| Category               | Clinical Grouping      | Diagnosis Code | Description                                      |
|------------------------|------------------------|----------------|--------------------------------------------------|
| Digestive System Diseases | Abdominal Pain        | 56942          | ANAL OR RECTAL PAIN                               |
|                        |                        | 7873           | FLATULENCE ERUCTATION AND GAS PAIN               |
|                        |                        | 78900          | ABDOMINAL PAIN, UNSPECIFIED SITE                 |
|                        |                        | 78901          | ABDOMINAL PAIN RIGHT UPPER QUADRANT              |
|                        |                        | 78902          | ABDOMINAL PAIN LEFT UPPER QUADRANT               |
|                        |                        | 78903          | ABDOMINAL PAIN RIGHT LOWER QUADRANT              |
|                        |                        | 78904          | ABDOMINAL PAIN LEFT LOWER QUADRANT               |
|                        |                        | 78905          | ABDOMINAL PAIN, PERIUMBILIC                      |
|                        |                        | 78906          | ABDOMINAL PAIN, EPIGASTRIC                       |
|                        |                        | 78907          | ABDOMINAL PAIN, GENERALIZED                      |
|                        |                        | 78909          | ABDOMINAL PAIN, OTHER SPECIFIED SITE             |
|                        |                        | 78910          | ABDOMINAL PAIN                                  |
|                        |                        | 78966          | ABDOMINAL TENDERNESS, EPIGASTRIC                 |
|                        |                        | 7897           | COLIC                                            |
|                        |                        | R100           | ACUTE ABDOMEN                                    |
|                        |                        | R1010          | UPPER ABDOMINAL PAIN, UNSPECIFIED               |
|                        |                        | R1011          | RIGHT UPPER QUADRANT PAIN                        |
|                        |                        | R1012          | LEFT UPPER QUADRANT PAIN                         |
|                        |                        | R1013          | EPIGASTRIC PAIN                                  |
|                        |                        | R1030          | LOWER ABDOMINAL PAIN UNSPECIFIED                 |
|                        |                        | R1031          | RIGHT LOWER QUADRANT PAIN                        |
|                        |                        | R1032          | LEFT LOWER QUADRANT PAIN                         |
|                        |                        | R1033          | PERIUMBILICAL PAIN                               |
|                        |                        | R10813         | RT LOWER QUADRANT ABD TENDERNESS                |
|                        |                        | R10816         | EPIGASTRIC ABDOMINAL TENDERNESS                 |
|                        |                        | R1084          | GENERALIZED ABDOMINAL PAIN                       |
|                        |                        | R109           | UNSPECIFIED ABDOMINAL PAIN                       |
| Acute appendicitis     |                        | 5400           | ACUT APPENDICITIS W/GEN PERITONITIS              |
|                        |                        | 5401           | ACUTE APPENDICITIS W/PERITON ABSC                |
|                        |                        | 5409           | ACUT APPENDICITIS W/O PERITONITIS                |
|                        |                        | 541            | APPENDICITIS, UNQUALIFIED                        |
|                        |                        | 542            | OTHER APPENDICITIS                               |
|                        |                        | K352           | ACUTE APPENDICITIS W/GEN PERITONIT               |
|                        |                        | K353           | ACUTE APPENDICITIS W/LOC PERITONIT               |
|                        |                        | K3580          | UNSPECIFIED ACUTE APPENDICITIS                  |
|                        |                        | K3589          | OTHER ACUTE APPENDICITIS                         |
| Constipation, impaction or diarrhea |                    | 56032          | FECAL IMPACTION                                  |
|                        |                        | 56039          | OTHER IMPACTION OF INTESTINE                     |
|                        |                        | 56400          | UNSPECIFIED CONSTIPATION                         |
|                        |                        | 78791          | DIARRHEA                                         |
|                        |                        | K5900          | CONSTIPATION UNSPECIFIED                         |
|                        |                        | K5641          | FECAL IMPACTION                                  |
### Table A2: Component Diagnoses of Clinical Acute Care Categories, continued

| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Digestive System Diseases, continued | Colonic diverticulitis | 56211 | DIVERTICULITIS OF COLON |
| | | K5713 | DVTRCLI SM INT W/O PERF/ABSC W/BL |
| | | K5732 | DVTRCLI LG INT NO PERF/ABSC W/O BL |
| | | K5792 | DVTRCLI PRT UNS NO PERF/ABSC W/O BL |
| | Enteritis or Colitis | 5551 | REGIONAL ENTERITIS LARGE INTESTINE |
| | | 5559 | REGIONAL ENTERITIS UNSPECIFIED SITE |
| | | 5589 | UNS NONINF GASTROENTERIT&COLITIS |
| | | K529 | NONINFECTIVE GE & COLITIS UNS |
| | Gastritis without hemorrhage | 53140 | CHRN/UNS GASTR ULCR W/HEM W/O OBST |
| | | 53190 | GSTR ULCR UNS NO HEMOR-PERF/OBST |
| | | 53390 | PEPTC ULCR UNS NO HEMOR-PERF/OBST |
| | | 53430 | AC GSTROJEU ULCR NO HEMOR-PERF/OBST |
| | | 53490 | GSTROJEU ULCR UNS NO HMOR-PERF/OBST |
| | | 53500 | ACUTE GASTRITIS W/O MENTION HEMOR |
| | | 53530 | ALCOHOLIC GASTRITIS W/O HEMOR |
| | | 53550 | UNS GASTRIT&GASTRODUODIT NO HEMOR |
| | | 53551 | UNS GASTRIT&GASTRODUODENIT W/HEMOR |
| | | K2900 | ACUTE GASTRITIS WITHOUT BLEEDING |
| | | K2970 | GASTRITIS UNS WITHOUT BLEEDING |
| | Gallbladder or biliary tract disease | 57400 | CALCU GB W/ACUT CHOLCYST W/O OBST |
| | | 57401 | CALCU GB W/ACUT CHOLCYST&OBST |
| | | 57410 | CALCU GB W/OTH CHOLCYST W/O OBST |
| | | 57420 | CALCU GB W/O MENTION CHOLCYST/OBST |
| | | 57421 | CALCU GB W/O CHOLCYST W/OBST |
| | | 57430 | CALCU BD W/ACUT CHOLCYST W/O OBST |
| | | 57450 | CALCU BD W/O MENTION CHOLCYST/OBST |
| | | 57451 | CALCU BD W/O CHOLCYST W/OBST |
| | | 57460 | CALCU GB&BD W/AC CHOLCYST W/O OBST |
| | | 57461 | CALCU GB&BD W/ACUT CHOLCYST W/OBST |
| | | 57470 | CALCU GB&BD W/OTH CHOLCYST W/O OBST |
| | | 57471 | CALCU GB&BD W/OTH CHOLCYST W/OBST |
| | | 57480 | CALCU GB&BD CHOLCYST NO OBST |
| | | 57481 | CALCU GB&BD-ACUT&CHRNL CHOLCYST-OBST |
| | | 57490 | CALCU GB&BD W/O CHOLCYST W/O OBST |
| | | 5750 | ACUTE CHOLECYSTITIS |
| | | 57510 | CHOLECYSTITIS, UNSPECIFIED |
| | | 57511 | CHRONIC CHOLECYSTITIS |
| | | 5758 | OTHER SPEC DISORDER GALLBLADDER |
| | | 5762 | OBSTRUCTION OF BILE DUCT |
| | | 5768 | OTHER SPEC DISORDERS BILIARY TRACT |
| | | 75169 | OTH CONGN ANOMALY GB BDS&LIVER |
| | | 99741 | RETAIND CHOLELITHESIS FLW CHOLECYST |
| | | K8000 | CALCU GB W/AC CHOLECYST W/O OBST |
| | | K8012 | CALCU GB W/AC CHRN CHOLECYST NO OBST |
| | | K8013 | CALCU GB W/AC CHRN CHOLECYST W/OBST |
| | | K8020 | CALCU GB W/O CHOLECYST W/O OBST |
| | | K8021 | CALCU GB W/O CHOLECYST W/OBST |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Digestive System Diseases, continued | Gallbladder or biliary tract disease, continued | K8044 | CALCULUS BD W/CHRONIC CHOLECYSTITIS W/O OBSTRUCTION |
| | | K8050 | CALCULUS BD NO CHOLANG/CHOLECYSTITIS NO OBST |
| | | K8062 | CALCULUS GB BD W/ACUTE CHOLECYSTITIS W/O OBST |
| | | K8064 | CALCULUS GB BD W/CHRONIC CHOLECYSTITIS NO OBST |
| | | K8065 | CALCULUS GB BD W/CHRONIC CHOLECYSTITIS W/O OBST |
| | | K8070 | CALCULUS GB BD W/O CHOLECYSTITIS W/O OBST |
| | | K8080 | OTH CHOLELITHIASIS W/O OBSTRUCTION |
| | | K810 | ACUTE CHOLECYSTITIS |
| | | K819 | CHOLECYSTITIS UNSPECIFIED |
| | | K828 | OTHER SPECIFIC DISEASES GALLBLADDER |
| | | K829 | DISEASE OF GALLBLADDER UNSPECIFIED |
| | | K8510 | BILARY ACUTE PANCREATITIS W/O NEC/INF |
| | | K210 | GERD WITH ESOPHAGITIS |
| | | K219 | GERD WITHOUT ESOPHAGITIS |
| GERD, esophagitis, or esophageal stricture | | 53010 | UNSPECIFIED ESOPHAGITIS |
| | | 53011 | REFLUX ESOPHAGITIS |
| | | 5303 | STRUCTURE AND STENOSIS OF ESOPHAGUS |
| | | 53081 | ESOPHAGEAL REFLUX |
| | | K210 | GERD WITH ESOPHAGITIS |
| | | K219 | GERD WITHOUT ESOPHAGITIS |
| Upper or lower GI bleeding, including due to ulcerative disease | | 53100 | ACUTE GASTRIC ULCER W/HEMORRHAGE W/O OBST |
| | | 53340 | CHRONIC/UNSPELLED PEPTIC ULCER W/HEMORRHAGE W/O OBST |
| | | 53400 | ACUTE GASTROJEJUNAL ULCER W/HEMORRHAGE W/O OBST |
| | | 53440 | CHRONIC/UNSPELLED GASTROJEJUNAL ULCER W/HEMORRHAGE |
| | | 53470 | CHRONIC GASTROJEJUNAL ULCER NO HEMORR-PREF/OBST |
| | | 56210 | DIVERTICULOSIS OF COLON |
| | | 56212 | DIVERTICULOSIS COLON W/HEMORRHAGE |
| | | 5693 | HEMORRHAGE OF RECTUM AND ANUS |
| | | 5780 | HEMATEMESIS |
| | | 5781 | BLOOD IN STOOL |
| | | 5789 | UNSPECIFIED HEMORRHAGE GI TRACT |
| | | K226 | GASTRO-ESOPHAGEAL LAC-HEMORRH SYND |
| | | K250 | ACUTE GASTRIC ULCER WITH HEMORRHAGE |
| | | K284 | CHRONIC/UNSPELLED GASTROJEJUNAL ULCER W/HEMORRHAGE |
| | | K625 | HEMORRHAGE OF ANUS AND RECTUM |
| | | K91840 | POSTPROC HEM DS ORG/STR FLW DS PROC |
| Hemorrhoids, external or internal | | 4550 | INTRAL HEMORRHOID W/O MENTION COMP |
| | | 4553 | EXTERNAL HEMORRHOID W/O MENTION COMP |
| | | 4554 | EXTERNAL THROMBOSE WITH HEMORRHOID |
| | | 4556 | UNSPECIFIED HEMORRHOID W/O MENTION COMP |
| | | 4557 | UNSPECIFIED THROMBOSE WITH HEMORRHOID |
| | | 4558 | UNSPECIFIED HEMORRHOID W/OTHER COMP |
| | | K644 | RESIDUAL HEMORRHOIDAL SKIN TAGS |
| Category                                      | Clinical Grouping | Diagnosis Code | Description                                      |
|----------------------------------------------|-------------------|----------------|--------------------------------------------------|
| Digestive System Diseases, continued         | Hernia without obstruction | 55091          | INGUINAL HERNIA RECUR UNILAT/UNS                 |
|                                              |                   | 55121          | INCI VENTRAL HERN W/GANGRENE                     |
|                                              |                   | 5531           | UMB HERN W/O MENTION OBST/GANGREN                |
|                                              |                   | 55320          | UNS VENTRAL HERN W/O OBST/GANGREN                |
|                                              |                   | 55321          | INCI HERN W/O MENTION OBST/GANGREN               |
|                                              |                   | 55329          | OTH VENTRAL HERN W/O OBST/GANGREN                |
|                                              |                   | 5533           | DIAPHRAGMAT HERN W/O OBST/GANGREN                |
|                                              |                   | 5538           | HERN-OTH ABD CAV NO OBST/GANGREN                 |
|                                              |                   | 5539           | HERN ABD CAV W/O OBST/GANGREN                    |
|                                              |                   | K432           | INCI HERNIA W/O OBSTRUCTION/GANGRENG             |
| Nausea or Vomiting                           | 78701             | NAUSEA WITH VOMITING                                |
|                                              | 78702             | NAUSEA ALONE                                           |
|                                              | 78703             | VOMITING ALONE                                         |
|                                              | R110              | NAUSEA                                                |
|                                              | R1110             | VOMITING UNSPECIFIED                                  |
|                                              | R112              | NAUSEA WITH VOMITING                                  |
| GI obstruction (small or large bowel), ileus, volvulus | 55010            | ING HERN W/OBST NO GANGRN UNILT/UNS                  |
|                                              | 55011            | ING HERNIA W/OBST RECUR UNILAT/UNS                    |
|                                              | 55200            | UNILAT/UNSPEC FEM HERN W/OBST                          |
|                                              | 5521             | UMBILICAL HERNIA WITH OBSTRUCTION                     |
|                                              | 55220            | UNSPEC VENTRAL HERNIA W/OBSTRUCTION                   |
|                                              | 55229            | OTHER VENTRAL HERNIA W/OBSTRUCTION                    |
|                                              | 5523             | DIAPHRAGMATIC HERNIA W/OBSTRUCTION                    |
|                                              | 5528             | HERNIA OTH SPEC SITE W/OBSTRUCTION                    |
|                                              | 5529             | HERNIA UNSPEC SITE W/OBSTRUCTION                      |
|                                              | 5601             | PARALYTIC ILEUS                                       |
|                                              | 5602             | VOLVULUS                                              |
|                                              | 56081            | INTEST/PERITON ADHES W/OBSTRUCTION                    |
|                                              | 5609             | UNSPECIFIED INTESTINAL OBSTRUCTION                   |
|                                              | K430             | INCISION HERNIA W/OBST W/O GANCRENE                  |
|                                              | K436             | OTH UNS VNTRL HERN OBSTRCT NO GANGR                  |
|                                              | K460             | UNS ABD HERNIA W/OBST W/O GANCRENE                   |
|                                              | K560             | PARALYTIC ILEUS                                       |
|                                              | K562             | VOLVULUS                                              |
|                                              | K5660            | UNSPECIFIED INTESTINAL OBSTRUCTION                   |
| Pancreatic diagnoses                         | 5770             | ACUTE PANCREATITIS                                    |
|                                              | 5778             | OTHER SPECIFIED DISEASE OF PANCREAS                   |
|                                              | 5779             | UNSPECIFIED DISEASE OF PANCREAS                       |
| Category                          | Clinical Grouping                          | Diagnosis Code | Description                                      |
|----------------------------------|--------------------------------------------|----------------|--------------------------------------------------|
| Digestive System Diseases,      | Miscellaneous GI tract diagnoses           | 0059          | UNSPECIFIED FOOD POISONING                       |
| continued                        |                                            | 5304          | PERFORATION OF ESOPHAGUS                         |
|                                  |                                            | 5305          | DYSKINESIA OF ESOPHAGUS                         |
|                                  |                                            | 53641         | INFECTION OF GASTROSTOMY                        |
|                                  |                                            | 53642         | MECHANICAL COMPLICATION GASTROSTOMY             |
|                                  |                                            | 5368          | DYSPESIA&OTH D/O FUNCT STOMACH                  |
|                                  |                                            | 5374          | FISTULA OF STOMACH OR DUODENUM                  |
|                                  |                                            | 5375          | GASTROPTOSIS                                    |
|                                  |                                            | 53789         | OTH SPEC DISORDER STOMACH&DUODENUM              |
|                                  |                                            | 53909         | OTH COMPLICATIONS GASTRIC BAND PROC             |
|                                  |                                            | 53989         | OTH COMP OTH BARIATRIC PROCEDURE                |
|                                  |                                            | 5570          | ACUTE VASCULAR INSUFF INTESTINE                 |
|                                  |                                            | 5579          | UNSPEC VASCULAR INSUFF INTESTINE                |
|                                  |                                            | 5650          | ANAL FISSURE                                    |
|                                  |                                            | 566           | ABSCESS OF ANAL AND RECTAL REGIONS              |
|                                  |                                            | 56722         | PERITONEAL ABCESS                               |
|                                  |                                            | 5679          | UNSPECIFIED PERITONITIS                         |
|                                  |                                            | 5680          | PERITONEAL ADHESIONS                            |
|                                  |                                            | 56889         | OTHER SPECIFIED DISORDER PERITONEUM             |
|                                  |                                            | 56949         | OTHER SPEC DISORDER RECTUM&ANUS                 |
|                                  |                                            | 56971         | POUCHITIS                                       |
|                                  |                                            | 56981         | FISTULA INTESTINE EXCLD RECTUM&ANUS             |
|                                  |                                            | 56983         | PERFORATION OF INTESTINE                        |
|                                  |                                            | 56989         | OTHER SPECIFIED DISORDER INTESTINES             |
|                                  |                                            | 5715          | CIRRHOSIS LIVER W/O MENTION ALCOHOL             |
|                                  |                                            | 5720          | ABSCESS OF LIVER                                |
|                                  |                                            | 5793          | OTH&UNSPEC POSTSURGICAL NONABSORB                |
|                                  |                                            | 5799          | UNSPEC INTESTINAL MALABSORPTION                 |
|                                  |                                            | 64671         | LIVER DISORDERS PREGNANCY W/DELIV               |
|                                  |                                            | 7515          | OTH CONGENITAL ANOMALIES INTESTINE              |
|                                  |                                            | 7824          | JAUNDICE UNSPECIFIED NOT OF NEWBORN             |
|                                  |                                            | 7843          | APHASIA                                         |
|                                  |                                            | 78720         | DYSPHAGIA UNSPECIFIED                           |
|                                  |                                            | 7877          | ABNORMAL FECES                                  |
|                                  |                                            | 78939         | ABD/PELV SWELL MASS/LUMP OTH SITE               |
|                                  |                                            | 78959         | OTHER ASCITES                                   |
|                                  |                                            | 86503         | SPLEEN INJURY LAC EXTEND PARENCHYMA             |
|                                  |                                            | 86509         | OTH SPLEEN INJ W/O OPN WND IN CAV               |
|                                  |                                            | 9351          | FOREIGN BODY IN ESOPHAGUS                       |
|                                  |                                            | 936           | FOREIGN BODY IN INTESTINE AND COLON             |
|                                  |                                            | 99749         | OTH DIGESTIVE SYSTEM COMPLICATIONS              |
|                                  |                                            | K223          | PERFORATION OF ESOPHAGUS                        |
|                                  |                                            | K279          | PU SITE UNS UNS AC/CHR NO HEM/PERF              |
|                                  |                                            | K3189         | OTHER DISEASES STOMACH AND DUODENUM             |
| Category                        | Clinical Grouping                                                                 | Diagnosis Code | Description                                      |
|--------------------------------|-----------------------------------------------------------------------------------|----------------|--------------------------------------------------|
| Digestive System Diseases,     | Miscellaneous GI tract diagnoses, continued                                        | K565           | INTEST ADHES W/OBST POSTPROC-INFECT              |
| continued                      |                                                                                   | K611           | RECTAL ABSCESS                                   |
|                                |                                                                                   | K6289          | OTHER SPEC DISEASES ANUS & RECTUM                |
|                                |                                                                                   | K631           | PERFORATION INTESTINE NONTRAUMATIC               |
|                                |                                                                                   | K660           | PERITONEAL ADHES POSTPROC POSTINF                |
|                                |                                                                                   | K913           | POSTPROCEDUR INTESTINAL OBSTRUCTION              |
|                                |                                                                                   | K9189          | OTH POSTPROC COMP D/O DIGESTIVE SYS              |
|                                |                                                                                   | K9589          | OTH COMP OTH BARIATRIC PROC                      |
|                                |                                                                                   | S36029A        | UNS CONTUSION SPLEEN INITIAL                     |
|                                |                                                                                   | T18108A        | UNS FB ESOPH CAUS OTH INJ INIT ENC               |
|                                |                                                                                   | V551           | PSGR TRUCK INJ COLL RW TRAIN NT ACC              |
|                                |                                                                                   | V553           | UNS OCC TRUCK INJ COLL TRAIN NT ACC              |
|                                |                                                                                   | Z432           | ENCOUNTER FOR ATTENTION ILEOSTOMY               |
|                                |                                                                                   | Z48815         | ENC SURG AFTRCARE FLW SURG DIGEST                |
|                                |                                                                                   | Z9884          | BARIATRIC SURGERY STATUS                        |
| Orthopedic or Rheumatologic    | Arthritis or surgery for DJD of the extremities (joint replacements or related     | 71103          | PYOGENIC ARTHRITIS, FOREARM                      |
| Diagnoses                      | diagnosis)                                                                        | 71509          | GEN OSTEOARTHROSIS INVLV MX SITES                |
|                                |                                                                                   | 71515          | PRIM LOC OSTEOARTROS PELV RGN&THI               |
|                                |                                                                                   | 71525          | SEC LOC OSTEOARTROS PELV RGN&THI               |
|                                |                                                                                   | 71531          | LOC OSTEOARTHRISIS-SHLDR REGION                 |
|                                |                                                                                   | 71535          | LOC OSTEOARTHRISIS-PELVIC RGN&THIGH             |
|                                |                                                                                   | 71536          | LOC OSTEOARTHRISIS-LOWER LEG                    |
|                                |                                                                                   | 71589          | OSTEOARTROS-MX SITES-NOT SPEC GEN               |
|                                |                                                                                   | 71590          | OSTEOARTROS UNS GEN/LOC UNS SITE                |
|                                |                                                                                   | 71591          | OSTEOARTROS UNS GEN/LOC SHLDR RGN               |
|                                |                                                                                   | 71595          | OSTORTHROS UNS GEN/LOC PELV REG&THI             |
|                                |                                                                                   | 71596          | OSTEOARTROS UNSPEC GEN/LOC LOW LEG              |
|                                |                                                                                   | 71691          | UNSPEC ARTHROPATHY SHOULDER REGION              |
|                                |                                                                                   | 71697          | UNSPECIFIED ARTHROPATHY ANKLE&FOOT             |
|                                |                                                                                   | 71699          | UNSPEC ARTHROPATHY MULTIPLE SITES               |
|                                |                                                                                   | 71831          | RECURRENT DISLOC SHOULDER JOINT                 |
|                                |                                                                                   | 99641          | MECHANICAL LOOSENING PROSTHETIC JNT             |
|                                |                                                                                   | 99646          | ARTICULAR BEARING WEAR PROSTH JNT               |
|                                |                                                                                   | 99647          | OTH MECH COMPL PROSTH JOINT IMPLANT             |
|                                |                                                                                   | 99677          | OTH COMPS DUE INTRL JOINT PROSTH                |
|                                |                                                                                   | M160           | BILATERAL PRIM OSTEOARTHRITIS HIP               |
|                                |                                                                                   | M1611          | UNI PRIM OSTEOARTHRITIS RT HIP                  |
|                                |                                                                                   | M1612          | UNI PRIM OSTEOARTHRITIS LT HIP                  |
|                                |                                                                                   | M167           | OTH UNI SEC OSTEOARTHRITIS HIP                  |
|                                |                                                                                   | M170           | BILATERAL PRIM OSTEOARTHRITIS KNEE              |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Orthopedic or Rheumatologic Diagnoses, continued | Arthritis or surgery for DJD of the extremities (joint replacements or related diagnosis), continued | M1710 | UNI PRIM OSTEOARTHRITIS UNS KNEE |
| | | M1711 | UNI PRIM OSTEOARTHRITIS RT KNEE |
| | | M1712 | UNI PRIM OSTEOARTHRITIS LT KNEE |
| | | M179 | OSTEOARTHRITIS OF KNEE UNSPECIFIED |
| | | M1990 | UNSPECIFIED OSTEOARTHRITIS UNS SITE |
| | | M960 | PSEUDARTHROSIS AFTER FUS/ARTHRODSIS |
| | | T84033A | MECH LOS INT LT KNEE PROS INT INIT |
| | | T84092A | OTH MECH COMP INT RT KNEE PROS INIT |
| | | V4365 | KNEE JOINT REPLACEMENT OTHER MEANS |
| | | V5481 | AFTERCARE FOLLOW JOINT REPLACEMENT |
| | | Z471 | AFTERCARE FOLLOW JNT REPLACE SURG |
| Back or neck pain | | 7231 | CERVICALGIA |
| | | 7241 | PAIN IN THORACIC SPINE |
| | | 7242 | LUMBAGO |
| | | 7243 | SCIATICA |
| | | 7245 | UNSPECIFIED BACKACHE |
| | | 7248 | OTHER SYMPTOMS REFERABLE TO BACK |
| | | 8460 | SPRRAIN AND STRAIN OF LUMBOSACRAL |
| | | 8470 | NECK SPRRAIN AND STRAIN |
| | | 8471 | THORACIC SPRRAIN AND STRAIN |
| | | 8472 | LUMBAR SPRRAIN AND STRAIN |
| | | M5416 | RADICULOPATHY LUMBAR REGION |
| | | M542 | CERVICALGIA |
| | | M5440 | LUMBAGO WITH SCIATICA UNSIDE |
