

# ICD-10-CM Expert for Physicians

**The complete official guidelines and code set**  
Codes valid from October 1, 2025  
through September 30, 2026

SAMPLE

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# How to Use ICD-10-CM Expert for Physicians 2026

## Introduction

*ICD-10-CM Expert for Physicians: The Complete Official Code Set* is your definitive coding resource, combining the work of the National Center for Health Statistics (NCHS), Centers for Medicare and Medicaid Services (CMS), American Hospital Association (AHA), and Optum experts to provide the information you need for coding accuracy.

The International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), is an adaptation of ICD-10, copyrighted by the World Health Organization (WHO). The development and maintenance of this clinical modification (CM) is the responsibility of the NCHS as authorized by WHO. Any new concepts added to ICD-10-CM are based on an established update process through the collaboration of WHO's Update and Revision Committee and the ICD-10-CM Coordination and Maintenance Committee.

In addition to the ICD-10-CM classification, other official government source information has been included in this manual. Depending on the source, updates to information may be annual or quarterly. This manual provides the most current information that was available at the time of publication. For updates to the source documents that may have occurred after this manual was published, please refer to the following:

- **NCHS, International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)**  
<https://www.cms.gov/medicare/coding-billing/icd-10-codes/2025-icd-10-cm>
- **CMS Integrated Outpatient Code Editor (IOCE), version 25.2**  
<https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs.html>
- **CMS-HCC Risk Adjustment Model, version 28**
- **CMS ESRD-HCC Risk Adjustment Model, version 24**
- **CMS RxHCC Risk Adjustment Model, version 08**  
<https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors.html>
- **HHS-HCC Commercial Risk Adjustment Model, version 07**  
<https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance>
- **CMS Quality Payment Program (QPP)**  
<https://qpp.cms.gov/mips/explore-measures>
- **AHA Coding Clinics**  
<https://www.codingclinicadvisor.com/>

Significant updates to this manual will be provided on our product updates page at [Optumcoding.com](https://www.optumcoding.com), which can be accessed at the following:

<https://www.optumcoding.com/ProductUpdates/>  
Password: XXXXXX

The official NCHS ICD-10-CM classification includes three main sections: the guidelines, the indexes, and the tabular list, all of which make up the bulk of this coding manual. To complement the classification, Optum's coding experts have incorporated Medicare-related coding edits and proprietary features, such as supplementary notations, coding tools, and appendixes, into a comprehensive and easy-to-use reference. This publication is organized as follows:

## What's New for 2025

This section provides a high-level overview of the code changes made for fiscal 2025. The list of codes provided identifies new, revised, and deleted codes. Asterisked codes identify prior midyear changes that were made to

the classification, effective April 1, 2024. All changes are based on official addenda, provided by the NCHS.

## Conversion Table

The conversion table was developed by NCHS to help facilitate data retrieval as new codes are added to the ICD-10-CM classification. This table provides a crosswalk from each fiscal 2025 new code to the equivalent code(s) assigned, prior to October 1, 2024, for that diagnosis or condition. Asterisked codes identify prior midyear additions, effective April 1, 2024. For the full conversion table, refer to the Conversion Table zip file at <https://www.cms.gov/medicare/coding-billing/icd-10-codes/2025-icd-10-cm>.

## 10 Steps to Correct Coding

This step-by-step tutorial walks the coder through the process of finding the correct code — from locating the code in the official indexes to verifying the code in the tabular section — while following applicable conventions, guidelines, and instructional notes. Specific examples are provided with detailed explanations of each coding step along with advice for proper sequencing.

## Official ICD-10-CM Guidelines for Coding and Reporting

This section provides the full official conventions and guidelines regulating the appropriate assignment and reporting of ICD-10-CM codes. These conventions and guidelines are published by the U.S. Department of Health and Human Services (DHHS) and approved by the cooperating parties (American Health Information Management Association [AHIMA], NCHS, Centers for Disease Control and Prevention [CDC], and the American Hospital Association [AHA]).

## Indexes

### Index to Diseases and Injuries

The Index to Diseases and Injuries is arranged in alphabetic order by terms specific to a disease, condition, illness, injury, eponym, or abbreviation as well as terms that describe circumstances other than a disease or injury that may require attention from a health care professional.

### Neoplasm Table

The Neoplasm Table is arranged in alphabetic order by anatomical site. Codes are then listed in individual columns based upon the histological behavior (malignant, in situ, benign, uncertain, or unspecified) of the neoplasm.

### Table of Drugs and Chemicals

The Table of Drugs and Chemicals is arranged in alphabetic order by the specific drug or chemical name. Codes are listed in individual columns based upon the associated intent (poisoning, adverse effect, or underdosing). Drugs with an asterisk identify substances added to the table by Optum subject matter experts.

### External Causes Index

The External Causes Index is arranged in alphabetic order by main terms that describe the cause, the intent, the place of occurrence, the activity, and the status of the patient at the time the injury occurred or health condition arose.

# ICD-10-CM Index to Diseases and Injuries

## A

**Aarskog's syndrome** Q87.19  
**Abandonment** — see Maltreatment  
**Abasia** (-astasia) (hysterical) F44.4  
**Abderhalden-Kaufmann-Lignac syndrome** (cystinosis) E72.04  
**Abdomen, abdominal** — see also condition  
acute R10.0  
angina K55.1  
muscle deficiency syndrome Q79.4  
**Abdominalgia** — see Pain, abdominal  
**Abduction contracture, hip or other joint** — see Contraction, joint  
**Aberant** (congenital) — see also Malposition, congenital  
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artery (peripheral) Q27.8  
basilar NEC Q28.1  
cerebral Q28.3  
coronary Q24.5  
digestive system Q27.8  
eye Q15.8  
lower limb Q27.8  
precerebral Q28.1  
pulmonary Q25.79  
renal Q27.2  
retina Q14.1  
specified site NEC Q27.8  
subclavian Q27.8  
upper limb Q27.8  
vertebral Q28.1  
breast Q83.8  
endocrine gland NEC Q89.2  
hepatic duct Q44.5  
pancreas Q45.3  
parathyroid gland Q89.2  
pituitary gland Q89.2  
sebaceous glands, mucous membrane, mouth, congenital Q38.6  
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subclavian artery Q27.8  
thymus (gland) Q89.2  
thyroid gland Q89.2  
vein (peripheral) NEC Q27.8  
cerebral Q28.3  
digestive system Q27.8  
lower limb Q27.8  
precerebral Q28.1  
specified site NEC Q27.8  
upper limb Q27.8  
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**Ablepharia, ablepharon** Q10.3  
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alphafetoprotein R77.2  
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anatomical relationship Q89.9  
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threshold shift — see Shift, auditory threshold  
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biosynthesis, testicular androgen E29.1  
bleeding time R79.1  
blood amino-acid level R79.83  
blood level (of)  
cobalt R79.0  
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iron R79.0

