

2018 ICD-10-CM Changes

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2018 Updates on ICD-10 Coding

Agenda

- A comprehensive update to changes for ICD-10 Coding Including additions, deletions, and revisions to ICD-10 Codes.
- New ICD-10 guideline changes and appropriate use of coding from an ICD-10 book
- Provide tips for clinical practices to appropriately use ICD-10 to accurately reflect the severity of illness of the patient

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General Overview

Chapter	New Codes	Revised Codes	Deleted Codes
1. Certain Infectious and Parasitic Disease (A00-B99)	2	0	1
2. Neoplasms (C00-D49)	7	0	2
3. Diseases of the Blood and Blood-Forming Organs and Certain Disorders Involving the Immune Mechanism (D50-D89)	0	0	0
4. Endocrine, Nutritional and Metabolic Diseases (E00-E89)	5	0	1
5. Mental, Behavioral and Neurodevelopmental Disorders (F01-F99)	10	1	0
6. Diseases of the Nervous System (G00-G99)	3	0	0
7. Diseases of the Eye and Adnexa (H00-H59)	55	7	8
8. Diseases of the Ear and Mastoid Process (H60-H95)	0	0	0
9. Diseases of the Circulatory System (I00-I99)	19	18	1

General Overview

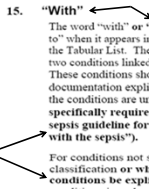
Chapter	New Codes	Revised Codes	Deleted Codes
10. Diseases of the Respiratory System (J00-J99)	0	1	0
11. Diseases of the Digestive System (K00-K95)	20	0	5
12. Diseases of the Skin and Subcutaneous Tissue (L00-L99)	72	0	0
13. Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)	5	8	1
14. Diseases of the Genitourinary System (N00-N99)	15	6	1
15. Pregnancy, Childbirth, and the Puerperium (O00-O9A)	40	0	4
16. Certain Conditions Originating in the Perinatal Period (P00-P96)	8	0	3
17. Congenital Malformations, Deformations and Chromosomal Abnormalities (Q00-Q99)	6	2	2

General Overview

Chapter	New Codes	Revised Codes	Deleted Codes
18. Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified (R00-R99)	3	0	0
19. Injury, Poisoning, and Certain Other Consequences of External Causes (S00-T88)	12	176	112
20. External Causes of Morbidity (V00-Y99)	54	3	0
21. Factors Influencing Health Status and Contact with Health Services (Z00-Z99)	24	4	1
Total Changes	360	226	142

2018 ICD-10-CM Official Guidelines

• Section I, A.,15

15. "With" 
- The word "with" or "in" should be interpreted to mean "associated with" or "due to" when it appears in a code title, the Alphabetic Index, or in instructional note in the Tabular List. The classification presumes a causal relationship between the two conditions linked by these terms in the Alphabetic Index or Tabular List. These conditions should be coded as related even in the absence of provider documentation explicitly linking them, unless the documentation clearly states the conditions are unrelated or when another guideline exists that specifically requires a documented linkage between two conditions (e.g., sepsis guideline for "acute organ dysfunction that is not clearly associated with the sepsis").
- For conditions not specifically linked by these relational terms in the classification or when a guideline requires that a linkage between two conditions be explicitly documented, provider documentation must link the conditions in order to code them as related.
- The word "with" in the Alphabetic Index is sequenced immediately following the main term, not in alphabetical order.

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• Section I, C, Chapter 2, E, 2

- 2) **Patient admission/encounter solely for administration of chemotherapy, immunotherapy and radiation therapy**
If a patient admission/encounter is solely for the administration of chemotherapy, immunotherapy or external beam radiation therapy assign code Z51.0, Encounter for antineoplastic radiation therapy, or Z51.11, Encounter for antineoplastic chemotherapy, or Z51.12, Encounter for antineoplastic immunotherapy as the first-listed or principal diagnosis. If a patient receives more than one of these therapies during the same admission more than one of these codes may be assigned, in any sequence.

The malignancy for which the therapy is being administered should be assigned as a secondary diagnosis.

If a patient admission/encounter is for the insertion or implantation of radioactive elements (e.g., brachytherapy) the appropriate code for the malignancy is sequenced as the principal or first-listed diagnosis. Code Z51.0 should not be assigned.

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• Section I, C, Chapter 2, E, 3

- 3) **Patient admitted for radiation therapy, chemotherapy or immunotherapy and develops complications**
When a patient is admitted for the purpose of external beam radiotherapy, immunotherapy or chemotherapy and develops complications such as uncontrolled nausea and vomiting or dehydration, the principal or first-listed diagnosis is Z51.0, Encounter for antineoplastic radiation therapy, or Z51.11, Encounter for antineoplastic chemotherapy, or Z51.12, Encounter for antineoplastic immunotherapy followed by any codes for the complications.

When a patient is admitted for the purpose of insertion or implantation of radioactive elements (e.g., brachytherapy) and develops complications such as uncontrolled nausea and vomiting or dehydration, the principal or first-listed diagnosis is the appropriate code for the malignancy followed by any codes for the complications.