| | | M5441 | LUMBAGO WITH SCIATICA RIGHT SIDE |
| | | M5442 | LUMBAGO WITH SCIATICA LEFT SIDE |
| | | M545 | LOW BACK PAIN |
| | | M546 | PAIN IN THORACIC SPINE |
| | | M549 | DORSALGIA UNSPECIFIED |
| | | M62830 | MUSCLE SPASM OF BACK |
| | | S134XXA | SPRRAIN LIG CERV SPINE INITIAL ENC |
| | | S139XXA | SPRRAIN JNT LIG UNS PARTS NECK INIT |
| | | S161XXA | STRN MUSC FASC TENDON NECK LEVEL INT |
| | | S335XXA | SPRRAIN LIGAMENTS LUMBAR SPN INITIAL |
| | | S39012A | STRAIN MUSC FASC TENDON LW BACK INT |
| Tendonitis, Bursitis, Joint effusion | | 72611 | CALCIFYING TENDINITIS OF SHOULDER |
| | | 72612 | BICIPITAL TENOSYNOVITIS |
| | | 7265 | ENTHESOPATHY OF HIP REGION |
| | | 72709 | OTHER SYNOVITIS AND TENOSYNOVITIS |
| | | M7521 | BICIPITAL TENDINITIS RIGHT SHOULDER |
| | | 72610 | UNSPEC D/O BURS&TEND SHLDR REGION |
| | | 7273 | OTHER BURSITIS DISORDERS |
| | | M7041 | PREPATELLAR BURSITIS RIGHT KNEE |
| | | M7052 | OTHER BURSITIS OF KNEE LEFT KNEE |
| | | 71903 | EFFUSION OF FOREARM JOINT |
| | | 71906 | EFFUSION OF LOWER LEG JOINT |
| | | 71909 | EFFUSION OF JOINT, MULTIPLE SITES |
| | | M25461 | EFFUSION RIGHT KNEE |
| | | M25462 | EFFUSION LEFT KNEE |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Orthopedic or Rheumatologic Diagnoses, continued | Fracture | 8052 | CLOS FX DORS VERT W/O SP CORD INJR |
|  |  | 8054 | CLOS FX LUMB VERT W/O SP CORD INJR |
|  |  | 8056 | CLOS FX SACRUM/COCCYX W/O CORD INJR |
|  |  | 80700 | CLOSED FRACTURE OF RIB, UNSPECIFIED |
|  |  | 80701 | CLOSED FRACTURE OF ONE RIB |
|  |  | 80702 | CLOSED FRACTURE OF TWO RIBS |
|  |  | 80709 | CLOS FRACTURE MULTIPLE RIBS UNSPEC |
|  |  | 81000 | UNSPEC PART CLOSED FRACTURE CLAV |
|  |  | 81001 | CLOSED FRACTURE STERNAL END CLAV |
|  |  | 81200 | CLOS FX UNSPEC PART UPPER END HUM |
|  |  | 81203 | CLOS FRACTURE GT TUBEROSITY HUMERUS |
|  |  | 81209 | OTH CLOS FX UPPER END HUMERUS |
|  |  | 81220 | CLOSED FRACTURE UNSPEC PART HUMERUS |
|  |  | 81221 | CLOSED FRACTURE OF SHAFT OF HUMERUS |
|  |  | 81241 | CLOS FRACTURE SUPRACONDYLAR HUMERUS |
|  |  | 81243 | CLOS FRACTURE MEDIAL CONDYLE HUM |
|  |  | 81305 | CLOSED FRACTURE OF HEAD OF RADIUS |
|  |  | 81307 | OTH&UNSPEC CLOS FX PROX END RADIUS |
|  |  | 81341 | CLOSED COLLES FRACTURE |
|  |  | 81342 | OTH CLOS FRACTURES DIST END RADIUS |
|  |  | 81381 | CLOSED FRACTURE UNSPEC PART RADIUS |
|  |  | 81383 | CLOSED FRACTURE UNSPECIFIED PART RA |
|  |  | 81400 | UNSPEC CLOSED FRACTURE CARPAL BONE |
|  |  | 81401 | CLOS FRACTURE NAVICULAR BONE WRIST |
|  |  | 81500 | CLOS FRACTURE MC BONE SITE UNSPEC |
|  |  | 81502 | CLOS FRACTURE BASE OTH MC BONE |
|  |  | 81504 | CLOS FRACTURE NECK METACARPAL BONE |
|  |  | 81600 | CLOS FX UNSPEC PHALNX/PHALANG HAND |
|  |  | 81601 | CLOS FX MID/PROX PHALNX/PHALANG HND |
|  |  | 81602 | CLOS FX DIST PHALNX/PHALANG HAND |
|  |  | 81612 | OPEN FX DIST PHALNX/PHALANG HAND |
|  |  | 82020 | CLOS FX UNSPEC TROCH SECTION FEM |
|  |  | 82021 | CLOS FX INTERTROCH SECTION FEM |
|  |  | 82123 | CLOSED SUPRACONDYLAR FRACTURE FEMUR |
|  |  | 82300 | CLOSED FRACTURE UPPER END TIBIA |
|  |  | 82302 | CLOS FRACTURE UPPER END FIB W/TIBIA |
|  |  | 8242 | CLOSED FRACTURE LATERAL MALLEOLUS |
|  |  | 8244 | CLOSED BIMALLEOLAR FRACTURE |
|  |  | 8248 | UNSPECIFIED CLOSED FRACTURE ANKLE |
|  |  | 8250 | CLOSED FRACTURE OF CALCANEUS |
|  |  | 82521 | CLOSED FRACTURE OF ASTRAGALUS |
|  |  | 82525 | CLOSED FRACTURE OF METATARSAL BONE |
|  |  | 8260 | CLOS FRACTURE 1/MORE PHALANGES FOOT |
|  |  | 8261 | OPEN FRACTURE 1/MORE PHALANGES FOOT |
|  |  | 8270 | OTH MX&ILL-DEFINED CLOS FX LOW LIMB |
|  |  | 83100 | CLOS DISLOC SHOULDER UNSPEC SITE |
| Category                                      | Clinical Grouping               | Diagnosis Code | Description                                      |
|----------------------------------------------|---------------------------------|----------------|-------------------------------------------------|
| Orthopedic or Rheumatologic Diagnoses, continued | Fracture, continued             | 83101          | CLOSED ANTERIOR DISLOCATION HUMERUS             |
|                                              |                                 | 83104          | CLOSED DISLOCATION AC                            |
|                                              |                                 | S22088A        | OTH FX T11-T12 VERT INITIAL CLOS FX              |
|                                              |                                 | S2211X A       | FX MANUBRIUM INITIAL CLOS FRACTURE               |
|                                              |                                 | S2232XA        | FX 1 RIB LT SIDE INITIAL CLOS FX                 |
|                                              |                                 | S32038A        | OTH FX THIRD LUMB VERT INIT CLOS FX              |
|                                              |                                 | S3210X A       | UNS FX SACRUM INITIAL CLOS FRACTURE              |
|                                              |                                 | S322XXA        | FX COCCYX INITIAL CLOS FRACTURE                  |
|                                              |                                 | S42022A        | DSPL FX SHFT LT CLAV INIT CLOS FX                |
|                                              |                                 | S42192A        | FX OTH PRT SCAP LT SHLD INIT CLO FX              |
|                                              |                                 | S52502A        | UNS FX LOW LT RADIUS INIT CLOS FX                |
|                                              |                                 | S62311A        | DSPL FX B 2ND MC BN LH INT CLOS FX               |
|                                              |                                 | S62606A        | FX UNS PHAL RT LF INIT CLOS FX                   |
|                                              |                                 | S62617A        | DSPL FX PROX PHAL LT LF INIT CLO FX              |
|                                              |                                 | S62647A        | NDSPLC FX PROX PHAL LT LF INIT CLO               |
|                                              |                                 | S6292XA        | UNS FX LT WRST HAND INITIAL CLOS FX              |
|                                              |                                 | S72114A        | NDSPLC FX GT TROCH RT FEM INIT CLO               |
|                                              |                                 | S82111A        | DSPL FX RT TIB SPINE INIT CLOS FX                |
|                                              |                                 | S82141A        | DSPL BICONDYLAR FX RT TIB INIT CLO               |
|                                              |                                 | S82142A        | DSPL BICONDYLAR FX LT TIB INIT CLO               |
|                                              |                                 | S82401A        | UNS FX SHFT RT FIB INITIAL CLOS FX               |
|                                              |                                 | S82409A        | UNS FX SHFT UNS FIB INITIAL CLOS FX              |
|                                              |                                 | S82821A        | TORUS FX LOW RT FIB INITIAL CLOS FX              |
|                                              |                                 | S82831A        | OTH FX UP LOW RT FIB INIT CLOS FX                |
|                                              |                                 | S82839A        | OTH FX UP LOW UNS FIB INIT CLOS FX               |
|                                              |                                 | S82891A        | OTH FX RT LOWER LEG INITIAL CLOS FX              |
|                                              |                                 | S92352A        | DSPL FX 5TH MT BN LT FT INIT CLO FX              |
|                                              |                                 | V5423          | AFTERCARE HEALING PATH FRACTURE HIP              |
|                                              | Lower extremity pain            | 71945          | PAIN IN JOINT PELVIC REGION & THIGH              |
|                                              |                                 | 71946          | PAIN IN JOINT, LOWER LEG                        |
|                                              |                                 | 71947          | PAIN IN JOINT, ANKLE AND FOOT                    |
|                                              |                                 | M25561         | PAIN IN RIGHT KNEE                               |
|                                              |                                 | M25562         | PAIN IN LEFT KNEE                                |
|                                              |                                 | M25569         | PAIN IN UNSPECIFIED KNEE                         |
|                                              |                                 | M79604         | PAIN IN RIGHT LEG                                |
|                                              |                                 | M79605         | PAIN IN LEFT LEG                                 |
|                                              |                                 | M79651         | PAIN IN RIGHT THIGH                              |
|                                              |                                 | M79661         | PAIN IN RIGHT LOWER LEG                         |
|                                              |                                 | M79662         | PAIN IN LEFT LOWER LEG                           |
| Category                                      | Clinical Grouping                     | Diagnosis Code | Description                                |
|----------------------------------------------|---------------------------------------|----------------|--------------------------------------------|
| Orthopedic or Rheumatologic Diagnoses, continued | Upper extremity pain                  | 71941          | PAIN IN JOINT, SHOULDER REGION             |
|                                              |                                       | 71942          | PAIN IN JOINT, UPPER ARM                   |
|                                              |                                       | 71943          | PAIN IN JOINT, FOREARM                     |
|                                              |                                       | 71944          | PAIN IN JOINT, HAND                        |
|                                              |                                       | M25511         | PAIN IN RIGHT SHOULDER                     |
|                                              |                                       | M25512         | PAIN IN LEFT SHOULDER                      |
|                                              |                                       | M25521         | PAIN IN RIGHT ELBOW                        |
|                                              |                                       | M25522         | PAIN IN LEFT ELBOW                         |
|                                              |                                       | M25531         | PAIN IN RIGHT WRIST                        |
|                                              |                                       | M7542          | IMPINGEMENT SYNDROME LEFT SHOULDER         |
|                                              |                                       | M79631         | PAIN IN RIGHT FOREARM                      |
|                                              | Rheumatologic condition (e.g. SLE, Rheumatoid arthritis, Gout) | 135            | SARCOIDOSIS                                |
|                                              |                                       | 27401          | ACUTE GOUTY ARTHROPATHY                    |
|                                              |                                       | 7100           | SYSTEMIC LUPUS ERYTHEMATOSUS               |
|                                              |                                       | 7140           | RHEUMATOID ARTHRITIS                       |
|                                              |                                       | M329           | SYSTEMIC LUPUS ERYTHMATOSUS UNS            |
|                                              |                                       | 2749           | GOUT, UNSPECIFIED                          |
|                                              |                                       | M10072         | IDIOPATHIC GOUT LEFT ANKLE AND FOOT        |
|                                              |                                       | M109           | GOUT UNSPECIFIED                           |
|                                              | Sprain or strain of the extremity (excluding neck/back strains) | 8360           | TEAR MED CART/MENISCUS KNEE CURRENT        |
|                                              |                                       | 8401           | CORACOCLAVICULAR SPRAIN AND STRAIN         |
|                                              |                                       | 8404           | ROTATOR CUFF SPRAIN AND STRAIN             |
|                                              |                                       | 8408           | SPRAIN&STRN OTH SITE SHLDR&UP ARM          |
|                                              |                                       | 8409           | SPRAIN&STRAIN UNS SITE SHLDR&UP ARM        |
|                                              |                                       | 8419           | SPRAIN&STRAIN UNS SITE ELB&FORARM          |
|                                              |                                       | 84200          | SPRAIN&STRAIN UNSPEC SITE WRIST            |
|                                              |                                       | 84209          | OTHER WRIST SPRAIN AND STRAIN              |
|                                              |                                       | 84210          | SPRAIN&STRAIN UNSPECIFIED SITE HAND        |
|                                              |                                       | 8438           | SPRAIN&STRAIN OTH SPEC SITE HIP&THI        |
|                                              |                                       | 8439           | SPRAIN&STRAIN UNSPEC SITE HIP&THIGH        |
|                                              |                                       | 8441           | SPRAIN AND STRAIN OF MCL OF KNEE           |
|                                              |                                       | 8448           | SPRAIN&STRN OTH SPEC SITE KNEE&LEG         |
|                                              |                                       | 8449           | SPRAIN&STRAIN UNSPEC SITE KNEE&LEG         |
|                                              |                                       | 84500          | UNSPEC SITE ANKLE SPRAIN&STRAIN            |
|                                              |                                       | 84510          | SPRAIN&STRAIN UNSPECIFIED SITE FOOT        |
|                                              |                                       | 8469           | UNS SITE SACROIL RGN SPRAIN&STRAIN         |
|                                              |                                       | 8474           | SPRAIN AND STRAIN OF COCCYX                |
|                                              |                                       | 8479           | SPRAIN&STRAIN UNSPECIFIED SITE BACK        |
|                                              |                                       | 8481           | SPRAIN AND STRAIN OF JAW                   |
|                                              |                                       | 8483           | SPRAIN AND STRAIN OF RIBS                  |
|                                              |                                       | 8489           | UNSPECIFIED SITE OF SPRAIN&STRAIN          |
| Category | Clinical Grouping                                                                                                                                                                                                 | Diagnosis Code | Description                                                                 |
|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------------|
| Orthopedic or Rheumatologic Diagnoses, continued | Sprain or strain of the extremity (excluding neck/back strains), continued                                                                                                                                                                                                 | S29002A        | UNS INJ MSC TEND BACK WALL TH INIT                                       |
|          |                                                                                                                                                                                                                                                                           | S43401A        | UNS SPRAIN RT SHOULDER JOINT INIT                                        |
|          |                                                                                                                                                                                                                                                                           | S43402A        | UNS SPRAIN LT SHOULDER JOINT INIT                                        |
|          |                                                                                                                                                                                                                                                                           | S46811A        | STRN OTH MSC F TEND SH UA RA INIT                                         |
|          |                                                                                                                                                                                                                                                                           | S46912A        | STRN UNS MSC F TND SHLDR UA LA INIT                                      |
|          |                                                                                                                                                                                                                                                                           | S63501A        | UNSPECIFIED SPRAIN RT WRIST INITIAL                                      |
|          |                                                                                                                                                                                                                                                                           | S63613A        | UNS SPRAIN LT MIDDLE FINGER INITIAL                                      |
|          |                                                                                                                                                                                                                                                                           | S63650A        | SPRAIN MCP JOINT RT INDX FINGER INIT                                     |
|          |                                                                                                                                                                                                                                                                           | S73101A        | UNSPECIFIED SPRAIN RT HIP INITIAL                                       |
|          |                                                                                                                                                                                                                                                                           | S76012A        | STRAIN MUSC FASC TENDON LT HIP INIT                                      |
|          |                                                                                                                                                                                                                                                                           | S83421A        | SPRAIN LCL RIGHT KNEE INITIAL ENC                                        |
|          |                                                                                                                                                                                                                                                                           | S8390XA        | SPRAIN UNS SITE UNS KNEE INITIAL                                        |
|          |                                                                                                                                                                                                                                                                           | S8391XA        | SPRAIN UNS SITE RT KNEE INITIAL                                          |
|          |                                                                                                                                                                                                                                                                           | S8392XA        | SPRAIN UNS SITE LT KNEE INITIAL                                          |
|          |                                                                                                                                                                                                                                                                           | S86111A        | STRAIN OTH M&T POST LOW RT LEG INIT                                      |
|          |                                                                                                                                                                                                                                                                           | S86811A        | STRAIN OTH MSC TEND LOW RT LEG INIT                                      |
|          |                                                                                                                                                                                                                                                                           | S93401A        | SPRAIN UNS LIGAMENT RT ANKLE INIT                                        |
|          |                                                                                                                                                                                                                                                                           | S93402A        | SPRAIN UNS LIGAMENT LT ANKLE INIT                                        |
|          |                                                                                                                                                                                                                                                                           | S93431A        | SPRAIN TIBIOFIBULAR LIG RT ANK INIT                                      |
|          |                                                                                                                                                                                                                                                                           | S93601A        | UNSPECIFIED SPRAIN RT FOOT INITIAL                                      |
|          |                                                                                                                                                                                                                                                                           | S93602A        | UNSPECIFIED SPRAIN LT FOOT INITIAL                                      |
|          |                                                                                                                                                                                                                                                                           | S93621A        | SPRAIN TMT LIGAMENT RT FOOT INIT                                         |
|          | Diagnoses of the spinal column or spinal cord                                                                                                                                                                                                                       | 7210           | CERV SPONDYLOSIS WITHOUT MYELOPATHY                                      |
|          |                                                                                                                                                                                                                                                                           | 7211           | CERVICAL SPONDYLOSIS W/ MYELOPATHY                                       |
|          |                                                                                                                                                                                                                                                                           | 7213           | LUMBOSAC SPONDYLOSIS W/O MYELOPATHY                                      |
|          |                                                                                                                                                                                                                                                                           | 7220           | DISPLCMT CERV DISC W/O MYELOPATHY                                       |
|          |                                                                                                                                                                                                                                                                           | 72210          | DISPLCMT LUMBAR DISC W/O MYELOPATHY                                      |
|          |                                                                                                                                                                                                                                                                           | 7222           | DISPLCMT DISC SITE UNS W/O MYELOPATHY                                    |
|          |                                                                                                                                                                                                                                                                           | 7224           | DEGEN CERV INTERVERTEBRAL DIS                                            |
|          |                                                                                                                                                                                                                                                                           | 72252          | DEGEN LUMB/LUMBOSAC INTERVERT DIS                                        |
|          |                                                                                                                                                                                                                                                                           | 72271          | INTERVERT CERV DISC D/O-MYELOPATHY                                       |
|          |                                                                                                                                                                                                                                                                           | 72283          | POSTLAMINECT SYNDROME LUMBAR REGION                                      |
|          |                                                                                                                                                                                                                                                                           | 7238           | OTH SYNDROMES AFFECT CERV REGION                                         |
|          |                                                                                                                                                                                                                                                                           | 72402          | SPINAL STEN LUMB W/O NEUROGEN CLAUD                                      |
|          |                                                                                                                                                                                                                                                                           | 72403          | SPINAL STENOS LUMB NEUROGEN CLAUD                                       |
|          |                                                                                                                                                                                                                                                                           | 7244           | THOR/LUMBOSACRL NURIT/RADICULIT UNS                                      |
|          |                                                                                                                                                                                                                                                                           | 73710          | KYPHOSIS ACQUIRED POSTURAL                                              |
|          |                                                                                                                                                                                                                                                                           | 7384           | ACQUIRED SPONDYLOLISTHESIS                                               |
|          |                                                                                                                                                                                                                                                                           | 75612          | CONGENITAL SPONDYLOLISTHESIS                                             |
