

2b Errata for Year 2004

Page#	Content to be Corrected	Corrections
Cover sheet	Changed title on binder insert, cover sheet and inside front page: “Instructions for Classifying Underlying Causes of Death, 2004”	“Instructions for Classifying Multiple Causes of Death, 2004”
4	Major Revisions, Number 10, corrected spelling of "Relating"	Corrected page attached
48	First sentence, removed "s" from conditions	Corrected page attached
50	First sentence, changed the word "that" to "than"	Corrected page attached
52	Last sentence, changed the word "that" to "than"	Corrected page attached
60	6. a. Age 28 days or over, deleted code K56.	Corrected page attached
144	Corrected spelling of the word "by" in the last sentence.	Corrected page attached
190	Second sentence in 1 st example explanation reworded.	Corrected page attached
239	c. classify the victim as a pedestrian, span of codes changed to (V01-V09)	Corrected page attached
240	b. (1). Example explanation, changed code to (V58.-)	Corrected page attached
241	Added Place 4 in first example and "A" for MOD Code in 2 nd example.	Corrected page attached
317	Corrected spelling of "ampersand" in sentence above 2 nd example.	Corrected page attached

INSTRUCTIONS FOR CLASSIFYING MULTIPLE CAUSES OF DEATH, 2004

SECTION I

Introduction

The multiple cause-of-death codes are used as inputs to the ACME program (Automated Classification of Medical Entities) developed by NCHS to automatically select the underlying cause of death, and the TRANSAX program (Translation of Axes) used to produce multiple cause-of-death statistics, beginning with deaths occurring in 1968. As inputs, the computer programs require codes for each condition reported on the death certificate, usually in the order in which the information is recorded.

The outputs of the ACME program are the traditional underlying cause-of-death codes selected according to the selection and modification rules of the Classification, the same cause that would be selected using manual underlying cause-of-death coding instructions specified in Instruction Manual Part 2a. Thus, a single cause is associated with each decedent.

Using the same input codes, the TRANSAX program generates two sets of outputs: “entity-axis” codes that reflect the placement of each condition on the certificate for each decedent; and “record-axis” codes that, where appropriate, link two or more diagnostic conditions to form composite codes that are classifiable to a single code, according to the provisions of the Classification. Record axis codes are preferred for multiple cause tabulation to better convey the intent of the certifier, and to eliminate redundant cause-of-death information (see Instruction Manual Part 2f).

INSTRUCTIONS FOR CLASSIFYING MULTIPLE CAUSES OF DEATH, 2004

SECTION I

Introduction

Major Revisions from Previous Manuals

1. All information from the 2003 erratas has been incorporated into this edition.
2. Corrections have been made to clarify instructions, spelling, and format throughout the manual. These changes are not specifically noted.
3. Section II, Part A, Created codes, deleted created code for Dementia NOS.
4. Section II, Part A, Created codes, added created codes for types of Cardiomyopathy qualified as familial, idiopathic, and primary.
5. Section II, Part A, Created codes, added created code for Chronic pneumonia and interstitial pneumonia, not elsewhere classified.
6. Section II, Part B, General Coding Concept, added “hypoxemic” to list of adjectival modifiers that indicate condition should be considered a one-term entity.
7. Section II, Part B, General Coding Concept, added instruction with terms to be interpreted as Alzheimer’s dementia.
8. Section II, Part C, Format, revised some examples to be more typical of how a certifier would actually report them.
9. Section II, Part G, Conditions Specified as “Rule Out,” “Ruled Out,” “R/O”, added “postmortem” to list.
10. Section II, Part O, Relating and Modifying Conditions, instructions are rearranged.
11. Section III, Part A, Intent of Certifier, added a table of instructions for coding Laennec’s cirrhosis NOS as nonalcoholic Laennec’s cirrhosis.
12. Section III, Part A, Intent of Certifier, revised instructions for coding Starvation NOS as Malnutrition.
13. Section IV, Part A, Neoplasms, added an instruction to code malignant neoplasms of lymphoid, hematopoietic, and related tissue to morphological type, not site.
14. Section IV, Part E, Conditions of Early Infancy, added instructions for coding endocrine and metabolic disorders on a newborn’s record.
15. Section IV, Part G, Ill-defined and Unknown Causes, Unknown Cause, deleted “unspecified” from list.

