

# ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

## Agenda

### Diagnosis Portion

#### Introductions and announcements

Donna Pickett, M.P.H., R.H.I.A.  
Co-chair  
C&M Committee

Dysmetabolic Syndrome X .....	pg. 2-3
Richard Dickey, M.D. American Association of Clinical Endocrinologists	
SLAP lesions .....	pg. 4
Supraglottitis .....	pg. 5
Stress fracture .....	pg. 6
Periventricular leukomalacia (PVL) .....	pg. 7
Laura Powers, M.D. American Academy of Neurology	
Mammographic microcalcification .....	pg. 8
Premature menopause .....	pg. 9
Burn from tanning bed .....	pg. 10-11
Posttraumatic wound infections versus complicated open wound .....	pg. 12
Head injuries .....	pg. 13
“Fall” versus “Strike against” external cause .....	pg. 14-15
Addenda .....	pg. 16-18

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Dysmetabolic Syndrome X

Among endocrinologists, the term Syndrome X has been widely understood to pertain to a cluster of metabolic disorders that are related to a state of insulin resistance without elevated blood sugar levels, in turn, often related to obesity. Syndrome X is a major risk factor for coronary artery disease and hypertension. This syndrome is not the same as Cardiac Syndrome X indexed in the classification to angina.

The American Association of Clinical Endocrinologists (AACE) has requested a unique code for Dysmetabolic Syndrome X. The request calls for an extensive expansion at the 5<sup>th</sup> digit level for the various manifestations of Syndrome X. The proposal below has three options, a single code for syndrome X with a use additional code note to identify the manifestations, an expanded set of codes similar to the AACE proposal, and a single code for hyperinsulinemia under which syndrome X would be included.

### TABULAR MODIFICATIONS

Option 1:

277 Other and unspecified disorders of metabolism

New code 277.7 Dysmetabolic Syndrome X

Add Use additional code for associated manifestation, such as:  
cardiovascular disease (414.00-414.05)  
obesity (278.00-278.01)

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

### Option 2:

277 Other and unspecified disorders of metabolism

New sub-  
category

277.7 Dysmetabolic Syndrome X  
Use additional code to identify manifestations

New code  
New code  
New code  
New code  
New code  
New code  
New code  
New code  
New code

277.71 with obesity  
277.72 with circulatory manifestations  
277.73 with insulin response disorder  
277.74 with dyslipidemia  
277.75 with hypertension  
277.76 with hypercoagulation disorders  
277.77 with ovarian dysfunction  
277.78 with integumentary disorders  
277.79 other

### Option 3:

251 Other disorders of pancreatic internal secretion

New code

251.6 Hyperinsulinemia  
Metabolic syndrome X

Add

Excludes: hypoglycemia (251.2)

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: SLAP lesions

SLAP lesions (Superior Labrum Anterior and Posterior) refer to detachment lesions of the superior aspect of the glenoid labrum, which serves as the insertion of the long head of the biceps. It is a relatively common injury in the throwing arm of athletes but is most common in patients who have fallen or who have received a blow on the shoulder. The most common symptom is pain on overhead movement of the arm. It was first identified on arthroscopic examination. It is now identifiable on MRI and CT.

A unique code for SLAP lesions is being proposed.

### TABULAR MODIFICATION

	840	Sprain and strains of shoulder and upper arm
New code	840.7	Superior glenoid labrum lesions (SLAP)

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Supraglottitis

Supraglottitis (also called epiglottitis) is an acute life-threatening upper respiratory infection, primarily in children, but affecting all ages. It is an infection of the supraglottic structures, the lingual tonsillar area, epiglottic folds, false vocal cords, and the epiglottis. Supraglottitis may be rapidly fatal in all ages. The fatal event is thought to result from an edematous epiglottis obstructing the airway.

Because the infection covers all of the supraglottic structures the term supraglottitis is nonspecific. Within category 464, Acute laryngitis and tracheitis, the larynx, the trachea, and the epiglottis have unique subcategories. With the exception of acute laryngitis, with and without obstruction is identified at the code level. The diagnosis supraglottitis may represent any of the codes within 464. It is being proposed that a unique code for supraglottitis be created for cases when the term is used and the specified site of infection is not identified. An expansion of acute laryngitis is also being proposed for with and without obstruction.