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• Section I, C, Chapter 4, A, 3

- 3) **Diabetes mellitus and the use of insulin and oral hypoglycemics**
If the documentation in a medical record does not indicate the type of diabetes but does indicate that the patient uses insulin, code E11-, Type 2 diabetes mellitus, should be assigned. An additional code should be assigned from category Z79 to identify the long-term (current) use of insulin or oral hypoglycemic drugs. If the patient is treated with both oral medications and insulin, only the code for long-term (current) use of insulin should be assigned. Code Z79.4 should not be assigned if insulin is given temporarily to bring a type 2 patient's blood sugar under control during an encounter.

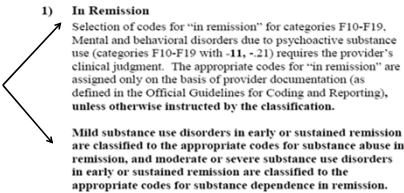
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- Section I, C, Chapter 4, A, 6(a)

(a) Secondary diabetes mellitus and the use of insulin or oral hypoglycemic drugs
For patients with secondary diabetes mellitus who routinely use insulin or oral hypoglycemic drugs, an additional code from category Z79 should be assigned to identify the long-term (current) use of insulin or oral hypoglycemic drugs. If the patient is treated with both oral medications and insulin, only the code for long-term (current) use of insulin should be assigned. Code Z79.4 should not be assigned if insulin is given temporarily to bring a secondary diabetic patient's blood sugar under control during an encounter.

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- Section I, C, Chapter 5, b, 1
- b. Mental and behavioral disorders due to psychoactive substance use



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- Section I, C, Chapter 7, b
- b. Blindness

If "blindness" or "low vision" of both eyes is documented but the visual impairment category is not documented, assign code H54.3, Unqualified visual loss, both eyes. If "blindness" or "low vision" in one eye is documented but the visual impairment category is not documented, assign a code from H54.6-, Unqualified visual loss, one eye. If "blindness" or "visual loss" is documented without any information about whether one or both eyes are affected, assign code H54.7, Unspecified visual loss.

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- Section I, C, Chapter 9, a, 11

11) Pulmonary Hypertension
Pulmonary hypertension is classified to category I27, Other pulmonary heart diseases. For secondary pulmonary hypertension (I27.1, I27.2-), code also any associated conditions or adverse effects of drugs or toxins. The sequencing is based on the reason for the encounter.

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- Section I, C, Chapter 12, b, 1 and 2

b. Non-Pressure Chronic Ulcers

- 1) Patients admitted with non-pressure ulcers documented as healed
No code is assigned if the documentation states that the non-pressure ulcer is completely healed.
- 2) Patients admitted with non-pressure ulcers documented as healing
Non-pressure ulcers described as healing should be assigned the appropriate non-pressure ulcer code based on the documentation in the medical record. If the documentation does not provide information about the severity of the healing non-pressure ulcer, assign the appropriate code for unspecified severity.

If the documentation is unclear as to whether the patient has a current (new) non-pressure ulcer or if the patient is being treated for a healing non-pressure ulcer, query the provider.

For ulcers that were present on admission but healed at the time of discharge, assign the code for the site and severity of the non-pressure ulcer at the time of admission.

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- Section I, C, Chapter 12, b, 3

- 3) Patient admitted with non-pressure ulcer that progresses to another severity level during the admission
If a patient is admitted to an inpatient hospital with a non-pressure ulcer at one severity level and it progresses to a higher severity level, two separate codes should be assigned: one code for the site and severity level of the ulcer on admission and a second code for the same ulcer site and the highest severity level reported during the stay.

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• Section I, C, Chapter 13, c

c. Coding of Pathologic Fractures

7th character A is for use as long as the patient is receiving active treatment for the fracture. While the patient may be seen by a new or different provider over the course of treatment for a pathological fracture, assignment of the 7th character is based on whether the patient is undergoing active treatment and not whether the provider is seeing the patient for the first time.

7th character D is to be used for encounters after the patient has completed active treatment for the fracture and is receiving routine care for the fracture during the healing or recovery phase. The other 7th characters, listed under each subcategory in the Tabular List, are to be used for subsequent encounters for treatment of problems associated with the healing, such as malunions, nonunions, and sequelae.

Care for complications of surgical treatment for fracture repairs during the healing or recovery phase should be coded with the appropriate complication codes.

See Section I.C.19. Coding of traumatic fractures.

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• Section I, C, Chapter 15, q, 2 and 3

2) **Retained Products of Conception following an abortion**
Subsequent encounters for retained products of conception following a spontaneous abortion or elective termination of pregnancy, without complications are assigned O03.4, **Incomplete spontaneous abortion without complication**, or codes O07.4, **Failed attempted termination of pregnancy without complication**. This advice is appropriate even when the patient was discharged previously with a discharge diagnosis of complete abortion. **If the patient has a specific complication associated with the spontaneous abortion or elective termination of pregnancy in addition to retained products of conception, assign the appropriate complication in category O03 or O07 instead of code O03.4 or O07.4**

3) **Complications leading to abortion**
Codes from Chapter 15 may be used as additional codes to identify any documented complications of the pregnancy in conjunction with codes in categories in O04, O07 and O08.

