



## CPT® Code 99201 Details

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### Code Symbols

**MIPS** : Merit Based Incentive Payment System

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### Code Descriptor

**Office or other outpatient visit** for the evaluation and management of a new patient, which requires these 3 key components:

- **A problem focused history;**
- **A problem focused examination;**
- **Straightforward medical decision making.**

Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs.

Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.

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### CPT® Advice

No data Available

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### Illustration

No data Available.

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### Fee Schedule

#### Medicare Physician Fee Schedules (MPFS)

Sources:	2019 National Physician Fee Schedule Relative Value File, GPCI19, NATIONAL PHYSICIAN FEE SCHEDULE RELATIVE VALUE FILE CALENDAR YEAR 2019, MCR-MUE-PractitionerServices
Publisher:	CMS
Effective:	July 01, 2019
Medicare Carrier/Locality:	ALASKA** 01-02102
Conversion Factor:	36.0391

**Note:** A value in "Medicare Fees" does not necessarily indicate payment. Scroll down to see Medicare's status on the code for coverage specifics. Medicare has assigned relative value units (RVUs) to codes the agency does not cover to allow payers that follow the resource based relative value system to have an agreed upon valuation rate.



**Code Status A**

**A** = Active Code. These codes are paid separately under the physician fee schedule, if covered. There will be RVUs for codes with this status. The presence of an "A" indicator does not mean that Medicare has made a national coverage determination regarding the service; carriers remain responsible for coverage decisions in the absence of a national Medicare policy.

Medicare Fees					
	National	Adjusted	26	TC	53
Facility	\$27.39	\$36.48	\$0.00	\$0.00	\$0.00
Non Facility	\$46.49	\$57.82	\$0.00	\$0.00	\$0.00

RVU - Nonfacility					
	National	Adjusted	26	TC	53
Work RVU:	0.48	0.72	0.00	0.00	0.00
PE RVU:	0.76	0.85	0.00	0.00	0.00
Malpractice RVU:	0.05	0.04	0.00	0.00	0.00
Total RVU:	1.29	1.60	0.00	0.00	0.00

RVU - Facility					
	National	Adjusted	26	TC	53
Work RVU:	0.48	0.72	0.00	0.00	0.00
PE RVU:	0.23	0.26	0.00	0.00	0.00
Malpractice RVU:	0.05	0.04	0.00	0.00	0.00
Total RVU:	0.76	1.01	0.00	0.00	0.00

Global & Other Info	
	Global Split
Preoperative %:	0
Intraoperative %:	0
Postoperative %:	0
Total RVU:	0
Global Period (days):	XXX
<b>XXX</b> = The global concept does not apply to the code.	
Radiology Diagnostic Tests :	99
<b>99</b> = Concept does not apply	
PC/TC Indicator :	0

**0** = Physician Service Codes--Identifies codes that describe physician services. Examples include visits, consultations, and surgical procedures. The concept of PC/TC does not apply since physician services cannot be split into professional and technical components. Modifiers 26 and TC cannot be used with these codes. The RVUS include values for physician work, practice expense and malpractice expense. There are some codes with no work RVUs.

Endoscopic Base Code :                      None

### Modifier Guidelines

	Modifier	Rules(Click on rules for Details)
MULT PROC	51	No multiple procedure payment adjustment
<p><b>51</b> = Multiple Procedures: When multiple procedures, other than E/M services, Physical Medicine and Rehabilitation services or provision of supplies (eg, vaccines), are performed at the same session by the same provider, the primary procedure or service may be reported as listed. The additional procedure(s) or service(s) may be identified by appending modifier 51 to the additional procedure or service code(s). Note: This modifier should not be appended to designated "add-on" codes</p> <p><b>0</b> = No payment adjustment rules for multiple procedures apply. If procedure is reported on the same day as another procedure, base the payment on the lower of (a) the actual charge, or (b) the fee schedule amount for the procedure.</p>		
BILAT SURG	50	No 150% bilateral payment boost
<p><b>50</b> = Bilateral Procedure: Unless otherwise identified in the listings, bilateral procedures that are performed at the same operative session, should be identified by adding modifier 50 to the appropriate five digit code.</p> <p><b>0</b> = 150% payment adjustment for bilateral procedures does not apply. If procedure is reported with modifier -50 or with modifiers RT and LT, base the payment for the two sides on the lower of: (a) the total actual charge for both sides or (b) 100% of the fee schedule amount for a single code.</p>		
ASST SURG	80	Assistant payment allowed when supported
<p><b>80</b> = Assistant Surgeon: Surgical assistant services may be identified by adding modifier 80 to the usual procedure number(s).</p> <p><b>0</b> = Payment restriction for assistants at surgery applies to this procedure unless supporting documentation is submitted to establish medical necessity.</p>		
CO-SURG	62	Co-surgeons not permitted
<p><b>62</b> = Two Surgeons: When two surgeons work together as primary surgeons performing distinct part(s) of a procedure, each surgeon should report his/her distinct operative work by adding modifier 62 to the procedure code and any associated add-on code(s) for that procedure as long as both surgeons continue to work together as primary surgeons. Each surgeon should report the co-surgery once using the same procedure code. If additional procedure(s) (including add-on procedure(s) are performed during the same surgical session, separate code(s) may also be reported with modifier 62 added. Note: If a co-surgeon acts as an assistant in the performance of additional procedure(s) during the same surgical session, those services may be reported using separate procedure code(s) with modifier 80 or modifier 82 added, as appropriate.</p> <p><b>0</b> = Co-surgeons not permitted for this procedure.</p>		



**TEAM SURG**                      **66**                      **Team surgeons not permitted**

**66** = Surgical Team: Under some circumstances, highly complex procedures (requiring the concomitant services of several physicians, often of different specialties, plus other highly skilled, specially trained personnel, various types of complex equipment) are carried out under the "surgical team" concept. Such circumstances may be identified by each participating physician with the addition of modifier 66 to the basic procedure number used for reporting services.

**0** = Team surgeons not permitted for this procedure.

**MINIMUM ASST SURG**                      **81**                      **Assistant payment allowed when supported.**

**81** = Minimum Assistant Surgeon: Minimum surgical assistant services are identified by adding modifier 81 to the usual procedure number.