Part F

Coding Entries Such as "Same," "Ditto (") "As Above"

F. Coding entries such as "same," "ditto (")," "as above"

When the certifier enters "same," "ditto mark (")," "as above," etc., in a "due to" position to a specified condition, do not enter a code for that line.

I	(a) Coronary occlusion	I219
	(b) Same	
	(c) Hypertension	I10

Do not enter a code on I(b) for the entry "same."

I	(a) Pneumonia	J189
	(b) "	
	(c) Emphysema	J439

Do not enter a code on I(b) for the " ditto mark (")." "

Part G

Conditions Qualified by “Postmortem,” “Ruled Out” “R/O”

G. Condition qualified by “postmortem,” “rule out,” “ruled out,” “r/o”

When a condition is qualified by “postmortem,” “rule out,” “ruled out,” or “r/o,” etc., **do not** enter a code for the condition.

H. Nonindexed and illegible entries1. Terms that are not indexed

When a term is reported that does not appear in the ICD-10 Index, refer the term to the supervisor.

2. Illegible entries

When an illegible entry is the **only** entry on the certificate, code R99. When an illegible entry is reported with other classifiable entries, disregard the illegible entry and code the remaining entries as indexed.

Part I

Coding One-Character Reject Codes

I. Coding one-character reject codes

When a death record qualifies for more than one reject code, code only one in this order: 1, 2, 3, 4, 5, 9.

1. Reject code 1-5-Inconsistent duration

When a duration of an entity in a “due to” position is shorter than that of an entity reported on a line above it and only **one** codable entity is reported on each of these lines, enter a reject code (1-5) in the appropriate data position. When more than one codable entity is reported on the same line, disregard the duration entered on that line. Use the appropriate reject code even though there are lines without a duration or with more than one codable entity between the entities with the inconsistent duration; in such cases, consider the inconsistency to be between the line immediately above and the line with the shorter duration.

If the inconsistent duration is between:

Lines	<u>Enter Reject Code</u>
I (a) and I (b).....	1
I (b) and I (c).....	2
I (c) and I (d).....	3
I (d) and I (e)	4
Inconsistent durations between more than two lines in Part I, or any situation where reject codes 1-4 would not be applicable	5

Do not enter a reject code if the only inconsistency is between the durations of malignant neoplasms classifiable to C00-C96.

I (a) ASHD	10 yrs.	I251
(b) Chronic nephritis and hypertension	5 yrs.	N039 I10
(c) Diabetes	5 yrs.	E149

Reject 2

Disregard the duration on I(b), since more than one codable entity is reported on this line. Only **one** codable entity is reported on lines I(a) and I(c) and the duration of the diabetes was shorter than that of ASHD. For the purposes of assigning the reject code, consider the duration on I(b) to be at least as long as the duration on I(a). Therefore, enter reject code 2 denoting an inconsistency between I(b) and I(c).

Part I

Coding One-Character Reject Codes

I (a)	ASHD	5 yrs	I251	
(b)	Chronic nephritis and hypertension	10 yrs	N039	I10
(c)	Diabetes	5 yrs	E149	

Do not enter reject code 2. The duration on I(b) is disregarded. The duration of diabetes on I(c) was not shorter than that of ASHD on I(a).

I (a)	Cardiac arrest		I469	
(b)	Congestive heart failure	1 week	I500	
(c)	Cancer of stomach	1 year	C169	
(d)	Metastatic cancer of lung	6 months	C780	

Do not use reject code 3 since the inconsistent duration is between malignant neoplasms.

I (a)	Basilar artery thrombosis	7 weeks	I630	
(b)	Renal failure	4 weeks	N19	
(c)	Pneumonia	1 week	J189	

Reject 5

Enter reject code 5 since the inconsistent durations are between more than 2 lines.

Age 1 yr.

I (a)	Congenital nephrosis	life	N049	
(b)				
(c)	Intestinal hemorrhage	1 day	K922	

Reject 5

Enter reject code 5 since reject codes 1-4 are not applicable.

