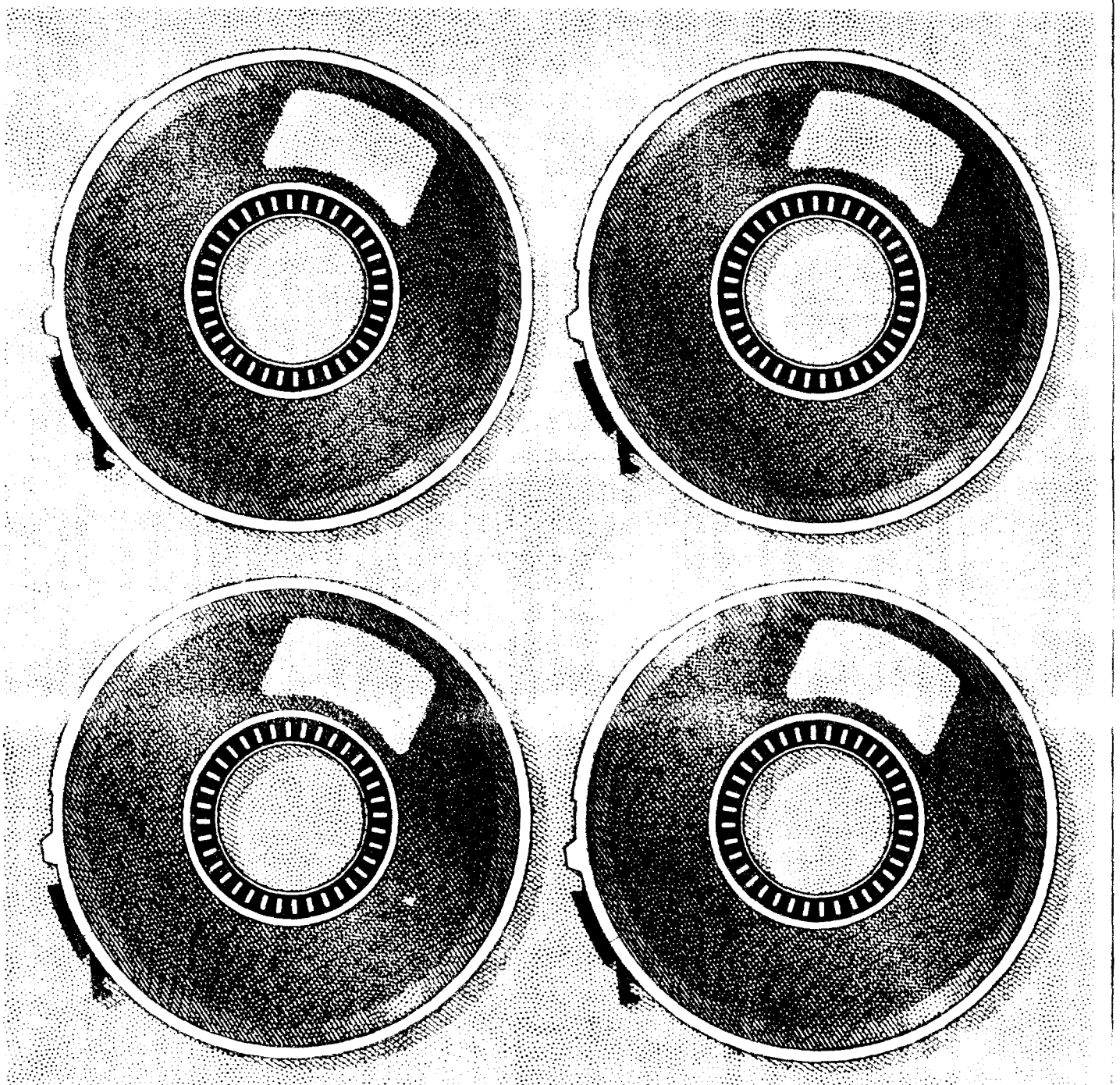
Public Use Data Tape Documentation-Part III

Medical Coding Manual and Short Index

National Health Interview Survey
1984

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES • Public Health Service • National Center for Health Statistics



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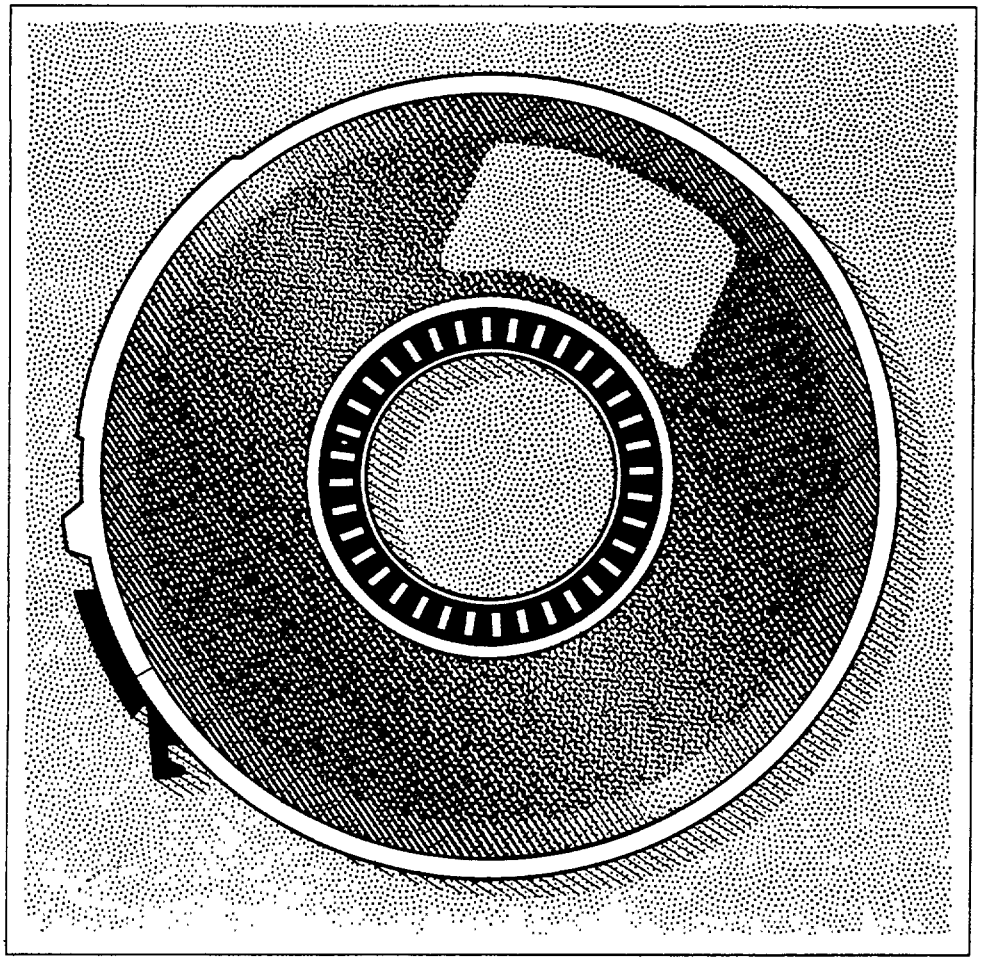

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Center for Health Statistics

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SECTION I. INTRODUCTION AND ORIENTATION GUIDES

A. The Health Interview Survey

Approximately 40,000 interviews are conducted over the course of a year, with households located in each of the 50 States, and the District of Columbia.

Data collected in the Health Interview Survey provide a statistical picture of illness and disability in the civilian, noninstitutional, population of the nation as well as information on related subjects such as time lost from work or school because of illness and medical care received by persons who are ill. One of our nation's greatest resources is a healthy population. The health of the nation may be evaluated in economic terms, such as the loss of individual income or the reduction of total national economic production because of illness or injury. It may be evaluated in terms other than economic, such as the extent of occurrence of particular kinds of illness. Since the overall health of the nation is of vital importance, it is necessary to be able to measure our health assets and liabilities in terms of the entire population.

The Congress of the United States, realizing the necessity for national health statistics, authorized a continuing National Health Survey (Public Law 652 of the 84th Congress) which was signed into law by the President in 1956. Since then several amendments have been made to the initial legislation. Currently the survey is authorized by the Public Health Service Act 95-623.

The Health Interview Survey, with other divisions of the National Center for Health Statistics, is a part of the Department of Health and Human Services. The NCHS contracts with the Bureau of the Census to conduct the interviewing because of the Bureau's function as an objective fact-finding agency and because of its broad experience in conducting surveys. The findings of the survey are analyzed and published by the National Center for Health Statistics.

B. Importance of the Medical Coding

Medical coding plays a very important part in the success of the Health Interview Survey. All of the information on the questionnaire about diseases, injuries, accidents, deliveries, and operations must be translated into numerical symbols. Mistakes in medical coding can seriously affect the accuracy of data which will be furnished to people who will base their decisions and plans on this material.

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C. Codes Used

1. Diagnostic

The diagnostic code for the condition causing the illness or disability is derived from the Ninth Revision, International Classification of Diseases (ICD-9), and a supplementary classification called the X-Code for Special Impairments. The X-Code is listed and described in detail in Appendix I of this Manual.

2. Operations

Operations are coded according to the 2-digit HIS modification, listed in Appendix II. This modification is consistent with the ICD-9 Clinical Modification.

D. Appendix III

Appendix III contains the modifications which have been made to ICD-9 for the purpose of coding HIS condition data. It lists in numerical order all diagnostic categories in 001-999 which have been changed, moved, deleted, or added by HIS.

E. The Short Index

The Short Index, developed by the Health Interview Survey, has been planned to simplify the job of locating the correct medical codes. It contains the names of the more common diseases, symptoms, and injuries of the International Classification, and all types of impairments and operations listed in Appendices I and II. It includes a number of popular or lay terms not indexed by International. Even more importantly, it contains most of the terms affected by the considerable number of modifications of the International shown in Appendix III of this Manual.

The Short Index MUST be consulted FIRST in order to assign a diagnostic code. If the term to be coded is not listed in the Short Index, the coder will then look for it in Volume 2. When the diagnostic code is found, in either the Short Index or Volume 2, the coder must then check Volume 1 for inclusions and exclusions. A final reference must always be made to Appendix III in order to determine if any modifications have been made by HIS to the category. If the term does not appear in the Short Index or Volume 2, then the coder should refer the case to the supervisor.

F. Abbreviations and References — To save space in the Manual hereafter, and in the Short Index, abbreviations are used freely.

1. Organizations	HIS	Health Interview Survey
	NCHS	National Center for Health Statistics
2. Certain Classifications and References To Them	ICD	International Classification of Diseases
	CM3	ICD-9 Clinical Modification Volume 3
	E-Code	External Cause of Injury Classification of ICD; not used for HIS
	V-Code	Supplementary Classifications of Factors Influencing Health Status and Contact with Health Services; not used for HIS
	X-Code	X-Code for Special Impairments (X00-X99)
	Vol. 1	Tabular list of ICD
	Vol. 2	Alphabetical Index of ICD
	001-779	Used in various discussions to indicate the span of numbers of ICD from 001 through 779, constituting the main body of the classification for diseases.
	780-799	The span of numbers for certain symptoms, signs and ill-defined conditions.
	800-999	The span of numbers for injuries and adverse effects.
	X00-X99	The span of numbers for special impairments.
3. Certain Parts of the Questionnaire and Booklet	Col	Column
	Cond. Page	Contains facts about accidents, diagnoses, medical care, disability, dates first noticed, etc.
	Hosp. Page	Where hospital admissions are recorded.
4. Time of Onset of a Condition	Onset	When a condition started
	-3 mos	Within past 3 months
	3 mos+	3 months ago or longer
	-2 wks	Within past 2 weeks; "last week or the week before."
	-12 mos	Within past year.
	12 mos+	1 year ago or longer.
5. Other Abbreviations in Manual and Short Index	NOS	Not otherwise specified, or so stated-in reference to a medical term.
	NEC	Not elsewhere classified in a particular listing or some other place in the various classifications-in reference to a medical term.
	App.	Appendix
	ORTH IMP	Orthopedic impairment of the lesser kinds in X80-X89-not paralysis and not deformity; "See ORTH IMP," in the Short Index, is a referral to the listing under Orthopedic Impairment NEC.
	OP	Operation: "See OP NEC" is a referral in the Short Index, to the listing under Operation, NEC.

G. Training Preliminary To Coding

Persons new to medical coding should be given an extensive preview of the main classes of diseases and injuries of ICD, in Vol. 1, and must be thoroughly prepared to recognize all departures from ICD as shown in Appendix III of this Manual. WHETHER THE CODER IS EXPERIENCED OR INEXPERIENCED, THE IMPORTANCE OF KNOWING WHAT IS IN APPENDIX III CANNOT BE OVEREMPHASIZED.

1. ICD 3-digit categories

Review the listing on pp. 3-45, of Vol. 1. This will give some idea of the large number of conditions that are possible with their technical medical names, and how they are grouped as to type or the system of the body. The E-Codes and V-Codes of ICD are not used by HIS.

2. Comparing the Tabular List, Vol. 1, with Appendix III

The Tabular List begins on p. 49 of Vol. 1. Read the explanatory notes for Appendix III. Next, compare each category listed in Appendix III with that category as listed in Vol. 1, Tabular List, beginning with 001 and continuing through to 999, noting statements beginning "For HIS;" these tell in what way the HIS method differs, or call attention to some provision that is especially important for HIS. This first reading is also intended to acquaint the new coder with more detailed kinds of diagnoses, both in the technical language of Vol. 1 and the more common kinds of terms discussed in Appendix III.

3. Vol. 2

Although most of the terms reported will be found in the Short Index, there will be need at times to consult Vol. 2. Read the Introduction to Vol. 2. References to the E-Code and V-Code may be read but neither of these codes are used by HIS.

Attention is called to the special use of parentheses, page X, a form that appears also in the Short Index.

Note that conditions combining with other conditions, into one code, appear first in a listing under the word with. This form is also used in the Short Index.

The paragraphs following "Neoplasms," p. 338, will be helpful, as the Short Index refers the coder to Vol. 2 for all sites and types of tumors. The HIS rules for coding neoplasms are in Appendix III (140-239).

In using Vol. 2 or the Short Index, watch for indented terms under the word multiple, for here will be listed codes that may be used when two or more sites (parts of the body) are affected by the same disease or injury, but a single code may be used; this should be looked for in all listings, but particularly under Fracture; Wound, open; and other types of Injury.

G. Training Preliminary To Coding Continued

4. Dagger-Asterisks	Dagger, asterisks († / *) are used to designate the "etiology" code and "manifestations" code respectively for terms subject to dual classifications. See under "code numbers" p. IX of Vol. 2 for further explanation. For HIS, only the dagger codes will be used.
5. Appendix II	For HIS, operations on the Hospital Page are coded according to a classification of operations listed in Appendix II and ICD-9 CM3. Study Appendix II to become acquainted with the terms used and the parts and structures included in the various systems of the body.
6. Appendix I	Appendix I (X-Code for Special Impairments) should be read and discussed during the orientation period.

SECTION II. CLASSES OF CHRONIC AND ACUTE CONDITIONS

A. General Rules

1. Each condition to be included in the survey statistics must be identified by the Medical Coder as either chronic or acute, according to HIS definitions and procedures set forth in this Section. The modifiers "acute" or "chronic," alone, which the respondent may happen to use will not affect any of the codes to be used.

2. All codable conditions will be given, in addition to the diagnostic code, a supplementary 1-digit code as follows:

   1.....Chronic
   2.....Acute

   (In the following instructions "1" will stand for chronic, "2" for acute, in referring to this supplementary 1-digit code.)

3. For instructions for assigning the diagnostic code for acute or chronic--See Item E, below.

B. When to Assign "1" (chronic)

A condition is assigned "1" when it meets one or more of the following specifications:

(a) had its onset 3 mos+, except complications of a current pregnancy

(b) qualifies for a diagnostic code for an impairment with "X" in the first digit or

(c) is one of the selected conditions included in Item C, below.

(For the coding of impairments, *see* Section V, and Appendix I of this Manual.)

C. Selected Conditions Coded "1", Regardless of Onset

Note: See exceptions listed below for certain types and causes of allergy, arthritis, epilepsy, hives, hypertension, or rheumatism--which will be assigned "2", if so reported. Otherwise, these diseases and all other conditions included in the following list of selected conditions will be assigned "1", regardless of onset--i. e., whether 3 mos+, or -3 mos.

Absence (loss) of breast, ear, eye, kidney, larynx (voice box), lip, limb(s), lung, nose, or tongue
Alcoholism (as in 303)
Allergy, any, except cases with onset in past 3 mos and due to drugs (995.2), bee sting (989.5), venomous bites (such as snake and spider) (989.5), chemicals (989.9), procedures in 996-999, to contactants (including sunburn) in 692 or substances taken internally (693) or radiation (990).
Arteriosclerosis
Arthritis, any type or cause, except when due to current acute injury
Asthma, any type
Bronchiectasis
Calculi (stones) any part of urinary system
Cancer, any type
Cardiac condition, any type
Cataract, any type or origin (as in 366)
Cerebral palsy (and synonyms) (as in 343)
Cerebrovascular disease (as in 430-435, 437)
Cirrhosis of liver
Clawfoot
Cleft palate
Clubfoot
Color blindness (in 368.5)
Congenital condition, any
Coronary condition (as in 413-414)
Cyst, any site or type
Deafmutism; other total deafness in X05
Detachment of retina (in 361)
Diabetes, any form
Drug addiction or dependence (as in 304)
Emphysema
Epilepsy (as in 345) except when due to current acute injury
Flatfoot, fallen arches
Glaucoma, any type or origin (as in 365)
Goiter
Gout, any type or cause
"Growth" (in) (on) any site
Harelip
Hay fever (any synonyms) (as in 477)
Heart or cardiac disease, any type or cause
Hemeralopia (day blindness) (in 368.1)

C. Selected Conditions Coded "1", Regardless of Onset continued

Hemorrhoids (piles)
Hernia (or "rupture") (as in 550-553)
Hypertension, except that arising in current pregnancy
Loss--See Absence, pg. 7
Mental deficiency, or retardation (as in X19)
Mental disorders of types in 300-306 (except 305.0), 310, 312-316
Mole (pigmented) (nonpigmented) (benign) (malignant)
Mongolism (or synonym)
Multiple sclerosis
Neoplasm (any in 140-239)
Neuroses (in 300)
Nyctalopia (night blindness) (in 368.6)
Optic nerve disorders (in 377.0-377.2, 377.4-377.9)
Paralysis agitans (Parkinson's disease) any cause
Personality disorders (in 301)
Polyps, any site
Prostate condition, any
Psychosis, any type (as in 290-299)
Refractive errors (as in 367)
Retardation, mental (as in X19)
Retinal conditions (in 361, 362, 363.3)
Retrolental fibroplasia
Rheumatic fever, active or inactive
Rheumatism (muscular) except due to current acute injury
Rupture meaning Hernia (as in 550-553)
Specific learning disturbances (as in X14)
Stones (calculi) any part of urinary system
Stroke or other cerebrovascular disease (as in 430-435, 437)
Thyroid (gland) condition, any
Trick knee
Tuberculosis, any site or stage
Tumor, any in 140-239
Ulcer of stomach, duodenum or jejunum
Varicose veins of any site

In addition, such terms as atrophy, contracture, deformity, degeneration, dystrophy, fibrosis, sclerosis--of any site--will be coded "1", regardless of onset.

D. When to Assign "2" (acute)

A codable condition is assigned "2" if it:

(a) had its onset in past 3 mos. and does not qualify for "1" as in items B and C, above; or

(b) is a current delivery or current complication of pregnancy or the puerperium in 630-676.

E. Assigning The Diagnostic Code for Acute, Chronic, or Unspecified

1. Conditions with a third ICD code for unspecified whether acute or chronic, as in bronchitis (490) or nephritis (583): HIS will use these "unspecified" codes only in rare cases in which the date of onset cannot be determined from any source.

2. Tonsil (and adenoid) conditions: 463 (acute); 474 (chronic).

   a. If on Condition Page only, 463 will be used if -3 mos; 474.0-474.9, if 3 mos+

   b. If on Hospital Page only, or on Condition Page and also on Hospital Page--with or without surgery--474.0-474.9 will be used, regardless of onset.

3. Other conditions--not tonsil (or adenoid) conditions--having one ICD diagnostic code for acute, another for chronic:

   The ICD modifiers "acute," "subacute," and "chronic," when stated will not determine the HIS coding of the condition. Instead the following guides are to be used:

   a. Any condition which qualifies for a "supplementary code" of "1" regardless of onset, will receive the diagnostic code for the chronic state of the condition. (For qualifications, see Item B, this Section.)

   b. Conditions with such modifiers stated with onset -3 mos will receive the diagnostic code for the acute state of the condition.

   c. Conditions with such modifiers stated with onset 3 mos+ will receive the diagnostic code for the chronic state of the condition.

SECTION III. GENERAL CODING PRINCIPLES AND PROBLEMS

This Section deals with general rules for selecting the 3 or 4-digit code for diagnosis. Special or additional rules for hospital stays, and for impairments, injuries, complications of childbearing, and for "combining and merging" are in later Sections of this Manual.

A. The Objective

The objective, in diagnostic code selection, is to make use of all of the information on the questionnaire to obtain the best possible description of the kind of disease and the part of the body affected, avoiding if possible the use of a symptom or ill-defined category, and neither overcoding or undercoding.

Whereas this Manual and the Short Index provide for most of the cases you are required to code, there will probably always be a small percent of unusual, complicated, or vague diagnostic statements that may cause coding problems. Coders and verifiers are urged to "spot" problems, and to seek supervisor help for cases which may require special knowledge or special judgment in order to assign the proper code or codes.

B. Expressions Indicating Doubt

The interviewer tries to get an adequate description of a condition and in certain cases asks for its cause and its kind. The medical coder uses these answers, and footnotes, in determining the diagnostic code. If the respondent expresses his own doubt or uncertainty by expressions such as "possibly," "probably," or says "____or____," or that something is "like" something, use the following restated guides:

1. If the condition is positively stated but the cause or kind is not, or expresses doubt in any way, ignore the cause or kind and code the condition as stated.

2. If the condition is not positively stated, but the cause or kind is, make use of the cause or kind in determining the code for the condition.

3. If the condition expresses doubt in any of the following ways, proceed as shown:

   a. If qualified by "possibly" or "probably" or a similar expression, accept the condition.

   b. If alternatives are listed, i. e., "____or_____," or "_____like_____," accept the first condition given.

B. Expressions Indicating Doubt Continued

4. Examples, using chronic conditions.

Condition	Cause	Kind	Code
a. Back trouble	Possible kidneys	D.K.	X80.Y (ignore kidneys)
b. Back trouble	D.K.	Probably slipped disc	X80.Y (ignore disc)
c. Bursitis or Arthritis	Blank	Blank	727.3 (code bursitis)
d. Rash like acne	D.K.	Blank	782.1 (code rash)
e. Possible asthma	D.K.	D.K.	493.9 (accept asthma)
f. Probably asthma	Heart	D.K.	428.1 (accept asthma and cause)
g. Asthma	Heart or Allergy	D.K.	493.9 (ignore cause)

C. Dagger Asterisk System

The Ninth Revision of the ICD contains a dual classification system for approximately 150 categories of certain diseases. One of the codes--marked with a dagger † --relates to the underlying disease process and the other--marked with an asterisk * --relates to the organ system to which the complication relates. See ICD, Vol. 1, page XXVI, for a detailed explanation of this system.

While the dagger-asterisk system is a unique coding process in the Ninth Revision of ICD, HIS WILL NOT use the dual classification system of coding.

If conditions reported are classifiable to the dagger-asterisk system, apply the following guidelines to select a diagnostic code:

1. CONDITIONS MUST BE REPORTED ON THE SAME CONDITION PAGE TO QUALIFY FOR THE DAGGER-ASTERISK SYSTEM OF CODING.

2. FOR HIS, THE CODE MARKED WITH THE DAGGER WILL BE USED SOLELY.

3. If a dagger code has been assigned and on a later Condition Page the Interviewer completes a Condition Page which receives the same 3-digit diagnostic code, merge the information and use the dagger code. Never use the same 3-digit diagnostic code more than once per person.

C. Dagger Asterisk System Continued

EXAMPLE:

Condition Page 01 Person 02

3b. Arthritis 712.0* } Gout would be coded
3c. Gout 274.0† }

Condition Page 03 Person 02

3b. Gout 274.9 } Gout would be coded
3c. DK }

Since Gout (dagger code) has been coded once for Person 02, the data for these two pages must be merged. However, if the Interviewer completes a later Condition Page for Arthritis; Arthritis (716.9) will be coded also.

D. Overcoding Undercoding

Instructions will be given in Section IV, Combining and Merging, for using one code when two or more diseases or sites can be combined into one condition diagnostic code and one Condition Page.

1. Using separate codes when one code is sufficient is called "overcoding."

   If a condition is given and the cause of the condition can be found as an adjectival modifier for the condition, example--heart trouble with cause of hypertension or a footnote on the hypertension page of "same condition as.....," this can be combined into one diagnostic code (402.9) and one Condition Page.

2. Failure to code separately conditions that do not combine or conditions that do not get the same diagnostic code is called "undercoding." If a condition is given on one Condition Page (such as heart trouble, and hypertension is given on another Condition Page) without any footnote linking the two Condition Pages (such as "same condition as....") these two conditions will be coded separately (heart trouble (429.9) and hypertension (401.9)).

E. Arrested Inactive Corrected Chronic Conditions

1. HIS does not use ICD V-codes for arrested conditions. For TWO diseases ONLY, HIS has special codes for arrested conditions as follows, as shown in Appendix III:

   019 Tuberculosis (pulmonary) (any site), arrested or inactive

   399 Rheumatic fever, inactive (old) (history)
   Includes rheumatic fever (and synonyms), with no mention of rheumatic heart disease.

   These codes must be used when tuberculosis or rheumatic fever is SAID to be arrested, inactive, corrected, or cured--whether this is the condition, the cause or the kind--and whether or not surgery is involved.

2. For other corrected or cured conditions with surgery involved, see Item I of this Section.

F. "Active" Cause and Later Condition Pages

The Impairment Section and other places in the HIS Coding Manual instructs the coder to code the cause of a condition also if the cause is a present, active disease. (See Appendix I, Item D for definition of active.)

If an "active cause" is to be coded and on a later Condition Page the SAME condition is given; only ONE Condition Page will be coded. A separate Condition Page will not be created for the "active cause" as the Interviewer has already completed a Condition Page.

If the Interviewer has not completed a Condition Page for the "active cause", the coder will create a Condition Page for the "active cause."

G. Symptoms and Troubles General

1. Many symptoms--particularly those expected to be reported frequently are listed in the Short Index--examples being cough, headache, pain, stiffness, swelling, diarrhea, vomiting and weakness. An extensive listing of "symptoms" is given at the end of the Short Index.

   The general rule is that a symptom is to be coded in terms of its cause if the cause is given by the respondent.

2. For "nerves" or nervous or mental trouble due to various causes, and for conditions which are due to "nerves," see Item H, this Section.

3. For symptoms, troubles, and anything else, due to injury, code the injury only. For complications of surgery, see also Item I, this Section.

4. When symptoms and troubles, with onset of 3 mos+, are to be coded as Impairments in the X-code, see Section V.

5. For symptoms, -3 mos and symptoms not mentioned in G, 1-4, use the following guides:

   Symptoms due to:

   a. Old age: See Appendix III, 797

      Example: Weakness (780.7) due to old age, code 797 only

   b. Menopause: See Appendix III, 627.2

      Example: Headache (784.0) due to menopause, code 627.2 only

   c. Other symptoms: Code the OTHER only unless one of the codes is classifiable to 001-779 or an X-code.

      Example: Dizziness (780.4) due to upset stomach, code 536.8 only.

   d. Causes that are not medical conditions or are not classified in ICD or by HIS: Code the symptom only. Such causes as "having too many children," ordinary bad winter, or summer weather, getting feet wet, sitting in a draft, code the symptom only.

      Example: Headache (784.0) due to hot weather, code 784.0 only.

   e. More specific disease names: the general rule is to code the disease only.

      Example: Seizures (780.3) due to epilepsy, code 345.9 only.

G. Symptoms and Troubles General Continued

6. Multiple Symptoms of Unknown Cause in the Same Illness

Same illness may be determined as follows:

Multiple symptoms are on the SAME CONDITION PAGE.

Interviewer WRITES a footnote of "same condition as ..." that links Condition Pages together with multiple symptoms.

Some other evidence on the Questionnaire that links symptoms together.

When multiple symptoms are involved, the rule will be to select one, as follows:

a. If one is said by the respondent to be more serious than the other, select it.

b. Prefer a code in 001-779 over one in 780-796.
Example: Pain in head (784.0) and eye (379.8), code 379.8 only.

c. If both are in the same 4th digit series, prefer the lowest number--i.e., 4th digits 0, 1, 2, over 3, 4, 5, etc.
Example: Acid stomach (536.8) and irritation stomach (536.9)--code 536.8 only.

d. If both upper and lower digestive system symptoms are present, prefer those of the lower site; if both upper and lower respiratory symptoms are present, prefer the lower.
Examples: Nausea (787.0) and diarrhea (558), code 558 only.
Nosebleed (784.7) and wheezing (786.0), code 786.0 only

e. If one is codable to the X-code, and the other is not, select the X-code.
Example: Headache (784.0) and chronic stiff back, code X80.Y only.

f. If none of these selecting guides seem to apply, take the first one mentioned.

G. Symptoms and Troubles General Continued

Troubles---kinds and causes:

7. "Trouble," "ailment," "attack," "condition," "defect," "disease," "disorder"--of any site--is regarded as ill-defined although codes can be found for them. For these terms the interviewer asks "What kind of..... is it?" A more specific description--such as myocarditis, rather than heart trouble, or psychoneurosis, rather than mental disorder--is sought.

8. Make use of all available information in order to arrive at the most specific disease name. In case the questioning produces only a symptom or something else ill-defined, code to the "trouble," as a general rule.

   a. Exception: When the trouble is something in 799.2 and the cause or kind is a symptom in 307 or something else in 290-316, prefer 290-316 over 799.2. Cause also must be considered when coding troubles, especially when the cause is psychogenic or due to nerves. (See Item H, this Section)

9. Examples in coding symptoms and "troubles:"

	Condition	Cause	"Kind"	Code
a.	Skin trouble	Nerves	Rash and Itching	306.3
b.	Heart trouble	Overwork	DK	429.9
c.	Stomach trouble	DK	Acid stomach and pain	537.9
d.	Stomach trouble	Nerves	Pain	306.4
e.	Lung condition not TB	DK	Cough; spits blood	518.8
f.	Bronchial condition	DK	Bronchiectasis	494
g.	Gallbladder trouble	DK	Can't eat certain foods	575.9
h.	Liver disease	DK	Jaundice	573.9
i.	Upset stomach	hangover	Blank	305.0
j.	Nervous trouble	DK	Hands shake	799.2
k.	Weakness and nervous	Old Age	Blank	290.9
l.	Indigestion	Old Age	Blank	536.8
m.	Headache	Nerves	Blank	784.0
n.	Thyroid trouble	DK	Feels jumpy	246.9

H. Nervous or Mental Trouble

See Appendix III, categories 290-316 and 799.2 for HIS modifications and instructions. Note inclusions and exclusions in category 799.2 (nervousness, NOS).

See also Short Index under such headings as: Addiction; Alcohol; Breakdown; nervous; Depression; Disease, mental; Disorder, mental; Disturbance, emotional; Drunkenness; Emotional; Excitable; Exhaustion; Hangover; Menopause; Mental; "Mind bad;" Nerves; Old Age; Psychosis; Senile; Tension; Tic; Upset; Worry.

Following are descriptions of nervous conditions, with codes:

1. Nervous trouble, can't sleep at night, feels like something crawling on her: Code 307.4

2. Nervous, due to overactive and toxic goiter: Code 316.6 and 242.0

3. Pains in head, upper back and shoulder, past year, due to lack of sleep and nerves: Code 307.4

4. Nervous, depressed, due to epilepsy: Code 316.8 and 345.9

5. Takes medicine for insomnia; has chronic nervous trouble, feels shaky: Code 307.4

6. Nerves, gets dizzy spells: Code 799.2

7. Diarrhea due to nerves: Code 306.4

8. Worry over personal problems causes my fatigue: Code 300.5

9. Nervous trouble, can't remember things, due to hardening of the arteries: Code 316.8 and 440.9

10. Migraine headache due to nerves: Code 346.9 only

I. "Removal" and other Operations Listed on Condition Page

Operations, removal of, repair of, complications resulting from surgical procedures with or without the disease or injury for which surgery was required, and impairments resulting from surgery are often reported on a Condition Page. Coding problems arise when this happens. Use the following instructions as a guide for coding Condition Pages with any of the above mentioned situations:

1. Condition Pages, with surgical procedures, which will be deleted

   a. Delete the Condition Page if a written entry states that surgery was performed over 1 year ago, and within the past year, there has been NO complications, disability, limitation or difficulty with the surgery and the disease or injury for which surgery was required is not mentioned.

      Example: Cataract removed 2 years ago (no complication, disability or trouble seeing in past year due to the surgery or the cataract) Delete the page.

2. Condition Pages with surgical procedures, which will be coded.

   Note: Unless a Condition Page states, as in 1 above, that surgery was performed over 1 year ago, for HIS, it will be assumed that surgery was done within the past year. A Hospital Page for the surgery is not required.

   a. Names of operations only (in past year)
      Names of operations (in past year) on Condition Page with no present surgical complications mentioned and with no mention of disease or injury which required the surgery will be coded to 799.9 (unknown), except:

      1. Circumcision, not routine: Code 605

      2. Obstetrical procedures: Code as Delivery

      3. Tonsillectomy (or adenoidectomy): Code 474.0

      For example: Names of operations such as hysterectomy--with no surgical complication mentioned, and without mention of the disease or injury for which surgery was required will be coded to 799.9.

I. "Removal" and other Operations Listed on Condition Page Continued

2. Condition Pages with surgical procedures, which will be coded (continued)

b. Operations (in past year) with cause; no complications

Surgical procedures on a Condition Page with the disease or injury requiring the surgery given and no complications or impairments resulting from the surgery; code the disease or injury only.

c. Operations with complications, impairments, or both; no cause given

For surgical procedures on the Condition Page with resulting complications, and/or impairments; code the complication, or the impairment or code both the complication and the impairment given.

Code all complications of surgery (See ICD, Vol. 2, Complications, surgical procedures; ICD, Vol. 1; and Appendix III), and code any resulting impairment, following all instructions in Section V, Impairments and Their Causes, for coding impairments.

Example: Impairments may be a result of the surgery--such as breast removed--, or a nature of complication of surgery--such as stiff leg, from surgery on leg 6 months ago.

NOTE: Except for impairments, the precise nature of the complication of surgery will not be coded--such as nausea, due to surgery on intestine, code only the complication (997.4).

d. Operations with complications, impairments or both; cause given

Surgical procedures on the Condition Page with the disease or injury requiring the surgery given and resulting complications, impairments or both; code the disease for which surgery was done, the complication, and any resulting impairment as instructed in 2c above.

If surgery was done for an old injury--such as broken leg 4 months ago--, or an old infection--such as kidney infections as a child--; do not code the old injury or old infection as a separate condition.

NOTE: When a Condition Page states that surgery was performed over 1 year ago and a complication of surgery or an impairment has resulted from the operation, code the complication and/or the impairment; however, the condition for which surgery was performed will not be coded if it has not been present in the past 12 months.

I. "Removal" and other Operations Listed on Condition Page Continued

3. Examples, post operative terms on Condition Page.

	Rule	Present Comp. Due to Surgery	Operation Performed	Cause Requiring Operation	Codes
a.	2a	None	Hysterectomy	DK	799.9
b.	2b	None	Hip operation	Perthe's disease	732.1
c.	2d	Nervous, due to swollen arm	Breast removal	Cancer	X32.2; 457.0; 174.9
d.	2d	Stomach trouble	Gallbladder removed	Gallstones	574.2; 997.4
e.	2b	None	Cleft palate repair	Cleft Palate	X91.9
f.	2d	None	Leg removed	Diabetes	X28.3; 250.0
g.	2d	Stitch abscess	Operation	Bowel obstructed, due to cancer	998.5 159.0
h.	2d	Trouble walking	Operation on hip	3 mos+ fracture	998.8; X89.0
i.	2c	Nausea	Kidney surgery	DK	997.4

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J. Allergies

1. See the Short Index for reference to allergy under such headings as:
Allergy; Asthma; Bronchitis; Conjunctivitis; Cystitis; Dermatitis; Eczema; Gastroenteritis; Headache; Hay fever; Hives; Migraine; Poison ivy; Urticaria.

2. In most cases, the present effects and causes of allergies determines the code to be assigned. A code will be assigned for each body system mentioned in the present effects of an allergy.

Example: Q. 3b Allergies
Q. 3c Sun, pork, melon, onions and bananas
Q. 3f Sick to stomach, difficulty breathing and headache

Three codes are needed in the above example: gastrointestinal allergy (558); respiratory allergy (493.0) and allergic headache (346.2).

3. For allergy associated with shots see Appendix III, 999.4, 999.5 and the Short Index under ALLERGY, due to shots. If a skin reaction to shots is STATED to be allergic, code as for DERMATITIS, due to vaccine (693.0).

4. For allergy due to drugs taken internally for treatment purposes--not preventive vaccines--code to 995.2.

a. If a specified type of allergic reaction is given, code to the specified allergy.

For example: Rash and itching due to taking penicillin: See DERMATITIS due to drug, taken internally (693.0).

K. Disc Conditions

1. See Appendix III, 722 and 839; see also Short Index under DISC.

2. The term disc, NOS, refers to the intervertebral discs as in 722.0-722.9. If a report indicates a condition involving some other disc--for example--optic disc--code as reported.

K. Disc Conditions Continued

3. For specified conditions 3 mos+ with a disc injury (839) as the original cause:

   a. If dislocation, prolapse, protusion, rupture, slipped, injury NOS, or displacement is given as the original disc injury and the following conditions are given as the present effect, code as follows:

      1. Neuritis, radiculitis, pain or trouble codable to X80-X89, code to 722.0-722.2, by site in Short Index.

      2. Sciatica, code to 722.1 if site is thoracic (middle) or lumbar (low back); otherwise, code sciatica without reference to disc.

      3. Arthritis, paralysis, and conditions other than those mentioned above will be coded to the condition given, without reference to disc.

      4. In no case will the number 839 be used for a 3 mos+ disc injury.

4. For present conditions due to surgery for a disc condition; see rules in Item I of this Section. For example:

   A stiff neck, 3 mos+, due to operation for a slipped cervical disc, would be coded to X80, 997.9 and 722.0.

