

Additional Materials & Tools

TABULAR CHAPTER CHEATER

- A,B – Infectious and parasitic diseases (**Anti-Biotics**)
- C – Neoplasms (**Cancer**)
- D – Neoplasms & blood and blood forming organs (**Darn! More Neoplasms and Disorders of the Blood**)
- E – Endocrine, nutritional, and metabolic (**Endocrine**)
- F – Mental and behavioral disorders (**Freud**)
- G – Nervous system (**Ganglion**)
- H – Eye and adnexa, ear and mastoid process (**Hearing**)
- I – Circulatory system (**Ischemia**)
- J – Respiratory system (**Junk in your lungs**)
- K – Digestive system (**Special K is good for your digestive system**)
- L – Skin and subcutaneous tissue (**You have Lovely skin**)
- M – Musculoskeletal and connective tissue (**Musculoskeletal**)
- N – Genitourinary system (**Naughty parts**)
- O – Pregnancy, childbirth, and the puerperium (**Obstetrics**)
- P – Perinatal period (**Perinatal**)
- Q – Congenital malformations, deformations and chromosomal abnormalities (**Quirky conditions**)
- R – Symptoms, signs and abnormal clinical and laboratory findings (**Symptom coding should be Rare**)
- S,T – Injury, poisoning and certain other consequences of external causes (**Strychnine and Trauma**)
- U – Reserved by WHO for emergency codes
- V,W,X,Y – External causes of morbidity (**Victim of Accident or Violence**)

How they were hurt *

Where they were when they were hurt

What activity they were doing

External cause status

- Z – Factors influencing health status and contact with health services (**Z codes are an assignment of last resort**)

Note: * only encouraged external cause code in HH

ICD-10 Crosswalk: Most Common Home Health Codes

The crosswalk is arranged in numeric order by ICD-9 code.

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
041.12 (Methicillin resistant Staphylococcus aureus)	B95.62 (Methicillin resistant staphylococcus aureus (MRSA) infection as of diseases classified elsewhere)	
153.9 (Malignant neoplasm of colon, unspecified)	C18.9 (Malignant neoplasm of colon, unspecified)	C18 specifies parts of colon
174.9 (Malignant neoplasm of female breast, unspecified)	C50.919 (Malignant neoplasm of unspecified site of unspecified female breast is not acceptable). Specify site with C50.911 (Right) or C50.912 (Left)	Use additional code for estrogen receptor status (Z17.0, Z17.1)
185 (Prostate cancer)	C61 (Malignant neoplasm of prostate)	
250.00 (Diabetes mellitus without mention of complication, type 2 or unspecified type, not stated as uncontrolled)	E11.9 (Type 2 diabetes mellitus without complications)	
290.0 (Senile dementia)	F03 (Unspecified dementia)	Senile dementia is coded as Dementia, NOS
294.10 (Dementia in diseases classified elsewhere without behavioral changes)	F02.80 (Dementia in other diseases classified elsewhere, without behavioral disturbance)	This code is a manifestation code and requires that the physiological condition be coded first.
294.11 (Dementia in diseases classified elsewhere with behavioral changes)	F02.81 (Dementia in other diseases classified elsewhere, with behavioral disturbance)	This code is a manifestation code and requires that the physiological condition be coded first.
295.90 (Schizophrenia)	F20.0 (Paranoid schizophrenia); F20.9 (Schizophrenia, unspecified)	
296.80 (Bipolar disorder)	F31.9 (Bipolar disorder, unspecified)	
300.00 (Anxiety)	F41.9 (Anxiety disorder, unspecified)	
309.81 (PTSD)	F43.10 (Post-traumatic stress disorder, unspecified); F43.11 (Post-traumatic stress disorder, acute); F43.12 (Post-traumatic stress disorder, chronic)	
311 (Depression NOS)	F32 (Major depressive disorder, single episode); F32.0 (Mild); F32.1 (Moderate); F32.2 (Severe without psychotic features); F32.3 (Severe with psychotic features); F32.4 (In partial remission); F32.5 (In full remission); F32.8 (Other depressive episodes, atypical, post-schizophrenic depression); F32.9 (Depression NOS; Major depression NOS)	