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• Section II, K

If the condition for which the rehabilitation service is being provided is no longer present, report the appropriate aftercare code as the first-listed or principal diagnosis, unless the rehabilitation service is being provided following an injury. For rehabilitation services following active treatment of an injury, assign the injury code with the appropriate seventh character for subsequent encounter as the first-listed or principal diagnosis. For example, if a patient with severe degenerative osteoarthritis of the hip, underwent hip replacement and the current encounter/admission is for rehabilitation, report code Z47.1, Aftercare following joint replacement surgery, as the first-listed or principal diagnosis. **If the patient requires rehabilitation post hip replacement for right intertrochanteric femur fracture, report code S72.141D, Displaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing, as the first-listed or principal diagnosis.**

Chapter 1. Certain Infectious and Parasitic Disease – New Codes

Code	Description
A04.71	Enterocolitis due to clostridium difficile, recurrent
A04.72	Enterocolitis due to clostridium difficile, not specified as recurrent

- Code A04.7 now becomes a subcategory four character code

Chapter 2. Neoplasms – New Codes

Code	Description
C96.20	Malignant mast cell neoplasm, unspecified
C96.21	Aggressive systemic mastocytosis
C96.22	Mast cell sarcoma
C96.29	Other malignant mast cell neoplasm
D47.01	Cutaneous mastocytosis
D47.02	Systemic mastocytosis
D47.09	Other mast cell neoplasms of uncertain behavior

Chapter 4. Endocrine, Nutritional and Metabolic Diseases – New Codes

Code	Description
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma
E85.81	Light chain (AL) amyloidosis
E85.82	Wild-type transthyretin-related (ATTR) amyloidosis
E85.89	Other amyloidosis

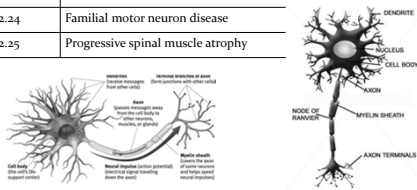
- Code E85.8 now becomes a subcategory four character code

Chapter 5. Mental, Behavioral and
Neurodevelopmental Disorder – New Codes

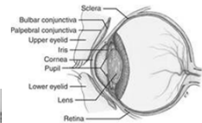
Code	Description
F10.11	Alcohol abuse, in remission
F11.11	Opioid abuse, in remission
F12.11	Cannabis abuse, in remission
F13.11	Sedative, hypnotic or anxiolytic abuse, in remission
F14.11	Cocaine abuse, in remission
F15.11	Other stimulant abuse, in remission
F16.11	Hallucinogen abuse, in remission
F18.11	Inhalant abuse, in remission
F19.11	Other psychoactive substance abuse, in remission
F50.82	Avoidant/Restrictive Food Intake Disorder

Chapter 6. Diseases of the Nervous System
– New Codes

Code	Description
G12.23	Primary lateral sclerosis
G12.24	Familial motor neuron disease
G12.25	Progressive spinal muscle atrophy



Chapter 7. Diseases of the Eye and
Adnexa – New Codes



Code	Description
H44.2A1	Degenerative myopia with choroidal neovascularization, right eye
H44.2A2	Degenerative myopia with choroidal neovascularization, left eye
H44.2A3	Degenerative myopia with choroidal neovascularization, bilat. Eye
H44.2A9	Degenerative myopia with choroidal neovascularization, unspec. Eye
H44.2B1	Degenerative myopia with macular hole, right eye
H44.2B2	Degenerative myopia with macular hole, left eye
H44.2B3	Degenerative myopia with macular hole, bilat. Eye
H44.2B9	Degenerative myopia with macular hole, unspec. eye
H44.2C1	Degenerative myopia with retinal detachment, right eye
H44.2C2	Degenerative myopia with retinal detachment, left eye
H44.23C	Degenerative myopia with retinal detachment, bilat. eye
H44.2C9	Degenerative myopia with retinal detachment, unspec. eye

Code	Description
H44.2D1	Degenerative myopia with foveoschisis, right eye
H44.2D2	Degenerative myopia with foveoschisis, left eye
H44.2D3	Degenerative myopia with foveoschisis, bilat. eye
H44.2D9	Degenerative myopia with foveoschisis, unspec. eye
H44.2E1	Degenerative myopia with other maculopathy, right eye
H44.2E2	Degenerative myopia with other maculopathy, left eye
H44.2E3	Degenerative myopia with other maculopathy, bilat. eye
H44.2E9	Degenerative myopia with other maculopathy, unspec. eye

Code	Description
H54.oX33	Blindness right eye category 3, blindness left eye category 3
H54.oX34	Blindness right eye category 3, blindness left eye category 4
H54.oX35	Blindness right eye category 3, blindness left eye category 5
H54.oX43	Blindness right eye category 4, blindness left eye category 3
H54.oX44	Blindness right eye category 4, blindness left eye category 4
H54.oX45	Blindness right eye category 4, blindness left eye category 5
H54.oX53	Blindness right eye category 5, blindness left eye category 3
H54.oX54	Blindness right eye category 5, blindness left eye category 4
H54.oX55	Blindness right eye category 5, blindness left eye category 5