   A slipped disc said to have been treated surgically more than one year ago, with no present complications and no disability in the past year would NOT be coded.

   A slipped disc said to have been treated surgically more than one year ago, with disability in the past year and no specified complication due to the surgery, slipped disc only would be coded.

L. Growths

See Short Index and Vol. 2, under Growth. Growth with perhaps an ill-defined or vague reply as to kind will notwithstanding be coded as for Neoplasm, Vol. 2.

Growth--further explained to be something clearly NOT a neoplasm, will be coded as reported.

M. Pregnancy with Hypertension and other Toxemias

See ICD categories 630-676 and Section VII of this Manual for full instructions for coding conditions related to childbearing. The numbers 630-676 refer to certain conditions arising in a current childbearing experience, and are coded as "acute." If the woman is no longer pregnant, hypertension and other conditions included in 630-676 will be coded as they would be in the non-pregnant state. If the woman is not pregnant, but says she had hypertension or any in 630-676 when she was pregnant but does not have this now, treat the report as history, and do not code.

N. Spelling Problems

The coder will refer to the supervisor any terms spelled in an unintelligible manner. If no one can determine what was intended, and the episode is otherwise codable, use 799.9 (unknown).

O. Typhoid and other Carrier States

These are classified by ICD to V02.0--V02.9. HIS does not use the V-codes. If a person is reported to be a CARRIER of a disease, do not code. However, if a symptom or disease is reported along with the carrier state, code the disease or symptom, not V02.

P. When to Use 799.8 or 799.9

See ICD 799.8 (Other ill-defined conditions). This code may be used if some disease process is stated--such as fibrosis NOS--but the site or type is not mentioned--and the indexing shows no code for unspecified site or type.

Use 799.9 when an illness must be coded, but the disease process is not stated and there is not enough information to tell what the condition is.

Q. Terms Not in the Short Index or Vols. 1 or 2

Consult the supervisor.

SECTION IV. "COMBINING AND MERGING"

A. "Combining"

1. General

"Combining" (a term of convenience) refers to the procedure for assigning a single diagnostic code when certain of two or more closely related conditions are reported for the same person. The kinds of conditions involved in this procedure have been established by ICD and/or by HIS as shown in Appendix III.

Combining may involve two or more related conditions on the same Condition Page; or it may involve related conditions on separate Condition Pages; in the latter situation "Merging" as shown in Item B of this Section becomes in order.

Conditions which can be combined have their own code numbers, but when combined the single code to be used may be different from that of any of the parts, or it may be the same as one of the parts. For example: cold is 460, sore throat is 462, but combined the code is 465.8 but for cold (460) with cough (786.2), the code is 460.

"Combining," for HIS, includes also the selection of a single condition when one or more conditions in the same series are also reported; for example, as shown in Appendix III, only one code in 140-239 is to be coded.

2. Specific rules

Follow all ICD and HIS rules for combining, selecting, or otherwise using one code when two or more related conditions are reported for the same person on the same Condition Page or on separate Condition Pages. Consult the Short Index first, and if the conditions to be coded are not listed, go to Vol. 2 of ICD.

a. Look for the word with indented directly under a term, or in parenthesis after it, in conjunction with such terms as asthma; bronchitis; cold; diarrhea; disease, heart; hay fever; influenza; pneumonia; sinusitis; tonsillitis; ulcer, stomach; whooping cough; and many others; code as indicated.

For example: if a person has hay fever and also asthma, code as for hay fever with asthma--using the single code 493.0.

A. "Combining" Continued

2. Specific rules continued

b. In order to combine terms listed in the Short Index in quotation marks (" "), the term in quotes must be either describing a condition or causing the condition. The conditions may also be combined if they are on separate Condition Pages and the interviewer describes them as being "same as." For example: heart failure due to arteriosclerosis can be combined to 440.9. However, if heart failure and arteriosclerosis are on separate Condition Pages and the interviewer has not linked the two conditions, code heart failure (428.9) and arteriosclerosis also (440.9).

c. Certain diseases can be combined if they are the SAME illness and not linked by the word WITH.

SAME ILLNESS can be determined as follows:

1. If conditions are on same Condition Page.

2. Interviewer WRITES a footnote "same condition as...." that links two conditions together.

NOTE: ICD or the Short Index must have a diagnostic code that combines the two conditions. For example: heart disease on one Condition Page and hypertension on another Condition Page with footnote "same as condition...", would be coded as disease, heart, hypertensive (402.9).

Arthritis on one Condition Page and bursitis on another Condition Page with footnote "same condition as.." would be coded as two separate conditions. Arthritis cannot be found linked with bursitis.

3. Some other evidence on the Questionnaire that links conditions together such as "same accident as..." or other types of footnotes.

d. Combining certain acute infections

Acute infections or inflammations of the respiratory system and other parts of the body NOT codable to 001-136, which are reported as due to or with infections codable to 001-136 will be combined and coded to 001-136 only. For example: if strep throat (034.0) and cold (460) is reported for the same person, combine the two conditions and code strep throat (034.0) only.

A. "Combining" Continued

2. Specific rules continued

e. Look for the word multiple in the Short Index under such headings as Allergy; Burn; Contusion; Infection, respiratory, upper; Injury, superficial; Pain; Sprain; Trouble; Wound, open; and code as shown. When there is a code or a rule for "multiple sites" in the Short Index, Appendix III or in Vol. 2, make use of it.

B. "Merging"

1. "Merging" refers to the consolidating of the data about medical care, date of onset, disability, etc., when conditions or sites that can be combined are on separate Condition Pages.

2. Determine the single diagnostic code to be assigned (as shown in Item A of this Section) and apply this to one of the conditions--usually the one showing the greatest disability or providing the most complete information.

3. For data shown before "K2" of the questionnaire:

a. Cut-down in past 2 weeks: show the maximum number of "days" of each type.

b. Date of onset: show the earliest date of onset.

4. For data beyond "K2:"

If this is shown for at least one of the conditions to be combined, use it. If shown for 2 or more, merge the data and record "yes," and the larger, or earlier, or more significant shown in the other items.

SECTION V. IMPAIRMENTS AND THEIR CAUSES

A. General

See Appendix I for: history and development of the X-code; general characteristics of impairments: ICD codes for impairments; how late effects of disease or injury are coded for HIS; the list of etiologic (cause) codes; and the full numerical classification of impairments by type and site (X00-X99). The X-codes for impairments are considered 4-digit codes, but the "X" in the first digit serves only to identify a condition as an impairment. The first digit is always "X"; the next two digits (00-99) tell the type and site; and the 4th digit (0-9, X or Y) tells the cause.

The majority of impairments are coded to the X-code only if present 3 months or longer. However, conditions such as loss of eye or limb, structural deformities of limbs, back, or skull, artifical orifice (opening), mental deficiency (which are always or usually permanent defects) are coded to the X-code regardless of date of onset. Any condition to be coded with "X" in the first digit is given the 1-digit supplementary code of "1" (chronic), as mentioned in Section II of this Manual.

Generally, impairments are the present effects of some past disease, condition, or event.

Ordinarily, when a present effect is coded as an impairment in the X-codes, the cause will not be coded; cause will be shown by the fourth digit etiology code. For example, the etiology code "0" would show accidental injury, and the old injury would not be coded separately. However, if the cause is an ACTIVE disease (see HIS rule in Appendix I, Item D, for definition of ACTIVE), the disease will be coded also. Instructions will be given in each division of this Section for coding cause.

Impairments involving extremities and the trunk will be coded by the site involved, with a body part receiving only one code. See Items B, C, and D of this Section for further coding instructions.

B. Procedure

Procedure for Assigning X-Codes for Impaired Extremities

Problems may arise in assigning X-codes for impaired extremities.

The following is a summary of the procedure to be used: With the exception of the X-codes for absence, all of the X-codes for extremities include one X-code for the part attached to the trunk (arm and leg) and another for the remainder of the extremity (hand and/or finger(s) (thumb) and foot and/or toe(s)).

1. When both parts have the same type of impairment, code only to the part attached to the trunk of the body. Thus, "partially paralyzed left arm and hand" (and "partially paralyzed left arm and fingers") would be coded only to partial paralysis of the arm (X53). The codes for the other parts of the extremities (hand, foot, etc.) are used only when the arm or leg is not reported to be impaired or these parts have a more severe type of impairment than the arm or leg. (See 2 below.)

2. If the parts of an extremity have different types of impairments proceed as follows:

   a. First code absence of finger(s) (thumb(s)) only (X22), spina bifida (X71.9), congenital dislocation of hip (X75), flatfoot (X77), or clubfoot (X78) if reported and

   b. for the remaining or other parts of an extremity (upper or lower) code to the part with the more severe type of impairment and ignore any remaining part(s) of that extremity.

3. Where more than one extremity is involved, and (1) they have the same type of impairment, and (2) they are both upper or lower, or interviewer fails to state which side, assume both are on the same side of the body and use the X-code for combinations of extremities (i. e., "arms, both," "one side, hemiplegia," etc.).

4. If fingers or toes are given and the report does not state if one or more hands or feet are involved, assume one hand or foot.

C. Priority

Priority in Assigning X-Codes for Different Types of Impairments

A person may receive several X-codes, but within the code range of X00-X19 only one code in each category may be assigned for a person.

A person may receive several X-codes in the code range of X20-X89. This range of codes will be assigned by body part with a body part receiving only one code within this range. For example, a person may have a paralyzed arm with the hand deformed, but for HIS only the paralyzed arm would be coded. The most severe impairment reported for a body part of a person will be coded; using the priority order listed below:

1. Absence (except tip of digit) X20-X34

2. Complete (NOS) paralysis X40-X49

3. Partial paralysis X50-X59

4. Paralysis, complete or partial, sites except extremities X60-X64

5. Specified deformity X70-X79

6. Non-paralytic orthopedic impairment X80-X89

7. Loss of sensation X12

8. Absence of tip of digit (below first joint) X35

EXCEPTIONS to above priority order of coding body parts are: absence of finger(s) (thumb(s)) only (X22), Spina bifida (X71), congenital dislocation of hip (X75), flatfoot (X77), and clubfoot (X78), which will always be coded in addition to any other impairment code assigned for a body part.

D. Multiple Impairments Same Person

Guides for coding multiple impairments per person are as follows:

1. A person may receive several X-codes.

2. With rare exceptions, no specific body part or site may receive more than one X-code. These exceptions relate only to absence of finger(s), congenital dislocation of hip, clubfoot, flatfoot, and spina bifida. These cases are discussed in more detail in the sections related to them.

D. Multiple Impairments Same Person Continued

Guides for coding multiple impairments per person--continued

3. The use of certain X-codes prohibits the use of other X-codes or a given range of X-codes. In the range X00-X19 only one X-code for each type of impairment in this range may be assigned per person. In the range X20-X90, X-codes which prohibit the use of certain other codes are indicated by (1) stated instructions to that effect, or (2) the term "Prohibits X--" accompanying the designation of the code.

4. Within a range of X-codes related to a type of impairment (i. e., paralysis, absence, etc.) always prefer the lower number X-codes (i. e., those which appear first.) Thus, a person with "paralysis of left side" and "paralysis of right arm" would NOT receive the X-code for paralysis of upper extremity, both, even though both arms are paralyzed. This is because the person should have been coded to hemiplegia since that X-code appears first and use of that code means that the left arm has already been coded. Since it cannot be coded again, the person should also receive the X-code for upper extremity, one. In this way all affected body parts are coded and none has received more than one code.

5. The rule for combining corresponding extremities into one code (hemiplegia; legs, both, etc.) applies only when each is classified to the same type of impairment ("partial paralysis of right arm and partial paralysis of left arm"). When the body parts or sites have a different type of impairment, each must be coded separately. For instance, "paralysis of left arm and partial paralysis of right arm" could NOT be coded to upper extremity, both. Since two types of impairments are involved, each arm would have to be coded separately (paralysis of one upper extremity and partial paralysis of one upper extremity.)

6. Unless two extremities can be combined into one code as in 5 above, each impaired extremity will receive at least one X-code, except when deformity of extremity is involved.

   Since the deformity codes for extremities do not distinguish between one or both upper or lower extremities (or, one or both hands, finger(s) on hand, feet, etc.,) two deformed extremities may receive only one X-code, if they are both upper or both lower. However, two X-codes would be assigned for a deformed upper extremity and a deformed lower extremity. Also, two X-codes would be assigned for a deformed right arm and a deformed left hand (or fingers on the left hand).

E. Impairments and Their Causes Etiology

1. Impairments are coded by using a 4-digit code with X always the first digit to indicate an impairment. The next two digits show the type and site; the 4th digit the cause (etiology) of the impairment.

2. The following list of etiology codes will be used for any impairment in X00-X99:

   .0 Accident or injury except at birth

   .1 Cerebrovascular disease (stroke) (with arteriosclerosis) (with hypertension)

   .2 Neoplasm

   .3 Diabetes (with cataract or glaucoma)

   .4 Poliomyelitis

   .5 Cataract with glaucoma

   .6 Cataract without glaucoma

   .7 Glaucoma without cataract

   .8 Other eye diseases

   .9 Congenital origin NEC or birth injury

   .X Other conditions not in .0 to .9 (non-traumatic) (non-congenital) (hereditary) (old age) ("age" NOS)

   .Y Unknown or unspecified origin

3. Determining etiology code for multiple causes of a single impairment:

   Determine the etiology code for each of the causes and assign the one which is highest on the list of etiologies. For example: if an accidental injury is at least one of the multiple causes, the 4th digit code would be .0 since .0 is at the top of the list.

   NOTE: The etiology code .0 (accident or injury) can only be used for impairments occurring as the result of a sudden, one-time injury or exposure; thus impairments caused by <u>continuous</u> loud noise, continuous heavy lifting, constant strain, etc., will not be considered one-time occurrences and will be assigned .X for etiology.

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F. Visual Impairments

See Appendix III, ICD categories 360-379, 743 and 871 for HIS modifications of eye and vision conditions.

1. Visual Impairments

a. As shown in Appendix I, the four HIS categories used for CODING various degrees of visual impairments are:

X00 Blind in both eyes

X01 Visual impairment in both eyes

X02 Blind in one eye, visually impaired in other eye

X03 Blind or visually impaired in one eye only; other eye good vision or not mentioned.

NOTE: One or more ICD disease codes for an eye condition is permitted, but only ONE code in X00-X03 will be coded per person.

b. An X-code for blindness or visual impairment will be assigned only from entries on a Condition Page; without reference to the disease or eye condition of a person. The fact that a person has an eye disease or condition does not warrant assigning a visual impairment code. A code in X00-X03 will be assigned only in the following situation:

1. There is a WRITTEN or STATED indication on a Condition Page that a person is blind or has a visual impairment. The WRITTEN or STATED terms which will be considered visual impairments and coded to X00-X03 are given in F3.

F. Visual Impairments

2. Date of Onset

a. A Condition Page for visual impairments will only be coded if the visual impairment has an onset of 3 mos+ with the exception of b and c below. For Condition Pages with visual impairments indicated that are -3 mos (other than b and c below), the visual impairment is not to be coded, only the disease or injury causing the impairment will be coded if the cause is known. If the cause is unknown, 379.9 (unspecified disorders of the eye) will be coded. For rare cases of always chronic eye conditions resulting from an injury -3 months, with indication of a visual impairment also, the eye injury code, the chronic eye condition and an X-code for the visual impairment will be coded.

b. Regardless of onset, eyes knocked out or other STATED terms indicating loss of eye(s) will be coded to X00, X02 or X03. The code used will be determined from Interviewer's written entry on the Condition Page.

c. Cataract (366.-), Glaucoma (365.-), retinal conditions (361.- and 362.-), are eye diseases which are always chronic. If a visual impairment is indicated with these eye conditions, the visual impairment will be coded also, regardless of onset. Instructions for coding Color blindness (368.5), night blindness (368.6) and day blindness (368.1) are given in Item F4 of this Section.

NOTE: This rule does not apply to conditions such as cataract, detached retina or others corrected by surgery, when the surgery was done more than one year ago, with no limitation or disability reported in the past year. See Section III, Item I.

F. Visual Impairments Continued

3. Selecting X-Code in X00-X03

a. After determining that a visual impairment is to be coded, use an X-code in X00-X03 to code WRITTEN or STATED entries of blindness, terms indicating visual impairments or defective vision. Using Interviewer's entries on Condition Page, select a code from eye impairment table that best describes the status of a person's visual impairment. If there is no clear indication that only one eye is involved, assume that both eyes are involved.

No vision, can't see, blind, with clear indication that a person cannot see, will be coded as for blindness in one or both eyes. For entries of visual impairment, other than blindness, code any combination of the terms listed below to the X-code which best describes the persons visual impairment:

1. WRITTEN entries of blindness in one or both eyes; half-blind, no vision, partially blind or blind spot in one or both eyes; bad, blurred, defective, limited, poor, double, problem with, or trouble with----linked with eyesight, seeing, sight or vision.

Any active disease reported as causing a visual impairment will be coded also, if the disease meets HIS definition of an active disease (see Appendix I, Item D, for definition).

4. Eye diseases eligible for ICD code and X-Code

a. Double vision (+3 mos), color blindness, night blindness and day blindness will receive BOTH an eye conditon diagnostic code (ICD) and an eye impairment code (X-Code). Assume both eyes are visually impaired when assigning the X-code unless one eye is indicated.

F. Visual Impairments Continued

5. Ill-defined eye conditions

a. Disease(s) of the eye(s) and ill-defined terms such as bad eyes, eyestrain, weak eyes, eye trouble, with NO STATED visual impairment will be coded to ICD disease codes only. If a visual impairment is indicated with ill-defined eye conditions, code the impairment, omitting the ill-defined eye condition.

b. Allergy or migraine causing any eye or vision problem of any kind or onset: code the allergy or migraine only.

6. Assigning Etiology Code

a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

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G. Hearing Impairments

See Appendix III, categories 380-389 and 744.0-744.3.
See Appendix I, categories X05-X09
See Short Index, Deafness, Hearing Impairment

1. Degree of Hearing Impairment

a. Conditions that qualify as hearing impairments will be classified to one of the five categories listed below:

X05 Deafness, both ears
Includes persons who are reported "deaf" in both ears, or reported to have no useful hearing in both ears, or can't hear, both ears.
Excludes terms such as "a little deaf," "partially deaf"; code as for hearing impairment.

X06 Other hearing impairment involving both ears
Includes any bilateral hearing impairment which cannot be coded to X05.

X07 Deafness or hearing impairment of any degree involving one ear.

X08 Deafness, NOS
Includes "deafness," "deaf," "can't hear" and unable to determine whether one or both ears are involved.
Excludes terms such as "a little deaf," "partially deaf"; code as for hearing impairment.

X09 Impaired hearing except as in X05-X08 (unable to determine whether one or both ears are involved.)

b. In order to classify hearing impairments to X05-X07, two thing must be determined:

1. Whether or not the person is deaf in both ears
2. Whether one or both ears are involved

Determinations in b1 will be based on condition entries such as deaf, deafness, deafmute, or "can't hear."

Determinations in b2 will be based on Interviewer's entries for condition stating whether one ear (X07) or both ears (X06) are involved. Prefer the entry in Item 3g of the Condition Page over others.

G. Hearing Impairments Continued

1. Degree of Hearing Impairment---Continued

b. Continued

X08 will only be used for entries of "deaf," "deafness," "can't hear," with no indication whether one or both ears are involved.

X09 will be used only when a hearing impairment is indicated with no indication whether one or both ears are involved.

2. Date of Onset

a. Conditions qualifying for X05 and X08 will be coded as chronic, regardless of onset. X06-X07, X09 will be coded only for conditions 3 mos+.

b. Entry of "deafmute" will be coded to X05 and X11, regardless of onset.

c. Hearing impairments -3 mos, with cause known will be coded to cause only; if cause is unknown, code 388.4 (other abnormal auditory perception).

3. Coding disease causing hearing impairments

a. Any active disease reported as causing a hearing impairment will be coded also, if the disease meets HIS definition of an active disease (see Appendix I, Item D, for definition.)

4. Coding both X-Code and ear disease code

a. X06, X07, X09 due to or consisting of tinnitus ("ringing in ears" and synonyms); code X06, X07 or X09 and tinnitus (388.3).

5. When X-Code not used

a. Hearing impairments codable to X07 or X09 caused by allergy will be coded to allergy only.

b. Hearing impairments codable to X07 caused by "wax in ear" will be coded to 380.4 only.

6. Assigning Etiology Code

See Section V, Item E for list of etiology codes and priority order for assigning etiology.

H. Speech Impairments

See Appendix III, categories 307.0, 307.9, 315.3, 315.5, 750.1, 784.4 and 784.5
See Appendix I, categories X10, X11 and X91.9

1. Only one speech defect per person is to be coded. The two speech impairment codes are as follows:

   X10 Stammering and stuttering

   X11 Other speech defects
   Includes persons with absence of larynx or tongue even if speech defect is not reported.

2. Date of Onset

   a. Absence of tongue or larynx will be treated as chronic, regardless of onset, and coded to X11 (whether or not speech is mentioned.)

   b. Stammering, stuttering, and other speech problems -3 mos will be coded per Short Index or ICD; 3 mos+ to X10 or X11.

   c. Deafmute persons reported: code X05 and X11, regardless of onset.

3. Conditions not coded as speech defects

   a. Cleft palate: code X91.9, regardless of onset.

4. Coding disease causing speech impairment

   a. Any active disease reported as causing a speech impairment will be coded also, if the disease meets HIS definition of an active disease. (See Appendix I, Item D, for definition.)

5. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

I. Special Sense Impairments NEC

See Appendix III, categories 781.1 and 782.0
See Appendix I, category X12

1. Date of Onset

   a. Code as follows:

      1. Loss or impairment of smell or taste; -3 mos, 781.1; 3 mos+, X12

      2. Numbness and burning sensation; -3 mos, 782.0; 3 mos+ X12

   b. The above conditions -3 mos, due to a known cause will be coded to cause only.

2. With cause stated

   a. For above conditions, 3 mos+, due to or caused by specified conditions or disease will be coded to disease only. (Ignore Active and Inactive disease rule.)

   b. Only one X12 will be coded per person. If any other X-code in X40-X99 has been assigned for that person, omit X12.

3. Assigning Etiology Code

   a. See Section V, Item E, for a list of etiology codes and priority order for assigning etiology.

J. Special Learning Disability and Mental Deficiency

See Appendix III, categories 315.0, 315.1, 315.2, 315.5, 317-319, 345 and 758.0
See Appendix I, categories X14 and X19

1. Special Learning Disability

   a. Conditions that indicate a specific learning disability such as ICD categories 315.0, 315.1, 315.2 and 315.5, will be coded to X14, regardless of onset, as specific learning disabilities are considered to be chronic by HIS.

   b. If mental deficiency or retardation is mentioned as causing the learning disability, code to X19 only.

2. Mental Deficiency or Retardation

   a. Code entries of mental deficiency or retardation, can't learn, slow learner, etc. to X19 and treat as chronic, regardless of onset.

   NOTE: Use only one code per person in X14 and X19, preferring X19 over X14.

3. Coding Causitive Disease

   a. Any active disease reported as causing learning disability or mental retardation will be coded also, if the disease meets HIS definition of an active disease. (See Appendix I, Item D, for definition.)

4. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

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K. Absence of Extremities and Certain Other Sites

See Appendix III, categories 520.0, 525.0, 748.1, 748.3, 748.5, 753.0, 873, 885-887, and 895-897
See Appendix I, categories X20-X35, X90 and X92
See Short Index, Absence

1. Date of Onset

   a. Absence of extremities and body parts, other than teeth, will be treated as chronic, regardless of onset.

2. Missing body parts which will not be coded to X20-X35:

   a. absence of eye(s): code as for Blindness.

   b. absence of tooth, teeth: code per Short Index.

   c. absence of larynx, tongue or other oral structures: code to X11, Speech defects.

   d. absence of nose, lips or ears: code to X90.

3. Absence which will be coded to X30-X35

   a. absence of lung: code X30.

   b. absence of kidney: code X31.

   c. absence of breast: code X32.

   d. absence of rib(s), bone(s), muscle(s) of trunk: code X33

      1. Includes: pelvic area, diaphragm and vertebrae. If any in X33 are missing due to surgery to remove a lung or kidney, code absence of part involved.

      2. Any in X33 with paralysis, deformity, or orthopedic impairment of trunk, code to paralysis, deformity or orthopedic impairment, omit X33.

   e. absence of bone(s), joint(s), muscle(s), of extremity or extremities (includes hip) without loss of the extremity or extremities: code X34.

      1. Any in X34 with paralysis, deformity or orthopedic impairment of the SAME body part, code to paralysis, deformity, or orthopedic impairment, omit X34.

K. Absence of Extremities and Certain Other Sites Continued

3. Absence which will be coded to X30-X35--continued

   f. absence of tip(s) of finger(s) or toe(s) (below first joint) only: code X35.

      1. If any indication that more than tip(s) of finger(s) or toe(s) is missing, code to absence of that part, not X35.

      2. If tip(s) of finger(s) or toe(s) are missing and the SAME hand(s), arm(s), leg(s), foot or feet has entry of paralysis, deformity or orthopedic impairment, code to that impairment, not X35.

4. Absence of extremity or extremities in X20-X29 with other X-Codes

   a. With any X-code in X40-X89 of SAME body part, code absence only. Code each body part mentioned, making use of multiple codes when possible.

5. Coding absence of body parts not included in X20-X35

   a. Absence of body parts not included in X20-X35 will be coded per ICD under Absence; if the cause is congenital, code the ICD code for congenital; if the cause is unknown, code as for acquired absence or disease NOS of that part.

6. Absence, any site, due to surgery

   a. For absence of a body part resulting from surgical procedures, follow rules given in Section III, Item I, Removal and Other Surgical Procedures, and Appendix III, 996-998.

7. Coding disease causing absence

   a. Any active chronic disease reported as the cause of a body part being removed or missing will be coded also, if the disease meets HIS definition of an active disease. (See Appendix I, Item D, for definition.)

8. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

L. Paralysis Complete or Partial

See Appendix III, categories 343, 344, 348, 350-358, 430-438, 781.0 and 781.3
See Appendix I, categories X40-X64
See Short Index, Paralysis

1. Date of Onset

   a. Cerebral palsy (and synonyms) (X50), "hangs limp," and "drop" (paralytic) are coded as chronic, regardless of onset.

   b. Other paralysis, complete or partial, must be present 3 mos+ in order to receive an X-code.

   c. For paralysis, -3 mos, complete or partial, see Short Index, Paralysis, -3 mos.

2. Problem Terminology

   a. Paralysis, complete or partial, waist down, lower body: code as for Paraplegia or Paraparesis.

   b. "Ataxia NEC," "spastic," "disturbance of coordination or gait": code as for Paralysis, partial.

   c. "Staggering," "stumbling": code as for Trouble, walking.

   d. "Dead nerve NOS," 3 mos+, due to polio or some other cause and not further qualified: code to X99 by etiology.

   e. "No use," "can't bend," "can't straighten up" or "can't sit up," in reference to back or limb(s): code as for Trouble of these sites. If 3 mos+ and due to stroke, polio, or other disease of brain or spinal cord, code as for Paralysis, by site. If partial is mentioned or there is an indication that the person can move the part, code as for Paralysis, partial, by site.

L. Paralysis Complete or Partial Continued

3. Paralysis, complete or partial, with other X-Codes

   a. Paralysis, complete or partial, with other X-codes in X70-X89 involving SAME body part, code Paralysis only, with one code for each body part mentioned; making use of multiple codes when possible. See Items B and C of this Section for assigning X-codes and priority order for X-codes.

      EXCEPTION: Spina bifida (X71), congenital dislocation of hip (X75), flatfoot (X77), and clubfoot (X78) will always be coded in addition to paralysis, if reported.

   b. Absence of a body part with paralysis of SAME body part will be coded as for Absence.

      EXCEPTION: Any in X33 or X34 with paralysis of SAME body part will be coded to Paralysis only, NOT X33 or X34.

4. Paralysis, complete or partial, ill-defined sites

   a. If one arm and one leg are affected and there is no indication that they are on the same or opposite sides of the body, assume they are on the SAME side and code as for "one side of body." If both are completely paralyzed, code X41. If the arm is partially paralyzed and the leg is completely paralyzed, code X53 and X47. See also Item D for coding multiple impairments per person.

5. Coding disease causing paralysis

   a. Any active chronic disease reported as the cause of a body part being paralyzed, completely or partially, will be coded also, if the disease meets HIS definition of an active disease. (See Appendix I, Item D, for definition.)

6. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

M. Deformity Limb, Back, Trunk

See Appendix III, categories 709.2, 717, 723.5, 727, 728, 729, 734, 735, 736, 737, 738, 741, 744.5, 744.8, 744.9, 754, 755, 756 and 781
See Appendix I, categories X70-X79 for terms other than Deformity which are included in X70-X79.

1. Date of Onset

   a. Any condition qualifying for X70-X79 will be treated as chronic regardless of onset and coded to X70-X79.

2. Terms and causes not coded as Deformity

   a. WRITTEN entries of "deformity," "atrophy," "withered" with cause of stroke, polio, or other paralytic disease of brain or spinal cord: code as for Paralysis, by body site.

   EXCEPTION: Spina bifida (X71), congenital dislocation of hip (X75), flatfoot (X77), and clubfoot (X78) will always be coded as deformities. If paralysis is reported with these conditions, code both the deformity and the paralysis.

3. Coding X70-X79 in priority order

   a. Spina bifida (X71), congenital dislocation of hip (X75), flatfoot (X77) and clubfoot (X78) will always be coded as deformities. If absence or paralysis of the SAME body part is also reported, code absence or paralysis in addition to the deformity.

   b. Conditions qualifying for X70-X79, other than cases mentioned above, will be coded to body part deformed. One person may receive more than one code in this range. However, codes in this range should not be used for a body site which can be coded to more serious types of impairments in the range X20-X64, except when those types of deformities listed in (a) above are involved.

   c. Absence of the kind(s) in X33, X34 or X35 reported with a deformity of the SAME body part will be coded as for Deformity (X70-X79) only.

M. Deformity Limb, Back, Trunk Continued

4. Coding disease causing Deformity

   a. Any active chronic disease reported as the cause of a body part being deformed will be coded also, if the disease meets HIS definition of an active disease. (See Appendix I, Item D, for definition.)

5. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology code and priority order for assigning etiology.

N. Non-Paralytic Orthopedic Impairment NEC

See Appendix III, categories 710-719, 720-724, 725-729, 738 and 781.9
See Appendix I, categories X80-X89 for Inclusions and Exclusions
See Short Index: Limp, Orthopedic Impairment, Pain, Stiffness, Swelling, Trouble, Walking difficulty and Weak.

1. Date of onset

a. Trick knee: Code X86 regardless of onset. If due to a specified active disease, code disease only. NOTE: If the active disease causing the trick knee is also on a later Condition Page, merge the information on the two pages, since a diagnostic code can only be used once per person.

Example:
Condition Page 1 Person 03
3b. Trick Knee } Arthritis would be coded
3c. Arthritis }

Condition Page 4 Person 03
3b. Arthritis } Arthritis would be coded
3c. DK }

Merge the two pages and code only one Condition Page with diagnostic code for Arthritis.

b. All other conditions codable to X80-X89 must have an onset of 3 mos+.

2. Conditions codable to X80-X89 (3 mos+)

a. Limitation of motion NEC; stiffness; instability of joint; flail joint; ill-defined symptomatic conditions involving limbs, muscles, joints, back or trunk of unknown cause, due to injuries 3 mos+ or old sprains, dislocations and sprains 3 mos+, will be coded to X80-X89, by body site. If a body part has been coded to any in X20-X79 and the SAME body part has an orthopedic impairment; prefer the code in X20-X79 over any in X80-X89 for the SAME body part.

Example: Paralysis, one side of body, caused by stroke. Pain in arm, caused by injury, 3 mos+, code X41.0 and code stroke also.

N. Non-Paralytic Orthopedic Impairment NEC Continued

2. Conditions codable to X80-X89 (3 mos+)--continued

b. Orthopedic Impairments mentioned on the preceding page due to or caused by specified conditions or disease will be coded to disease only. (Ignore active and inactive disease rule.)

Example: Conditions in X80-X89 caused by:

disc conditions: code disc condition
arthritis: code arthritis
bursitis: code bursitis
blood clot: code blood clot

c. When one person has multiple orthopedic impairments in X80-X89, eliminate any body part which has been coded in X20-X79, then code remaining body parts to X80-X89, by site.

3. Conditions not codable to X80-X89 (3 mos+)

a. Conditions in X80-X89 due to or caused by polio, stroke or other paralytic diseases of brain or spinal cord will be coded as for Paralysis, by site; if there is information that the person is bed-ridden, chairfast, or unable to move the part impaired, code as for Paralysis, complete, by site; if no such information is available, code as for Paralysis, partial in X51-X59. (Code the causative disease also, if the disease qualifies as an active chronic disease.) (See Appendix I, Item D, for definition of active disease.)

4. Assigning Etiology Code

a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

O. Impairment NEC

See Appendix III
See Appendix I, fategories X90-X99 for Inclusions and Exclusions

1. Date of onset

   a. Absence of teeth, acquired -3 mos: code 525.1; if due to injury -3 mos, code 873. Acquired absence of teeth, 3 mos+, will be coded to X92.

   b. "Brain damage" NEC, -3 mos: code 348.9; if due to injury -3 mos, code 854; if due to birth injury, code 767.0. "Brain damage" NEC, 3 mos+, with no residual specified will be coded to X99. If a residual is given, code the residual only, omitting X99.

2. Conditions codable to X90-X93

   a. Conditions in X90 and X92, involving teeth or jaw, with a speech impairment present, code the speech defect also.

   b. Cleft palate and harelip (X91.9); no additional code for speech defect will be coded.

   c. Deformity of skull (X93): If mental retardation is present, code the mental retardation also.

3. Conditions codable to X99

   a. X99 includes ill-defined impairments that cannot be coded to any other X-code. Entries such as deformed NOS, cripple NOS, without a body site specified; birth injury NOS, brain damage NOS (over 3 months of age) without specified type of injury or damage are coded to X99.

   b. Ill-defined after effects of tuberculosis, encephalitis, poliomyelitis, trachoma, toxoplasmosis, rickets, intracranial abscess, will be coded to X99 also. If a specified residual is given, code the residual only, omit X99. (See Appendix I, Item D.)

   c. Ill-defined after effects of stroke will be coded to stroke, NOT X99.

4. Assigning Etiology Code

   a. See Section V, Item E, for list of etiology codes and priority order for assigning etiology.

SECTION VI. INJURIES, ACCIDENTS AND THEIR EFFECTS

A. Injury General

1. The interviewer asks additional questions about accidents and injuries and records them in a space to be referred to as the Accident Section. In general a filled Accident Section will indicate that the condition is codable as an injury. Whether or not the Accident Section is completed the medical coder will apply all HIS rules and make use of all information, including footnotes, in order to judge whether the condition is actually to be coded as an injury.

2. See Appendix III, categories 800-999, for notes and instructions about injuries and their effects. Note that complications of medical and surgical procedures in 996-999 are counted with injuries, but they may have arisen through no fault of the doctor or surgeon.

3. For HIS, injuries are defined as any condition codable to ICD 800-999. They are divided into five groups as follows:

   a. "Injury" (fracture, laceration, etc.) codable to 800-959.

   b. For HIS effects of drugs have been split into two groups:

      - OVERDOSE or POISONING by drugs, ICD 960-979. They will be coded to 977.9

      - Adverse effects of drugs 995.2. Includes any effects of drugs, medicaments or biological substances without mention of "overdose" or "poisoning."

   c. Toxic effects of venom and adverse effects of chemical substances, ICD 980-989. For HIS, code to 989.5 and 989.9

   d. Other effects of external causes (frostbite, sunstroke, etc.) ICD 990-995, (excluding 995.2).

   e. Complications of surgical procedures or other medical care, ICD 996-999.

4. For HIS, injuries in groups a, d, and e above MUST result from a single episode of exposure. Continued exposure, for example, to loud noise or constant heavy lifting will be coded as if non-traumatic. Injuries in b and c, however, are coded regardless of length of exposure or number of episodes.

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B. Date of Onset

Injury conditions will be coded by onset according to when they were "first noticed," as shown on the Condition Page. This may affect the diagnostic code, and also whether to count as "acute" or "chronic." This will apply, regardless of when the original accident or event occurred, as shown in the Accident Section. For those conditions with onset (of the injury) 3 mos+, code from present effects of the injury. For those with onset -3 mos, code from kind of injury except as in rules given in Appendix III.

C. Multiple Injuries and Accidents

1. If a person reports more than one injury, ICD 800-999, as a result of a single accident, apply any HIS or ICD provisions for combining these multiples; otherwise, code each separately. See also Appendix III, categories 800-999, for references to multiples within various groupings.

2. Multiple accidents same person:

The general rule will be to count each separate accident a person may have, in terms of the condition(s) produced in each accident. However, when two separate accidents produce the same chronic condition or impairment, or add to the extent or severity of it, code only the latest state of this chronic condition or impairment, using the circumstances (how and where) of the latest accident report.

This section refers to: conditions of the newborn; deliveries (normal or complicated); abortions and other complications of pregnancy; and complications of the puerperium.

A. Infants

As previously, well newborn infants, or infants born dead, are not coded or counted by HIS. For instructions for coding illness conditions of infants, see Appendix III, categories 760-779 (Certain causes of perinatal morbidity).

If an infant stays in the hospital after the mother goes home (has more nights than mother in the hospital) and no reason is stated or indicated, the Hospital Stay will be coded as entered.

Routine circumcision, for infants whose hospital stays are to be coded, is not counted as an operation and is not coded; if this infant has some other operation during his stay, it will be coded, according to the general rules for coding operations, in Section VIII of this Manual.

B. Pregnancy

"Pregnancy" refers to the period of gestation before abortion or delivery. See Appendix III, categories 630-676 for notes applicable to complications of pregnancy. See also the Short Index and Vol. 2 under "Pregnancy".

C. Abortion

Abortion is coded as per ICD, Vol. 1, categories 634-639. It includes any interrruption of pregnancy before 28 weeks gestation with a dead fetus. See Appendix III, categories 630-676 for notes applicable to abortion. See also Vol. 2 under "Abortion." "Miscarriage" will be coded as for Abortion, spontaneous (634.-).

If the Hospital Page says that an operation such as "D and C", or some other, was done to induce the abortions, or to treat a spontaneous abortion, the operation will be coded as reported, according to the general rules in Section VIII.