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
331.0 (Alzheimer's disease)	G30.9 (Alzheimer's disease, unspecified); G30.0 (Early onset); G30.1 (Late onset)	Use additional code for dementia: F02.80 (without behaviors), F02.81 (with behaviors)
332.0 (Parkinson's disease NOS)	G20 (Parkinson's disease)	Parkinsonism with dementia is coded G31.83
340 (Multiple sclerosis)	G35 (Multiple sclerosis)	
344.1 (Paraplegia)	G82.20 (Paraplegia, unspecified); G82.21 (Complete); G82.22 (Incomplete)	
362.50 (Macular degeneration)	H35.30 (Unspecified macular degeneration (age-related))	
401.9 (Essential hypertension, unspecified)	I10 (Essential [primary] hypertension)	There is no longer a HTN table in ICD-10. The terms 'benign' and 'malignant' are no longer used. This code includes arterial, benign, malignant, primary systemic.
403.90 (HTN with renal)	I12.9 (Hypertensive chronic kidney disease with stages 1-4/or unspecified chronic kidney)	Use additional code for CKD
414.00 and 414.01 (CAD)	I25.10 (Atherosclerotic heart disease of native coronary artery without angina pectoris); I25.11 (With angina pectoris)	
427.31 (A fib)	I48.91 (Atrial fibrillation); I48.92 (Flutter)	
428.0 (Congestive heart failure, unspecified)	I50.9 (Heart failure, unspecified)	Query for more information. 'Congestive' is a non-essential modifier for other heart failures, such as systolic and diastolic
438.21 (CVA with hemiplegia affecting dominant side)	I69.351 (Hemiplegia and hemiparesis affecting right dominant side); I69.352 (Hemiplegia and hemiparesis affecting left dominant side); I69.353 (Hemiplegia and hemiparesis affecting right nondominant side); I69.354 (Hemiplegia and hemiparesis affecting left nondominant side)	
438.82 (CVA with dysphagia)	I69.391 (Dysphagia following cerebral infarction)	Use additional code for dysphagia (R13.1-)
440.20 (Atherosclerosis of native arteries of extremities)	I70.201 (Right leg); I70.202 (Left leg); I70.203 (Bilateral legs); I70.26 (With gangrene); I70.208 (Other extremity); I70.209 (Unspecified)	
440.23, 707.1x (Atherosclerosis with ulceration)	I70.23 (Right leg); additional characters specify exact location on leg I70.24 (Left leg)	Use additional code to identify severity of ulcer (L97 with 5th character '1')
443.9 (PVD)	I73.9 (Peripheral vascular disease, unspecified)	

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
453.42 (Acute embolism and thrombosis of deep veins of lower extremity)	I82.41 (Femoral vein) I82.42 (Iliac vein) I82.43 (Popliteal vein) I82.44 (Tibial vein) I82.49 (Other deep vein of lower extremity)	6th character is used to indicate right, left or bilateral
457.1 (Lymphedema)	I89.0 (Lymphedema, not elsewhere classified)	
459.81 (Venous insufficiency)	I87.2 (Venous insufficiency (chronic (peripheral)))	
459.81, 707.1x (Stasis ulcer lower extremity)	I87.2 (Venous insufficiency) L97 (for severity of ulcer)	L97 codes are specific for location, including right and left, and severity, e.g., skin, fat layer exposed, necrosis of muscle, necrosis of bone
486 (Pneumonia, organism unspecified)	J18.0 (Bronchopneumonia); J18.1 (Lobar pneumonia); J18.2 (Hypostatic pneumonia); J18.8 (Other pneumonia, unspecified organism); J18.9 (Pneumonia, unspecified)	
491.21 (Obstructive chronic bronchitis with acute exacerbation)	J44.1 (Chronic obstructive pulmonary disease with acute exacerbation)	Chronic bronchitis that is obstructive is included in J44. Read includes and excludes notes carefully
492.8 (Emphysema)	J43.9 (Emphysema, unspecified)	
496 (COPD NOS)	J44.9 (Chronic obstructive pulmonary disease, unspecified)	
530.81 (GERD)	K21.9 (Gastro-esophageal reflux disease without esophagitis); K21.0 (With esophagitis)	
585.6 (End stage renal disease)	N18.6 (End stage renal disease)	Use additional code for dialysis status (Z99.2)
585.9 (Chronic renal insufficiency unspecified)	N18.9 (Chronic kidney disease, unspecified)	
596.54 (Neurogenic bladder)	N31.9 (Neuromuscular dysfunction of bladder, unspecified)	
599.0 (Urinary tract infection, site not specified)	N39.0 (Urinary tract infection, site not specified) N30.00 (Cystitis, acute)	
682.6 (Cellulitis/abscess leg)	L03.115 (Cellulitis of right lower leg) L03.116 (Cellulitis of left lower leg)	Cellulitis and abscesses are coded with different codes
707.03 (Pressure ulcer coccyx)	L89.15 (Coded to sacral region)	6th character specifies stage: 0-unstageable 1-stage 1 2-stage 2 3-stage 3 4-stage 4 9-unspecified (should not be used)

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
707.04 (Pressure ulcer hip)	L89.209 (Pressure ulcer of unspecified hip, unspecified stage); L89.21 (Right); L89.22 (Left); L89.4 (Contiguous 6th character indicates stage)	0-unstageable 1-stage 1 2-stage 2 3-stage 3 4-stage 4 9-unspecified (should not be used)
707.07 (Pressure ulcer heel)	L89.609 (Pressure ulcer of unspecified heel, unspecified stage); L89.61 (Right heel); L89.62 (Left heel)	0-unstageable 1-stage 1 2-stage 2 3-stage 3 4-stage 4 9-unspecified (should not be used)
707.2x (Pressure ulcer stage)	No diagnosis. In ICD-10-CM this is described with a 6th character of the site code. Pressure ulcer codes are combination codes	
710.0 (Lupus)	M32.9 (SLE unspecified); M32.1 (Systemic lupus erythematosus with organ or system involvement)	
714.0 (Rheumatoid arthritis)	M06.9 (Rheumatoid arthritis, unspecified)	M05 through M06.9 include the rheumatoid arthritis codes specific to rheumatoid factor, with neuropathy and site
715.89 (Osteoarthritis)	M15 (Polyosteoarthritis – arthritis of multiple sites); M15.0 (Primary generalized); M15.3 (Secondary multiple arthritis); M15.8 (Other polyosteoarthritis); M15.9 (Generalized); M16.- (Hip) M17.- (Knee)	Localized = one joint but can be bilateral Localized arthritis is coded to M16 through M19.0
718.99 (Arthropathy)	M12.9 (Arthropathy, unspecified)	Should not be used in home care
724.2 (Lumbago)	M54.5 (Low back pain); M51.17 (Lumbago with sciatica due to intervertebral disc disorder displacement); M51.27 (Lumbago due to displacement of intervertebral disc); M54.41 (Lumbago with sciatica right); M54.42 (Lumbago with sciatica left)	
728.87 (Generalized muscle weakness)	M62.81 (Muscle weakness, generalized)	
730.06 (Acute osteomyelitis lower leg)	M86.161 (Right tibia and fibula); M86.162 (Left tibia and fibula)	