Part I

Coding One-Character Reject Codes

2. Reject code 9 – More than four “due to” statements

When certifier’s entries or reformatting result in more than **four** statements of “due to,” continue the remaining codes horizontally on the **fifth** line and enter reject **code 9** in the appropriate position.

I (a)	Terminal pneumonia	J189
(b)	Congestive heart failure	I500
(c)	Myocardial infarction	I219
(d)	ASHD	I251
(e)	Generalized arteriosclerosis	I709 E039
(f)	Myxedema	

Reject 9

Enter the code for the myxedema reported on the fifth “due to” line, I(f), following the code for the condition reported on this line (generalized arteriosclerosis). Enter reject code 9 in the appropriate data position.

If there are more than four “due to” statements in Part I and there is no codable condition reported on one or more lines, consider the condition(s) on each subsequent “due to” line as though reported on the preceding line. Enter reject code 9 only if, after reformatting, there are codable conditions on more than five lines.

I (a)	Pneumonia	J182
(b)	Bedfast	G839
(c)	Paralysis following CVA	I64
(d)	Hypertension due to	I10
(e)	adrenal adenoma	D350

Do not enter reject code 9. Since bedfast is not a codable condition, enter the code for paralysis on I(b), the code for CVA on I(c), etc. As a result of the rearrangement of the conditions, there are codable conditions on only five lines.

When a death record qualifies for more than one reject, prefer a reject code for inconsistent durations over reject code 9.

5. Congenital syphilis

Regard syphilis and conditions that are qualified as syphilitic as congenital and code to the appropriate congenital syphilis category if the decedent was less than two years of age.

Male, 16 mos

I (a)	Syphilitic pneumonia	A500
(b)		
(c)		

Code congenital syphilitic pneumonia since age is less than 2 years.

Part L

Effects of Age of Decedent on Classification

6. Age limitation

Some categories in ICD-10 are limited by provisions of the Classification to certain ages. Code the categories listed below only if the age at the time of death was as follows:

a. Age 28 days or over

A32	E14	J13	R00
A35	E162	J14	R01
A40	E561	J15	R048
A41	E63	J16	R090
A56	E834	J18	R092
A74	E835	J43	R11
B30	F10	J80	R17
B370	F11	J849	R230
B371	F12	J96	R233
B372	F13	J981	R290
B373	F14	J982	R40
B374	F15	J984	R50
B375	F16	J988	R53
B376	F17	K27	R56
B377	F18	K631	R58
B378	F19	K65	R60
B379	G473	K92	R633
D65	G700	L01	R680
D751	I48	L10	R681
E05	I49	L50	
E10	I50	L530	
E11	I61	M34	
E12	I62	N390	
E13	J12	N61	

Male, age 25 days

I (a) Urinary tract infection P393
(b)

Code urinary tract infection, newborn since age is less than 28 days.

-
- C43** Malignant melanoma of skin
- Melanosarcoma
Melanoblastoma
Any neoplasm cross-referenced as “See also Melanoma”
- I (a) Melanoma of arm C436
- Based on the note in the Index, code melanoma of arm as indexed under **Melanoma, site classification**.
- I (a) Melanoma of stomach C169
- Melanoma of stomach is not found under Melanoma in the Index. The term should be coded by site under Neoplasm, malignant.
- C44** Other malignant neoplasm of skin
- Basal cell carcinoma
Sebaceous cell carcinoma
Any neoplasm cross-referenced as “See also Neoplasm skin, malignant”
- I (a) Sebaceous cell carcinoma nose C443
- Code the morphological type “Sebaceous cell carcinoma” to Neoplasm, malignant, skin of the specified site as cross-referenced.
- C49** Malignant neoplasm of other connective and soft tissue
- Liposarcoma
Rhabdomyosarcoma
Any neoplasm cross-referenced as “See also Neoplasm, connective tissue, malignant”
- I (a) Rhabdomyosarcoma abdomen C494
- Code the morphological type “Rhabdomyosarcoma” to Neoplasm, malignant, connective tissue of the specified site as cross-referenced.
- I (a) Sarcoma pancreas C259
- Code the morphological type “Sarcoma” to Neoplasm, malignant, connective tissue of the specified site as cross-referenced. Refer to the “Note” under Neoplasm, malignant, connective tissue concerning sites that do not appear in this list.