**0** = Payment restriction for assistants at surgery applies to this procedure unless supporting documentation is submitted to establish medical necessity.

**ASST SURG (QUALIFIED RESI. NA)**                      **82**                      **Assistant payment allowed when supported.**

**82** = Assistant Surgeon (when qualified resident surgeon not available): The unavailability of a qualified resident surgeon is a prerequisite for use of modifier 82 appended to the usual procedure code number(s)

**0** = Payment restriction for assistants at surgery applies to this procedure unless supporting documentation is submitted to establish medical necessity.

**PHYSICIAN SUPERVISION**                      **\*PS**                      **Concept does not apply.**

**PS** = This field is for use in post payment review.

**9** = Concept does not apply

### Medically Unlikely Edits

**Source:** 2019 Medically Unlikely Edits (MUE)  
**Publisher:** CMS  
**Date:** July 01, 2019

Services	MUE	MAI	MUE Rationale
<b>Practitioner Services</b>	1	2	Clinical: Data
<b>DME Supplier Services</b>	NA	NA	NA
<b>Facility Outpatient Services</b>	1	2	CMS Policy

MAI 1: Line Edit

MUE MAI "1" indicates a claim line edit. When it's appropriate to report units that exceed the MUE, use one or more additional claim lines with an appropriate modifier appended to the code. Payers who apply the MUE will process each claim line separately for payment.

MAI 2: Date of Service Edit: Policy



MUE MAI "2" indicates an absolute date of service (DOS) edit based on policy. Payers who apply the MUE sum the code's same-DOS units (not counting lines with modifier 55). If the sum exceeds the MUE value, the payer will deny same-DOS lines with that code on the current claim. CMS has not identified any instances in which exceeding an MAI 2 MUE is correct.

MAI 3: Date of Service Edit: Clinical

MUE MAI "3" indicates a date of service (DOS) edit based on clinical benchmarks. Payers who apply the MUE sum the code's same-DOS units (not counting lines with modifier 55). If the sum exceeds the MUE value, the payer will deny same-DOS lines with that code on the current claim. MACs may pay excess units upon appeal or may bypass the MUE based on documentation of medical necessity.

**LCD Details**

**LCD Details for 99201**

The chosen state has no LCD for this code/title. Please search All States to see if another state has an LCD for this code/title.

**Article Details for 99201**

The chosen state has no Article for this code/title. Please search All States to see if another state has an Article for this code/title.

**NCD**

No data available.

**MEDICARE CCI**

0 - Can NOT be billed under any circumstances  
 1 - A CCI-associated modifier on the Col. 2 code will override the edit.

Col B Code	Reason Edit	Modifier Indicator
0362T	Misuse of column two code with column one code	1
0373T	Misuse of column two code with column one code	1
0469T	Misuse of column two code with column one code	0
36591	CPT Manual or CMS manual coding instructions	0
36592	CPT Manual or CMS manual coding instructions	0
43752	Misuse of column two code with column one code	1
80500	Standards of medical / surgical practice	0
80502	Standards of medical / surgical practice	0
90863	CPT Manual or CMS manual coding instructions	0



90940	Standards of medical / surgical practice	0
92002	More extensive procedure	0
92004	More extensive procedure	0
92012	More extensive procedure	0
92014	More extensive procedure	0
92227	CPT Manual or CMS manual coding instructions	1
92228	CPT Manual or CMS manual coding instructions	1
92531	CPT Manual or CMS manual coding instructions	0
92532	CPT Manual or CMS manual coding instructions	0
93561	Misuse of column two code with column one code	1
93562	Misuse of column two code with column one code	1
93792	CPT Manual or CMS manual coding instructions	1
93793	CPT Manual or CMS manual coding instructions	0
94002	CPT Manual or CMS manual coding instructions	0
94003	CPT Manual or CMS manual coding instructions	0
94004	CPT Manual or CMS manual coding instructions	0
94660	CPT Manual or CMS manual coding instructions	0
94662	CPT Manual or CMS manual coding instructions	0
95831	Standards of medical / surgical practice	0
95832	Standards of medical / surgical practice	0
95833	Standards of medical / surgical practice	0
95834	Standards of medical / surgical practice	0
95851	Standards of medical / surgical practice	0
95852	Standards of medical / surgical practice	0
96020	CPT Manual or CMS manual coding instructions	1
96105	Standards of medical / surgical practice	1
96116	CPT Manual or CMS manual coding instructions	1
96125	Standards of medical / surgical practice	1



96130	Standards of medical / surgical practice	1
96132	Standards of medical / surgical practice	1
96136	Standards of medical / surgical practice	1
96138	Standards of medical / surgical practice	1
96146	Standards of medical / surgical practice	1
96150	CPT Manual or CMS manual coding instructions	0
96151	CPT Manual or CMS manual coding instructions	0
96152	CPT Manual or CMS manual coding instructions	0
96153	CPT Manual or CMS manual coding instructions	0
96154	CPT Manual or CMS manual coding instructions	0
96523	CPT Manual or CMS manual coding instructions	0
97151	Misuse of column two code with column one code	1
97153	Misuse of column two code with column one code	1
97154	Misuse of column two code with column one code	1
97155	Misuse of column two code with column one code	1
97156	Misuse of column two code with column one code	1
97157	Misuse of column two code with column one code	1
97158	Misuse of column two code with column one code	1
97802	Misuse of column two code with column one code	0
97803	Misuse of column two code with column one code	0
97804	Misuse of column two code with column one code	0
99091	CPT Manual or CMS manual coding instructions	0
99172	CPT Manual or CMS manual coding instructions	0
99173	CPT Manual or CMS manual coding instructions	1
99174	Misuse of column two code with column one code	1
99177	Misuse of column two code with column one code	1
99211	Misuse of column two code with column one code	1
99212	Misuse of column two code with column one code	1