|          |                                                                                                                                                                                                                                                                           | M4316          | SPONDYLOLISTHESIS LUMBAR REGION                                          |
|          |                                                                                                                                                                                                                                                                           | M4317          | SPONDYLOLISTHESIS LUMBOSACRAL RGN                                       |
|          |                                                                                                                                                                                                                                                                           | M4624          | OSTEOMYELITIS VERTEBRA THORACIC RGN                                     |
|          |                                                                                                                                                                                                                                                                           | M4646          | DISCITIS UNSPECIFIED LUMBAR REGION                                       |
|          |                                                                                                                                                                                                                                                                           | M4716          | OTH SPONDYLOSIS W/MYELOPATHY LUMB                                       |
|          |                                                                                                                                                                                                                                                                           | M47812         | SPONDYLS W/O MYEO-/RADICULOP CERV                                       |
|          |                                                                                                                                                                                                                                                                           | M47816         | SPONDYLS W/O MYEO-/RADICULOP LUMB                                       |
|          |                                                                                                                                                                                                                                                                           | M479           | SPONDYLOSIS UNSPECIFIED                                                 |
| Category                                                                 | Clinical Grouping                                                                 | Diagnosis Code | Description                                                |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------|------------------------------------------------------------|
| Orthopedic or Rheumatologic Diagnoses, continued                        | Diagnoses of the spinal column or spinal cord, continued                          | M4800          | SPINAL STENOSIS SITE UNSPECIFIED                           |
|                                                                         |                                                                                  | M4802          | SPINAL STENOSIS CERVICAL REGION                             |
|                                                                         |                                                                                  | M4806          | SPINAL STENOSIS LUMBAR REGION                               |
|                                                                         |                                                                                  | M5002          | CERV DISC D/O W/MYELOPATHY MID-CERV                         |
|                                                                         |                                                                                  | M50022         | CERV DISC D/O C5-C6 LVL MYELOPATHY                         |
|                                                                         |                                                                                  | M50122         | CERVICAL DISC DISORDER C5-C6 LVL RP                        |
|                                                                         |                                                                                  | M5020          | OTH CERV DISC DISPLACEMENT UNS CERV                        |
|                                                                         |                                                                                  | M50223         | OTH CERVICAL DISC DISPL C6-C7 LEVEL                       |
|                                                                         |                                                                                  | M50322         | OTHER CERVICAL DISC DEG C5-C6 LEVEL                        |
|                                                                         |                                                                                  | M5116          | IV DISC D/O W/RADICULOPATHY LUMB                            |
|                                                                         |                                                                                  | M5117          | IV DISC D/O W/RADICULOPATHY LS RGN                        |
|                                                                         |                                                                                  | M5126          | OTH IV DISC DISPLACEMENT LUMBAR RGN                        |
|                                                                         |                                                                                  | M5136          | OTH IV DISC DEGEN LUMBAR REGION                             |
|                                                                         |                                                                                  | M5412          | RADICULOPATHY CERVICAL REGION                              |
|                                                                         |                                                                                  | S14101D        | UNS INJURY C1 LEVEL C-SPN CORD SUB                         |
| Miscellaneous orthopedic or rheumatologic diagnosis                     |                                                                                  | 725            | POLYMYALGIA RHEUMATICA                                    |
|                                                                         |                                                                                  | 72691          | EXOSTOSIS OF UNSPECIFIED SITE                              |
|                                                                         |                                                                                  | 73008          | ACUTE OSTEOMYELITIS OTHER SPEC SITE                        |
|                                                                         |                                                                                  | 73819          | OTHER SPEC ACQUIRED DEFORMITY HEAD                          |
|                                                                         |                                                                                  | 9273           | CRUSHING INJURY OF FINGER                                  |
|                                                                         |                                                                                  | 99667          | INF&INFLAM REACT INT ORTH DEVICE                           |
|                                                                         |                                                                                  | M2392          | UNS INTERNAL DERANGEMENT LEFT KNEE                        |
|                                                                         |                                                                                  | M6281          | MUSCLE WEAKNESS GENERALIZED                                |
|                                                                         |                                                                                  | M7122          | SYNOVIAL CYST POP SPACE LEFT KNEE                          |
|                                                                         |                                                                                  | M779           | ENTHESOPATHY UNSPECIFIED                                   |
|                                                                         |                                                                                  | M797           | FIBROMYALGIA                                              |
|                                                                         |                                                                                  | S67192A        | CRUSHING INJURY RT MID FINGER INIT                         |
| Vascular, cardiovascular and cerebrovascular diseases                   | Acute coronary syndromes, Coronary Artery Disease, Cardiac Arrest or Congestive heart failure | 41011          | ACUT MI OTH ANT WALL INIT EPIS CARE                        |
|                                                                         |                                                                                  | 41040          | ACUT MI OTH INF WALL EPIS CARE UNS                         |
|                                                                         |                                                                                  | 41041          | ACUT MI OTH INF WALL INIT EPIS CARE                        |
|                                                                         |                                                                                  | 41071          | ACUT MI SUBNDOCRDL INFARC INIT EOC                         |
|                                                                         |                                                                                  | 4111           | INTERMEDIATE CORONARY SYNDROME                             |
|                                                                         |                                                                                  | 41401          | COR Atheroslero NATIVE COR ART                             |
|                                                                         |                                                                                  | 4275           | CARDIAC ARREST                                            |
|                                                                         |                                                                                  | I200           | UNSTABLE ANGINA                                           |
|                                                                         |                                                                                  | I214           | NON-ST ELEVATION MYOCARDIAL INFARC                        |
|                                                                         |                                                                                  | I2510          | ASHD NATIVE CA W/O ANGINA PECTORIS                        |
|                                                                         |                                                                                  | I25118         | ASHD NATIVE CA W/OTH FORMS AP                              |
|                                                                         |                                                                                  | I25119         | ASHD NATIV CA W/UNS ANGINA PECTORIS                       |
|                                                                         |                                                                                  | I469           | CARDIAC ARREST CAUSE UNSPECIFIED                           |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|-------------------|----------------|-------------|
| Vascular, cardiovascular and cerebrovascular diseases, continued | Acute coronary syndromes, Coronary Artery Disease, Cardiac Arrest or Congestive heart failure, continued | 40291 | HTN HRT DISEASE UNSPEC W/HRT FAIL |
| | | 40491 | HTN H & CKD UNS HF&CKD ST I-IV/UN |
| | | 4280 | CHF UNSPECIFIED |
| | | 1110 | HTN HEART DISEASE W/HEART FAIL |
| | | 1132 | HTN HRT CKD W/HEF W/STAGE 5 CKD/ESRD |
| | Cardiac dysrhythmias & palpitations | 42611 | FIRST DEGREE ATRIOVENTRICULAR BLOCK |
| | | 4271 | PAROXYSMAL VENTRICULAR TACHYCARDIA |
| | | 42731 | ATRIAL FIBRILLATION |
| | | 42781 | SINOATRIAL NODE DYSFUNCTION |
| | | 42789 | OTHER SPEC CARDIAC DYSRHYTHMIAS |
| | | 4279 | UNSPECIFIED CARDIAC DYSRHYTHMIA |
| | | 7850 | UNSPECIFIED TACHYCARDIA |
| | | 7851 | PALPITATIONS |
| | | 1471 | SUPRAVENTRICULAR TACHYCARDIA |
| | | 1480 | PAROXYSMAL ATRIAL FIBRILLATION |
| | | 14891 | UNSPECIFIED ATRIAL FIBRILLATION |
| | | 14901 | VENTRICULAR FIBRILLATION |
| | | 1498 | OTHER SPECIFIED CARDIAC ARRHYTHMIAS |
| | | R000 | TACHYCARDIA UNSPECIFIED |
| | | R001 | BRADYCARDIA UNSPECIFIED |
| | | R002 | PALPITATIONS |
| | | R008 | OTHER ABNORMALITIES OF HEART BEAT |
| | Chest Pain & Angina | 4131 | PRINZMETAL ANGINA |
| | | 4139 | OTHER&UNSPECIFIED ANGINA PECTORIS |
| | | 78650 | CHEST PAIN UNSPECIFIED |
| | | 78651 | PRECORDIAL PAIN |
| | | 78659 | OTHER CHEST PAIN |
| | | 1201 | ANGINA PECTORIS W/DOCUMENTED SPASM |
| | | R072 | PRECORDIAL PAIN |
| | | R0789 | OTHER CHEST PAIN |
| | | R079 | CHEST PAIN UNSPECIFIED |
| | Hypertension & hypertension-mediated disease | 4010 | ESSENTIAL HYPERTENSION, MALIGNANT |
| | | 4019 | UNSPECIFIED ESSENTIAL HYPERTENSION |
| | | 40391 | HTN CKD UNSPEC W/CKD STAGE V/ESRD |
| | | 40501 | SEC RENOVASCULAR HYPERTENSION MALIG |
| | | 4372 | HYPERTENSIVE ENCEPHALOPATHY |
| | | 7962 | ELEVDBP READING WITHOUT DX HTN |
| | | I10 | ESSENTIAL PRIMARY HYPERTENSION |
| | | I120 | HYPERTENSIVE CKD W/STAGE 5 CKD/ESRD |
| | | I160 | HYPERTENSIVE URGENCY |
| Category                                                                 | Clinical Grouping                                                                 | Diagnosis Code | Description                                   |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------|-----------------------------------------------|
| Vascular, cardiovascular and cerebrovascular diseases, continued        | Stroke, Ischemic & Hemorrhagic, and Transient Ischemic Attacks                    | 4329           | UNSPECIFIED INTRACRANIAL HEMORRHAGE          |
|                                                                         |                                                                                   | 43401          | CEREBRAL THROMBOSIS W/INFARCT                |
|                                                                         |                                                                                   | 43411          | CEREBRAL EMBOLISM W/INFARCT                 |
|                                                                         |                                                                                   | 43491          | UNSPEC CEREBRAL ART OCCL W/INFARCT          |
|                                                                         |                                                                                   | 4359           | UNSPEC TRANSIENT CEREBRAL ISCHEMIA           |
|                                                                         |                                                                                   | 436            | ACUT BUT ILL-DEFINED CEREBR VASC DZ          |
|                                                                         |                                                                                   | 4377           | TRANSIENT GLOBAL AMNESIA                    |
|                                                                         |                                                                                   | 43885          | VERTIGO AS LATE EFF CEREBR VASC DZ           |
|                                                                         |                                                                                   | G459           | TRANS CEREBRAL ISCHEMIC ATTACK UNS           |
|                                                                         |                                                                                   | 163411         | CEREB INFARCT EMBO RT MID CEREB ART          |
|                                                                         |                                                                                   | 1639           | CEREBRAL INFARCTION UNSPECIFIED             |
|                                                                         |                                                                                   | 169365         | OTH PARLYT SYN CEREB INFARCT BIL             |
|                                                                         | Venous thromboembolism, non-cerebral thrombosis, or pulmonary embolism            | 41511          | IATROGENIC PULMONARY EMBO&INFARCT            |
|                                                                         |                                                                                   | 41519          | OTH PULMONARY EMBOLISM&INFARCTION            |
|                                                                         |                                                                                   | 45340          | AC VNS EMB&THRMB UNS DP VES LW EXT           |
|                                                                         |                                                                                   | 45341          | AC VNS EMB&THRMB DP VES PRX LW EXT           |
|                                                                         |                                                                                   | 45342          | AC VNS EMB&THRMB DP VES DST LW EXT           |
|                                                                         |                                                                                   | 45350          | CHRN V EMB&THRMB UNS DP VES LW EXT           |
|                                                                         |                                                                                   | 45381          | ACUT VNS EMB&THROMB SUP VNS UP EXT           |
|                                                                         |                                                                                   | 45385          | ACUT VNS EMO&THROMB SUBCLAV VEINS           |
|                                                                         |                                                                                   | 45389          | ACUT VENUS EMB&THROMB OTH SPEC VEINS        |
|                                                                         |                                                                                   | 12699          | OTH PULM EMBO W/O AC COR PULMONALE          |
|                                                                         |                                                                                   | 182401         | AC EMBO THRMB UNS DP VNS RT LW EXT           |
|                                                                         |                                                                                   | 182409         | AC EMBO THRMB UNS DP VN UNS LW EXT           |
|                                                                         |                                                                                   | 182412         | ACUTE EMBO THROMBOS LT FEMORAL VEIN         |
|                                                                         |                                                                                   | 182492         | AC EMBO THRMB OTH DP VN LT LOW EXT           |
|                                                                         |                                                                                   | 182531         | CHRON EMBO THRMB RT POLITEAL VEIN           |
|                                                                         |                                                                                   | T82868A        | THROMB DT VAS PROS DEV IMPL GFT INT         |
|                                                                         | Miscellaneous cardiovascular diagnoses                                            | 2127           | BENIGN NEOPLASM OF HEART                    |
|                                                                         |                                                                                   | 4149           | UNSPEC CHRONIC ISCHEMIC HRT DISEASE         |
|                                                                         |                                                                                   | 42090          | UNSPECIFIED ACUTE PERICARDITIS              |
|                                                                         |                                                                                   | 42091          | ACUTE IDIOPATHIC PERICARDITIS               |
|                                                                         |                                                                                   | 42291          | IDIOPATHIC MYOCARDITIS                     |
|                                                                         |                                                                                   | 4240           | MITRAL VALVE DISORDERS                      |
|                                                                         |                                                                                   | 4241           | AORTIC VALVE DISORDERS                      |
|                                                                         |                                                                                   | 4293           | CARDIOMEGALY                                |
|                                                                         |                                                                                   | 42989          | OTHER ILL-DEFINED HEART DISEASE             |
|                                                                         |                                                                                   | 43310          | OCCL&STENOS CAROTID ART W/O INFARCT         |
|                                                                         |                                                                                   | 4373           | CEREBRAL ANEURYSM, NONRUPTURED              |
|                                                                         |                                                                                   | 4510           | PHLEBITIS&THROMBO SUP VES LWR EXTRM         |
|                                                                         |                                                                                   | 4512           | PHLEBITIS&THROMBOPHLEB LW EXTRM UNS         |
|                                                                         |                                                                                   | 45182          | PHLEBITIS&THROMBO SUP VNS UP EXTREM         |
|                                                                         |                                                                                   | 45184          | PHLEBITIS&THROMBOPHLEB UP EXTRM UNS         |
|                                                                         |                                                                                   | 45189          | PHLEBITIS&THROMBOPHLEBITIS OTH SITE         |
|                                                                         |                                                                                   | 4519           | PHLEBITIS&THROMBOPHLEB UNSPEC SITE          |
|                                                                         |                                                                                   | 4548           | VARICOSE VNS LOW EXTREM W/OTH COMPS         |
|                                                                         |                                                                                   | 4549           | ASYMPTOMATIC VARICOSE VEINS                |
|                                                                         |                                                                                   | 4580           | ORTHOSTATIC HYPOTENSION                     |
| Category                                                                 | Clinical Grouping                                                                 | Diagnosis Code | Description                                      |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------|--------------------------------------------------|
| Vascular, cardiovascular and cerebrovascular diseases, continued        | Miscellaneous cardiovascular diagnoses, continued                                 | 45829          | OTHER IATROGENIC HYPOTENSION                      |
|                                                                         |                                                                                  | 4588           | OTHER SPECIFIED HYPOTENSION                       |
|                                                                         |                                                                                  | 4589           | UNSPECIFIED HYPOTENSION                          |
|                                                                         |                                                                                  | 7464           | CONGEN INSUFFICIENCY AORTIC VALVE                 |
|                                                                         |                                                                                  | 74781          | CONGEN ANOMALY CEREBRVSASC SYSTEM                 |
|                                                                         |                                                                                  | 7852           | UNDIAGNOSED CARDIAC MURMURS                      |
|                                                                         |                                                                                  | 79431          | NONSPECIFIC ABNORMAL ECG                          |
|                                                                         |                                                                                  | 9009           | INJURY UNSPEC BLD VESSEL HEAD&NECK               |
|                                                                         |                                                                                  | 9961           | MECH COMP OTH VASC DEVICE IMPL&GFT               |
|                                                                         |                                                                                  | 9971           | CARDIAC COMPLICATIONS NEC                        |
|                                                                         |                                                                                  | 9972           | PERIPHERL VASCULR COMPLICATION NEC                |
|                                                                         |                                                                                  | 99779          | VASCULAR COMPLICATIONS OTH VESSELS               |
|                                                                         |                                                                                  | 99931          | COMP MEDICAL CARE NEC INF DUE CVC                |
|                                                                         |                                                                                  | 125810         | ATS CA BP GRAFT NO ANGINA PECTORIS               |
|                                                                         |                                                                                  | 1300           | AC NONSPECIFIC IDIOPATH PERICARDIT               |
|                                                                         |                                                                                  | 1341           | NONRHEUMATIC MITRAL VALVE PROLAPSE               |
|                                                                         |                                                                                  | 1671           | CEREBRAL ANEURYSM NONRUPTURED                    |
|                                                                         |                                                                                  | 1713           | ABDOMINAL AORTIC ANEURYSM RUPTURED               |
|                                                                         |                                                                                  | 18390          | ASYMPTOMATIC VARICOS VNS UNS LW EXT              |
|                                                                         |                                                                                  | 1951           | ORTHOSTATIC HYPOTENSION                          |
|                                                                         |                                                                                  | 1959           | HYPOTENSION UNSPECIFIED                         |
|                                                                         |                                                                                  | T82191A        | OTH MECH COMP CARD PULSE GEN INIT                |