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
733.00 (Osteoporosis)	M81.0 (Age-related post menopausal osteoporosis without current pathological fracture); M80.0 (Age-related post menopausal osteoporosis with current pathological fracture). Note: 5th character depends on bone	Osteoporosis code includes the pathologic fracture
781.2 (Abnormality of gait)	R26.0 (Ataxic gait); R26.1 (Paralytic gait); R26.2 (Difficulty walking, NEC); R26.81 (Unsteadiness on feet); R26.89 (Other abnormalities of gait & mobility); R26.9 (Unspecified abnormalities of gait & mobility)	Falling is R29.6
782.3 (Edema)	R60.0 (Localized edema); R60.1 (Generalized edema); R60.9 (Edema, unspecified)	
785.4 (Gangrene)	I96 (Gangrene, not elsewhere classified)	Take note of Excludes 1: gangrene in: Atherosclerosis in lower extremities (I70.24) Diabetes mellitus (E08-E13) Hernia Other peripheral vascular diseases Gangrene of certain specific sites
787.20 (Dysphagia)	R13.0 (Aphagia); R13.10 (Dysphagia, unspecified)	
996.66 (Infected joint prosthesis)	T84.59XD (Other joint); T84.51XD (Right hip); T84.52XD (Left hip); T84.53XD (Right knee); T84.54XD (Left knee)	Found under Complication, joint
998.30 (Disruption of wound, unspecified)	T81.30xD (Disruption of wound, unspecified subsequent encounter); T81.31xD (Disruption external, dehiscence of surgical wound NOS); T81.32XD (Internal-deep disruption NOS); T81.33XD (Traumatic injury wound repair)	T81.30xD should not be used. It means unspecified type of wound; Dehiscence of surgical wound defaults to T81.31xD. Note how the last digits are similar to the ICD-9-CM codes 998.31 (external) and 998.32 (internal).
998.59 (Infected surgical wound)	T81.4XXD (Infection following a procedure, subsequent encounter); T81.4XXS (Infection following a procedure, sequela)	Found under Infection, due to, surgery
998.83 (Non-healing surgical wound)	T81.89XD (Other complications of procedures, NEC, subsequent); T81.89XS (Other complications of procedures, NEC, sequel)	Use additional code to specify complication
V15.88 (History of falls)	Z91.81 (History of falling)	Also consider R29.6 (Repeated falls)

ICD-9-CM Diagnosis Code	ICD-10 Diagnosis Code Equivalent(s)	Additional Information
V54.13 (Aftercare trauma fracture hip)	There are 159 ICD-10 crosswalk codes in the S-injury chapter, 7th character extensions. For example: S32 fractures of lumbar spine and pelvis with 7th character D for subsequent encounter, routine healing, G for delayed healing, K for nonunion	There are no Z codes for aftercare for healing trauma fractures. The fracture will be coded with the appropriate 7th character extension, which may be different for each bone.
V54.81 (Aftercare following joint replacement)	Z47.1 (Aftercare following joint replacement surgery)	Use additional code: Z96.64 (Hip) Z96.65 (Knee)
V57.1 (Other physical therapy)	No Code	
V58.73 (Aftercare following surgery of the circulatory system)	Z48.812 (Encounter for surgical aftercare following surgery on the circulatory system)	
V58.75 (Aftercare following surgery for gastrointestinal system)	Z48.815 (Encounter for surgical aftercare following surgery on the digestive system)	
V58.78 (Aftercare following surgery for musculoskeletal system)	Z48.89 (Encounter for other specified surgical aftercare); Z47.89 (Encounter for other orthopedic AC)	
V58.81 (Fitting and adjustment of vascular catheter)	Z45.2 (Encounter for adjustment and management of vascular access device)	
E888.9 (Fall)	W19.XXXD (Unspecified fall, subsequent encounter) W19.XXXS (Unspecified fall, sequel)	

Source: Lisa Selman-Holman, JD, BSN, RN, MSN, HCS-D, COS-C, owner, Selman-Holman & Associates, LLC, CoDR – Coding Done Right, Denton, Texas