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mineral NEC R79.0  
zinc R79.0  
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elevated R03.0  
low reading (nonspecific) R03.1  
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blood-gas level R79.81  
bowel sounds R19.15  
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hyperactive R19.12  
brain scan R94.02  
breathing R06.9  
caloric test R94.138  
cerebrospinal fluid R83.9  
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drug level R83.2  
enzyme level R83.0  
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immunology R83.4  
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nasal secretions R84.8  
nipple discharge R89.8  
peritoneal fluid R85.89  
pleural fluid R84.8  
prostatic secretions R86.8  
saliva R85.89  
seminal fluid R86.8  
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throat scrapings R84.8  
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vulva R87.89  
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atypical squamous cells of undetermined significance (ASC-US) R85.610  
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**Abnormal, abnormality, abnormalities** — continued  
cytology — continued  
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low risk positive R85.82  
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abdomen, abdominal region NEC R93.5  
biliary tract R93.2  
bladder R93.41  
breast R92.8  
central nervous system NEC R90.89  
cerebrovascular NEC R90.89  
coronary circulation R93.1  
digestive tract NEC R93.3  
gastrointestinal (tract) R93.3  
genitourinary organs R93.89  
head R93.0  
heart R93.1  
intrathoracic organ NEC R93.89  
kidney R93.42-   
limbs R93.6  
liver R93.2  
lung (field) R91.8  
musculoskeletal system NEC R93.7  
renal pelvis R93.41  
retroperitoneum R93.5  
site specified NEC R93.89  
skin and subcutaneous tissue R93.89  
skull R93.0  
testis R93.81-   
ureter R93.41  
urinary organs specified NEC R93.49  
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echocardiogram R93.1  
echoencephalogram R90.81  
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electroencephalogram [EEG] R94.01  
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electromyogram [EMG] R94.131  
electro-oculogram [EOG] R94.110  
electrophysiological intracardiac studies R94.39  
electroretinogram [ERG] R94.111  
erythrocytes  
congenital, with perinatal jaundice D58.9  
feces (color) (contents) (mucus) R19.5  
finding — see Findings, abnormal, without diagnosis  
fluid  
amniotic — see Abnormal, specimen, specified  
cerebrospinal — see Abnormal, cerebrospinal fluid  
peritoneal — see Abnormal, specimen, digestive organs  
pleural — see Abnormal, specimen, respiratory organs  
synovial — see Abnormal, specimen, specified  
thorax (bronchial washings) (pleural fluid) — see Abnormal, specimen, respiratory organs  
vaginal — see Abnormal, specimen, female genital organs  
form  
teeth K00.2  
uterus — see Anomaly, uterus

	Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified Behavior		Malignant Primary	Malignant Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified Behavior
<b>Neoplasm, neoplastic</b>							<b>Neoplasm, neoplastic</b>						
— <i>continued</i>							— <i>continued</i>						
brain — <i>continued</i>							bronchus — <i>continued</i>						
basal ganglia	C71.0	C79.31	—	D33.0	D43.0	D49.6	main	C34.0-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1
cerebellopontine angle	C71.6	C79.31	—	D33.1	D43.1	D49.6	middle lobe of lung	C34.2	C78.0-✓	D02.21	D14.31	D38.1	D49.1
cerebellum NOS	C71.6	C79.31	—	D33.1	D43.1	D49.6	overlapping lesion	C34.8-✓	—	—	—	—	—
cerebrum	C71.0	C79.31	—	D33.0	D43.0	D49.6	upper lobe of lung	C34.1-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1
choroid plexus	C71.7	C79.31	—	D33.1	D43.1	D49.6	brow	C44.309	C79.2	D04.39	D23.39	D48.5	D49.2
corpus callosum	C71.8	C79.31	—	D33.2	D43.2	D49.6	basal cell carcinoma specified type NEC	C44.319	—	—	—	—	—
corpus striatum	C71.0	C79.31	—	D33.0	D43.0	D49.6	squamous cell carcinoma	C44.329	—	—	—	—	—
cortex (cerebral)	C71.0	C79.31	—	D33.0	D43.0	D49.6	buccal (cavity)	C06.9	C79.89	D00.00	D10.39	D37.09	D49.0
frontal lobe	C71.1	C79.31	—	D33.0	D43.0	D49.6	commissure	C06.0	C79.89	D00.02	D10.39	D37.09	D49.0
globus pallidus	C71.0	C79.31	—	D33.0	D43.0	D49.6	groove (lower)	C06.1	C79.89	D00.02	D10.39	D37.09	D49.0
hippocampus	C71.2	C79.31	—	D33.0	D43.0	D49.6	(upper)	C06.0	C79.89	D00.02	D10.39	D37.09	D49.0
hypothalamus	C71.0	C79.31	—	D33.0	D43.0	D49.6	mucosa	C06.0	C79.89	D00.02	D10.39	D37.09	D49.0
internal capsule	C71.0	C79.31	—	D33.0	D43.0	D49.6	sulcus (lower)	C06.1	C79.89	D00.02	D10.39	D37.09	D49.0
medulla							(upper)	C06.1	C79.89	D00.02	D10.39	D37.09	D49.0
oblongata	C71.7	C79.31	—	D33.1	D43.1	D49.6	bulbourethral gland	C68.0	C79.19	D09.19	D30.4	D41.3	D49.59
meninges	C70.0	C79.32	—	D32.0	D42.0	D49.7	bursa — <i>see</i> Neoplasm, connective tissue						
midbrain	C71.7	C79.31	—	D33.1	D43.1	D49.6	buttock NEC	C76.3	C79.89	D04.5	D36.7	D48.7	D49.89
occipital lobe	C71.4	C79.31	—	D33.0	D43.0	D49.6	calf	C76.5-✓	C79.89	D04.7-✓	D36.7	D48.7	D49.89
overlapping lesion	C71.8	C79.31	—	—	—	—	calvarium	C41.0	C79.51	—	D16.4	D48.0	D49.2
parietal lobe	C71.3	C79.31	—	D33.0	D43.0	D49.6	calyx, renal canal	C65.1-✓	C79.0-✓	D09.19	D30.1-✓	D41.1-✓	D49.51-✓
peduncle	C71.7	C79.31	—	D33.1	D43.1	D49.6	anal	C21.1	C78.5	D01.3	D12.9	D37.8	D49.0
pons	C71.7	C79.31	—	D33.1	D43.1	D49.6	auditory (external) — <i>see also</i> Neoplasm, skin, ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
stem	C71.7	C79.31	—	D33.1	D43.1	D49.6	auricular (external) — <i>see also</i> Neoplasm, skin, ear	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
tapetum	C71.8	C79.31	—	D33.2	D43.2	D49.6	canaliculi, biliary (biliferi)	C44.20-✓	C79.2	D04.2-✓	D23.2-✓	D48.5	D49.2
temporal lobe	C71.2	C79.31	—	D33.0	D43.0	D49.6	(intrahepatic)	C22.1	C78.7	D01.5	D13.4	D37.6	D49.0
thalamus	C71.0	C79.31	—	D33.0	D43.0	D49.6	canthus (eye) (inner)	C44.10-✓	C79.2	D04.1-✓	D23.1-✓	D48.5	D49.2
uncus	C71.2	C79.31	—	D33.0	D43.0	D49.6	basal cell carcinoma	C44.11-✓	—	—	—	—	—
ventricle (floor)	C71.5	C79.31	—	D33.0	D43.0	D49.6	sebaceous cell carcinoma	C44.13-✓	—	—	—	—	—
fourth	C71.7	C79.31	—	D33.1	D43.1	D49.6	specified type NEC	C44.19-✓	—	—	—	—	—
branchial (left) (cyst) (vestiges)	C10.4	C79.89	D00.08	D10.5	D37.05	D49.0	squamous cell carcinoma	C44.12-✓	—	—	—	—	—
breast (connective tissue) (glandular tissue) (soft parts)	C50.9-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	capillary — <i>see</i> Neoplasm, connective tissue						
areola	C50.0-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	caput coli	C18.0	C78.5	D01.0	D12.0	D37.4	D49.0
axillary tail	C50.6-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	carcinoid — <i>see</i> Tumor, carcinoid						
central portion	C50.1-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	cardia (gastric)	C16.0	C78.89	D00.2	D13.1	D37.1	D49.0
inner	C50.8-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	cardiac orifice (stomach)	C16.0	C78.89	D00.2	D13.1	D37.1	D49.0
lower	C50.8-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	cardio-esophageal junction	C16.0	C78.89	D00.2	D13.1	D37.1	D49.0
lower-inner quadrant	C50.3-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	cardio-esophagus carina (bronchus)	C34.0-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1
lower-outer quadrant	C50.5-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	carotid (artery)	C49.0	C79.89	—	D21.0	D48.1-✓	D49.2
mastectomy site (skin) — <i>see also</i> Neoplasm, breast, skin	C44.501	C79.2	—	—	—	—	body	C75.4	C79.89	—	D35.5	D44.6	D49.7
specified as breast tissue	C50.8-✓	C79.81	—	—	—	—	carpus (any bone)	C40.1-✓	C79.51	—	D16.1-✓	—	—
midline	C50.8-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	cartilage (articular) (joint) NEC — <i>see also</i> Neoplasm, bone	C41.9	C79.51	—	D16.9	D48.0	D49.2
nipple	C50.0-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	arytenoid	C32.3	C78.39	D02.0	D14.1	D38.0	D49.1
outer	C50.8-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	auricular	C49.0	C79.89	—	D21.0	D48.1-✓	D49.2
overlapping lesion	C50.8-✓	—	—	—	—	—	bronchi	C34.0-✓	C78.39	—	D14.3-✓	D38.1	D49.1
skin	C44.501	C79.2	D04.5	D23.5	D48.5	D49.2	costal	C41.3	C79.51	—	D16.7	D48.0	D49.2
basal cell carcinoma	C44.511	—	—	—	—	—	cricoid	C32.3	C78.39	D02.0	D14.1	D38.0	D49.1
specified type NEC	C44.591	—	—	—	—	—	cuneiform	C32.3	C78.39	D02.0	D14.1	D38.0	D49.1
squamous cell carcinoma	C44.521	—	—	—	—	—	ear (external)	C49.0	C79.89	—	D21.0	D48.1-✓	D49.2
tail (axillary)	C50.6-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	ensiform	C41.3	C79.51	—	D16.7	D48.0	D49.2
upper	C50.8-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3	epiglottis	C32.1	C78.39	D02.0	D14.1	D38.0	D49.1
upper-inner quadrant	C50.2-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3							
upper-outer quadrant	C50.4-✓	C79.81	D05.1-✓	D24.1-✓	D48.6-✓	D49.3							
broad ligament	C57.1-✓	C79.82	D07.39	D28.2	D39.8	D49.59							
bronchiogenic, bronchogenic (lung)	C34.9-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1							
bronchiole	C34.9-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1							
bronchus	C34.9-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1							
carina	C34.0-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1							
lower lobe of lung	C34.3-✓	C78.0-✓	D02.2-✓	D14.3-✓	D38.1	D49.1							