|                                                                         |                                                                                  | V5881          | FITTING&ADJ VASCULAR CATHETER                    |
|                                                                         |                                                                                  | 4590           | UNSPECIFIED HEMORRHAGE                           |
|                                                                         |                                                                                  | T82838A        | HEM D/T VASC PROS DEV IMPL GFT INIT              |
| Diseases of the skin and subcutaneous tissue                           | Abscess                                                                          | L02211         | CUTANEOUS ABSCESS OF ABDOMINAL WALL              |
|                                                                         |                                                                                  | L02214         | CUTANEOUS ABSCESS OF GROIN                       |
|                                                                         |                                                                                  | L02216         | CUTANEOUS ABSCESS OF UMBILICUS                   |
|                                                                         |                                                                                  | L02219         | CUTANEOUS ABSCESS TRUNK UNSPECIFIED             |
|                                                                         |                                                                                  | L0231          | CUTANEOUS ABSCESS OF BUTTOCK                     |
|                                                                         |                                                                                  | L02411         | CUTANEOUS ABSCESS OF RIGHT AXILLA                |
|                                                                         |                                                                                  | L02415         | CUTANEOUS ABSCESS RIGHT LOWER LIMB              |
|                                                                         |                                                                                  | L02416         | CUTANEOUS ABSCESS LEFT LOWER LIMB                |
|                                                                         |                                                                                  | L02511         | CUTANEOUS ABSCESS OF RIGHT HAND                  |
|                                                                         |                                                                                  | L0291          | CUTANEOUS ABSCESS UNSPECIFIED                   |
|                                                                         |                                                                                  | L0501          | PILONIDAL CYST WITH ABSCESS                     |
|                                                                         | Cellulitis                                                                       | 68100          | UNSPEC CELLULITIS&ABSCESS FINGER                 |
|                                                                         |                                                                                  | 68110          | UNSPECIFIED CELLULITIS&ABSCESS TOE              |
|                                                                         |                                                                                  | 6819           | CELLULITIS&ABSCESS UNSPEC DIGIT                  |
|                                                                         |                                                                                  | 6820           | CELLULITIS AND ABSCESS OF FACE                   |
|                                                                         |                                                                                  | 6821           | CELLULITIS AND ABSCESS OF NECK                   |
|                                                                         |                                                                                  | 6822           | CELLULITIS AND ABSCESS OF TRUNK                  |
|                                                                         |                                                                                  | 6823           | CELLULITIS&ABS C UPPER ARM&FOREARM              |
|                                                                         |                                                                                  | 6824           | CELLULITIS&ABS HAND NO FNGR&THUMB                |
|                                                                         |                                                                                  | 6825           | CELLULITIS AND ABSCESS OF BUTTOCK                |
|                                                                         |                                                                                  | 6826           | CELLULITIS&ABSCESS LEG EXCEPT FOOT               |
|                                                                         |                                                                                  | 6827           | CELLULITIS&ABSCESS FOOT EXCEPT TOES              |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Diseases of the skin and subcutaneous tissue, continued | Cellulitis, continued | 6828 | CELLULITIS&ABSCESS OTHER SPEC SITE |
| | | 6829 | CELLULITIS&ABSCESS UNSPECIFIED SITE |
| | | 72930 | PANNICULITIS, UNSPECIFIED SITE |
| | | 72939 | PANNICULITIS OF OTHER SITES |
| | | L03114 | CELLULITIS OF LEFT UPPER LIMB |
| | | L03115 | CELLULITIS OF RIGHT LOWER LIMB |
| | | L03116 | CELLULITIS OF LEFT LOWER LIMB |
| | | L03211 | CELLULITIS OF FACE |
| | | L03311 | CELLULITIS OF ABDOMINAL WALL |
| | Edema | 7823 | EDEMA |
| | Rash, skin eruption or urticarial | 6926 | CONTACT DERMATITIS&OTH ECZEMA-PLANTS |
| | | 6929 | CONTACT DERMATITIS&OTH ECZEMA-UNS CAUS |
| | | 6930 | DERMATITIS-RX&MEDS TAKEN INTRLLY |
| | | 6931 | DERMATITIS DUE FOOD TAKEN INTRLLY |
| | | 7051 | PRICKLY HEAT |
| | | 7080 | ALLERGIC URTICARIA |
| | | 7089 | UNSPECIFIED URTICARIA |
| | | 70900 | DYSCHROMIA, UNSPECIFIED |
| | | 7821 | RASH&OTH NONSPECIFIC SKIN ERUPTION |
| | | L509 | URTICARIA UNSPECIFIED |
| | | R21 | RASH OTH NONSPECIFIC SKIN ERUPTION |
| Wound of skin including laceration, burn, contusion and puncture | 70707 | PRESSURE ULCER HEEL |
| | | 8730 | OPEN WOUND SCLP W/O MENTION COMP |
| | | 87320 | OPEN WND NSE UNS SITE W/O COMP |
| | | 87340 | OPEN WND FCE UNS SITE W/O COMP |
| | | 87341 | OPEN WOUND CHEEK W/O MENTION COMP |
| | | 87342 | OPEN WND FOREHEAD W/O MENTION COMP |
| | | 87343 | OPEN WOUND LIP WITHOUT MENTION COMP |
| | | 87344 | OPEN WOUND JAW WITHOUT MENTION COMP |
| | | 87349 | OPEN WND FCE OTH&MX SITE W/O COMP |
| | | 87352 | OPEN WOUND OF FOREHEAD, COMPLICATED |
| | | 87353 | OPEN WOUND OF LIP, COMPLICATED |
| | | 87361 | OPEN WND BUCCAL MUCOS W/O COMP |
| | | 87363 | TOOTH BROKEN FX TRAUMA W/O COMP |
| | | 87364 | OPEN WND TONGUE&FLR MOUTH W/O COMP |
| | | 88100 | OPEN WOUND FOREARM W/O MENTION COMP |
| | | 88101 | OPEN WOUND ELB WITHOUT MENTION COMP |
| | | 8820 | OPEN WND HND NO FNGR ALONE W/O COMP |
| | | 8821 | OPEN WOUND HAND NO FNGR ALONE COMP |
| | | 8830 | OPEN WOUND FINGER W/O MENTION COMP |
| | | 8831 | OPEN WOUND OF FINGER, COMPLICATED |
| | | 8832 | OPEN WOUND FINGER W/TENDON INVOLV |
| | | 8840 | MX&UNS OPN WND UP LIMB W/O COMP |
| | | 8900 | OPEN WOUND HIP&THI W/O MENTION COMP |
| | | 8910 | OPEN WND KNEE LEG&ANK W/O COMP |
| | | 8912 | OPEN WND KNEE LEG&ANK W/TEND INVOLV |
| | | 8920 | OPEN WND FT NO TOE ALONE W/O COMP |
| | | 8922 | OP WOUND FT EXP TOE W/TENDON INVOLV |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Diseases of the skin and subcutaneous tissue, continued | Wound of skin including laceration, burn, contusion and puncture, continued | 8930 | OPEN WOUND TOE WITHOUT MENTION COMP |
| | | 9100 | FCE NCK&SCLP NO EYE ABRAS NO INF |
| | | 9116 | TRNK SUP FB W/O MAJ OPN WND&W/O INF |
| | | 9130 | ARM & WRST ABRAS/FRICT BURN NO INF |
| | | 9140 | HND NO FINGR ABRAS/FRIC BURN NO INF |
| | | 9160 | HIP LEG&ANK ABRAS/FRICT BURN NO INF |
| | | 920 | CONTUS FACE SCALP&NECK EXCEPT EYE |
| | | 9220 | CONTUSION OF BREAST |
| | | 9221 | CONTUSION OF CHEST WALL |
| | | 9222 | CONTUSION OF ABDOMINAL WALL |
| | | 92231 | CONTUSION OF BACK |
| | | 92232 | CONTUSION OF BUTTOCK |
| | | 92300 | CONTUSION OF SHOULDER REGION |
| | | 92301 | CONTUSION OF SCAPULAR REGION |
| | | 92303 | CONTUSION OF UPPER ARM |
| | | 92310 | CONTUSION OF FOREARM |
| | | 92311 | CONTUSION OF ELBOW |
| | | 92320 | CONTUSION OF HAND |
| | | 92321 | CONTUSION OF WRIST |
| | | 9233 | CONTUSION OF FINGER |
| | | 9239 | CONTUSION UNSPEC PART UPPER LIMB |
| | | 92401 | CONTUSION OF HIP |
| | | 92410 | CONTUSION OF LOWER LEG |
| | | 92411 | CONTUSION OF KNEE |
| | | 92420 | CONTUSION OF FOOT |
| | | 92421 | CONTUSION OF ANKLE |
| | | 9243 | CONTUSION OF TOE |
| | | 9244 | CONTUSION MULTIPLE SITES LOWER LIMB |
| | | 9245 | CONTUSION UNSPEC PART LOWER LIMB |
| | | 9248 | CONTUSION OF MULTIPLE SITES NEC |
| | | 9249 | CONTUSION OF UNSPECIFIED SITE |
| | | 94203 | BURN TRUNK UNSPEC DEGREE ABD WALL |
| | | 94400 | BURN UNSPEC DEGREE UNSPEC SITE HAND |
| | | 94416 | ERYTHEMA DUE TO BURN BACK HAND |
| | | 95909 | INJURY FACE&NECK OTHER&UNSPECIFIED |
| | | 95911 | OTHER INJURY OF CHEST WALL |
| | | 95912 | OTHER INJURY OF ABDOMEN |
| | | 95919 | OTHER INJURY OTHER SITES TRUNK |
| | | 9592 | INJURY OTH&UNSPEC SHLDR&UPPER ARM |
| | | 9593 | INJURY OTH&UNSPEC ELB FOREARM&WRIST |
| | | 9594 | INJURY OTH&UNSPEC HAND NO FINGER |
| | | 9595 | INJURY OTHER AND UNSPECIFIED FINGER |
| | | 9596 | INJURY OTHER&UNSPECIFIED HIP&THIGH |
| | | 9597 | INJURY OTH&UNSPEC KNEE LEG ANK&FOOT |
| | | 9598 | INJURY OTH&UNS OTH SPEC SITE W/MX |
| | | 9599 | INJURY OTHER&UNSPEC UNSPEC SITE |
| Category                                      | Clinical Grouping                                                                 | Diagnosis Code | Description                                      |
|-----------------------------------------------|----------------------------------------------------------------------------------|----------------|--------------------------------------------------|
| Diseases of the skin and subcutaneous tissue, continued | Wound of skin including laceration, burn, contusion and puncture, continued       | S0003XA        | CONTUSION SCALP INITIAL ENCOUNTER                |
|                                               |                                                                                  | S0083XA        | CONTUS OTH PRT HEAD INITIAL ENCNTR               |
|                                               |                                                                                  | S0091XA        | ABRASION UNS PRT HEAD INITIAL ENC                |
|                                               |                                                                                  | S0101XA        | LACERATION W/O FB SCALP INITIAL ENC              |
|                                               |                                                                                  | S0121XA        | LACERATION W/O FB NOSE INITIAL ENC               |
|                                               |                                                                                  | S01312A        | LACERATION W/O FB LT EAR INIT ENC                |
|                                               |                                                                                  | S01511A        | LACERATION W/O FB LIP INITIAL ENC                |
|                                               |                                                                                  | S0181XA        | LAC W/O FB OTH PART HEAD INIT ENC                |
|                                               |                                                                                  | S2002XA        | CONTUSION LEFT BREAST INITIAL ENC                |
|                                               |                                                                                  | S20212A        | CONTUS LT FRONT WALL THORAX INITIAL              |
|                                               |                                                                                  | S20219A        | CONTUS OTH WALL THORAX INIT                      |
|                                               |                                                                                  | S20229A        | CONTUS OTH WALL THORAX INIT                      |
|                                               |                                                                                  | S300XXA        | CONTUSION LOWER BACK PELVIS INITIAL             |
|                                               |                                                                                  | S301XXA        | CONTUSION ABDOMINAL WALL INITIAL                 |
|                                               |                                                                                  | S30851A        | SUP FB ABDOMINAL WALL INITIAL                    |
|                                               |                                                                                  | S3981XA        | OTHER SPEC INJURIES ABDOMEN INITIAL              |
|                                               |                                                                                  | S40011A        | CONTUSION RIGHT SHOULDER INITIAL                 |
|                                               |                                                                                  | S40911A        | UNS SUP INJURY RT SHOULDER INITIAL               |
|                                               |                                                                                  | S5001XA        | CONTUSION RIGHT ELBOW INITIAL ENC                |
|                                               |                                                                                  | S5002XA        | CONTUSION LEFT ELBOW INITIAL ENC                 |
|                                               |                                                                                  | S5012XA        | CONTUSION LEFT FOREARM INITIAL ENC               |
|                                               |                                                                                  | S51011A        | LACERATION W/O FB RT ELBOW INITIAL               |
|                                               |                                                                                  | S51012A        | LACERATION W/O FB LT ELBOW INITIAL               |
|                                               |                                                                                  | S51811A        | LACERATION W/O FB RT LOW LEG INITIAL             |
|                                               |                                                                                  | S51812A        | LACERATION W/O FB LT FOREARM INIT                |
|                                               |                                                                                  | S60012A        | CONTUS LT THUMB NO DAMAGE NAIL INIT              |
|                                               |                                                                                  | S60041A        | CONTUS RT RF W/O DAMAGE NL INIT                  |
|                                               |                                                                                  | S60211A        | CONTUSION RIGHT WRIST INITIAL ENC                |
|                                               |                                                                                  | S60454A        | SUPERFICIAL FB RT RING FINGER INIT                |
|                                               |                                                                                  | S61011A        | LAC NO FB RT THUMB NO DMG NAIL INIT              |
|                                               |                                                                                  | S61012A        | LAC NO FB LT THUMB NO DMG NAIL INIT              |
|                                               |                                                                                  | S61202A        | UNS OPEN WND RT MF W/O DMG NAIL INIT             |
|                                               |                                                                                  | S61210A        | LAC W/O FB RT IF W/O DMG NAIL INIT               |
|                                               |                                                                                  | S61211A        | LAC W/O FB LT IF W/O DMG NAIL INIT               |
|                                               |                                                                                  | S61214A        | LAC NO FB RT RF NO DMG NAIL INIT                  |
|                                               |                                                                                  | S61219A        | LAC NO FB UNF GR NO DMG NAIL INIT                 |
|                                               |                                                                                  | S61314A        | LAC W/O FB RT W/DAMAGE NAIL INIT                 |
|                                               |                                                                                  | S61402A        | UNS OPEN WND LT HAND INITIAL ENC                 |
|                                               |                                                                                  | S61451A        | OPEN BITE RIGHT HAND INITIAL ENC                 |
|                                               |                                                                                  | S7002XA        | CONTUSION LEFT HIP INITIAL ENC                   |
|                                               |                                                                                  | S7012XA        | CONTUSION LEFT THIGH INITIAL ENC                 |
|                                               |                                                                                  | S71111A        | LACERATION W/O FB RT THIGH INITIAL               |
|                                               |                                                                                  | S8001XA        | CONTUSION RIGHT KNEE INITIAL ENC                 |
|                                               |                                                                                  | S8002XA        | CONTUSION LEFT KNEE INITIAL ENC                  |
|                                               |                                                                                  | S8011XA        | CONTUSION RIGHT LOWER LEG INITIAL                |
|                                               |                                                                                  | S81012A        | LACERATION W/O FB LT KNEE INITIAL                |
|                                               |                                                                                  | S81811A        | LACERATION W/O FB RT LOW LEG INIT                |
| Category                                      | Clinical Grouping                                                                 | Diagnosis Code | Description                                      |
|-----------------------------------------------|----------------------------------------------------------------------------------|----------------|-------------------------------------------------|
| Diseases of the skin and subcutaneous tissue, continued | Wound of skin including laceration, burn, contusion and puncture, continued        | S81812A        | LACERATION W/O FB LT LOW LEG INIT                |
|                                               |                                                                                  | S9001XA        | CONTUS RIGHT ANKLE INITIAL ENC                  |
|                                               |                                                                                  | S90111A        | CONTUS RT GRT TOE W/O DMG NAIL INIT             |
|                                               |                                                                                  | S90121A        | CONTUS RT LESR TOES W/O DMG NL INIT             |
|                                               |                                                                                  | S91201A        | UNS OPN WND RT GRT TOE W/DMG NL INT             |
|                                               |                                                                                  | S91332A        | PUNCT WOUND W/O FB LT FOOT INITIAL              |
|                                               |                                                                                  | S91342A        | PUNCTURE WOUND W/FB LT FOOT INITIAL             |
|                                               |                                                                                  | T2020XA        | BURN 2ND DEG HEAD FACE NCK UNS INIT              |
|                                               |                                                                                  | T22211A        | BURN SECOND DEG RT FORARM INIT ENC              |
|                                               |                                                                                  | T22312A        | BURN THIRD DEG LT FOREARM INIT ENC              |
|                                               |                                                                                  | T23101D        | BURN FIRST DEG RT HAND UNS SUB ENC              |
|                                               |                                                                                  | T23142A        | BURN 1ST DEG MX LT FNGR W/THMB INIT             |
|                                               |                                                                                  | T23262A        | BURN 2ND DEG BACK LT HAND INIT ENC              |
|                                               |                                                                                  | T24201A        | BURN 2ND DEG UNS RT LL NO FOOT INIT              |
|                                               |                                                                                  | T24211A        | BURN SECOND DEG RT THIGH INIT ENC               |
| Miscellaneous dermatologic conditions         |                                                                                  | 61172          | LUMP OR MASS IN BREAST                          |
|                                               |                                                                                  | 70909          | OTHER DYSCHROMIA                                |
|                                               |                                                                                  | 7099           | UNSPEC DISORDER SKIN&SUBCUT TISSUE              |
|                                               |                                                                                  | 9144           | HAND NO FINGER INSECT BITE NO INF               |
|                                               |                                                                                  | 94224          | BLISTR W/EPID LOSS DUE BURN BACK                |
|                                               |                                                                                  | 94420          | BLISTR W/EPID LOSS DUE BURN HND                 |
|                                               |                                                                                  | L7601          | IO HEM SKN SUBQ TISS COMP DERM PROC             |
|                                               |                                                                                  | L7621          | POSTP H SKIN & SC TISS FLW DERM PROC            |
|                                               |                                                                                  | L7622          | POSTP H SKIN & SC TISS FLW OTH PCR              |
|                                               |                                                                                  | L987           | EXCESS REDUNDANT SKIN & SUBQ TISSUE             |
|                                               |                                                                                  | M7989          | OTHER SPEC SOFT TISSUE DISORDERS               |
|                                               |                                                                                  | N61            | INFLAMMATORY DISORDERS OF BREAST                |
|                                               |                                                                                  | R220           | LOCALIZED SWELLING MASS & LUMP HEAD             |
|                                               |                                                                                  | R221           | LOCALIZED SWELLING MASS & LUMP NECK             |
|                                               |                                                                                  | R2242          | LOC SWELL MASS LUMP LT LOWER LIMB               |
| Neurologic diseases, mental illness or substance abuse | Bipolar Disorder or Major Depression                                             | 29604          | BIPLR I D/O 1 MANIC EPIS W/PSYCHOT             |
|                                               |                                                                                  | 29643          | BP I MOST RECNT MNIC SEV NO PSYCHOT            |
|                                               |                                                                                  | 29650          | BIPLR I MOST RECENT EPIS DPRSD UNS              |
|                                               |                                                                                  | 29653          | BIPLR I RECENT DPRSD SEV NO PSYCHOT            |
|                                               |                                                                                  | 29654          | BIPLR I RECENT DPRSD SEV W/PSYCHOT             |
|                                               |                                                                                  | 29664          | BIPLR I RECENT MIX SEV W/PSYCHOT               |
|                                               |                                                                                  | 29680          | BIPOLAR DISORDER UNSPECIFIED                   |
|                                               |                                                                                  | 29689          | OTHER&UNSPECIFIED BIPOLAR DISORDERS             |
|                                               |                                                                                  | F314           | BIPOLAR CURR DEPRESS SEV W/O PSYCH             |
|                                               |                                                                                  | F319           | BIPOLAR DISORDER UNSPECIFIED                   |
|                                               |                                                                                  | 29620          | MAJ DPRSV D/O SINGLE EPIS UNSPEC               |
|                                               |                                                                                  | 29622          | MAJ DPRSV DISORDER SINGLE EPIS MOD             |
|                                               |                                                                                  | 29623          | MAJ DEPRESS D/O 1 EPIS SEVER                   |
|                                               |                                                                                  | 29624          | MAJ DEPRESS 1 EPIS SEVR W/PSYCHOT              |
|                                               |                                                                                  | 29630          | MAJ DPRSV D/O RECUR EPIS UNSPEC                |
|                                               |                                                                                  | 29632          | MAJOR DPRSV DISORDER RECUR EPIS MOD            |
| Category                                                                 | Clinical Grouping                                      | Diagnosis Code | Description                                                      |
|-------------------------------------------------------------------------|--------------------------------------------------------|----------------|------------------------------------------------------------------|
| Neurologic diseases, mental illness or substance abuse                  | Bipolar Disorder or Major Depression, continued        | 29633          | MJR DEPRESS D/O RECUR EPIS-SEVERE                                 |
|                                                                         |                                                        | 29634          | MJR DEPRESS D/O RECUR EPIS-PSYCHOTIC                              |
|                                                                         |                                                        | 3090           | ADJ DISORDER WITH DEPRESSED MOOD                                  |
|                                                                         |                                                        | 30928          | ADJ D/O W/MIX ANXIETY&DPRSD MOOD                                 |
|                                                                         |                                                        | 311            | DEPRESSIVE DISORDER NEC                                           |