D. Deliveries

1. See Appendix III, categories 630-676 for notes applicable to delivery. See also the Short Index and Vol. 2 under "Delivery."

2. All hospitalized deliveries--on the Hospital Page--will be regarded as having been treated surgically even though the person may say no operation was done. For HIS, "Delivery NOS" will be coded to 75 (Other Obstetrical Operations).

3. If the mother has some other operation after delivery while still in the hospital--such as "tubes tied" (66)--code it in addition to the delivery code.

E. Puerperal Complications

The "puerperium" refers to the 2-month period (approximately) following a delivery or abortion. Complications arising during this period are classified in 642, 646-648, or in 660-676. See Appendix III, categories 630-676, for notes applicable to puerperal complications. See also Short Index, and Vol. 2, under "Puerperal."

F. 1-Digit Supplementary Code

Use "2" (acute) for the 1-digit supplementary code for all conditions on the Condition Pages which are codable to 630-676. Conditions complicating a current pregnancy are coded as acute even though they may have started in the earlier months of this pregnancy. Conditions due to previous pregnancies are not coded to the numbers 630-676, but to the numbers for the conditions indicated. For example: varicose veins "due to pregnancy," in a woman who is not pregnant now, and is not in the puerperal stage, is coded to 454.9 and as "1" (chronic). See also Section III, Item M, for "Pregnancy with hypertension and other toxemias."

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A. General

For conditions related to childbearing, see Section VII of this Manual. Section VIII deals with general instructions for operation codes to be used in coding the Hospital Page.

B. Codable Admissions

1. For HIS, codable hospital admissions or stays must be:

   a. Within the time reference period (limits of which are defined elsewhere), AND

   b. For overnight or longer.

C. Coding Operations

See Appendix II, Classification of Operations and Non-Operative Procedures for HIS, and the Index of Operations and Non-Operative Procedures for HIS. For multiple operations per person, see Item D, below.

1. For HIS, operations include not only incision (cutting into), excision (cutting out), but the setting of bones, the introduction of tubes for drainage, "tapping" (drawing off fluid), terms ending in "____scopy" (procedures for internal viewing and treatment) and others which the person and the coder may not think of as operations. These will be coded as operations or surgical procedures even though the person says "no operation was performed."

2. Operations for fractures and dislocations of bones and joints: see Appendix II, categories 76-79.

   a. If the diagnosis shows "rib" as the site, do not code as if treated surgically unless the report states than an operation was done.

   b. If the diagnosis gives any site except rib, assume that surgery was done, and code as if surgically treated.

3. Other kinds of operations and procedures: consult ICD 9-CMS and/or Appendix II; code as reported. If in doubt whether a procedure should be coded as an operation, consult the supervisor.

D. Multiple Operations Per Person

Multiple Operations, per person

a. Code each operation up to three. If more than three given, code first three. Implied operations will be coded after listed operations have been coded.

APPENDIX I

X-CODE FOR SPECIAL IMPAIRMENTS (X00-X99)

BY TYPE, SITE AND ETIOLOGY

U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Center for Health Statistics
Division of Health Interview Statistics

APPENDIX I. X-CODE FOR SPECIAL IMPAIRMENTS

A. History and Development of the X-Code

The X-Code for Special Impairments, by Type, Site and Etiology, was developed in 1955-1956 by the, at that time, Division of Public Health Methods of the Public Health Service. It had been tried and found useful in coding and tabulating various kinds of defects and deformities as reported in household health surveys, and in certain other studies of handicapping conditions, requiring relatively simple detail for statistical presentation. It provided a plan by which all three elements of type, site, and etiology (cause) could be expressed by means of a single diagnostic code, and it brought together similar types of defects by type and site; etiology was supplied by adding an additional 1-digit code to the code for the type and site. HIS elected to use this plan for impairments, using the ICD revision in effect at that time for coding all other conditions.

HIS has continued to use this X-Code, making some changes in it since the beginning of the Survey, and will use it instead of the present ICD for the coding of impairments.

Appendix I, which contains the X-Code and explains it, has been rewritten as of January 2, 1979 but the principles and methods are similar to what they were before that time. For the lists of etiological codes, and the full classification of impairments by type, see E and F of this Appendix.

In developing the X-Code it had been necessary to make a selection of conditions to be called "impairments." The term "impairment" has no actual definitive medical significance. Cardiac, mental, or arthritic patients are "impaired" as well as amputees, the blind, the deaf. However, defects of the heart, lungs, other internal or respiratory organs are in general excluded from the X-Code except when these sites are involved in paralysis, absence of part, or postoperatively in the formation of an artificial opening to the surface. Chronic progressive disease processes of all systems are excluded (to be coded as per ICD), but the line between what is a "chronic disease" and what is an "impairment" is, in some areas, admittedly thin. For example: speech defects, mental retardation, cerebral palsy are included in the X-Code, but epilepsy, multiple sclerosis, Parkinson's disease, and personality defects are to be coded as chronic diseases in terms of ICD codes.

B. General Characteristics of Special Impairments

1. Special impairments (to be referred to hereinafter as impairments) are often late effects of past and inactive pathological processes. (See also Item D, following, for discussion of "late effects.") But they may sometimes coexist with and be due to a currently active progressive chronic disease such as diabetes, arteriosclerosis, cancer.

2. Impairments are often, but by no means necessarily, permanent, and some are relatively minor in nature. Many respond to corrective therapy, medical or surgical. However, they must be chronic or long-continuing or of chronic type in order to be coded to the X-Code. For rules for coding impairments in relation to date of onset, see specific instructions set forth elsewhere in the HIS Medical Coding Manual.

B. General Characteristics of Special Impairments---continued

3. They represent decrease or loss of ability to perform such functions as seeing, hearing, tasting, smelling, other sense perception, speaking, understanding, reading, writing, use of symbols, locomotion, lifting, or manipulation of body or extremities or making a presentable appearance.

4. They are, in summary, for the most part functional or structural musculoskeletal and neuromuscular abnormalities or defects, and defects of special senses, speech, intelligence.

C. ICD Codes for Impairments

All conditions in the X-Code can be found somewhere in ICD, Vols. 1 or 2. As a matter of interest to classifiers, ICD codes for impairments are discussed here, although they are, of course, not used when the X-Code is used.

For certain impairments the ICD code is specific for a particular kind of impairment, while for others it may be one that includes also: (1) conditions that are not classed as impairments or (2) more than one type of impairment. Strict comparability, therefore, code by code, between the X-Code and ICD for all types of impairments is not possible. However, listed below, in ICD numerical order, Vol. 1, are those ICD categories which are used exclusively for impairments with the X-Code numbers to be used instead, at the right. These ICD numbers are not used by HIS--as shown also in Appendix III.

It should be noted that ICD categories in the list below with numbers in the 740-759 series include impairments specified or known to be congenital in origin; categories with "8" in the first digit are traumatic in origin. Whereas, to all impairments in X00-X99 the coder must add the appropriate etiological code, the etiological code is not shown in the following listing with any of the X-Code numbers.

APPENDIX I. X-CODE FOR SPECIAL IMPAIRMENTS

ICD CODE NUMBER(S)	NAME OF IMPAIRMENT	X-CODE NUMBER(S)
317-319	Mental Retardation (various degrees)	X19
342	Hemiplegia	X41
343	Infantile cerebral palsy	X50
	Other paralytic syndromes	
344.0	Quadriplegia	(X40-X49,
344.2	Diplegia of upper limbs	(X50-X59,
344.3	Monoplegia of lower limbs	(X60-X63
344.4	Monoplegia of upper limb	(by site
344.5	Unspecified monoplegia	(and extent
344.6	Cauda equina syndrome	(
344.8	Other	(
344.9	Unspecified	(
369	Blindness and low vision	X00-X03
389	Deafness	X05-X09
	Deaf mutism	X05
520.0	Anodontia	X92
520.1	Supernumerary teeth	X92
520.2	Abnormalities of size and form	X92
520.5	Hereditary disturbances, tooth structure	X92
521.6	Ankylosis, teeth	X92
524	Dentofacial anomalies, including malocculusion	X92
718.6	Unspecified Protrusio Acetabuli	X75
728.4	Laxity of ligament	X80-X89, by site
728.6	Contracture of palmar fascia	X74
734	Flatfoot	X77
735	Acquired deformities of toe	X76
736	Other acquired deformities of limbs	X73-X76, by site
737	Curvature of spine	X70

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ICD CODE NUMBER(S)	NAME OF IMPAIRMENT	X-CODE NUMBER(S)
738	Other acquired deformities	
738.0	Acquired deformity of nose	X90
738.1	Other acquired deformity of head	X93
738.2	Acquired deformity of neck	X79
738.3	Acquired deformity of chest and rib	X79
738.4	Acquired spondylolisthesis	X70
738.5	Other acquired deformity of back and spine	X70
738.6	Acquired deformity of pelvis	X75
738.7	Cauliflower ear	X90
738.8	Acquired deformity of other specified site	X70-X79, X90, X92, X93 by site
738.9	Acquired deformity of unspecified site	X99
741	Spina bifida (congenital)	X71
742.0	Encephalocele	X93
742.1	Microcephalus	X93
742.3	Congenital hydrocephalus	X93
743.0	Anophthalmos, one or both eyes	X00, X02, X03
743.1	Microphthalmos, NEC	X01
744.0	Anomalies of ear, causing hearing impairment	X05-X09
744.1	Accessory auricle	X90
744.2	Other specified anomalies of ear	X90
744.3	Unspecified anomalies of ear	X90
744.5	Webbing of neck	X79
744.8	Other specified anomalies of:	
	face (disfiguring) NEC	X90
	neck NEC	X79
744.9	Unspecified anomalies of:	
	face NEC	X90
	neck NEC	X79
749	Cleft palate and cleft lip	X91
750.0	Tongue tie	X11
750.1	Other anomalies of tongue (with speech defect)	X11
753.0	Renal agenesis and dysgenesis	X31

APPENDIX I. X-CODE FOR SPECIAL IMPAIRMENTS

ICD CODE NUMBER(S)	NAME OF IMPAIRMENT	X-CODE NUMBER(S)
	Congenital musculoskeletal deformities:	
754.2	spine	X70
754.3	dislocation of hip	X75
754.4	bowleg(s), deformity leg(s)	X76
754.5	varus deformities of feet	X76
754.6	valgus deformities of feet:	X76
	flatfoot	X77
754.7	other deformities of feet:	X76
	clubfoot NOS	X78
754.8	other specified deformities:	
	chest wall	X79
	dislocation of elbow	X73
	chest, funnel chest	X79
	clubhand, hand	X74
	lower limb joints	X76
755	Other congenital anomalies of limbs:	
	absence	X20-X29, X35, by site
	deformity	X70-X79, by site
756.0	Anomalies of skull and face bones:	
	face	X90
	skull, NEC	X93
756.1	Anomalies of spine:	
	absence of specified segment of spine	X33
	other deformity of spine	X70
756.2	Cervical rib	X79
756.3	Other anomalies of rib and sternum:	
	absence of rib, sternum	X33
	other deformity of rib and sternum	X79
758.0	Down's syndrome	X19
759.7, 759.9	Multiple congenital anomalies, type and site not specified	X99
781.5	Clubbing of fingers	X74
	Traumatic amputation of:	
885	thumb(s)	X22,X25
886	other finger(s)	X22,X25
887	arm(s) and hand(s)	X20-X24
895	toe(s)	X27,X29
896	feet, foot	X27,X29
897	leg, one or both	X26,X28

APPENDIX I. X-CODE FOR SPECIAL IMPAIRMENTS

ICD CODE NUMBER(S)	NAME OF IMPAIRMENT	X-CODE NUMBER(S)
905.6	Late effect of dislocation	X80-X89
905.7	Late effect of sprain and strain	X80-X89
905.8	Late effect of tendon injury	X80-X89
905.9	Late effect of traumatic amputation	X20-X29, X35

D. Late Effects of Diseases, Injuries, and Poisonings

A "late effect" is regarded generally as any abnormal condition resulting from a pathological process after this causative process has become inactive or healed. A late effect may consist of an impairment as defined, or it could be any other abnormal condition. For HIS, an impairment may be a late effect as defined above, but it could be due to some active pathological process. By means of the X-Code, impairments can be collected whether the cause is present or not. Instructions for coding impairments in relation to active diseases causing them are set forth elsewhere in the HIS Medical Coding Manual.

For facts about the HIS method of coding late effects of injury or poisoning, see notes for categories 800-999, in Appendix III.

ICD has a few categories specific for late effects of certain diseases--with "late effects" in the title.

Following are the ICD codes for late effects of diseases, which are not used by HIS for any purpose--as shown also in Appendix III:

137 Late effects of tuberculosis
138 Late effects of acute poliomyelitis
139 Late effects of other infectious and parasitic diseases
268.1 Late effects of rickets
326 Late effects of intracranial abscess or pyogenic infection
438 Late effects of cerebrovascular disease

Since the above ICD late effects codes for diseases are not used by HIS, the method for coding late effects is as follows:

1. When the late effect is a specified impairment, the appropriate X-Code is selected and the appropriate etiological code is added; for example, "Blindness, both eyes, due to old trachoma" is coded by HIS to X00.8, only.

2. When the late effect is specified but it is not an impairment, the condition is coded to the ICD code for the condition, but never to the above-mentioned ICD late effects codes; for example, "Personality disorder due to old encephalitis" is coded by HIS to 301.9 only.

3. If the past disease is known, but the present difficulty is ill-defined or not specified, the above ICD late effects codes will not be used. Instead, if the past disease is one indicated in these late effects codes, or is an old birth injury, or "Brain damage NEC," X99 (with the appropriate etiological code) will be used. Thus, for example, "Post-polio" would be coded to X99.4. However, for "After effects of stroke," the stroke only will be coded.

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D. Late Effects of Diseases, Injuries, and Poisonings--continued

Coding Late Effects, other than those on the preceding page, and the original disease

1. ICD does not have late effect codes for diseases other than the ones mentioned on preceding page. However, HIS coding requires that late effects of many diseases be coded; which is usually a special impairment. When the disease causing the late effect or special impairment is given, the question arises as to when to code the causative disease also. HIS has devised a definition for an active disease and an inactive disease, as described below. When a causative disease meets HIS' definition of "active" disease, the disease will be coded in addition to any special impairment.

Inactive disease processes will be used to determine etiology and will not be coded as a separate diagnosis.

The terms "active" and "inactive" (i.e., past disease or condition) are distinguished by considering ALL of the Condition Pages for each person.

The CAUSE is "Active" if:

1. it is reported in Item 1 or 3b of a Condition Page AND NO explicit indication that the condition is cured or no longer present. "Explicit indication" would include: (1) Questions 10-12 completed and "cured" is checked in Item 12b; (2) the person says the condition is cured, corrected, arrested, no longer present, or the equivalent; (3) the name of the condition indicates it is no longer present ("childhood rheumatic fever" and the person is an adult)

2. it is reported in Item 3c or 3e, and the condition is on the list of conditions which are coded as chronic regardless of onset, and there is no explicit indication (as defined in #1 above) that the condition is cured, corrected, arrested or no longer present

3. it is stated in the footnotes or written entries of the Condition Page(s) for this person that the disease causing the impairment is still present.

The CAUSE is "Inactive" if:

1. it is reported in Item 1 or 3b of a Condition Page AND there is explicit indications (as defined in #1 above) that the condition is cured, corrected, arrested or no longer present

2. it is reported in Item 3c or 3e, AND either the condition is NOT on the list of conditions which are coded as chronic regardless of onset, or, if it is on the list, there is explicit indication (as defined in #1 above) that the condition is cured or no longer present

3. there is no footnote or written entry on the Condition Pages for this person stating that the condition causing the impairment is still present.

E. List of Etiology Codes

Note: For complete instructions for coding impairments by etiology, see HIS Medical Coding Manual.

These codes are listed in the order of priority in which they should be assigned when more than one etiology is given, none of them is an accident or injury, and it cannot be determined which was the earlier cause of the impairment. Where the earlier cause can be determined, that fourth digit is always assigned regardless of the priority shown below. Accident or injury ALWAYS has priority whether it occurred earlier or later than other causes.

.0 Accident or injury except at birth

.1 Cerebrovascular disease (stroke) (with arteriosclerosis) (with hypertension)

.2 Neoplasm

.3 Diabetes (with cataract or glaucoma)

.4 Poliomyelitis

.5 Cataract with glaucoma

.6 Cataract without glaucoma

.7 Glaucoma without cataract

.8 Other eye diseases (as in ICD) (any infection of eye)

.9 Congenital origin NEC or birth injury

.X Other conditions not in .0-.9 (non-congenital) (non-traumatic) (hereditary) (old age) ("age" NOS)

.Y Unknown or unspecified origin

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F. Classification of Impairments, by Type and Site (X00-X99)

Note: For complete instructions for coding all types of impairments and their causes, see HIS Medical Coding Manual, Section V.

X00-X03 BLINDNESS AND IMPAIRMENT OF VISION (Only one code in this range may be used per person)

X00 Blind in both eyes

X01 Visual Impairment in both eyes

X02 Blind in one eye, visually impaired in the other eye

X03 Blind or visually impaired in one eye only; other eye, good vision or not mentioned

X05-X09 DEAFNESS AND IMPAIRMENT OF HEARING (Only one code in this range may be used per person.)

X05 Deafness, both ears
Includes persons who are reported "deaf" in both ears, or reported to have no useful hearing in both ears, or can't hear, both ears. Excludes terms such as "a little deaf," "partially deaf"; code as for hearing impairment.

X06 Other hearing impairment involving both ears
Any bilateral hearing impairment which cannot be coded to X05.

X07 Deafness or hearing impairment of any degree involving only one ear

X08 Deafness, NOS
Includes "deafness," "deaf," "can't hear," unknown whether one or both ears are involved. Excludes such terms as "a little deaf," "partially deaf"; code as for hearing impairment.

X09 Impaired hearing, NOS
Hearing impairment unknown whether one or both ears are involved.

F. Continued

X10-X19 IMPAIRMENT OF SPEECH, SPECIAL SENSE AND INTELLIGENCE

X10-X11 IMPAIRMENT OF SPEECH (Only one code in this range may be used per person.)

X10 Stammering and Stuttering

X11 Other speech defects
Includes persons with absence of larynx or tongue even when speech defect is not reported.

X12 IMPAIRMENT OF SPECIAL SENSE, EXCEPT VISION OR HEARING

X12 Loss or impairment of sensation
Includes taste, smell and loss or disturbances of sensation (burning) and numbness of any body parts. This code will NOT be used if a code in the range of X40-X99 has been assigned.

X14 SPECIAL LEARNING DISABILITY

(Prefer X19 if both X14 and X19 are present per person)

X14 Special learning disability (reading) (mathematics) ("mirror writing or reading".) Does not include learning disability resulting only from deficiency in intelligence.

X19 MENTAL RETARDATION

X19 Mental retardation: Any degree or any type, including "mongolism." ("Down's (Downes) Syndrome")

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F. Continued

X20-X35 ABSENCE, LOSS, EXTREMITIES, AND CERTAIN OTHER SITES

X20-X25 ABSENCE, LOSS, UPPER EXTREMITY

X20	Arms, both	Code only one of these codes per person, and no other code in the range of X20-X25.
X21	Hands, both	
X22	One or more fingers (excludes tip only-below first joint (thumb(s)) of both hands	
X23	Arm, one Person may also have X24 or X25	
X24	Hand, one Person may also have X23 or X25	
X25	One or more fingers, (excludes tip only-below first joint), thumb, of only one hand. Person may also have X23 or X24	

X26-X29 ABSENCE, LOSS, LOWER EXTREMITY

X26	Legs, both	Code only one of these codes per person, and no other code in the range of X26-X29.
X27	Feet or toes (excludes tip only-below first joint) only, both	
X28	Leg, one Person may also have X29	
X29	Foot or toes (excludes tip only-below first joint) only, one Person may also have X28	

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F. Continued

X30-X35 ABSENCE, LOSS, CERTAIN OTHER SITES

X30 Lung

X31 Kidney

X32 Breast

X33 Rib, bone, joint, or muscle of trunk, one or more

X34 Bone, joint, or muscle of extremity (including hip) without loss of extremity, one or more

X35 Tips of fingers or toes (below first joint) only

X40-X64 PARALYSIS, COMPLETE OR PARTIAL

X40-X49 PARALYSIS NOS (COMPLETE) OF EXTREMITIES

X40 Entire body or four limbs (Prohibits X41-X62)

X41 One side of body only, including limbs; or "hemiplegia." (Prohibits X42, X44, X46, or X48)

X42 Arms, both (Prohibits X43-X45)

X43 Arm, one (Prohibits X44)
(When the corresponding body part on the other side has been coded, "one" means "other.")

X44 Hands, both, and/or finger(s) (thumb) on one or both hands only. (Prohibits X45)

X45 Hand, one, and/or finger(s) (thumb) on one hand, only.
(When the corresponding body part on the other side has been coded, "one" means "other.")

X46 Legs, both; or "paraplegia." (Prohibits X47-X49)

X47 Leg, one (Prohibits X48)
(When the corresponding body part on the other side has been coded, "one" means "other.")

X48 Feet, both, and/or toe(s) on one or both feet, only.
(Prohibits X49)

X49 Foot, one, and/or toe(s) on one foot, only.
(When the corresponding body part on the other side has been coded, "one" means "other.")

F. Continued

X40-X64 PARALYSIS, COMPLETE OR PARTIAL----CONTINUED

X50-X59 CEREBRAL PALSY AND PARALYSIS PARTIAL OF EXTREMITIES

X50 Cerebral palsy (and synonyms)
Includes "spastic" if present since birth (congenital)
(Prohibits X51-X64)

X51 One side of body only, including limbs; or "hemiparesis."
(Prohibits X52, X54, X56, or X58)

X52 Arms, both (Prohibits X53-X55)

X53 Arm, one (Prohibits X54)
(When the corresponding body part on the other side has been coded, "one" means "other.")

X54 Hands, both, and/or finger(s) (thumb) on one or both hands only. (Prohibits X55)

X55 Hand, one, and/or finger(s) (thumb) on one hand only.
(When the corresponding body part on the other side has been coded, "one" means "other.")

X56 Legs, both; or "paraparesis," (Prohibits X57-X59)

X57 Leg, one (Prohibits X58)
(When the corresponding body part on the other side has been coded, "one" means "other.")

X58 Feet, both, and/or toe(s) on one or both feet, only
(Prohibits X59)

X59 Foot, one, and/or toe(s) on one foot, only
(When the corresponding body part on the other side has been coded, "one" means "other.")

X60-X64 PARALYSIS, COMPLETE OR PARTIAL, SITES EXCEPT EXTREMITIES

X60 Trunk, any part except parts included in X40, X41, or X51
If PARTIAL paralysis of ENTIRE body is indicated, code X60 only.

X61 Face (Bell's palsy or paralysis)

X62 Bladder or anal sphincter

X63 Paralysis, complete or partial, sites NOT of extremities, trunk, nor affecting special senses or speech

X64 Paralysis, complete or partial, NEC

F. Continued

X70-X79 SPECIFIED DEFORMITY OF LIMBS, TRUNK, BACK

Includes: specified structural deformities of limbs, trunk, back, described as: contracture; atrophy; accessory ("extra"); short or shortness; crippled; shrivelled; "drawn up"; "twisted"; "withered"; and scarring (with contracture) involving limbs, neck, back, trunk.

X70 Curvature and other structural deformities of spine or back, except as in X71.9
Includes: all structural deformities of spine or back except spina bifida (X71.9).
Prohibits: chronic back conditions NEC in X80.

X71.9 Spina bifida (with meningocele) (always congenital)
Prohibits: X80

X73 Deformity of shoulder or upper extremity
Excludes: deformity of hand(s), finger(s), thumb(s), only
(Prohibits X74)

X74 Deformity of hand(s), finger(s), thumb(s), only

X75 Dislocation, congenital, and other deformity hip and/or pelvis

X76 Deformity of any site on lower extremity, one or both
Includes: genu valgum (knock knee); genu varum (bowleg); tibial torsion; hammer toe; hallux valgus or varus; any deformity of toe; deformity leg NOS, foot NEC, knee.
Excludes X77 and X78

X77 Flatfoot (including weak or fallen arches and other difficulty with arches)

X78 Clubfoot (congenital)

X79 Deformity, neck, trunk bones, NEC
Includes: pigeon breast; cervical rib; postural defect NEC

F. Continued

X80-X89 NON-PARALYTIC ORTHOPEDIC IMPAIRMENT (CHRONIC) NEC

Excludes: "disc conditions" (ICD 722)

Includes: Limitation of motion NEC; stiffness (complete or partial); "flail joint"; instability of joint; symptomatic, but chronic difficulty, weakness, "trouble", pain, swelling, "limping," involving muscles, joints, limbs, back or trunk, of unknown cause, or due to healed injuries 3 mos+ or to past and now inactive diseases; old (3 mos+) sprains, strains, or dislocations with effect not elsewhere classifiable, or not stated.

NOTE: Orthopedic impairment NEC, as in X80-X89, is not to be coded as a separate diagnosis if due to specified disease; code disease only.

ORTHOPEDIC IMPAIRMENT NEC (CHRONIC) INVOLVING:

X80 Back, any part
Includes: neck

X84 Shoulder(s) and/or upper extremity(ies)

X85 Hip and/or pelvis
Excludes: congenital dislocation of hip (X75.9)

X86 Lower extremity
Excludes: impairments involving arches of foot, feet (X77)

X89 Other and ill-defined sites
Includes: rib; trunk, NOS; "side," NOS; joint, NOS; limping; staggering; stumbling; trouble in walking, NOS
Excludes: jaw (X92); and ataxic gait, which if chronic, is coded as for Paralysis, partial.

F. Continued

X90-X99 DEFECT, ABNORMALITY, SPECIAL IMPAIRMENT, NEC

X90 Disfigurement, scarring, face, nose, lips, ears
Includes: absence of nose, lips, ears; accessory auricle; other abnormality NEC of face, nose, ears, mouth, teeth, jaws if stated to be disfiguring. If speech defect is present, code it also.
Excludes: cleft palate and harelip whether or not disfiguring (X91.9.)

X91.9 Cleft palate and harelip (with speech defect) (disfiguring)
Includes: cleft palate and cleft lip (as in ICD 749) with or without speech defect and whether or not stated to be disfiguring.

X92 Other dentofacial handicap
Includes: acquired absence of teeth, onset 3 mos+; and abnormalities of teeth, malocclusion, and other jaw and dentofacial anomalies as in ICD 520.0, 520.1, 520.2, 520.5, 521.6, and 524. If speech defect is present, code it also.
Excludes: cleft palate and harelip (X91.9); and other dentofacial handicaps if stated to be disfiguring (X90).

X93 Deformity of skull (hydrocephaly) (microcephaly)
If mental retardation is present, code it also.

X94 Artificial orifice (opening) or valve (surgical) any site (colostomy)

X99 Special impairment, ill-defined
Includes: deformed NOS; cripple NOS; "birth injury" or "brain damage" NOS, at ages 3 months or over without specification as to type of impairment; ill-defined "after effects" of tuberculosis, encephalitis, poliomyelitis, trachoma, toxoplasmosis, other infective and parasitic diseases, rickets, intracranial abscess.
See also Item D, this Appendix.
Excludes: stroke, or ill-defined "after effects" of stroke; code the stroke---not X99.

APPENDIX II. CLASSIFICATION OF OPERATIONS AND NON-OPERATIVE PROCEDURES, FOR HIS

ICD9-CM3 contains a detailed classification and an index of surgical operations and other therapeutic and diagnostic procedures, constructed to be useful within hospitals for hospital record-keeping.

The Health Interview Survey uses only the first two digits of this classification. HIS recognizes that the detail about the specific type of operation is lost. It is felt that, for HIS, the body system or region (on which the operation was performed) will be sufficient for data analyses.

As does ICD9-CM3, HIS recognizes 16 broad groups, each of which is subdivided into several 2-digit categories. These subdivisions describe operations within a system in one or more of the following ways:

a. a specified operation with the part of body specified or implied, as in "excision of larynx" (30).

b. operations without reference to procedures, for some conditions which are commonly surgical conditions, as in "operations for appendix" (47).

c. operations, except as in a or b above (without reference to procedure or condition) on a specified part of body, as in "operations on esophagus" (42).

Additionally, HIS has a single code category "00" for any operation of ill-defined or unknown type, with site unspecified.

For the alphabetical arrangement of operations, or to determine the "broad" category for inclusion of a specific operation or procedure, see Index of Operations and Non-Operative Procedures (this Manual) or refer to ICD9-CM3. The ICD9-CM3 index can also be used for the classification of operations and procedures. Remember, however, that HIS only uses the first two digits.

APPENDIX II. CLASSIFICATION OF OPERATIONS AND NON-OPERATIVE PROCEDURES, FOR HIS

1. OPERATION, TYPE UNKNOWN, SITE UNKNOWN

00 Operation, no site or type
Includes: operation NEC on gland NOS, or "side," or other very ill-defined site. Use 00 when it is known that an operation was performed, but there is no information about the kind of operation or about the body system or part involved.

2. OPERATIONS ON THE NERVOUS SYSTEM (01-05)

01 Incision and excision of skull, brain, and cerebral meninges

02 Other operations on skull, brain, and cerebral meninges

03 Operations on spinal cord and spinal canal structures

04 Operations on cranial and peripheral nerves

05 Operations on sympathetic nerves or ganglia

3. OPERATIONS ON THE ENDOCRINE SYSTEM (06-07)

06 Operations on thyroid and parathyroid glands

07 Operations on other endocrine glands

4. OPERATIONS ON THE EYE (08-16)

08 Operations on eyelids

09 Operations on lacrimal system (tear ducts)

10 Operations on conjunctiva

11 Operations on cornea

12 Operations on iris, ciliary body, sclera, and anterior chamber

13 Operations on lens

14 Operations on retina, choroid, vitreous, and posterior chamber

15 Operations on extraocular muscles

16 Operations on orbit and eyeball

5. OPERATIONS ON THE EAR (18-20)

18 Operations on external ear

19 Reconstructive operations on middle ear

20 Other operations on middle and inner ear

6. OPERATIONS ON THE NOSE, MOUTH AND PHARYNX (21-29)

21 Operations on the nose
Includes: operations on bone and skin of nose

22 Operations on nasal sinuses

23 Removal and restoration of teeth

24 Other operations on teeth, gums and alveoli

25 Operations on tongue

26 Operations on salivary glands and ducts

27 Other operations on mouth and face
Includes: operations on lips, palate and soft tissue of face and mouth, except tongue and gingiva.

28 Operations on tonsils and adenoids

29 Operations on pharynx

7. OPERATIONS ON THE RESPIRATORY SYSTEM (30-34)

30 Excision of larynx

31 Other operations on larynx and trachea

32 Excision of lung and bronchus

33 Other operations on lung and bronchus

34 Operations on chest wall, pleura, mediastinum and diaphragm

8. OPERATIONS ON THE CARDIOVASCULAR SYSTEM (35-39)

35 Operations on valves and septa of heart

36 Operations on vessels of heart

37 Other operations on heart and pericardium

38 Incision, excision and occlusion of vessels

39 Other operations on vessels

9. OPERATIONS ON THE HEMIC AND LYMPHATIC SYSTEM (40-41)

40 Operations on lymphatic system

41 Operations on bone marrow and spleen

10. OPERATIONS ON THE DIGESTIVE SYSTEM (42-54)

42 Operations on the esophagus

43 Incision and excision of stomach

44 Other operations on stomach

45 Incision, excision, and anastomosis of intestine

46 Other operations on intestine

47 Operations on appendix

48 Operations on rectum and perirectal tissue

49 Operations on anus

50 Operations on liver

51 Operations on gallbladder and biliary tract
Includes: operations on common bile duct, cystic duct and hepatic duct

52 Operations on pancreas

53 Repair of hernia

54 Other operations on abdominal region
Includes: operations on epigastric region, flank, groin region, inguinal region, loin region, male pelvic cavity, mesentery, omentum, peritoneum and retroperitoneal tissue space.

11. OPERATIONS ON THE URINARY SYSTEM (55-59)

55 Operations on kidney
Includes: operations on renal pelvis

56 Operations on ureter

57 Operations on urinary bladder

58 Operations on urethra

59 Other operations on urinary tract

12. OPERATIONS ON MALE GENITAL ORGANS (60-64)

60 Operations on prostate and seminal vesicles

61 Operations on scrotum and tunica vaginalis

62 Operations on testes

63 Operations on spermatic cord, epididymis, and vas deferens

64 Operations on penis

13. OPERATIONS ON THE FEMALE GENITAL ORGANS (65-71)

65 Operations on ovary

66 Operations on fallopian tubes

67 Operations on cervix

68 Other incision and excision of uterus

69 Other operations on uterus and supporting structures

70 Operations on vagina and cul-de-sac

71 Operations on vulva and perineum

14. OBSTETRICAL PROCEDURES (72-75)

72 Forceps, vacuum, and breech delivery

73 Other procedures inducing or assisting delivery
Includes: spontaneous delivery with manual assistance.

74 Caesarean section and removal of fetus

75 Other obstetric operations
For HIS, includes also "normal delivery"

15. OPERATIONS ON THE MUSCULOSKELETAL SYSTEM (76-84)

76 Operations on facial bones and joints
Excludes: accessory sinuses (22); nasal bones (21); and skull (01) (02).

77 Incision, excision and division of other bones
Excludes: operations on facial bones (76); joint structures (80-81); nasal bones (21); and skull (01-02).

78 Other operations on bones, except facial bones
Excludes: operations on joint structures (80-81); nasal bones (21); and skull (01-02).

79 Reduction of fracture and dislocation
Includes: application of cast or splint; reduction with insertion of traction device.
Excludes: external fixation alone for immobilization of fracture (93); internal fixation without reduction of fracture (78); operations on facial bones (76); nasal bones (21); orbit (76); skull (02); vertebrae (03); removal of cast or splint (97); replacement of cast or splint (97); and traction alone for reduction of fracture (93).

80 Incision and excision of joint structures
Includes: operations on capsule of joint; cartilage; condyle; ligament; meniscus; and synovial membrane.
Excludes: cartilage of ear (18); nose (21); and joints of face (76).

81 Repair and plastic operations on joint structures
Includes: operations on ankle; knee; shoulder; elbow; wrist; hip; vertebrae; fingers; and toes not codable elsewhere and when condition is not specified and tissue (such as skin, bone, etc.) is not apparent.

82 Operations on muscle, tendon and fascia of hand
Includes: operations on synovial membrane and tendon sheath.

83 Operations on muscle, tendon, fascia and bursa, except hand
Includes: operations on synovial membrane and tendon sheaths.
Excludes: hand (82); diaphragm (34); and muscles of eye (15).

84 Other procedures on musculoskeletal system

16. OPERATIONS ON THE INTEGUMENTARY SYSTEM (85-86)

85 Operations on the breast
Includes: operations on skin of breast and previous mastectomy site (female or male).

86 Operations on skin and subcutaneous tissue
Includes: operations on hair follicles; male perineum; nails; sebaceous glands, subcutaneous fat pads; and superficial fossae.
Includes also: operations on regions such as arm; armpit; back; cheek; buttock; chin; feet; forearm; forehead; hand; head; heel; leg; neck; scalp; temple; temporal region; and thigh when specific tissue (such as bone; cartilage; joint; etc.) involved is not mentioned.
Excludes: those on skin of anus (49); breast (85); ear (18); eyebrow (08); eyelid (08); female perineum (71); lips (27); nose (21); penis (64); scrotum (61); and vulva (71).
Excludes also: operations on the head when a specific part (such as brain) is mentioned.

17. MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES (87-99)

87 Diagnostic radiology
Includes: diagnostic X-Rays of face, head, neck, brain, skull, spine, chest, digestive tract, urinary system, genital organs, abdomen and breast.
Excludes: angiography (88).

88 Other diagnostic radiology and related techniques
Includes: CAT scan of abdomen; skeletal X-Rays of extremities; arteriograms using contrast material; and X-Rays of veins
Excludes: angiogram of eye (95).

89 Interview, evaluation, consultation, and examination
Includes: diagnostic interviews; neurological exams; gynecological exams; dental exams; digital exams of rectum; pacemaker checks; electrocardiograms and general physical exams.

90 Microscopic examination-I
Includes: microscopic examination of specimen from nervous system, spinal fluid, endocrine glands, eye, ear, nose, throat, larynx, trachea, bronchus, pleura, lung, of sputum, and blood.

91 Microscopic examination-II
Includes: microscopic examination of specimen from liver, bile ducts or passage, pancreas, peritoneal, retroperitoneal, kidney, ureter, perirenal, periureteral tissue, bladder, urethra, prostate, seminal vesicle, urine, semen, and female genital tract.

17. MISCELLANEOUS DIAGNOSTIC AND THERAPEUTIC PROCEDURES (87-99) CONTINUED

92 Nuclear medicine
Includes: scans radiation therapy (cobalt) (iodine)

93 Physical therapy, respiratory therapy, rehabilitation, and related procedures
Includes: diagnostic physical therapy; physical therapy exercises such as breathing exercises; manual traction; training in use of prosthesis; whirlpool treatments; heat therapy; skeletal traction; speech and reading training for blind; play therapy; education therapy; artifical respiration, mouth to mouth resuscitation; oxygen and helium therapy.

94 Psychiatric interviews, consultations and evaluations
Includes: routine psychiatric visits; psychoanalysis; psychiatric electroshock therapy and other non-operative procedures relating to the psyche.

95 Ophthalmologic and otologic diagnosis and treatment
Includes: eye exams; functional tests of eye; fitting glasses, contact lens; hearing tests; and fitting hearing aids.

96 Non-operative intubation and irrigation
Includes: insertion of airway tubes; ear packing; vaginal packing; insertion of vaginal diaphragm; rectal packing; dilation of rectum and anus; manual reduction of hernia; gastric lavage; irrigation of ostomies; cleaning of eye, ear and nose; lavage of bronchus and trachea.

97 Replacement and removal of therapeutic appliances
Includes: replacement of ostomy tubes; replacement of casts; removal of nasal packing, removal of dental wiring; removal of sutures from head and neck; removal of drainage tubes; removal of IUD and removal of sutures from genital tract.

98 Non-operative removal of foreign body
Includes: removal of foreign body from digestive system, ear, nose, larynx, vagina, etc., WITHOUT INCISION.

99 Other non-operative procedures
Includes: blood transfusions, exchange transfusions, injections or infusions of therapeutic or prophylatic substances; cardiac pacemaker (battery and sensing types), acupuncture and fitting of dentures.

APPENDIX III

(Revised January 2, 1979)

MODIFICATIONS OF THE INTERNATIONAL CLASSIFICATION OF DISEASES, FOR USE IN THE UNITED STATES (ICD), NINTH REVISION.