99213	Misuse of column two code with column one code	1
99214	Misuse of column two code with column one code	1
99215	Misuse of column two code with column one code	1
99408	Standards of medical / surgical practice	0
99409	Standards of medical / surgical practice	0
99446	CPT Manual or CMS manual coding instructions	0
99447	CPT Manual or CMS manual coding instructions	0
99448	CPT Manual or CMS manual coding instructions	0
99449	CPT Manual or CMS manual coding instructions	0
99451	CPT Manual or CMS manual coding instructions	0
99452	CPT Manual or CMS manual coding instructions	0
99605	Misuse of column two code with column one code	1
99606	Misuse of column two code with column one code	1
G0102	Standards of medical / surgical practice	0
G0117	Standards of medical / surgical practice	0
G0118	Standards of medical / surgical practice	0
G0245	Standards of medical / surgical practice	0
G0246	Standards of medical / surgical practice	0
G0248	Misuse of column two code with column one code	1
G0250	Misuse of column two code with column one code	1
G0270	Misuse of column two code with column one code	0
G0271	Misuse of column two code with column one code	0
G0396	Standards of medical / surgical practice	1
G0397	Standards of medical / surgical practice	1
G0406	Mutually exclusive procedures	0
G0407	Mutually exclusive procedures	0
G0408	Mutually exclusive procedures	0
G0425	Mutually exclusive procedures	0





G0426	Mutually exclusive procedures	0
G0427	Mutually exclusive procedures	0
G0442	Standards of medical / surgical practice	1
G0443	Standards of medical / surgical practice	1
G0444	More extensive procedure	1
G0445	More extensive procedure	1
G0446	More extensive procedure	1
G0447	More extensive procedure	1
G0459	Standards of medical / surgical practice	0
G0473	More extensive procedure	1
G0508	Mutually exclusive procedures	0
G0509	Mutually exclusive procedures	0
G2011	Standards of medical / surgical practice	1

**Medicaid CCI Edits Alert**

0 - Can NOT be billed under any circumstances		
1 - A CCI-associated modifier on the Col. 2 code will override the edit.		
Col B Code	Reason Edit	Modifier Indicator
H0050	Standards of medical / surgical practice	1
H0049	Standards of medical / surgical practice	1
G2011	Standards of medical / surgical practice	1
G0509	Mutually exclusive procedures	0
G0508	Mutually exclusive procedures	0
G0473	More extensive procedure	1
G0459	Standards of medical / surgical practice	0
G0447	More extensive procedure	1
G0446	More extensive procedure	1
G0445	More extensive procedure	1



G0444	More extensive procedure	1
G0443	Standards of medical / surgical practice	1
G0442	Standards of medical / surgical practice	1
G0427	Mutually exclusive procedures	0
G0426	Mutually exclusive procedures	0
G0425	Mutually exclusive procedures	0
G0408	Mutually exclusive procedures	0
G0407	Mutually exclusive procedures	0
G0406	Mutually exclusive procedures	0
G0397	Standards of medical / surgical practice	1
G0396	Standards of medical / surgical practice	1
G0271	Misuse of column two code with column one code	0
G0270	Misuse of column two code with column one code	0
G0250	Misuse of column two code with column one code	1
G0248	Misuse of column two code with column one code	1
G0246	Standards of medical / surgical practice	0
G0245	Standards of medical / surgical practice	0
G0118	Standards of medical / surgical practice	1
G0117	Standards of medical / surgical practice	1
G0102	Standards of medical / surgical practice	0
99606	Misuse of column two code with column one code	1
99605	Misuse of column two code with column one code	1
99452	CPT Manual or CMS manual coding instructions	0
99451	CPT Manual or CMS manual coding instructions	0
99449	CPT Manual or CMS manual coding instructions	0
99448	CPT Manual or CMS manual coding instructions	0
99447	CPT Manual or CMS manual coding instructions	0
99446	CPT Manual or CMS manual coding instructions	0



99409	CPT Manual or CMS manual coding instructions	1
99408	CPT Manual or CMS manual coding instructions	1
99215	Misuse of column two code with column one code	1
99214	Misuse of column two code with column one code	1
99213	Misuse of column two code with column one code	1
99212	Misuse of column two code with column one code	1
99211	Misuse of column two code with column one code	1
99177	Misuse of column two code with column one code	1
99174	Misuse of column two code with column one code	1
99173	CPT Manual or CMS manual coding instructions	1
99172	CPT Manual or CMS manual coding instructions	0
99091	CPT Manual or CMS manual coding instructions	0
97804	Misuse of column two code with column one code	0
97803	Misuse of column two code with column one code	0
97802	Misuse of column two code with column one code	0
97158	Misuse of column two code with column one code	1
97157	Misuse of column two code with column one code	1
97156	Misuse of column two code with column one code	1
97155	Misuse of column two code with column one code	1
97154	Misuse of column two code with column one code	1
97153	Misuse of column two code with column one code	1
97151	Misuse of column two code with column one code	1
96523	CPT Manual or CMS manual coding instructions	0
96155	CPT Manual or CMS manual coding instructions	0
96154	CPT Manual or CMS manual coding instructions	0
96153	CPT Manual or CMS manual coding instructions	0
96152	CPT Manual or CMS manual coding instructions	0
96151	CPT Manual or CMS manual coding instructions	0



96150	CPT Manual or CMS manual coding instructions	0
96146	Standards of medical / surgical practice	1
96138	Standards of medical / surgical practice	1
96136	Standards of medical / surgical practice	1
96132	Standards of medical / surgical practice	1
96130	Standards of medical / surgical practice	1
96125	Standards of medical / surgical practice	1
96116	CPT Manual or CMS manual coding instructions	1
96105	Standards of medical / surgical practice	1
0362T	Misuse of column two code with column one code	1
96020	CPT Manual or CMS manual coding instructions	1
95852	Standards of medical / surgical practice	0
95851	Standards of medical / surgical practice	0
95834	Standards of medical / surgical practice	0
95833	Standards of medical / surgical practice	0
95832	Standards of medical / surgical practice	0
95831	Standards of medical / surgical practice	0
94662	CPT Manual or CMS manual coding instructions	0
94660	CPT Manual or CMS manual coding instructions	0
94004	CPT Manual or CMS manual coding instructions	0
94003	CPT Manual or CMS manual coding instructions	0
94002	CPT Manual or CMS manual coding instructions	0
93793	CPT Manual or CMS manual coding instructions	0
93792	CPT Manual or CMS manual coding instructions	1
93562	Misuse of column two code with column one code	1
93561	Misuse of column two code with column one code	1
92532	CPT Manual or CMS manual coding instructions	0
92531	CPT Manual or CMS manual coding instructions	0