C80 Malignant neoplasm without specification of site

Cancer

Carcinoma

Malignancy

Malignant tumor or neoplasm

Any neoplasm cross-referenced as “See also Neoplasm, malignant

I (a) Carcinoma of stomach C169

Code the morphological type “Carcinoma” to Neoplasm, malignant, stomach as indexed.

I (a) Cancer prostate C61

Code the morphological type “Cancer” to Neoplasm, malignant, prostate as indexed.

I (a) Adenosarcoma breast C509

Code the morphological type “Adenosarcoma” to Neoplasm, malignant, of the specified site as cross-referenced.

C81-C96 Malignant neoplasms of lymphoid, hematopoietic, and related tissue

Leukemia

Lymphoma

I (a) Lymphoma of brain C859

Code Lymphoma NOS, C859, as indexed. Neoplasms in C81-C96 are coded by morphological type and not by site.

SECTION IV

Classification of Certain ICD Categories

Part D

Congenital Conditions

Male, 3 months	
I (a) Cerebral anoxia	G931
(b) Hydrocephalus	Q039
II Meningomyelocele	Q059

Code the hydrocephalus NOS to Q039 since the meningomyelocele is classified as congenital.

Part E

Conditions of Early Infancy (P000-P969)

E. Conditions of early infancy (P000-P969)

1. Assign newborn codes for conditions classifiable to A40-A41, I48-I50, J12-J189, J849, J984, J9840, J988, and K65.- whether or not indexed as newborn. Refer to Volume I for specific code assignment.

Female, 20 days

- | | |
|--------------------------------|------|
| I (a) Ventricular fibrillation | P291 |
| (b) Staphylococcal pneumonia | P232 |

Condition on I(a) must be coded to a newborn code even though the Index does not provide a newborn code. Refer to Volume 1, Exclusion note under the three character category for adult code, I49. Code neonatal cardiac dysrhythmias to P291. Condition on I(b) is also coded to the newborn code. Refer to Volume 1, Chapter XVI to determine correct code assignment.

2. When reported on certificate of infant, code the following entries as indicated:

Birth weight of:	2 pounds (999 gms) or under	P070
	Over 2 pounds (1000 gms) but not more than	
	5 ½ pounds (2499 gms).....	P071
	10 pounds (4500 gms) or more	P080

Gestation of:	Less than 28 weeks	P072
	28 weeks but less than 37 weeks.....	P073
	42 or more completed weeks	P082

Premature labor or delivery NOS.....	P073
--------------------------------------	------

Female, 3 hours

- | | |
|-------------------------------------|------|
| I (a) Respiratory distress syndrome | P220 |
| (b) Prematurity | P073 |
| II 26 weeks gestation | P072 |

Code gestation, less than 28 weeks to P072.

Male, 8 hours

- | | |
|---------------------------|-----------|
| I (a) Respiratory failure | P285 |
| (b) Prematurity, 23 weeks | P073 P072 |

Code I(b) as two separate conditions. Code prematurity as indexed P073 and code P072 for “23 weeks.” The 23 weeks is an implied length of gestation.

SECTION V

**Effects of External Cause of Injury and
External Causes of Injury and Poisoning
Transportation Accidents**

Part J

- b. In classifying motor vehicle traffic accidents, a victim of less than 14 years of age is assumed to be a passenger provided there is evidence the decedent was an occupant of the motor vehicle. A statement such as “thrown from car,” “fall from,” “struck head on dashboard,” “drowning,” or “carbon monoxide poisoning” is sufficient.

Female, 4 years old

- I (a) Fractured skull S029
- (b) Struck head on windshield when car &V476
- (c) struck tree fell across road

Code to car occupant injured in collision with fixed or stationary object, passenger (V476).

- c. When transport accident descriptions do not specify the victim as being a vehicle occupant and the victim is described as:

pedestrian	versus (vs)	any vehicle (car, truck, etc.)
any vehicle (car, truck, etc.)	versus (vs)	pedestrian

classify the victim as a pedestrian (V01-V09).