## Chapter 1. Certain Infectious and Parasitic Diseases (A00–B99), U07.1, U09.9

### Chapter-specific Guidelines with Coding Examples

The chapter-specific guidelines from the ICD-10-CM Official Guidelines for Coding and Reporting have been provided below. Along with these guidelines are coding examples, contained in the shaded boxes, that have been developed to help illustrate the coding and/or sequencing guidance found in these guidelines.

#### a. Human immunodeficiency virus (HIV) infections

##### 1) Code only confirmed cases

Code only confirmed cases of HIV infection/illness. This is an exception to the hospital inpatient guideline Section II, H.

In this context, “confirmation” does not require documentation of positive serology or culture for HIV; the provider’s diagnostic statement that the patient is HIV positive or has an HIV-related illness is sufficient.

Patient being seen for hypothyroidism with possible HIV infection

**E03.9 Hypothyroidism, unspecified**

*Explanation:* Only the hypothyroidism is coded in this scenario because it has not been confirmed that an HIV infection is present.

##### 2) Selection and sequencing of HIV codes

###### (a) Patient admitted for HIV-related condition

If a patient is admitted for an HIV-related condition, the principal diagnosis should be B20, Human immunodeficiency virus [HIV] disease followed by additional diagnosis codes for all reported HIV-related conditions.

An exception to this guideline is if the reason for admission is hemolytic-uremic syndrome associated with HIV disease. Assign code D59.31, Infection-associated hemolytic-uremic syndrome, followed by code B20, Human immunodeficiency virus [HIV] disease.

HIV with CMV

**B20 Human immunodeficiency virus [HIV] disease**

**B25.9 Cytomegaloviral disease, unspecified**

*Explanation:* Cytomegaloviral infection is an HIV related condition, so the HIV diagnosis code is reported first, followed by the code for the CMV.

###### (b) Patient with HIV disease admitted for unrelated condition

If a patient with HIV disease is admitted for an unrelated condition (such as a traumatic injury), the code for the unrelated condition (e.g., the nature of injury code) should be the principal diagnosis. Other diagnoses would be B20 followed by additional diagnosis codes for all reported HIV-related conditions.

Sprain of the internal collateral ligament, right ankle; HIV

**S93.491A Sprain of other ligament of right ankle, initial encounter**

**B20 Human immunodeficiency virus [HIV] disease**

*Explanation:* The ankle sprain is not related to HIV, so it is the first-listed diagnosis code, and HIV is reported secondarily.

###### (c) Whether the patient is newly diagnosed

Whether the patient is newly diagnosed or has had previous admissions/encounters for HIV conditions is irrelevant to the sequencing decision.

Newly diagnosed multiple cutaneous Kaposi’s sarcoma lesions in previously diagnosed HIV disease

**B20 Human immunodeficiency virus [HIV] disease**

**C46.0 Kaposi’s sarcoma of skin**

*Explanation:* Even though the HIV was diagnosed on a previous encounter, it is still sequenced first when coded with an HIV-related condition. Kaposi’s sarcoma is an HIV-related condition.

###### (d) Asymptomatic human immunodeficiency virus

Z21, Asymptomatic human immunodeficiency virus [HIV] infection status, is to be applied when the patient without any documentation of symptoms is listed as being “HIV positive,” “known HIV,” “HIV test positive,” or similar terminology. Do not use this code if the term “AIDS” or “HIV disease” is used or if the patient is treated for any

HIV-related illness or is described as having any condition(s) resulting from his/her HIV positive status; use B20 in these cases.

###### (e) Patients with inconclusive HIV serology

Patients with inconclusive HIV serology, but no definitive diagnosis or manifestations of the illness, may be assigned code R75, Inconclusive laboratory evidence of human immunodeficiency virus [HIV].