Diabetes ICD-10 Crosswalk

Diagnosis	ICD-9-CM	ICD-10-CM
Diabetic chronic kidney disease	250.40 585.9	E11.22 N18.9
Diabetic ESRD	250.40 585.6	E11.22 N18.6 Use additional code for dialysis
Diabetic nephrosis	250.40 581.81	E11.29
Diabetic retinopathy	250.50 362.01	E11.319 unspecified retinopathy without macular edema
Diabetic macular edema	250.50 362.07 362.01	E11.311 with unspecified retinopathy with macular edema
Diabetic cataract	250.50 366.41	E11.36
Diabetic polyneuropathy	250.60 357.2	E11.42
Diabetic autonomic neuropathy	250.60 337.1	E11.43
Diabetic gastroparesis	250.60 536.3	E11.43
Diabetic amyotrophy	250.60 358.3	E11.44
Diabetic angiopathy	250.70 443.81	E11.51 angiopathy without gangrene
Diabetic gangrene	250.70 785.4	E11.52 angiopathy with gangrene
Diabetic Charcot's foot	250.60 713.5	E11.610
Diabetic ulcer, toes	250.80 707.15	E11.621 L97.4-, L97.5-
Diabetic hypoglycemia	250.80	E11.649 without coma
Diabetes uncontrolled	5th digit 2	E11.65 Diabetes with hyperglycemia
Insulin use	V58.67	Z79.4
Secondary diabetes	249	E08 Diabetes mellitus due to underlying condition
Secondary diabetes	249	E09 Drug or chemical induced diabetes mellitus
Type 1 diabetes	250.x1, 250.x3	E10 Type 1 diabetes mellitus
Type 2 diabetes mellitus	250.x0, 250.x2	E11 Type 2 diabetes mellitus
Post pancreatectomy	251.3	E13 Other specified diabetes mellitus

Source: Lisa Selman-Holman, JD, BSN, RN, MSN, HCS-D, COS-C, owner, Selman-Holman & Associates, LLC, CoDR - Coding Done Right, Denton, Texas

Hypertension ICD-10 crosswalk

ICD-9	ICD-10
401 Essential HTN	I10 – Essential (primary) hypertension includes: high blood pressure, hypertension (arterial) (benign) (essential) (malignant) (primary) (systemic)
401.0 Malignant HTN	
401.1 Benign HTN	
401.9 HTN, unspecified	

Hypertensive Heart and Chronic Kidney Disease

Description	ICD-9	ICD-10
Malignant without heart failure and with chronic kidney disease stage I through IV, or unspecified	404.00	I13.10
Malignant with heart failure and with chronic kidney disease stage I through IV, or unspecified	404.01	I13.0
Malignant without heart failure and with chronic kidney disease stage V or end stage renal disease	404.02	I13.11
Malignant with heart failure and chronic kidney disease stage V or end stage renal disease.	404.03	I13.2
Benign without heart failure and with chronic kidney disease stage I through IV, or unspecified	404.10	I13.10
Benign with heart failure and with chronic kidney disease stage I through IV, or unspecified	404.11	I13.0
Benign without heart failure and with chronic kidney disease stage V or end stage renal disease	404.12	I13.11
Benign with heart failure and chronic kidney disease stage V or end stage renal disease.	404.13	I13.2
Unspecified without heart failure and with chronic kidney disease stage I through IV, or unspecified	404.90	I13.10
Unspecified with heart failure and with chronic kidney disease stage I through IV, or unspecified	404.91	I13.0
Unspecified without heart failure and with chronic kidney disease stage V or end stage renal disease	404.92	I13.11
Unspecified with heart failure and chronic kidney disease stage V or end stage renal disease.	404.93	I13.2

Chronic skin ulcer codes: ICD-10 crosswalk

Use the tables and notes below to familiarize yourself with ICD-10 coding of chronic skin ulcer codes.

Pressure ulcer

ICD-9-CM	ICD-10-CM	What's different in I-10?
Example: 707.01 Decubitus ulcer elbow 707.20-707.25 Pressure ulcer stages	L89.00 Pressure ulcer of unspecified elbow L89.000 ... of unspecified elbow, unstageable L89.001 ... of unspecified elbow, stage 1 L89.002 ... of unspecified elbow, stage 2 L89.003 ... of unspecified elbow, stage 3 L89.004 ... of unspecified elbow, stage 4 L89.009 ... of unspecified elbow, unspecified stage L89.01 Pressure ulcer of right elbow *Follows same 6th character pattern as L89.00- above L89.02 Pressure ulcer of left elbow *Follows same 6th character pattern as L89.00- above	<ul style="list-style-type: none"> • What you report in ICD-9 using first 707.0x then 707.2x is reported with a single code from the L89 category. The final character of the L89 codes identifies the stage of the pressure ulcer. • Unlike ICD-9 where you are instructed to code the pressure ulcer before any associated gangrene, notes at L89 tell you to "Code first any associated gangrene (I96)." • Nearly all of the 707.0x codes have a single four-character equivalent in ICD-10 – the only exception being that pressure ulcers of the upper back (707.02) and lower back (707.03) both fall under L89.1. And there is no single ICD-9 equivalent to L89.4 (Pressure ulcer of contiguous site of back, buttock and hip).