92228	CPT Manual or CMS manual coding instructions	1
92227	CPT Manual or CMS manual coding instructions	1
92014	More extensive procedure	0
92012	More extensive procedure	0
92004	More extensive procedure	0
92002	More extensive procedure	0
90940	Standards of medical / surgical practice	0
90863	CPT Manual or CMS manual coding instructions	0
80502	Standards of medical / surgical practice	0
80500	Standards of medical / surgical practice	0
43752	Misuse of column two code with column one code	1
36592	CPT Manual or CMS manual coding instructions	0
36591	CPT Manual or CMS manual coding instructions	0
0469T	Misuse of column two code with column one code	0
0373T	Misuse of column two code with column one code	1

### ICD-10 Crossref

E01.0 : Iodine-deficiency related diffuse (endemic) goiter  
 E01.1 : Iodine-deficiency related multinodular (endemic) goiter  
 E01.2 : Iodine-deficiency related (endemic) goiter, unspecified  
 E01.8 : Other iodine-deficiency related thyroid disorders and allied conditions  
 E10.10 : Type 1 diabetes mellitus with ketoacidosis without coma  
 E10.11 : Type 1 diabetes mellitus with ketoacidosis with coma  
 E10.21 : Type 1 diabetes mellitus with diabetic nephropathy  
 E10.22 : Type 1 diabetes mellitus with diabetic chronic kidney disease  
 E10.29 : Type 1 diabetes mellitus with other diabetic kidney complication  
 E10.311 : Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema  
 E10.319 : Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema  
 E10.36 : Type 1 diabetes mellitus with diabetic cataract  
 E10.39 : Type 1 diabetes mellitus with other diabetic ophthalmic complication  
 E10.40 : Type 1 diabetes mellitus with diabetic neuropathy, unspecified  
 E10.41 : Type 1 diabetes mellitus with diabetic mononeuropathy  
 E10.42 : Type 1 diabetes mellitus with diabetic polyneuropathy  
 E10.43 : Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy  
 E10.44 : Type 1 diabetes mellitus with diabetic amyotrophy  
 E10.49 : Type 1 diabetes mellitus with other diabetic neurological complication  
 E10.51 : Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene  
 E10.52 : Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene



E10.59 : Type 1 diabetes mellitus with other circulatory complications  
E10.610 : Type 1 diabetes mellitus with diabetic neuropathic arthropathy  
E10.618 : Type 1 diabetes mellitus with other diabetic arthropathy  
E10.620 : Type 1 diabetes mellitus with diabetic dermatitis  
E10.621 : Type 1 diabetes mellitus with foot ulcer  
E10.622 : Type 1 diabetes mellitus with other skin ulcer  
E10.628 : Type 1 diabetes mellitus with other skin complications  
E10.630 : Type 1 diabetes mellitus with periodontal disease  
E10.638 : Type 1 diabetes mellitus with other oral complications  
E10.641 : Type 1 diabetes mellitus with hypoglycemia with coma  
E10.649 : Type 1 diabetes mellitus with hypoglycemia without coma  
E10.65 : Type 1 diabetes mellitus with hyperglycemia  
E10.69 : Type 1 diabetes mellitus with other specified complication  
E10.8 : Type 1 diabetes mellitus with unspecified complications  
E10.9 : Type 1 diabetes mellitus without complications  
E11.00 : Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)  
E11.01 : Type 2 diabetes mellitus with hyperosmolarity with coma  
E11.10 : Type 2 diabetes mellitus with ketoacidosis without coma  
E11.11 : Type 2 diabetes mellitus with ketoacidosis with coma  
E11.21 : Type 2 diabetes mellitus with diabetic nephropathy  
E11.22 : Type 2 diabetes mellitus with diabetic chronic kidney disease  
E11.29 : Type 2 diabetes mellitus with other diabetic kidney complication  
E11.311 : Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema  
E11.319 : Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema  
E11.36 : Type 2 diabetes mellitus with diabetic cataract  
E11.39 : Type 2 diabetes mellitus with other diabetic ophthalmic complication  
E11.40 : Type 2 diabetes mellitus with diabetic neuropathy, unspecified  
E11.41 : Type 2 diabetes mellitus with diabetic mononeuropathy  
E11.42 : Type 2 diabetes mellitus with diabetic polyneuropathy  
E11.43 : Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy  
E11.44 : Type 2 diabetes mellitus with diabetic amyotrophy  
E11.49 : Type 2 diabetes mellitus with other diabetic neurological complication  
E11.51 : Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene  
E11.52 : Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene  
E11.59 : Type 2 diabetes mellitus with other circulatory complications  
E11.610 : Type 2 diabetes mellitus with diabetic neuropathic arthropathy  
E11.618 : Type 2 diabetes mellitus with other diabetic arthropathy  
E11.620 : Type 2 diabetes mellitus with diabetic dermatitis  
E11.621 : Type 2 diabetes mellitus with foot ulcer  
E11.622 : Type 2 diabetes mellitus with other skin ulcer  
E11.628 : Type 2 diabetes mellitus with other skin complications  
E11.630 : Type 2 diabetes mellitus with periodontal disease  
E11.638 : Type 2 diabetes mellitus with other oral complications  
E11.641 : Type 2 diabetes mellitus with hypoglycemia with coma  
E11.649 : Type 2 diabetes mellitus with hypoglycemia without coma  
E11.65 : Type 2 diabetes mellitus with hyperglycemia  
E11.69 : Type 2 diabetes mellitus with other specified complication  
E11.8 : Type 2 diabetes mellitus with unspecified complications  
E11.9 : Type 2 diabetes mellitus without complications  
E78.2 : Mixed hyperlipidemia  
E78.3 : Hyperchylomicronemia