###### (f) Previously diagnosed HIV-related illness

Patients with any known prior diagnosis of an HIV-related illness should be coded to B20. Once a patient has developed an HIV-related illness, the patient should always be assigned code B20 on every subsequent admission/encounter. Patients previously diagnosed with any HIV illness (B20) should never be assigned to R75 or Z21, Asymptomatic human immunodeficiency virus [HIV] infection status.

###### (g) HIV infection in pregnancy, childbirth and the puerperium

During pregnancy, childbirth or the puerperium, a patient admitted (or presenting for a health care encounter) because of an HIV-related illness should receive a principal diagnosis code of O98.7-, Human immunodeficiency [HIV] disease complicating pregnancy, childbirth and the puerperium, followed by B20 and the code(s) for the HIV-related illness(es). Codes from Chapter 15 always take sequencing priority.

Patients with asymptomatic HIV infection status admitted (or presenting for a health care encounter) during pregnancy, childbirth, or the puerperium should receive codes of O98.7- and Z21.

###### (h) Encounters for testing for HIV

If a patient is being seen to determine his/her HIV status, use code Z11.4, Encounter for screening for human immunodeficiency virus [HIV]. Use additional codes for any associated high-risk behavior, if applicable.

If a patient with signs or symptoms is being seen for HIV testing, code the signs and symptoms. An additional counseling code Z71.7, Human immunodeficiency virus [HIV] counseling, may be used if counseling is provided during the encounter for the test.

When a patient returns to be informed of his/her HIV test results and the test result is negative, use code Z71.7, Human immunodeficiency virus [HIV] counseling.

If the results are positive, see previous guidelines and assign codes as appropriate.

###### (i) HIV managed by antiretroviral medication

If a patient with documented HIV disease, HIV-related illness or AIDS is currently managed on antiretroviral medications, assign code B20, Human immunodeficiency virus [HIV] disease. Code Z79.899, Other long term (current) drug therapy, may be assigned as an additional code to identify the long-term (current) use of antiretroviral medications.

###### (j) Encounter for HIV Prophylaxis Measure

When a patient is seen for administration of pre-exposure prophylaxis medication for HIV, assign code Z29.81, Encounter for HIV pre-exposure prophylaxis. Pre-exposure prophylaxis (PrEP) is intended to prevent infection in people who are at risk for getting HIV through sex or injection drug use. Any risk factors for HIV should also be coded.

#### b. Infectious agents as the cause of diseases classified to other chapters

Certain infections are classified in chapters other than Chapter 1 and no organism is identified as part of the infection code. In these instances, it is necessary to use an additional code from Chapter 1 to identify the organism. A code from category B95, Streptococcus, Staphylococcus, and Enterococcus as the cause of diseases classified to other chapters, B96, Other bacterial agents as the cause of diseases classified to other chapters, or B97, Viral agents as the cause of diseases classified to other chapters, is to be used as an additional code to identify the organism. An instructional note will be found at the infection code advising that an additional organism code is required.

Acute *E. coli* cystitis

**N30.00 Acute cystitis without hematuria**

**B96.20 Unspecified Escherichia coli [E.coli] as the cause of diseases classified elsewhere**

*Explanation:* An instructional note under the category for the cystitis indicates to code also the specific organism.



**F16.921** **Hallucinogen use, unspecified with intoxication with delirium** HCC ESR COM  
 Other hallucinogen intoxication delirium

**F16.929** **Hallucinogen use, unspecified with intoxication, unspecified** HCC ESR COM

**F16.94** **Hallucinogen use, unspecified with hallucinogen-induced mood disorder** HCC ESR COM  
 Other hallucinogen induced bipolar or related disorder, without use disorder  
 Other hallucinogen induced depressive disorder, without use disorder  
 Phencyclidine induced bipolar or related disorder, without use disorder  
 Phencyclidine induced depressive disorder, without use disorder

✓6th **F16.95** **Hallucinogen use, unspecified with hallucinogen-induced psychotic disorder**

**F16.950** **Hallucinogen use, unspecified with hallucinogen-induced psychotic disorder with delusions** HCC ESR COM

**F16.951** **Hallucinogen use, unspecified with hallucinogen-induced psychotic disorder with hallucinations** HCC ESR COM

**F16.959** **Hallucinogen use, unspecified with hallucinogen-induced psychotic disorder, unspecified** HCC ESR COM  
 Other hallucinogen induced psychotic disorder, without use disorder  
 Phencyclidine induced psychotic disorder, without use disorder

✓6th **F16.98** **Hallucinogen use, unspecified with other specified hallucinogen-induced disorder**

**F16.980** **Hallucinogen use, unspecified with hallucinogen-induced anxiety disorder** HCC ESR COM  
 Other hallucinogen-induced anxiety disorder, without use disorder  
 Phencyclidine induced anxiety disorder, without use disorder

**F16.983** **Hallucinogen use, unspecified with hallucinogen persisting perception disorder (flashbacks)** HCC ESR COM

**F16.988** **Hallucinogen use, unspecified with other hallucinogen-induced disorder** HCC ESR COM

**F16.99** **Hallucinogen use, unspecified with unspecified hallucinogen-induced disorder** HCC ESR COM

✓4th **F17 Nicotine dependence**

**EXCLUDES 1** history of tobacco dependence (Z87.891)  
 tobacco use NOS (Z72.0)

**EXCLUDES 2** tobacco use (smoking) during pregnancy, childbirth and the puerperium (O99.33-)  
 toxic effect of nicotine (T65.2-)

AHA: 2013,4Q,108-109

✓5th **F17.2 Nicotine dependence**

✓6th **F17.20** **Nicotine dependence, unspecified**

**F17.200** **Nicotine dependence, unspecified, uncomplicated**

Tobacco use disorder, mild  
 Tobacco use disorder, moderate  
 Tobacco use disorder, severe

AHA: 2016,1Q,36

**TIP:** Assign when provider documentation indicates “smoker” without further specification.

**F17.201** **Nicotine dependence, unspecified, in remission**

Tobacco use disorder, mild, in early remission  
 Tobacco use disorder, mild, in sustained remission  
 Tobacco use disorder, moderate, in early remission  
 Tobacco use disorder, moderate, in sustained remission  
 Tobacco use disorder, severe, in early remission  
 Tobacco use disorder, severe, in sustained remission

**F17.203** **Nicotine dependence unspecified, with withdrawal**

Tobacco withdrawal

**F17.208** **Nicotine dependence, unspecified, with other nicotine-induced disorders**

**F17.209** **Nicotine dependence, unspecified, with unspecified nicotine-induced disorders**

✓6th **F17.21** **Nicotine dependence, cigarettes**

**F17.210** **Nicotine dependence, cigarettes, uncomplicated**  
 AHA: 2017,2Q,28-29

**F17.211** **Nicotine dependence, cigarettes, in remission**

Tobacco use disorder, cigarettes, mild, in early remission  
 Tobacco use disorder, cigarettes, mild, in sustained remission  
 Tobacco use disorder, cigarettes, moderate, in early remission  
 Tobacco use disorder, cigarettes, moderate, in sustained remission  
 Tobacco use disorder, cigarettes, severe, in early remission  
 Tobacco use disorder, cigarettes, severe, in sustained remission