AS REVISED FOR THE HEALTH INTERVIEW SURVEY

U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Center for Health Statistics
Division of Health Interview Statistics

APPENDIX III

EXPLANATORY NOTES

A. Differences Between ICD and ICDA, Eighth Revision

Medical coders, supervisors, and statisticians are referred to Vol. 1, Introduction, for a discussion of how ICD differs from ICDA, Eighth Revision. HIS will base its diagnostic codes on those of ICD, as of January 2, 1979 but will make use of many of the same types of modifications it employed when ICDA was in use--before January 2. These modifications are included in this Appendix.

B. Purpose of Appendix III

Appendix III, completely rewritten as of January 2, 1979, lists in numerical order all diagnostic categories in 001-999 which have been changed, moved, deleted, or added by HIS in order to make the diagnostic coding more useful for HIS purposes.

C. General Types of Modifications

Many of the modifications used by HIS for ICDA are needed also for ICD and will be continued. These refer particularly to certain symptoms and ill-defined conditions, all kinds of impairments, and late effects of diseases, and injuries.

D. Form of Appendix III

The form of Appendix III has not been changed. Each page has four divisions. The broader one, under the heading "Category Title," lists the name of the conditions, or class of conditions, with notes explaining the nature of the modification. At the left are three columns, showing the code numbers involved under the following headings:

1. "Content"

Categories with ICD code numbers in this column have been changed in regard to some inclusion or exclusion, or need some explanation in regard to what ICD includes there. In a few cases, the category title has been changed by HIS.

2. "Not Used"

The ICD code numbers appearing in this column are not used by HIS. A few of these refer to categories applicable only in coding of deaths and are therefore never used for this Survey. Some of them are ICD categories for late effects of diseases or injuries, and a large number include sites and types of impairments; for these the X-code is used instead. (<u>See</u> Appendix I for details.)

3. "New Code"

Categories with numbers in this column are HIS special codes which have been given a number which is not used by ICD.

APPENDIX III

MODIFICATIONS OF THE INTERNATIONAL CLASSIFICATION OF DISEASES, (ICD), NINTH REVISION

AS REVISED FOR THE HEALTH INTERVIEW SURVEY

U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Center for Health Statistics
Division of Health Interview Statistics

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			INFECTIVE AND PARASITIC DISEASES (001-136) (137-139) Note: For HIS, for acute infections not in 001-136, reported with or due to acute infections in 001-136, code the latter only as stated in rule 2d in Section IV, "Combining and Merging", of the Medical Coding Manual.
	009.1		COLITIS, ENTERITIS AND GASTROENTERITIS OF PRESUMED INFECTIOUS ORIGIN Invalid code for this country. Code listed terms in Vol. 1 to 558.
	009.3		DIARRHEA, OF PRESUMED INFECTIOUS ORIGIN Invalid code for this country. Code listed terms in Vol. 1 to 558.
			PULMONARY TUBERCULOSIS (011)
011.9			PULMONARY TUBERCULOSIS Includes: tuberculosis, NOS, tuberculosis respiratory, NOS Excludes: tuberculosis, stated to be arrested or inactive--now in 019, special code for HIS
		019	TUBERCULOSIS (PULMONARY) (ANY SITE) STATED TO BE ARRESTED OR INACTIVE
079.9			VIRAL INFECTION, UNSPECIFIED Includes: virus (infection), NOS, type or site not specified Excludes: any condition due to virus that can be coded elsewhere, such as virus cold (460), virus sore throat (462), virus infection, throat (462), viral diarrhea (008.8), or intestinal virus (008.8)
			NEUROSYPHILIS (094)
094.1			GENERAL PARESIS For HIS, excludes general paralysis or paralysis of entire body, cause unknown, code to X40.X. If child less than 2 months of age, code X40.9
			LATE EFFECTS OF INFECTIOUS AND PARASITIC DISEASES (137-139)
	137		LATE EFFECTS OF TUBERCULOSIS
	138		LATE EFFECTS OF ACUTE POLIOMYELITIS
	139		LATE EFFECTS OF OTHER INFECTIOUS AND PARASITIC DISEASES

APPENDIX III

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CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			NEOPLASMS (140-239) These are to be coded, by site, as per ICD. Multiple sites and types in 140-239: As formerly, only one number in 140-239, per person, is to be coded, using the following order of preference, for type: 200-208 (Leukemia, Hodgkin's disease, etc.) 140-199 (Malignant neoplasms; cancer) 210-229 (Benign tumors; certain cysts) 239 (Tumors unspecified whether benign or malignant) If malignant, and the original (primary) site is known, code it only. If reported as secondary or metastatic, and the secondary site is known but the original site is <u>not</u> known, code to the secondary site, as per ICD, in 196-198. If no site is mentioned but the report says "full of cancer," code 199.0 or "tumors all over body," code 239.9 if <u>malignant or benign is not specified</u>, or 229.9 if benign is specified. If two or more sites or types in 140-229, 239 are specified, and none of the above is applicable, code only the first one mentioned. <u>Note</u>: Cysts, or other types of tumors, classified <u>elsewhere</u> than in 140-239, are to be coded separately as reported.
218			UTERINE FIBROMA For HIS, <u>includes also</u> fibroid cyst
	230-234		CARCINOMA IN SITU (230-234)
	235-238		NEOPLASM OF UNCERTAIN BEHAVIOR (235-238) For HIS, conditions indexed by ICD to categories 235-238, will be coded to Neoplasm, unspecified nature, if not specified as benign or malignant.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			ENDOCRINE, NUTRITIONAL, AND METABOLIC DISEASES AND IMMUNITY DISORDERS (240-279)
261			NUTRITIONAL MARASMUS For HIS <u>includes</u> the listed conditions of any duration, in persons of any age, if stated to be due to malnutrition or other eating or nutritional problems. <u>Excludes</u> them if due to cancer or other active disease; code the disease only.
			OTHER AND UNSPECIFIED PROTEIN-CALORIE MALNUTRITION (263)
263.9			UNSPECIFIED <u>Includes</u> loss of weight or underweight in persons of any age, if stated to be due to malnutrition. <u>Excludes</u> this if due to cancer or other active disease; code the disease only. For low birthweight constituting immaturity in infants, see ICD 765.1
			VITAMIN D DEFICIENCY (268)
	268.1		RICKETS, LATE EFFECT
			OTHER NUTRITIONAL DEFICIENCES (269)
269.9			UNSPECIFIED <u>Includes</u> loss of weight or underweight in persons of any age if stated to be due to eating or nutrition problems (other than malnutrition). <u>Excludes</u> this if due to cancer or other active disease; code the disease only. For low birthweight constituting immaturity in infants, see ICD 765.1
			OBESITY AND OTHER HYPERALIMENTATION (278)
278.0			OBESITY For HIS, <u>includes</u> obesity or overweight, any onset with cause unknown (or familial or hereditary) in persons of any age. <u>Excludes also</u> obesity or overweight due to any specified active cause in persons of any age, regardless of date of onset; code cause only.

APPENDIX III

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF BLOOD AND BLOOD-FORMING ORGANS (280-289)
			DISEASES OF WHITE BLOOD CELLS (288)
288.8			OTHER For HIS, <u>includes</u>: Excess or lack of white corpuscles.
			OTHER DISEASES OF BLOOD AND BLOOD FORMING ORGANS (289)
289.6			OTHER For HIS, <u>includes</u>: Excess or lack of red corpuscles.
289.9			UNSPECIFIED For HIS, <u>includes</u>: low blood count; "low" blood; "tired" blood.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			MENTAL DISORDERS (290-319)
			PSYCHOSES (290-299)
			SENILE AND PRESENILE ORGANIC PSYCHOTIC CONDITIONS (290)
290.1			PRESENILE DEMENTIA Use additional code to identify the associated neurological condition.
290.4			ARTERIOSCLEROTIC DEMENTIA Use additional code to identify cerebral arteriosclerosis (437.0)
293			TRANSIENT ORGANIC PSYCHOTIC CONDITIONS (293) Use additional code to identify the associated physical or neurological condition.
			OTHER ORGANIC PSYCHOTIC CONDITIONS (CHRONIC) (294)
294.1			DEMENTIA IN CONDITIONS CLASSIFIED ELSEWHERE Use additional code to identify the physical condition.
			OTHER PSYCHOSES (295-299) Psychoses classifiable to 295-298 associated with a physical disease, injury or condition affecting the brain; code to 295-298 and code the associated physical condition also.
			PSYCHOSES WITH ORIGIN SPECIFIC TO CHILDHOOD (299)
299.1			DISINTEGRATIVE PSYCHOSIS Use additional code to identify any associated neurological disorder.
			NEUROTIC DISORDERS, PERSONALITY DISORDERS AND OTHER NON-PSYCHOTIC MENTAL DISORDERS (300-316)
303			ALCOHOL DEPENDENCE SYNDROME "Drunkenness" must be described as "acute" or "chronic" in order to code 303.
304			DRUG DEPENDENCE For HIS, addiction or dependence, or chronic poisoning by drugs, is coded to the codes, by substance, shown under "Dependence," in Vol. 2. An additional code from the Table of Adverse Effects, Section III, Volume 2, is <u>not</u> to be used.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(290-319)---continued
			NON DEPENDENT ABUSE OF DRUGS (305)
305.0			ALCOHOL For HIS, <u>includes</u>: "drinking," "drunkenness," NOS, "hangover."
306	306.0 306.6 306.7 306.8 306.9		PHYSIOLOGICAL MALFUNCTION ARISING FROM MENTAL FACTORS (306) For HIS, only categories 306.1 (respiratory), 306.2 (cardio-vascular), 306.3 (skin), 306.4 (gastrointestinal), 306.5 (genitourinary) will be used. Conditions indexed by ICD to the other 4th digits in 306 as psychogenic or which are described by respondents as being due to "nerves," will be coded as if <u>NOT</u> psychogenic or due to nerves. For HIS, if allergy is also a factor in disorders codable to 306.1, 306.2, 306.3, 306.4 or 306.5, code only the allergy--ignoring "nerves."
306.2			CARDIOVASCULAR For HIS, <u>excludes</u> hypertension and specific heart and artery diseases if said to be due to "nerves;" these will be coded without reference to "nervous," or psychogenic origin.
			SPECIAL SYMPTOMS OR SYNDROMES NOT ELSEWHERE CLASSIFIED (307) For HIS, amendments have been made, as shown below. Categories 307.0-307.9 will not be used if the cause of any in 307 is known to be a physical (body) disease or current injury.
307.0			STAMMERING AND STUTTERING -3 mos. For HIS, code to X10 if 3 mos+, by the rules for Impairments. See also Section V, Impairments.
307.5			OTHER AND UNSPECIFIED DISORDERS OF EATING For HIS, excludes loss of appetite NOS (783.0) and faulty or improper diet among relatively stable persons (269.9)
307.8			PSYCHALGIA For HIS, <u>excludes</u> tension headache (784.0), headache due to "nerves," "nervousness," (784.0) or nervous headache (784.0)
307.9			OTHER <u>Includes</u> lalling and lisping -3 mos. If these are 3 mos+, code to X11. See also Section V, Impairments. For HIS, <u>includes</u> disturbance of speech, psychogenic or due to "nerves."

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(290-319)--continued
			SPECIFIC DELAYS IN DEVELOPMENT (315)
	315.0		SPECIFIC READING RETARDATION Conditions indexed to this category will be coded to X14, regardless of onset. See also Section V, Impairments.
	315.1		SPECIFIC ARITHMETICAL RETARDATION Conditions indexed to this category will be coded to X14, regardless of onset. See also Section V, Impairments.
	315.2		OTHER SPECIFIC LEARNING DIFFICULTIES Conditions indexed to this category will be coded to X14, regardless of onset. See also Section V, Impairments.
315.3			DEVELOPMENTAL SPEECH OR LANGUAGE DISORDER Includes listed conditions -3 mos. If 3 mos+, code X11. See also Section V, Impairments.
315.4			SPECIFIC MOTOR RETARDATION Includes listed conditions -3 mos. If 3 mos+, code to Paralysis, partial, by site. See also Section V, Impairments.
315.5			MIXED DEVELOPMENT DISORDER If speech disorders involved, 3 mos+, code X11. See also Section V, Impairments. If learning disorder involved, 3 mos+, code X14. See also Section V, Impairments. If motor coordination involved, code as for Paralysis, partial in the X-code. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(290-319)--continued
316			PSYCHIC FACTORS ASSOCIATED WITH DISEASES CLASSIFIED ELSEWHERE (316)
			FOR HIS, THESE CODES WILL NEVER BE USED ALONE. ALWAYS USE AN ADDITIONAL CODE TO IDENTIFY THE PHYSICAL CONDITION.
			For HIS, categories 316.0-316.9 include also "nerves" (and equivalents), and other emotional or psychiatric conditions except psychosis, if these non-psychotic nervous or mental conditions are due to physical causes. Exception: As per ICD, alcoholism (303) and drug dependence (304) and non-psychotic nervous or mental conditions due to these specific causes, will be coded to 303 or 304--not 316.8. However, if the alcoholism or drug addiction, itself, is due to a physical condition--for example, cancer--use 316.8 and code cancer also.
			For HIS, non-psychotic mental or nervous disorders due to the following will be given only one code: a. Menopause: code 627.2 only b. Senility or presenility: code 290.9 only
		316.0	MUSCULOSKELETAL
		316.1	RESPIRATORY
		316.2	CARDIOVASCULAR
		316.3	SKIN
		316.4	GASTROINTESTINAL
		316.5	GENITOURINARY
		316.6	ENDOCRINE
		316.7	ORGANS OF SPECIAL SENSE
		316.8	OTHER
		316.9	UNSPECIFIED
			MENTAL RETARDATION (317-319)
	317 318 319		MENTAL RETARDATION For HIS, code all degrees of mental deficiency or retardation to X19. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS (320-389)
			(For Vascular lesions of CNS, see Cerebrovascular Disease, 430-435, 437, this Appendix.)
			ENCEPHALITIS, MYELITIS, AND ENCEPHALOMYELITIS (323)
323.5			POSTIMMUNIZATION ENCEPHALITIS Includes current "complications" consisting of encephalitis or myelitis due to vaccination, immunization, preventive shots, against smallpox, flu, tetanus or any disease.
	326		LATE EFFECTS OF INTRACRANIAL ABSCESS OR PYOGENIC INFECTION Code residuals, 3 mos+, according to the type of residual specified, using the X-code, if applicable, or the appropriate code in ICD--not 326.
	331.3		COMMUNICATING HYDROCEPHALUS For HIS, code acquired or congenital hydrocephalus to X93. See also Section V, Impairments.
	331.4		OBSTRUCTIVE HYDROCEPHALUS For HIS, code acquired or congenital hydrocephalus to X93. See also Section V, Impairments.
			OTHER EXTRAPYRAMIDAL DISEASE AND ABNORMAL MOVEMENT DISORDERS (333)
333.2			MYOCLONUS Includes jerk, jerking---any site
	342		HEMIPLEGIA For HIS, code to the X-code. See also Section V, Impairments.
	343		INFANTILE CEREBRAL PALSY For HIS, code the listed conditions, or any form of "cerebral palsy" to X50, using the 4th digit etiology code "9" if the condition is congenital or due to birth injury. If the cause is something else, or is not known, use the appropriate etiology code. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
	344.0 344.2 344.3 344.4 344.5 344.6 344.8 344.9		OTHER PARALYTIC SYNDROMES (344) For HIS, all forms of paralysis, 3 mos+, are coded to the X-code. See also Section V, Impairments. Paralysis -3 mos, of specified cause, code cause <u>only</u>. <u>If -3 mos</u>, <u>and cause is not known</u>, code as follows: one arm, leg, hand, finger, foot (monoplegia): code 781.4 spine or spinal, NOS: code 344.1 as amended two or more extremities (limbs): code to 437, as amended other sites (bladder, face, larynx, etc.): See Vol. 2 paralysis of unspecified site (-3 mos) will be coded to X64.X. If child less than 2 months of age, code X64.9.
344.1			PARAPLEGIA For HIS, this category will be used only for paralysis, spine or spinal, with no mention of extremities (limbs) or other parts involved, with onset in past 3 months, and with cause unknown. Paralysis, spine, or spinal, NOS, 3 mos+, is coded to the X-code, according to the rules for Impairments. See also Section V, Impairments.
			EPILEPSY (345) For HIS, code any injury, -3 mos, related to epilepsy (and synonyms) to one of the codes in 800-999, by type of injury reported. If the epilepsy is of recent onset (-3 mos) and is due to injury, -3 mos do not code the epilepsy in addition. If the epilepsy is due to an old injury (3 mos+), code only to epilepsy, by type in 345.0-345.9. If any mental disorder or deficiency is reported with or as due to epilepsy, code the epilepsy, by type, and <u>also</u> the mental disorder. For example: code psychosis due to epilepsy to 294.1 and 345.-; code non-psychotic mental disorders due to epilepsy to 316.8 and 345.-; code mental deficiency due to epilepsy to X19 and 345.-.
345.9			UNSPECIFIED For HIS, <u>includes</u> also: repeated or chronic, 3 mos+, convulsions, fits, seizures. <u>Excludes</u> "black out" spells (780.2); convulsions, fits, seizures, -3 mos, cause unknown (780.3).

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
346			MIGRAINE For HIS, <u>includes</u> migraine due to "nerves" or allergy; code 346.- only. Vision disturbances due to migraine; code 346.8 only. Migraine and menopause: code each. Migraine and sinus: code each. Code headache as per ICD index, and the general coding rules for HIS.
348			OTHER CONDITIONS OF BRAIN For HIS, <u>excludes</u> "brain damage," or "birth injury," 3 mos+, with no residual specified (X99). For HIS, paralysis (cerebral or spinal), involving one or more extremities (limbs), is coded as explained in 344, this Appendix.
			OTHER AND UNSPECIFIED DISORDERS OF THE NERVOUS SYSTEM (349)
349.0			REACTION TO LUMBAR OR SPINAL PUNCTURE <u>Includes also</u> headache or other condition due to "spinal tap". See also Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
			DISORDERS OF THE PERIPHERAL NERVOUS SYSTEM (350-359) For HIS, any type of residual palsy or paralysis listed in 350-359, or elsewhere, will be coded to the X-code, by the rules for Impairments, if onset is 3 mos+. See also Section V, Impairments.
			TRIGEMINAL NERVE DISORDERS (350)
350.1			OTHER TRIGEMINAL NEURALGIA Excludes "tic NOS," (307.2) and tic or "twitching" of face or eye as in 307.2
			FACIAL NERVE DISORDERS (351)
351.0			BELL'S PALSY Excludes facial paralysis in infants under 2 mos. of age (767.5); and paralysis, face, 3 mos+ (X61). See also Section V, Impairments.
			NERVE ROOT AND PLEXUS DISORDERS (353)
	353.5		NEURALGIC AMYOTROPHY For HIS, code to X70-X79, by site. See also Section V, Impairments.
			MONONEURITIS OF UPPER LIMB AND MONONEURITIS MULTIPLEX (354)
354.5			MONONEURITIS MULTIPLEX Includes combinations of single conditions classifiable to 354.- or to 355.-

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
			DISORDERS OF THE EYE AND ADNEXA (360-379)
			NOTES: a. See Medical Coding Manual, Visual Impairments, for special rules for coding eye diseases and visual impairments. b. For HIS, stated descriptive terms indicating poor vision, loss of vision, bad eyesight, poor eyesight, etc. will be coded to X00-X03 by degree of stated visual loss in one or both eyes. c. Category 369 (Blindness) will not be used. See X-code (X00-X03) for all Visual Impairments and special etiology codes. d. For HIS, all congenital anomalies of eye in 743.0-743.9 will be coded to the acquired diseases of the same type and site in 360-379. See also 743, this Appendix.
366			CATARACT For HIS, if traumatic and 3 mos+, code to 366.2 only; if due to injury, -3 mos, code the original injury and the cataract (366.2) also.
368			VISUAL DISTURBANCES For HIS, includes the following terms: "amblyopia," "double vision," "light hurts eyes" (photophobia), "eye strain," "half vision," "blind spots," "color blindness," "night blindness," and "day blindness." For HIS, double vision, color blindness, night blindness and day blindness requires an additional X-code. See Section V, Impairments.
	369		BLINDNESS AND LOW VISION See Medical Coding Manual, Visual Impairments
378			STRABISMUS AND OTHER DISORDERS OF BINOCULAR EYE MOVEMENTS For HIS, includes also "cross eye," "lazy eye,"; paralysis, weakness, or other disorders of muscles of eyeball.
379			OTHER DISORDERS OF EYE For HIS, includes eye trouble, NEC; and congenital disorders of eye not included in 360-378, as amended.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
			DISEASES OF THE EAR AND MASTOID PROCESS (380-389)
			a. For HIS, colds and acute upper respiratory infections in 460-465 resulting in acute ear infections or earache in 381.0, 382.0, 382.9, 383.0, 383.2, 384.0 or 388.7 are coded to the acute ear infection or earache only, according to HIS rules for 460-465.
			b. Ear infections in 381-384 accompanying or due to infectious diseases in 001-136 are coded to 001-136 only.
			c. For HIS method of coding deafness and other hearing impairments and their causes, see Medical Coding Manual, Hearing Impairments.
380			DISORDERS OF EXTERNAL EAR Excludes fungus infections of ear, assumed to be of the outer ear or skin of ear, and coded to 110.8. However, the term "infection of ear" NOS will be coded as for Otitis Media (382.9) (inflammation of the middle ear.) Infection of outer ear, code 380.1. Infection of inner ear, code 386.3.
			MASTOIDITIS AND RELATED CONDITIONS (383)
383.3			COMPLICATIONS FOLLOWING MASTOIDECTOMY See Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed.
			OTHER DISORDERS OF TYMPANIC MEMBRANE (384)
384.2			PERFORATION OF TYMPANIC MEMBRANE (NON-TRAUMATIC) (TRAUMATIC, NEC) For HIS, includes also scarred or perforated ear drum, 3 mos+, whether or not of TRAUMATIC ORIGIN; if due to injury, -3 mos, code to 872. However, if 3 mos+, and this condition has caused any degree of hearing loss, code to the appropriate X-code only.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(320-389)--continued
			(380-389)--continued
			OTHER DISORDERS OF EAR (388)
	388.2		SUDDEN HEARING LOSS, UNSPECIFIED For HIS, code to X-code. See also Section V, Impairments.
388.9			UNSPECIFIED For HIS, <u>excludes</u> deformity (including absence) of ear, acquired or congenital (X90). <u>Excludes</u> any defect or deformity of ear (any part), acquired or congenital, causing hearing impairment; code these to X05-X09, by extent of hearing loss, but do not code the causative defect or deformity in addition. For HIS, includes conditions in 744.0-744.3 without statement or indication of a hearing impairment.
	389		DEAFNESS (389) For HIS, code to X05-X09

APPENDIX III

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE CIRCULATORY SYSTEM (390-459)
			RHEUMATIC FEVER (390-398) Rheumatic fever will combine with heart disease, heart trouble and other ill-defined heart conditions when stated to be of rheumatic origin, or reported with rheumatic fever. Hypertension and/or arteriosclerosis will not combine with Rheumatic fever or Rheumatic heart disease.
	391		RHEUMATIC FEVER WITH HEART INVOLVEMENT For HIS, this code will not be used as both rheumatic fever and heart disease are considered as always chronic and receive the diagnostic code for the chronic state of the conditions.
		399	RHEUMATIC FEVER, INACTIVE (OLD) (HISTORY) For HIS, includes rheumatic fever (and synonyms) stated to be inactive or cured.
			HYPERTENSIVE DISEASE (401-405) NOTE: If hypertension is mentioned with conditions in 414, 430-435, 437 an additional code for hypertension is required.
402			HYPERTENSIVE HEART DISEASE Includes conditions in 428, 429.0, 429.1, 429.2, 429.3, 429.8 and 429.9 described as "hypertensive" or is due to (caused by) hypertension.
403			HYPERTENSIVE RENAL DISEASE Includes kidney or renal conditions in 585, 586 and 587 if hypertension is also present.
404			HYPERTENSIVE HEART AND RENAL DISEASE Includes any condition in 403, if a heart condition in 428, 429.0, 429.1, 429.2, 429.3, 429.8 or 429.9 is also present and described as "hypertensive" or is due to (caused by) hypertension.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(390-459)--continued
	410 411 412		ISCHAEMIC HEART DISEASE (410-414) NOTE: For HIS, categories 410, 411 and 412 will not be used. Conditions indexed by ICD to 410, 411 and 412 will be coded to category 414. Thus ischemic heart disease (essentially coronary conditions), of any onset, will be coded to category 414.
			OTHER FORMS OF CHRONIC ISCHAEMIC HEART DISEASE (414) For HIS, <u>includes also</u> any condition indexed by ICD to 410, 411 and 412, regardless of date of onset.
414.0			CORONARY ATHEROSCLEROSIS This category must be described as "arteriosclerotic" or <u>due to</u> (caused by) arteriosclerosis; otherwise, code the heart disease and 440.9 also.
414.9			UNSPECIFIED Conditions codable to 414.9 with others in 414.0-414.8: prefer codes 414.0-414.8 over 414.9. If multiple conditions codable to 414.0-414.8, code each condition.
			CHRONIC PULMONARY HEART DISEASE (416)
416.1			KYPHOSCOLIOTIC HEART DISEASE For HIS, <u>includes also</u> any conditions in 426-429, 785.0, and 785.1 with mention of curvature of spine as in X70, <u>provided</u> the curvature is stated to be related to, or causing, the heart condition. Code X70 also.
			OTHER FORMS OF HEART DISEASE (420-429)
424			OTHER DISEASES OF ENDOCARDIUM For HIS, conditions in 424 described as "arteriosclerotic", or arteriosclerosis is given as the cause of endocarditis, code 424 only. Conditions in 424 reported with rheumatic fever, rheumatic heart disease or is described as rheumatic will be coded to Rheumatic heart disease. Code arteriosclerosis also, if present.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(390-459)--continued
427			CARDIAC DYSRHYTHMIAS For conditions in 427 described as due to or caused by a heart condition in 410-414, code the heart condition in 410-414 only. See also category 410-414 this Appendix.
428			HEART FAILURE Conditions codable to 428 described as "hypertensive" or due to (caused by) hypertension will be coded to 402.9. Conditions in 428 described as due to or caused by a heart condition in 410-414 will be coded to the heart condition in 410-414 only. See also category 410-414 this Appendix.
429			ILL-DEFINED DESCRIPTIONS AND COMPLICATIONS OF HEART DISEASE Conditions in 429.0-429.3, 429.8 and 429.9 described as "hypertensive" or due to (caused by) hypertension will be coded to 402.9. Conditions codable to 429.0, 429.1 or 429.2 include the listed conditions with or without mention of arteriosclerosis. However, code arteriosclerosis also, if present. Conditions codable to 429.0, 429.1, 429.3, 429.8 or 429.9 with rheumatic fever or described as rheumatic, will be coded as Rheumatic heart disease. If hypertension and/or arteriosclerosis is also present, code each separately. Conditions in 429 described as due to or caused by a heart condition in 410-414 will be coded to the heart condition in 410-414 only. See also category 410-414 this Appendix.
429.4			FUNCTIONAL DISTURBANCES FOLLOWING CARDIAC SURGERY See Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed.
	429.6		RUPTURE OF PAPILLARY MUSCLE For HIS, code to category 414.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(390-459)--continued
			CEREBROVASCULAR DISEASE (430-438) NOTES:
	436 438		a. For HIS, categories 436 and 438 will not be used. Conditions indexed by ICD to 436 will be coded to 437. Thus, if specific lesions in 430-435 are not applicable, only 437 will be used in this series, regardless of date of onset.
			b. If hypertension is mentioned with categories 430-435, 437, code hypertension <u>also</u>.
			c. As formerly, for HIS, no person will be given more than one code in 430-435, 437 even though he may have had more than one "stroke" or other cerebrovascular condition, and whether or not he has one or more residuals.
			d. If the person has paralysis 3 mos+, or any other impairment in the X-code, due to a cerebrovascular lesion, code these also, by the rules for Impairments, with .1 for the etiology. For example: "hemiplegia 3 mos+, speech defect 3 mos+, both due to stroke," code X41.1, X11.1 and 437.9.
			e. Paralysis of a single extremity (one arm, leg, hand, or foot), <u>-3 mos</u>, <u>of unknown cause</u> is to be coded to 781.4. Paralysis of 2 or more extremities (hemiplegia, paraplegia, etc.,) <u>-3 mos</u>, <u>of unknown cause</u> will be coded to 437, as amended.
			f. For psychosis and non-psychotic mental disorders, due to cerebrovascular lesions, code 290.4, 294.1, 294.8 or 316.8 <u>also</u>, as appropriate.
			g. Any condition in 430-435, 437 due to an old injury (3 mos+) will be coded without reference to the original injury; however, if due to a recent injury (-3 mos), code only to the causative injury.
			OTHER AND ILL-DEFINED CEREBROVASCULAR DISEASE (437)
437.0			CEREBRAL ATHEROSCLEROSIS This category must be described as "arteriosclerotic" or <u>due to</u> (caused by); otherwise, code 437.9 and 440.9.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(390-459)--continued
			DISEASES OF ARTERIES, ARTERIOLES, AND CAPILLARIES (440-448)
			ATHEROSCLEROSIS (440)
			a. Arteriosclerosis will not combine with any condition unless stated due to (caused by) or described as "arteriosclerotic".
			b. If arteriosclerosis is mentioned with heart conditions in 429.0, 429.1 and 429.2, code the heart condition and arteriosclerosis also.
440.2			OF ARTERIES OF THE EXTREMITIES The term atherosclerotic gangrene must be so described or gangrene must be due to (caused by) arteriosclerosis.
			DISEASES OF VEINS AND LYMPHATICS, AND OTHER DISEASES OF CIRCULATORY SYSTEM (451-459)
			NONINFECTIVE DISORDERS OF LYMPHATIC CHANNELS (457)
457.0			POSTMASTECTOMY LYMPHEDEMA SYNDROME For HIS, includes "swollen arm" or other lymph gland difficulties following removal of breast: code X32 and 457.0. Excludes present and specified "complications" of breast removal which are not part of the lymphedema syndrome; code these to 997 OR 998 and X32. See also Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed, and see also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE RESPIRATORY SYSTEM (460-519) For HIS, excludes certain symptoms referrable to the respiratory system (786.0-786.9); and "virus" NOS (079.9). See also 079.9 For HIS, any codable acute infection in 460-519 (for example, cold, pneumonia, acute bronchitis) reported with or as due to an acute infection codable to 001-136 (except 079.9)* will be coded to 001-136, (except 079.9)* only.
			ACUTE RESPIRATORY INFECTIONS (460-466) For HIS, multiple acute upper respiratory infections in 460-464, will be coded to 465.8 only; and any acute conditions in 460-465 reported with or as due to the following acute conditions, will be combined using only the code listed below: acute bronchitis and bronchiolitis 466.- influenza in 487 — 487.0-487.8 by type pneumonia in 480-486 — 480-486 by type Any acute condition in 460-465 reported as due to or with an acute ear infection in 381.0, 382.0, 382.9, 383.0, 383.2, 384.0 or 388.7 (earache) will be coded to the acute ear infection or earache only. Acute conditions in 466.- reported with or due to conditions in 480-486 (pneumonia) and 487 (influenza) will be coded to 480-486, 487 categories only.
460			ACUTE NASOPHARYNGITIS (COMMON COLD) For HIS, includes cold, -3 mos NOS, or with diarrhea, NOS, or upset stomach, or other symptoms of the cold, -3 mos; if 3 mos+, code 472.2. Includes the term "cold," -3 mos, on or in eye, back, stomach, kidney, or other "odd" site, but if such condition is 3 mos+, code as for "trouble" of the site. Includes also "congestion, nose" NEC, acute or chronic.
461			ACUTE SINUSITIS For HIS, includes also sinus conditions (nasal) of specified or unspecified sites, in 461.0-461.9, if -3 mos.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(460-519)--continued (460-466)--continued
462			ACUTE PHARYNGITIS For HIS, <u>includes</u> sore, inflamed throat, or viral infection throat, -3 mos; if 3 mos+, code 472.1. <u>Excludes</u> infected throat NOS, code 478.2 (any onset).
463			ACUTE TONSILLITIS For HIS, <u>includes</u> adenoids or tonsils, "bad," diseased, enlarged, or infected, -3 mos; if 3 mos+, see category 474, this Appendix.
465			ACUTE UPPER RESPIRATORY INFECTIONS OF MULTIPLE OR UNSPECIFIED SITE For HIS, <u>see</u> notes above 460.
466			ACUTE BRONCHITIS AND BRONCHIOLITIS <u>Includes</u> the listed conditions, and "bronchial trouble," onset -3 mos, (with cold -3 mos). <u>See also</u> notes above 460. For bronchitis, with bronchiectasis, or emphysema, <u>see</u> 491, this Appendix.
			OTHER DISEASES OF UPPER RESPIRATORY TRACT (470-478)
474			CHRONIC DISEASE OF TONSILS AND ADENOIDS For HIS, if on Hospital Page only or on Condition Page and also on Hospital Page, with or without surgery, code to 474 regardless of onset.
477			ALLERGIC RHINITIS <u>Includes also</u> allergy manifested by ear or upper respiratory (nose, sinus, throat) conditions, and symptoms such as sneezing, "nose itches," runny nose. For multiple allergic respiratory manifestations involving also those in 493.0-493.9, code 493.0-493.9 only; if <u>skin</u> or <u>other</u> allergy is indicated, code those separately.
		477.7	ALLERGIES WITH MULTIPLE CAUSES For HIS, <u>includes</u> upper respiratory allergies with multiple specified causes in 477.0 and 477.8, without lower respiratory involvement.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(460-519)--continued (470-478)--continued
			OTHER DISEASES OF UPPER RESPIRATORY TRACT (478)
478.2			OTHER DISEASES OF PHARYNX, NOT ELSEWHERE CLASSIFIED Includes infected throat NOS (any onset) Excludes "throat infection, viral"--code as for pharyngitis (462); and paralysis of throat 3 mos+ (X63); if speech is affected, code as speech impairment NEC (X11), only.
478.3			PARALYSIS OF VOCAL CORDS OR LARYNX Excludes paralysis of these sites, 3 mos+ (X63); if speech is affected, code as speech impairment NEC (X11), only.
			PNEUMONIA (480-486) AND INFLUENZA (487) Code pneumonia, by type, as in Vol. 2 For HIS, acute conditions in 460-466, or pleurisy, (511.0), with conditions in 480-486 will be coded to 480-486 only. See also notes above 460.
			CHRONIC OBSTRUCTIVE PULMONARY DISEASE AND ALLIED CONDITIONS (490-496)
490			BRONCHITIS, UNQUALIFIED Excludes bronchitis -3 mos (466.0); bronchitis 3 mos+ (491.9); for bronchitis, onset unknown, described as asthmatic, code 493.9. For bronchitis reported with asthma, code asthma (493.0-493.9) and 490 also.
491			CHRONIC BRONCHITIS For HIS, excludes also, bronchitis of any onset described as allergic or due to allergy (493.9). For bronchitis reported with bronchiectasis, code 494 only; described as emphysematous or with emphysema, code the bronchitis, and 492 also. For bronchitis reported with asthma, code asthma (493.0-493.9) and 491.- also.
491.2			OBSTRUCTIVE CHRONIC BRONCHITIS Includes chronic bronchitis described as asthmatic or due to asthma.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(460-519)--continued (490-496)--continued
492			EMPHYSEMA For HIS, for emphysema with other respiratory conditions in 460-519, code the other respiratory conditions as instructed by HIS, and code 492 also.
493			ASTHMA For HIS, includes also: allergy manifested by coughing, breathing difficulty, wheezing, chest symptoms; for allergic pneumonia, however, code 518.3 as per ICD. multiple respiratory allergic symptoms, upper and lower. Excludes also allergy manifested by upper respiratory symptoms but without symptoms of asthma: see 477.9 (hay fever). For asthma (493) with skin or other allergy also, code 493.- AND the skin or other allergy separately. See also 692 and 693, this Appendix. Excludes cardiac asthma (428.1) as per ICD. However, if a heart condition is reported, and asthma NOS or allergic is also reported, with no clear indication that the asthma is due to the heart condition, code the heart condition and code 493.9 also.
494			BRONCHIECTASIS For HIS, for bronchitis of any onset with bronchiectasis, code 494 only. For bronchiectasis with other respiratory conditions in 460-519, code 494 and the other respiratory condition(s), as instructed by HIS.
			OTHER DISEASES OF RESPIRATORY SYSTEM (510-519)
			PLEURISY (511)
511.0			WITHOUT MENTION OF EFFUSION OR CURRENT TUBERCULOSIS For HIS, excludes also pleurisy as in 511 with pneumonia; code to pneumonia.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE DIGESTIVE SYSTEM (520-579)
			DISEASES OF ORAL CAVITY, SALIVARY GLANDS, AND JAWS (520-529) For HIS, see X92 (Other Dentofacial Handicap) for types of tooth (teeth) conditions to be coded as Impairments, any onset.
	520.0		ANONDONTIA
	520.1		SUPERNUMERARY TEETH
	520.2		ABNORMALITIES OF SIZE AND FORM
	520.5		HEREDITARY DISTURBANCES IN TOOTH STRUCTURE NEC
	521.6		ANKYLOSIS, DENTAL
	524		DENTOFACIAL ANOMALIES INCLUDING MALOCCLUSION
			OTHER DISEASES AND CONDITIONS OF THE TEETH AND SUPPORTING STRUCTURES (525)
525.1			ACQUIRED ABSENCE OF TEETH To be used by HIS only for absence or loss of tooth (teeth) or broken tooth (teeth), when -3 mos, and not due to injury -3 mos. Excludes acquired absence of teeth 3 mos+ (X92.)
			DISEASES OF THE JAWS (526)
526.9			UNSPECIFIED For HIS, excludes pain in jaw, 3 mos+ (X92).
			HERNIA OF ABDOMINAL CAVITY (550-553) Hernia will be coded by site as per ICD, if the site is mentioned. For HIS, excludes hernia, -3 mos, due to "one time" injury NEC, heavy lifting, or strain (848). See also 848. Hernia, 3 mos+, due to injury, will be coded to 550-553 without reference to traumatic origin.
			OTHER DISEASES OF INTESTINES AND PERITONEUM (560-569) Paralysis (partial) of intestines or any part of digestive tract, 3 mos+, code X63. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(520-579)--continued
			FUNCTIONAL DIGESTIVE DISORDERS, NOT ELSEWHERE CLASSIFIED (564)
564.2			POSTGASTRECTOMY DUMPING SYNDROME Includes nausea and other digestive symptoms, faintness, etc., due to a previous operation to remove the stomach (or part of it.) NO X-code is required to express absence of stomach. See also Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed.
			OTHER DISORDERS OF INTESTINE (569)
569.6			COLOSTOMY AND ENTEROSTOMY MALFUNCTION For HIS, includes present difficulties following previous surgery to create an artificial orifice (opening) for the bowel; code X94 and 569.6. See also Complications of Surgical and Medical Care (996-999) this Appendix and code according to rules listed and see also Section V, Impairments.
			OTHER DISEASES OF DIGESTIVE SYSTEM (570-579)
			OTHER DISORDERS OF LIVER (573)
573.3			HEPATITIS UNSPECIFIED For HIS, includes hepatitis, unspecified type or cause, any onset. HEPATITIS must be described as "acute", "chronic" or "infectious," or other specified modifiers listed in Vol. 2, in order to be coded to the various kinds of hepatitis.
573.8			OTHER Includes hypertrophy of liver described as acute.
			CHOLELITHIASIS (574)
574.2			CALCULUS OF GALLBLADDER WITHOUT MENTION OF CHOLECYSTITIS For HIS, includes also "disease of gallbladder NOS" with gallstones.
			OTHER DISORDERS OF BILIARY TRACT (576)
576.0			POSTCHOLECTOMY SYNDROME This code will be used only when the complication is stated as "postcholectomy syndrome." See Complications of Surgical and Medical Care (996-999) and code according to rules listed.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE GENITOURINARY SYSTEM (580-629)
			CHRONIC GLOMERULONEPHRITIS (582)
582.9			UNSPECIFIED For chronic nephritis described as "arteriosclerotic," see 403.
			NEPHRITIS AND NEPHROPATHY, NOT SPECIFIED AS ACUTE OR CHRONIC (583)
583.9			WITH UNSPECIFIED PATHOLOGICAL LESION IN KIDNEY Use this category only when onset is unknown.
			OTHER DISEASES OF URINARY SYSTEM (590-599)
			OTHER DISORDERS OF BLADDER (596)
596.5			OTHER FUNCTIONAL DISORDERS OF BLADDER For HIS, <u>includes</u> paralysis, bladder, unknown cause, -3 mos. If -3 mos, with known cause, code cause only. Excludes paralysis, 3 mos+, code to X62.
			DISORDERS OF BREAST (610-611)
			OTHER DISORDERS OF BREAST (611)
611.8			OTHER For HIS, <u>excludes</u> absence of breast (X32) and absence, nipple (congenital) (X32.9).
			OTHER DISORDERS OF FEMALE GENITAL TRACT (617-629)
			MENOPAUSAL AND POSTMENOPAUSAL DISORDERS (627)
627.2			MENOPAUSAL OR FEMALE CLIMACTERIC STATES For HIS, <u>includes</u> non-psychotic nervous or mental conditions due to menopause; code 627.2 only. <u>Excludes</u> menopause causing psychosis as in 296.1, 297.2, 298.8; in such cases, code the psychosis only.