|                                                                         |                                                        | F323           | MAJ DEPRESS 1 EPIS SEV W/PSYCH FEAT                              |
|                                                                         |                                                        | F329           | MAJ DEPRESS D/O SINGLE EPIS UNS                                   |
|                                                                         |                                                        | F331           | MAJ DEPRESS D/O RECURRENT MOD                                    |
|                                                                         |                                                        | F332           | MAJ DEPRESS RECURR SEV W/O PSYCH                                  |
|                                                                         |                                                        | F339           | MAJOR DEPRESSIVE D/O RECURRENT UNS                               |
| Drug or Alcohol dependence, overdose, intoxication or withdrawal         |                                                        | 2920           | DRUG WITHDRAWAL                                                  |
|                                                                         |                                                        | 30480          | COMBOS DRUG DEPEND UNS                                            |
|                                                                         |                                                        | F1320          | SEDATIVE ANXIOLYTIC DEPEND UNCOMP                                |
|                                                                         |                                                        | F1520          | OTH STIMULANT DEPEND UNCOMPlicated                               |
|                                                                         |                                                        | 29181          | ALCOHOL WITHDRAWAL                                               |
|                                                                         |                                                        | 30300          | ACUT ALCOHLIC INTOXICATION UNS                                   |
|                                                                         |                                                        | 30390          | OTH&UNS ALCOHL DPND UNS DRUNKENNESS                              |
|                                                                         |                                                        | 30391          | OTH&UNS ALCOHL DPND CONT                                         |
|                                                                         |                                                        | 30500          | NONDPND ALCOHL ABS UNS DRUNKENNESS                               |
|                                                                         |                                                        | F1010          | ALCOHOL ABUSE UNCOMPlicated                                      |
|                                                                         |                                                        | F10129         | ALCOHOL ABUSE WITH INTOXICATION UNS                              |
|                                                                         |                                                        | F1020          | ALCOHOL DEPENDENCE UNCOMPlicated                                 |
|                                                                         |                                                        | F10221         | ALC DEPEND W/INTOX DELIRIUM                                      |
|                                                                         |                                                        | F10230         | ALC DEPEND W/WITHDRAWAL UNCOMP                                   |
|                                                                         |                                                        | F10239         | ALC DEPEND W/WITHDRAWAL UNS                                      |
|                                                                         |                                                        | 2910           | ALCOHOL WITHDRAWAL DELIRIUM                                      |
|                                                                         |                                                        | 30401          | OPIOID TYPE DEPENDENCE CONT                                      |
|                                                                         |                                                        | 30410          | SEDAT HYPNOT/ANXIOLYTIC DEPEND UNS                               |
|                                                                         |                                                        | 30440          | AMPHET&OTH PSYCHOSTIM DPND UNS                                   |
|                                                                         |                                                        | 30470          | OPIOID/OTHER DEP-UNSPEC                                          |
|                                                                         |                                                        | 30590          | OTH MIX/UNS NONDEPEND RX ABS UNS                                 |
|                                                                         |                                                        | F1123          | OPIOID DEPENDENCE WITH WITHDRAWAL                               |
|                                                                         |                                                        | 30400          | OPIOID TYPE DEPENDENCE UNSPEC                                   |
|                                                                         |                                                        | 30550          | NONDEPENDENT OPIOID ABUSE UNSPEC                                 |
|                                                                         |                                                        | F1110          | OPIOID ABUSE UNCOMPlicated                                       |
|                                                                         |                                                        | F1120          | OPIOID DEPENDENCE UNCOMPlicated                                 |
| Headaches (e.g. tension, migraine, cluster or other)                    |                                                        | 33944          | OTHER COMPLICATED HEADACHE SYNDROME                              |
|                                                                         |                                                        | 34600          | MIGRAINE W/AURA W/O INTRACT W/O SM                              |
|                                                                         |                                                        | 34610          | MIGRAINE W/O AURA W/O INTRACT W/O SM                            |
|                                                                         |                                                        | 34620          | VAR MIGRAINE NEC W/O INTRACT W/O SM                             |
|                                                                         |                                                        | 34682          | OTH MIGRAINE W/O INTRACT W/SM                                    |
|                                                                         |                                                        | 34690          | MIGRAINE UNSP W/O INTRACT W/O SM                                 |
|                                                                         |                                                        | 7840           | HEADACHE                                                          |
|                                                                         |                                                        | G43009         | MIGRAINE W/O AURA NOT INTRACT W/O SE                              |
|                                                                         |                                                        | G43109         | MIGRAINE W/AURA NOT INTRACT W/O SE                               |
|                                                                         |                                                        | G43111         | MIGRAINE W/AURA INTRACT W/STAT EPI                               |
|                                                                         |                                                        | G43401         | HEMIPLEG MIGRAINE NOT INTRACT W/SM                               |
| Category                                      | Clinical Grouping                                                                 | Diagnosis Code | Description                              |
|----------------------------------------------|-----------------------------------------------------------------------------------|----------------|------------------------------------------|
| Neurologic diseases, mental illness or       | Headaches (e.g. tension, migraine, cluster or other), continued                   | G43809         | OTH MIGRAINE NOT INTRACTABLE W/O SM      |
| substance abuse                              |                                                                                   | G43909         | MIGRAINE UNS NOT INTRACT W/O SM          |
|                                              |                                                                                   | G441           | VASCULAR HEADACHE NOT ELSW CLASS         |
|                                              |                                                                                   | G44209         | TENSION-TYP HEADACHE UNS NOT INTRACT     |
|                                              |                                                                                   | R51            | HEADACHE                                 |
|                                              | Subdural or Subarachnoid Bleeding                                                | 4321           | SUBDURAL HEMORRHAGE                      |
|                                              |                                                                                   | 85201          | SUBARACH HEMOR NO LOC                    |
|                                              |                                                                                   | 85202          | SUBARACH HEMOR BRIEF LOC                 |
|                                              |                                                                                   | 85206          | SUBARACH HEMOR LOC UNS DURAT             |
|                                              |                                                                                   | 85220          | SUBDURAL HEMOR W/O OPN ICW UNS LOC       |
|                                              |                                                                                   | 85222          | SUBDURAL HEMOR W/O OPN ICW BRIEF LOC     |
|                                              |                                                                                   | 85226          | SUBDURAL HEMOR LOC UNS DURATION          |
|                                              | Head trauma including concussion                                                  | 3102           | POSTCONCUSSION SYNDROME                  |
|                                              |                                                                                   | 80126          | CLOS FX BASE SKL-DURL HEM LOC UNS        |
|                                              |                                                                                   | 80320          | OTH CLOS SKL FX-DURL HEMOR UNS SOC       |
|                                              |                                                                                   | 8500           | CONCUSSION WITH NO LOC                   |
|                                              |                                                                                   | 85011          | CONCUSSION W/LOC 30 MINUTES OR LESS      |
|                                              |                                                                                   | 8505           | CONCUSSION W/LOC UNSPEC DURATION         |
|                                              |                                                                                   | 8509           | UNSPECIFIED CONCUSSION                   |
|                                              |                                                                                   | 85186          | OTH&UNS CERB LAC NO ICW LOC UNS DUR      |
|                                              |                                                                                   | 85401          | ICI OTH&UNS NATR W/O OPN ICW NO LOC      |
|                                              |                                                                                   | 95901          | HEAD INJURY, UNSPECIFIED                 |
|                                              |                                                                                   | S020XXA        | FX VAULT SKULL INITIAL ENC CLOS FX       |
|                                              |                                                                                   | S060X0A        | CONCUSSION WITHOUT LOC INITIAL ENC       |
|                                              |                                                                                   | S060X1A        | CONCUSSION W/LOC 30 MIN/< INIT ENC       |
|                                              |                                                                                   | S060X9A        | CONCUSS LOC UNS DUR INITIAL ENC          |
|                                              |                                                                                   | S065X9A        | TRAU SUBDURAL HEM LOC UNS DUR INIT       |
|                                              |                                                                                   | S069X1A        | UNS IC INJ LOC 30 MIN/LESS INIT ENC      |
|                                              |                                                                                   | S098XXA        | OTH SPEC INJURIES HEAD INITIAL ENC       |
|                                              | Miscellaneous neurologic diagnoses                                                | 2252           | BENIGN NEOPLASM CEREBRAL MENINGES        |
|                                              |                                                                                   | 29281          | DRUG-INDUCED DELIRIUM                    |
|                                              |                                                                                   | 2930           | DELIRIUM DUE CONDS CLASSIFIED ELSW       |
|                                              |                                                                                   | 3229           | UNSPECIFIED MENINGITIS                   |
|                                              |                                                                                   | 32381          | OTHER CAUSES OF ENCEPHALITIS            |
|                                              |                                                                                   | 33383          | SPASMODIC TORTICOLLIS                    |
|                                              |                                                                                   | 3343           | OTHER CEREBELLAR ATAXIA                  |
|                                              |                                                                                   | 3379           | UNSPEC DISORDER AUTONOM NERV SYSTEM      |
|                                              |                                                                                   | 340            | MULTIPLE SCLEROSIS                       |
|                                              |                                                                                   | 34120          | ACUTE TRANSVERSE MYELITIS NOS           |
| Category                                      | Clinical Grouping                                      | Diagnosis Code | Description                                                                 |
|-----------------------------------------------|--------------------------------------------------------|----------------|-----------------------------------------------------------------------------|
| Neurologic diseases, mental illness or substance abuse | Miscellaneous neurologic diagnoses, continued          | 3418           | OTH DEMYELINATING DZ CNTRL NERV SYS                                         |
|                                               |                                                        | 34839          | OTHER ENCEPHALOPATHY                                                        |
|                                               |                                                        | 3484           | COMPRESSION OF BRAIN                                                         |
|                                               |                                                        | 3490           | REACTION TO SPINAL/LUMBAR PUNCTURE                                          |
|                                               |                                                        | 34982          | TOXIC ENCEPHALOPATHY                                                        |
|                                               |                                                        | 3501           | TRIGEMINAL NEURALGIA                                                        |
|                                               |                                                        | 3510           | BELL'S PALSY                                                                |
|                                               |                                                        | 3542           | LESION OF ULNAR NERVE                                                       |
|                                               |                                                        | 3553           | LESION OF LATERAL POPLITEAL NERVE                                           |
|                                               |                                                        | 3569           | UNS HEREDITARY&IDIOPATH PRIPH NURPHY                                         |
|                                               |                                                        | 35781          | CHRON INFLAM DEMYELINAT POLYNEURITIS                                       |
|                                               |                                                        | 3589           | UNSPECIFIED MYONEURAL DISORDERS                                             |
|                                               |                                                        | 7234           | BRACHIAL NEURITIS/RADICULITIS NOS                                           |
|                                               |                                                        | 7292           | UNS NEURALGIA NEURITIS&RADICULITIS                                          |
|                                               |                                                        | 78009          | OTHER ALTERATION OF CONSCIOUSNESS                                           |
|                                               |                                                        | 7804           | DIZZINESS AND GIDDINESS                                                     |
|                                               |                                                        | 78097          | ALTERED MENTAL STATUS                                                       |
|                                               |                                                        | 7810           | ABNORMAL INVOLUNTARY MOVEMENTS                                              |
|                                               |                                                        | 7820           | DISTURBANCE OF SKIN SENSATION                                               |
|                                               |                                                        | 78451          | DYSARTHRIA                                                                  |
|                                               |                                                        | 78459          | OTHER SPEECH DISTURBANCE                                                    |
|                                               |                                                        | 95203          | C1-C4 LEVEL W/CENTRAL CORD SYNDROME                                         |
|                                               |                                                        | 9559           | INJURY UNS NERV SHLDR GIRDL&UP LIMB                                        |
|                                               |                                                        | G35            | MULTIPLE SCLEROSIS                                                          |
|                                               |                                                        | G510           | BELL'S PALSY                                                                |
|                                               |                                                        | G5622          | LESION ULNAR NERVE LEFT UPPER LIMB                                          |
|                                               |                                                        | G9341          | METABOLIC ENCEPHALOPATHY                                                    |
|                                               |                                                        | G960           | CEREBROSPINAL FLUID LEAK                                                     |
|                                               |                                                        | R410           | DISORIENTATION UNSPECIFIED                                                  |
|                                               |                                                        | R4182          | ALTERED MENTAL STATUS UNSPECIFIED                                           |
|                                               |                                                        | R42            | DIZZINESS AND GIDDINESS                                                    |
|                                               |                                                        | 33394          | RESTLESS LEGS SYNDROME                                                      |
|                                               |                                                        | 33721          | REFLEX SYMPATHET DYSTROPHY UP LIMB                                          |
|                                               |                                                        | 34440          | MONOPLEGIA UPPER LIMB UNSPEC SIDE                                           |
|                                               |                                                        | 34510          | GEN CONVULS EPILEPSY W/O INTRACT                                            |
|                                               |                                                        | 34581          | OTH EPI & RECUR SZ W/INTRACT EPI                                            |
|                                               |                                                        | 3482           | BENIGN INTRACRANIAL HYPERTENSION                                            |
|                                               |                                                        | 3492           | DISORDERS OF MENINGES NEC                                                   |
|                                               |                                                        | 3549           | UNSPECIFIED MONONEURITIS UPPER LIMB                                         |
|                                               |                                                        | 7812           | ABNORMALITY OF GAIT                                                         |
|                                               |                                                        | 85404          | ICI OTH&UNS W/O OPN ICW LOC>24 RTN                                          |
|                                               |                                                        | G40219         | LOC-REL SX EPI CPS INTRACT W/O SE                                           |

Table A2: Component Diagnoses of Clinical Acute Care Categories, continued
| Category                                      | Clinical Grouping | Diagnosis Code | Description                                      |
|----------------------------------------------|-------------------|----------------|--------------------------------------------------|
| Ears, eyes, or respiratory complaints        |                   |                |                                                  |
| Asthma                                       |                   | 49322          | CHRONIC OBST ASTHMA W/EXACERBAT                  |
|                                              |                   | 49390          | ASTHMA, UNSPECIFIED, UNSPEC STATUS               |
|                                              |                   | 49391          | ASTHMA UNSPEC W/STATUS ASTHMATICUS               |
|                                              |                   | 49392          | ASTHMA UNSPECIFIED W/EXACERBATION                |
|                                              |                   | J4551          | SEV PERSIST ASTHMA ACUTE EXACERBAT               |
|                                              |                   | J45901         | UNS ASTHMA W/ACUTE EXACERBATION                  |
|                                              |                   | J45902         | UNS ASTHMA W/STATUS ASTHMATICUS                  |
|                                              |                   | J45909         | UNSPECIFIED ASTHMA UNCOMPLICATED                 |
| Cough or bronchitis (acute or chronic)       |                   | 7862           | COUGH                                            |
|                                              |                   | R05            | COUGH                                            |
|                                              |                   | 4660           | ACUTE BRONCHITIS                                 |
|                                              |                   | 490            | BRONCHITIS NOT SPEC AS ACUT/CHRONIC              |
|                                              |                   | 49121          | OBST CHRONIC BRONCHITIS W/EXACERBAT              |
|                                              |                   | J209           | ACUTE BRONCHITIS UNSPECIFIED                    |
|                                              |                   | J40            | BRONCHITIS NOT SPEC AS ACUTE/CHRON               |
| Conjunctivitis                               |                   | 37200          | UNSPECIFIED ACUTE CONJUNCTIVITIS                 |
|                                              |                   | 37230          | UNSPECIFIED CONJUNCTIVITIS                      |
|                                              |                   | 37993          | REDNESS OR DISCHARGE OF EYE                      |
|                                              |                   | 9182           | SUPERFICIAL INJURY OF CONJUNCTIVA                |
|                                              |                   | H1031          | UNS ACUTE CONJUNCTIVITIS RIGHT EYE               |
|                                              |                   | H109           | UNSPECIFIED CONJUNCTIVITIS                      |
|                                              |                   | S0501XA        | INJ CONJ & CA W/O FB RT EYE INITIAL              |
|                                              |                   | S0502XA        | INJ CONJ & CA W/O FB LT EYE INITIAL              |
|                                              |                   | T1512XA        | FB CONJUNCT SAC LT EYE INITIAL ENC               |
| Dental                                       |                   | 52100          | UNSPECIFIED DENTAL CARIES                        |
|                                              |                   | 5225           | PERiapAL ABSCEss WITHOUT SINUS                   |
|                                              |                   | 5259           | UNSPEC D/O TEETH&SUPPORTING STRCT                |
|                                              |                   | K047           | PERiapAL ABSCEss WITHOUT SINUS                   |
|                                              |                   | K0889          | OTH SPEC DISORDERS TEETH SUPP STRCT              |
|                                              |                   | K120           | RECURRENT ORAL APHTHAE                           |
|                                              |                   | K141           | GEOGRAPHIC TONGUE                               |
|                                              |                   | K146           | GLOSSODYNIA                                      |
| Epistaxis                                    |                   | 7847           | EPISTAXIS                                        |
|                                              |                   | R040           | EPISTAXIS                                        |
| Otitis media or externa                      |                   | 38010          | UNSPEC INFECTIVE OTITIS EXTERNA                  |