Code	Description
H54.1131	Blindness right eye category 3, low vision left eye category 1
H54.1132	Blindness right eye category 3, low vision left eye category 2
H54.1141	Blindness right eye category 4, low vision left eye category 1
H54.1142	Blindness right eye category 4, low vision left eye category 2
H54.1151	Blindness right eye category 5, low vision left eye category 1
H54.1152	Blindness right eye category 5, low vision left eye category 2
H54.1213	Low vision right eye category 1, blindness left eye category 3
H54.1214	Low vision right eye category 1, blindness left eye category 4
H54.1215	Low vision right eye category 1, blindness left eye category 5
H54.1223	Low vision right eye category 2, blindness left eye category 3
H54.1224	Low vision right eye category 2, blindness left eye category 4
H54.1225	Low vision right eye category 2, blindness left eye category 5

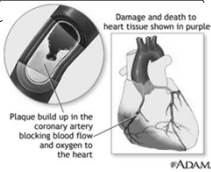
Code	Description
H54.2X11	Low vision right eye category 1, low vision left eye category 1
H54.2X12	Low vision right eye category 1, low vision left eye category 2
H54.2X21	Low vision right eye category 2, low vision left eye category 1
H54.2X22	Low vision right eye category 2, low vision left eye category 2
H54.413A	Blindness right eye category 3, normal vision left eye
H54.414A	Blindness right eye category 4, normal vision left eye
H54.415A	Blindness right eye category 5, normal vision left eye
H54.42A3	Blindness left eye category 3, normal vision right eye
H54.42A4	Blindness left eye category 4, normal vision right eye
H54.42A5	Blindness left eye category 5, normal vision right eye
H54.511A	Low vision right eye category 1, normal vision left eye
H54.512A	Low vision right eye category 2, normal vision left eye
H54.52A1	Low vision left eye category 1, normal vision right eye
H54.52A2	Low vision left eye category 2, normal vision right eye

Eye Categories		
Presenting distance visual acuity		
Category	Worse than:	Equal to or better than:
Mild or no visual impairment 0		6/18 3/10 (0.3) 20/70
Moderate visual impairment 1	6/18 3/10 (0.3) 20/70	6/60 1/10 (0.1) 20/200
Severe visual impairment 2	6/60 1/10 (0.1) 20/200	3/60 1/20 (0.05) 20/400
Blindness 3	3/60 1/20 (0.05) 20/400	1/60* 1/50 (0.02) 5/300 (20/1200)
Blindness 4	1/60* 1/50 (0.02) 5/300 (20/1200)	Light perception
Blindness 5	No light perception	
Blindness 9	Undetermined or unspecified	

**<http://www.who.int/blindness/Change%20the%20Definition%20of%20Blindness.pdf>

Chapter 9. Diseases of the Circulatory System – New Codes

Code	Description
I21.9	Acute myocardial infarction, unspecified
I21.A1	Myocardial infarction type 2
I21.A9	Other myocardial infarction type



Types of Myocardial Infarction

- 1
- TYPE 1 MYOCARDIAL INFARCTION
- Spontaneous myocardial infarction related to ischaemia due to a primary coronary event such as plaque erosion and/or rupture, fissuring, or dissection
- 2
- TYPE 2 MYOCARDIAL INFARCTION
- Myocardial infarction secondary to ischaemia due to either increased oxygen demand or decreased supply
- 3
- TYPE 3 MYOCARDIAL INFARCTION
- Sudden unexpected cardiac death often with symptoms suggestive of myocardial ischaemia
- 4
- TYPE 4 MYOCARDIAL INFARCTION
- Myocardial infarction associated with percutaneous coronary intervention (PCI) or stent thrombosis (ST)
- 5
- TYPE 5 MYOCARDIAL INFARCTION
- Myocardial infarction associated with cardiac surgery
- Injury
- MYOCARDIAL INJURY
- Multifactorial aetiology, acute or chronic based on change in cardiac troponin concentrations with serial testing

[**https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5299097/figure/HEARTJNL2016309530Fv/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5299097/figure/HEARTJNL2016309530Fv/)

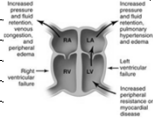
Chapter 9. Diseases of the Circulatory System – New Codes

Code	Description
I27.20	Pulmonary hypertension, unspecified
I27.21	Secondary pulmonary arterial hypertension
I27.22	Pulmonary hypertension due to left heart disease
I27.23	Pulmonary hypertension due to lung disease and hypoxia
I27.24	Chronic thromboembolic pulmonary hypertension
I27.29	Other secondary pulmonary hypertension
I27.83	Eisenmenger's syndrome



Chapter 9. Diseases of the Circulatory System – New Codes

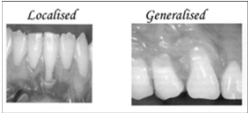
Code	Description
I50.810	Right heart failure, unspecified
I50.811	Acute right heart failure
I50.812	Chronic right heart failure
I50.813	Acute on chronic right heart failure
I50.814	Right heart failure due to left heart failure
I50.82	Biventricular heart failure
I50.83	High output heart failure
I50.84	End stage heart failure
I50.89	Other heart failure