**F17.213** **Nicotine dependence, cigarettes, with withdrawal**

**F17.218** **Nicotine dependence, cigarettes, with other nicotine-induced disorders**

**F17.219** **Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders**

✓6th **F17.22** **Nicotine dependence, chewing tobacco**

**F17.220** **Nicotine dependence, chewing tobacco, uncomplicated**

**F17.221** **Nicotine dependence, chewing tobacco, in remission**

Tobacco use disorder, chewing tobacco, mild, in early remission  
 Tobacco use disorder, chewing tobacco, mild, in sustained remission  
 Tobacco use disorder, chewing tobacco, moderate, in early remission  
 Tobacco use disorder, chewing tobacco, moderate, in sustained remission  
 Tobacco use disorder, chewing tobacco, severe, in early remission  
 Tobacco use disorder, chewing tobacco, severe, in sustained remission

**F17.223** **Nicotine dependence, chewing tobacco, with withdrawal**

**F17.228** **Nicotine dependence, chewing tobacco, with other nicotine-induced disorders**

**F17.229** **Nicotine dependence, chewing tobacco, with unspecified nicotine-induced disorders**

✓6th **F17.29** **Nicotine dependence, other tobacco product**

**F17.290** **Nicotine dependence, other tobacco product, uncomplicated**

AHA: 2017,2Q,28-29

**F17.291** **Nicotine dependence, other tobacco product, in remission**

Tobacco use disorder, other tobacco product, mild, in early remission  
 Tobacco use disorder, other tobacco product, mild, in sustained remission  
 Tobacco use disorder, other tobacco product, moderate, in early remission  
 Tobacco use disorder, other tobacco product, moderate, in sustained remission  
 Tobacco use disorder, other tobacco product, severe, in early remission  
 Tobacco use disorder, other tobacco product, severe, in sustained remission

**F17.293** **Nicotine dependence, other tobacco product, with withdrawal**

**F17.298** **Nicotine dependence, other tobacco product, with other nicotine-induced disorders**

**F17.299** **Nicotine dependence, other tobacco product, with unspecified nicotine-induced disorders**

- 122.8 Subsequent ST elevation (STEMI) myocardial infarction of other sites** HCC Rx ESR COM  
 Subsequent acute transmural myocardial infarction of other sites  
 Subsequent apical-lateral transmural (Q wave) myocardial infarction (acute)  
 Subsequent basal-lateral transmural (Q wave) myocardial infarction (acute)  
 Subsequent high lateral transmural (Q wave) myocardial infarction (acute)  
 Subsequent posterior (true) transmural (Q wave) myocardial infarction (acute)  
 Subsequent posterobasal transmural (Q wave) myocardial infarction (acute)  
 Subsequent posterolateral transmural (Q wave) myocardial infarction (acute)  
 Subsequent posteroseptal transmural (Q wave) myocardial infarction (acute)  
 Subsequent septal NOS transmural (Q wave) myocardial infarction (acute)  
 Subsequent transmural (Q wave) myocardial infarction (acute)(of lateral (wall) NOS

- 122.9 Subsequent ST elevation (STEMI) myocardial infarction of unspecified site** HCC Rx ESR COM  
 Subsequent acute myocardial infarction of unspecified site  
 Subsequent myocardial infarction (acute) NOS

- 123 Certain current complications following ST elevation (STEMI) and non-ST elevation (NSTEMI) myocardial infarction (within the 28 day period)**  
 AHA: 2017,2Q,11  
 DEF: ST elevation myocardial infarction: Complete obstruction of one or more coronary arteries causing decreased blood flow (ischemia) and necrosis of myocardial muscle cells.  
 DEF: Non-ST elevation myocardial infarction: Partial obstruction of one or more coronary arteries that causes decreased blood flow (ischemia) and may cause partial thickness necrosis of myocardial muscle cells.

- 123.0 Hemopericardium as current complication following acute myocardial infarction** HCC Rx ESR COM A  
 EXCLUDES 1 hemopericardium not specified as current complication following acute myocardial infarction (I31.2)

- 123.1 Atrial septal defect as current complication following acute myocardial infarction** HCC Rx ESR COM A  
 EXCLUDES 1 acquired atrial septal defect not specified as current complication following acute myocardial infarction (I51.0)

- 123.2 Ventricular septal defect as current complication following acute myocardial infarction** HCC Rx ESR COM A  
 EXCLUDES 1 acquired ventricular septal defect not specified as current complication following acute myocardial infarction (I51.0)

- 123.3 Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction** HCC Rx ESR COM A

- 123.4 Rupture of chordae tendineae as current complication following acute myocardial infarction** HCC Rx ESR COM  
 EXCLUDES 1 rupture of chordae tendineae not specified as current complication following acute myocardial infarction (I51.1)

- 123.5 Rupture of papillary muscle as current complication following acute myocardial infarction** HCC Rx ESR COM  
 EXCLUDES 1 rupture of papillary muscle not specified as current complication following acute myocardial infarction (I51.2)

- 123.6 Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction** HCC Rx ESR COM A  
 EXCLUDES 1 thrombosis of atrium, auricular appendage, and ventricle not specified as current complication following acute myocardial infarction (I51.3)

- 123.7 Postinfarction angina** HCC Rx ESR COM A  
 AHA: 2015,2Q,16  
 TIP: When postinfarction angina occurs with atherosclerotic coronary artery disease, code both I23.7 and I25.118 for atherosclerotic disease with other forms of angina pectoris.

- 123.8 Other current complications following acute myocardial infarction** HCC Rx ESR COM A

**I24 Other acute ischemic heart diseases**

- EXCLUDES 1 angina pectoris (I20.-)  
 transient myocardial ischemia in newborn (P29.4)
- EXCLUDES 2 non-ischemic myocardial injury (I5A)

- I24.0 Acute coronary thrombosis not resulting in myocardial infarction** HCC Rx ESR COM  
 Acute coronary (artery) (vein) embolism not resulting in myocardial infarction  
 Acute coronary (artery) (vein) occlusion not resulting in myocardial infarction  
 Acute coronary (artery) (vein) thromboembolism not resulting in myocardial infarction  
 EXCLUDES 1 atherosclerotic heart disease (I25.1-)  
 AHA: 2013,1Q,24

- I24.1 Dressler's syndrome** HCC Rx ESR COM  
 Postmyocardial infarction syndrome  
 EXCLUDES 1 postinfarction angina (I23.7)  
 DEF: Fever, leukocytosis, chest pain, evidence of pericarditis, pleurisy, and pneumonia occurring days or weeks after a myocardial infarction.