E78.5 : Hyperlipidemia, unspecified  
F06.31 : Mood disorder due to known physiological condition with depressive features  
F06.32 : Mood disorder due to known physiological condition with major depressive-like episode  
F25.1 : Schizoaffective disorder, depressive type  
F32.0 : Major depressive disorder, single episode, mild  
F32.1 : Major depressive disorder, single episode, moderate  
F32.2 : Major depressive disorder, single episode, severe without psychotic features  
F32.3 : Major depressive disorder, single episode, severe with psychotic features  
F32.4 : Major depressive disorder, single episode, in partial remission  
F32.5 : Major depressive disorder, single episode, in full remission  
F32.9 : Major depressive disorder, single episode, unspecified  
F33.0 : Major depressive disorder, recurrent, mild  
F33.1 : Major depressive disorder, recurrent, moderate  
F33.2 : Major depressive disorder, recurrent severe without psychotic features  
F33.3 : Major depressive disorder, recurrent, severe with psychotic symptoms  
F33.40 : Major depressive disorder, recurrent, in remission, unspecified  
F33.41 : Major depressive disorder, recurrent, in partial remission  
F33.42 : Major depressive disorder, recurrent, in full remission  
F33.8 : Other recurrent depressive disorders  
F33.9 : Major depressive disorder, recurrent, unspecified  
F42.8 : Other obsessive-compulsive disorder  
F42.9 : Obsessive-compulsive disorder, unspecified  
I10 : Essential (primary) hypertension  
I11.0 : Hypertensive heart disease with heart failure  
I11.9 : Hypertensive heart disease without heart failure  
I12.0 : Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease  
I12.9 : Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease  
I13.0 : Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease  
I13.10 : Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease  
I13.11 : Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease  
I13.2 : Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease  
I15.0 : Renovascular hypertension  
I15.1 : Hypertension secondary to other renal disorders  
I15.2 : Hypertension secondary to endocrine disorders  
I15.8 : Other secondary hypertension  
I15.9 : Secondary hypertension, unspecified  
I20.0 : Unstable angina  
I20.1 : Angina pectoris with documented spasm  
I20.8 : Other forms of angina pectoris  
I20.9 : Angina pectoris, unspecified  
I24.8 : Other forms of acute ischemic heart disease  
I24.9 : Acute ischemic heart disease, unspecified  
I25.10 : Atherosclerotic heart disease of native coronary artery without angina pectoris  
I25.110 : Atherosclerotic heart disease of native coronary artery with unstable angina pectoris  
I25.111 : Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm  
I25.118 : Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris  
I25.119 : Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris



I25.2 : Old myocardial infarction  
I44.30 : Unspecified atrioventricular block  
I44.39 : Other atrioventricular block  
I44.4 : Left anterior fascicular block  
I44.5 : Left posterior fascicular block  
I44.60 : Unspecified fascicular block  
I44.69 : Other fascicular block  
I44.7 : Left bundle-branch block, unspecified  
I45.0 : Right fascicular block  
I45.10 : Unspecified right bundle-branch block  
I45.19 : Other right bundle-branch block  
I83.811 : Varicose veins of right lower extremity with pain  
I83.812 : Varicose veins of left lower extremity with pain  
I83.813 : Varicose veins of bilateral lower extremities with pain  
I83.819 : Varicose veins of unspecified lower extremity with pain  
I83.891 : Varicose veins of right lower extremity with other complications  
I83.892 : Varicose veins of left lower extremity with other complications  
I83.893 : Varicose veins of bilateral lower extremities with other complications  
I83.899 : Varicose veins of unspecified lower extremity with other complications  
I83.90 : Asymptomatic varicose veins of unspecified lower extremity  
I83.91 : Asymptomatic varicose veins of right lower extremity  
I83.92 : Asymptomatic varicose veins of left lower extremity  
I83.93 : Asymptomatic varicose veins of bilateral lower extremities  
I86.8 : Varicose veins of other specified sites  
K13.4 : Granuloma and granuloma-like lesions of oral mucosa  
K13.5 : Oral submucous fibrosis  
K13.6 : Irritative hyperplasia of oral mucosa  
K13.70 : Unspecified lesions of oral mucosa  
K13.79 : Other lesions of oral mucosa  
K14.0 : Glossitis  
K14.1 : Geographic tongue  
K14.2 : Median rhomboid glossitis  
K14.3 : Hypertrophy of tongue papillae  
K14.4 : Atrophy of tongue papillae  
K14.5 : Plicated tongue  
K14.6 : Glossodynia  
K14.8 : Other diseases of tongue  
K14.9 : Disease of tongue, unspecified  
K20.0 : Eosinophilic esophagitis  
K20.8 : Other esophagitis  
K20.9 : Esophagitis, unspecified  
K21.0 : Gastro-esophageal reflux disease with esophagitis  
K21.9 : Gastro-esophageal reflux disease without esophagitis  
K22.0 : Achalasia of cardia  
K22.10 : Ulcer of esophagus without bleeding  
K22.11 : Ulcer of esophagus with bleeding  
K22.2 : Esophageal obstruction  
K22.3 : Perforation of esophagus  
K22.4 : Dyskinesia of esophagus  
K22.5 : Diverticulum of esophagus, acquired  
K22.6 : Gastro-esophageal laceration-hemorrhage syndrome  
K22.70 : Barrett's esophagus without dysplasia