Chapter 11. Diseases of the Digestive System – New Codes

Code	Description
K06.010	Localized gingival recession, unspecified
K06.011	Localized gingival recession, minimal
K06.012	Localized gingival recession, moderate
K06.013	Localized gingival recession, severe
K06.020	Generalized gingival recession, unspecified
K06.021	Generalized gingival recession, minimal
K06.022	Generalized gingival recession, moderate
K06.023	Generalized gingival recession, severe

Gingivitis



- Localized – Gingival tissue show signs of inflammation or is healthy in less than half the tissue surrounding the teeth in a sextant, quadrant, or arch.
- Generalized – Gingival tissue show signs of inflammation or is healthy in more than half the mouth
- Severity is determined by the provider as minimal, moderate, or severe

Chapter 11. Diseases of the Digestive System – New Codes

Code	Description
K56.50	Intestinal adhesions [bands], unspec. as partial vs complete obstruction
K56.51	Intestinal adhesions [bands], with partial obstruction
K56.52	Intestinal adhesions [bands], with complete obstruction
K56.600	Partial intestinal obstruction, unspecified as to cause
K56.601	Complete intestinal obstruction, unspecified as to cause
K56.609	Unspec. intestinal obstruction, unspec. as partial vs complete obstruction
K56.690	Other partial intestinal obstruction
K56.691	Other complete intestinal obstruction
K56.699	Other intestinal obstruction, unspec. as to partial vs. complete obstruction
K91.30	Postprocedural intestinal obstruction, unspec. as to partial vs. complete
K91.31	Postprocedural partial intestinal obstruction
K92.32	Postprocedural complete intestinal obstruction

Chapter 12. Diseases of the Skin and Subcutaneous Tissue – New Codes



Code	Description
L97.105	Non-pressure chronic ulcer of unspec thigh with muscle involvement without evidence of necrosis
L97.106	Non-pressure chronic ulcer of unspec thigh with bone involvement without evidence of necrosis
L97.108	Non-pressure chronic ulcer of unspec thigh with other specified severity
L97.115	Non-pressure chronic ulcer of right thigh with muscle involvement without evidence of necrosis
L97.116	Non-pressure chronic ulcer of right thigh with bone involvement without evidence of necrosis
L97.118	Non-pressure chronic ulcer of right thigh with other specified severity
L97.125	Non-pressure chronic ulcer of left thigh with muscle involvement without evidence of necrosis
L97.126	Non-pressure chronic ulcer of left thigh with bone involvement without evidence of necrosis
L97.128	Non-pressure chronic ulcer of left thigh with other specified severity

Code	Description
L97.205	Non-pressure chronic ulcer of unspec calf with muscle involvement without evidence of necrosis
L97.206	Non-pressure chronic ulcer of unspec calf with bone involvement without evidence of necrosis
L97.208	Non-pressure chronic ulcer of unspec calf with other specified severity
L97.215	Non-pressure chronic ulcer of right calf with muscle involvement without evidence of necrosis
L97.216	Non-pressure chronic ulcer of right calf with bone involvement without evidence of necrosis
L97.218	Non-pressure chronic ulcer of right calf with other specified severity
L97.225	Non-pressure chronic ulcer of left calf with muscle involvement without evidence of necrosis
L97.226	Non-pressure chronic ulcer of left calf with bone involvement without evidence of necrosis
L97.228	Non-pressure chronic ulcer of left calf with other specified severity

Code	Description
L97.305	Non-pressure chronic ulcer of unspec ankle with muscle involvement without evidence of necrosis
L97.306	Non-pressure chronic ulcer of unspec ankle with bone involvement without evidence of necrosis
L97.308	Non-pressure chronic ulcer of unspec ankle with other specified severity
L97.315	Non-pressure chronic ulcer of right ankle with muscle involvement without evidence of necrosis
L97.316	Non-pressure chronic ulcer of right ankle with bone involvement without evidence of necrosis
L97.318	Non-pressure chronic ulcer of right ankle with other specified severity
L97.325	Non-pressure chronic ulcer of left ankle with muscle involvement without evidence of necrosis
L97.326	Non-pressure chronic ulcer of left ankle with bone involvement without evidence of necrosis
L97.328	Non-pressure chronic ulcer of left ankle with other specified severity

Code	Description
L97.405	Non-pressure chronic ulcer of unspec heel and midfoot with muscle involvement without evidence of necrosis
L97.406	Non-pressure chronic ulcer of unspec heel and midfoot with bone involvement without evidence of necrosis
L97.408	Non-pressure chronic ulcer of unspec heel and midfoot with other specified severity
L97.415	Non-pressure chronic ulcer of right heel and midfoot with muscle involvement without evidence of necrosis
L97.416	Non-pressure chronic ulcer of right heel and midfoot with bone involvement without evidence of necrosis
L97.418	Non-pressure chronic ulcer of right heel and midfoot with other specified severity
L97.425	Non-pressure chronic ulcer of left heel and midfoot with muscle involvement without evidence of necrosis
L97.426	Non-pressure chronic ulcer of left heel and midfoot with bone involvement without evidence of necrosis
L97.428	Non-pressure chronic ulcer of left heel and midfoot with other specified severity