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CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM (630-676)
			Notes for HIS
			1. Any hospitalization in past 2 weeks must have a Condition Page.
			2. On the Condition Page, only one code in 630-639 (Abortion) or 650-669 (Delivery) will be used per person.
			3. For conditions "due to pregnancy," with a clear indication that the person is currently pregnant, code to pregnancy codes only. For conditions "due to pregnancy," with NO indication that the person is currently pregnant, code as for the non-pregnant state.
			4. See Vol. 1 for 4th digits to categories 634-638.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE (680-709)
			OTHER INFLAMMATORY CONDITIONS OF SKIN AND SUBCUTANEOUS TISSUE (690-698)
			CONTACT DERMATITIS AND OTHER ECZEMA (692) For HIS, <u>includes</u> skin allergy due to any substance applied to or in contact with skin (external). If an allergic skin reaction is due to an external substance in 692 and an internal substance in 693, see 693.2. If multiple skin allergies are reported in 692.0-692.8, code to 692.9. If multiple allergies involve skin, respiratory, and other allergies, code the skin, respiratory, and any other type of allergy separately. If a skin allergy in 692 is "due to nerves," code the allergy---ignoring "nerves." If a nervous condition is reported as due to a skin allergy in 692, code 316.3 (see 316, this Appendix) for the nervous condition and code the skin allergy also.
692.9			UNSPECIFIED CAUSE For HIS, <u>includes</u> multiple allergies of the types and causes included in 692.0-692.8. For multiple allergies involving skin and also respiratory system, code the skin allergy and code the respiratory allergy separately.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(680-709)--continued (690-698)--continued
			DERMATITIS DUE TO SUBSTANCES TAKEN INTERNALLY (693) Includes skin allergy due to ingested (swallowed) substances. If multiple allergic skin reactions involving substance in 693 and 692 are reported, see 693.2. If a skin allergy in 693 is due to "nerves," code the allergy---ignoring "nerves." If a nervous condition is reported as due to a skin allergy in 693, code 316.3 (see also 316, this Appendix) for the nervous condition and code the skin allergy also. For multiple allergies involving skin and other types, see 692.
693.1			DUE TO FOOD Excludes allergy to food with gastrointestinal symptoms (558), gastritis (535.4), and allergy to food with respiratory conditions in 477.- and 493.-.
		693.2	SKIN ALLERGIES WITH MULTIPLE CAUSES For HIS, includes skin allergies with multiple specified causes in 692.0-692.9 and 693.0-693.9.
693.9			DUE TO UNSPECIFIED SUBSTANCE For HIS, includes skin allergies with multiple specified causes in 693.0-693.8.
698			PRURITUS AND RELATED CONDITIONS For HIS, includes "itching" with dry skin; or "dry skin" NOS. Excludes itching (with dry skin) if any other skin condition in 680-709 is mentioned.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(680-709)--continued
			OTHER DISEASES OF SKIN AND SUBCUTANEOUS TISSUE (700-709)
			CHRONIC ULCER OF SKIN (707)
707.1			ULCER OF LOWER LIMBS, EXCEPT DECUBITUS Includes also "open leg," and "open" or "running" sores of leg, onset 3 mos+; if these are -3 mos, code as for Infection.
707.9			CHRONIC ULCER OF UNSPECIFIED SITE Includes ulcer NOS, as per ICD, but if the questionnaire indicates that stomach or duodenal ulcer is meant, code as for Ulcer of those sites.
			OTHER DISORDERS OF SKIN AND SUBCUTANEOUS TISSUE (709)
709.0			DYSCHROMIA For HIS, includes also spots NOS on skin, and discolored patches NOS on skin.
709.2			SCAR CONDITIONS AND FIBROSIS OF SKIN Excludes: Keloid scar, any site, code 701.4 as per ICD SCAR, (disfiguring) of face, nose, lips, and ears, code X90 SCAR (painful) (tender) (contracting) of limbs, neck, back, external sites of trunk, or scar NOS of these sites, code to X70-X79, by site. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE (710-739)
			ARTHROPATHIES AND RELATED DISORDERS (710-719) 1. For HIS, any form of arthritis said to be due to injury -3 mos will be coded to the injury codes only. Arthritis, 3 mos+, due to injury will be coded to the disease codes only. 2. If a specific deformity (in X70-X79) is reported with arthritis, code both. See also Section V, Impairments.
			DERANGEMENT OF JOINT (717-718) "Instability" ("joint slips out"), dislocation, "locking," fusion and sprain of joint -3 mos will be coded per ICD. If 3 mos+, and due to a specified chronic disease, code the chronic disease only; otherwise, code to X80-X89, by site. See also Section V, Impairments. Contracture of joint, any onset, code to Deformity, (X70-X79) by site. See also Section V, Impairments.
	718.6		UNSPECIFIED PROTRUSIO ACETABULI For HIS, code to X75. See also Section V, Impairments.
			OTHER AND UNSPECIFIED DISORDER OF JOINT (719) Swelling, stiffness, pain and other symptoms pertaining to joints -3 mos and back (724) -3 mos will be coded per Short Index or Vol. 2. If of unspecified cause or due to old injury (3 mos+), code to X80-X89, by site. See also Section V, Impairments.
			DORSOPATHIES (720-724) Swelling, stiffness, pain and other symptoms pertaining to joints -3 mos and back (724) -3 mos will be coded as per Short Index or Vol. 2. If of unspecified cause or due to old injury (3 mos+), code to X80-X89, by site. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(710-739)--continued (720-724)--continued
722			INTERVERTEBRAL DISC DISORDERS (722) For HIS, <u>includes also</u> all "disc" conditions at any onset of unspecified origin. If the "disc" condition is due to an injury 3 mos+, code the "disc" condition to 722.0-722.9 without reference to injury. If the "disc" condition is due to a current injury (-3 mos), code to 839. <u>See</u> 839 this Appendix.
722.8			POSTLAMINECTOMY SYNDROME This code will be used only when the complication is stated as "postlaminectomy syndrome." See Complications of Surgical and Medical Care (996-999) and code according to rules listed.
			OTHER DISORDERS OF CERVICAL REGION (723) <u>Excludes</u>: conditions codable to 723 <u>due to</u> intervertebral disc disorders; code 722.- only.
723.5			TORTICOLLIS NOT SPECIFIED AS CONGENITAL, PSYCHOGENIC OR TRAUMATIC For HIS, code torticollis (contracture, neck) to X79; code "stiff neck," -3 mos to 719.5; if 3 mos+, code to X80. See also Section V, Impairments.
			OTHER AND UNSPECIFIED DISORDERS OF BACK (724) For HIS, conditions codable to categories 724.1, 724.5, 724.6, 724.7, 724.8 and 724.9, 3 mos + will be coded as Orthopedic Impairment (X80-X89) by site. <u>Excludes</u>: conditions codable to 724 <u>due to</u> intervertebral disc disorders; code 722.- only.
			RHEUMATISM, EXCLUDING THE BACK (725-729) Swelling, stiffness, pain and other symptoms pertaining to limbs -3 mos will be coded per Short Index or Vol. 2. If of unspecified cause or due to old injury (3 mos+) code to X80-X89 by site. See also Section V, Impairments. "Instability" ("joint slips out"), dislocation, "locking," fusion and sprain of joint -3 mos will be coded per ICD. If 3 mos+ and due to a specified chronic disease, code the chronic disease only; otherwise, code to X80-X89 by site. See also Section V, Impairments. Contracture of joint, any onset, code to Deformity (X70-X79) by site. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(710-739)--continued (725-729)--continued
			OTHER DISORDERS OF SYNOVIUM, TENDON AND BURSA (727) Code Short Achilles Tendon to X76 with appropriate 4th digit etiology code. See also Section V, Impairments.
727.8			OTHER For HIS, <u>excludes</u> contracture tendon, to be coded as for Deformity, by site. See also Section V, Impairments.
			DISORDERS OF MUSCLE, LIGAMENT AND FASCIA (728) For HIS, <u>excludes</u> atrophy, idiopathic muscular atrophy and other contractures, of limb, back, trunk (and muscles and ligaments) which are coded to X70-X79, by site and type. See also Section V, Impairments.
	728.2		MUSCULAR WASTING AND DISUSE ATROPHY, NOT ELSEWHERE CLASSIFIED For HIS, code to X70-X79, by site. See also Section V, Impairments.
	728.4		LAXITY OF LIGAMENT For HIS, code as for Orth. Imp., by site. See also Section V, Impairments.
	728.6		CONTRACTURE OF PALMAR FASCIA (DUPUYTREN'S CONTRACTURE) For HIS, code to X74. See also Section V, Impairments.
728.8			OTHER DISORDERS OF MUSCLE, LIGAMENT AND FASCIA For HIS, <u>includes</u> spasms, twitching, tremor, trembling, involving muscles of limbs, back, and trunk, -3 mos. If these are 3 mos+ and due to a specified chronic disease, code the chronic disease only; otherwise, code to X80-X89, by site. See also Section V, Impairments.
			OTHER DISORDERS OF SOFT TISSUE (729)
729.9			OTHER AND UNSPECIFIED DISORDER OF SOFT TISSUE For HIS, <u>includes also</u> pain and trouble -3 mos of multiple sites in 719, 723, 724, 728 and 729. See also General Notes (725-729).

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(710-739)--continued
	734		FLATFOOT For HIS, code to X77. See also Section V, Impairments.
	735		ACQUIRED DEFORMITIES OF TOE For HIS, code to X76. Code "dropped toe" as for Paralysis (X-code). See also Section V, Impairments.
	736		OTHER ACQUIRED DEFORMITIES OF LIMBS For HIS, code to the X-code by type, site and cause. See also Section V, Impairments.
	737		CURVATURE OF SPINE For HIS, code to X70 whether congenital or not. See also Section V, Impairments. If a heart disease in 426-429, 785.0 or 785.1 is present, code the heart disease also.
	738		OTHER ACQUIRED DEFORMITY For HIS, code to the X-code by type, site and cause. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			CONGENITAL ANOMALIES (740-759)

Notes for HIS:

1. The phrase "since birth" can usually be interpreted to mean "congenital origin" or "born with" or "existing at birth," but it should not be so interpreted when the defect is "speaking" NEC or "walking" NEC or in some function that is not developed at birth. When "since birth" is used, and the condition could not have been present at birth, the etiologic code ".X" (other) will be used. "Since birth" can be taken to mean congenital origin for conditions that are generally or always congenital.

2. Categories 740-759 will exclude the following which if congenital, will be classified to the X-code with ".9" in the 4th digit (signifying congenital origin or birth injury):

   absence of extremities, eyes, ears, nose, jaws, teeth, larynx, lung, kidney, breast

   defects of vision, hearing, speech, sensation, intelligence

   structural defects and deformities of the skull, ear, face, nose, neck, spine, extremities, bones, joints, muscles, tendons.

3. Congenital diseases of the eye and ear will be coded to the categories for acquired conditions of the same nature in 360-368, 370-379 and 388 to facilitate the count of disorders of eye and ear.

4. Congenital anomalies of internal organs (except congenital absence of larynx, lung, and kidney), and other congenital anomalies NOT classifiable to the X-code, will be coded as per ICD.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(740-759)--continued
	740		ANENCEPHALUS AND SIMILAR ANOMALIES
	741		SPINA BIFIDA Code to X71.9. See also Section V, Impairments.
			OTHER CONGENITAL ANOMALIES OF NERVOUS SYSTEM (742)
	742.0		ENCEPHALOCELE Code to X93.9. See also Section V, Impairments.
	742.1		MICROCEPHALUS Code to X93.9. See also Section V, Impairments.
	742.3		CONGENITAL HYDROCEPHALUS Code to X93.9. See also Section V, Impairments.
	743		CONGENITAL ANOMALIES OF EYE For HIS, all conditions in 743 will be coded to their counterparts among acquired diseases of the eye. See also categories 360-379, this Appendix.
	744.0 744.1 744.2 744.3		CONGENITAL ANOMALIES OF EAR, FACE AND NECK For HIS, all conditions in 744.0-744.3 will be coded to 388.9 and/or the X-code. See also 388.9, this Appendix, and Section V, Hearing Impairments.
	744.5		WEBBING OF NECK Code to X79.9. See also Section V, Impairments.
	744.8		OTHER SPECIFIED ANOMALIES OF FACE AND NECK Code anomalies of face in 744.8 to X90.9 Code anomalies of neck in 744.8 to X79.9 See also Section V, Impairments.
	744.9		UNSPECIFIED ANOMALIES OF FACE AND NECK Code anomalies of face in 744.9 to X90.9 Code anomalies of neck in 744.9 to X79.9 See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(740-759)--continued
			CONGENITAL ANOMALIES OF RESPIRATORY SYSTEM (748)
748.1			OTHER ANOMALIES OF NOSE For HIS, excludes congenital absence or other congenital disfiguring defects of nose structure (X90.9). See also Section V, Impairments.
748.3			OTHER ANOMALIES OF LARYNX, TRACHEA, AND BRONCHUS For HIS, excludes congenital absence of larynx (X11.9). See also Section V, Impairments.
748.5			AGENESIS, HYPOPLASIA AND DYSPLASIA OF LUNG Excludes absence, agenesis and aplasia of lung. Code to X30.9. See also Section V, Impairments.
	749		CLEFT PALATE AND CLEFT LIP Code to X91.9. See also Section V, Impairments.
			OTHER CONGENITAL ANOMALIES OF UPPER ALIMENTARY TRACT (750)
	750.0		TONGUE TIE Code to X11.9. See also Section V, Impairments.
	750.1		OTHER ANOMALIES OF TONGUE Code to X11.9. See also Section V, Impairments.
750.5			CONGENITAL HYPERTROPHIC PYLORIC STENOSIS For HIS, excludes pylorospasm NOS or acquired (537.8)
			CONGENITAL ANOMALIES OF URINARY SYSTEM (753)
	753.0		RENAL AGENESIS AND DYSGENESIS Code to X31.9. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(740-759)--continued
			CERTAIN CONGENITAL MUSCULOSKELETAL DEFORMITIES (754)
754.0			OF SKULL, FACE AND JAW For HIS, excludes: Asymmetry of face (X90.9) Compression facies (X90.9) Dolichocephaly (X93.9) Plagiocephaly (X93.9) Potters facies (X90.9) Other disfiguring congenital defects of face and jaw (X90.9) Other disfiguring congenital defects of skull (X93.9)
754.1			OF STERNOCLEIDOMASTOID MUSCLE For HIS, excludes congenital torticollis (X79.9) and congenital contracture of neck muscles (X79.9).
	754.2		OF SPINE Code to X70.9
	754.3		CONGENITAL DISLOCATION OF HIP Code to X75.9
	754.4		CONGENITAL GENU RECURVATUM AND BOWING OF LONG BONES OF LEG Code to X76.9
	754.5		VARUS DEFORMITIES OF FEET Code to X76.9
	754.6		VALGUS DEFORMITIES OF FEET Code to X76.9 Code flatfoot to X77
	754.7		OTHER DEFORMITIES OF FEET Code to X76.9 Code clubfoot NOS to X78.9
	754.8		OTHER SPECIFIED Code to X-code by type and site. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(740-759)--continued
	755		OTHER CONGENITAL ANOMALIES OF LIMBS (755) Code to X-code by type and site. See also Section V, Impairments.
			OTHER CONGENITAL MUSCULOSKELETAL ANOMALIES (756)
	756.0		ANOMALIES OF SKULL AND FACE BONES Code to X-code by type and site. See also Section V, Impairments.
	756.1		ANOMALIES OF SPINE Code to X-code by type and site. See also Section V, Impairments.
	756.2		CERVICAL RIB Code to X-code by type and site. See also Section V, Impairments.
	756.3		OTHER ANOMALIES OF RIBS AND STERNUM Code to X-code by type and site. See also Section V, Impairments.
756.6			ANOMALIES OF DIAPHRAGM Excludes absence of diaphragm (X33.9)
756.8			OTHER SPECIFIED ANOMALIES OF MUSCLE, TENDON, FASCIA AND CONNECTIVE TISSUE For HIS, excludes congenital absence of muscle or tendon. See X33 and X34, Section V, Impairments. Excludes also congenital shortening of tendon; code to X73-X76 or X79, by site. See also Section V, Impairments.
756.9			UNSPECIFIED ANOMALIES OF MUSCULOSKELETAL SYSTEM For HIS, any that are structural deformities will be coded to X-code by type and site. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(740-759)--continued
			CONGENITAL ANOMALIES OF THE INTEGUMENT (757)
757.6			SPECIFIED ANOMALIES OF BREAST For HIS, excludes absence of nipple (congenital) (X32.9) and congenital absence of breast (X32.9)
			CHROMOSOMAL ANOMALIES (758)
	758.0		DOWN'S SYNDROME Code to X19.9. See also Section V, Impairments.
			OTHER AND UNSPECIFIED CONGENITAL ANOMALIES (759)
	759.7		MULTIPLE CONGENITAL ANOMALIES SO DESCRIBED Code to X99.9. See also Section V, Impairments.
	759.9		CONGENITAL ANOMALY, UNSPECIFIED Code to X99.9. See also Section V, Impairments.

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CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (760-779)
			Notes for HIS:
			1. Births of well babies are not coded for HIS. Births of well babies with or without routine circumcision, on the Hospital Page, are to be deleted. If an infant stays in the hospital after the mother goes home (more nights in the hospital than mother) and no reason is stated or indicated, the Hospital Stay will be coded as entered.
			2. For HIS, categories 760-779 will only be used for infants no more than 2 months of age.
			3. If an infant has a condition reported as due to a disease or condition in the mother, see ICD, Vol. 2 "Maternal Conditions Affecting Fetus or Newborn" and code as per ICD. DO NOT create a Condition Page for the maternal condition.
			4. Infants (or persons of any age) having been injured at birth, or affected before birth, to the extent that they are deformed, paralyzed, or otherwise "impaired," will be classified to the X-code with ".9" for the 4th digit. No additional code is required for the cause of the impairment.
			FETUS OR NEWBORN AFFECTED BY MATERNAL COMPLICATIONS OF PREGNANCY (761)
	761.6		Maternal death unspecified
			INTRAUTERINE HYPOXIA AND BIRTH ASPHYXIA (768)
	768.0		Fetal death from asphyxia or anoxia before onset of labour or at unspecified time
	768.1		Fetal death from asphyxia or anoxia during labour
			OTHER AND ILL-DEFINED CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (779)
	779.6		Termination of Pregnancy (Fetus) For HIS, termination of pregnancy constituting an abortion, will be classified only as abortion (for the mother).
779.9			UNSPECIFIED Excludes fetal death of unknown cause.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			SYMPTOMS, SIGNS AND ILL-DEFINED CONDITIONS (780-799)
			For HIS, changes have been made in this Section for the purpose of classifying symptoms with onset 3 mos+ to the X-codes for impairments.
			These changes occur mainly in conditions affecting speech, feeling, taste, smell, coordination and locomotion. Instructions for coding these conditions with onset 3 mos+ will be found in this Appendix and Section V, Impairments.
			SYMPTOMS (780-789)
			GENERAL SYMPTOMS (780)
780.3			CONVULSIONS For HIS, code chronic or repeated convulsions, seizures, fits, 3 mos+, to 345.9. See also 345.
780.7			MALAISE AND FATIGUE Includes overwork, overtired, exhaustion, worn out, rundown, weakness of unknown cause or type. If these are due to senility (797) or nerves (300.5), code cause only. Excludes: overexertion NOS (994.5)
780.9			OTHER Includes also loss of memory, "forgetfulness," "can't remember well." If these are due to old age, stroke, arteriosclerosis or other chronic disease, code cause only. If cause is not stated, and person is 65+, code as for senility (797). Includes also pain in side -3 mos; if 3 mos+, code as for Orthopedic Impairment.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued
			SYMPTOMS INVOLVING NERVOUS AND MUSCULOSKELETAL SYSTEM (781)
781.0			ABNORMAL INVOLUNTARY MOVEMENTS This category includes symptoms such as athetosis NOS, spasm, twitching, tremor, trembling and abnormal involuntary movements, with part of body and cause not known. Includes also abnormal head movement, cause unknown. If symptoms in this category involve back, limbs, muscles, or trunk, NEC, code as for Trouble of those sites in Short Index. The term "spastic" of unspecified site or with sites involving limbs, back, trunk, 3 mos+, is coded as for Paralysis, partial of those sites. See also Section V, Impairments. Excludes: "habit" spasm (any site) (307.2) spasm NEC: eyelid (374.4); face or facial (351.8); of pylorus (537.8); of tongue (529.8) tic (any site) (due to nerves) (307.2) jerks, jerking (myoclonus) (333.2)
781.1			DISTURBANCE OF SENSATION OF SMELL AND TASTE If 3 mos+, code to X12. See also Section V, Impairments.
781.2			ABNORMALITY OF GAIT If 3 mos+, code to Paralysis, partial in the X-code. See also Section V, Impairments. Excludes difficulty walking (719.7). Excludes also: problem terminology such as "staggering" or "stumbling", code as for Trouble, walking.
781.3			LACK OF COORDINATION Code ataxia or muscular incoordination, 3 mos+, to Paralysis, partial in the X-code. See also Section V, Impairments. Excludes loss of balance or equilibrium, dizziness (780.4).
781.4			TRANSIENT PARALYSIS OF LIMB -3 MOS Includes paralysis of one limb of unknown cause. If cause is given, code cause only. Excludes paralysis of one limb (arm or leg) in infants under 3 mos of age---see NOTES---category 760-779, this Appendix.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued (781)--continued
	781.5		CLUBBING OF FINGERS Code to X74 with appropriate 4th digit etiology code. See also Section V, Impairments.
781.9			OTHER Entries of "poor posture," "bad posture," or other "abnormal" posture given as a condition will be coded to X79 regardless of onset. If a condition is <u>caused by</u> the posture defect, code the condition only.
			SYMPTOMS INVOLVING SKIN AND OTHER INTEGUMENTARY TISSUE (782)
782.0			DISTURBANCE OF SKIN SENSATION If 3 mos+, code to X12. See also Section V, Impairments.
782.2			LOCALIZED SUPERFICIAL SWELLING, MASS OR LUMP <u>Includes</u> "knots," "lumps," and "bumps," of unknown cause and type of external sites. If due to current injury, code to Injury, by site; if no site given, code 959. <u>Excludes</u> "knots," "lumps," and "bumps," of unknown cause and type of internal sites; see LUMP or MASS, Vol. 2; if described as "benign," "malignant," or "non-malignant," code as for Neoplasms (140-239).
782.4			JAUNDICE UNSPECIFIED, NOT OF NEWBORN Jaundice of newborn (age less than 2 mos.), code 774.6
			SYMPTOMS CONCERNING NUTRITION, METABOLISM AND DEVELOPMENT (783)
	783.1		ABNORMAL WEIGHT GAIN See 278.0 this Appendix.
783.2			ABNORMAL LOSS OF WEIGHT <u>Includes</u> loss of weight, cause not specified. If cause is given, code cause only.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued (783)--continued
783.4			LACK OF EXPECTED NORMAL PHYSIOLOGICAL DEVELOPMENT Includes underweight, cause not specified. If cause is given, code cause only.
			SYMPTOMS INVOLVING HEAD AND NECK (784)
784.0			HEADACHE For HIS, includes tension headache; headache due to "nerves," or "nervousness," or nervous headache.
784.2			SWELLING, MASS OR LUMP IN HEAD AND NECK For HIS, includes also, internal "knots," "lumps," and "bumps" of head and neck. If these are due to a current injury, code to Injury, by site. If described as "benign," "malignant," or "non-malignant" code as for Neoplasms (140-239)
784.3			APHASIA If 3 mos+, code to X11. See this Appendix and Vol. 2 for specified types of aphasia. See also Section V, Impairments.
784.4			VOICE DISTURBANCE Code listed conditions, 3 mos+, to X11. See also Section V, Impairments.
784.5			OTHER SPEECH DISTURBANCE Code listed conditions 3 mos+ to X11. See also Section V, Impairments.
784.6			OTHER SYMBOLIC DYSFUNCTION Code agnosia NEC, agraphia and apraxia, 3 mos+ to X11. See also Vol. 2 and Section V, Impairments. Code acalculia and dyslexia, 3 mos+ to X14. See also Vol. 2 and Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued
			SYMPTOMS INVOLVING CARDIOVASCULAR SYSTEM (785)
785.0			TACHYCARDIA, UNSPECIFIED This code will not be used if a more specific type of tachycardia is given or a heart condition in 414-429 is linked with or given as the cause of tachycardia. If due to a known cause other than 414-429, code the cause only.
785.1			PALPITATIONS This code will not be used if a more specific heart condition in 414-429 is linked with or given as the cause; code 414-429 only.
785.2			FUNCTIONAL AND UNDIAGNOSED CARDIAC MURMURS This code will not be used if a more specific type or site is given. If conditions in 390-398, or 424 are linked with or given as the cause, code 390-398 or 424 only.
785.5			SHOCK WITHOUT MENTION OF TRAUMA If physical state of shock is reported with current injury, code the injury only. Excludes nervous, mental, or emotional shock (308); and paralytic shock or stroke (437.9)
			SYMPTOMS INVOLVING RESPIRATORY SYSTEM AND OTHER CHEST SYMPTOMS (786)
786.6			SWELLING, MASS OR LUMP IN CHEST For HIS, includes also "knots," "lumps," and "bumps" of internal chest area, except breast (611.7). If these are due to current injury, code to Injury, chest. If these are described as "benign," "malignant," or "non-malignant"; code as for Neoplasms (140-239).

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued
			SYMPTOMS INVOLVING ABDOMEN AND PELVIS (789)
789.1			HEPATOMEGALY Excludes hypertrophy of liver STATED to be acute.
789.3			ABDOMINAL OR PELVIC SWELLING, MASS OR LUMP For HIS, includes "knots" and "bumps" of internal abdominal or pelvic areas. If these are due to current injury NEC, code to Injury, by site. If these are described as "benign," "malignant," or "non-malignant"; code as for Neoplasms (140-239).
			RADIOLOGICAL AND OTHER EXAMINATIONS OF BODY STRUCTURE (793) For HIS, this category will be used for conditions of: X-rays, thermography and ultrasound examinations WITHOUT a specified condition.
793.0			Skull and head
793.1			Lungs
793.2			Other intrathoracic organ
793.3			Biliary tract
793.4			Gastrointestinal tract
793.5			Genitourinary organs
793.6			Abdominal area, including retroperitoneum
793.7			Musculoskeletal system
793.8			Breast
793.9			Other

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued
			ILL-DEFINED AND UNKNOWN CAUSES OF MORBIDITY AND MORTALITY (797-799)
797			SENILITY WITHOUT MENTION OF PSYCHOSIS Includes "old age" in persons 65+ with symptoms such as debility, weakness, trembling and loss of memory. Excludes the following: mental or nervous disorders or trouble due to senility or "old age" (290.9) depression due to senility or "old age" (290.2) conditions of the heart, stomach (body parts and organs); code to the specified condition only "Age" or "old age" causing impairments in the X-codes; code ".X" for etiology. Do not code 797 separately.
	798		SUDDEN DEATH, CAUSE UNKNOWN Not applicable.
			OTHER ILL-DEFINED AND UNKNOWN CAUSES OF MORBIDITY AND MORTALITY (799)
799.2			NERVOUSNESS Do not use this category if any in 290-316 has been coded for the same person. For HIS, includes "bad nerves," "jitters," "worry," "nervous trouble," "nervous condition," "nervous disorder," and "nervous tension" of unknown cause or type. Excludes such conditions as: nervous breakdown (300.9) nervous or mental condition except psychosis (non-psychotic) when due to or associated with physical disorders, see category 316, this Appendix.

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CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(780-799)--continued
			(799)--continued
		799.5	OBSERVATION WITH NO CONDITION FOUND Use this code only when it is known that the specified condition being treated or observed was NOT found. If a condition was found, code it, not 799.5. If the condition is mentioned, but there is no mention of what was found, code the condition, not 799.5.
799.8			OTHER ILL-DEFINED CONDITIONS Use this code if some disease process is stated, such as fibrosis NOS, but the site or type is not mentioned, and the indexing shows no code for unspecified site or type.
799.9			OTHER UNKNOWN AND UNSPECIFIED CAUSE Use this code when an illness must be coded, but the disease process is not stated and there is not enough information to tell what the condition is.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			INJURY AND POISONINGS (800-999)
			General Notes:
			1. For HIS, the codes E800-E999 (External Cause) will not be used.
			2. Adverse effects of drugs, poisonings and chemicals will be coded to FOUR categories only:
			"Overdose" or "poisoning" of drugs 977.9
			Toxic effects of venom 989.5
			Adverse effects of chemical substances 989.9
			Adverse effects of drugs 995.2
			3. In these notes, the term "injury" will refer to types in 800-959.
			4. For HIS, ICD 4th digits for 800-904, 910-959 will NOT be used.
			5. Present effects 3 mos+ that are NOT impairments will be coded to the ICD condition code as indexed by ICD or in the Short Index.
			Present effects 3 mos+ that ARE impairments will be coded as impairments only. No code in 800-999 is required.
			6. Injuries in 800-959, 3 mos+, with no specified present effects will be coded as for Late Effects See Vol. 2, Late Effects of specified type of injury.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		FRACTURES (800-829) 1. See also General Notes for 800-999, this Appendix. 2. As per ICD, fracture due to specified disease: code disease only. Fracture due to unspecified disease, and NOT due to injury, will be coded to 733.1 only. 3. For HIS, fracture includes "broken," or "cracked," if it is clear that one or more bones are involved. 4. For fractures in 800-829, 3 mos+, with no present effect indicated except delayed healing or nonunion, code to 905.0-905.5.
806			FRACTURE OF VERTEBRAL COLUMN WITH SPINAL CORD LESION For HIS, excludes all types of paralysis, 3 mos+, due to injury; code these to X-code with .0 in 4th digit. See also Section V, Impairments.
825			FRACTURE OF ONE OR MORE TARSAL AND METATARSAL BONES For HIS, includes "broken arches," -3 mos, if due to injury. Excludes "broken arches," 3mos+, code to X77. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		DISLOCATION (830-839) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, dislocations or displacements codable to 830-839 are limited to those due to injury in past 3 months. 3. For "disc" conditions, see 839, this Appendix. 4. For HIS, congenital dislocation of hip will be coded to X75.9 and any other specified congenital dislocation will be coded to X70.9-X79.9, by site. See also Section V, Impairments. 5. Dislocation, jaw, 3 mos+, code to X92. See also Section V, Impairments. 6. Dislocation (and synonyms) of joints of limbs, back, trunk, 3 mos+ (or old or habitual or recurrent), with no other specified present effect, will be coded to X80-X89, by site, according to the rules for X80-X89. See also Section V, Impairments. "Rupture," "tear," "broken," "wrenched," "derangement," of ligaments, muscles, cartilages, or tendons or other structures surrounding the knee or other joints, will be coded as for Sprain, strain of those sites unless dislocation is also specified in the description.
839			OTHER, MULTIPLE, AND ILL-DEFINED DISLOCATIONS For HIS, includes dislocation, displacement, and other "disc" conditions, -3 mos, if specified as due to injury. Excludes "disc" conditions, -3 mos, NOT due to injury, and all "disc" conditions 3 mos+, code 722, by site.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		SPRAINS AND STRAINS OF JOINTS AND ADJACENT MUSCLES (840-848) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, sprains, strains (and synonyms) codable to 840-848 are limited to those due to injury in past 3 months. 3. Includes also "broken," "wrenched," "deranged," cartilage or tendons surrounding the knee and other joints unless dislocation is also specified in the description. 4. Sprains, strains (and synonyms) 3 mos+, of sites of limbs, back, trunk with no other specified present effect will be coded to X80-X89, by site. See also Section V, Impairments.
847			SPRAINS AND STRAINS OF OTHER AND UNSPECIFIED PARTS OF BACK Excludes old (3 mos+) whiplash injury, no other specified present effect (X80.0).
848			OTHER AND ILL-DEFINED SPRAINS AND STRAINS For HIS, includes hernia, -3 mos, provided it is due to "one-time" injury, heavy lifting, or strain. Includes also sprain, strain, "side" -3 mos; if 3 mos+, code X89. Excludes hernia 3 mos+ due to injury, which will be coded to 550-553. NOTE: eyestrain, strained heart, athlete's heart, strain of other internal organs, any onset; regard these as meaning "general wear and tear," and code with the ill-defined diseases of the part mentioned, without reference to injury in any way.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		INTRACRANIAL INJURY (850-854) 1. See also General Notes for 800-999, this Appendix. 2. Any injury 3 mos+ in 850-854, with no specified present effect (except delayed healing) will be coded to 907.0.
	4th digits		INTERNAL INJURY (860-869) 1. See also General Notes for 800-999, this Appendix. 2. Internal injury 3 mos+, with no specified present effect (except delayed healing) will be coded to 908.0-908.2, by site.
	4th digits		OPEN WOUNDS (870-897) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, excludes avulsion, amputation, "cut off," "torn off," enucleation ("knocked out") any onset: a. eye: code as for Blindness in X-code b. ear or nose: code to X90 c. limb(s) any: code to X20-X29, X35, by site 3. For HIS, any in 870-884, 890-894, 3 mos+ with no specified present effect indicated (except delayed healing) will be coded to 906.0-906.1. EXCEPTION: Perforated ear drum 3 mos+, will be coded to 384.2. 4. For old foreign body in tissue (729.6) or bones (733.9), see ICD; the original open wound will not be coded.
			OPEN WOUND OF EYEBALL (871)
	871.3		AVULSION OF EYE For HIS, code avulsion and enucleation of eye as for Blindness in the X-code. See also Section V, Impairments.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued (870-897)--continued
872			OPEN WOUND OF EAR 1. For HIS, includes perforation of eardrum (and synonyms) due to injury, or "traumatic" only if -3 mos; if 3 mos+, and "traumatic" (due to injury) code to 384.2; if non-traumatic, code to 384.2, regardless of onset. 2. Excludes absence or loss of ear due to injury, any onset (X90.0).
873			OTHER OPEN WOUND OF HEAD For HIS, includes broken tooth or teeth, or loss of tooth or teeth, only if due to injury NEC, and -3 mos. Absence of tooth, teeth, 3 mos+, due to any cause, or congenital absence of tooth or teeth, any onset, will be coded to X92. See also Section V, Impairments. Excludes absence or loss of nose due to injury, any onset (X90.0).
879			OPEN WOUND OF OTHER AND UNSPECIFIED SITES, EXCEPT LIMBS Includes multiple open wounds of unspecified site(s). Multiple open wounds of sites classifiable to the SAME 4-digit category should be coded to that category unless they are in different limbs. Multiple open wounds of sites classifiable to different 4-digit categories, or in different limbs, should be coded separately.
	885		TRAUMATIC AMPUTATION OF THUMB(S) (COMPLETE) (PARTIAL)
	886		TRAUMATIC AMPUTATION OF OTHER FINGER(S) (COMPLETE) (PARTIAL)
	887		TRAUMATIC AMPUTATION OF ARM AND HAND (COMPLETE) (PARTIAL)
	895		TRAUMATIC AMPUTATION OF TOE(S) (COMPLETE) (PARTIAL)
	896		TRAUMATIC AMPUTATION OF FOOT (COMPLETE) (PARTIAL)
	897		TRAUMATIC AMPUTATION OF LEG(S) (COMPLETE) (PARTIAL)

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		INJURY TO BLOOD VESSELS (900-904) Use these categories only when blood vessels are indicated and no other injury is specified. Injury to blood vessels, 3 mos+, with no specified present effect will be coded to 908.3 - 908.4.
			LATE EFFECTS OF INJURIES, POISONINGS, TOXIC EFFECTS AND OTHER EXTERNAL CAUSES (905-909)
			ICD 4th digits WILL BE USED for these categories.
			These categories will only be used when there is no other specified present effect (except delayed healing) of an injury 3 mos+.
			LATE EFFECTS OF MUSCULOSKELETAL AND CONNECTIVE TISSUE INJURIES (905)
	905.6		For HIS, code to X80-X89, by site. See also Section V, Impairments.
	905.7		For HIS, code to X80-X89, by site. See also Section V, Impairments.
	905.8		For HIS, code to X80-X89, by site. See also Section V, Impairments.
	905.9		For HIS, code to X20-X29, X35, by site. See also Section V, Impairments.
			LATE EFFECTS OF OTHER AND UNSPECIFIED INJURIES (908)
	908.6		
			LATE EFFECTS OF OTHER AND UNSPECIFIED EXTERNAL CAUSES (909)
	909.0		
	909.1		
	909.3		
	909.9		

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		SUPERFICIAL INJURY (910-919) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, superficial injury will be omitted if it occurs with some other more serious injury in same part of body. 3. For superficial injury, 3 mos+, no present effect specified, code 906.2
	4th digits		CONTUSION (920-924) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, includes also "blood blister" (due to injury), to be coded as for Hematoma, or Contusion, as per ICD. 3. For HIS, contusion (or bruise) will be omitted if it occurs with some other more serious injury in same part of body. 4. For contusion (or synonyms) 3 mos+, no present effects specified, code 906.3
	4th digits		CRUSHING INJURY (925-929) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, includes also "smashed" and "mashed". If fracture or open wound is mentioned also, code to those categories only. 3. For crushing injury, 3 mos+, no present effects specified, code 906.4

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		EFFECTS OF FOREIGN BODY ENTERING THROUGH ORIFICE (930-939) 1. See also General Notes for 800-999, this Appendix. 2. Foreign body, 3 mos+, with no present effects specified, will be coded to 908.5 NOTE: Foreign material in parts of body NOT a natural opening or passageway (from the outside) is to be coded as for Open Wound of the site. See General Notes for 870-897, this Appendix.
	4th digits		BURNS (940-949) 1. See also General Notes for 800-999, this Appendix. 2. For burns, 3 mos+, no present effects specified, code 906.5-906.9.
	4th digits		INJURY TO NERVES AND SPINAL CORD (950-957) 1. See also General Notes for 800-999, this Appendix. 2. For HIS, categories 950-957 include blindness, deafness, and paralysis, due to nerve injury, -3 mos. Excludes these conditions 3 mos+; to be coded to the appropriate X-code, with .0 in 4th digit. See also Section V, Impairments. 3. For nerve and spinal cord injury, 3 mos+, no present effect specified, code to 907 with appropriate 4th digit from ICD, Vol. 1
	958		CERTAIN EARLY COMPLICATIONS OF TRAUMA For HIS, code the injury only.

