b>Other Quadriplegia</b>	<b>344.09</b>
<b>Paraplegia, NOS</b>	<b>344.1</b>
<b>Cauda Equina Synd, w/o neurogenic bladder</b>	<b>344.60</b>
<b>w/ neurogenic bladder</b>	<b>344.61</b>
<b>Locked-in State</b>	<b>344.81</b>
<b>Oth Spcf Paralytic Synd</b>	<b>344.89</b>
<b>Paralysis NOS</b>	<b>344.9</b>

<b>Other Neurological</b>	
<b>Parkinson's Disease</b>	<b>332.0</b>
<b>Benign Essential Tremor</b>	<b>333.1</b>
<b>Multiple Sclerosis</b>	<b>340</b>
<b>Trigeminal Neuralgia</b>	<b>350.1</b>
<b>Peripheral Neuropathy, Unspecified</b>	<b>356.9</b>
<b>Cerebral Thrombus w/Infarction (CVA)</b>	<b>434.01</b>
<b>Cerebral Embolism w/Infarction (CVA)</b>	<b>434.11</b>
<b>Intracranial Hemorrhage, NOS</b>	<b>432.9</b>
<b>CVA, Late Effect, Speech &amp; Language</b>	<b>438.10</b>
<b>CVA, Late Effect, Hemiplegia Unspecified Side</b>	<b>438.20</b>
<b>CVA, Late Effect, Hemiplegia Dominant Side</b>	<b>438.21</b>
<b>Monoplegia, Upper Limb, Unspecified Side (Late Effect of CVA)</b>	<b>438.30</b>
<b>CVA, Late Effect, Apraxia</b>	<b>438.81</b>
<b>Dysphagia (Late Effect Of Cerebrovascular Disease) Use Additional Code to Identify Dysphagia, If Known</b>	<b>438.82</b>
<b>Ataxia (Late Effect Of Cerebrovascular Disease)</b>	<b>438.84</b>
<b>Vertigo (Late Effect Of Cerebrovascular Disease)</b>	<b>438.85</b>

<b>Unspecified Late Effects Of Cerebrovascular Disease</b>	<b>438.9</b>
<b>Coma</b>	<b>780.01</b>
<b>Transient Alteration Of Awareness</b>	<b>780.02</b>
<b>Persistent Vegetative State</b>	<b>780.03</b>
<b>Seizures Or Convulsions, NOS</b>	<b>780.39</b>

## **NUTRITION**

<b>Protein Calorie Malnutrition, NOS</b>	<b>263.9</b>
<b>Protein Calorie Malnutrition, Mild</b>	<b>263.1</b>
<b>Protein Calorie Malnutrition, Moderate</b>	<b>263.0</b>
<b>Other Protein Calorie Malnutrition, Severe</b>	<b>262</b>
<b>Cachexia</b>	<b>799.4</b>
<b>Obesity, Unspecified</b>	<b>278.00</b>
<b>Vitamin D Deficiency, Unspecified</b>	<b>268.9</b>
<b>Vitamin Deficiency, Unspecified</b>	<b>269.2</b>
<b>Vitamin B-12 Deficiency</b>	<b>266.2</b>
<b>Tube Feeding, Status</b>	<b>V44.1</b>

## **PSYCHIATRIC/ DEMENTIA**

<b>Dementia:</b>	<b>Senile</b>	<b>Vascular</b>
...uncomplicated	290.0	290.40
...with delusions	290.20	290.42
...with depression	290.21	290.43
...with delirium	290.3	290.41

## **Schizophrenia:**

**Add the following 5th digit to group 295**

<b>Unspecified</b>	<b>0</b>
<b>Subchronic</b>	<b>1</b>
<b>Chronic</b>	<b>2</b>
<b>In Remission</b>	<b>5</b>

<b>Simple Schizophrenia</b>	<b>295.0X</b>
<b>Unspecified Schizophrenia</b>	<b>295.9X</b>

## **Major Depression Table:**

<b>Major Depressive Disorder</b>	<b>Single Episode</b>	<b>Recurrent Episode</b>
<b>Unspecified</b>	<b>296.20</b>	<b>296.30</b>
<b>Mild</b>	<b>296.21</b>	<b>296.31</b>
<b>Moderate</b>	<b>296.22</b>	<b>296.32</b>
<b>Severe, w/o Mention Of Psychotic Behavior</b>	<b>296.23</b>	<b>296.33</b>

<b>Other Psychiatric/Dementia conditions</b>	
<b>Alcohol-induced Persistent Amnesic Disorder</b>	<b>291.1</b>
<b>Alcohol-induced Dementia</b>	<b>291.2</b>
<b>Alcohol-induced Mental Disorder, Unspecified</b>	<b>291.9</b>
<b>Drug-induced Persistent Dementia</b>	<b>292.82</b>
<b>Drug-induced Sleep Disorder</b>	<b>292.85</b>
<b>Drug-induced Mental Disorder, NOS</b>	<b>292.9</b>
Delirium - Acute	293.0
Delirium - Subacute	293.1
Dementia In Conditions Classified Elsewhere, Code First Underlying Physical Condition)	294.11
Organic Brain Syndromes, Chronic, NOS	294.8
<b>Bipolar I (Affective) Disorder, Current/Most Recent Episode, Unspecified</b>	<b>296.7</b>
<b>Paranoid State, Simple Delusional Disorder</b>	<b>297.0</b> <b>297.1</b>
Nonorganic Psychosis, Depressive Type	298.0
Nonorganic Psychosis, Unspecified	298.9
Anxiety, Unspecified	300.00
Panic Disorder	300.01
Generalized Anxiety Disorder	300.02
Obsessive Compulsive Disorder	300.3
<b>Drug Dependence, NOS</b>	<b>304.9X</b>
Tobacco Use Disorder	305.1
Post Traumatic Stress Disorder, Chronic	309.81
Depression, NEC	311
Mental Retardation - Mild	317
Mental Retardation - Moderate	318.0
Mental Retardation - Severe	318.1
Alzheimer's Disease	331.0
Hallucinations, NOS	780.1