43	Code	Description
	L97.505	Non-pressure chronic ulcer of other part of unspec foot with muscle involvement without evidence of necrosis
	L97.506	Non-pressure chronic ulcer of other part of unspec foot with bone involvement without evidence of necrosis
	L97.508	Non-pressure chronic ulcer of other part of unspec foot with other specified severity
	L97.515	Non-pressure chronic ulcer of other part of right foot with muscle involvement without evidence of necrosis
	L97.516	Non-pressure chronic ulcer of other part of right foot with bone involvement without evidence of necrosis
	L97.518	Non-pressure chronic ulcer of other part of right foot with other specified severity
	L97.525	Non-pressure chronic ulcer of other part of left foot with muscle involvement without evidence of necrosis
	L97.526	Non-pressure chronic ulcer of other part of left foot with bone involvement without evidence of necrosis
	L97.528	Non-pressure chronic ulcer of other part of left foot with other specified severity

44	Code	Description
	L97.805	Non-pressure chronic ulcer of other part of unspec lower leg with muscle involvement without evidence of necrosis
	L97.806	Non-pressure chronic ulcer of other part of unspec lower leg with bone involvement without evidence of necrosis
	L97.808	Non-pressure chronic ulcer of other part of unspec lower leg with other specified severity
	L97.815	Non-pressure chronic ulcer of other part of right lower leg with muscle involvement without evidence of necrosis
	L97.816	Non-pressure chronic ulcer of other part of right lower leg with bone involvement without evidence of necrosis
	L97.818	Non-pressure chronic ulcer of other part of right lower leg with other specified severity
	L97.825	Non-pressure chronic ulcer of other part of left lower leg with muscle involvement without evidence of necrosis
	L97.826	Non-pressure chronic ulcer of other part of left lower leg with bone involvement without evidence of necrosis
	L97.828	Non-pressure chronic ulcer of other part of left lower leg with other specified severity

45	Code	Description
	L97.905	Non-pressure chronic ulcer of unspec part of unspec lower leg with muscle involvement without evidence of necrosis
	L97.906	Non-pressure chronic ulcer of unspec part of unspec lower leg with bone involvement without evidence of necrosis
	L97.908	Non-pressure chronic ulcer of unspec part of unspec lower leg with other specified severity
	L97.915	Non-pressure chronic ulcer of unspec part of right lower leg with muscle involvement without evidence of necrosis
	L97.916	Non-pressure chronic ulcer of unspec part of right lower leg with bone involvement without evidence of necrosis
	L97.918	Non-pressure chronic ulcer of unspec part of right lower leg with other specified severity
	L97.925	Non-pressure chronic ulcer of unspec part of left lower leg with muscle involvement without evidence of necrosis
	L97.926	Non-pressure chronic ulcer of unspec part of left lower leg with bone involvement without evidence of necrosis
	L97.928	Non-pressure chronic ulcer of unspec part of left lower leg with other specified severity

Code	Description
L98.415	Non-pressure chronic ulcer of buttock with muscle involvement without evidence of necrosis
L98.416	Non-pressure chronic ulcer of buttock with bone involvement without evidence of necrosis
L98.418	Non-pressure chronic ulcer of buttock with other specified severity
L98.425	Non-pressure chronic ulcer of back with muscle involvement without evidence of necrosis
L98.426	Non-pressure chronic ulcer of back with bone involvement without evidence of necrosis
L98.428	Non-pressure chronic ulcer of back with other specified severity
L98.495	Non-pressure chronic ulcer of other sites with muscle involvement without evidence of necrosis
L98.496	Non-pressure chronic ulcer of other sites with bone involvement without evidence of necrosis
L98.498	Non-pressure chronic ulcer of other sites with other specified severity

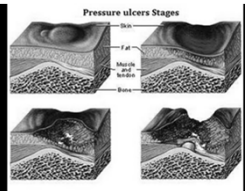
Non-Pressure Ulcer includes:

- Includes:
 - Chronic ulcer of skin of lower limb NOS
 - Non-healing ulcer of skin
 - Non-infected sinus of skin
 - Trophic ulcer NOS
 - Tropical ulcer NOS
 - Ulcer of skin of lower limb NOS
- Code first:
 - Any associated underlying condition such as:
 - Associated gangrene
 - Atherosclerosis of the lower extremities
 - Chronic venous hypertension
 - Diabetic ulcers
 - Postphlebotic syndrome
 - Postthrombotic syndrome
 - Varicose ulcer

Pressure Ulcer includes...

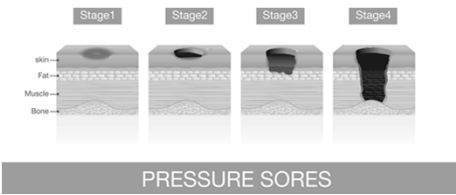
- Bed sore
- Decubitus ulcer
- Plaster ulcer
- Pressure area
- Pressure sore

Pressure ulcers Stages



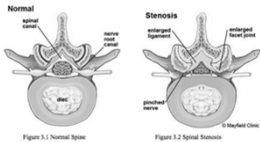
- Pressure ulcers do not include diabetic ulcers!