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CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	4th digits		INJURY, OTHER AND UNSPECIFIED (959) 1. For injury codable to 959, 3 mos+, with <u>no present effects specified</u>, 908.9 will be used. 2. For HIS, <u>includes</u> ill-defined descriptions of injury of external sites (NOT involving eye, head, skull, internal sites, nerves), such as mangled, hurt, knocked, cracked, whacked, bumped, jarred, that cannot be coded elsewhere.
			ADVERSE EFFECTS FOR HIS For HIS, adverse effects of chemicals, drugs, and poisonings will be coded to four (4) categories <u>only</u>: "overdose" or "poisoning" of drugs 977.9 toxic effect of venom 989.5 adverse effects of chemical substance 989.9 adverse effects of drugs 995.2
	960-969 970-977.8 978-979		POISONING BY DRUGS, MEDICAMENTS AND BIOLOGICAL SUBSTANCES 1. For HIS, any "overdose" or "poisoning" by drug will be coded to 977.9 only. 2. For mental disorders in 292 due to exposure (NOT addiction), two codes are required: one for the specified psychosis (292.0-292.9) and 977.9 3. If the adverse effect indicates an impairment, code the impairment only. No additional code for adverse effect (977.9) or nature of adverse effect is required.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
	980-987		TOXIC EFFECTS OF SUBSTANCES CHIEFLY NONMEDICINAL AS TO SOURCE (980-989)
	989.0-989.4		1. For HIS, any toxic effect of venom will be coded to 989.5 and any adverse effects of chemical substances will be coded to 989.9 only.
	989.6-989.8		2. For <u>addiction to</u> or <u>dependence on</u>, drugs, alcohol, or other substances, the condition will be coded as per ICD.
			3. For mental disorders in 292, due to exposure (NOT addiction), two codes are required: one for the specified psychosis (292.0-292.9) and 989.9
			4. If the adverse effect indicates an impairment, code the impairment only. No additional code for adverse effect (989.9) or nature of adverse effect is required.
			5. For adverse effects of "shots", vaccinations, and other immunization procedures, see 999, this Appendix.
			OTHER AND UNSPECIFIED EFFECTS OF EXTERNAL CAUSES (990-995)
			1. <u>See also</u> General Notes for 800-999, this Appendix.
			2. For HIS, if a condition in 990-994, -3 mos, can be coded to an injury of the types in 800-959, code the injury in 800-959; NOT 990-994.
			3. Effects codable to 990-994 will include, for HIS, only those with onset in past 3 months. Conditions in 990-994, 3 mos+, with <u>no present effects specified</u>, will be coded to 909.2 or 909.4; if a <u>specified present effect</u> is given, code the present effect only.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
			CERTAIN ADVERSE EFFECTS NOT ELSEWHERE CLASSIFIED (995)
995.2			UNSPECIFIED ADVERSE EFFECT OF DRUG, MEDICAMENT, AND BIOLOGICAL SUBSTANCE
			1. For HIS, adverse effect of drugs will be coded to 995.2. If the adverse effect is a skin condition such as rash which indicates dermatitis, code as for Dermatitis, due to.
			2. For <u>addiction to</u> or <u>dependence on</u> drugs, alcohol, or other substances, the condition will be coded as per ICD.
			3. For mental disorders in 292, due to exposure (NOT addiction) two codes are required: one for the specified psychosis (292.0-292.9) and 995.2
			4. If the adverse effect indicates an impairment, code the impairment only. No additional code for adverse effect (995.2) or nature of adverse effect is required.
			5. For adverse effects of "shots", vaccinations, and other immunization procedures, see 999, this Appendix.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
			COMPLICATIONS OF SURGICAL AND MEDICAL CARE NOT ELSEWHERE CLASSIFIED (996-999)
			Complications due to surgery that are classified elsewhere by ICD will not be coded to 996-998.
			As per ICD, adverse effects, or "complications," due to anesthetics or other drugs, used in surgery or for any purpose, are to be coded as for Adverse Effects of Medicinal Agents in 995.2, not to 996-999. Also, adverse effects of radiation, for any purpose, are to be coded as shown in 990--not to 996-999. For complications of vaccination or preventive "shots," see 999.5, this Appendix.
			1. For HIS, 996-999 will be used for present specified difficulties, included in 996-999, due to or following surgery.
			2. For present conditions which qualify as a complication of surgery, the condition itself will not be coded--code only the complication, unless the condition is an impairment. If the condition or nature of complication is an impairment, code the impairment also, using the disease or injury for which surgery was required as etiology.
			If the disease or current injury (-3 mos) for which surgery was required is given, code this also; code the complication; and any impairments indicated (see Section V, Impairments.) For an injury 3 mos+, only the complication and any impairment indicated will be coded.
			3. If a mental disorder in 293.9 or 310.0 is due to brain surgery, code the mental disorder and 997.0.
			4. If only the name of an operation is given on the Condition Page, with no present complications stated, see Section III, Item I, 2a, for coding instructions.
			5. If the name of an operation is given on the Condition Page, with no present complication stated, but with mention of the disease or injury which required the surgery; code the disease or injury only. See Section III, Item I.
			6. Multiple complications codable to different 4-digit codes in 996-999 will be coded separately.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued (996-999)--continued
996.8			COMPLICATIONS OF TRANSPLANTED ORGAN For HIS, no additional code for absence of part is required.
996.9			COMPLICATIONS OF RE-ATTACHED EXTREMITY For HIS, no additional code for absence of part is required, unless the extremity cannot remain attached.
			COMPLICATIONS AFFECTING SPECIFIED BODY SYSTEMS, NOT ELSEWHERE CLASSIFIED (997) Includes symptoms and other conditions given as a complication, when the symptom or condition affects a specified body system. 1. See 997.0-997.5 in Vol. 1 and code to appropriate body system indicated in the complication. 2. If a specific body system is indicated in the complication and it is not included in 997.0-997.5, code 997.9. Excludes: Menopausal symptoms following hysterectomy, code 627.4 Sterility following tubal ligation (female), code 628.2 See also Vol. 1 for Inclusions and Exclusions.
997.6			LATE AMPUTATION STUMP COMPLICATION For HIS, code the absence of part in X20-X29 and 997.6 also. See also Section V, Impairments.
			OTHER COMPLICATIONS OF PROCEDURES, NOT ELSEWHERE CLASSIFIED (998)
998.8			OTHER SPECIFIED COMPLICATIONS OF PROCEDURES, NOT ELSEWHERE CLASSIFIED Includes specified symptoms and conditions given as a complication when a specific body system is not indicated.
998.9			UNSPECIFIED COMPLICATION OF PROCEDURE, NOT ELSEWHERE CLASSIFIED Includes only complications of surgery with nature of complication unspecified.

CON-TENT	NOT USED	NEW CODE	CATEGORY TITLE
			(800-999)--continued
			COMPLICATIONS OF MEDICAL CARE, NOT ELSEWHERE CLASSIFIED (999)
			(See Vol. 2, under Complications, for terms indexed by ICD to 999.0-999.9).
			For HIS, complications of medical care as in 999.0-999.9 will include those present in the past 3 months, although in some instances, the medical care may have been given prior to that time.
999.0			GENERALIZED VACCINIA For HIS, use this category only for current (-3 mos) complications of vaccination for smallpox, consisting of widespread skin eruptions or other evidence of "generalized vaccinia."
999.4			ANAPHYLACTIC SHOCK For HIS, use this category only when the reaction or complication is a term codable by ICD to 999.4.
999.5			OTHER SERUM REACTION Includes current complications NEC consisting of reactions such as allergy, fever, headache, rash, soreness, due to vaccination or immunization, or "shots," for smallpox, flu, tetanus or any condition. Excludes complications of the specified types in 999.0-999.4 and complications stated to be allergic with skin conditions involved, see Dermatitis. See also Vol. 2 under Complications, vaccination.
999.8			OTHER TRANSFUSION REACTION See Vol. 2--Complications, transfusion for types codable to 999.8 or elsewhere. For any current transfusion complication, code also any known disease or injury which required the transfusion.
999.9			OTHER AND UNSPECIFIED COMPLICATIONS OF MEDICAL CARE, NEC Includes complications of medical care NEC. See also notes above 999.0, in Vol. 1 for exclusions. Excludes also all complications of surgical care, as in 996-998.

SHORT INDEX

OF

DISEASES, IMPAIRMENTS, AND INJURIES

(Revised January 2, 1979)

Note: Code numbers with "X" in the first digit are not in ICD; these indicate Special Impairments and are fully classified in Appendix I and described further in a separate section of the Medical Coding Manual.

U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
National Center for Health Statistics
Division of Health Interview Statistics

JUN 7 1982

ACUTE/CHRONIC CODE:

1= Chronic
2= Acute

1-DIGIT ETIOLOGY CODES FOR IMPAIRMENTS (X00-X99)

.0 Accident or injury except at birth
.1 Cerebrovascular disease (stroke) (with arteriosclerosis) (with hypertension)
.2 Neoplasm
.3 Diabetes (with cataract or glaucoma)
.4 Poliomyelitis
.5 Cataract with glaucoma
.6 Cataract without glaucoma
.7 Glaucoma without cataract
.8 Other eye diseases
.9 Congenital origin NEC or birth injury
.X Other conditions not in .0 to .9 (non-traumatic) (non-congenital) (hereditary) (old age) ("age" NOS)
.Y Unknown or unspecified origin

-A-

Abnormal
-basal metabolic rate 794.7
-electrocardiogram 794.3
-glucose tolerance test 790.2
--in pregnancy, childbirth, or puerperium 648.8
-loss of weight 783.2
-Pap smear 795.0
-periods (menstrual) 626.9
-sites or types not listed above: See Vol. 2

Abrasion: See Injury, superficial

Abscess, abscessed 682.9
-ear, acute 382.0
-gum 523.3
-lung 513.0
-specified sites, other: See Vol. 2
-tooth, teeth (root) 522.5

Absence
-breast X32
--nipple only (congenital) X32.9
-ear (flap) X90
-extremity: (complete or partial)
--lower only:
---feet, both X27
---foot, one X29
---leg, one X28
---legs, both X26
---toes on both feet X27
----tip(s) only X35
---toe(s) on one foot X29
----tip(s) only X35
--upper only:
---arm, one X23
---arms, both X20
---finger(s), one hand X25
----tip(s) only X35
----both hands X22
-----tip(s) only X35
---hand, one X24
---hands, both X21
---thumb(s): See finger(s)
-eye: See Blindness
-jaw X92
-joint of:
--extremity X34
--trunk X33

Absence--- continued
-kidney X31
-larynx (voice box) X11
-lip X90
-lung X30
-nail(s) 757.5
--acquired 703.8
-nose X90
-sites NEC--not impairments: See Vol. 2
-teeth or tooth
--(-3 mos) NEC 525.1
---due to injury 873
--(3 mos+), any cause X92
--congenital X92.9
-tongue (congenital) X11.9

Ache(s), aching: See Pain

Acid stomach 536.8
-due to nerves (psychogenic) 306.4

Acne NEC (See also Vol. 2) 706.1

Acquired immunity deficiency syndrome 279.1

Acquired immunodeficiency syndrome 279.1

Action
-heart
--fast: See Tachycardia
--irregular 427.9
---due to nerves (psychogenic) 306.2
--slow 427.8

Addiction
-alcohol 303
-drug (See also Dependence, Vol. 2) 304.9

Adhesions (abdominal) 568.0
-postoperative 997.4

AIDS 279.1

Alcohol, alcoholic
-addiction 303
-cirrhosis (liver) 571.2
-hangover 305.0
-poisoning, accidental (acute) NEC 989.9
-psychosis NEC (See also Vol. 2) 291.9

Alcoholism (See also Vol. 2) 303

Allergy, allergic, NEC 995.3
-present effects not specified
--due to
---airborne substance NEC 477.9
----with asthma 493.0
---dust or feathers 477.8
----with asthma 493.0
---pollen (grass) (ragweed) 477.0
----with asthma 493.0
---pollen, dust, feathers (multiple substance in 477.0-477.9) 477.7
----with asthma 493.0
--due to
---drugs NEC 995.2
----skin effect specified: See Allergy, skin
---food (ingested) 693.1
----skin effect specified: See Allergy, skin
-present effects specified
--respiratory system involved:
---asthma 493.9
----with cause stated 493.0
---breathing difficulty (lower respiratory) 493.9
----with cause stated 493.0
----with hay fever 493.0
----upper respiratory only 477.9
-----with hay fever 477.9
------due to pollen (grass) (ragweed) 477.0
------due to substance other than pollen 477.8
------due to multiple substance in 477.0-477.8: code 477.7
---chest 493.9
----with cause stated 493.0
----with hay fever 493.0

Allergy, allergic---continued
-present effects specified--continued
--respiratory system involved---continued
---congestion (lung) NOS 493.9
----with cause stated 493.0
----with hay fever 493.0
----upper respiratory (nasal) (nose) 477.9
-----with hay fever 477.9
------due to pollen (grass) (ragweed) 477.0
------due to substance other than pollen 477.8
------due to multiple substance in 477.0-477.8: code 477.7
---cough, coughing 493.9
----with cause stated 493.0
----with hay fever 493.0
---ear (and nose) 477.9
----with hay fever 477.9
-----due to pollen (grass) (ragweed) 477.0
-----due to substance other than pollen 477.8
-----due to multiple substance in 477.0-477.8: code 477.7
-----and lower respiratory involvement 493.0
----and lower respiratory involvement 493.9
---hay fever (See also Hay fever) 477.9
----with
-----asthma 493.0
-----lower respiratory involvement 493.0
-----conjunctivitis 477.9
------with asthma 493.0
-----eye watering 477.9
------with asthma 493.0
-----upper respiratory allergies 477.9
------due to pollen (grass) (ragweed) 477.0
------due to substance other than pollen 477.8
------due to multiple substance in 477.0-477.8: code 477.7

Allergy, allergic--continued
-present effects specified--
continued
--respiratory system involved---
continued
---multiple respiratory allergies
----upper respiratory 477.9
-----due to pollen (grass)
(ragweed) 477.0
-----due to substance other than
pollen 477.8
-----due to multiple substance in
477.0-477.8: code 477.7
----lower respiratory 493.9
-----with upper respiratory
allergies 493.9
------with cause stated 493.0
----with skin allergies: code
respiratory and skin
----with skin allergies and other
allergies: code
respiratory, skin and other
---nasal: See Allergy, hay fever
---sinus, sinusitis: See Allergy,
hay fever
---sneezing: See Allergy, hay
fever
---sniffles: See Allergy, hay
fever
---wheezing: See Allergy, asthma
--Skin involvement (dermatitis)
(eczema) (with rash or itching)
NOS 692.9
---due to
----contactants: See Dermatitis,
due to, by substance
contacted
----drugs
-----internal use (ingested)
(injected, shots) 693.0
-----external use (applied to
skin) 692.3
---eyelid 373.3
---food (ingested) 693.1
----in contact with skin 692.5
---hives: (See Urticaria) 708.0
---lips 692.9
---multiple substances in
692.0-692.8: code 692.9
---multiple substance in
693.0-693.8: code 693.9
---multiple substance in
692.0-692.9 AND 693.0-
693.8: code 693.2

Allergy, allergic--continued
-Other
--arthritis 716.2
--bee sting 989.5
--conjunctivitis, acute 372.0
---with hay fever 477.9
----due to pollen (grass)
(ragweed) 477.0
----due to substance other than
pollen 477.8
----due to multiple substance in
477.0-477.8: code 477.7
----and asthma 493.0
--due to
---drug NEC 995.2
---shots (preventive) (serum)
(vaccine) NEC 999.5
----with shock 999.4
----of specified drugs 995.2
-----with shock 995.0
--eye watering 372.0
---with hay fever 477.9
----due to pollen (grass)
(ragweed) 477.0
----due to substance other than
pollen 477.8
----due to multiple substance in
477.0-477.8: code 477.7
----and asthma 493.0
--gastritis 535.4
--gastrointestinal 558
--headache 346.2
--migraine 346.2

Amnesia NOS 780.9

Amputation: See Absence, by site

Anemia 285.9
-iron deficiency 280
--of pregnancy 648.2
-of pregnancy 648.2
-pernicious 281.0
--of pregnancy 648.2
-puerperal, following child-
birth 648.2
-sickle cell 282.6

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Angina (pectoris) 413

Ankylosis: See Stiffness

Anosmia (loss of sense of smell) X12
-(-3 mos) 781.1

Apoplexy: See Stroke

Appendicitis, onset unknown 541
-acute (-3 mos) 540.9
--with peritonitis or ruptured 540.0
-chronic (3 mos+) 542

Appetite
-loss, poor 783.0
--due to nerves, NEC 307.5
-refusal to eat 307.1

Arches
-fallen or weak (with pain) X77

Arteriosclerosis, "arterio-sclerotic" (artery) (general) NEC 440.9
-with
--mental disorder NEC 300.9 and code the arteriosclerosis also
--psychosis 290.4 and code the arteriosclerosis also
-brain 437.0
-extremities 440.2
-eyes (retina) 440.8
-heart 414.0

Arthritis (acute) (chronic) (See also Vol. 2) 716.9
-with
--specified deformity: code the arthritis and also X70-X79, by site
-"allergic" (any site) 716.2
-back NOS 721.9
-deformans (crippling) 715.9

Arthritis---continued
-degenerative (crippling) 715.9
--spine 721.9
-gout, or gouty 274.0 †
-menopausal 716.3
-neck 721.0
-osteo: See Osteoarthritis
-psoriatic 696.0 †
-rheumatoid 714.0
--spine 720.0
-spine NOS 721.9
-"traumatic" 716.1
--spine 721.7

Artificial
-arm or leg: See Absence, by site
-eye, one or both: See Manual, Visual Impairments
-joint
--extremity X34
--trunk X33
-opening (surgical) X94
--from bowel (any part) X94
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--male 608.9
-gland (lymph) 289.9
-hair (follicles) NEC 704.9
-heart (organic) (See also Vol. 2) 429.9
--with
---curvature of spine, code X70 and the heart disease
----causing heart disease 416.1 and code X70 also
---rheumatic fever
----(chronic) 398.9
--"arteriosclerotic" 414.0

Disease, diseased--continued
-heart---continued
--"asthmatic" 428.1
---"hypertensive" 402.9
--congenital 746.9
--congestive (See also Failure, heart, Vol. 2) 428.0
--coronary (See also Ischemia, heart, Vol. 2) 414.9
--due to nerves 306.2
--functional (with irregular heart action) NEC 427.9
---due to nerves 306.2
--"hypertensive" (See also Hypertension, heart, Vol. 2) 402.9
-ill-defined 799.8
-intestine 569.9
-kidney 593.9
--"hypertensive" 403.9
-liver 573.9
--chronic 571.9
---due to alcohol 571.3
-lung 518.8
-lymph (gland) (system) 289.9
-menopausal (See also Menopause) 627.2
-menstrual (See also Menstrual conditions) 626.9
-"mental" (See also Psychosis, Vol. 2) 298.9
-muscle 359.9
--eye (ball) 378.9
--limbs or back NEC: See Trouble, by site
-nails 703.9
-optic nerve 377.4
-prostate 602.9
--specified type NEC 602.8
-pulmonary 518.8
-renal, onset unknown 593.9
--onset known: See Nephritis
-respiratory NEC 519.9
-retina NEC 362.9
-scalp NEC 709.9
-skin NEC 709.9
--allergic (See also Allergy, skin) 692.9
-stomach NEC 537.9
--due to nerves 306.4
--sour 536.8
-sweat glands NEC 705.9
-tendon NEC 727.9

Disease, diseased--continued
-thyroid (gland) NEC 246.9
--with
---menopause: code both
---menstrual disorder: code both
--overactive (See also Vol. 2, Hyperthyroidism) 242.9
--underactive (See also Vol. 2, Hypothyroidism) 244.9
---congenital 243
-tonsil(s) (and adenoids) (chronic) 474.9
--(-3 mos) 463
-urinary tract 599.9
-uterus 621.9
-vein 459.9
-womb 621.9

Disfigurement (facial) (chin) (ears) (lips) (mouth) (nose) (forehead) X90

Disintegrative joint: See Degenerative joint

Disjointed: See Dislocation

Dislocation (articular)
-congenital
--hip X75.9
--other sites: code to X70.9-X79.9, by site
-current (-3 mos) due to injury, site not specified 839; specified site, See Dislocation, Vol. 2
--ankle 837
--disc (See also Disc conditions) 839
--elbow 832
--finger(s) 834
--hand 839
--hip 835
--jaw 830
--knee 836
--shoulder 831
--wrist 833

Dislocation--continued
-current (-3 mos) NOT due to injury 718.2
-habitual, old, recurrent (3 mos+)
--jaw X92
--limbs, back, trunk: code to Orth. Imp., by site
--nose X90

Disorder: See also Disease
-allergic (See also Allergy) 995.3
-back: See Disease, back
-digestive 536.9
--due to nerves 306.4
-emotional (See also Disorder, mental) 300.9
-limb (-3 mos) NEC 729.9
--(3 mos+): code to Orth. Imp.
-mental (nonpsychotic) NEC 300.9
--due to or associated with:
---menopause: code 627.2 only
---senility: code 290.9 only
---stroke: code 316.8 and the stroke
---other physical causes: See Vol. 1, page 212, category 316 and Appendix III
-nervous 799.2
-uterus: See Vol. 1, page 348

Displaced uterus 621.6

Disturbance: See also Disease
-coordination
--(-3 mos) 781.3
--(3 mos+): code as for Paralysis, partial
-emotional 307.9
-equilibrium (sense of balance) 780.4
-feeding: See Feeding Disturbance
-gait NEC
--(-3 mos) 781.2
--(3 mos+): code as for Paralysis, partial

Disturbance--continued
-hearing: See Hearing, impaired
-memory (See also Forgetfulness) 780.9
-mental (See also Disorder, mental) 300.9
--due to or associated with diseases classified elsewhere: See Vol. 1, page 212, category 316 and Appendix III, and code the disease also
-nervous 799.2
-sensation (cold, heat, localization)
--numbness, burning, touch
---(-3 mos) 782.0
---(3 mos+) X12
--smell, taste
---(-3 mos) 781.1
---(3 mos+) X12
-sleep 780.5
--due to nerves 307.4

Diverticulitis (See also Vol. 2) 562.1
-bladder 596.3
-colon 562.1
-duodenum 562.0
-gastric 537.1
-intestine (large) 562.1
--small 562.0

Dizziness (due to nerves) 780.4
-due to
--ear conditions: code to ear condition specified
--other specified conditions: code to specified condition only

Double (See also Vol. 2)
-jointed: code to Orth. Imp., by site
-vision
--(-3 mos) 368.2
--(3 mos+) 368.2 and X-code

Drinking (alcohol) (See also Vol. 2) 305.0

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Drip, postnasal: See Sinusitis

Drooping eyelid (congenital) 374.3

Drop (paralytic)
-finger(s), one hand X45
-foot, one X49
-toe(s), one foot X49
-wrist, one X43

Dropsy (See also Vol. 2) 782.3
-abdomen 789.5
-kidney or renal (See also Nephrosis, Vol. 2) 581.9
-lung (3 mos+) 514
--(-3 mos) 518.4

Drug
-addiction (See also Dependence, Vol. 2) 304.9
-adverse effect 995.2
-"overdose" 977.9

Drunkenness NOS 305.0

Dry skin (with itching) 698.9
-with other skin conditions in 680-709: omit 698.9
-due to
--nerves 306.3
---and allergy: omit nerves

Dust on lung (See also Pneumoconiosis, Vol. 2) 504

Dysentery (See also Vol. 2) 009.0
-with
--diarrhea 009.2
-viral 008.8

Dysfunction
-AV response 784.6
-sensory motor 781.9

-E-

Earache 388.7
-(-3 mos)
--with
---cold, acute 388.7

Ear wax 380.4

Eczema (acute) (allergic) (chronic) (occupational) (with itching) (See also Dermatitis) 692.9
-with
--asthma or other respiratory allergies: code the respiratory allergy and eczema also
--other allergies: See Allergy, respiratory, skin and other
-contact 692.9
-due to
--nerves NEC 306.3
---and allergy: ignore nerves
--specified contactant: See Dermatitis

Edema, edematous (See also Vol. 2) 782.3
-allergic: See Allergy
-extremities (with pain)
--(-3 mos) 782.3
--(3 mos+): code to Orth. Imp., by site
-joint (with pain)
--(-3 mos) 719.0
--(3 mos+): code to Orth. Imp., by site
-lung
--(-3 mos) 518.4
--(3 mos+) 514

Effect, adverse NEC (See also Vol. 2)
-chemicals 989.9
-cold (temperature) (weather) NEC (-3 mos) 991.9
-drugs 995.2
--"overdose" or "poisoning" 977.9

Effect, adverse NEC--continued
-gases, fumes, vapors 989.9
-radiation (diagnostic) (therapeutic) (X-ray) NEC 990
-radioactive substance NEC 990
-radium NEC 990
-X-rays NEC 990

Emotional
-disorder NEC (See also Disorder, mental) 300.9
-instability (excessive) 301.3
-problem 300.9
-upset (transient) 309.2

Emphysema (atrophic) (chronic) (lung) (pulmonary) (senile) (See also Vol. 2) 492
-with
--bronchitis: code 492 and the bronchitis by onset

Endocarditis (chronic) (sclerotic) (senile) (valvular) (valvular heart disease) (leaking heart) 424.9
-with
--rheumatic fever 397.9
-"arteriosclerotic" 424.9
-other specified types: See Vol. 2

Enlargement, enlarged: See also Hypertrophy, Vol. 2)
-adenoids (and tonsils) 474.1
-glands (lymph) 785.6
-heart, cardiac (See also Hypertrophy, cardiac, Vol. 2) 429.3
-liver 789.1
--"acute" 573.8
-lymph gland or node 785.6
-prostate 600
-spleen 789.2
-thyroid (gland) (See also Goiter) 240.9
-tonsils (and adenoids) 474.1

Enteritis (assume non-infectious) NOS (See also Vol. 2) 558
-due to nerves: ignore nerves
-viral 008.8

Enterostomy X94
-with
--present difficulties or malfunction X94 and 569.6

Enuresis (child) (adult) 788.3
-due to nerves (psychogenic) 307.6

Epilepsy NEC (See also Vol. 2) 345.9
any type:
-due to injury (-3 mos):
--specified: code to Injury, specified type
--unspecified 854
-grand mal 345.1
-jacksonian (focal) 345.5
-mixed types 345.9
-petit mal 345.0
-traumatic (3 mos+): code to Epilepsy only, by type, in 345.0-345.9

Excess
-drinking (alcohol) NEC 305.0
-eating 783.6
-menstruation 626.2
--due to menopause 627.0
-potassium 276.7
-red corpuscles 289.6
-white corpuscles 288.8

Excitation, excitement
-nature or state NEC 309.2
-"reactive" 298.1

Exhaustion (physical NEC) 780.7
-mental NEC 300.5
-nervous NEC 300.5
-old age, 65+ 797

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Eyestrain 368.1

-F-

Factor, psychic associated with diseases classified elsewhere 316.-

Failure, failed (See also Vol. 2)
-heart (any onset) NEC 428.9
--"arteriosclerotic" 440.9
--congestive 428.0
--"hypertensive" 402.9
-kidney or renal 586
--with
---hypertension (See also Hypertension, kidney) 403.9
---hypertensive heart disease (conditions in 402) 404.9
--acute 584.9
--chronic 585
---hypertensive (See also Hypertension, kidney) 403.9
--hypertensive (See also Hypertension, kidney) 403.9
-respiration, respiratory 799.1
-senile (general) 797
-transplant 996.8
--organ 996.8
--skin 996.5
-urinary 586

Fainting (fit) (spells) 780.2

Fallen
-arches (with pain) X77
-bladder (acquired)
--congenital (female) (male) 753.8
--female 618.0
--male 596.8
-ovary 620.4
-specified sites: See Vol. 2, Prolapse

Fallen--continued
-stomach 537.8
-uterus 618.1
-womb 618.1

False
-labor (pains) (before delivery) 644.0

Farsighted 367.0

Fast heart beat: See Tachycardia

Fat, fatty
-cyst: See Cyst, skin (sebaceous)
-excessive (general) (See also Overweight) 278.0
-heart 429.1
-tumor 214

Fatigue 780.7
-due to nerves (psychogenic) 300.5
-during pregnancy 646.8
-persons 65+ 797
-senile 797

Fear
-reaction 300.2

Feeble-minded X19

Feeding
-dietary deficiency 269.9
-disturbance NEC 783.3
--due to nerves (psychogenic) 307.5
--newborn (less than 2 mos of age) 779.3
-faulty 783.3
-improper 783.3
-loss of appetite NEC 783.0
--due to nerves (psychogenic) 307.5
-overfeeding 783.6

Feeding--continued
-problem NEC 783.3
--due to nerves (psychogenic) 307.5
--newborn (less than 2 mos of age) 779.3
-refusal to eat 307.1

Fever (See also Vol. 2) 780.6
-with chills 780.6
-blister 054.9
--with cold 054.9
-rheumatic (acute) (chronic) 390
--with
---cardiac hypertrophy 398.9
---endocarditis 397.9
---heart disease NEC (conditions classified in 429.3, 429.8 or 429.9) 398.9
---heart failure (congestive) (conditions in 428.0, 428.9) 398.9
---left ventricular failure (conditions in 428.1) 398.9
---myocarditis (conditions in 429.0) 398.0
--stated to be "old", "cured", "history", "inactive" 399
-tick-bite 066.1

Fibroid (tumor) (cyst) (See also Vol. 2)
-uterus 218

Fibrosis
-bladder 596.8
-cystic (of pancreas) 277.0
-vagina 623.8

Fit 780.3
-epileptic (See also Epilepsy) 345.9
-fainting 780.2

Flail
-joint (any onset): See Orth. Imp., by site

Flatfoot X77

Floater
-eye 379.2

"Flu" (See also Influenza)
-"gastric" NEC 008.8

Fluid (See also Vol. 2)
-abdomen 789.5
-chest NEC 511.9
-ear 388.9
-extremities: See Edema
-heart NEC 428.0
-joint
--(-3 mos) 719.0
--(3 mos+): See Orth. Imp., by site
-loss 276.5
-lung (See Edema, lung) 514
--(-3 mos) 518.4
--(3 mos+) 514
-retention 276.6

Flutter
-heart 427.4
--due to nerves (psychogenic) 306.2

Food
-poisoning (See also Vol. 2) 005.9
--noxious or naturally toxic 988.9
---berries 988.2
---fish 988.0
---mushroom 988.1
---plants NEC 988.2

Foreign body (See also Vol. 2)
-current entering through orifice
--bronchus (main) 934
--ear (external) 931
--eye (external) NEC 930
--mouth 935
--nose (passage) 932
--throat 933
--tonsil 933
-in open wound: See Wound, open
-old or residual
--in
---bone 733.9
---orifice, no specified residual 908.5
---soft tissue 729.6
-operation wound 998.4
-swallowed NEC 938

Forgetfulness 780.9
-due to
--arteriosclerosis 440.9
--old age, (65+) 797
--stroke (3 mos+) 437.9

Fracture (See also Vol. 2) 829
-current, (-3 mos)
--ankle NEC 824
--arm NEC 818
---lower (forearm) 813
---upper 812
--arms, both 819
--back NEC 805
--clavicle or collar bone 810
--ear drum (due to injury) 872
---not due to injury 384.2
---old (3 mos+) any cause 384.2
--elbow 812
--face bones 802
--finger(s) 816
--feet, both 828
--foot, except toe(s) alone 825
--hand (one) 815
--heel 825
--hip NEC 820
--jaw (mandible) (maxilla) 802
--knee (cap) 822
--leg NEC 827
---lower 823
---upper 821

Fracture--continued
-current (-3 mos)--continued
--legs, both 828
--multiple sites: See Vol. 2
--neck 805
--nose 802
--pelvis (with or without visceral injury) 808
--rib(s) 807
--shoulder 812
--skull NEC 803
--spine or vertebrae NEC 805
--toe(s) (one foot) 826
--wrist 814

Frostbite
-current (-3 mos) 991.3
--face 991.0
--foot 991.2
--hand 991.1
--specified site NEC 991.3
-(3 mos+) no present effects specified 909.4
--present effect specified: code present effect only

Fungus (See also Mycosis)
-infection NEC 117.9
--ear (outer) 111.8
--finger nails 110.1
--foot 110.4
--hand 110.2
--scalp 110.0
--skin NEC 111.9
---foot 110.4
---hand 110.2
--toenails 110.1
--vagina 112.1 †

-G-

Gallbladder
-disease or trouble NOS 575.9
--with gallstones 574.2
-infection: See Infection, gallbladder

Gallstones 574.2

Gangrene, gangrenous (infected) (skin) (ulcer) (ulcerative) (See also Vol. 2) 785.4
-"arteriosclerotic" (general) (senile) 440.2 †
-bladder 595.8
-"diabetic" 250.6 †
-extremity (lower) (upper) 785.4
-gallbladder (See also Cholecystitis, acute) 575.0
-intestine 557.0
-lung 513.0
-mesentery 557.0
-stomach 537.8

Gas 787.3
-around heart 787.3
-on stomach 787.3
-pains 787.3
-poisoning NEC 989.9

Gastralgia 536.8
-due to nerves (psychogenic) 307.8

Gastritis (See also Vol. 2) 535.5
-acute 535.0
-alcoholic 535.3
-allergic 535.4
-chronic 535.1
-due to
--diet deficiency 269.9 †
--nerves 306.4

Gastroenteritis (acute) (chronic) (non-infectious) 558
-allergic 558
-dietetic 558
-due to nerves: ignore nerves
-influenzal 487.8
-viral NEC 008.8

Giddiness 780.4
-due to nerves (psychogenic) 306.9

Gigantism 253.0

Glaucoma (acquired NEC) (congenital) (See also Vol. 2)
-any onset 365.1

Goiter (See also Vol. 2) 240.9

Gout, gouty (See also Vol. 2) 274.9

Gravel (urinary) (See also Calculus) 592.9

Grippe: See Influenza

Growth (neoplastic) (new) (See also Neoplasm, unspecified nature, Vol. 2) 239.9
-benign: See Neoplasm, benign
-fibroid (uterus) NEC 218
-malignant: See Neoplasm, malignant
-precancerous, skin NEC 709.9
-rapid (physical) (growing too fast) 253.0

-H-

Hallux (valgus or varus) X76

Hammertoe X76

Hangover (alcohol) 305.0

Hard of hearing: See Hearing, impaired

Hardening
-of arteries: See Arteriosclerosis

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Harelip (congenital) X91.9

Hay fever (allergic) 477.9
-with
--asthma 493.0
--other allergy: code 477.9 and the other allergy
--other respiratory allergies (lower) 493.0
---upper only 477.9
----due to
-----pollen (grass) (ragweed) 477.0
-----substance other than pollen (dust) (feathers) 477.8
-----multiple substance in 477.0-477.8: code 477.7
----and lower 493.0
--skin allergy: code 477.9 and the skin allergy: See also Allergy, skin
-due to
--pollen (grass) (ragweed) 477.0
--substance other than pollen (dust) (feathers) 477.8
--multiple substance in 477.0-477.8: code 477.7

Headache 784.0
-allergic 346.2
-eyestrain 368.1
-migraine 346.9
-nervous, or due to nerves 784.0
-sick 346.1
-sinus (See also Sinusitis) 473.9
-tension 784.0

Hearing, impaired
-(-3 mos)
--cause given: code cause only
--cause unknown: code 388.4
-(3 mos+)
--both ears X06
--one ear only X07
--unknown whether one or both ears X09
-indicating "deafness": See Deafness

Heart attack 414.8

Heartburn 787.1
-due to nerves (psychogenic) 306.4

Heat (effects), current (See also Vol. 2) 992.9
-allergy (skin) 692.8
-cramps 992.2
-excessive NEC 992.9
-prickly 705.1
-prostration NEC 992.5
-stroke 992.0
-sunburn 692.7