- I24.8 Other forms of acute ischemic heart disease** HCC Rx ESR COM  
 EXCLUDES 1 myocardial infarction due to demand ischemia (I21.A1)  
 AHA: 2023,4Q,25-26; 2019,4Q,53; 2017,4Q,13

- I24.81 Acute coronary microvascular dysfunction** HCC Rx ESR COM  
 Acute (presentation of) coronary microvascular disease

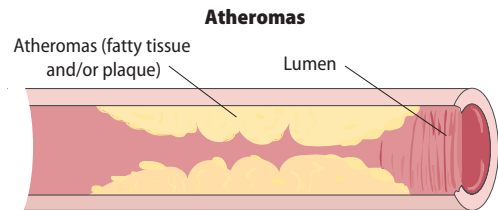
- I24.89 Other forms of acute ischemic heart disease** HCC Rx ESR COM

- I24.9 Acute ischemic heart disease, unspecified** HCC Rx ESR COM  
 EXCLUDES 1 ischemic heart disease (chronic) NOS (I25.9)

**I25 Chronic ischemic heart disease**

- Use additional code to identify:  
 chronic total occlusion of coronary artery (I25.82)  
 exposure to environmental tobacco smoke (Z77.22)  
 history of tobacco dependence (Z87.891)  
 occupational exposure to environmental tobacco smoke (Z57.31)  
 tobacco dependence (F17.-)  
 tobacco use (Z72.0)
- EXCLUDES 2 non-ischemic myocardial injury (I5A)  
 AHA: 2022,4Q,20-21

- I25.1 Atherosclerotic heart disease of native coronary artery** HCC Rx ESR COM  
 Atherosclerotic cardiovascular disease  
 Coronary (artery) atheroma  
 Coronary (artery) atherosclerosis  
 Coronary (artery) disease  
 Coronary (artery) sclerosis  
 Use additional code, if applicable, to identify:  
 coronary atherosclerosis due to calcified coronary lesion (I25.84)  
 coronary atherosclerosis due to lipid rich plaque (I25.83)  
 EXCLUDES 2 atheroembolism (I75.-)  
 atherosclerosis of coronary artery bypass graft(s) and transplanted heart (I25.7-)



- I25.10 Atherosclerotic heart disease of native coronary artery without angina pectoris** Rx A  
 Atherosclerotic heart disease NOS  
 AHA: 2024,1Q,28; 2021,3Q,6-7; 2015,2Q,16; 2012,4Q,92

- I25.11 Atherosclerotic heart disease of native coronary artery with angina pectoris** HCC Rx ESR COM  
 AHA: 2024,1Q,28

- I25.110 Atherosclerotic heart disease of native coronary artery with unstable angina pectoris** HCC Rx ESR COM A  
 EXCLUDES 1 unstable angina without atherosclerotic heart disease (I20.0)

## Muscle/Tendon Table

ICD-10-CM categorizes certain muscles and tendons in the upper and lower extremities by their action (e.g., extension, flexion), their anatomical location (e.g., posterior, anterior), and/or whether they are intrinsic or extrinsic to a certain anatomical area. The Muscle/Tendon Table is provided at the beginning of chapters 13 and 19 as a resource to help users when code selection depends on one or more of these characteristics. A **TIP** has been placed at those categories and/or subcategories that relate to this table. Please note that this table is not all-inclusive, and proper code assignment should be based on the provider's documentation.

Body Region	Muscle	Extensor Tendon	Flexor Tendon	Other Tendon
<b>Shoulder</b>				
	Deltoid	Posterior deltoid	Anterior deltoid	
	Rotator cuff			
	Infraspinatus			Infraspinatus
	Subscapularis			Subscapularis
	Supraspinatus			Supraspinatus
	Teres minor			Teres minor
	Teres major	Teres major		
<b>Upper arm</b>				
	Anterior muscles			
	Biceps brachii — long head		Biceps brachii — long head	
	Biceps brachii — short head		Biceps brachii — short head	
	Brachialis		Brachialis	
	Coracobrachialis		Coracobrachialis	
	Posterior muscles			
	Triceps brachii	Triceps brachii		
<b>Forearm</b>				
	Anterior muscles			
	Flexors			
	Deep			
	Flexor digitorum profundus		Flexor digitorum profundus	
	Flexor pollicis longus		Flexor pollicis longus	
	Intermediate			
	Flexor digitorum superficialis		Flexor digitorum superficialis	
	Superficial			
	Flexor carpi radialis		Flexor carpi radialis	
	Flexor carpi ulnaris		Flexor carpi ulnaris	
	Palmaris longus		Palmaris longus	
	Pronators			
	Pronator quadratus			Pronator quadratus
	Pronator teres			Pronator teres
	Posterior muscles			
	Extensors			
	Deep			
	Abductor pollicis longus			Abductor pollicis longus
	Extensor indicis	Extensor indicis		
	Extensor pollicis brevis	Extensor pollicis brevis		
	Extensor pollicis longus	Extensor pollicis longus		
	Superficial			
	Brachioradialis			Brachioradialis
	Extensor carpi radialis brevis	Extensor carpi radialis brevis		
	Extensor carpi radialis longus	Extensor carpi radialis longus		
	Extensor carpi ulnaris	Extensor carpi ulnaris		
	Extensor digiti minimi	Extensor digiti minimi		
	Extensor digitorum	Extensor digitorum		
	Anconeus	Anconeus		
	Supinator			Supinator

## Chapter 21. Factors Influencing Health Status and Contact With Health Services (Z00-Z99)

### NOTE

Z codes represent reasons for encounters. A corresponding procedure code must accompany a Z code if a procedure is performed. Categories Z00-Z99 are provided for occasions when circumstances other than a disease, injury or external cause classifiable to categories A00-Y89 are recorded as "diagnoses" or "problems." This can arise in two main ways:

(a) When a person who may or may not be sick encounters the health services for some specific purpose, such as to receive limited care or service for a current condition, to donate an organ or tissue, to receive prophylactic vaccination (immunization), or to discuss a problem which is in itself not a disease or injury.

(b) When some circumstance or problem is present which influences the person's health status but is not in itself a current illness or injury.

AHA: 2018,4Q,60-61

This chapter contains the following blocks:

Z00-Z13	Persons encountering health services for examinations
Z14-Z15	Genetic carrier and genetic susceptibility to disease
Z16	Resistance to antimicrobial drugs
Z17	▶ Estrogen, and other hormones and factors receptor status ◀
Z18	Retained foreign body fragments
Z19	Hormone sensitivity malignancy status
Z20-Z29	Persons with potential health hazards related to communicable diseases
Z30-Z39	Persons encountering health services in circumstances related to reproduction
Z40-Z53	Encounters for other specific health care
Z55-Z65	Persons with potential health hazards related to socioeconomic and psychosocial circumstances
Z66	Do not resuscitate status
Z67	Blood type
Z68	Body mass index (BMI)
Z69-Z76	Persons encountering health services in other circumstances
Z77-Z99	Persons with potential health hazards related to family and personal history and certain conditions influencing health status

### Persons encountering health services for examinations (Z00-Z13)

### NOTE

Nonspecific abnormal findings disclosed at the time of these examinations are classified to categories R70-R94.