### TABULAR MODIFICATION

464 Acute laryngitis and tracheitis

464.0 Acute laryngitis

New code 464.00 without mention of obstruction

New code 464.01 with obstruction

New sub-  
category 464.5 Supraglottitis, unspecified

New code 464.50 without mention of obstruction

New code 464.51 with obstruction

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Stress fracture

Bones may undergo a “fatigue” or stress fracture from repetitive forces, applied before the bone and its supporting tissues have had adequate time to accommodate to such force. X-rays are typically negative early in the course. Days or weeks may pass before the fracture line is visible on x-ray. A presumptive diagnosis is necessary to begin prompt treatment.

The ICD-9-CM groups both pathologic and stress fractures to the same category. The pathologic fracture is due to a physiologic condition, such as a neoplasm, damaging the bone. The stress fracture is a traumatic fracture that occurs due to repeated stress on the bone, not an acute traumatic injury.

It is being proposed that stress fractures be separated from pathologic fractures. The term stress reaction is being included as a synonymous term for stress fracture.

### TABULAR MODIFICATION

	733	Other disorders of bone and cartilage
	733.1	Pathologic fracture
Add		Excludes: stress fracture (733.93-733.95)
	733.9	Other and unspecified disorders of bone and cartilage
New code	733.93	Stress fracture of tibia or fibula Stress reaction of tibia or fibula
New code	733.94	Stress fracture of the metatarsals Stress reaction of metatarsals
New code	733.95	Stress fracture of other bone Stress reaction of other bone

Topic: Periventricular leukomalacia (PVL)

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Periventricular leukomalacia (PVL) refers to necrosis of white matter adjacent to lateral ventricles with formation of cysts. This is occurring with increasing frequency in very low birth weight infants. There are no specific neurological signs of PVL in the neonatal period but it can sometimes be detected by ultrasonography. It is a major risk factor for cerebral palsy, and other neurological disorders. The cause of PVL is still obscure but recent studies have associated it with intrauterine growth retardation, intrauterine infections, and pregnancies involving monozygotic twins. PVL is frequently associated with severe intraventricular hemorrhage (IVH) but it is not necessarily the cause of, nor the routine result of IVH.

Currently there is no specific code assigned to periventricular leukomalacia. With the advances in neonatology increasing survival of extremely low birth weight infants a request was made to establish a code for this condition. It is also being proposed that code 772.1, Intraventricular hemorrhage, be expanded to identify the grade of the hemorrhage. The severity of the grade is a strong determinant of the outcome for the baby.

### TABULAR MODIFICATION

	772.1	Intraventricular hemorrhage
New code	772.10	Unspecified grade
New code	772.11	Grade I Bleeding into germinal matrix
New code	772.12	Grade II Bleeding into ventricle
New code	772.13	Grade III Bleeding with enlargement of ventricle
New code	772.14	Grade IV Bleeding into cerebral cortex
	779	Other and ill-defined conditions originating in the perinatal period
New code	779.7	Periventricular leukomalacia
Add		Use additional code for any associated intraventricular hemorrhage (772.1)
Topic:		Mammographic microcalcification

Microcalcification is a common abnormal finding on a mammogram. It invariably leads to a

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

biopsy and most often a malignancy is then verified. This finding differs from the appearance of a lump. A unique code to distinguish this specific mamographic finding has been requested.

### TABULAR MODIFICATION

	793	Nonspecific abnormal findings on radiological and other examinations of body structure
	793.8	Breast
Delete		<del>abnormal mammogram</del>
New code	793.80	Abnormal mammogram, unspecified
New code	793.81	Mammographic microcalcification
New code	793.89	Other abnormal findings on radiological examination of breast



## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Premature menopause

For October 1, 2000, a new code for natural (age-related) menopause status will go into effect. Postsurgical and premature menopause is excluded from this new code since these other conditions are included in the 256, Ovarian dysfunction category in the endocrine chapter. Since these conditions are only inclusion terms it is being proposed that unique codes be created for them so that all forms of menopausal status can be uniquely identified.