|                                              |                   | 38100          | UNS ACUT NONSUPPRATV OTITIS MEDIA                |
|                                              |                   | 3814           | NONSUPPRATV OTIT MEDIA NOT AC/CHRN               |
|                                              |                   | 38200          | ACUT SUPPURATIVE OM W/O RUP EARDRUM             |
|                                              |                   | 3829           | UNSPECIFIED OTITIS MEDIA                         |
|                                              |                   | H6021          | MALIGNANT OTITIS EXTERNA RIGHT EARD              |
|                                              |                   | H60391         | OTH INFECTIVE OTITIS EXTERNA RT EARD             |
|                                              |                   | H6691          | OTITIS MEDIA UNSPECIFIED RIGHT EARD              |
|                                              |                   | H6692          | OTITIS MEDIA UNSPECIFIED LEFT EARD               |
| Pharyngitis or sore throat, organism not specified |                   | 462            | ACUTE PHARYNGITIS                                |
|                                              |                   | 463            | ACUTE TONSILLITIS                                |
|                                              |                   | 7841           | THROAT PAIN                                      |
| Category                                                                 | Clinical Grouping                                                                 | Diagnosis Code | Description                                |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------|--------------------------------------------|
| Ears, eyes, or respiratory complaints, continued                         | Pharyngitis or sore throat, organism not specified, continued                     | J029           | ACUTE PHARYNGITIS UNSPECIFIED              |
|                                                                         |                                                                                  | J0390          | ACUTE TONSILLITIS UNSPECIFIED              |
|                                                                         |                                                                                  | J060           | ACUTE LARYNGOPHARYNGITIS                   |
|                                                                         |                                                                                  | J36            | PERITONSILLAR ABSSCESS                     |
|                                                                         |                                                                                  | R070           | PAIN IN THROAT                             |
| Sinusitis                                                                |                                                                                  | 4610           | ACUTE MAXILLARY SINUSITIS                  |
|                                                                         |                                                                                  | 4611           | ACUTE FRONTAL SINUSITIS                   |
|                                                                         |                                                                                  | 4619           | ACUTE SINUSITIS, UNSPECIFIED               |
|                                                                         |                                                                                  | 4730           | CHRONIC MAXILLARY SINUSITIS               |
|                                                                         |                                                                                  | 4739           | UNSPECIFIED SINUSITIS                     |
|                                                                         |                                                                                  | J0100          | ACUTE MAXILLARY SINUSITIS UNS              |
|                                                                         |                                                                                  | J0101          | ACUTE RECURRENT MAXILLARY SINUSITIS       |
|                                                                         |                                                                                  | J0190          | ACUTE SINUSITIS UNSPECIFIED               |
|                                                                         |                                                                                  | J329           | CHRONIC SINUSITIS UNSPECIFIED              |
| Shortness of breath, pain on breathing, hyperventilation                |                                                                                  | 5110           | PLEURISY W/O MENTION EFFUS/CURR TB         |
|                                                                         |                                                                                  | 78601          | HYPERVERVENTILATION                        |
|                                                                         |                                                                                  | 78605          | SHORTNESS OF BREATH                        |
|                                                                         |                                                                                  | 78607          | WHEEZING                                   |
|                                                                         |                                                                                  | 78609          | OTH DYSPEA&RESPIRATORY ABNORM              |
|                                                                         |                                                                                  | 78652          | PAINFUL RESPIRATION                        |
|                                                                         |                                                                                  | R0600          | DYSPEA UNSPECIFIED                         |
|                                                                         |                                                                                  | R0602          | SHORTNESS OF BREATH                        |
|                                                                         |                                                                                  | R071           | CHEST PAIN ON BREATHING                    |
|                                                                         |                                                                                  | R0781          | PLEURODYNIA                                |
|                                                                         |                                                                                  | R091           | PLEURISY                                   |
| Vertigo                                                                 |                                                                                  | 38610          | UNSPECIFIED PERIPHERAL VERTIGO             |
|                                                                         |                                                                                  | 38611          | BEN PAROXYSMAL POSITIONAL VERTIGO          |
|                                                                         |                                                                                  | H8110          | BENIGN PAROXYSMAL VERTIGO UNS EAR          |
| Miscellaneous diagnoses of the ear, nose and throat                     |                                                                                  | H81312         | AURAL VERTIGO LEFT EAR                     |
|                                                                         |                                                                                  | 3804           | IMPACTED CERUMEN                           |
|                                                                         |                                                                                  | 38300          | ACUTE MASTOIDITIS WITHOUT COMPS            |
|                                                                         |                                                                                  | 38600          | UNSPECIFIED MENIERES DISEASE               |
|                                                                         |                                                                                  | 38630          | UNSPECIFIED LABYRINTHITIS                 |
|                                                                         |                                                                                  | 38870          | UNSPECIFIED OTALGIA                       |
|                                                                         |                                                                                  | 3899           | UNSPECIFIED HEARING LOSS                   |
|                                                                         |                                                                                  | 4779           | ALLERGIC RHINITIS CAUSE UNSPECIFIED        |
|                                                                         |                                                                                  | 47819          | OTH DISEASES NASAL CAVITY & SINUSES        |
|                                                                         |                                                                                  | 52460          | UNSPECIFIED TMJ DISORDERS                 |
|                                                                         |                                                                                  | 5269           | UNSPECIFIED DISEASE OF THE JAWS            |
|                                                                         |                                                                                  | 52800          | STOMATITIS & MUCOSITIS UNSPECIFIED         |
|                                                                         |                                                                                  | 78492          | JAW PAIN                                   |
|                                                                         |                                                                                  | 78499          | OTHER SYMPTOMS INVOLVING HEAD&NECK         |
|                                                                         |                                                                                  | 7868           | HICCOUGH                                   |
|                                                                         |                                                                                  | 8020           | NASAL BONES, CLOSED FRACTURE               |
|                                                                         |                                                                                  | 8024           | MALAR&MAX BONES CLOSED FRACTURE            |
|                                                                         |                                                                                  | 8028           | OTHER FACIAL BONES, CLOSED FRACTURE        |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|-------------------|----------------|-------------|
| Ears, eyes, or respiratory complaints, continued | Miscellaneous diagnoses of the ear, nose and throat, continued | 8708 | OTHER SPEC OPEN WOUND OCULAR ADNEXA |
| | | 8709 | UNSPEC OPEN WOUND OCULAR ADNEXA |
| | | 8728 | OPEN WND EAR PART UNS W/O COMP |
| | | 931 | FOREIGN BODY IN EAR |
| | | 9330 | FOREIGN BODY IN PHARYNX |
| | | H8309 | LABYRINTHITIS UNSPECIFIED EAR |
| | | J95831 | POSTPROC HEM RS ORG/STR FLW OTH PCR |
| | | R0981 | NASAL CONGESTION |
| | | R0982 | POSTNASAL DRIP |
| | | S0240DA | MAXILLARY FX LEFT SIDE INIT CLOSED |
| Miscellaneous ophthalmologic diagnoses | | 3619 | UNSPECIFIED RETINAL DETACHMENT |
| | | 36400 | UNSPEC ACUTE&SUBACUTE IRIDOCYCLITIS |
| | | 36813 | VISUAL DISCOMFORT |
| | | 3682 | DIPLOPIA |
| | | 3688 | OTHER SPECIFIED VISUAL DISTURBANCES |
| | | 3689 | UNSPECIFIED VISUAL DISTURBANCE |
| | | 37182 | CORNEAL DISORDER DUE CONTACT LENS |
| | | 3719 | UNSPECIFIED CORNEAL DISORDER |
| | | 37311 | HORDEOLUM EXTERNUM |
| | | 37313 | ABSCESS OF EYELID |
| | | 37482 | EDEMA OF EYELID |
| | | 37601 | ORBITAL CELLULITIS |
| | | 37633 | ORBITAL EDEMA OR CONGESTION |
| | | 37730 | UNSPECIFIED OPTIC NEURITIS |
| | | 37941 | ANISOCORIA |
| | | 37991 | PAIN IN OR AROUND EYE |
| | | 37992 | SWELLING OR MASS OF EYE |
| | | 37999 | OTHER ILL-DEFINED DISORDER OF EYE |
| | | 8700 | LAC SKIN EYELD&PERIOCULR AREA |
| | | 9181 | SUPERFICIAL INJURY OF CORNEA |
| | | 9219 | UNSPECIFIED CONTUSION OF EYE |
| | | 9300 | FOREIGN BODY IN CORNEA |
| | | 9301 | FOREIGN BODY IN CONJUNCTIVAL SAC |
| | | 9309 | FB UNSPEC SITE EXTERNAL EYE |
| | | H05011 | CELLULITIS OF RIGHT ORBIT |
| | | H05013 | CELLULITIS OF BILATERAL ORBITS |
| | | H1132 | CONJUNCTIVAL HEMORRHAGE LEFT EYE |
| | | H16001 | UNSPECIFIED CORNEAL ULCER RIGHT EYE |
| | | H18821 | CORNEAL D/O DUE CONTACT LENS RT EYE |
| | | H5711 | OCULAR PAIN RIGHT EYE |
| | | H5712 | OCULAR PAIN LEFT EYE |
| | | H578 | OTHER SPEC DISORDERS EYE & ADNEXA |
| | | S01111A | LAC NO FB RT EYELID PERIOCULAR INIT |
| | | S01119A | LAC NO FB UNS EYELD PERIOCULAR INIT |
| | | T1592XA | FB EXT EYE PART UNS LT EYE INIT ENC |
| | | T2611XA | BURN CORNEA CONJNCT SAC RT EYE INIT |
| Category                                      | Clinical Grouping                                                                 | Diagnosis Code | Description                                      |
|-----------------------------------------------|----------------------------------------------------------------------------------|----------------|--------------------------------------------------|
| Ears, eyes, or respiratory complaints, continued | Miscellaneous diagnoses of the respiratory / pulmonary system                   | 48882          | FLU D/T ID NVEL A VIR OTH RESP MANF              |
|                                               |                                                                                  | 5070           | PNEUMONITIS DUE INHAL FOOD/VOMITIT              |
|                                               |                                                                                  | 5109           | EMPYEMA WITHOUT MENTION OF FISTULA              |
|                                               |                                                                                  | 51189          | OTH SPEC FORMS EFFUSION NO TB                   |
|                                               |                                                                                  | 5181           | INTERSTITIAL EMPYSEMA                            |
|                                               |                                                                                  | 5183           | PULMONARY EOSINOPHILIA                          |
|                                               |                                                                                  | 51881          | ACUTE RESPIRATORY FAILURE                        |
|                                               |                                                                                  | 51911          | ACUTE BRONCHOSPASM                               |
|                                               |                                                                                  | 7869           | OTH SYMPTOMS INVLV RESP SYSTEM&CHST              |
|                                               |                                                                                  | 99881          | EMPYSEMA RESULTING FROM PROC NEC                 |
|                                               |                                                                                  | J690           | PNEUMONITIS D/T INHAL FOOD & VOMIT              |
|                                               |                                                                                  | J90            | PLEURAL EFFUSION NEC                             |
|                                               |                                                                                  | R042           | HEMOPTYSIS                                       |
|                                               |                                                                                  | R0902          | HYPOXEMIA                                       |
|                                               |                                                                                  | R911           | SOLITARY PULMONARY NODULE                        |
|                                               |                                                                                  | 32723          | OBSTRUCTIVE SLEEP APNEA                          |
|                                               |                                                                                  | 49300          | EXTRINSIC ASThma, UNSPECIFIED                   |
|                                               |                                                                                  | 4941           | BRONCHIECTASIS W/ACUTE EXACERBATION              |
|                                               |                                                                                  | 5119           | UNSPECIFIED PLEURAL EFFUSION                    |
|                                               |                                                                                  | 5184           | UNSPECIFIED ACUTE EDEMA OF LUNG                  |
|                                               |                                                                                  | 51853          | ACUT CHRN RESP FAIL FLW TRAUMA SURG              |
|                                               |                                                                                  | 51882          | OTHER PULMONARY INSUFFICIENCY NEC                |
|                                               |                                                                                  | 51883          | CHRONIC RESPIRATORY FAILURE                      |
|                                               |                                                                                  | 51884          | ACUTE&CHRONIC RESPIRATORY FAILURE                |
|                                               |                                                                                  | 78600          | UNSPECIFIED RESPIRATORY ABNORMALITY              |
|                                               |                                                                                  | 8602           | TRAUMAT HEMOTHORAX-W/O OPN WND                   |
|                                               |                                                                                  | 99739          | OTHER RESPIRATORY COMPLICATIONS                  |
|                                               |                                                                                  | J9383          | OTHER PNEUMOTHORAX                               |
|                                               |                                                                                  | J9601          | ACUTE RESPIRATORY FAIL W/HYPOXIA                 |
|                                               |                                                                                  | J9602          | ACUTE RESP FAIL W/HYPERCAPNIA                    |
| Infectious and parasitic diseases<sup>a</sup> | Influenza or complications of influenza                                         | 4870           | INFLuenza WITH PNEUMONIA                        |
|                                               |                                                                                  | 4871           | FLU W/OTH RESPIRATORY MANIFESTS                  |
|                                               |                                                                                  | J09X2          | FLU D/T ID NOVEL FLU A VIRUS W/RESP              |
|                                               |                                                                                  | J09X9          | FLU D/T ID NOVEL FLU VIRUS W/OTH                 |
|                                               |                                                                                  | J101           | FLU D/T OTH ID FLU VIR OTH RESP MANF              |
|                                               |                                                                                  | J111           | FLU D/T UNIDENT FLU VIR RESP MANIF               |
|                                               |                                                                                  | 0030           | SALMONELLA GASTROENTERIT                         |
|                                               |                                                                                  | 0074           | CRYPTOsporidiosis                                |
|                                               |                                                                                  | 00843          | INTESTINAL INF DUE CAMPYLOBACTER                 |
|                                               |                                                                                  | 00845          | INTST INF-CLOstrIDium DIFFICILE                  |
|                                               |                                                                                  | 0088           | INTESTINAL INF DUE OTH ORGANISM NEC              |
|                                               |                                                                                  | 0090           | INF COLITIS ENTERIT&GASTROENTERIT                |
|                                               |                                                                                  | 0091           | COLITIS ENTRIT&GASTRONTRIT INF ORIGN             |
|                                               |                                                                                  | 0092           | INFECTIOUS DIARRHEA                              |
|                                               |                                                                                  | A0811          | ACUTE GASTROENTROPATHY NORWALK AGNT              |
|                                               |                                                                                  | A084           | VIRAL INTESTINAL INFECTION UNSPEC                |
|                                               |                                                                                  | A09            | INF GASTROENTERITIS & COLITIS UNS                |
| Category                                      | Clinical Grouping                        | Diagnosis Code | Description                                      |
|----------------------------------------------|------------------------------------------|----------------|--------------------------------------------------|
| Infectious and parasitic diseases<sup>a</sup>, continued | Infections of the genitourinary tract | 0980           | GONOCOCCAL INFECTION LOWER GU TRACT             |
|                                              |                                          | 09941          | NONGONOCCL URETHRIT-CHLAMYDTRCHMAT               |
|                                              |                                          | 13101          | TRICHOMONAL VULVOVAGINITIS                      |
|                                              |                                          | 64663          | INFECTIONS GU TRACT ANTPRTM                     |
|                                              |                                          | 09832          | OTH INF SEXL TRNSMS COMP CHILDBIRTH             |
| Infections of the central nervous system     | 0479                                    | UNSPECIFIED VIRAL MENINGITIS                    |
|                                              | A879                                    | VIRAL MENINGITIS UNSPECIFIED                    |
|                                              | M4656                                   | OTH INFECTIVE SPONDYLOPATHIES LUMB              |
| Pneumonia                                    | 46619                                   | ACUT BRONCHIOLITIS-OTH INF ORGNSMS             |
|                                              | 4820                                    | PNEUMONIA DUE KLEBSIELLA PNEUMONIAE            |
|                                              | 48289                                   | PNEUMONIA DUE OTHER SPEC BACTERIA              |
|                                              | 486                                     | PNEUMONIA, ORGANISM UNSPECIFIED                |
|                                              | J156                                    | PNEUMONIA DT OTH GRAM-NEG BACTERIA             |
|                                              | J180                                    | BRONCHOPNEUMONIA UNS ORGANISM                  |
|                                              | J189                                    | PNEUMONIA UNSPECIFIED ORGANISM                 |
| Infections associated with operations / procedures | 53981                                  | INFECTION D/T OTH BARIATRIC PROC               |
|                                              | 99662                                   | INF&INFLAM REACT TO VASC DEVICE                |
|                                              | 99859                                   | OTHER POSTOPERATIVE INFECTION NEC              |
|                                              | K9422                                   | GASTROSTOMY INFECTION                          |
|                                              | T814XXA                                 | INFECTION FOLLOW PROC INITIAL ENC              |
| Sepsis                                       | 0380                                    | STREPTOCOCCAL SEPTICEMIA                       |
|                                              | 03811                                   | METH SUSCEPTIBLE STAPH SEPTICEMIA              |
|                                              | 03842                                   | SEPTICEMIA DUE TO ESCHERICHIA COLI             |
|                                              | 03849                                   | OTH SEPTICEMIA DUE GM-NEG ORGANISM             |
|                                              | 0389                                    | UNSPECIFIED SEPTICEMIA                        |
|                                              | 7907                                    | BACTEREMIA                                    |
|                                              | A419                                    | SEPSIS UNSPECIFIED ORGANISM                   |
| Upper respiratory infection                  | 4659                                    | ACUTE URIS OF UNSPECIFIED SITE                 |
|                                              | J069                                    | ACUTE UP RESPIRATORY INFECTION UNS             |
| Skin infection                               | 1104                                    | DERMATOPHYTOSIS OF FOOT                        |
|                                              | 1123                                    | CANDIDIASIS OF SKIN AND NAILS                  |
|                                              | 6869                                    | UNSPEC LOCAL INF SKIN&SUBCUT TISSUE            |
|                                              | 9104                                    | FACE-NCK&SCLP NO EYE INSECT BITE INF           |
|                                              | 9165                                    | HIP THIGH LEG&ANKLE INSECT BITE INF            |
| Unspecified urinary tract infections         | 5990                                    | UTI SITE NOT SPECIFIED                         |
|                                              | N390                                    | UTI SITE NOT SPECIFIED                         |
| Viral conjunctivitis                         | 0340                                    | STREPTOCOCCAL SORE THROAT                      |
|                                              | 03812                                   | METH RESISTANT STAPH SEPTICEMIA                |
|                                              | 04112                                   | METHICILLIN RESISTANT STAPH AUREUS             |
|                                              | 0419                                    | BACTERL INF UNSPEC CCE & UNS SITE              |
|                                              | 05311                                   | GENICULATE HERPES ZOSTER                       |
|                                              | 0539                                    | HERPES ZOSTER WITHOUT MENTION COMP             |
|                                              | 0539                                    | HERPES ZOSTER WITHOUT MENTION COMP             |
|                                              | 0549                                    | HERPES SIMPLEX WITHOUT MENTION COMP            |
|                                              | 0579                                    | UNSPECIFIED VIRAL EXANTHEM                     |
| Miscellaneous infections                     | 06640                                   | WEST NILE FEVER UNSPECIFIED                    |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Infectious and parasitic diseases*, continued | Miscellaneous infections, continued | 0743 | HAND, FOOT, AND MOUTH DISEASE |
| | | 075 | INFECTIOUS MONONUCLEOSIS |
| | | 07999 | UNSPEC VIRAL INF CCE & UNS SITE |
| | | 0820 | SPOTTED FEVERS |
| | | 08881 | LYME DISEASE |
| | | 1000 | LEPTOSPIROSIS ICTEROHEMORRHAGICA |