What else you need to know:

While the fifth characters for most L89 codes identify the right, left or an unspecified side, and the sixth characters the stage of the ulcer, there are exceptions:

Site	ICD-9	ICD-10		
		4 characters	5th character identifies:	6th character identifies:
Unspecified	707.00	L89.9	pressure ulcer stage	n/a
Back	707.02 707.03	L89.1	unspecified, right upper, left upper, right lower, left lower, sacral region	pressure ulcer stage
Other	707.09	L89.8	head, other site	pressure ulcer stage
Contiguous	n/a	L89.4	pressure ulcer stage	n/a

Ulcer of lower limbs, except pressure ulcer

ICD-9-CM	ICD-10-CM	What's different in I-10?
Example: 707.11 Ulcer of thigh	L97.10 Non-pressure chronic ulcer of unspecified thigh L97.101 ... of unspecified thigh limited to breakdown of skin L97.102 ... of unspecified thigh with fat layer exposed L97.103 ... of unspecified thigh with necrosis of muscle L97.104 ... of unspecified thigh with necrosis of bone L97.109 ... of unspecified thigh with unspecified severity L97.11 Non-pressure chronic ulcer of right thigh *Follows same 6th character pattern as L97.10- above L97.12 Non-pressure chronic ulcer of left thigh *Follows same 6th character pattern as L97.10- above	<ul style="list-style-type: none"> • The L97.1- codes are combination codes that are differentiated first by right, left or unspecified, and then by the depth of the ulcer. • Notes at 707.1 tell you to "Code, if applicable, any causal condition first." The use of "if applicable" means you can code 707.1x as a principal diagnosis if you don't know the underlying condition or if it is not applicable, the Guidelines say. Notes at L97 tell you to "Code first any associated underlying condition, such as." The use of "such as" means that while the list underneath is not all inclusive, you have to code an underlying condition first. • Each of the 707.1x codes has a single four-character equivalent in ICD-10, each of which is further broken down to a fifth character to identify right, left or unspecified, and then a sixth character to report the depth of the ulcer

Varicose veins of lower extremities with ulcer

ICD-9-CM	ICD-10-CM	What's different in I-10?
Example: 454.0 Varicose veins of lower extremities with ulcer	I83.00 Varicose veins of unspecified lower extremity with ulcer I83.001 ... with ulcer of thigh I83.002 ... with ulcer of calf I83.003 ... with ulcer of ankle I83.004 ... with ulcer of heel and midfoot I83.005 ... with ulcer other part of foot I83.008 ... with ulcer other part of lower leg I83.009 ... with ulcer of unspecified site I83.01 Varicose veins of right lower extremity with ulcer *Follows same 6th character pattern as I83.00- above I83.02 Varicose veins of left lower extremity with ulcer *Follows same 6th character pattern as I83.00- above	<ul style="list-style-type: none"> Like 454.0, the I83.0- codes are combination codes, but with more detail. These codes are differentiated first by right, left or unspecified lower extremity, and then by the ulcer's location on that leg or foot. You'll report an additional code from the L97 category to identify the severity of the ulcer.

What else you need to know:

Code 454.2 (Varicose veins of lower extremities with ulcer **and inflammation**) crosswalks to the I83.2- (Varicose veins of lower extremity with both ulcer and inflammation) codes, which have the same structure as the I83.0- codes – the fifth character splits the diagnosis by right, left or unspecified lower extremity, and the sixth character identifies the location on that leg or foot.