Pressure Ulcer stages...



Chapter 13. Diseases of the Musculoskeletal System and Connective Tissue – New Codes

Code	Description
M48.061	Spinal stenosis, lumbar region without neurogenic claudication
M48.062	Spinal stenosis, lumbar region with neurogenic claudication



Chapter 14. Diseases of the Genitourinary System – New Codes

Code	Description
N63.0	Unspecified lump in unspecified breast
N63.10	Unspecified lump in right breast, unspec quadrant
N63.11	Unspecified lump in right breast, upper outer quadrant
N63.12	Unspecified lump in right breast, upper inner quadrant
N63.13	Unspecified lump in right breast, lower outer quadrant
N63.14	Unspecified lump in right breast, lower inner quadrant

Chapter 14. Diseases of the Genitourinary System – New Codes

Code	Description
N63.20	Unspecified lump in left breast, unspecified quadrant
N63.21	Unspecified lump in left breast, upper outer quadrant
N63.22	Unspecified lump in left breast, upper inner quadrant
N63.23	Unspecified lump in left breast, lower outer quadrant
N63.24	Unspecified lump in left breast, lower inner quadrant
N63.31	Unspecified lump in axillary tail of the right breast
N63.32	Unspecified lump in axillary tail of the left breast
N63.41	Unspecified lump in right breast, subareolar
N63.42	Unspecified lump in left breast, subareolar

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Chapter 15. Pregnancy, Childbirth, and the Puerperium – New Codes

Code	Description
O00.101	Right tubal pregnancy without intrauterine pregnancy
O00.102	Left tubal pregnancy without intrauterine pregnancy
O00.109	Unspecified tubal pregnancy without intrauterine pregnancy
O00.111	Right tubal pregnancy with intrauterine pregnancy
O00.112	Left tubal pregnancy with intrauterine pregnancy
O00.119	Unspecified tubal pregnancy with intrauterine pregnancy
O00.201	Right ovarian pregnancy without intrauterine pregnancy
O00.202	Left ovarian pregnancy without intrauterine pregnancy
O00.209	Unspecified ovarian pregnancy without intrauterine pregnancy
O00.211	Right ovarian pregnancy with intrauterine pregnancy
O00.212	Left ovarian pregnancy with intrauterine pregnancy
O00.219	Unspecified ovarian pregnancy with intrauterine pregnancy

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Chapter 15. Pregnancy, Childbirth, and the Puerperium – New Codes

Code	Description
O36.8310	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, not applicable or unspecified
O36.8311	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 1
O36.8312	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 2
O36.8313	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 3
O36.8314	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 4
O36.8315	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 5
O36.8319	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, other fetus

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Chapter 16. Certain Conditions Originating in the Perinatal Period – New Codes

Code	Description
P29.30	Pulmonary hypertension of newborn
P29.38	Other persistent fetal circulation
P78.84	Gestational alloimmune liver disease
P83.81	Umbilical granuloma
P83.88	Other specified conditions of integument specific to newborn
P91.81	Neonatal encephalopathy in disease classified elsewhere
P91.819	Neonatal encephalopathy, unspecified
P91.88	Other specified disturbances of cerebral status of newborn

Chapter 17. Congenital Malformations, Deformations and Chromosomal Abnormalities – New Codes

Code	Description
Q53.111	Unilateral intra-abdominal testis
Q53.112	Unilateral inguinal testis
Q53.13	Unilateral high scrotal testis
Q53.211	Bilateral intra-abdominal testes
Q53.212	Bilateral inguinal testes
Q53.23	Bilateral high scrotal testes

Chapter 18. Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, NOS – New Codes

Code	Description
R39.83	Unilateral non-palpable testicle
R39.84	Bilateral non-palpable testicles

Chapter 19. Injury, Poisoning, and Certain Other Consequences of External Causes – New Codes

Code	Description
T07.XXXA	Unspecified multiple injuries, initial encounter
T07.XXXD	Unspecified multiple injuries, subsequent encounter
T07.XXXS	Unspecified multiple injuries, sequela
T14.8XXA	Other injury of unspecified body region, initial encounter
T14.8XXD	Other injury of unspecified body region, subsequent encounter
T14.8XXS	Other injury of unspecified body region, sequela
T14.90XA	Injury, unspecified, initial encounter
T14.90XD	Injury, unspecified, subsequent encounter
T14.90XS	Injury, unspecified, sequela
T14.91XA	Suicide attempt, initial encounter
T14.91XD	Suicide attempt, subsequent encounter
T14.91XS	Suicide attempt, sequela