4. Coding categories V01-V89

- a. When drowning occurs as a result of a motor vehicle accident NOS, code as noncollision transport accident. The assumption is the motor vehicle ran off the highway into a body of water. If drowning results from a specified type of motor vehicle accident, code the appropriate E-code for the specified type of motor vehicle accident.

I (a) Drowning T751 &V589

MOD II

A

Accident	Street	Truck accident
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Refer to Table of land transports. Code to occupant of truck injured in noncollision transport accident, unspecified.

I (a) Drowning T751 &V435

MOD II

A

Accident	Street	Driver-2 car collision
----------	--------	------------------------

Refer to Table of land transports. Code to occupant of car injured in collision with car, driver.

SECTION V

**Effects of External Cause of Injury and
External Causes of Injury and Poisoning
Transportation Accidents**

Part J

b. When falls from transport vehicles occur, apply the following instructions:

- (1) Consider a transport vehicle to be in motion unless there is clear indication the vehicle was not in transit. Refer to Table of land transport accidents, specified type of vehicle reported, noncollision. Refer to Volume 1 for appropriate fourth character.

	I (a) Multiple injuries	T07
<u>MOD</u>	II	&V583
A	Accident	Home
		Fell from truck in driveway

Refer to Table of land transports under Victim and mode of transport. Select occupant of pickup truck, noncollision transport accident, (V58.-). Refer to Volume 1 for fourth character and select 3, unspecified occupant of pickup truck, nontraffic accident.

- (2) Consider a transport vehicle to be stationary when statements such as these are reported :
- (a) When alighting, boarding, entering, leaving, exiting, getting in or out of vehicle
- (b) Stated as stationary, parked, not in transit, not in motion

	I (a) Head injury	S099
<u>MOD</u>	II	&V784
A	Accident	Street
		Fell alighting from bus

Refer to Table of land transports accidents under Victim and mode of transport. Select occupant of bus, noncollision transport accident, (V78.-). Refer to Volume 1 for fourth character and select 4, person injured while boarding or alighting.

	I (a) Head injury	S099
<u>MOD</u>	II	&V892
A	Accident	Street
		Fell on curb as he was exiting his daughter's vehicle

Refer to Table of land transport accidents under Victim and mode of transport. Select occupant of motor vehicle (traffic), noncollision transport accident (V892).

SECTION V

Effects of External Cause of Injury and
External Causes of Injury and Poisoning
Transportation Accidents

Part J

Place I (a) Head injury S099
4

MOD II &W17
A

Accident Street Fell from parked car

Code as indexed under Fall, from, vehicle, stationary (W17).

5. Additional examples

I (a) Fractures of ribs S223
(b)
(c)

MOD II &V234
A

A Accident Driver of motorcycle that collided with taxicab

Code to motorcycle rider injured in collision with car, pick-up truck or van, driver (V234).

I (a) Third degree burns T303
(b) Auto accident - car overturned &V489
(c)

Code to car occupant injured in noncollision transport accident, unspecified (V489).

I (a) Fracture of ribs S223
(b)
(c)

MOD II &V892
A

Accident Street Vehicle Accident

Code to person injured in unspecified motor vehicle accident, traffic (V892).
Code as motor vehicle accident since the accident occurred on the street.

SECTION V

**Effects of External Cause of Injury and
External Causes of Injury and Poisoning
Transportation Accidents**

Part J

6. Occupant of special all-terrain or other motor vehicle designed primarily for off-road use, injured in transport accident (V86)

This category includes accidents involving an occupant of any off-road vehicle. The fourth character indicates whether the decedent was injured in a nontraffic or traffic accident. Unless stated to the contrary, these accidents are assumed to be nontraffic.

- | | |
|--|-------|
| I (a) Multiple injuries | T07 |
| (b) Driver of snowmobile that collided with auto | &V860 |

Code to driver of all-terrain or other off-road motor vehicle injured in traffic accident since the collision occurred with an automobile.

- | | |
|------------------------|-------|
| I (a) Injuries of head | S099 |
| (b) Fracture both legs | T025 |
| (c) Driver of ATV | &V865 |

Code to driver of all-terrain or other off-road motor vehicle injured in nontraffic accident.