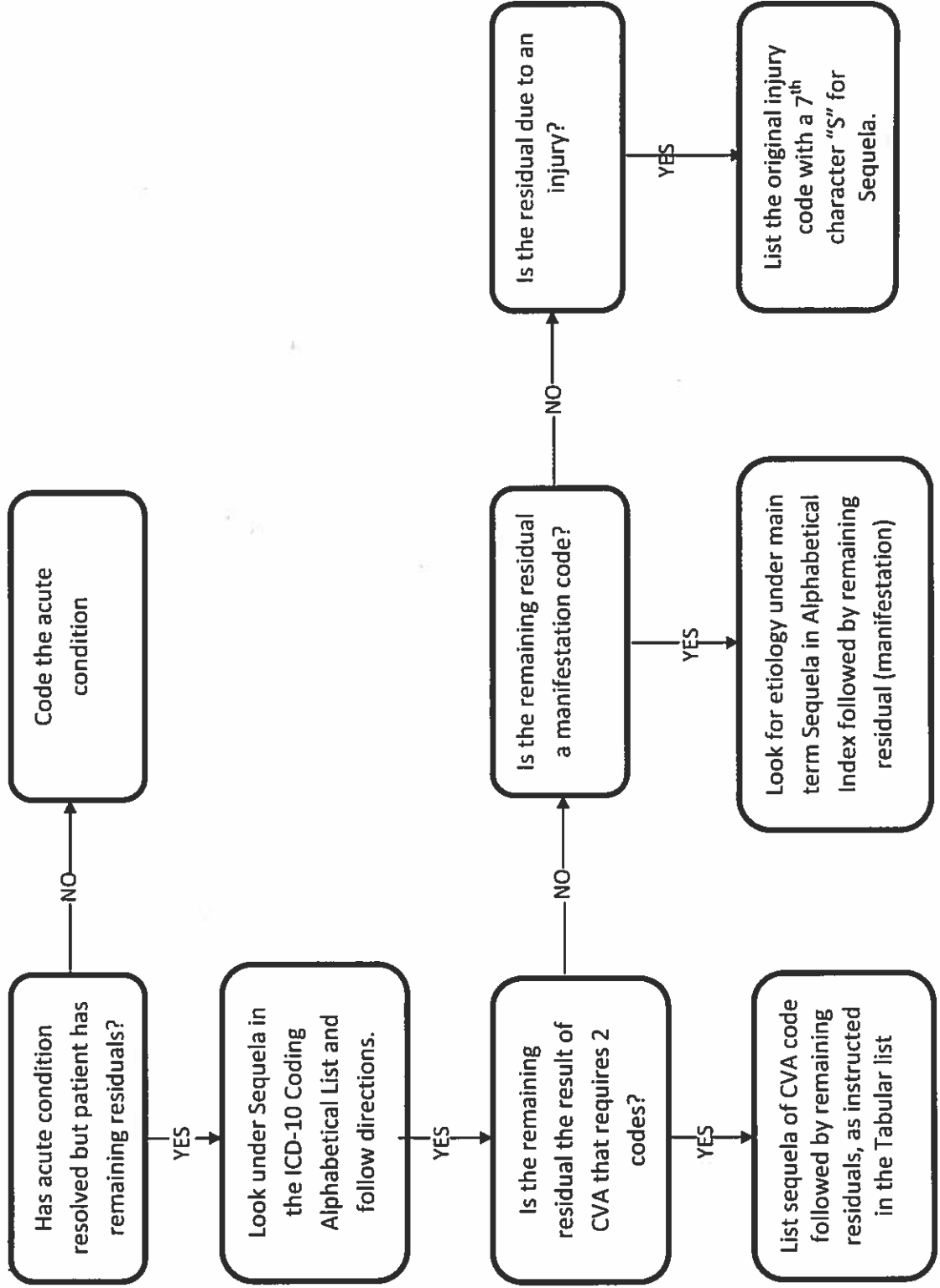
ICD-10 also includes combination codes for underlying conditions and ulceration that are coded separately in ICD-9. For example, codes I70.23- and I70.24- describe atherosclerosis of native arteries of the right and left legs respectively, with ulceration. The sixth characters for these codes follow the same pattern as the I83.0- and I83.2- codes (e.g., use I70.234 for atherosclerosis of native arteries of right leg with ulceration of heel and midfoot).

Chronic ulcer of other specified or unspecified sites

ICD-9-CM	ICD-10-CM	What's different in I-10?
707.8 Chronic ulcer of other specified sites	L98.41 Non-pressure chronic ulcer of buttock L98.411 ... of buttock limited to breakdown of skin L98.412 ... of buttock with fat layer exposed L98.413 ... of buttock with necrosis of muscle L98.414 ... of buttock with necrosis of bone L98.419 ... of buttock with unspecified severity L98.42 Non-pressure chronic ulcer of back L98.421 ... of back limited to breakdown of skin L98.422 ... of back with fat layer exposed L98.423 ... of back with necrosis of muscle L98.424 ... of back with necrosis of bone L98.429 ... of back with unspecified severity	<ul style="list-style-type: none"> The L98.4- codes are combination codes differentiated first by site, and then by the depth of the ulcer. Because the L98.4- codes identify site and severity – no additional code is needed.
707.9 Chronic ulcer of unspecified site	L98.49 Non-pressure chronic ulcer of skin of other sites L98.491 ... of skin of other sites limited to breakdown of skin L98.492 ... of skin of other sites with fat layer exposed L98.493 ... of skin of other sites with necrosis of muscle L98.494 ... of skin of other sites with necrosis of bone L98.499 ... of skin of other sites with unspecified severity	

Source: This tool was created by DecisionHealth in consultation with AHIMA-approved ICD-10-CM Trainer and Diagnosis Coding Pro Technical Advisor Trish Twombly, HCS-D, COS-C

Guideline for Sequelae (Residuals) in ICD-10



**Guide to Coding
COPD, Emphysema, Asthma**

Code Description	Includes	Excludes 1	Excludes 2
J40 Bronchitis, not specified as acute or chronic	Bronchitis NOS Bronchitis with tracheitis NOS	<ul style="list-style-type: none"> — Allergic bronchitis (45.909) — Asthmatic bronchitis NOS (J45.9-) — Bronchitis d/t chemicals, gases, fumes, and vapors (68.0) 	
J41 Simple and mucopurulent chronic bronchitis	J41.0 Simple bronchitis J41.2, Mucopurulent chronic bronchitis J41.3, Mixed simple and mucopurulent bronchitis	<ul style="list-style-type: none"> — Chronic bronchitis NOS (J42) — Chronic obstructive bronchitis (J44.1-) 	
J42 Unspecified chronic bronchitis	Chronic bronchitis NOS Chronic tracheitis Chronic tracheobronchitis	<ul style="list-style-type: none"> — Chronic asthmatic bronchitis (J44.-) — Chronic bronchitis with airways obstruction (J44.-) — Chronic emphysematous bronchitis(J44.-) — COPD (J44.-) — Simple and mucopurulent bronchitis (J41.-) 	
J43 Emphysema	<ul style="list-style-type: none"> — J43.0 Unilateral pulmonary emphysema [MacLeod's syndrome] — J43.1 Panlobular emphysema — J43.2, Centrilobular emphysema — J43.8, Other emphysema 	<ul style="list-style-type: none"> — Compensatory emphysema (98.3) — Emphysema d/t inhalation of chemicals, gases, fumes, vapors (J68.4) — Emphysema with chronic obstructive bronchitis (J44.-) — Emphysematous (obstructive) bronchitis (J44.-) — Interstitial emphysema (J98.2) — Mediastinal emphysema (J98.2) 	

Source: Ann Rambusch, HCS-D, AHIMA approved ICD-10-CM trainer, president Rambusch3 Consulting, Georgetown, Texas.