Chapter 20. External Causes of Morbidity – New

Code	Description
V8605X	Driver of 3- or 4- wheeled all-terrain vehicle (ATV) injured in traffic accident
V8606X	Driver of dirt bike or motor/cross bike injured in traffic accident
V8615X	Passenger of 3- or 4- wheeled all-terrain vehicle (ATV) injured in traffic accident
V8616X	Passenger of dirt bike or motor/cross bike injured in traffic accident
V8625X	Person on outside of 3- or 4- wheeled all-terrain vehicle (ATV) injured in traffic accident
V8626X	Person on outside of dirt bike or motor/cross bike injured in traffic accident
V8635X	Unspecified occupant of 3- or 4- wheeled all-terrain vehicle (ATV) injured in traffic accident
V8636X	Unspecified occupant of dirt bike or motor/cross bike injured in traffic accident
V8645X	Person injured while boarding or alighting from a 3- or 4- wheeled all-terrain vehicle (ATV)
V8646X	Person injured while boarding or alighting from a dirt bike or motor/cross bike
V8655X	Driver of 3- or 4- wheeled all-terrain vehicle (ATV) injured in nontraffic accident
V8656X	Driver of dirt bike or motor/cross bike injured in nontraffic accident

Chapter 20. External Causes of Morbidity – New

Code	Description
V8665X	Passenger of 3- or 4- wheeled all-terrain vehicle (ATV) injured in nontraffic accident
V8666X	Passenger of dirt bike or motor/cross bike injured in nontraffic accident
V8675X	Person on outside of 3- or 4- wheeled all-terrain vehicle (ATV) injured in nontraffic accident
V8676X	Person on outside of dirt bike or motor/cross bike injured in nontraffic accident
V8695X	Unspecified occupant of 3- or 4- wheeled all-terrain vehicle (ATV) injured in nontraffic accident
V8696X	Unspecified occupant of dirt bike or motor/cross bike injured in nontraffic accident

- Initial encounter – A
- Subsequent encounter – D
- Sequela - S



Chapter 21. Factors Influencing Health Status and
Contact with Health Services – New Codes

Code	Description
Z36.0	Encounter for antenatal screening for chromosomal anomalies
Z36.1	Encounter for antenatal screening for raised alphafetoprotein level
Z36.2	Encounter for other antenatal screening follow-up
Z36.3	Encounter for antenatal screening for malformations
Z36.4	Encounter for antenatal screening for fetal growth retardation
Z36.5	Encounter for antenatal screening for isoimmunization
Z36.81	Encounter for antenatal screening for hydrops fetalis
Z36.82	Encounter for antenatal screening for nuchal translucency
Z36.83	Encounter for fetal screening for congenital cardiac abnormalities

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Chapter 21. Factors Influencing Health Status and
Contact with Health Services – New Codes

Code	Description
Z36.84	Encounter for antenatal screening for fetal lung maturity
Z36.85	Encounter for antenatal screening for Streptococcus B
Z36.86	Encounter for antenatal screening for cervical length
Z36.87	Encounter for antenatal screening for uncertain dates
Z36.88	Encounter for antenatal screening for fetal macrosomia
Z36.89	Encounter for antenatal screening for other specified antenatal screening
Z36.8A	Encounter for antenatal screening for other genetic defects
Z36.9	Encounter for antenatal screening, unspecified

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Chapter 21. Factors Influencing Health Status and
Contact with Health Services – New Codes

Code	Description
Z40.03	Encounter for prophylactic removal of fallopian tube(s)
Z71.82	Exercise counseling
Z81.83	Encounter for nonprocreative genetic counseling
Z91.841	Risk for dental caries, low
Z91.842	Risk for dental caries, moderate
Z91.843	Risk for dental caries, high
Z91.849	Unspecified risk for dental caries

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Revised Codes for 2018

	Codes	Changes
From:	H02.051	Trichiasis without entropion right upper eyelid
To:	H02.051	Trichiasis without entropion right upper eyelid
From:	I83.811	Varicose veins of right lower extremities with pain
To:	I83.811	Varicose veins of right lower extremity with pain
From:	J15.6	Pneumonia due to other aerobic Gram-negative bacteria
To:	J15.6	Pneumonia due to other Gram-negative bacteria
From:	M33.02	Juvenile dermatomyositis with myopathy
To:	M33.02	Juvenile dermatomyositis with myopathy
From:	N99.111	Postprocedural bulbous urethral stricture
To:	N99.111	Postprocedural bulbous urethral stricture, male

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Revised Codes for 2018

	Codes	Changes
From:	S04.031A	Injury of optic tract and pathways, right eye, initial encounter
To:	S04.031A	Injury of optic tract and pathways, right side, initial encounter
From:	Q82.2	Mastocytosis
To:	Q82.2	Congenital cutaneous mastocytosis
From:	Z31.5	Encounter for genetic counseling
To:	Z31.5	Encounter for procreative genetic counseling
From:	Z68.1	Body Mass Index (BMI) 19 or less, adult
To:	Z68.1	Body Mass Index (BMI) 19.9 or less, adult
From:	Z79.890	Hormone replacement therapy (postmenopausal)
To:	Z79.890	Hormone replacement therapy

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Deleted Codes – No longer apply

- Codes stating “distal” or “proximal” interphalangeal joint thumb
- Codes with 7th character D and 7th character S for Brain Trauma resulting in death
- Codes with 7th character D and 7th character S for Contusion/laceration cerebellum and brainstem resulting in death
- Codes with 7th character D and 7th character S for Epidural Hemorrhage or traumatic subdural hemorrhage resulting in death

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Sources

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