| | | 1120 | CANDIDIASIS OF MOUTH |
| | | 1369 | UNSPEC INFECTIOUS&PARASITIC DZ |
| | | 3570 | ACUTE INFECTIVE POLYNEURITIS |
| | | 4809 | UNSPECIFIED VIRAL PNEUMONIA |
| | | 481 | PNEUMOCOCCAL PNEUMONIA |
| | | 99662 | INF&INFLAM REACT TO VASC DEVICE |
| | | 99669 | INF&INFLAM REACT INT PROS DEVICE |
| | | 99932 | BLOODSTREAM INFECTION D/T CVC |
| | | 99933 | LOCAL INFECTION D/T CENTRL VEN CATH |
| | | A047 | ENTEROCOLIT D/T CLOSTRIDM DIFFICILE |
| | | A6000 | HERPESVIRAL INF UROGENITAL SYS UNS |
| | | B029 | ZOSTER WITHOUT COMPLICATIONS |
| | | B349 | VIRAL INFECTION UNSPECIFIED |
| | | J111 | FLU D/T UNIDENT FLU VIR RESP MANIF |
| | | J208 | ACUTE BRONCHITIS D/T SPEC ORGANISMS |
| | | K9581 | INFECTION D/T OTH BARIATRIC PROC |
| | | T8451XA | INF INFLM RXN INT RT HIP PROS INIT |
| | | T8579XA | INF INFLM RXN OTH INT PROS DEV INIT |
| | | V0179 | CONTACT/EXPOSURE OTH VIRAL DISEASES |
| | | V0184 | CONTACT/EXPOSURE TO MENINGOCOCCUS |
| | | V045 | NEED PROPH VACC AGAINST RABIES |
| Diseases of the genitourinary (GU) system | Dysuria | 7881 | DYSURIA |
| | | 78863 | URGENCY OF URINATION |
| | | R300 | DYSURIA |
| | Gynecologic diagnoses | 2180 | SUBMUCOUS LEIOMYOMA OF UTERUS |
| | | 2181 | INTRAMURAL LEIOMYOMA OF UTERUS |
| | | 2189 | LEIOMYOMA OF UTERUS, UNSPECIFIED |
| | | 220 | BENIGN NEOPLASM OF OVARY |
| | | 6142 | SALPINGITIS&OOPHORITIS NOT SPEC |
| | | 6143 | ACUTE PARAMETRITIS&PELV CELLULITIS |
| | | 6146 | PELVIC PERITONEAL ADHESIONS, FEMALE |
| | | 6150 | ACUTE INFLAM DISEASE UTERUS NO CERV |
| | | 6159 | UNSPEC INFLAMMATORY DISEASE UTERUS |
| | | 6160 | CERVICITIS AND ENDOCERVICITIS |
| | | 61610 | UNSPEC VAGINITIS&VULVOVAGINITIS |
| | | 6162 | CYST OF BARTHOLINS GLAND |
| | | 6164 | OTHER ABSCESS OF VULVA |
| | | 6170 | ENDOMETRIOSIS OF UTERUS |
| | | 6171 | ENDOMETRIOSIS OF OVARY |
| | | 6173 | ENDOMETRIOSIS OF PELVIC PERITONEUM |
| | | 61804 | RECTOCELE W/O MENTION UTERN PROLAPS |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Diseases of the genitourinary (GU) system | Gynecologic diagnoses, continued | 6181 | UTERN PROLAPS W/O VAG WALL PROLAPS |
| | | 6182 | UTEROVAGINAL PROLAPSE, INCOMPLETE |
| | | 6183 | UTEROVAGINAL PROLAPSE, COMPLETE |
| | | 6184 | UTEROVAGINAL PROLAPSE, UNSPECIFIED |
| | | 6185 | PROLAPSE VAGINAL VAULT AFTER HYST |
| | | 61889 | OTHER SPECIFIED GENITAL PROLAPSE |
| | | 6202 | OTHER AND UNSPECIFIED OVARIAN CYST |
| | | 6204 | PROLAPSE/HERNIA OVARY&FALLOP TUBE |
| | | 6205 | TORSION OVARY OVARIAN PEDICLE/TUBE |
| | | 6208 | OTH NONINFLAM D/O OVRY TUBE&BRD LIG |
| | | 6238 | OTH SPEC NONINFLAM DISORDER VAGINA |
| | | 6253 | DYSMENORRHEA |
| | | 6255 | PELVIC CONGESTION SYNDROME |
| | | 6259 | UNSPEC SX ASSOC W/FE GENIT ORGN |
| | | 6262 | EXCESSIVE OR FREQUENT MENSTRUATION |
| | | 6264 | IRREGULAR MENSTRUAL CYCLE |
| | | 6268 | OTH D/O MENS ABN BLEED FE GNT TRACT |
| | | 6269 | UNS D/O MENS ABN BLEED FE GNT TRACT |
| | | 6270 | PREMENOPAUSAL MENORRHAGIA |
| | | 63571 | INCPL LEGL INDUCD AB W/OTH COMPS |
| | | 9392 | FOREIGN BODY IN VULVA AND VAGINA |
| | | D250 | SUBMUCOUS LEIOMYOMA OF UTERUS |
| | | D251 | INTRAMURAL LEIOMYOMA OF UTERUS |
| | | D259 | LEIOMYOMA OF UTERUS UNSPECIFIED |
| | | D270 | BENIGN NEOPLASM OF RIGHT OVARY |
| | | N7093 | SALPINGITIS & OOPHORITIS UNS |
| | | N730 | ACUTE PARAMETRITIS PELV CELLULITIS |
| | | N739 | FE PELVIC INFLAMMATORY DISEASE UNS |
| | | N750 | CYST OF BARTHOLINS GLAND |
| | | N764 | ABSCESS OF VULVA |
| | | N809 | ENDOMETRIOSIS UNSPECIFIED |
| | | N8189 | OTHER FEMALE GENITAL PROLAPSE |
| | | N83201 | UNSPECIFIED OVARIAN CYST RIGHT SIDE |
| | | N83202 | UNSPECIFIED OVARIAN CYST LEFT SIDE |
| | | N8320 | UNSPECIFIED OVARIAN CYSTS |
| | | N83292 | OTHER OVARIAN CYST LEFT SIDE |
| | | N839 | OTH NONINFL D/O OVARY TUBE&BRD LIG |
| | | N898 | OTH SPEC NONINFLAMMATORY D/O VAGINA |
| | | N920 | EXCESS FREQ MENSTRUATION W/REG CYCL |
| | | N921 | EXCESS & FREQ MEN W/IRREG CYCLE |
| | | N938 | OTH SPEC ABNORMAL UTERINE VAG BLEED |
| | | N939 | ABNORMAL UTERINE VAGINAL BLEED UNS |
| | | N949 | UNS COND W/FE GENIT ORGN MENST CYCL |
| | | O034 | INCOMPL SPONT AB W/O COMPLICATION |
| | | O82 | ENCOUNTER FOR CD WITHOUT INDICATION |
| | | R102 | PELVIC AND PERINEAL PAIN |
| | | S30814A | ABRasion VAGINA & VULVA INITIAL ENC |
| | | S3140XA | UNS OPEN WOUND VAGINA VULVA INITIAL |
| | | T192XXA | FOREIGN BODY VULVA VAGINA INIT ENC |
| Category                                                                 | Clinical Grouping                                      | Diagnosis Code | Description                                          |
|-------------------------------------------------------------------------|--------------------------------------------------------|----------------|-------------------------------------------------------|
| Diseases of the genitourinary (GU) system, continued                     | Hematuria                                              | 59970          | HEMATURIA UNSPECIFIED                                 |
|                                                                         |                                                        | R319           | HEMATURIA UNSPECIFIED                                 |
| Diseases of the kidney or ureters, including renal failure              |                                                        | 5845           | ACUT KIDNEY FAIL LES TUBULAR NECRO                    |
|                                                                         |                                                        | 5849           | ACUTE KIDNEY FAILURE UNSPECIFIED                      |
|                                                                         |                                                        | 5859           | CHRONIC KIDNEY DISEASE UNSPECIFIED                    |
|                                                                         |                                                        | 591            | HYDRONEPHROSIS                                        |
|                                                                         |                                                        | 5933           | STRICUTURE OR KINKING OF URETER                       |
|                                                                         |                                                        | 5935           | HYDROURETER                                           |
|                                                                         |                                                        | 5939           | UNSPECIFIED DISORDER KIDNEY&URETER                    |
|                                                                         |                                                        | 59960          | URINARY OBSTRUCTION UNSPECIFIED                       |
|                                                                         |                                                        | 59969          | URINARY OBSTRUCTION NEC                               |
|                                                                         |                                                        | 59982          | INTRINSIC SPHINCTER DEFICIENCY                        |
|                                                                         |                                                        | 75312          | CONGN POLYCYSTIC KIDNEY UNSPEC TYPE                   |
|                                                                         |                                                        | 78841          | URINARY FREQUENCY                                    |
|                                                                         |                                                        | 78899          | OTHER SYMPTOMS INVLV URINARY SYSTEM                   |
|                                                                         |                                                        | 99639          | MECH COMP GU DEVICE IMPLANT&GFT OTH                   |
|                                                                         |                                                        | 99668          | INF&INFLAM REACT PERIT DIAL CATH                      |
|                                                                         |                                                        | 99673          | OTH COMP-RENAL DIALYS DEV IMPL&GFT                    |
|                                                                         |                                                        | 99676          | OTH COMPS DUE GU DEVICE IMPLANT&GFT                   |
|                                                                         |                                                        | 99681          | COMPLICATIONS TRANSPALTED KIDNEY                      |
|                                                                         |                                                        | D1771          | BENIGN LIPOMATOUS NEOPLASM KIDNEY                     |
|                                                                         |                                                        | N12            | TUBULO-INTERST NEPHRIT NOT AC/CHRN                   |
|                                                                         |                                                        | N132           | HYDRONPHROS RENL&URETL CALCUL OBST                    |
|                                                                         |                                                        | N1330          | UNSPECIFIED HYDRONEPHROS                              |
|                                                                         |                                                        | N170           | ACUTE RENAL FAILURE TUBULR NECROS                     |
|                                                                         |                                                        | N179           | ACUTE KIDNEY FAILURE UNSPECIFIED                      |
|                                                                         |                                                        | N189           | CHRONIC KIDNEY DISEASE UNSPECIFIED                    |
|                                                                         |                                                        | N3090          | CYSTITIS UNS WITHOUT HEMATURIA                        |
|                                                                         |                                                        | N319           | NEUROMUSCULAR DYSFNCTON BLADDER UNS                   |
|                                                                         |                                                        | R350           | FREQUENCY OF MICTURITION                              |
|                                                                         |                                                        | R3911          | HESITANCY OF MICTURITION                              |
|                                                                         |                                                        | T8619          | OTH COMPLICATION KIDNEY TRANSPLANT                    |
| Diagnoses of the male genitourinary tract                               |                                                        | 6010           | ACUTE PROSTATITIS                                    |
|                                                                         |                                                        | 60490          | UNSPECIFIED ORCHITIS&EPIDIDYMITIS                     |
|                                                                         |                                                        | 6072           | OTHER INFLAMMATORY DISORDERS PENIS                    |
|                                                                         |                                                        | 60781          | BALANITIS XEROTICA OBLITERANS                         |
|                                                                         |                                                        | 60886          | EDEMA OF MALE GENITAL ORGANS                          |
|                                                                         |                                                        | 6089           | UNSPEC DISORDER MALE GENITAL ORGANS                   |
|                                                                         |                                                        | N401           | BENIGN PROSTATIC HYPERPLASIA W/LUTS                   |
|                                                                         |                                                        | N452           | ORCHITIS                                              |
|                                                                         |                                                        | N453           | EPIDIDYMO-ORCHITIS                                    |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|-------------------|----------------|-------------|
| Diseases of the genitourinary (GU) system, continued | Threatened or completed spontaneous abortion of pregnancy | 632 | MISSED ABORTION |
| | | 63490 | UNSPEC SPONT AB W/O MENTION COMP |
| | | 63491 | INCPL SPONT AB WITHOUT MENTION COMP |
| | | 63492 | COMPLETE SPONT AB W/O MENTION COMP |
| | | 64003 | THREATENED ABORTION, ANTEPARTUM |
| | | O0090 | UNS ECTOPIC PREG WO INTRAUTERINE PG |
| | | O039 | COMPLETE/UNS SPONT AB W/O COMP |
| | | O200 | THREATENED ABORTION |
| Nephrolithiasis, or stones in the ureter, bladder or urethra | | 5920 | CALCULUS OF KIDNEY |
| | | 5921 | CALCULUS OF URETER |
| | | 5929 | UNSPECIFIED URINARY CALCULUS |
| | | 5942 | CALCULUS IN URETHRA |
| | | 7880 | RENAL COLIC |
| | | N200 | CALCULUS OF KIDNEY |
| | | N201 | CALCULUS OF URETER |
| | | N23 | UNSPECIFIED RENAL COLIC |
| Lower or upper urinary tract infections | | 59010 | AC PYLONPH NO LES RENL MDULRY NCROS |
| | | 59080 | UNSPECIFIED PYELONEPHRITIS |
| | | 5950 | ACUTE CYSTITIS |
| | | 5959 | UNSPECIFIED CYSTITIS |
| | | 6235 | LEUKORRHEA NOT SPEC AS INFECTIVE |
| | | N10 | ACUTE PYELONEPHRITIS |
| | | N136 | PYONEPHROSIS |
| | | N3000 | ACUTE CYSTITIS WITHOUT HEMATURIA |
| | | N3001 | ACUTE CYSTITIS WITH HEMATURIA |
| Miscellaneous genitourinary diagnoses | | 59655 | DETRUSOR SPHINCTER DYSSYNERGIA |
| | | 5969 | UNSPECIFIED DISORDER OF BLADDER |
| | | 60000 | HT PROS W/O UR OBST & OTH LUTS |
| | | 60001 | HT PROS W/UR OBST & OTH LUTS |
| | | 61801 | CYSTOCELE W/O UTERN PROLAPS MIDLN |
| | | 78820 | UNSPECIFIED RETENTION OF URINE |
| | | 99664 | INF&INFLAM REACT-INDWLL URIN CATH |
| | | N320 | BLADDER-NECK OBSTRUCTION |
| | | N359 | URETHRAL STRICTURE UNSPECIFIED |
| | | R339 | RETENTION OF URINE UNSPECIFIED |
| | | R390 | EXTRAVASATION OF URINE |
| | | R8299 | OTHER ABNORMAL FINDINGS IN URINE |
| | | V536 | PSGR TRUCK/VN INJ COLL CAR/VAN TRAF |
| Pregnancy | Conditions of pregnancy, delivery or the immediate postpartum period | | |
| | | 64090 | UNS HEMORR ERLY PG UNS AS EPIS CARE |
| | | 64093 | UNSPEC HEMORR EARLY PG ANTPRTM |
| | | 64111 | HEMORR FROM PLACENTA PREVIA W/DELIV |
| | | 64201 | BEN ESSENTIAL HYPERTENSION W/DELIV |
| | | 64223 | OTH PRE-EXISTING HTN ANTPRTM |
| | | 64231 | TRANSIENT HTN PREGNANCY W/DELIV |
| | | 64241 | MILD/UNSPEC PRE-ECLAMPSIA W/DELIV |
| | | 64251 | SEVERE PRE-ECLAMPSIA, WITH DELIVERY |
| | | 64271 | PRE-ECLAMP/ECLAMP PRE-XST HTN DELIV |
| | | 64293 | UNSPECIFIED HYPERTENSION ANTEPARTUM |
| Category | Clinical Grouping                                                                 | Diagnosis Code | Description                                |
|----------|-----------------------------------------------------------------------------------|----------------|--------------------------------------------|
| Pregnancy, continued | Conditions of pregnancy, delivery or the immediate postpartum period, continued | 64303          | MILD HYPEREMESIS GRAVIDARUM ANTPRTM        |
|          |                                                                                  | 64393          | UNSPEC VOMITING PREGNANCY ANTPRTM          |
|          |                                                                                  | 64403          | THREATENED PREMATURE LABOR ANTPRTM         |
|          |                                                                                  | 64413          | OTHER THREATENED LABOR, ANTEPARTUM         |
|          |                                                                                  | 64421          | EARLY ONSET DELIVERY-DEL                   |
|          |                                                                                  | 64511          | POST TERM PG DEL W/NO ANTPRTM COND         |
|          |                                                                                  | 64623          | UNSPEC ANTEPARTUM RENAL DISEASE            |
|          |                                                                                  | 64653          | ASYMPTOMATIC BACTERIURIA ANTEPARTUM        |
|          |                                                                                  | 64683          | OTH SPECIFIED COMPLICATION ANTPRTM         |
|          |                                                                                  | 64684          | OTH SPEC COMPS PREVIOUS PP COND            |
|          |                                                                                  | 64693          | UNSPEC COMP PREGNANCY ANTPRTM              |
|          |                                                                                  | 64761          | OTH MATERNAL VIRAL DISEASE W/DELIV         |
|          |                                                                                  | 64801          | MATERNAL DM WITH DELIVERY                  |
|          |                                                                                  | 64803          | MATERNAL DM ANTEPARTUM                     |
|          |                                                                                  | 64813          | MTRN THYROID DYSF ANTPRTM COMD/COMP        |
|          |                                                                                  | 64881          | ABNORMAL MTRN GLU TOLERANCE W/DELIV        |
|          |                                                                                  | 64891          | OTH CURRENT MATERNAL CCE W/DELIVERY        |
|          |                                                                                  | 64893          | OTH CURRENT MATERNAL CCE ANTEPARTUM        |
|          |                                                                                  | 64921          | BARIATRIC SURG COMP PG BIRTH/PP DEL        |
|          |                                                                                  | 64953          | SPOTTING COMP PG ANTEPRTM COMD/COMP        |
|          |                                                                                  | 650            | NORMAL DELIVERY                            |
|          |                                                                                  | 65101          | TWIN PREGNANCY, DELIVERED                  |
|          |                                                                                  | 65251          | HIGH FETAL HEAD AT TERM, DELIVERED         |
|          |                                                                                  | 65261          | MX GEST W/MALPRESNT 1 FETUS/MOR DEL        |
|          |                                                                                  | 65281          | OTH MALPSTN/MALPRSATION FETUS DELIV        |
|          |                                                                                  | 65341          | FETOPELVIC DISPROPORTION, DELIVERED        |
|          |                                                                                  | 65421          | PREV C/S DEL DEL W/NO ANTPRTM COND         |
|          |                                                                                  | 65571          | DECR FETAL MOVNINTS MGMT MOTH DELIV        |
|          |                                                                                  | 65573          | DCRESD FETL MOVEMENT ANTPRTM COMPL         |
|          |                                                                                  | 65581          | OTH KNWN/SPCT FETL ABN NEC DEL             |
|          |                                                                                  | 65651          | POOR FETAL GROWTH MGMT MOTH DELIV          |
|          |                                                                                  | 65653          | POOR FETL GROWTH ANTPRTM COMD/COMPL        |
|          |                                                                                  | 65801          | OLIGOHDYRAMNIOS, DELIVERED                 |
|          |                                                                                  | 65811          | PREMATURE RUPTURE MEMB PG DELIV            |
|          |                                                                                  | 65821          | DELAY DEL SPONT/UNS RUP MEMB DEL           |
|          |                                                                                  | 65823          | DLAY DEL SPONT/UNS RUP MEMB ANTPRTM        |
|          |                                                                                  | 65951          | ELDERLY PRIMIGRAVIDA, DELIVERED            |
|          |                                                                                  | 65961          | ELDER MXIGRAVDA DEL W/ANTPRTM COND         |
|          |                                                                                  | 65971          | ABN FETAL HEART RATE/RHYTHM DEL            |
|          |                                                                                  | 65981          | OTH INDICAT CARE/INTRVN REL L&D DEL        |
|          |                                                                                  | 66011          | OBSTRUCTION BONY PELV DUR L&D DEL          |
|          |                                                                                  | 66111          | SEC UTERINE INERTIA WITH DELIVERY          |
|          |                                                                                  | 66131          | PRECIPITATE LABOR, WITH DELIVERY           |
|          |                                                                                  | 66401          | 1-DEG PERINEAL LACERATION W/DELIV          |
|          |                                                                                  | 66411          | 2-DEG PERINEAL LACERATION W/DELIV          |
|          |                                                                                  | 66481          | OTH SPEC TRAUMA PERIN&VULVA W/DELIV        |
|          |                                                                                  | 66612          | OTH IMMEDIATE PP HEMORR W/DELIV            |
|          |                                                                                  | 66614          | OTH IMMEDIATE PP HEMORR PP                 |
|          |                                                                                  | 66981          | OTH COMP L&D DEL W/NO ANTPRTM COND         |
|          |                                                                                  | 67484          | OTHER COMPLICATION OF PUERPERIUM           |
| Category                      | Clinical Grouping                                                                 | Diagnosis Code | Description                                                                 |
|-------------------------------|-----------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------|
| Pregnancy<sup>0</sup>,        | Conditions of pregnancy, delivery or the immediate postpartum period, continued   | 8786           | OPEN WOUND VAGINA W/O MENTION COMP                                         |
| continued                     |                                                                                   | N2889          | OTHER SPEC DISORDERS KIDNEY URETER                                          |
|                               |                                                                                   | N99820         | POSTPCR HEM GUS ORG/STR FLW GUS PCR                                          |
|                               |                                                                                   | O1002          | PRE-EXIST ESS HTN COMP CHILDBIRTH                                           |
|                               |                                                                                   | O10912         | UNS PRE-EXIST HTN COMP PREG 2ND TRI                                          |
|                               |                                                                                   | O133           | GEST HTN NO SIG PROTEINURIA 3RD TRI                                          |
|                               |                                                                                   | O134           | GESTATIONAL HTN W/O SIGN PU COMP CB                                          |
|                               |                                                                                   | O1403          | MILD MOD PRE-ECLAMP 3RD TRIMESTER                                           |
|                               |                                                                                   | O1423          | HELLP SYNDROME THIRD TRIMESTER                                               |
|                               |                                                                                   | O209           | HEMORRHAGE EARLY PREGNANCY UNS                                               |
|                               |                                                                                   | O210           | MILD HYPEREMESIS GRAVIDARUM                                                  |
|                               |                                                                                   | O211           | HYPEREMESIS GRAVIDA W/METAB DISTURB                                          |
|                               |                                                                                   | O219           | VOMITING OF PREGNANCY UNSPECIFIED                                            |
|                               |                                                                                   | O24420         | GEST DM CHILDBIRTH DIET CONTROL                                              |
|                               |                                                                                   | O24429         | GEST DM CHILDBIRTH UNS CONTROL                                              |
|                               |                                                                                   | O26872         | CERVICAL SHORTENING 2ND TRIMESTER                                            |
|                               |                                                                                   | O26891         | OTH SPEC PREG RELATED COND 1ST TRI                                           |
|                               |                                                                                   | O26892         | OTH SPEC PREG RELATED COND 2ND TRI                                           |
|                               |                                                                                   | O26893         | OTH SPEC PREG RELATED COND 3RD TRI                                           |
|                               |                                                                                   | O26899         | OTH SPEC PREG RELATED COND UNS TRI                                           |
|                               |                                                                                   | O2692          | PREGNANCY RELATED COND UNS 2ND TRI                                           |
|                               |                                                                                   | O2693          | PREGNANCY RELATED COND UNS 3RD TRI                                           |
|                               |                                                                                   | O30043         | TWIN PG DICHRORIONIC/DIAMNIO 3RD TRI                                         |
|                               |                                                                                   | O328XX0        | MAT CARE OTH MALPRESENT FET NA/UNS                                          |
|                               |                                                                                   | O34211         | MAT CARE LW TRANS SCAR PREV C/S DEL                                          |
|                               |                                                                                   | O3421          | MAT CARE FOR SCAR PREV CESAREAN DEL                                         |
|                               |                                                                                   | O3432          | MAT CARE CERV INCOMPETNCE 2ND TRI                                            |
|                               |                                                                                   | O364XX0        | MATERNAL CARE IU DEATH NA/UNS                                                |
|                               |                                                                                   | O365930        | MAT CARE OTH PR FTL GRTH 3RD TM UNS                                         |
|                               |                                                                                   | O4103X0        | OLIGOHYDRAMNIOS THIRD TRI NA/UNS                                              |
|                               |                                                                                   | O42912         | PT PROM UNS TM BTW RUPT LABR 2 TRI                                          |
|                               |                                                                                   | O42913         | PT PROM UNS TM BTW RUPT LABR 3 TRI                                          |
|                               |                                                                                   | O4292          | FT PROM UNS TM BTWNU RUPT ONSET LABR                                        |