Code Description	Includes	Excludes 1	Excludes 2
J43.9 Emphysema, unspecified	Bullous emphysema Emphysema (lung) (pulmonary) NOS Emphysematous bleb Vesicular emphysema	<ul style="list-style-type: none"> — Surgical (subcutaneous) emphysema (T81.82) — Traumatic subcutaneous emphysema (T79.7) All excludes 1 conditions listed for J43 above.	
J44 Other Chronic Obstructive Pulmonary Disease	Asthma with COPD Chronic asthmatic (obstructive) bronchitis Chronic bronchitis with airways obstruction Chronic bronchitis with emphysema Chronic emphysematous bronchitis Chronic obstructive asthma Chronic obstructive bronchitis Chronic obstructive tracheobronchitis	<ul style="list-style-type: none"> — Bronchiectasis (J47.-) — Chronic bronchitis NOS (J42) — Chronic simple and mucopurulent bronchitis (J41.-) — Emphysema without chronic bronchitis (J43.-) — Lung disease due to external causes (J60 – J70) 	
J44.0, COPD with acute lower respiratory infection	COPD with acute bronchitis COPD with pneumonia <i>Use additional code to identify the infection</i>		
J44.1, COPD with (acute) exacerbation	Decompensated COPD Decompensated COPD with (acute) exacerbation		COPD with acute bronchitis (J44.0)
J44.9 COPD, unspecified	Asthma with COPD Chronic (obstructive) asthma Chronic asthmatic (obstructive) bronchitis NOS Chronic obstructive airway disease NOS Chronic obstructive lung disease NOS Chronic obstructive pulmonary disease NOS		
J45 Asthma	Allergic (predominately) asthma Allergic bronchitis Allergic rhinitis with asthma Atopic asthma	<ul style="list-style-type: none"> — Detergent asthma (J69.8) — Eosinophilic asthma (J82) — Lung disease due to external causes (J60 – J70) 	<ul style="list-style-type: none"> — Asthma with chronic obstructive pulmonary

Source: Ann Rambusch, HCS-D, AHIMA approved ICD-10-CM trainer, president Rambusch3 Consulting, Georgetown, Texas.

Code Description	Includes	Excludes 1	Excludes 2
	Extrinsic allergic asthma Hat fever with asthma Idiosyncratic asthma Intrinsic nonallergic asthma Nonallergic asthma	<ul style="list-style-type: none"> – Miner's asthma (J60) – Wheezing NOS (R06.2) – Wood asthma (67.8) 	<ul style="list-style-type: none"> – disease (J44.9) – Chronic asthmatic (obstructive) bronchitis (J44.9) – Chronic obstructive asthma (J44.9)
J45.90-- Unspecified asthma	Asthmatic bronchitis NOS Childhood asthma NOS Late onset asthma		
J45.901, Unspecified asthma, with acute exacerbation			
J45.901 Unspecified asthma, uncomplicated	Asthma NOS		

Quick Codes for Common Documentation

Documentation	ICD-10 Code
COPD – no other information	J44.9, COPD unspecified
COPD with asthma	J44.9, Asthma with COPD
Acute bronchitis with chronic asthma	J44.0 COPD with acute lower respiratory tract infection + J40 Acute bronchitis
COPD with bronchitis	J44.9, COPD unspecified
COPD with emphysema	J44.9, COPD unspecified
Emphysema – no other information	J43.9 Emphysema unspecified

Source: Ann Rambusch, HCS-D, AHIMA approved ICD-10-CM trainer, president Rambusch3 Consulting, Georgetown, Texas.

Sequelae Quick Reference – ICD-10-CM

Sequela Codes

Code first the condition resulting from sequela

B90.9	Sequela of Tuberculosis
B91	Sequela of polio (acute)
B92	Sequela of leprosy, Hansen's disease
B94.0	Sequela of trachoma
B94.1	Sequela of viral encephalitis
B94.2	Sequela of viral hepatitis
B94.8	Sequela of other specified infectious and parasitic diseases
B94.9	Sequela of unspecified parasitic disease
E64.0	Sequela of protein energy malnutrition
E64.1	Sequela of vitamin A deficiency
E64.2	Sequela of vitamin C deficiency
E64.3	Sequela of Rickets
E64.8	Sequela of Calcium, selenium, thiamine, niacin, vitamin and and specific nutritional deficiencies,
E64.9	Sequela of unspecified nutritional deficiencies
G09	Sequela of inflammatory disease of the CNS listed at G00-G08 that are the cause of sequelae, themselves classified elsewhere. Includes sequela of abscess, encephalitis/encephalomyelitis, meningitis, infection of CNS, phlebitis or thrombophlebitis of intracranial or intraspinal venous sinus or veins.
I69	Sequelae of 6 categories of nontraumatic cerebrovascular disease
O94	Sequela of childbirth, pregnancy or the puerperium: I69 has many combination codes that combine residual effects with sequelae of specific causes