Hematoma: See Vol. 2

Hemiparesis, 3 mos+ X51

Hemiplegia, hemiplegic, 3 mos+ X41

Hemophilia 286.0

Hemorrhage NEC (See also Vol. 2) 459.0
-artery 459.0
--brain or cerebral: See Vol. 2
--coronary 414.9
--neck: code as for Hemorrhage, brain, Vol. 2
-eye 379.8
-female genital organs or tract NEC 626.8
--specific organs: See Vol. 2
-heart 429.8
-nose 784.7
-retina 362.8
-stomach 578.9

Hemorrhoids (piles) (See also Vol. 2) 455.6
-bleeding 455.8

Hepatitis, NEC, any onset (See also Vol. 2) 573.3
-"acute" 570
--"infective" 070.1 †
-alcoholic 571.1
-"chronic" 571.4
-epidemic 070.1 †
-post-immunization 070.3 †
-post-transfusion 070.3 †
-virus 070.9 †

Hernia, hernial (acquired) (traumatic-old)
-site unspecified 553.9
--with obstruction 552.9
---gangrenous 551.9
-due to current injury, heavy lifting or strain (any site) 848
-groin or inguinal 550.9
--with obstruction 550.1
--gangrenous (with obstruction) 550.0
-hiatal (esophageal) 553.3
--with obstruction 552.3
--congenital 750.6
--gangrenous (with obstruction) 551.3
-navel (umbilicus) 553.1
-other sites: See Vol. 2

Herpes, herpetic (See also Vol. 2) 054.9
-eye (zoster) 053.2 †
--simplex 054.4 †
-eyelid (zoster) 053.2 †
--simplex 054.4 †
-lip 054.9
-zoster 053.9

Hiccough 786.8
-due to nerves (psychogenic) 306.1

High
-blood pressure (See also Hypertension) 401.9
--specified as malignant 401.0
--specified as benign 401.1
-blood sugar 790.2
-cholesterol 272.0

Hives (bold) (with itching or swelling) (See also Urticaria) 708.9
-chronic 708.8
-due to
--allergy or allergic 708.0
--cold or heat 708.2
--food 708.0
--nerves NEC 306.3 and allergy: ignore nerves
--plants 708.8
-giant 995.1

Hoarseness
-(-3 mos) 784.4
-(3 mos+) X11

Hodgkins disease NOS 201.9

Hole in heart 746.9

Hormone deficiency 259.9

HTLV-III/LAV 279.1

HTLV-3 (virus) 279.1

Human T-cell lymphotrophic virus type III/lymph-adenopathy associated virus 279.1

Humpback, hunchback (acquired) X70
-congenital X70.9

Hydrocephalus X93
-congenital X93.9

Hyperacidity (gastric) 536.8
-due to nerves (psychogenic) 306.4

Hyperactive, hyperactivity
-child 314.0

Hyperglycemia 790.6

Hypertension, hypertensive (arterial) (disease) (essential) (See also Vol. 2) 401.9

NOTE: The following 4th digit subdivisions are for use with categories 401-405:

.0 specified as malignant
.1 specified as benign
.9 not specified as malignant or benign

-with
--heart involvement (conditions in 428, 429.0-429.3, 429.8, 429.9 DUE TO hypertension) (See also Hypertension, heart) 402.-
--renal sclerosis or failure (conditions in 585, 586, 587) (See also Hypertension, kidney) 403.-
-cardiorenal (disease) 404.-
-cardiovascular
--disease (arteriosclerotic) 402.-
--renal (disease) (sclerosis) 404.-
-complicating pregnancy, childbirth, or the puerperium 642.9
-heart (disease) (conditions in 428, 429.0-429.3, 429.8, 429.9 DUE TO hypertension) 402.-

Hypertension, hypertensive--continued
-heart--continued
--with
---hypertensive kidney disease (conditions in 403) 404.-
---renal disease 404.-
-kidney 403.-
--with
---heart involvement (conditions in 428, 429.0-429.3, 429.8, 429.9 DUE TO hypertension) 404.-
---hypertensive heart disease (conditions in 402.-) 404.-
-renal (See also Hypertension, kidney) 403.-

Hypertrophy, hypertrophic (See also Vol. 2)
-adenoids (and tonsils) (infected) 474.1
-arthritis (chronic) 715.9
--spine 721.9
-breast 611.1
-cardiac (chronic) 429.3
--with
---rheumatic fever 398.9
--hypertensive (See also Hypertension, heart) 402.9
-colon 569.8
--congenital 751.3
-kidney 593.1
--congenital 753.3
-liver 789.1
--"acute" 573.8
--congenital 751.6
-lymph gland 785.6
-ovary 620.8
-prostate 600
--congenital 752.8
-thyroid (gland) (See also Goiter) 240.9
-tonsils (and adenoids) 474.1
-uterus 621.2
-vagina 623.8

Hypoglycemia NOS 251.2

Hypotension (See also Vol. 2) 458.9

-I-

Impaired
-hearing: See Hearing, impaired
-vision: See Manual, Visual Impairments

Impediment
-speech: See Speech defect

Impetigo (See also Vol. 2) 684

Improper food or diet NEC 269.9

Incompetency, mental NEC 298.9

Incontinence (urine) 788.3
-feces 787.6
--due to nerves 307.7
-urine 788.3
--due to nerves 307.6

Incoordination, muscular
-(-3 mos) 781.3
-(3 mos+): code to Paralysis, partial, by site

Indigestion (bilious) (functional) 536.8
-acid 536.8
-nervous or due to nerves 306.4

Infarction, myocardial (any onset) 414.8

Infection, infected 136.9
-bladder (See also Cystitis) 595.9
--(-3 mos) 595.0
--(3 mos+) 595.2
-chest (acute) (chronic) 519.8

Infection, infected--continued
-ear (acute) (chronic) (middle) (See also Otitis Media, Vol. 2) 382.9
--fungus (outer), any onset 111.8
--inner, any onset 386.3
--outer, any onset 380.1
-eye NEC 360.0
-eyelid NEC 373.9
-finger (skin) 686.9
--nail (with lymphangitis) 681.0
-foot (skin) 686.9
--fungus 110.4
-fungus (See Fungus) NEC 117.9
--vagina 112.1 †
-gallbladder (acute) 575.0
--with
---stones in
----bile duct 574.3
----gallbladder 574.0
--chronic 575.1
---with
----stones in
-----bile duct 574.4
-----gallbladder 574.1
-gland (lymph) (-3 mos) (in groin) (under arm) (neck) NEC 683
--(3 mos+) 289.1
--mesenteric, any onset 289.2
--onset, unknown 289.3
-gum (See also Gingivitis, Vol. 2)
--(-3 mos) 523.0
--(3 mos+) 523.1
-intestine (with diarrhea) 009.0
--influenzal 487.8
--viral 008.8
-kidney 590.9
--and bladder 590.1
--with kidney stone: code 592.0 only
-leg (skin) NEC 686.9
-liver: See Hepatitis
-lung 518.8
--fungus NEC 117.9
-nail (chronic) (foot) (toe) (with lymphangitis) 681.9
--finger 681.0
--ingrowing 703.0
-nerves: See Neuritis
-prostate (See also Prostatitis, Vol. 2) (acute) (chronic) 601.1

Infection, infected--continued
-respiratory NEC 519.8
--upper (acute) (infectious) (viral) NEC 465.9
---multiple sites 465.8
---(3 mos+) 472.2
-skin NEC 686.9
-stomach 535.5
--viral 008.8
-throat (any onset) 478.2
--viral 462
-toe (skin) 686.9
--nail 681.9
---ingrowing 703.0
-tonsil (and adenoid) (chronic) 474.0
--(-3 mos) acute 463
-tooth, teeth 522.4
-urinary (tract) (See also Vol. 2) 599.0
-uterus 615.9
--(-3 mos) 615.0
--(3 mos+) 615.1
-virus NEC, NOS 079.9
-yeast (See also Candidiasis, Vol. 2) 112.9
--vagina 112.1 †

Inflammation, inflammed
-liver (See also Hepatitis) 573.3
--chronic 571.4
-lymph gland (onset unknown) (See also Lymphadenitis, Vol. 2) 289.3
--(-3 mos) 683
--(3 mos+) 289.1

Influenza (Asian) (viral) 487.1
-with
--bronchitis: See Bronchitis
--cold (and diarrhea) 487.1
--diarrhea 487.8
---and respiratory symptoms (upper) 487.1
--digestive symptoms only 487.8
--intestinal symptoms only 487.8
--nervous symptoms but no digestive or respiratory symptoms 487.8
--pneumonia (any form) 487.0
--sore throat (and digestive symptoms) 487.1

Ingrowing, ingrown
-hair 704.8
-nail (finger) (toe) (with infection) 703.0

Injury (current) 959
-abdomen, abdominal (viscera) 868
--muscle or wall 959
-ankle 959
-arm (and shoulder) 959
-back NEC 959
-blood vessel NEC 904
-brain NEC 854
-breast 959
-buttock 959
-cheek 959
-chest: See also Injury, internal, chest
--wall 959
-ear 959
-elbow (and forearm) (and wrist) 959
-extremity (upper) (lower) 959
-eye (lid) (muscle) (globe) 921
--superficial 918
-eyebrow 959
-face (and neck) 959
-feet 959
-finger(s) (nail) 959
-foot (and knee) (and leg) (and ankle) 959
-forehead 959
-groin 959
-hand(s) (and fingers) 959
-head NEC 854
-heart 861
-heel 959
-internal 869
--chest 862
--gastrointestinal tract NEC 863
--heart (with open wound into thorax) 861
--kidney 866
--liver 864
--lung (with open wound into thorax) 861
--pelvis 867
---with fracture, pelvis: See Fracture, pelvis
--stomach 863

Injury---continued
-intervertebral disc
--(-3 mos) 839
--(3 mos+): code 722.0-722.9, by site
-joint NEC 959
--(3 mos+) with no residual specified 908.9
-kidney 866
-knee 959
-larynx 959
-leg 959
-liver 864
-lung 861
-mouth 959
-nail (finger) (toe) 959
-neck NEC (and face) 959
-nerve (with open wound) (current) (See Vol. 2) 957
--acoustic 951
--arm 955
--finger 955
--following bone injury: code bone injury only
--foot, feet 956
--forearm 955
--leg 956
--optic 950
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---thigh 956
--spinal 953
-nose 959
-scalp NEC 959
--superficial 910
-skull 803
-spinal cord (See also Vol. 2) 952
-spine NEC 959
-superficial (with infection) (See also Vol. 2) 919
--ankle (and hip) (and thigh) (and leg) (and knee) 916
--arm 913
---upper (and shoulder) 912
--back 911
--chest wall (and other parts of trunk) 911
--chin (and other part(s) of face, neck or scalp, except eye) 910
--eye, eyelid 918
--face (and neck or scalp) (any parts except eye) 910

Injury---continued
-superficial---continued
--finger(s) (nail) 915
--foot, feet (and toes) 917
--hand(s) (except fingers alone) 914
--head 910
--hip 916
--knee 916
--leg, except foot 916
--multiple sites (not classifiable to same 3-digit category) 919
--scalp 910
--shoulder (and upper arm) 912
--toe(s) (nail) 917
--tooth, teeth 521.2
--trunk, any part 911
-temple 959
-thigh (and hip) 959
-toe (nail) 959
-tooth, teeth 873
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Insomnia 780.5
-due to nerves 307.4

Instability
-emotional (excessive) 301.3
-joint
--(-3 mos) 718.8
---lumbosacral 724.6
---sacroiliac 724.6
--(3 mos+) (post traumatic): code to Orth. Imp., by site
-nervous 301.8
-personality (emotional) 301.5

Inverted T waves 794.3

Irritability
-bowel or colon 564.1
--due to nerves 306.4

Irritation
-nervous NEC 799.2
-skin NEC 686.9
--allergic: See Allergy, skin

Itching (with dry skin) 698.9
-with
--other skin conditions in 680-709: omit 698.9
-any site due to:
--allergy: See Allergy, skin
--nerves 306.3
---and allergy: ignore nerves
-anus (rectum) 698.0
-ear(s) 698.9
-eyes (allergic) 372.0
--with hay fever 477.9
-genital organs 698.1
-other sites: See Vol. 2
-washerwoman's 692.4

-J-

"Jarred," "jarring"
-external site: See Injury, Vol. 2
-internal site: See Concussion, Vol. 2

Jaundice (yellow) (See also Vol. 2) 782.4
-newborn NEC 774.6
-post immunization 070.3 †
-post transfusion 070.3 †

Jerks, jerking 333.2

Jitters 799.2

Joint mice
-(-3 mos) 718.1
--knee 717.6
-(3 mos+): code to Orth. Imp., by site

Jungle rot NEC: See Fungus infection, skin

-K-

Keloid (scar) 701.4

Kernel (armpit or groin) 785.6

Knock-knee (genu valgum) X76

Knots (cause and type unknown) (unknown if internal or external) (site unspecified) 782.2
-any, (-3 mos), due to injury: code to Injury, by site and type
--site or type unspecified 959
-any described as "benign" or "malignant": code as for Neoplasm
-breast 611.7
--(-3 mos) due to injury: code to Injury, breast
--described as "benign" or "malignant": code as for Neoplasm
-other sites, external or not known if internal or external 782.2
-other sites, known to be internal (See also Mass)
--abdomen 789.3
--chest 786.6
--head 784.2
--neck 784.2

Kyphosis (See also Curvature of spine) X70

-L-

Labor
-false 644.0
-premature 644.1

Laceration: See also Wound, open
-accidental, complicating surgery 998.2
-brain (See also Vol. 2) 851
-internal organ: See Injury, internal, by site
-meniscus (knee) (current) 836
--site other than knee: code as Sprain
---old: See Orth. Imp., by site
-muscle: See Sprain
-nerve: See Injury, nerve, by site
-sites, complicating delivery: See Vol. 2

Lack of: See also Loss, lost
-appetite 783.0
--due to nerves 307.5
-coordination: See Incoordination
-memory: See Forgetfulness
-motor coordination 796.1
-red corpuscles 289.6
-white corpuscles 288.8

Lame, lameness
-back or limbs NEC: code as for Trouble of those sites

Laryngitis (acute) (viral) 464.0
-with
--tracheitis 464.2
---acute 464.2
---chronic 476.1
-(-3 mos) 464.0
--with
---influenza 487.1
-chronic 476.0
--with tracheitis (chronic) 476.1
-streptococcal 034.0

Lazy
-eye (muscle) 378.9
-liver 573.9

Leaky, leaking
-heart (See also Endocarditis) 424.9

Leukemia (congenital) (acute) (chronic) (See also Vol. 2) 208.1

Light hurts eye 368.1

Limitation, motion
-(3 mos+) NEC X89
-specified limb or back: code Orth. Imp., by site

Limps, limping NEC
-(-3 mos) 719.7
-(3 mos+) X89

Lipoma 214

Lisping
-(-3 mos) 307.9
-(3 mos+) X11

Locked, locking
-knee X86
-other joints of limbs or back
--(-3 mos): See Derangement, by site
--(3 mos+): See Orth. Imp., by site

Loss, lost
-appetite 783.0
--due to nerves 307.5
-balance 780.4
-control of muscle: See Incoordination, muscular
-equilibrium (sense) 780.4
-extremity: See Absence, by site
-hearing: See Manual, Hearing Imp.
-memory: See Forgetfulness

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Loss, lost---continued
-mind (See also Psychosis) 298.9
-motor coordination 796.1
-organ or part: See Absence, by site
-peripheral vision 368.4
-sensation NEC
--(-3 mos) 782.0
--(3 mos+) X12
-sense of
--smell, taste
---(-3 mos) 781.1
---(3 mos+) X12
--touch
---(-3 mos) 782.0
---(3 mos+) X12
-teeth, tooth: See Absence, teeth
-vision: See Manual, Visual Imp.
-voice
--(-3 mos) 784.4
--(3 mos+) X11
-weight: See Weight, loss

Low
-blood (count) NEC 289.9
--pressure 458.9
--sugar 251.2
-gammaglobulin 279.0
-metabolism 783.9
-potassium 276.8
-thyroid (acquired) 244.9
--congenital 243

Lumbago (acute) (chronic) 724.2
-due to displacement, intervertebral disc 722.1

Lumps (cause and type unknown) (unknown if internal or external) (site unspecified) 782.2
-any described as "benign" or "malignant": code as for Neoplasm
-any, (-3 mos), due to injury: code to Injury, by site and type
--site and type unspecified 959
-breast 611.7

Lumps---continued
-kidney 753.3
-other sites, known to be internal (See also Mass)
--abdomen 789.3
--chest 786.6
--head 784.2
--neck 784.2
--specified organ NEC: See Disease of specific organ or site

Lymphadenitis 289.3
-any site, except mesenteric
--(-3 mos) 683
--(3 mos+) 289.1
-breast, puerperal, postpartum 675.2
-mesenteric, any onset 289.2

-M-

Malformed, malformation: See Deformity

Mallet
-finger X74
-toe X76

Malnutrition NEC 263.9
-with extreme wasting NEC 261
-protein 260

Malocclusion X92

Mangled NEC 959

Mashed: See Crushed

Mass: See Vol. 2

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Mastitis (acute) 611.0
-chronic (cystic) 610.1
-cystic 610.1
-puerperal or any part of nursing period 675.2

Measles (with cold) (bad) (black) (hard) (old-fashioned) (red) (8-day) (See also Vol. 2) 055.9
-German, French, liberty or 3-day (with cold) 056.9

Medicine poisoning (by overdose) 977.9

Memory, bad: See Forgetfulness

Meniere's disease 386.0
-with hearing impairment (3 mos+): code 386.0 and the hearing imp.

Menopause, menopausal symptoms NEC (See also Vol. 2) 627.2
-with
--depression (agitated) (psychotic): code 296.1 only
--migraine: code 346.9 and 627.2
--nerves, nervousness NEC: code 627.2 only
--psychosis NEC: code 298.8 only
--thyroid conditions: code 627.2 and the thyroid condition
-arthritis 716.3
-surgical 627.4

Menstrual conditions NEC (See also Vol. 2) 626.9
-with
--nerves: code 626.0-626.9, by type only
--thyroid condition: code both
-excessive 626.2
--due to menopause 627.0
-irregular 626.4

Menstrual conditions---continued
-painful 625.3
-premenstrual syndrome, stress, depression, tension, etc. 625.4
-scanty 626.1

Mental
-deficiency or retardation X19
-deterioration, "disease," incompetence (See also Psychosis) 298.9
-disorder, disturbance or upset (See also Disorder, mental) 300.9
-exhaustion 300.5
-problem, trouble, or condition NEC 300.9

Microcephaly (congenital) X93.9

Migraine (headache) 346.9
-with
--disturbance (temporary) of vision: code 346.8 only
--menopause: code 346.9 and 627.2
--sinus conditions: code 346.9 and the sinus condition
-allergic 346.2
-due to
--menstrual conditions 625.4
--nerves 346.9

Mind bad (See also Psychosis) 298.9

Miscarriage: See Abortion, spontaneous, Vol. 2

Missing: See Absence, by site

Mongolian (idiot), mongolism X19.9

Monoplegia
-(-3 mos) 781.4
-(3 mos+): code as for Paralysis, by site and cause

Morning sickness (with ordinary discomfort) 643.0
-with neuritis arising in pregnancy 646.4

Mumps 072.9
-encephalitis 072.2 †
-orchitis 072.0 †

Murmur, heart (functional) (congenital) 785.2
-type specified: See Vol. 2
-type and cause unspecified 785.2

Myalgia (pain in muscle) (cause unknown)
-(-3 mos)
--back 724.5
---low or lumbar 724.2
--limbs 729.5
--multiple sites (back or neck, and limbs) 729.9
--neck 723.1
--rib 786.5
--side 780.9
--site unspecified 729.1
-(3 mos+): code as for Orth. Imp., by site
--site unspecified X89

Myocarditis (See also Vol 2) 429.0
-with
--arteriosclerosis 429.0 and code arteriosclerosis also
--rheumatic fever 398.0
-"hypertensive" 402.9

Myopia (congenital) 367.1

-N-

Narcolepsy (due to any past disease or injury) 347

Nasopharyngitis
-(-3 mos) 460
-(3 mos+) 472.2
--ulcerative 472.2

Nausea (See also Vomiting) 787.0
-of pregnancy 643.0
-nervous or due to nerves 306.4

Nearsighted 367.1

Neoplasm: See Vol. 2
-secondary: See Secondary, Vol. 2

Nephritis, onset unknown (See also Vol. 2) 583.9
-with
--edema 581.9
-(-3 mos) 580.9
-(3 mos+) 582.9
--"arteriosclerotic" 403.9

Nerves, nervous, nervousness (bad) (disorder) (disturbance) (tension) (trouble) 799.2
-anxiety 300.0
-breakdown or collapse (See also Disorder, mental) 300.9
-colon 306.4
-constipation 306.4
-cough 786.2
-depression, depressive (reaction) 300.4
-diarrhea 306.4
-due to or caused by:
--arteriosclerosis (brain), stroke, or others in 430-435, 437: code 316.8 and the cause
--asthma: code 316.1 and the cause

Nerves, nervous, nervousness---
continued
-due to or caused by:---continued
--epilepsy: code 316.8 and the cause
--menopause: code 627.2 only
--menstrual disorders: See Menstrual conditions
--other physical causes: code 316.- and the disease specified as cause
--senility (old age) 65+ 290.9
-exhaustion 300.5
-fatigue 300.5
-headache 784.0
-heart 306.2
-indigestion 306.4
-itching, rash, or skin trouble 306.3
--due to or with allergy: code to the allergy only
-spasm: See Spasm
-stomach 306.4
-tic 307.2
-upset 799.2
-vomiting (frequent) 306.4
-weakness 300.5

Neuralgia, neuritis (See also Vol. 2) 729.2
-arm 356.9
-back 729.2
-brachial (nerve) 723.4
-cheek 352.9
-face 350.9
-facial nerve 351.8
-foot 729.2
-hand 356.9
-heart: code as for Disease, heart
-hip 729.2
-knee 729.2
-leg 729.2
-multiple sites having different code numbers: 356.9
-optic nerve 377.3
-sciatic (nerve) 724.3
-shoulder 729.2
-thigh 729.2

Night blindness 368.6 and X01.8

No depth perception 367.8

No peripheral vision 368.4

Node, nodule
-cause and type unknown 782.2
-thyroid (gland) NEC 241.0
-vocal cords 478.5

Nosebleed (epistaxis) 784.7
-"allergic": See Allergy, nasal

Numbness (no feeling) (any site)
-(-3 mos) 782.0
-(3 mos+) X12

-O-

Obesity (See Overweight) 278.0

Observation (for)
-no condition found 799.5
-X-rays, thermography and ultrasound exams
--abdominal area 793.6
--biliary tract 793.3
--bladder 793.5
--breast 793.8
--head 793.0
--gallbladder 793.3
--gastrointestinal tract 793.4
--genitourinary organs 793.5
--heart 793.2
--intrathoracic organs 793.2
--kidney 793.5
--lung 793.1
--mediastinum 793.2
--musculoskeletal system 793.7

Observation (for)---continued
-X-rays, thermography and ultrasound exams---continued
--other specified sites 793.9
--skull 793.0
--ureter 793.5

Obstruction, obstructed (See also Vol. 2)
-artery (See also Embolism, artery) 444.9
-bladder neck (acquired) 596.0
--congenital 753.6
-bowel (See also Obstruction, intestine) 560.9
-bronchus 519.1
-colon 560.9
-coronary (artery) (heart) 414.0
-esophagus 530.3
-fallopian tube 628.2
-gallbladder 575.2
--with stones 574.2
-intestine (See also Vol. 2) 560.9
-kidney 593.8
-lung 518.8
-nasal 478.1
-prostate 600
-rectum 569.4
-respiratory 519.8
--chronic 496
-stomach 537.8
--acute 536.1
-vein 459.2

Old age (senility)
-persons 65+ (with forgetfulness) (with weakness) 797
-causing or with
--mental changes NEC: code 290.9 only
--nervousness: code 290.9 only
--psychosis: code 290.2 only

Open leg 707.1

Orthopedic impairment--non-paralytic NEC 3 mos+ (weakness) (trouble) (pain) (stiffness) See also Manual, Non-paralytic Orthopedic Impairment

-ankle(s) (and foot, feet) X86
-arm(s) (any part(s)) (and shoulder) X84
-back, spine or vertebrae (sacroiliac) (entire back) (lower NEC) X80
-collar bone X89
-due to nerves: ignore nerves
-elbow(s) X84
-feet, foot X86
--and leg(s) X86
-finger(s) (and thumb(s)) X84
--and hand(s) X84
--and arm(s) X84
-foot, any part X86
-groin X89
-hand(s) (any part(s)) X84
--and arm(s) X84
-hip(s) X85
--congenital dislocation X75.9
-ill-defined sites X89
-jaw X92
-knee(s) (and leg(s)) X86
-leg(s) (any part(s)) X86
-neck region (of vertebrae) X80
-pelvis X85
-rib(s) X89
-shoulder(s) (and arm(s)) X84
-side X89
-spine (See also back) X80
-thigh(s) X86
-thumb(s) (See also finger(s)) X84
-toe(s) (and foot any part) X86
--and leg(s) X86
-trunk, NOS X89
-vertebrae (See also back) X80
-wrist(s) (and hand(s)) X84
--and arm(s) X84

Osteoarthritis (See also Vol. 2) 715.9
-spine 721.9

Otitis
-inner ear 386.3
-media (acute) (chronic) 382.9

Otosclerosis 387.9
-causing impaired hearing or deafness: code 387.9 and X-code

Overactive
-thyroid (See also Vol. 2) 242.9

"Overdose" (drugs) 977.9

Overeating 783.6
-due to nerves 307.5

Overexertion 994.5

Overstrained 780.7

Overtired 780.7

Overweight 278.0
-due to
--glands NOS 259.9
---thyroid (low) 244.9
--overeating 278.0

-P-

Pain, site unspecified 780.9

NOTE: For pain (3 mos+) referable to back, joints, limbs, ribs and side of unknown cause or due to old injury, see Orthopedic Impairment, by site.

-abdomen 789.0

Pain---continued
-ankle 719.4
--with swelling 719.0
-arch 729.5
--with swelling 729.8
--(3 mos+) X77
-arm 729.5
--with swelling 729.8
-back 724.5
--due to nerves: ignore nerves
--low 724.2
--sacroiliac 724.6
-breast 611.7
-chest 786.5
--muscle
---(-3 mos) 729.1
---(3 mos+): See Orth. Imp.
-ear 388.7
-elbow 719.4
--with swelling 719.0
-eye 379.8
-face, facial 784.0
-finger 729.5
--with swelling 729.8
-flank 789.0
-foot 729.5
--with swelling 729.8
-gas (intestinal) (stomach) 787.3
-groin 789.0
-hand 729.5
--with swelling 729.8
-head (See also Headache) 784.0
-heart 786.5
-hip 719.4
--with swelling 719.0
-intestines (any part) 789.0
-jaw 526.9
--(3 mos+) X92
-joint(s) of limb(s) 719.4
--due to nerves: ignore nerves
--with swelling 719.0
-knee 719.4
--with swelling 719.0
-leg 729.5
--with swelling 729.8
-maxilla: See Pain, jaw
-multiple sites in 719-729 (with stiffness) (with swelling) 729.9
-muscle(s) 729.1
--(3 mos+): code as for Orth. Imp., by site
-neck 723.1

Pain---continued
-rectum 569.4
-rib 786.5
-shoulder 719.4
--with swelling 719.0
-side 780.9
-stomach 536.8
--due to nerves 307.8
-throat NOS 784.1
-tongue 529.6

Palpitation, heart 785.1
-due to nerves 306.2

Palsy (See also Paralysis, complete or partial) NOS X63
-Bell's (3 mos+) X61
--(-3 mos) 351.0
-bulbar (progressive) 335.2
-cerebral (any onset) (any type) X50
--congenital (since birth) X50.9
-infantile: See Palsy, cerebral
-shaking (Parkinson's) (arteriosclerotic) 332.0

Paralysis
-agitans (any onset) (Parkinson's) (arteriosclerotic) 332.0
-infantile: See Poliomyelitis
-onset (-3 mos), with cause:
--known: code cause only
--unknown (complete or partial):
---ONE arm, leg, hand, finger, foot or toe 781.4
---other sites (bladder, face, larynx, etc.): See Vol. 2
---spine or spinal NOS 344.1
---TWO or more specified extremities 437.9
-complete or partial NEC (3 mos+) X64
-COMPLETE (3 MOS+)
--ankle (one leg involved, and foot, same leg) X47
--ankles (both legs involved and foot or feet) X46
--anus (sphincter) X62
--arm, one (with hand and/or finger(s) of same arm) X43

Paralysis---continued
-COMPLETE (3 MOS+)---continued
--arms, both (with hand(s) and/or finger(s)) X42
--Bell's X61
--bladder (sphincter) X62
--digestive organs X63
--entire body X40
--face X61
--feet, both (with toe(s) on one or both feet) (without mention of leg(s)) X48
--feet, both (with toe(s) on one or both feet and mention of one leg involved) X47 and code other foot also
--feet, both (with toe(s) on one or both feet and both leg(s)) X46
--finger(s) (one hand involved) (without mention of arm) X45
--finger(s) (one hand involved, with mention of same arm) X43
--fingers (both hands involved) (without mention of arms) X44
--fingers (both hands involved and mention of one arm involved) X43 and code other hand also
--fingers (both hands involved and both arms) X42
--foot, one (with toe(s) on same foot only) (without mention of leg) X49
--foot, one (with toe(s) on same foot and same leg involved) X47
--hand, one (with finger(s) on same hand) (without mention of arm) X45
--hand, one (with finger(s) on same hand) (with same arm involved) X43
--hands, both (with finger(s) on one or both hand(s)) (without mention of arms) X44
--hands, both (with finger(s) on one or both hand(s) and mention of one arm involved) X43 and code other hand also
--hands, both (with finger(s) on one or both hand(s) and both arm(s)) X42
--infantile (residual): code by site in X40-X64, with 4th digit of "4"

Paralysis---continued
-COMPLETE (3 MOS+)---continued
--larynx or vocal cord X63
---with speech impaired X11
--leg, one (with foot and/or toe(s) same leg) X47
--legs, both (with foot or feet and/or toe(s)) X46
--shoulder X60
--side (one side of body, including limbs, same side) (hemiplegia) X41
--site not specified X64
--spine, spinal (cord) X60
--throat or tongue X63
---with speech impaired X11
--toe(s) (one foot involved) (without mention of leg) X49
--toe(s) (one foot involved, with mention of same leg) X47
--toes (both feet involved) (without mention of leg(s)) X48
--toes (both feet involved, and mention of one leg) X47 and code other foot also
--toes (both feet involved, and both legs involved) X46
--trunk NEC X60
--vocal cord X63
---with speech impaired X11
-PARTIAL (3 MOS+)
--ankle (one leg involved, and foot, same leg) X57
--ankles (both legs involved and foot or feet) X56
--anus (sphincter) X62
--arm, one (with hand and/or finger(s) of same arm) X53
--arms, both (with hand(s) and/or finger(s)) X52
--bladder X62
--digestive organs X63
--entire body X60
--face X61
--feet, both (with toe(s) on one or both feet) (without mention of leg(s)) X58
--feet, both (with toe(s) on one or both feet and mention of one leg involved) X57 and code other foot also

Paralysis---continued
-PARTIAL (3 MOS+)---continued
--feet, both (with toe(s) on one or both feet and both legs) X56
--finger(s) (one hand involved) (without mention of arm) X55
--finger(s) (one hand involved, with mention of same arm) X53
--fingers (both hands involved) (without mention of arms) X54
--fingers (both hands involved and mention of one arm involved) X53 and code other hand also
--fingers (both hands involved and both arms) X52
--foot, one (with toe(s) on same foot) (without mention of leg) X59
--foot, one (with toe(s) on same foot and same leg involved) X57
--hand, one (with finger(s) on same hand) (without mention of arm) X55
--hand, one (with finger(s) on same hand) (with same arm involved) X53
--hands, both (with finger(s) on one or both hand(s)) (without mention of arm(s)) X54
--hands, both (with finger(s) on one or both hand(s) and mention of one arm involved) X53 and code other hand also
--hands, both (with finger(s) on one or both hand(s) and both arm(s)) X52
--hemiparesis X51
--larynx or vocal cord X63
---with speech impairment X11
--leg, one (with foot and/or toe(s), same leg) X57
--legs, both (with foot or feet and/or toe(s)) X56
--paraparesis X56
--shoulder X60
--side (one side of body, including limbs, same side) X51
--site not specified X64
--spine, spinal (cord) X60
--throat or tongue X63
---with speech impairment X11

Paralysis---continued
-PARTIAL (3 MOS+)---continued
--toe(s) (one foot involved) (without mention of leg) X59
--toe(s) (one foot involved, with mention of same leg) X57
--toes (both feet involved) (without mention of leg(s)) X58
--toes (both feet involved and mention of one leg) X57 and code the other foot also
--toes (both feet involved and both legs involved) X56
--trunk NEC X60
--vocal cord X63
---with speech impairment X11

Paraparesis X56

Paraplegia, paraplegic (3 mos+) X46

Paresis: See Paralysis, partial, by site

Parkinson's disease (See Paralysis agitans) 332.0

Penicillin, adverse effect (allergic) (current) (old) 995.2
-applied to skin 692.3

Perforated or punctured eardrum 384.2
-traumatic
--(-3 mos) 872
--(3 mos+) 384.2
---with hearing loss: code to Hearing Impairment only

Phlebitis NEC 451.9
-lower extremities 451.2

Pigeon
-breast X79
-toe X76

Piles (hemorrhoids) 455.6

Pinched nerve (old) (See also Neuropathy, entrapment) 355.9
-arm 354.9
-back 353.9
-cranial (in head) NEC 352.9
-current injury: See Injury, nerve
-optic 377.3
-neck 353.2
-spine NOS 353.9

Pink eye 372.0

Plate (in)
-head or skull (3 mos+) X93
-or pin, in extremities with:
--fracture: code as for fracture
--no disability or effects: Delete
--disability or effects NEC 996.7

Pleurisy NEC 511.0
-(-3 mos) 511.0
--with
---influenza 487.1
---pneumonia: code to Pneumonia, by type
-(3 mos+) 511.0
--due to or caused by
---influenza 511.0
---pneumonia 511.0

Pneumoconiosis (See also Vol. 2) 505
-coal miner's 500
-dust NEC 504
-fumes (from silo) 506.9

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Pneumonia NEC (See also Vol. 2) 486
-(-3 mos)
--with
---bronchitis
----(-3 mos) 485
----(3 mos+): code both
---cold
----(-3 mos): code to Pneumonia, by type
----(3 mos+): code both
---influenza
----(-3 mos) 487.0
----(3 mos+) 487.0
---pleurisy
----(-3 mos): code to Pneumonia, by type
----(3 mos+): code both
-"allergic" 518.3
-"asthmatic" 493.9
-bronchial 485
--chronic 515
-chronic (3 mos+) 515
-"viral" "virus" 480.9
--with influenza 487.0

Poison ivy, oak, sumac, other plants (allergic) (occupational) 692.6

Poisoning (by)
-carbon monoxide 989.9
-chemicals 989.9
-drugs 977.9
-food NEC (bacteria) (infected) 005.9
--naturally toxic NEC 988.9
--noxious mushrooms 988.1
--noxious plants NEC 988.2
--noxious shellfish 988.0
-insect 989.5
-lead 989.9
-ptomaine NEC 005.9
-snake 989.5
-substances in contact with skin, causing dermatitis, rashes, etc.: code as for Dermatitis
-sun (allergic) 692.7

Poliomyelitis (See also Vol. 2)
-old or inactive (3 mos+) 335.2
--causing
---impairment: code impairment only

Polyp (See also Vol. 2)
-cervix 622.7
-ear (middle) 385.3
-larynx (mucous) 478.4
-nasal, nose (mucous) 471.9
--cavity 471.0
--septum 471.9
--sinus 471.8
-ovary 620.8
-rectum 569.0
-uterus 621.0
-vocal cord (mucous) 478.4

Poor vision: See Manual, Visual Impairments

Postnasal drip: See Sinusitis

Posture, poor (given as a condition) (any onset) X79
-causing other conditions: code the other condition only

Post traumatic stress syndrome 309.8

Pregnancy (See also Vol. 2)
-before delivery
--with
---anemia, arising in pregnancy 648.2
---backache, back pain (conditions in 720-724) 648.7
---hemorrhage NEC 641.9
----threatened abortion 640.0
---hypertension, arising in pregnancy 642.9
---minor complaints (headache, fatigue, frequent urination, no complications but with cut-down days) 646.8

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Pregnancy---continued
-before delivery--continued
--with
---neuritis, arising during pregnancy 646.4
---varicose veins 671.0
---vomiting (mild) 643.9
----due to specified cause NEC 643.8
----pernicious, serious 643.0
--complications NEC 646.9
-complicated by
--conditions in 001-790.2: see categories 642, 646,647, 648 and 674
-normal: Do not code

Prematurity NEC 765.1

Pressure on nerve: See Pinched nerve

Prickly heat 705.1

Prostration, nervous 300.5

Pruritus: See Itching

Psoriasis 696.1
-"arthropathic" or "arthritic" 696.0 †
-mouth 528.6

Psychosis (See also Vol. 2) 298.9
-due to or associated with:
--alcoholism NEC 291.9
---delirium tremens 291.0
--drug addiction 292.9
--menopause NEC 298.8
--presenility 290.1
--senility NEC 290.2

Ptomaine poisoning NEC 005.9

Ptosis (eyelid) (congenital) 374.3

Puerperal conditions, within 2 months after delivery (See also Vol. 2)
-hemorrhage following delivery, new admission 666.2
--retained placenta (fragments) 666.2
-infection 670
--breast, any time during nursing period 675.9
-minor complaints (headache, backache, fatigue) 674.8
-retained placenta, without hemorrhage 667.1

Pulled muscle: See Sprain

Pus (in) (See also Infection)
-urine 599.0

Pylorospasm 537.8
-due to nerves 306.4
-infantile or congenital 750.5

Pyorrhea 523.4

-Q-

Quadriplegia (3 mos+) X40

-R-

Radiation effects or sickness (-3 mos) NEC 990

Radiculitis (See also Vol. 2) 729.2

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Rape (See also Nature and site of injury) 959