|                               |                                                                                   | O4692          | ANTEPARTUM HEMORR UNS 2ND TRIMESTER                                         |
|                               |                                                                                   | O480           | POST-TERM PREGNANCY                                                          |
|                               |                                                                                   | O620           | PRIMARY INADEQUATE CONTRACTIONS                                             |
|                               |                                                                                   | O654           | OBST LABR FETOPELV DISPROPORTN UNS                                           |
|                               |                                                                                   | O691XX0        | L&D COMP CRD AROUND NCK COMPRS UNS                                          |
|                               |                                                                                   | O6981X0        | L&D COMP CORD NECK NO COMPRS NA/UNS                                         |
|                               |                                                                                   | O6982X0        | L&D COMP OTH CRD ENTLG NO CMPR UNS                                           |
|                               |                                                                                   | O700           | FIRST DEG PERINEAL LAC DUR DELIV                                             |
|                               |                                                                                   | O701           | SECOND DEG PERINEAL LAC DUR DELIV                                            |
|                               |                                                                                   | O714           | OBSTETRIC HIGH VAG LACERATION ALONE                                          |
|                               |                                                                                   | O722           | DELAYED & SEC POSTPARTUM HEMORRHAGE                                          |
|                               |                                                                                   | O76            | ABN FETL HEART RATE RHYTHM COMP L&D                                         |
|                               |                                                                                   | O80            | ENCOUNTR FULL-TERM UNCOMPLICATD DEL                                          |
|                               |                                                                                   | O9089          | OTHER COMPLICATIONS PUERPERIUM NEC                                           |
|                               |                                                                                   | O99013         | ANEMIA COMP PREGNANCY THIRD TRI                                              |
|                               |                                                                                   | O9902          | ANEMIA COMPLICATING CHILDBIRTH                                              |
| Category                      | Clinical Grouping                                                                 | Diagnosis Code | Description                              |
|-------------------------------|------------------------------------------------------------------------------------|----------------|-------------------------------------------|
| Pregnancy\(^b\), continued    | Conditions of pregnancy, delivery or the immediate postpartum period, continued    | O99214         | OBESITY COMPLICATING CHILDBIRTH           |
|                               |                                                                                    | O99344         | OTH MENTAL D/O COMP CHILDBIRTH            |
|                               |                                                                                    | O99519         | DISEASES RESP SYS COMP PREG UNS TRI       |
|                               |                                                                                    | O99619         | DZ DIGESTIVE SYS COMP PREG UNS TRI        |
|                               |                                                                                    | O99844         | BARIATRIC SURG STS COMP CHILDBIRTH        |
|                               |                                                                                    | O9989          | OTH DZ COMP PREG CHILDBIRTH PUERPER       |
|                               |                                                                                    | V3000          | SINGLE LIVEBORN HOSP W/O C-SEC            |
|                               |                                                                                    | V3001          | SINGLE LIVEBORN HOSP C-SEC DELIV          |
|                               |                                                                                    | Z3800          | SINGLE LIVE INFANT DELIV VAGINALLY        |
|                               |                                                                                    | Z3831          | TWIN LIVEBORN INFANT DELIV C-SECT         |
| Miscellaneous                 | Malignancies                                                                       | 1410           | MALIGNANT NEOPLASM BASE TONGUE            |
|                               |                                                                                    | 1531           | MALIGNANT NEOPLASM TRANSVERSE COLON       |
|                               |                                                                                    | 1623           | MALIG NEOPLSM UP LOBE BRONCHUS/LUNG       |
|                               |                                                                                    | 1625           | MALIG NEOPLSM LW LOBE BRONCHUS/LUNG       |
|                               |                                                                                    | 1742           | MALIG NEOPLSM UP-INNR QUAD FE BRST        |
|                               |                                                                                    | 1748           | MALIG NEOPLSM OTH SPEC SITE FE BRST       |
|                               |                                                                                    | 1749           | MALIG NEOPLSM BREAST UNSPEC SITE          |
|                               |                                                                                    | 1809           | MALIG NEOPLSM CERV UTERI UNS SITE         |
|                               |                                                                                    | 1820           | MAL NEOPLSM CORPUS UTERI NO ISTHMUS       |
|                               |                                                                                    | 1830           | MALIGNANT NEOPLASM OF OVARY               |
|                               |                                                                                    | 1832           | MALIGNANT NEOPLASM FALLOPIAN TUBE         |
|                               |                                                                                    | 1844           | MALIG NEOPLSM VULVA UNSPEC SITE           |
|                               |                                                                                    | 185            | MALIGNANT NEOPLASM OF PROSTATE            |
|                               |                                                                                    | 1872           | MALIGNANT NEOPLASM OF GLANS PENIS         |
|                               |                                                                                    | 1890           | MALIG NEOPLASM KIDNEY EXCEPT PELVIS       |
|                               |                                                                                    | 1910           | MAL NEOPLSM CEREBRUM NO LOBES&VENTS       |
|                               |                                                                                    | 1911           | MALIG NEOPLASM FRONTAL LOBE BRAIN         |
|                               |                                                                                    | 193            | MALIGNANT NEOPLASM OF THYROID GLAND       |
|                               |                                                                                    | 1983           | SEC MALIG NEOPLSM BRAIN&SPINAL CORD       |
|                               |                                                                                    | 2330           | CARCINOMA IN SITU OF BREAST               |
|                               |                                                                                    | 2381           | NEO UNCERT BHV CNCTV&OTH SFT TISS         |
|                               |                                                                                    | 23875          | MYELODYSPLASTIC SYNDROME UNSPEC           |
|                               |                                                                                    | 2390           | NEOPLASM UNSPEC NATR DIGESTV SYSTEM       |
|                               |                                                                                    | C182           | MALIGNANT NEOPLASM ASCENDING COLON        |
|                               |                                                                                    | C50412         | MAL NEO UP-OUTER QUAD LT FEM BREAST       |
|                               |                                                                                    | C73            | MALIGNANT NEOPLASM OF THYROID GLAND       |
|                               |                                                                                    | C8510          | UNS B-CELL LYMPHOMA UNSPECIFIE SITE       |
|                               |                                                                                    | C9000          | MIX MYELOMA NOT ACHIEVED REMISSION         |
|                               |                                                                                    | D4111          | NEOPLASM UNCERT BHV RT RENAL PELVIS       |
|                               |                                                                                    | D4412          | NEOPLASM UNCERT BHV LT ADRENAL GLAND      |
|                               |                                                                                    | V5811          | ENCOUNTER ANTI NEOPLASTIC CHEMO           |
| Hematologic                   |                                                                                   | 2800           | IRON DEFIC ANEMIA SEC BLOOD LOSS          |
|                               |                                                                                    | 2808           | OTHER SPEC IRON DEFICIENCY ANEMIAS        |
|                               |                                                                                    | 2809           | UNSPECIFIED IRON DEFICIENCY ANEMIA        |
|                               |                                                                                    | 2819           | UNSPECIFIED DEFICIENCY ANEMIA             |
|                               |                                                                                    | 2825           | SICKLE-CELL TRAIT                         |
|                               |                                                                                    | 2851           | ACUTE POSTHEMORRHAGIC ANEMIA             |
|                               |                                                                                    | 2858           | OTHER SPECIFIED ANEMIAS                   |

*Table A2: Component Diagnoses of Clinical Acute Care Categories, continued*
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Miscellaneous, continued | Hematologic, continued | 2859 | UNSPECIFIED ANEMIA |
| | | 2869 | OTHER&UNSPEC COAGULATION DEFECTS |
| | | 2875 | UNSPECIFIED THROMBOCYTOPENIA |
| | | 28800 | NEUTROPENIA UNSPECIFIED |
| | | 2893 | LYMPHADENITIS UNSPEC NO MESENTERIC |
| | | 28959 | OTHER DISEASES OF SPLEEN |
| | | 7856 | ENLARGEMENT OF LYMPH NODES |
| | | 79092 | ABNORMAL COAGULATION PROFILE |
| | | 79099 | OTH NONSPEC FINDINGS EXAM BLOOD OTH |
| | | D500 | IRON DEFIC ANEMIA SEC BLD LOSS CHRN |
| | | D508 | OTHER IRON DEFICIENCY ANEMIAS |
| | | D509 | IRON DEFICIENCY ANEMIA UNSPECIFIED |
| | | D539 | NUTRITIONAL ANEMIA UNSPECIFIED |
| | | D649 | ANEMIA UNSPECIFIED |
| | | D693 | IMMUNE THROMBOCYTOPENIC PURPURA |
| | | D72825 | BANDEMIA |
| | | E8029 | RW ACC W/DERAIL-UNS PERSON |
| | | E806 | OTHER SPECIFIED RAILWAY ACCIDENT |
| | | D2409 | GOITER, UNSPECIFIED |
| | | D2410 | NONTOXIC UNINODULAR GOITER |
| | | D2411 | NONTOXIC MULTINODULAR GOITER |
| | | D24200 | TOX DIFFUSE GOITER NO CRISIS |
| | | D24291 | THYROTOX W/O MEN GOITER W/CRISIS |
| | | D2449 | UNSPECIFIED HYPOTHYROIDISM |
| | | D2450 | ACUTE THYROIDITIS |
| | | D25000 | DB W/O COMP TYPE II/UNS NOT UNCNTRL |
| | | D25002 | DB W/O COMP TYPE II/UNS UNCNTRL |
| | | D25003 | DB W/O COMP TYPE I TYPE UNCNTRL |
| | | D25010 | DB W/KA TYPE II/UNS NOT UNCNTRL |
| | | D25012 | DB W/KETOACIDOS TYPE II/UNS UNCNTRL |
| | | D25013 | DB W/KETOACIDOS TYPE I UNCNTRL |
| | | D25030 | DB OTH COMA TYPE II/UNS NOT UNCNTRL |
| | | D25040 | DB W/RENAL TYPE II/UNS NOT UNCNTRL |
| | | D25043 | DB W/RENAL TYPE I [JUV] UNCNTRL |
| | | D25060 | DB W/NEURO TYPE II/UNS NOT UNCNTRL |
| | | D25062 | DB W/NEURO TYPE II/UNS TYPE UNCNTRL |
| | | D25071 | DB W/PERIPH CIRC TYPE I NOT UNCNTRL |
| | | D25080 | DB W/OTH MANIFEST TYPE II/UNS NOT UN |
| | | D25082 | DB W/OTH MANIFEST TYPE II/UNS UNCNTR |
| | | D2511 | OTHER SPECIFIED HYPOGLYCEMIA |
| | | D2512 | HYPOGLYCEMIA, UNSPECIFIED |
| | | D2519 | UNS D/O PANCREATIC INTRL SECRETION |
| | | D25541 | GLUCOCORTICOID DEFICIENCY |
| | | D2559 | UNSPECIFIED DISORDER ADRENAL GLANDS |
| | | D2724 | OTHER&UNSPECIFIED HYPERLIPIDEMIA |
| | | D2726 | LIPODYSTROPHY |
| | | D27801 | MORTID OBESITY |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|-------------------|----------------|-------------|
| Miscellaneous, continued | Endocrine, Nutritional and Metabolic Diseases, continued | 2781 | LOCALIZED ADIPOSY |
| | | 79029 | OTHER ABNORMAL GLUCOSE |
| | | 99523 | UNSPEC ADVERSE EFFECT OF INSULIN |
| | | 99657 | COMPLICATION, DUE TO INSULIN PUMP |
| | | E0590 | THYROTOXICOS UNS NO THYROTOX CRISIS |
| | | E1022 | TYPE 1 DM W/DIABETIC CKD |
| | | E11621 | TYPE 2 DM W/FOOT ULCER |
| | | E1165 | TYPE 2 DM W/HYPERGLYCEMIA |
| | | E1169 | TYPE 2 DM W/OTHER SPEC COMPLICATION |
| | | E65 | LOCALIZED ADIPOSY |
| | | E6601 | MORBID SEVERE OBES D/T EXCESS CAL |
| | | N2581 | SEC HYPERPARATHYROIDISM RENAL ORIGN |
| | | 2752 | DISORDERS OF MAGNESIUM METABOLISM |
| | | 27541 | HYPOCALCEMIA |
| | | 27542 | HYPERCALCEMIA |
| | | 2760 | HYPEROSMOLALITY & OR HYPERNATREMIA |
| | | 2761 | HYPOOSMOLALITY AND/OR HYPONATREMIA |
| | | 2762 | ACIDOSIS |
| | | 27650 | VOLUME DEPLETION UNSPECIFIED |
| | | 27651 | DEHYDRATION |
| | | 27652 | HYPOVOLEMIA |
| | | 2767 | HYPERPOTASSEMIA |
| | | 2768 | HYPOPOTASSEMIA |
| | | 72888 | RHABDomyOLYSIS |
| | | E8342 | OTH FALL WATER TRANSPORT-CREW |
| | | E872 | FAIL STERILE PRECAUTION DURING PROC |
| | | E876 | OTH&UNS MISADVENTURES DUR MED CARE |
| | | E8770 | FLUID OVERLOAD UNSPECIFIED |
| | | M6282 | RHABDomyOLYSIS |
| | | R7989 | OTH SPEC ABNORMAL FINDINGS BLD CHEM |
| | | 261 | NUTRITIONAL MARASMUS |
| | | 2639 | UNSPEC PROTEIN-CALORIE MALNUTRITION |
| | | 2651 | OTH&UNSPEC MANIFESTS THIAMINE DEFIC |
| | | 2662 | OTHER B-COMPLEX DEFICIENCIES |
| | | 2690 | DEFICIENCY OF VITAMIN K |
| | | 7830 | ANOREXIA |
| Pain | | 33818 | OTHER ACUTE POSTOPERATIVE PAIN |
| | | 33819 | OTHER ACUTE PAIN |
| | | 33829 | OTHER CHRONIC PAIN |
| | | 7295 | PAIN IN SOFT TISSUES OF LIMB |
| | | 78096 | GENERALIZED PAIN |
| | | G8918 | OTHER ACUTE POSTPROCEDURAL PAIN |
| | | R52 | PAIN UNSPECIFIED |
| Other Miscellaneous Diagnoses | | 2776 | OTHER DEFIC CIRCULATING ENZYMES |
| | | 4578 | OTH NONINF D/O LYMPHATIC CHANNELS |
| | | 76502 | EXTREM FETAL IMMATURETY 500-749 GMS |
| | | 78002 | TRANSIENT ALTERATION OF AWARENESS |
| | | 78050 | UNSPECIFIED SLEEP DISTURBANCE |
| | | 78052 | INSOMNIA UNSPECIFIED |
| | | 78060 | FEVER UNSPECIFIED |
| Category                          | Clinical Grouping                                      | Diagnosis Code | Description                                                                 |
|----------------------------------|--------------------------------------------------------|----------------|-----------------------------------------------------------------------------|
| Miscellaneous, continued         | Other Miscellaneous Diagnoses, continued               | 78062          | POSTPROCEDURAL FEVER                                                        |
|                                  |                                                        | 7806           | FEVER & OTH PHYSiol DISTURBANC TEMP                                         |
|                                  |                                                        | 78079          | OTHER MALAISE AND FATIGUE                                                   |
|                                  |                                                        | 7808           | GENERALIZED HYPERHIDROSIS                                                  |
|                                  |                                                        | 78093          | MEMORY LOSS                                                                |
|                                  |                                                        | 78099          | OTHER GENERAL SYMPTOMS                                                     |
|                                  |                                                        | 78199          | OTH SX INVLY NERV&MUSCULOSKEL SYS                                         |
|                                  |                                                        | 7905           | OTH NONSPEC ABN SERUM ENZYM LEVLS                                         |
|                                  |                                                        | 79902          | HYPOXEMIA                                                                  |
|                                  |                                                        | 79921          | NERVOUSNESS                                                                |
|                                  |                                                        | 7993           | UNSPECIFIED DEBILITY                                                       |
|                                  |                                                        | 79989          | OTHER ILL-DEFINED CONDITIONS                                                |
|                                  |                                                        | 9099           | LATE EFF OTH&UNSPEC EXTERNAL CAUS                                          |
|                                  |                                                        | 96509          | POISN OPIATES&RELATED NARCOTICS OTH                                         |
|                                  |                                                        | 9654           | POISONING AROMATIC ANALGESICS NEC                                          |
|                                  |                                                        | 96561          | POISON PROPIONIC ACID DERIVATIVES                                          |
|                                  |                                                        | 9657           | POISONING OTH NON-NARCOTIC ANALGES                                         |
|                                  |                                                        | 9661           | POISONING BY HYDANTOIN DERIVATIVES                                         |
|                                  |                                                        | 9678           | POISONING OTHER SEDATIVES&HYPNOTICS                                        |
|                                  |                                                        | 96903          | POISONING BY SSR1                                                        |
|                                  |                                                        | 9694           | POISON BENZODIAZEPINE-BASED TRANQ                                         |
|                                  |                                                        | 9778           | POISON OTH SPEC RX&MEDICINAL SBSTNC                                       |
|                                  |                                                        | 9779           | POISON UNSPEC RX&MEDICINAL SUBSTANCE                                       |
|                                  |                                                        | 986            | TOXIC EFFECT OF CARBON MONOXIDE                                            |
|                                  |                                                        | 9895           | TOXIC EFFECT OF VENOM                                                      |
|                                  |                                                        | 9925           | HEAT EXHAUSTION, UNSPECIFIED                                               |
|                                  |                                                        | 9927           | HEAT EDEMA                                                                 |
|                                  |                                                        | 9950           | OTHER ANAPHYLACTIC SHOCK NEC                                               |
|                                  |                                                        | 9951           | ANGIONEUROTIC EDEMA NEC                                                   |
|                                  |                                                        | 99527          | OTHER DRUG ALLERGY                                                        |
|                                  |                                                        | 99529          | UNS ADVERS EFF OTH RX MED&BIO SBSTNC                                      |
|                                  |                                                        | 9953           |ALLERGY UNSPECIFIED NEC                                                    |
|                                  |                                                        | 99581          | ADULT PHYSICAL ABUSE NEC                                                   |
|                                  |                                                        | 99589          | CERTAIN ADVERSE EFFECTS NEC OTHER                                         |
|                                  |                                                        | 99659          | MECH COMP-OTH IMPL&INTRL DEVCE NEC                                       |
|                                  |                                                        | 99670          | OTH COMPS DUE UNS DEVICE IMPL&GFT                                         |
|                                  |                                                        | 99672          | OTH COMPS-OTH CARD DEVCE IMPL&GFT                                         |
|                                  |                                                        | 99674          | OTH COMPS-OTH VASC DEVCE IMPL&GFT                                         |
|                                  |                                                        | 99679          | OTH COMP OTH PROS DEV IMPL&GFT                                            |
|                                  |                                                        | 99811          | HEMORRHAGE COMPLICATING A PROC NEC                                       |
|                                  |                                                        | 99812          | HEMATOMA COMPLICATING A PROC NEC                                         |
|                                  |                                                        | 99813          | SEROMA COMPLICATING A PROC NEC                                            |
|                                  |                                                        | 9982           | ACC PUNCT/LACRATION DURING PROC NEC                                       |
|                                  |                                                        | 99831          | DISRUPT INTERN OPERTION SURG WOUND                                        |
|                                  |                                                        | 99832          | DISRUPT EXTERNL OPERTION SURG WOUND                                       |
|                                  |                                                        | 99851          | INFECTED POSTOPERATIVE SEROMA NEC                                         |
|                                  |                                                        | 9986           | PERSISTENT POSTOPERATIVE FIST NEC                                         |
|                                  |                                                        | 99883          | NON-HEALING SURGICAL WOUND NEC                                             |
|                                  |                                                        | 99889          | OTHER SPECIFIED COMPLICATIONS NEC                                         |
| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|------------------|----------------|-------------|
| Miscellaneous, continued | Other Miscellaneous Diagnoses, continued | 9989 | UNSPEC COMPLICATION PROCEDURE NEC |
| | | 99988 | OTHER INFUSION REACTION |
| | | E871 | HYPO-Osmolality AND HYponatremia |
| | | I891 | LYMPHANGITIS |
| | | L299 | PRURITUS UNSPECIFIED |
| | | L500 | ALLERGIC URTICARIA |
| | | R200 | ANESTHESIA OF SKIN |
| | | R202 | PARESTHESIA OF SKIN |
| | | R209 | UNS DISTURBANCES OF SKIN SENSATION |
| | | R251 | TREMOR UNSPECIFIED |
| | | R252 | CRAMP AND SPASM |
| | | R262 | DIFFICULTY IN WALKING NEC |
| | | R400 | SOMNOLENCE |
| | | R490 | DYSPHONIA |
| | | R5082 | POSTPROCEDURAL FEVER |
| | | R509 | FEVER UNSPECIFIED |
| | | R531 | WEAKNESS |
| | | R5381 | OTHER MALAISE |
| | | R5383 | OTHER FATIGUE |
| | | R58 | HEMORRHAGE NOT ELSEWHERE CLASSIFIED |
| | | R591 | GENERALIZED ENLARGED LYMPH NODES |
| | | R599 | ENLARGED LYMPH NODES UNSPECIFIED |
| | | R600 | LOCALIZED EDEMA |
| | | R609 | EDEMA UNSPECIFIED |
| | | R682 | DRY MOUTH UNSPECIFIED |
| | | R748 | ABNORMAL LEVELS OTHER SERUM ENZYMES |
| | | S0990XA | UNSPECIFIED INJURY HEAD INITIAL ENC |
| | | S0993XA | UNSPECIFIED INJURY FACE INITIAL ENC |
| | | T148 | OTHER INJURY UNS BODY REGION |
| | | T1490 | INJURY UNSPECIFIED |
| | | T391X5A | ADVRS EFF 4-AMINOPHENOL DERIV INIT |
| | | T402X1A | POISON OTH OPIOIDS ACC INITIAL ENC |
| | | T407X1A | POISON CANNABIS ACCIDENTAL INIT ENC |
| | | T438X1A | POISON OTH PSYCHOTROPIC RX ACC INIT |
| | | T56891A | TOXIC EFF OTH METALS ACC INIT ENC |
| | | T56894A | TOXIC EFF OTH METALS UNDET INITIAL |
| | | T7421XA | ADULT SEXL ABUSE CONFIRMED INIT ENC |
| | | T783XXA | ANGIONEUROTIC EDEMA INITIAL ENCNR |
| | | T7840XA | ALLERGY UNSPECIFIED INITIAL ENCNR |
| | | T8131XA | DISRUPT EXT OP SURG WOUND NEC INIT |
| | | V1585 | PERS HX CONTCT & EXP HAZARD BDY FLD |
| | | V240 | PP CARE&EXAM IMMED AFTER DELIV |
| | | V241 | PP CARE&EXAMINATION LACTATING MOTH |
| | | V4589 | OTHER POSTSURGICAL STATUS OTHER |
| | | V501 | PSGR TRUCK/VAN INJ COLL PED/ANML NT |
| | | V5041 | PROPHYLACTIC BREAST REMOVAL |
| | | V5042 | PROPHYLACTIC OVARY REMOVAL |
| | | V571 | PSGR TRUCK INJ COLL FIX OBJ NT ACC |
| | | V5789 | OTH SPEC REHABILITATION PROC OTH |
| | | V580 | RADIOTHERAPY |
### Table A2: Component Diagnoses of Clinical Acute Care Categories, continued

| Category | Clinical Grouping | Diagnosis Code | Description |
|----------|-------------------|----------------|-------------|
| Miscellaneous, continued | Other Miscellaneous Diagnoses, continued | V5830 | ENCOUNTER CHG/REMV NONSURG WND DRSG |
| | | V5831 | ENCOUNTER CHG/REMV SURG WOUND DRSG |
| | | V5832 | ENCOUNTER FOR REMOVAL OF SUTURES |
| | | V5849 | OTH SPEC AFTERCARE FOLLOW SURGERY |
| | | V5878 | AFTERCARE FLW SURG MS SYS NEC |
| | | V5883 | ENCOUNTER THERAPEUTIC DRUG MON |
| | | V5889 | ENCOUNTER OTHER SPECIFIED AFTERCARE |
| | | V626 | REFUSAL TX RSN RELIGION/CONSCIENCE |
| | | V642 | SURG/OTH PROC NOT DONE PT DECISION |
| | | V655 | PERSN W FEARED COMPLAINT |
| | | V6709 | F/U EXAMINATION FOLLOW OTH SURGERY |
| | | V6759 | OTHER FOLLOW-UP EXAMINATION OTHER |
| | | V681 | PSGR HTV INJ NONCOLL TRNSP NT ACC |
| | | V6889 | ENCOUNTERS OTH SPEC ADMIN PRPOS OTH |
| | | V714 | PERS BD/ALIT BUS INJ COLL PEDL CYCL |
| | | V716 | PSGR BUS INJ COLL PEDL CYC TRAF ACC |
| | | V7189 | OBSERVATION OTH SPEC SUSPECTED COND |
| | | Z0000 | ENC GEN ADULT EXAM W/O ABNORM FIND |
| | | Z008 | ENC FOR OTHER GENERAL EXAMINATION |
| | | Z041 | ENC EXAM&OBSERV FLW TRANSPORT ACC |
| | | Z043 | ENC EXAM&OBSERVATION FOLLOW OTH ACC |
| | | Z048 | ENC EXAM & OBSERVATION OTH REASONS |
| | | Z049 | ENC EXAM & OBSERVATION UNS REASON |
| | | Z23 | ENCOUNTER FOR IMMUNIZATION |
| | | Z4001 | ENC FOR PROPHYLACTIC REMOVAL BREAST |
| | | Z421 | ENC BREAST RECON FOLLOW MASTECT |
| | | Z4802 | ENCOUNTER FOR REMOVAL OF SUTURES |
| | | Z4889 | ENC OTHER SPEC SURGICAL AFTERCARE |
| | | Z760 | ENC FOR ISSUE REPEAT PRESCRIPTION |
| | | Z9889 | OTHER SPEC POSTPROCEDURAL STATES |

**eTable 2 lists component International Classification of Disease (ICD), version 9 and 10 codes used to flag our secondary time-to-event outcomes**

a. Infectious and parasitic diseases were counted only if they had a specified infectious agent (e.g.: influenza); non-specific conditions likely resulting from infection were categorized under their respective body system (e.g.: gastritis codes were classified into the digestive system group).
b. Pregnancy events were analyzed among female patients ages 18-49 on the date of their index surgeries.