K22.710 : Barrett's esophagus with low grade dysplasia  
K22.711 : Barrett's esophagus with high grade dysplasia  
K22.719 : Barrett's esophagus with dysplasia, unspecified  
K22.8 : Other specified diseases of esophagus  
K22.9 : Disease of esophagus, unspecified  
K23 : Disorders of esophagus in diseases classified elsewhere  
K25.0 : Acute gastric ulcer with hemorrhage  
K25.1 : Acute gastric ulcer with perforation  
K25.2 : Acute gastric ulcer with both hemorrhage and perforation  
K25.3 : Acute gastric ulcer without hemorrhage or perforation  
K25.4 : Chronic or unspecified gastric ulcer with hemorrhage  
K25.5 : Chronic or unspecified gastric ulcer with perforation  
K25.6 : Chronic or unspecified gastric ulcer with both hemorrhage and perforation  
K25.7 : Chronic gastric ulcer without hemorrhage or perforation  
K25.9 : Gastric ulcer, unspecified as acute or chronic, without hemorrhage or perforation  
K26.0 : Acute duodenal ulcer with hemorrhage  
K26.1 : Acute duodenal ulcer with perforation  
K26.2 : Acute duodenal ulcer with both hemorrhage and perforation  
K26.3 : Acute duodenal ulcer without hemorrhage or perforation  
K26.4 : Chronic or unspecified duodenal ulcer with hemorrhage  
K26.5 : Chronic or unspecified duodenal ulcer with perforation  
K26.6 : Chronic or unspecified duodenal ulcer with both hemorrhage and perforation  
K26.7 : Chronic duodenal ulcer without hemorrhage or perforation  
K26.9 : Duodenal ulcer, unspecified as acute or chronic, without hemorrhage or perforation  
K27.0 : Acute peptic ulcer, site unspecified, with hemorrhage  
K27.1 : Acute peptic ulcer, site unspecified, with perforation  
K27.2 : Acute peptic ulcer, site unspecified, with both hemorrhage and perforation  
K27.3 : Acute peptic ulcer, site unspecified, without hemorrhage or perforation  
K27.4 : Chronic or unspecified peptic ulcer, site unspecified, with hemorrhage  
K27.5 : Chronic or unspecified peptic ulcer, site unspecified, with perforation  
K27.6 : Chronic or unspecified peptic ulcer, site unspecified, with both hemorrhage and perforation  
K27.7 : Chronic peptic ulcer, site unspecified, without hemorrhage or perforation  
K27.9 : Peptic ulcer, site unspecified, unspecified as acute or chronic, without hemorrhage or perforation  
K28.0 : Acute gastrojejunal ulcer with hemorrhage  
K28.1 : Acute gastrojejunal ulcer with perforation  
K28.2 : Acute gastrojejunal ulcer with both hemorrhage and perforation  
K28.3 : Acute gastrojejunal ulcer without hemorrhage or perforation  
K28.4 : Chronic or unspecified gastrojejunal ulcer with hemorrhage  
K28.5 : Chronic or unspecified gastrojejunal ulcer with perforation  
K28.6 : Chronic or unspecified gastrojejunal ulcer with both hemorrhage and perforation  
K28.7 : Chronic gastrojejunal ulcer without hemorrhage or perforation  
K28.9 : Gastrojejunal ulcer, unspecified as acute or chronic, without hemorrhage or perforation  
K29.00 : Acute gastritis without bleeding  
K29.01 : Acute gastritis with bleeding  
K29.20 : Alcoholic gastritis without bleeding  
K29.21 : Alcoholic gastritis with bleeding  
K29.30 : Chronic superficial gastritis without bleeding  
K29.31 : Chronic superficial gastritis with bleeding  
K29.40 : Chronic atrophic gastritis without bleeding  
K29.41 : Chronic atrophic gastritis with bleeding  
K29.50 : Unspecified chronic gastritis without bleeding  
K29.51 : Unspecified chronic gastritis with bleeding



K29.60 : Other gastritis without bleeding  
K29.61 : Other gastritis with bleeding  
K29.70 : Gastritis, unspecified, without bleeding  
K29.71 : Gastritis, unspecified, with bleeding  
K29.80 : Duodenitis without bleeding  
K29.81 : Duodenitis with bleeding  
K29.90 : Gastroduodenitis, unspecified, without bleeding  
K29.91 : Gastroduodenitis, unspecified, with bleeding  
K30 : Functional dyspepsia  
K31.0 : Acute dilatation of stomach  
K31.1 : Adult hypertrophic pyloric stenosis  
K31.2 : Hourglass stricture and stenosis of stomach  
K31.3 : Pylorospasm, not elsewhere classified  
K31.4 : Gastric diverticulum  
K31.5 : Obstruction of duodenum  
K31.6 : Fistula of stomach and duodenum  
K31.7 : Polyp of stomach and duodenum  
K31.811 : Angiodysplasia of stomach and duodenum with bleeding  
K31.819 : Angiodysplasia of stomach and duodenum without bleeding  
K31.82 : Dieulafoy lesion (hemorrhagic) of stomach and duodenum  
K31.83 : Achlorhydria  
K31.84 : Gastroparesis  
K31.89 : Other diseases of stomach and duodenum  
K31.9 : Disease of stomach and duodenum, unspecified  
K35.20 : Acute appendicitis with generalized peritonitis, without abscess  
K35.21 : Acute appendicitis with generalized peritonitis, with abscess  
K35.30 : Acute appendicitis with localized peritonitis, without perforation or gangrene  
K35.31 : Acute appendicitis with localized peritonitis and gangrene, without perforation  
K35.32 : Acute appendicitis with perforation and localized peritonitis, without abscess  
K35.33 : Acute appendicitis with perforation and localized peritonitis, with abscess  
K35.80 : Unspecified acute appendicitis  
K35.890 : Other acute appendicitis without perforation or gangrene  
K35.891 : Other acute appendicitis without perforation, with gangrene  
K36 : Other appendicitis  
K37 : Unspecified appendicitis  
K38.0 : Hyperplasia of appendix  
K38.1 : Appendicular concretions  
K38.2 : Diverticulum of appendix  
K38.3 : Fistula of appendix  
K38.8 : Other specified diseases of appendix  
K38.9 : Disease of appendix, unspecified  
K40.00 : Bilateral inguinal hernia, with obstruction, without gangrene, not specified as recurrent  
K40.01 : Bilateral inguinal hernia, with obstruction, without gangrene, recurrent  
K40.10 : Bilateral inguinal hernia, with gangrene, not specified as recurrent  
K40.11 : Bilateral inguinal hernia, with gangrene, recurrent  
K40.20 : Bilateral inguinal hernia, without obstruction or gangrene, not specified as recurrent  
K40.21 : Bilateral inguinal hernia, without obstruction or gangrene, recurrent  
K40.30 : Unilateral inguinal hernia, with obstruction, without gangrene, not specified as recurrent  
K40.31 : Unilateral inguinal hernia, with obstruction, without gangrene, recurrent  
K40.40 : Unilateral inguinal hernia, with gangrene, not specified as recurrent  
K40.41 : Unilateral inguinal hernia, with gangrene, recurrent  
K40.90 : Unilateral inguinal hernia, without obstruction or gangrene, not specified as recurrent