- | | |
|----------------------------|-------|
| I (a) Head injuries | S099 |
| (b) Overturning snowmobile | &V869 |

Code to unspecified occupant of all-terrain or other off-road motor vehicle injured in nontraffic accident.

- | | |
|----------------------|-------|
| I (a) Fracture skull | S029 |
| (b) ATV accident | &V869 |

Code to unspecified occupant of all-terrain or other off-road motor vehicle injured in nontraffic accident (V869)

Appendix H

Additional Drug Examples

“Surgery” with the condition which necessitated the surgery not stated and two or more conditions for which surgery could have been performed are reported, code:

the complication to Chapters I-XIX and the surgery to appropriate external cause code (Y83-) preceded by an ampersand, if required. Ampersand the first mentioned condition for which the surgery could have been performed.

I (a) Wound dehiscence	T813
(b) Surgery	&Y839
II Cancer of lung, gastric ulcer	&C349 K259

Code I(a), wound dehiscence, T813, as the complication of the surgery and code I(b), surgery, Y839. Code Part II as indexed and precede the code for cancer of lung by an ampersand since it is the first mentioned condition for which the surgery could have been performed.

“Surgery” without indication of the condition which necessitated the surgery, code:

the complication to Chapters I-XIX, and the surgery to appropriate external cause code (Y83-) only. If the complication is classifiable to Chapters I-XVIII, precede the code for the complication with an ampersand.

I (a) Shock & hemorrhage	T811 T810
(b) Surgery	&Y839

Code I(a), shock and hemorrhage, T811 T810, both as complications of the surgery. Code I(b), surgery, Y839 and precede the code by an ampersand.

Surgical procedure such as **aneurysmectomy**, **cholelithotomy**, **hemorrhoidectomy** or **herniorrhaphy** which indicates the condition for which the surgery was performed, code:

the complication to Chapters I-XIX, the surgery to the appropriate external cause code (Y83-) preceded by an ampersand, if required, and code the condition implied by the surgery following the external cause code for the surgery. Place an ampersand preceding the code for the condition.

I (a) CHF	I978
(b) Cholelithotomy	Y838 &K802

Code I(a), CHF (congestive heart failure), as the complication of surgery. Code I(b), cholelithotomy, Y838 K802. Cholelithotomy indicates cholelithiasis (K802) was the condition for which surgery was performed. Precede K802 by an ampersand.

Appendix H

Additional Drug Examples

Surgical procedure that indicates an organ or site with one related condition for which the surgery could have been performed, code:

the complication to Chapters I-XIX, the surgery to the appropriate external cause code (Y83-) preceded by an ampersand, if required. Code the condition for which surgery could have been performed and precede with an ampersand.

I (a) MI	T818
(b) Gastrectomy	&Y836
II Bleeding gastric ulcer	&K254

Code I(a), MI, as the complication of the surgery. Code I(b), gastrectomy, Y836, as indexed and precede with an ampersand. Code Part II, bleeding gastric ulcer, as indexed and precede with an ampersand to indicate it was the condition for which surgery was performed.

Surgical procedure that indicates an organ or site without a related condition for which the surgery could have been performed, code:

the complication to Chapters I-XIX, the surgery to the appropriate external cause code (Y83-) preceded by an ampersand, if required, and code disease of the organ or site following the external cause code for the surgery. Place an ampersand preceding the code for the condition.

I (a) Cardiac arrest	I469
(b) Pneumonia	J958
(c) Pancreatectomy	Y836 &K869

Code I(a), cardiac arrest, as indexed. Code I(b), pneumonia, as the complication of the surgery. Code I(c), pancreatectomy, as indexed, and since the surgery indicates a disease of the pancreas, code this as the reason for surgery. Precede K869 by an ampersand.

Prophylactic or nontherapeutic surgery, code:

the complication to Chapters I-XIX, and the surgery to the appropriate external cause code (Y83-) preceded by an ampersand, if required. Do not assume or ampersand a disease condition. When the complication is classifiable to Chapters I-XVIII, precede the code for the complication with an ampersand.