## **RESPIRATORY**

Bronchitis, Acute (Not With COPD)	466.0
Pneumonia, Unspecified Viral	480.9

<b>Pneumonia, Pneumococcal</b>	<b>481</b>
<b>Pneumonia, Unspecified Staphylococcus</b>	<b>482.40</b>
<b>Pneumonia, Other Specified Bacteria</b>	<b>482.89</b>
Pneumonia, Organism Unspecified	486
Influenza With Other Respiratory Manifestations	487.1
<b>Bronchitis, Chronic Obstructive, w/o Exacerbation</b>	<b>491.20</b>
<b>Bronchitis, Chronic Obstructive, w/Exacerbation</b>	<b>491.21</b>
<b>Emphysema, NOS</b>	<b>492.8</b>
<b>Asthma w/COPD (Chronic Obstructive Asthma)</b>	<b>493.20</b>
Asthma, Unspecified (Not With COPD)	493.90
<b>Chronic Obstructive Pulmonary Disease (COPD), NEC</b>	<b>496</b>
<b>Aspiration Pneumonia (Pneumonitis d/t Aspiration Of Food, Vomitus, Saliva, etc.)</b>	<b>507.0</b>
Pleural Effusion, Unspecified	511.9
<b>Respiratory Failure, Chronic</b>	<b>518.83</b>
Tobacco Use, History Of	V15.82
<b>Tracheostomy, Attention To Tracheostomy, Status</b>	<b>V44.0</b>

## **SKIN (except skin ulcers)**

Herpes Zoster (Shingles), Unspecified, NOS, w/o mention of complication	053.9
Dermatophytosis (Nail Fungus)	110.1
Candidiasis Of The Skin & Nails	112.3
Scabies	133.0
Cellulitis & Abscess Of Toe, Unspecified	681.10
Cellulitis & Abscess Of Ankle or Leg, Except Foot	682.6
Cellulitis & Abscess Of Foot, Except Toes	682.7
Seborrheic Dermatitis, Unspecified	690.10
Atopic Dermatitis	691.8
Dermatitis, Unspecified Cause	692.9
Pemphigus	694.4

Psoriasis, NOS	696.1
Pruritus, NOS	698.9
Corns & Calluses	700
Actinic Keratosis	702.0
Seborrheic Keratosis	702.1
Ingrown Nail	703.0
Seborrhea	706.3
Xerosis Cutis ("Dry Skin")	706.8
Rash And Nonspecific Skin Eruption	782.1
Edema	782.3
Contusion Of Face, Scalp & Neck Except Eye (Hematoma)	920
Contusion Of Multiple Sites, NEC	924.8
Contusion Of Unspecified Site	924.9
Contusion Of Eye And Adnexa (Hematoma) (Specify Site) (4 digits)	921.X
Hematoma - Upper Limb (Specify Site) (5 digits)	923.XX
Hematoma - Lower Limb (Specify Site) (4-5 digits)	924.XX

### SKIN ULCERS

#### Table 1a - PRESSURE BY SITE

Pressure Ulcers require two codes: one for site & one for stage

Unspecified Site	707.00
Elbow	707.01
Upper Back	707.02
Lower Back	707.03
Hip	707.04
Buttock	707.05
Ankle	707.06
Heel	707.07
Other Site	707.09

#### Table 2a - PRESSURE BY STAGE

Pressure Ulcers require two codes: one for site & one for stage

Unspecified Stage	707.20
Stage I	707.21
Stage II	707.22
Stage III	707.23
Stage IV	707.24
Unstageable	707.25

<b>Table 3a - CHRONIC</b> (see Table 4a for assoc. conditions)	
Lower Limb, Unspecified (Not Decubitus)	707.10
Thigh (Not Decubitus)	707.11
Calf (Not Decubitus)	707.12
Ankle (Not Decubitus)	707.13
Heel And Midfoot (Not Decubitus)	707.14
Other Part Of Foot (Not Decubitus)	707.15
Other Part Of Lower Limb (Not Decubitus)	707.19
Chronic Ulcer Of Other Specified Site (Not Decubitus)	707.8
Chronic Ulcer of Unspecified Site (Not Decubitus)	707.9

### Table 4a - COMMON CONDITIONS UNDERLYING CHRONIC SKIN ULCERS

If present, code also:

DM Type II or Unspecified, Controlled, Other Specified Manifestations	250.80
DM Type I, Controlled, Other Specified Manifestations	250.81
DM Type II or Unspecified, Uncontrolled, Other Specified Manifestations	250.82
DM Type 1, Uncontrolled, Other Specified Manifestations	250.83

### HIV

(Refer to state laws before reporting HIV codes.)

HIV	042
Non-specific serologic evidence of HIV	795.71
Exposure to HIV	V01.79
HIV Infection, No Symptoms	V08

### CONFIRMED DIAGNOSIS

When diagnosis is confirmed, document and submit specific ICD-9 Code instead of the codes for signs/symptoms.

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These codes are to be used for easy reference; however, the ICD-9-CM code book is the authoritative reference for correct coding guidelines. The information presented herein is for information purposes only. Ingenix, Inc. does not warrant or represent that the information contained herein is accurate or free from defects.