### TABULAR MODIFICATION

	256	Ovarian dysfunction
	256.2	Postablative ovarian failure
Add		Code first states associated with artificial menopause (627.4)
Delete		<del>Ovarian failure:</del>
Delete		<del>iatrogenic</del>
Delete		<del>postirradiation</del>
Delete		<del>postsurgical</del>
New code	256.21	Postsurgical ovarian failure
New code	256.22	Postirradiation ovarian failure
New code	256.29	Other postablative ovarian failure
Add		Artificial menopause NOS
Add		Iatrogenic ovarian failure NOS
	256.3	Other ovarian failure
Delete		<del>Premature menopause NOS</del>
Delete		<del>Primary ovarian failure</del>
New code	256.31	Premature menopause
New code	256.39	Other ovarian failure
		Delayed menarche
		Ovarian hypofunction
		Primary ovarian failure NOS

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Burn from tanning bed

A case was submitted to NCHS involving second degree burns from a tanning bed. Sunburn and other ultraviolet radiation burns in the ICD-9-CM are under a dermatitis category. Sunburn and tanning bed burns can be equal in severity to second and third degree burns. Because of this potential severity it has been questioned whether such burns should be coded to the traumatic burn codes which indicate degree, instead of to the dermatitis codes.

In keeping with the intent of the ICD to separate sunburn from other burns, and to prevent a significant change in data and the coding guidelines, it is being proposed that new codes be created for second and third degree sunburns and that tanning beds be added to 692.82, Dermatitis due to other radiation, and to the appropriate external cause code.

### TABULAR MODIFICATION

	692	Contact dermatitis and other eczema
	692.7	Due to solar radiation
	692.71	Sunburn
Add		First degree sunburn
Add		Sunburn NOS
Add		Excludes: sunburn due to other ultraviolet radiation exposure (692.82)
New code	692.75	Sunburn of second degree
New code	692.76	Sunburn of third degree
	692.8	Due to other specified agents
	692.82	Dermatitis due to other radiation
Add		Tanning bed

# ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

E926 Exposure to radiation

Add E926.2 Visible and ultraviolet light sources  
Tanning bed

## INDEX MODIFICATION

Burn

Add sun- see Sunburn  
Add ultraviolet 692.82

Sunburn

Add due to other ultraviolet radiation 692.82

## EXTERNAL CAUSE INDEX

Burning...

Add Tanning bed E926.2

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Posttraumatic wound infections versus complicated open wound

A number of questions have come into NCHS concerning the distinction and correct use of the complicated open wound codes, that include with major infection and delayed healing, and code 958.3, Posttraumatic wound infection, not elsewhere classified. Since code 958.3 is an NEC code it has been suggested that an excludes note be added to exclude specific infections.

The complicated open wound codes include major infection. It is also being proposed that the word major be deleted from the instructional note and a use additional code to specify the type of infection be added to the open wounds section.

### TABULAR MODIFICATIONS

#### Open Wounds (870-897)

Revise	The description “complicated” used in the fourth-digit subdivisions includes those with mention of delayed healing, delayed treatment, foreign body or <del>major</del> infection.
Add	Use additional code to identify infection
958	Certain early complications of trauma
958.3	Posttraumatic wound infection, not elsewhere classified
Add	Excludes: infected open wounds- code to complicated open wound of site

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: Head injuries

A letter was received from the Department of Health of the State of Israel, an international user of the ICD-9-CM, requesting modification to the excludes note at the section Intracranial injury, excluding those with skull fracture (850-854) and to the wording of code titles at the 851-854.

The excludes note in question may cause confusion. Code 850 is not to be used in conjunction with a code from the skull fracture series. The current wording of the note seems to indicate that certain 5<sup>th</sup> digits are unacceptable when, in fact, the note is referring to 4<sup>th</sup> digits. Also, the code titles in the intracranial injury section use the term “with open intracranial wound” and “without mention of open intracranial wound”. As these codes exclude with skull fracture, and it would seem unlikely to have an open intracranial wound without a skull fracture, it has been suggested that the code titles be changed to with or without open head wound.