Rapid
-growth (physical) 253.0
-heart 785.0
--due to nerves 306.2

Rash NOS 782.1
-allergic (See also Allergy) 692.9
-diaper 691.0
-drug (internal use) 693.0
--applied to skin 692.3
-due to
--nerves 306.3
---and allergy: ignore nerves
--shots: See Allergy, other, due to shots
--specified substance: See Dermatitis, due to
-food 693.1
--ingested 693.1
--in contact with skin 692.5
-heat 705.1
-nettle 708.8
-serum (prophylatic) (therapeutic) 999.5

Reaction
-allergic (See also Allergy) NEC 995.3
--drug NEC 995.2
-anxiety 300.0
-drug NEC 995.2
--"overdose" or "poisoning" 977.9
-lumbar puncture 349.0

Refusal of food NEC 307.1

Rejection
-food NEC 307.1
-transplant 996.8
--organ 996.8
--skin 996.5

Retardation, mental X19

Retention, retained
-fluid 276.6
-urine 788.2
--due to nerves 306.5
-water (in tissues) (See also Edema) 782.3

Retina, retinal disease NEC 362.9
-detachment 361.9
-hemorrhage 362.8
-inflammation 363.2

Retinitis (See also Vol. 2) 363.2
-pigmentosa 362.7

Retrolental
-fibroplasia 362.2

Revenge
-Montezumas 009.0

RH (factor)
-incompatibility
--affecting newborn 773.0
--noted during pregnancy 656.1

Rheumatic
-fever (acute) (chronic) (See also Vol. 2) 390
--with
---cardiac hypertrophy 398.9
---carditis 398.9
---endocarditis 397.9
---heart disease NEC (conditions classified in 429.3, 429.8, 429.9) 398.9
---heart failure (congestive) (conditions in 428.0, 428.9) 398.9
---left ventricular failure (conditions in 428.1) 398.9
---myocarditis (conditions in 429.0) 398.0
--stated to be "cured", "old", or "history", "inactive" 399

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Rheumatism, rheumatic (acute) (chronic) NEC (See also Vol. 2) 729.0
-back 724.9
-joint (chronic) NEC 716.9
-muscular 729.0
-spine 724.9

Rhythm
-heart, abnormal 427.9

Ringing in ears
-(-3 mos) 388.3
-(3 mos+): code as for Impaired hearing in X-code and 388.3

Rising in ear: See Infection, ear

Roaring in ear: See Ringing in ear

Rose fever (See also Hay fever) 477.9

Running, runny
-ear: See Infection, ear
-nose (chronic) 472.0
--(-3 mos) 460
--allergic 477.9
-sore of leg 707.1

Rupture, ruptured (See also Vol. 2) 553.9
-blood vessel (See also Hemorrhage) 459.0
--(-3 mos) due to injury: See Injury, blood vessel
-cartilage, current: See Sprain, by site
--knee (semilunar) 836
---old X86
-disc: See Disc

Rupture, ruptured---continued
-eardrum 384.2
--traumatic
---(-3 mos) 872
---(3 mos+) 384.2
-ligament or tendon, current: See Sprain, by site
--(3 mos+): code to Orth. Imp., by site
-navel 553.1
-other sites: See Vol. 2 under Rupture

-S-

Scar (painful) (tender) (contracting)
-cornea, acquired or congenital 371.0
-eardrums (3 mos+) 384.2
-facial disfigurement (chin, ears, face, lips, mouth, nose) X90
-keloid (any site) 701.4
-limbs, neck, back, trunk (external): code as Deformity of those sites
-lung (base) 518.8

Sciatica 724.3
-due to displacement of disc 722.1

Sclerosis
-renal 587
--with
---hypertension 403.9
---hypertensive heart disease (conditions in 402) 404.9

Scoliosis (See also Curvature of spine) X70

Scratch: See Injury, superficial

Seizures (See Convulsions) 780.3
-epileptic (See also Epilepsy) 345.9

Senile, senility (with weakness) (with forgetfulness) 797
-with
--depression 290.2
--mental changes NEC 290.9
--psychosis 290.2

Sensitive, sensitivity
-indicating allergy: See Allergy
-indicating pain: See Pain
-scar: See Scar

Shakes, shaking NOS: See Tremor, trembling

Shaking palsy or paralysis (See also Parkinsonism, Vol. 2) 332.0

Shingles (See also Herpes zoster, Vol. 2) 053.9
-eye 053.2 †

Shock 785.5
-due to
--shots (preventive) (serum) (vaccine) 995.0
-emotional 308.9
-nervous or mental 308.9
-paralytic 437.9
-postoperative 998.0
-surgical 998.0
-traumatic: code nature of injury only

Short, shortening, shortness
-Achilles tendon X76
-breath 786.0
-leg or arm: code as Deformity, by site

Sick (to) (in) (on)
-stomach: See Upset, stomach

Sickness
-morning 643.0

Sinusitis (nasal) (chronic) (See also Vol. 2) 473.9
-(-3 mos) 461.9
--with
---cold, acute 465.8
---influenza 487.1
-"allergic" (See also Hay fever) 477.9
-due to, caused by
--allergy, any sinus 477.9
--deviated septum 470
--hay fever 477.9
--migraine: code 346.9 and the sinusitis

Skin
-adolescent: See Acne
-dry (with itching) 698.9
-irritation NEC 686.9

Skinned: See Injury, superficial

Sleep
-disorder 780.5
--due to nerves 307.4

Slow
-heart rate 427.8
-learner X19

Smashed: See Crushed

Sore
-breast 611.7
--puerperal, postpartum, any onset 676.3
-extremity or trunk: See Pain
--indicating infection: See Infection, by site
-eye 379.9
--indicating infection: See Infection
-muscle: See Myalgia
-on skin: See Infection, skin
-open or running (skin)
--(-3 mos): code as for Infection, skin
--(3 mos+): code as for Ulcer, skin
-throat, acute (viral) 462
--with
---cold, acute 465.8
---influenza 487.1
--chronic 472.1
--strep 034.0
-skin: See Infection, skin

Spasm(s)
-site unspecified 781.0
-colon 564.1
--due to nerves 306.4
-eyelid 333.8
-face or facial 351.8
--habit 307.2
-habit or tic, any site 307.2
-heart: See Angina
-larynx 478.7
--due to nerves: ignore nerves
-limbs, back, trunk NEC: code as for Trouble of those sites
-muscle
--(-3 mos) 728.8
--(3 mos+): code as for Orth. Imp., by site
-pylorus: See Pylorospasm
-retinal (artery) 362.3
-sacroiliac (old)
--(-3 mos) 724.6
--(3 mos+) X80
-stomach 536.8
--due to nerves 306.4
-throat 478.2
--due to nerves: ignore nerves
-tongue 529.8

Spastic (muscles)
-colon: See Spasm, colon
-since birth: code as for Cerebral palsy
-stomach: See Spasm, stomach
-unspecified site, or of limbs, back, trunk, and not since birth, 3 mos+: code as for Paralysis, partial, of those sites

Speech defect, disorder, disturbance impediment NEC
-with
--cleft palate X91.9
-(-3 mos) 784.5
--due to nerves 307.9
--stammering, stuttering 307.0
-(3 mos+) X11
--stammering, stuttering X10

Spina bifida (congenital) X71.9

Spitting blood (See also Hemoptysis) 786.3

Splinter: code by site under Injury, superficial

Split, splitting
-lip, congenital X91.9
--with cleft palate X91.9
-nails 703.8

Spots
-on skin NEC 709.0

Spotting, intermenstrual NEC 626.4
-irregular 626.6
-regular 626.5

Sprain, strain (cartilage) (joint) (ligament) (muscle) (tendon)

-(-3 mos) NOT due to injury 718.2
--knee 717.5
--sacroiliac 724.6
-(3 mos+) chronic or old
--jaw X92
--limbs, back, trunk: code as for Orth. Imp., by site
-current (-3 mos) (See also Vol. 2, Sprain) 848
--with open wound: code as Wound, open
--ankle (and foot) 845
--arm (upper) (and shoulder) 840
---lower (forearm) 841
--back or spine NEC 847
---lumbar 847
---sacroiliac or lumbosacral 846
--collar bone 840
--finger(s) 842
--foot 845
--hand 842
--hip (and thigh) 843
--knee (cartilage) (tendon) 844
--leg 844
--multiple sites except fingers alone or toes alone 848
--neck 847
--rib (cage) 848
--sacroiliac 846
--shoulder (and upper arm) 840
--thigh (and hip) 843
--toe(s) 845
--vertebrae (dorsal) (lumbar) (sacral) (thoracic) 847
--wrist 842

Sprengel's deformity (congenital) X73.9

Spur
-bone 726.9
-heel 726.7
-vertebrae 726.9

Stammering
-(-3 mos) 307.0
-(3 mos+) X10

Stiffness
-chronic, 3 mos+ or old
--jaw X92
--limbs, back, trunk, NEC: code as Orth. Imp., by site
---"permanent": code as Deformity, by site
-current, -3 mos (See also Pain, -3 mos, by site)
--ankle 719.5
--elbow 719.5
--finger 719.5
--hip 719.5
--joint NEC 719.5
--knee 719.5
--multiple sites 719.5
--neck 719.5
--sacroiliac 724.6
--shoulder 719.5
--specified site NEC 719.5
--spine 724.8
--wrist 719.5

Sting (animal) (bee) (fish) (insect) (jellyfish) (Portuguese man-o-war) (wasp) (venomous) 989.5
-plant 692.6

Stitch
-abscess 998.5
-burst (in operation wound) 998.3
-meaning pain
--in back 724.5
--other sites: See Pain

Stone(s) (calculus) (See also Vol. 2)
-bladder 594.1
-kidney 592.0
-ureter 592.1

Strabismus (congenital) NOS 378.9

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Strep
-throat (with cold) 034.0

Stress
-(-3 mos): See 308.-, Vol. 1
-(3 mos+): See 309.-, Vol. 1

Stroke (See also Vol. 2) 437.9
-"arteriosclerotic" 437.0
-with present effects of:
--nonpsychotic mental disorders: code 316.8 also
--psychosis 294.1
---"arteriosclerosis of brain" 290.4
---intracranial 294.8
--paralysis or other impairments, 3 mos+: code to the X-code by type and etiology. Code stroke also.

Stuttering
-(-3 mos) 307.0
-(3 mos+) X10

Sty, stye 373.1

Sugar
-in blood NOS 790.6
--high 790.2
--low 251.2
-in urine 791.5

Sun poisoning (allergic) 692.7

Sunburn 692.7

Sunstroke, current 992.0

Suspected
-no condition found 799.5

Swelling, swollen
-site not specified 780.9
-any site, due to allergy: code Allergy only
-abdomen 789.3
-breast 611.7
-extremities (with pain)
--(-3 mos) 729.8
--(3 mos+): code as Orth. Imp., by site
-glands (lymph) (any onset) 785.6
-intestines 789.3
-joints of limbs (with pain)
--(-3 mos) 719.0
--(3 mos+): code as Orth. Imp., by site
-stomach 789.3

Swimmer's
-ear 380.1

Synovitis (See also Vol. 2) 727.0

-T-

Tachycardia 785.0
-due to nerves 306.2
-specified type: See Vol. 2

Tear, torn (traumatic) (See also Wound, open)
-cartilage: See Sprain
-flesh NEC: See Wound, open
-internal organ (abdomen, chest or pelvis): See Injury, internal, by site
-ligament: See Sprain
-meniscus (knee): See Sprain
-muscle: See Sprain
-tendon: See Sprain

Teething (syndrome) 520.7
-with cold, acute 460

Temper 301.3

Tendinitis, tendonitis (See also Vol. 2) 726.9

Tenosynovitis (See also Vol. 2) 727.0

Tension NOS 799.2
-headache 784.0
-nervous 799.2
-"state" 300.9

Tetter 709.9

Thick
-blood 289.9

Threatened
-abortion or miscarriage (without delivery) 640.0
-with
--abortion or miscarriage: See Abortion, spontaneous, Vol. 2)

Thrombosis (vein) (See also Vol. 2) 453.9
-artery (See also Vol. 2) 444.9
-brain or cerebral (any onset) 434.0
-coronary (artery), heart, or myocardium (any onset) 414.8
-eye 362.3
-leg 451.2
-lung 415.1
-retina 362.3

Tibial torsion X76

Tic (habit) (nervous) (facial) (eye) (eyelid) 307.2
-douloureux, NOS (See also Vol. 2) 350.1

Tick
-bite 134.9

Tinnitus: See Ringing in ear

Tired blood 289.9

Tiredness 780.7

Tongue-tie X11.9

Tonsils
-bad, diseased
--acute 463
--chronic 474.9

Tonsillitis
-(-3 mos) 463
--with
---cold, acute 465.8
---influenza 487.1
-(3 mos+) 474.0

Tooth, teeth
-bad, decayed 521.0

Toothache, cause not specified 525.9

Torticollis (contracture, neck)
-any onset X79

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Transplant
-complication NEC 996.7
--organ (failure) (infection) (rejection) 996.8
--skin NEC 996.7
---infection 996.6
---rejection 996.5

Tremor, trembling
-site and cause unknown 781.0
-any site (3 mos+)
--due to
---stroke and other paralytic diseases: code as Paralysis, partial, by site
-due to
--old age, 65+ 797
-hereditary 333.1
-muscle (-3 mos) 728.8
--(3 mos+): code as Orth. Imp., by site
-Parkinson's (See Paralysis, agitans) 332.0
-specified sites, type unspecified, involving back, limbs, trunk: See Trouble of those sites

Trick knee (See also Section V) X86

Trouble (See also Disease)
-female NOS, any onset 629.9
-(-3 mos) cause unknown
--back 724.9
---low or lumbar 724.9
---muscles 728.8
--hearing 388.4
--jaw 526.9
--joint(s) of limb(s) 718.9
--limb(s) 729.5
---muscles 728.8
--multiple sites, back or neck and limbs, muscles 729.9
--neck 723.9
---muscles 728.8
--rib(s) 786.9
--seeing 379.9
--speech NEC 784.5
--walking NEC 719.7

Trouble---continued
-(3 mos+)
--back, limbs, neck, trunk: See Orth. Imp., by site
--hearing NEC: code as Hearing Impairment
--jaw X92
--muscle: See Orth. Imp., by site
--rib(s) X89
--seeing: See Manual, Visual Impairments
--speech NEC X11
--walking NEC X89

Tuberculosis (lung) (pulmonary) (See also Vol. 2) 011.9
-non-pulmonary, not arrested: See Vol. 2, by site
-stated to be "arrested" or "inactive" (pulmonary) (any site) 019

Tumor (See also Vol. 2) 239.9

Tunnel vision 368.4

Twitching: See Tremor

-U-

Ulcer (See also Vol. 2) 707.9
-decubitus (any site) 707.0
-duodenal (chronic) 532.7
--with
---hemorrhage 532.4
----and perforation 532.6
---perforation 532.5
----and hemorrhage 532.6
-gum 523.8
-leg or lower extremity 707.1
--decubitus (from pressure) 707.0
--varicose 454.0
---infected 454.2
-mouth 528.9

Ulcer---continued
-nose, nasal (passage) (septum) 478.1
--varicose 456.8
-peptic (chronic) (site unspecified) 533.7
--with
---hemorrhage 533.4
----and perforation 533.6
---perforating 533.5
-skin (chronic) (See also Vol. 2) 707.9
--due to diabetes 250.9
--lower extremity 707.1
---due to diabetes 250.9
-stomach (chronic) 531.7
--with
---hemorrhage 531.4
----and perforation 531.6
---perforation 531.5
----and hemorrhage 531.6
-tooth 525.9
-varicose (leg) 454.0
--infected 454.2

Underactive
-thyroid (acquired) 244.9
--congenital 243

Underweight 783.4
-any onset or degree
--due to
---cancer or other active disease: code the cause only
---refusal or rejection of food 307.1
-extreme
--due to
---malnutrition 261
-not extreme or degree not specified, any onset
--cause not stated 783.4
--due to
---dietary problems 269.9
---malnutrition 263.9

Undiagnosed (disease) 799.9

Unknown 799.9
-diagnosis 799.9

Unstable
-colon 569.9
-joint of limbs, or of back or spine (lumbosacral) (sacroiliac) (neck region): See Trouble of those sites

Upper respiratory infection NEC 465.9

Upset
-emotional 309.2
-gastrointestinal 536.8
--due to nerves 306.4
--virus 008.8
-intestinal (large) (small) 564.9
--due to nerves 306.4
--virus 008.8
-mental 300.9
-nervous 799.2
-stomach 536.8
--due to nerves 306.4
--with acidity 536.8
---due to nerves 306.4

Uremia (See also Vol. 2) 586
-chronic 585
-hypertensive (See also Hypertension, kidney) 403.9

Urination (difficult) (painful) 788.0
-abnormal 788.6
-frequent 788.4
--due to nerves 306.5
-scanty 788.5
-uncontrolled 788.3
--due to nerves 307.6

Urine, abnormal NEC 791.9
-albumin in 791.0
-blood in 599.7

Urine, abnormal---continued
-cloudy NEC 791.9
-pus in 599.0
-retention 788.2
--due to nerves 306.5
-sugar in 791.5

Urticaria (with itching or swelling) 708.9
-chronic 708.8
-due to
--allergy or allergic 708.0
--cold or heat 708.2
--food 708.0
--nerves NEC 306.3
---and allergy: ignore nerves
--plants 708.8
-giant 995.1

-V-

Vaccination
-complication or reaction NEC 999.9
--infection 999.3

Vaccinia 999.0
-without vaccination 051.0

Vaginitis (acute) (chronic) 616.1
-due to Trichomonas 131.0 †

Varicose (See also Vol. 2)
-vein (lower extremity) 454.9
--infected 454.1
---with ulcer 454.2
--in pregnancy or puerperium 671.0
--other specified sites: See Vol. 2
--ulcerated 454.0
---infected 454.2

Virus, viral (infection) 079.9
-chest 519.9
-cold: See Cold
-diarrhea (with cold) 008.8
-influenza: See Influenza
-intestinal 008.8
--with cold 008.8
-lung 480.9
-pneumonia 480.9
--with influenza 487.0
-sore throat 462
-stomach 008.8

Vision, half, poor, trouble with: See Manual, Visual Impairments
-blurred
--(-3 mos) 368.8
--(3 mos+) code to X-code
-double
--(-3 mos) 368.2
--(3 mos+) 368.2 and X-code
-tunnel 368.4

Voice
-change or loss
--(-3 mos) 784.4
--(3 mos+) X11

Vomiting (bilious) 787.0
-allergic 535.4
-blood 578.0
-following gastrointestinal surgery 564.3
-frequent or pernicious 536.2
--in pregnancy (abnormal) 643.0
-nervous or due to nerves 306.4
-newborn 779.3
-of pregnancy (mild) 643.9
--due to
---specific cause NEC 643.8

Vulvitis (allergic) (acute) (chronic) (See also Vol. 2) 616.1

-W-

Walking
-difficulty
--(-3 mos) NEC 719.7
--(3 mos+) NEC X89
--due to nerves: ignore nerves

Wart (common) (plantar) (viral) 078.1
-senile 702

Washerwoman's itch (allergic) 692.4

Wasting
-disease 799.4
-extreme (due to malnutrition) 261

Water
-on knee
--(-3 mos) 719.0
--(3 mos+): See Orth. Imp., knee

Watering
-eyes 379.9
--allergic 372.0
--with hay fever: See Hay fever

Wax in ears 380.4

Weak, weakness

NOTE: For paralytic weakness, 3 mos+, See Paralysis, partial

For Weakness NEC, 3 mos+, of back, joints, limbs: See Orth. Imp., by site

-site and type unspecified (all over) (general) 780.7

Weak, weakness---continued
-site and type unspecified---continued
--of newborn 779.8
--65+ (old age) 797
-arches (acquired) (congenital) (chronic) X77
-back (-3 mos) 724.9
--low or lumbar 724.9
-bladder 788.3
-eyes NEC 379.9
-eye muscles 378.9
-heart (muscle) or cardiac 428.9
-joints of limbs (-3 mos) 719.6
-kidney 788.9
-limbs 729.5
--muscles 728.9
-mind X19
-muscle 728.9
-myocardium 428.9
-nervous NEC 300.5

Web, webbed
-fingers X74.9
-neck X79.9
-toes X76.9

Weight
-gain: See Overweight
-loss, any onset 783.2
--due to
---active disease: code disease only
---dietary problems 269.9
---malnutrition 263.9

Wheezing 786.0
-allergic: See Asthma

Whiplash injury (neck) 847
-effects NEC (3 mos+) X80

Whooping cough 033.9
-with pneumonia 033.9 ✝

Worn out (See also Weakness) 780.7

Worry 799.2

Wound, open (cut) (laceration) (-3 mos) (complicated) (with foreign body) (with infection) (See also Vol. 2) 879
-with
--foreign body, 3 mos+, (residual or old) having entered through open wound
---bone 733.9
---soft tissue 729.6
-(3 mos+) with no residual specified code by site to 906.0-906.1 (See Vol. 1)
-abdomen, abdominal (external) (muscle) (wall) 879
-ankle 891
-arm 884
--forearm (lower) 881
--upper 880
-back 876
-breast 879
-chest (wall) (external) 875
-chin 873
-ear (auricle) (external) 872
--drum 872
---(3 mos+) 384.2
-eye(s) (globe) 871
-eyebrow 873
-eyelid (muscle) 870
-face (except ear and eye) (multiple sites) 873
-feet 892
-finger(s) (nail) (subungual) (thumb(s)) 883
-foot (any part except toe(s) alone) 892
-forearm 881
-forehead 873
-groin 879
-hand 882
-head NEC 873
-heel 892
-hip 890
-jaw (fracture not involved) 873
-knee 891
-leg (except thigh) (multiple) 891
-mouth 873

Wound, open---continued
-multiple
--unspecified site 879

NOTE: Multiple open wounds of sites classifiable to the SAME 4-digit category should be classified to that category unless they are in different limbs. Multiple open wounds of sites classifiable to different 4-digit categories, or in different limbs, should be coded separately.

-neck 874
-scalp 873
-shoulder (and upper arm) 880
-skin NEC 879
-thigh (and hip) 890
-throat 874
-toe(s) (nail) (subungual) 893
-trunk (multiple) (specified part) NEC 879

SYMPTOMS

The following is an alphabetical list of selected terms called "symptoms" for the sake of convenience. These terms are classified by HIS and ICD in various ways, according to type, site, onset and cause. They are frequently manifestations of a disease, abnormality or "trouble" and if a more specific diagnosis of the condition can be found, the latter is to be preferred for coding purposes.

Some of these terms are regarded as impairments if the onset is 3 months plus. Example: pain or swelling of limbs, back or trunk, 3 mos+ are coded to X80-X89.

-A-

Abnormal
- eye color
- eye movement
- palpitations
- pulsations
- retraction of eye
- sensations
- tongue color

Abnormality, fluid
Ache (pain) any part of body
Acne
Adjustment problem
Aggressiveness
Agitated
Agraphia
Amenorrhea
Amnesia
Anesthesia
Anger
Anorexia
Anxiety
Apathy
Aphasia
Appetite
- abnormal
- decreased
- excessive
- loss of
- no

Apprehension
Arthralgia
Ascites
Atrophy of
- extremities
- muscles

Attack, convulsion
Avoiding people

-B-

Backache
Bad
- breath
- complexion
- heart
- nerves

Bag of water broke
Balance, loss of
Baldness
Bedwetting
Behavior disturbances
Belching
Bitterness
Blackhead
Blackouts
Bleeding, any part of body
Blemishes
Blister
- skin
- tongue

Bloated
- before periods
- gas

Blocked ear
Blood spots in eye
Bloodshot eyes
Blotches
Blueness
Blushing
Bowel function changes
Bradycardia
Breaking
- nails
- out (skin)

Breathing problems
Brittle
- hair
- nails

"Burning" sensation, any part of body
Burping
Butterflies

-C-

Cachexia
Can't
- get pregnant
- open eye

Change in skin texture
Charleyhorse
Chest symptoms NOS
Chewing difficulty
Chewing on hair
Chills
Choking
Circulation problems
Clammy skin
Clots, menstrual
Cloudy eye appearance
Clumsiness
Coated tongue
Coitus, painful
Cold
- body temperature
- sore

Colic NOS
- infantile
- intestinal
- renal

Collapse
Color change in skin
Coma
Compulsions
Condition
- heart
- scalp
- skin

Confusion
Congestion
  chest
  lung
  nasal
  sinus
Constipation
Convulsions
Coordination, poor
Coryza
Cough, coughing up NOS
  blood
  croupy
  phlegm
  smokers
  sputum
Cracked
  lips
  nails
  skin
Cracking ear
Cramps, any part of body
Crazy acting
Crick, any part of body
Cruelty
Crying
  too much (infant)
  adult
Cyanosis

-D-

Defecation, painful
Dehydration
Dejected
Delusions
Depression
Destructiveness
Development
  breasts, uneven
  early
  lack of
  sexual, delayed or early
Diaper rash
Diarrhea
Difficulty walking
Discharge, any part of body
Discoloration, skin
Discomfort
  chest
  stomach
Discontented
Dislike of self
Disorder
  growth
  menstrual
  motor function
  respiratory rhythm
  respiratory sound
Distention
  abdominal (gas)
  bladder
Distress
  gastrointestinal
  heart
  respiratory
  stomach
Dizziness
Drainage
  ear
  umbilicus
Drip, postnasal
Drooling
Drooping
  eyelids
  facial
Dropping sensation, pelvic region
Dropsy
Drowsiness
Dryness, any part of body
Dysmenorrhea
Dyspareunia
Dyspepsia
Dysphagia
Dyspnea
Dysuria

-E-

Earache
Eats too much
Edema
Emesis
Emotional upset
Encopresis
Enlarged
  any part of body
  glands of internal organs
Enuresis
Epistaxis
Eruption, skin
Erythema
Euphoria
Excessive
  perspiration
  sweating
  thirst
Exhaustion

-F-

Failure to thrive
Fainting (spells)
Falling out hair
False labor
Fatigue
Fears
Febrile
Feeding problems
Feeling, feelings
  faint
  loss of
  of uterus falling out
  prickly
Fever
Fever blister
Fidgety
Fits
Flakiness of scalp or skin
Flashes, hot
Flatulence
Floaters
Fluid
  eardrum
  imbalance
  on abdomen
  retention
Flushed
Fluttering
  eyes
  heart
Forgetfulness
Freckles
Frigidity
Fullness
  abdominal
  bladder
Fussy infant

-G-

Gagging
Gas
  distention
  excessive
  pain

Gasping for breath
Giddiness
Going crazy
Grief
Grinding
  jaw
  joints
  teeth
Guilt

-H-

Hair, hairness
  abnormal
  falling out
Halitosis
Hallucinations
Halos around eyes
Headache
Hearing voices
Heartbeat
  increased
  skipping
  slow
  weak
  etc.
Heartburn
Heart murmur
Hematemesis
Hematuria
Hemorrhage, any part of body
Hemoptysis
Hiccoughs
Hiccups
Hirsutism
Hoarsness
Homosexuality
Hopelessness
Hormone deficiency
Hostility
Hungry, always
Hyperactivity
Hyperesthesia
Hypernasality
Hypersomnia
Hypertrophy
Hyperventiliation
Hysteria

-I-

Ill
Imbalance, fluid
Immaturity
Impacted
  intestines
  sinuses
  teeth
Impotence
Incontinence
  stool
  stress
  urine
Incoordination
Indecision
Indigestion
Infection, any part of body
Infertility
Inflammation, any part of body
Ingrown nail
Insomnia
Inversion of nipple
Irregular
  heartbeats
  menstruation
  pulse
Irregularity
Irritable, irritability
  adult
  infants
  premenstrual
Irritation
  eye
  skin
  throat
  vulva
Isolation, social
Itching, any part of body

-J-

Jaundice
Jerking, any part of body
Jock itch

-K-

Knot
  breast
  stomach

-L-

Lack of
  confidence
  growth
Lacrimation
Lactation, improper
Lassitude
Leaking, rectal
Lesion, skin
Lethargy
Leukorrhea, vagina
Light
  flashes
  hurts eyes
Lightheadedness
Limping
Listlessness
Locked bowel
Loose stools
Losing mind
Loss of
  appetite
  consciousness
  control (over behavior)
  equilibrium
  hair
  memory
  sense of balance
  senses
  weight
Low
  blood count
  blood pressure
Low or high
  metabolism

SYMPTOMS

-M-

Malaise
Malingering
Mass, any part of body
Masturbation, excessive
Matter, eye
Melena
Membranes, ruptured
Memory
  disturbance
  loss of
Menarche, delayed or
  early
Menopause symptoms
Menorrhagia
Menstrual problems
Mental slowness
Misery, any part of
  body
Movement limitation
Mucus, excessive (nose)

-N-

Nail biting
Nausea
Needles and pins
Nerves, any mention of
Nervous
  breakdown
  stomach
Night sweats
Nightmares
Nodes, enlarged
Nodules
  breast
  skin
Noises
  hearing (psychiatric)
  in ear
Nosebleed
Not feeling well
Numbness

-O-

Obesity
Obsessions
Obstruction, nasal
Odor, vaginal
Oiliness of
  hair
  skin
Oligomenorrhea
Orthopnea
Out of breath
Overaggressivness
Overactivity
Overweight

-P-

Pain, any part of body
Paleness
Pallor
Palpitations
Panic
Paresthesia
Passed, passing
  blood
  out
  stones
Peeling, skin
Personality disturbance
Phlegm
  bloody
  coughing up
  excessive
Phobia
Photophobia
Photosensitivity
Picking or Pulling
  at ears
Pigmentation, skin
Pimples
Pinched nerve
Pinkeye
Plugged ear
Polydipsia
Pooped
Poor heart
Popping ear
Pressure
  back
  chest
  ear
  head
  pelvic
  sinus
Prickly sensation
Prostration
Protrusion eyes
Psychosexual disorders
Pulled muscle
Pus
Pylorospasm
Pyuria

-Q-

Quarrelsome

-R-

Rash
Rattle chest
Red nose
Redness
  eyes
  nose
  skin
Respiratory, respiration
  insufficiency
  labored
  painful
  sighing
Restlessness
Retching
Retention of fluid
Ridges
  nails
  tongue
Rigidity, abdominal
Ringing in head
Roughness, skin
Rubor
Ruddy, skin
Runaway
Rundown
Runny nose
Runs

-S-

Sadness
Sagging breasts
Saliva, excessive
Scaliness, skin
Sciatica

SYMPTOMS

Scratchy throat
Seeing things
Seizures
Semiconscious
Sense of suffocation
Sensation disturbances
Shaken up
Shaking
Shortness of breath
Shuffling steps
Shyness
Sick NOS
  to stomach
Sleep disturbances
Slow pulse
Sluggish
Slurring
Smoking, excessive
Smooth tongue
Sneezing
Snifles
Snoring
Something in throat
Somnolence
Sore(s), except canker
Soreness, any part of body
Spells
Spitting up blood
Splitting nails
Spot on
  nails
  skin
Spotting
  during pregnancy
  vaginal
Sputum
  blood in
  coughing up
  excessive
  pus in
Squinting
Staggering
Stammering
Sterility
Stiffness
Stool
  blood in
  bulky
  fatty
  loose
  mucus in
  pus in
  unusual color or odor
  worms in
Stopped up
  ears
  nose
  sinus
Strain, eye
Stridor
Stuffed up
  nose, nasal
Stumbling
Stupor
Stuttering
Superfluous, hair
Swallowing
  difficulty in
  pain
Swelling, any part of body
Swollen glands
Swimmers ear
Syncope

-T-

Tachycardia
Tearing, eye
Temper problems
Tenderness, any part of body
Tennis elbow
Tension
  nervous
  premenstrual
Throwing up
Thumbsucking
Tickle, throat
Tics
Tightness, chest
Tingling
Tired, tiredness
Tired blood
Toothache
Tremors, trembling
Twitch NOS
  eyelid

-U-

Uncoordinated
Underweight
Unwanted hair
Upset
  emotional
  stomach
Urine abnormality,
  any kind

-V-

Vertigo
Virus NOS
  intestinal
  stomach
  throat
Vomiting NOS
  blood

-W-

Wart NOS
Wasting extremities
Water broke
Watery eyes
Wax, waxy
  ear
  skin
Weak, weakness
Welts
Wheals
Wheezing
Whelps
Whiteheads
Withdrawal
Woozy
Worn out
Worried
Wrinkles
Wrist drop

-Y-

Yellow
  eyes
  skin

Note: See Appendix II of the Medical Coding Manual for the Classification of Operations and Non-Operative Procedures used by HIS, with a general explanation of its content and form. In the following Index of Operations and Non-Operative Procedures, for HIS, names of operations and procedures are listed in alphabetical order. Operations for certain specified conditions are listed in the alphabetical order of the condition. For example: Cataract operation 13; Harelip operation 27; Pilonidal cyst operation 86. Codes for operations which are classified according to site--and which are not classified elsewhere to a particular kind of operation or condition--are found by site under the heading "OPERATION, NEC." The abbreviation "OP NEC," seen frequently in this Index, means "operation not elsewhere classified."

Operations are classifed in nine groups of procedures:

1-Incision	2-Excision	3-Amputation	4-Introduction	5-Endoscopy
6-Repair	7-Destruction	8-Suturing	9-Manipulation	

These procedures are defined as follows:

1. Incision is a cutting into; an opening. Suffixes commonly used are:

   -otomy---a cutting (to cut into)
   -ostomy---a cutting into to form an opening
   -centesis---a puncture (aspiration)

2. Excision is a cutting out. Suffixes commonly used are:

   -ectomy---a cutting out (to cut out, excise, or excision)
   -exeresis---removal (to strip out)

3. Amputation is cutting off. No suffix is used. However, these words mean amputation:

   Disarticulation
   Dismemberment

4. Introduction No suffix is used. However, these words mean introduction:

   Injections Implantations
   Insertions Transfusion

5. Endoscopy is viewing or looking within. The suffix used is:

   -scopy (view)

   In this procedure a scope is used. Some examples of this procedure are:

   Anoscopy--viewing of anus
   Bronchoscopy--viewing of bronchus
   Cystoscopy--viewing of the urinary bladder
   Otoscopy--viewing of the external ear

6. Repair means to form. Suffixes commonly used are:

   -plasty (to form)
   -ostomy (a mouth)
   -desis (a binding)
   -pexy (a fixing)

   Procedures are as follows:
   -plasty (repair or reform) (lengthen or shorten) (graft) (attach or reattach) (advancement) (recessions) (open reduction)
   -ostomy (join together and form permanent openings between two distinct spaces.)
   -desis (fusion) (stabilization) Example: Arthrodesis--a surgical stabilization of a joint.
   -pexy (fixation) (suspension)

7. Destruction is a breaking down. Suffixes commonly used are:

   -clasis (destroy) (to break down)
   -tripsy (crush)
   -lysis (to loosen) (to free)

   Some procedures for which no suffixes are used but are of the destructive type are:
   cauterization (a branding iron)
   debridement (clean out)
   diathermy (heating through)
   fulguration (lightening)

8. Suturing is a sewing. The suffix used is:

   -rrhaphy (a seam)

   Some examples of this procedure are:
   Laryngorrhaphy--suturing of larynx
   Arteriorrhaphy--suturing of artery
   Bronchorrhaphy--suturing of bronchus
   Enterorrhaphy--suturing of intestine

9. Manipulation is handling. Suffixes commonly used are:

   -tasis (a stretching)
   -ectasia (out--a stretched condition or dilatation)

   Some procedures are:
   Closed reduction (of fracture)
   Application (of cast)

-A-

Abortion, therapeutic 69
-by
--cesarean section 74
--dilation and curettage 69
--hysterectomy 68
--intra-amniotic injection (saline) 75

Abscess, drained: See Drainage, by site

Acupuncture 99

Adhesions NEC (See also Lysis, Vol. 3) 54
-abdominal 54
-bladder 57
-gallbladder 54
-intestines 54
-lung 33
-nose, nasal 21
-uterus 54

Air injected into (See also Injection, Vol. 3):
-brain or spinal cord 87
-peritoneum 54
-pleural space (for collapsing lung) 33

Amputation, any part
-arm(s) 84
-leg(s) 84

Anuerysm, repair 39
-by
--excision 38
-coronary artery 36
--bypass 36
-valve 35
--replacement 35

Angiogram: See Arteriogram

Anoscopy 49

Aortogram, aortography 88

Appendectomy (for appendicitis) 47

Appendicitis, operation for 47

Arteriogram, arteriography 88
-veins: See Phlebography

Aspiration (See also Vol. 3)
-bronchus 96
-chest 34
-joint 81
-lung 33
-pleural cavity 34
-spinal (puncture) 03
-trachea 96

-B-

Bandage 93

Biopsy (excisional) (See also OP NEC)
-appendix 45
-artery (any site) 38
-blood vessel (any site) 38
-bone 77
--facial 76
---nasal, nose bones 21
---nasal sinus 22
-brain 01
-cerebral meninges 01
-cervix 67
-colon 45
-duodenum 45
-intestine NEC 45
-joint 80
-uterus 68
--by
---D&C 69

Birthmark removed 86

Block, nerve (by injection) 04

Boil (on skin) lanced, drained 86

Breech delivery or extraction 72

Bronchogram 87

Bronchoscopy 33

Bunion removed 77

Bunionectomy 77

Bursectomy 83
-hand 82

Bypass (See also Vol. 3)
-artery 39
-coronary 36

-C-

Callus removed 86

Cancer, operation for: See OP NEC
-with removal of organ or part: See Removal

Cardiac pacemaker
-adjustment (battery) (electrodes) (pulse generator) 37
-insertion (permanent) (temporary) 37

Carpal tunnel syndrome operation 04

C. A. T. 88

Cataract operation 13

Cauterization (See also OP NEC)
-cervix 67
-larynx 30
-lung 32
-uterus 68
-vocal cords 30

Cesarean (birth) (delivery) (operation) (section) 74

Change
-cast, NEC 97

Chemotherapy, for cancer, NEC 99

Cholecystectomy 51

Circumcision (male) 64
-female 71

Cleft palate operation 27

Clot removed (See also Incision, by site)
-bladder 57
-kidney (without incision) 56
--by incision 55
-ureter (by catheter) (without incision) 56
--by incision 55

Cobalt therapy 92

Colostomy 46

Consultation 89

Corn removed 86

Counseling (for)
-alcoholism 94
-drug addiction 94
-eye 95

Curettage, uterus (with dilation) 69

Cyst operations
-pilonidal 86
-other sites and types: See Excision, lesion, by site

Cystocele operation 70

Cystogram 87

Cystoscopy 57

-D-

D&C 69

Deaf training 95

Decompression: See Vol. 3

Delivery NOS 75
-breech 72
-cesarean 74
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