K40.91 : Unilateral inguinal hernia, without obstruction or gangrene, recurrent  
K41.00 : Bilateral femoral hernia, with obstruction, without gangrene, not specified as recurrent  
K41.01 : Bilateral femoral hernia, with obstruction, without gangrene, recurrent  
K41.10 : Bilateral femoral hernia, with gangrene, not specified as recurrent  
K41.11 : Bilateral femoral hernia, with gangrene, recurrent  
K41.20 : Bilateral femoral hernia, without obstruction or gangrene, not specified as recurrent  
K41.21 : Bilateral femoral hernia, without obstruction or gangrene, recurrent  
K41.30 : Unilateral femoral hernia, with obstruction, without gangrene, not specified as recurrent  
K41.31 : Unilateral femoral hernia, with obstruction, without gangrene, recurrent  
K41.40 : Unilateral femoral hernia, with gangrene, not specified as recurrent  
K41.41 : Unilateral femoral hernia, with gangrene, recurrent  
K41.90 : Unilateral femoral hernia, without obstruction or gangrene, not specified as recurrent  
K41.91 : Unilateral femoral hernia, without obstruction or gangrene, recurrent  
K42.0 : Umbilical hernia with obstruction, without gangrene  
K42.1 : Umbilical hernia with gangrene  
K42.9 : Umbilical hernia without obstruction or gangrene  
K43.0 : Incisional hernia with obstruction, without gangrene  
K43.1 : Incisional hernia with gangrene  
K43.2 : Incisional hernia without obstruction or gangrene  
K43.3 : Parastomal hernia with obstruction, without gangrene  
K43.4 : Parastomal hernia with gangrene  
K43.5 : Parastomal hernia without obstruction or gangrene  
K43.6 : Other and unspecified ventral hernia with obstruction, without gangrene  
K43.7 : Other and unspecified ventral hernia with gangrene  
K43.9 : Ventral hernia without obstruction or gangrene  
K44.0 : Diaphragmatic hernia with obstruction, without gangrene  
K44.1 : Diaphragmatic hernia with gangrene  
K44.9 : Diaphragmatic hernia without obstruction or gangrene  
K45.0 : Other specified abdominal hernia with obstruction, without gangrene  
K45.1 : Other specified abdominal hernia with gangrene  
K45.8 : Other specified abdominal hernia without obstruction or gangrene  
K46.0 : Unspecified abdominal hernia with obstruction, without gangrene  
K46.1 : Unspecified abdominal hernia with gangrene  
K46.9 : Unspecified abdominal hernia without obstruction or gangrene  
K50.00 : Crohn's disease of small intestine without complications  
K50.011 : Crohn's disease of small intestine with rectal bleeding  
K50.012 : Crohn's disease of small intestine with intestinal obstruction  
K50.013 : Crohn's disease of small intestine with fistula  
K50.014 : Crohn's disease of small intestine with abscess  
K50.018 : Crohn's disease of small intestine with other complication  
K50.019 : Crohn's disease of small intestine with unspecified complications  
K50.10 : Crohn's disease of large intestine without complications  
K50.111 : Crohn's disease of large intestine with rectal bleeding  
K50.112 : Crohn's disease of large intestine with intestinal obstruction  
K50.113 : Crohn's disease of large intestine with fistula  
K50.114 : Crohn's disease of large intestine with abscess  
K50.118 : Crohn's disease of large intestine with other complication  
K50.119 : Crohn's disease of large intestine with unspecified complications  
K50.80 : Crohn's disease of both small and large intestine without complications  
K50.811 : Crohn's disease of both small and large intestine with rectal bleeding  
K50.812 : Crohn's disease of both small and large intestine with intestinal obstruction  
K50.813 : Crohn's disease of both small and large intestine with fistula



K50.814 : Crohn's disease of both small and large intestine with abscess  
K50.818 : Crohn's disease of both small and large intestine with other complication  
K50.819 : Crohn's disease of both small and large intestine with unspecified complications  
K50.90 : Crohn's disease, unspecified, without complications  
K50.911 : Crohn's disease, unspecified, with rectal bleeding  
K50.912 : Crohn's disease, unspecified, with intestinal obstruction  
K50.913 : Crohn's disease, unspecified, with fistula  
K50.914 : Crohn's disease, unspecified, with abscess  
K50.918 : Crohn's disease, unspecified, with other complication  
K50.919 : Crohn's disease, unspecified, with unspecified complications  
K51.00 : Ulcerative (chronic) pancolitis without complications  
K51.011 : Ulcerative (chronic) pancolitis with rectal bleeding  
K51.012 : Ulcerative (chronic) pancolitis with intestinal obstruction  
K51.013 : Ulcerative (chronic) pancolitis with fistula  
K51.014 : Ulcerative (chronic) pancolitis with abscess  
K51.018 : Ulcerative (chronic) pancolitis with other complication  
K51.019 : Ulcerative (chronic) pancolitis with unspecified complications  
K51.20 : Ulcerative (chronic) proctitis without complications  
K51.211 : Ulcerative (chronic) proctitis with rectal bleeding  
K51.212 : Ulcerative (chronic) proctitis with intestinal obstruction  
K51.213 : Ulcerative (chronic) proctitis with fistula  
K51.214 : Ulcerative (chronic) proctitis with abscess  
K51.218 : Ulcerative (chronic) proctitis with other complication  
K51.219 : Ulcerative (chronic) proctitis with unspecified complications  
K51.30 : Ulcerative (chronic) rectosigmoiditis without complications  
K51.311 : Ulcerative (chronic) rectosigmoiditis with rectal bleeding  
K51.312 : Ulcerative (chronic) rectosigmoiditis with intestinal obstruction  
K51.313 : Ulcerative (chronic) rectosigmoiditis with fistula  
K51.314 : Ulcerative (chronic) rectosigmoiditis with abscess  
K51.318 : Ulcerative (chronic) rectosigmoiditis with other complication  
K51.319 : Ulcerative (chronic) rectosigmoiditis with unspecified complications  
K51.40 : Inflammatory polyps of colon without complications  
K51.411 : Inflammatory polyps of colon with rectal bleeding  
K51.412 : Inflammatory polyps of colon with intestinal obstruction  
K51.413 : Inflammatory polyps of colon with fistula  
K51.414 : Inflammatory polyps of colon with abscess  
K51.418 : Inflammatory polyps of colon with other complication  
K51.419 : Inflammatory polyps of colon with unspecified complications  
K51.50 : Left sided colitis without complications  
K51.511 : Left sided colitis with rectal bleeding  
K51.512 : Left sided colitis with intestinal obstruction  
K51.513 : Left sided colitis with fistula  
K51.514 : Left sided colitis with abscess  
K51.518 : Left sided colitis with other complication  
K51.519 : Left sided colitis with unspecified complications  
K51.80 : Other ulcerative colitis without complications  
K51.811 : Other ulcerative colitis with rectal bleeding  
K51.812 : Other ulcerative colitis with intestinal obstruction  
K51.813 : Other ulcerative colitis with fistula  
K51.814 : Other ulcerative colitis with abscess  
K51.818 : Other ulcerative colitis with other complication  
K51.819 : Other ulcerative colitis with unspecified complications