**EXCLUDES 1** examinations related to pregnancy and reproduction (Z30-Z36, Z39.-)

**✓ 4th** **Z00** Encounter for general examination without complaint, suspected or reported diagnosis

**EXCLUDES 1** encounter for examination for administrative purposes (Z02.-)

**EXCLUDES 2** encounter for pre-procedural examinations (Z01.81-) special screening examinations (Z11-Z13)

AHA: 2017,4Q,95

**✓ 5th** **Z00.0** Encounter for general adult medical examination

Encounter for adult periodic examination (annual) (physical) and any associated laboratory and radiologic examinations

**EXCLUDES 1** encounter for examination of sign or symptom - code to sign or symptom

general health check-up of infant or child (Z00.12.-)

**Z00.00** Encounter for general adult medical examination without abnormal findings **PDx A**

Encounter for adult health check-up NOS

AHA: 2016,1Q,36

**Z00.01** Encounter for general adult medical examination with abnormal findings **PDx A**

Use additional code to identify abnormal findings

AHA: 2016,1Q,35-36

**✓ 5th** **Z00.1** Encounter for newborn, infant and child health examinations

**✓ 6th** **Z00.11** Newborn health examination

Health check for child under 29 days old

Use additional code to identify any abnormal findings

**EXCLUDES 1** health check for child over 28 days old (Z00.12.-)

**Z00.110** Health examination for newborn under 8 days old **PDx N**

Health check for newborn under 8 days old

**Z00.111** Health examination for newborn 8 to 28 days old **PDx N**

Health check for newborn 8 to 28 days old

Newborn weight check

**✓ 6th** **Z00.12** Encounter for routine child health examination

Health check (routine) for child over 28 days old  
Immunizations appropriate for age  
Routine developmental screening of infant or child  
Routine vision and hearing testing

**EXCLUDES 1** health check for child under 29 days old (Z00.11.-)

health supervision of foundling or other

healthy infant or child (Z76.1-Z76.2)

newborn health examination (Z00.11.-)

AHA: 2018,4Q,36

**Z00.121** Encounter for routine child health examination with abnormal findings **PDx P**

Use additional code to identify abnormal findings

AHA: 2016,1Q,34-35

**Z00.129** Encounter for routine child health examination without abnormal findings **PDx P**

Encounter for routine child health examination NOS

AHA: 2016,1Q,34

**Z00.2** Encounter for examination for period of rapid growth in childhood **PDx P**

**Z00.3** Encounter for examination for adolescent development state **PDx P**

Encounter for puberty development state

**Z00.5** Encounter for examination of potential donor of organ and tissue **PDx**

**Z00.6** Encounter for examination for normal comparison and control in clinical research program

Examination of participant or control in clinical research program

**✓ 5th** **Z00.7** Encounter for examination for period of delayed growth in childhood

**Z00.70** Encounter for examination for period of delayed growth in childhood without abnormal findings **PDx P**

**Z00.71** Encounter for examination for period of delayed growth in childhood with abnormal findings **PDx P**

Use additional code to identify abnormal findings

**Z00.8** Encounter for other general examination **PDx**

Encounter for health examination in population surveys

**✓ 4th** **Z01** Encounter for other special examination without complaint, suspected or reported diagnosis

**INCLUDES** routine examination of specific system

**NOTE** Codes from category Z01 represent the reason for the encounter. A separate procedure code is required to identify any examinations or procedures performed

**EXCLUDES 1** encounter for examination for administrative purposes (Z02.-) encounter for examination for suspected conditions, proven not to exist (Z03.-)

encounter for laboratory and radiologic examinations as a component of general medical examinations (Z00.0-)

encounter for laboratory, radiologic and imaging examinations for sign(s) and symptom(s) - code to the sign(s) or symptom(s)

**EXCLUDES 2** screening examinations (Z11-Z13)

**✓ 5th** **Z01.0** Encounter for examination of eyes and vision

**EXCLUDES 1** examination for driving license (Z02.4)

**Z01.00** Encounter for examination of eyes and vision without abnormal findings **PDx**

Encounter for examination of eyes and vision NOS

**Z01.01** Encounter for examination of eyes and vision with abnormal findings **PDx**

Use additional code to identify abnormal findings

AHA: 2016,4Q,21

**✓ 6th** **Z01.02** Encounter for examination of eyes and vision following failed vision screening

**EXCLUDES 1** encounter for examination of eyes and vision with abnormal findings (Z01.01)

encounter for examination of eyes and vision without abnormal findings (Z01.00)

(Z01.00)

AHA: 2019,4Q,20

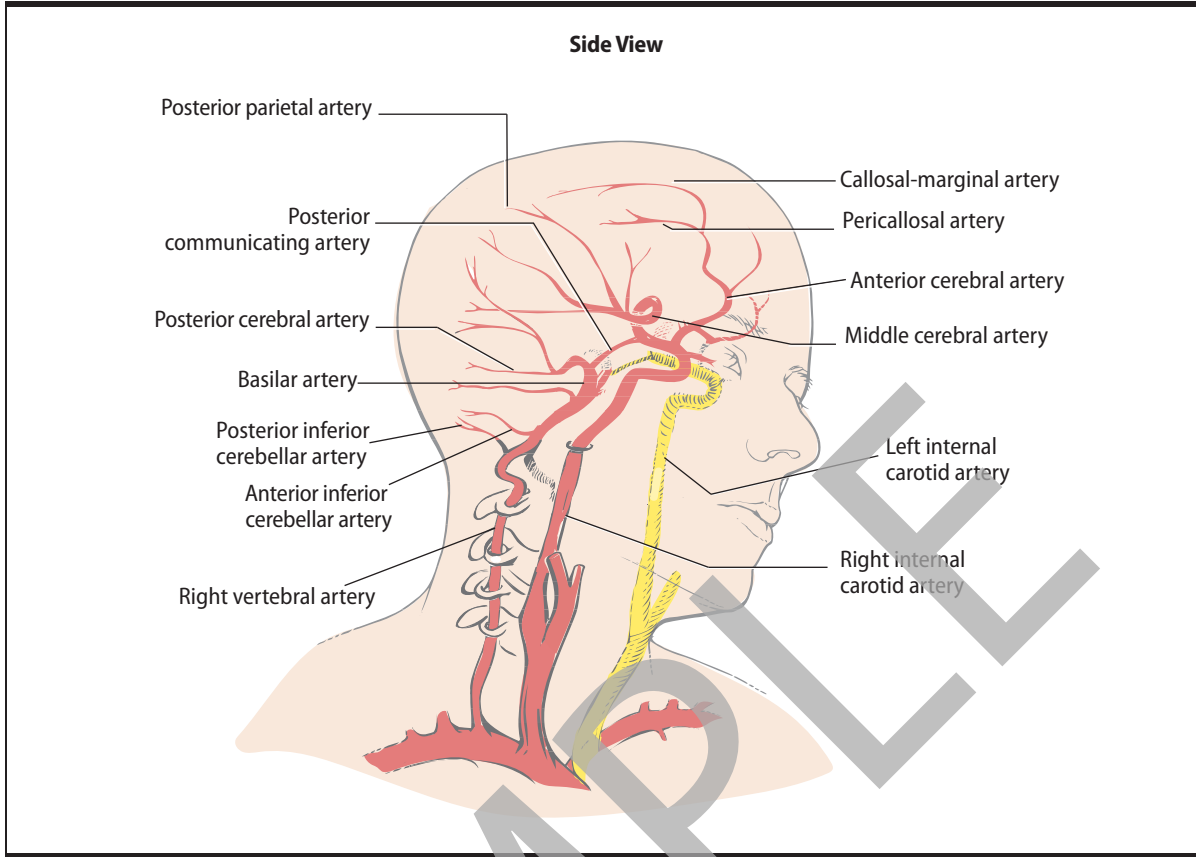
**Z01.020** Encounter for examination of eyes and vision following failed vision screening without abnormal findings **PDx**

## Appendix C: Z Codes for Long-Term Drug Use with Associated Drugs

This resource correlates the Z codes that are used to identify current long-term drug use with a list of drugs that are typically categorized to that class of drug. These lists are not all-inclusive, providing only the more commonly used drugs.