### TABULAR MODIFICATION

#### INTRACRANIAL INJURY, EXCLUDING THOSE WITH SKULL FRACTURE (850-854)

Revise	Excludes: intracranial injury with skull fracture (800-801 and 803-804, <u>except 4<sup>th</sup> digit .0 and .5</u> )
Revise	skull fracture alone (800-801 and 803-804 <u>with 4<sup>th</sup> digits .0 and .5</u> )
	851 Cerebral laceration and contusion
Revise	851.0 Cortex (cerebral) contusion without mention of open <u>intracranial head</u> wound
Revise	851.1 Cortex (cerebral) contusion with mention of open <u>intracranial head</u> wound

This same revision would apply to all code titles in the 851-854 range.

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Topic: “Fall” versus “Strike against” external cause

The coding of the external cause for falls and striking against is complicated by the instructional notes, the inclusion terms under the respective categories and the defaults assigned. Currently, any striking against incident that results in a fall defaults to unspecified fall. Category E917, Striking against or struck accidentally by objects or persons, excludes falls from bumping into or against object.

The injury community has requested that the external cause codes be modified to allow for the coding of both a fall and a strike against within the same code. It has also been requested that the striking against codes be expanded to include more types of objects.

These modifications should not impact on existing coding guidelines that instruct that the selection of the principle external cause code correspond to the principle injury diagnosis code.

### TABULAR MODIFICATION

E888 Other and unspecified fall		
New code Add	E888.0	Fall resulting in striking against sharp object Use additional external cause code to identify object (E920)
New code	E888.1	Fall resulting in striking against other object
New code	E888.8	Other fall
New code	E888.9	Unspecified fall Fall NOS

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Revise	E917	Striking against or struck accidentally by objects or persons Excludes: falls resulting in striking against object (E888.0, E888.1)
Revise	E917.0	In sports <u>without subsequent fall</u>
Revise	E917.1	Caused by a crowd, by collective fear or panic <u>without subsequent fall</u>
Revise	E917.2	In running water <u>without subsequent fall</u>
New code Add	E917.3	Furniture <u>without subsequent fall</u> Excludes: fall from furniture (E884.2, E884.4, E884.5)
New code Add Add Add	E917.4	Other stationary object <u>without subsequent fall</u> Lamp-post Fence Bath tub
New code	E917.5	In sports <u>with subsequent fall</u>
New code	E917.6	Caused by a crowd, by collective fear or panic <u>with subsequent fall</u>
New code Add	E917.7	Furniture <u>with subsequent fall</u> Excludes: fall from furniture (E884.2, E884.4, E884.5)
New code Add Add Add	E917.8	Other stationary object <u>with subsequent fall</u> Lamp post Fence Bath tub
Revise	E917.9	Other <u>with and without subsequent fall</u>
Revise	E920	Accidents caused by cutting and piercing instruments or objects Includes: <del>fall on object...</del>

Addenda

**ICD-9-CM Coordination and Maintenance Committee Meeting**

May 11, 2000

Tabular

739 Nonallopathic lesions, not elsewhere classified

Add Includes: chiropractic subluxation



## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

Addenda

Index

Add	Chiropractic
Add	subluxation 739.9
	Diabetes...
	retinal...
Revise	edema 250.5 [362.01]
	Hernia
Revise	testis (nontraumatic) 550.9
Add	meaning
Add	scrotal hernia 550.9
Add	symptomatic late syphilis 095.8
Add	Joubert Syndrome 759.89
	Subluxation...
Add	chiropractic 739.9

## ICD-9-CM Coordination and Maintenance Committee Meeting

May 11, 2000

### Table of Drugs and Chemicals

Add	Flunitrazepam	969.4	E853.2	E939.4	E950.3	E962.0	E980.2
Add	Gamma Hydroxy Butyrate (GHB)	968.4	E855.1	E938.4	E950.4	E962.0	E980.4
Add	Palivizumab	979.9	E858.8	E949.6	E950.4	E962.0	E980.4
Add	Rohypnol	969.4	E853.2	E939.4	E950.3	E962.0	E980.2
Add	Synagis	979.9	E858.8	E949.6	E950.4	E962.0	E980.4
Add	Vaccine Respiratory Syncytial Virus	979.9	E858.8	E949.6	E950.4	E962.0	E980.4