Sequelae of the following injuries and poisoning/toxic effects are coded using the acute condition code that best describes the injury/condition with a 7th character "S" following the code for the residual;

Traumatic amputation
 Burns and corrosions
 Contusions
 Crushing injuries
 Dislocations
 Foreign body entering natural orifices
 Fractures
 Frostbite
 Injuries
 Poisonings
 Nonmedical substance toxic effects
 Sprains and strains
 Tendon/muscle injury
 Wound, open

ICD-9 V code	ICD-10 Z code	Crosswalk
V08 Asymptomatic human immunodeficiency virus [HIV]	Z21 Asymptomatic human immunodeficiency virus [HIV]	Exact
V09 Infection with microorganisms resistant	Z16 Resistance to antimicrobial drugs	Exact
V10 Personal history of malignant neoplasm	Z85 Personal history of malignant neoplasm	Exact
V12.51 Venous thrombosis and embolism	Z86.71 Personal history of venous thrombosis and embolism	Approximate
V12.54 Transient ischemic attack (TIA) and cerebral infarction without residual deficits	Z86.73 Personal history of Transient ischemic attack (TIA) and cerebral infarction without residual deficits	Exact
V12.55 Pulmonary embolism	Z86.711 Personal history of pulmonary embolism	Exact
V12.61 Pneumonia (recurrent)	VZ87.01 Personal history of pneumonia (recurrent)	Exact
V13.02 Urinary (tract) infection	Z87.440 Personal history of urinary (tract) infection	Exact
V13.51 Pathologic fracture	Z87.311 Personal history of (healed) pathological fracture	Exact
V15.51 Traumatic fracture	Z87.81 Personal history of (healed) traumatic fracture	Exact
V15.88 History of fall	Z91.81 History of falling	Exact
V40.31 Wandering in diseases classified elsewhere	Z91.83 Wandering in diseases classified elsewhere	Exact
V43.6 Status joint	Z96.6- Presence artificial joint	Approximate
V44 Status artificial opening	Z93 Artificial opening status	Exact
V45.01 Status cardiac pacemaker	Z95.0 Presence cardiac pacemaker	Exact
V45.02 Status automatic implantable cardiac defibrillator	Z95.810 Presence automatic implantable cardiac defibrillator	Exact
V45.11 Renal dialysis status	Z99.2 Dependence on renal dialysis	Approximate
V45.81 Aortocoronary bypass status	Z95.1 Presence of aortocoronary bypass	Exact
V46.2 Supplemental oxygen	Z99.81 Dependence on supplemental oxygen	Exact
V46.3 Wheelchair dependence	Z99.3 Dependence on wheelchair	Exact
V49.6 Upper limb amputation status	Z89 Acquired absence of limb	Approximate
V49.7 Lower limb amputation status	Z89 Acquired absence of limb	Approximate
V49.84 Bed confinement status	Z74.01 Bed confinement status	Exact
V49.86 Do not resuscitate status	Z66 Do not resuscitate	Exact

272.0 - tabacoose

ICD-9 V code	ICD-10 Z code	Crosswalk
V53.6 Urinary devices	Z46.6 Encounter for fitting and adjustment of urinary device	Exact
V54.1 Aftercare for healing traumatic fracture	None	None
V54.2 Aftercare for healing pathologic fracture	None	None
V54.81 Aftercare following joint	Z47.1 Aftercare following joint replacement surgery	Exact
V54.82 Aftercare following explantation of joint prosthesis	Z47.3 Aftercare following explantation of joint prosthesis	Exact
V55 Attention to artificial openings	Z43 Encounter for attention to artificial openings	Approximate
V57 Care involving use of rehabilitation procedures	None	None
V58.30 Encounter for change or removal of nonsurgical wound dressing	Z48.00 Encounter for change or removal of nonsurgical wound dressing	Exact
V58.31 Encounter for change or removal of surgical wound dressing	Z48.01 Encounter for change or removal of surgical wound dressing	Exact
V58.32 Encounter for removal of sutures	Z48.02 Encounter for removal of sutures	Exact
None	Z48.03 Encounter for change or removal of drains	None
V58.42 Aftercare following surgery for neoplasm	Z48.3 Aftercare following surgery for neoplasm	Exact
V58.43 Aftercare following surgery for injury and trauma	None	None
V58.6 Long term (current) drug use	Z79 Long term (current) drug therapy	Approximate
V58.7 Aftercare following surgery to specified body systems, not elsewhere classified	Z48.81 Encounter for surgical aftercare following surgery on specified body systems	Approximate
V58.81 Fitting and adjustment of vascular catheter	Z45.2 Encounter for adjustment and management of vascular access device	Exact
V58.83 Encounter for therapeutic drug monitoring	Z51.81 Encounter for therapeutic drug level monitoring	Exact
V60.3 Person living alone	Z60.2 Problems related to living alone	Exact

Source: Trish Twombly, HCS-D, Senior Director, DecisionHealth