<p><b>Z79.01 Long term (current) use of anticoagulants</b></p> <ul style="list-style-type: none"> <li>Arixtra</li> <li>Defencath</li> <li>Eliquis</li> <li>Fragmin</li> <li>Heparin</li> <li>Jantoven</li> <li>Lovenox</li> <li>Pradaxa</li> <li>Savaysa</li> <li>Warfarin</li> <li>Xarelto</li> </ul>	<p><b>Z79.02 Long term (current) use of antithrombotics/antiplatelets</b></p> <ul style="list-style-type: none"> <li>Aggrastat</li> <li>Angiomax</li> <li>Argatroban</li> <li>Brilinta</li> <li>Clopidogrel bisulfate</li> <li>Effient</li> <li>Eptifibatide</li> <li>Persantine</li> <li>Plavix</li> <li>Prasugrel</li> </ul>	<p><b>Z79.1 Long term (current) use of non-steroidal anti-inflammatory (NSAID)</b></p> <ul style="list-style-type: none"> <li>Advil</li> <li>Aleve</li> <li>Anaprox DS</li> <li>Arthrotec</li> <li>Caldolor</li> <li>Cambia</li> <li>Celebrex</li> <li>Daypro</li> <li>Duexis</li> <li>Feldene</li> <li>Ibuprofen</li> <li>Indocin</li> <li>Mobic</li> <li>Motrin IB</li> <li>Nabumetone</li> <li>Nalfon</li> <li>Naprelan</li> <li>Naprosyn</li> <li>NeoProfen</li> <li>Ponstel</li> <li>Voltaren Arthritis Pain</li> <li>Zipor</li> </ul>	<p><b>Z79.2 Long term (current) use of antibiotics</b></p> <ul style="list-style-type: none"> <li>Altabax</li> <li>Amikacin</li> <li>Amoxicillin</li> <li>Ampicillin</li> <li>Augmentin</li> <li>Avelox</li> <li>Azactam</li> <li>Azithromycin</li> <li>Bactrim</li> <li>Biaxin XL</li> <li>Cefazolin sodium</li> <li>Cefepime hydrochloride</li> <li>Cefprozil</li> <li>Ceftriaxone</li> <li>Cefuroxime sodium</li> <li>Centany</li> <li>Cephalexin</li> <li>Cipro</li> <li>Ciprofloxacin</li> <li>Clarithromycin</li> </ul>	<p><b>Z79.3 Long term (current) use of hormonal contraceptives</b></p> <ul style="list-style-type: none"> <li>Aranelle</li> <li>Aviane-28</li> <li>Beyaz</li> <li>Briellyn</li> <li>Camila</li> <li>Daysee</li> <li>Depo-Provera</li> <li>Depo-SubQ Provera</li> <li>Desogestrel/ethinyl estradiol</li> <li>Enpresse-28</li> <li>Femhrt</li> <li>Gildagia</li> <li>Gildess 24 FE</li> <li>Junel</li> <li>Levonest</li> <li>Liletta</li> <li>Lo Loestrin Fe</li> <li>Loryna</li> <li>LoSeasonique</li> <li>Low-Ogestrel-28</li> <li>Mirena</li> <li>Mono-Linyah</li> <li>Natazia</li> <li>Nexplanon</li> <li>NuvaRing</li> <li>Plan B One-Step</li> <li>Provera</li> <li>Seasonale</li> <li>Seasonique</li> <li>Skyla</li> <li>Sprintec</li> <li>Tri-Lo-Estarylla</li> <li>Tri-Lo-Sprintec</li> <li>Tri-Sprintec</li> <li>Velivet</li> <li>Xulane</li> <li>Yasmin</li> <li>Yaz</li> <li>Zovia 1/50E-28</li> </ul>	<p><b>Z79.4 Long term (current) use of insulin</b></p> <ul style="list-style-type: none"> <li>Admelog</li> <li>Apidra</li> <li>Basaglar</li> <li>Fiasp</li> <li>Humalog</li> <li>Humulin R</li> <li>Lantus</li> <li>Levemir</li> <li>Novolin</li> <li>Novolog</li> <li>Soliqua</li> <li>Toujeo Solostar</li> <li>Tresiba</li> <li>Xultophy 100/3.6</li> </ul>	<p><b>Z79.51 Long term (current) use of inhaled steroids</b></p> <ul style="list-style-type: none"> <li>Advair</li> <li>AirDuo RespiClick</li> <li>Alvesco</li> <li>Arnuity Ellipta</li> <li>Asmanex</li> <li>Breo Ellipta</li> <li>Dulera</li> <li>Flovent HFA</li> <li>Pulmicort</li> <li>Qvar Redihaler</li> <li>Symbicort</li> <li>Trelegy Ellipta</li> </ul>	<p><b>Z79.52 Long term (current) use of systemic steroids</b></p> <ul style="list-style-type: none"> <li>Agamree</li> <li>Celestone Soluspan</li> <li>Colocort</li> <li>Cortef</li> <li>Cortenema</li> <li>Cortifoam</li> <li>Depo-Medrol</li> <li>Dexamethasone Intensol</li> <li>Entocort EC</li> <li>Hydrocortisone</li> <li>Kenalog-10</li> <li>Kenalog-40</li> <li>Locoid</li> <li>Medrol</li> <li>Methylprednisolone</li> <li>Orapred ODT</li> <li>PediaPred</li> <li>Prednisolone</li> <li>Prednisone</li> <li>Ravos</li> <li>Solu-Cortef</li> <li>Solu-Medrol</li> </ul>	<p><b>Z79.61 Long term (current) use of immunomodulator</b></p> <ul style="list-style-type: none"> <li>Otezla</li> <li>Pomalyst</li> <li>Revlimid</li> <li>Thalomid</li> </ul>	<p><b>Z79.620 Long term (current) use of immunosuppressive biologic</b></p> <ul style="list-style-type: none"> <li>Actemra</li> <li>Aimovig</li> <li>Beyfortus</li> <li>Briumvi</li> <li>Columvi</li> <li>Cosentyx</li> <li>Cyltezo</li> <li>Dupixent</li> <li>Elrexfio</li> <li>Enbrel</li> <li>Entyvio</li> <li>Epkinly</li> <li>Humira</li> <li>Hyrimoz</li> <li>Imjudo</li> <li>Keytruda</li> <li>Loqtorzi</li> <li>Monoclonal antibodies</li> <li>Omvo</li> <li>Prolia</li> <li>Remicade</li> <li>Rituxan</li> <li>Simulect</li> <li>Skyrizi</li> <li>Stelara</li> <li>Taltz</li> <li>Tremfya</li> <li>Xgeva</li> </ul>	<p><b>Z79.621 Long term (current) use of calcineurin inhibitor</b></p> <ul style="list-style-type: none"> <li>Astagraf XL</li> <li>Cyclosporine</li> <li>Envarsus XR</li> <li>Gengraf</li> <li>Lupkynis</li> <li>Neoral</li> <li>Prograf</li> <li>Protopic</li> <li>Restasis</li> <li>Sandimmune</li> <li>Tacrolimus</li> </ul>
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### Internal Carotid and Vertebral Arteries and Branches



### External Carotid Artery and Branches