K51.90 : Ulcerative colitis, unspecified, without complications  
K51.911 : Ulcerative colitis, unspecified with rectal bleeding  
K51.912 : Ulcerative colitis, unspecified with intestinal obstruction  
K51.913 : Ulcerative colitis, unspecified with fistula  
K51.914 : Ulcerative colitis, unspecified with abscess  
K51.918 : Ulcerative colitis, unspecified with other complication  
K51.919 : Ulcerative colitis, unspecified with unspecified complications  
K52.0 : Gastroenteritis and colitis due to radiation  
K52.1 : Toxic gastroenteritis and colitis  
K52.21 : Food protein-induced enterocolitis syndrome  
K52.22 : Food protein-induced enteropathy  
K52.29 : Other allergic and dietetic gastroenteritis and colitis  
K52.3 : Indeterminate colitis  
K52.81 : Eosinophilic gastritis or gastroenteritis  
K52.82 : Eosinophilic colitis  
K52.831 : Collagenous colitis  
K52.832 : Lymphocytic colitis  
K52.838 : Other microscopic colitis  
K52.839 : Microscopic colitis, unspecified  
K52.89 : Other specified noninfective gastroenteritis and colitis  
K52.9 : Noninfective gastroenteritis and colitis, unspecified  
K55.011 : Focal (segmental) acute (reversible) ischemia of small intestine  
K55.012 : Diffuse acute (reversible) ischemia of small intestine  
K55.019 : Acute (reversible) ischemia of small intestine, extent unspecified  
K55.021 : Focal (segmental) acute infarction of small intestine  
K55.022 : Diffuse acute infarction of small intestine  
K55.029 : Acute infarction of small intestine, extent unspecified  
K55.031 : Focal (segmental) acute (reversible) ischemia of large intestine  
K55.032 : Diffuse acute (reversible) ischemia of large intestine  
K55.039 : Acute (reversible) ischemia of large intestine, extent unspecified  
K55.041 : Focal (segmental) acute infarction of large intestine  
K55.042 : Diffuse acute infarction of large intestine  
K55.049 : Acute infarction of large intestine, extent unspecified  
K55.051 : Focal (segmental) acute (reversible) ischemia of intestine, part unspecified  
K55.052 : Diffuse acute (reversible) ischemia of intestine, part unspecified  
K55.059 : Acute (reversible) ischemia of intestine, part and extent unspecified  
K55.061 : Focal (segmental) acute infarction of intestine, part unspecified  
K55.062 : Diffuse acute infarction of intestine, part unspecified  
K55.069 : Acute infarction of intestine, part and extent unspecified  
K55.1 : Chronic vascular disorders of intestine  
K55.20 : Angiodysplasia of colon without hemorrhage  
K55.21 : Angiodysplasia of colon with hemorrhage  
K55.30 : Necrotizing enterocolitis, unspecified  
K55.31 : Stage 1 necrotizing enterocolitis  
K55.32 : Stage 2 necrotizing enterocolitis  
K55.33 : Stage 3 necrotizing enterocolitis  
K55.8 : Other vascular disorders of intestine  
K55.9 : Vascular disorder of intestine, unspecified  
K56.0 : Paralytic ileus  
K56.1 : Intussusception  
K56.2 : Volvulus  
K56.3 : Gallstone ileus



K56.41 : Fecal impaction  
K56.49 : Other impaction of intestine  
K56.50 : Intestinal adhesions [bands], unspecified as to partial versus complete obstruction  
K56.51 : Intestinal adhesions [bands], with partial obstruction  
K56.52 : Intestinal adhesions [bands] with complete obstruction  
K56.600 : Partial intestinal obstruction, unspecified as to cause  
K56.601 : Complete intestinal obstruction, unspecified as to cause  
K56.609 : Unspecified intestinal obstruction, unspecified as to partial versus complete obstruction  
K56.690 : Other partial intestinal obstruction  
K56.691 : Other complete intestinal obstruction  
K56.699 : Other intestinal obstruction unspecified as to partial versus complete obstruction  
K56.7 : Ileus, unspecified  
K57.00 : Diverticulitis of small intestine with perforation and abscess without bleeding  
K57.01 : Diverticulitis of small intestine with perforation and abscess with bleeding  
K57.10 : Diverticulosis of small intestine without perforation or abscess without bleeding  
K57.11 : Diverticulosis of small intestine without perforation or abscess with bleeding  
K57.12 : Diverticulitis of small intestine without perforation or abscess without bleeding  
K57.13 : Diverticulitis of small intestine without perforation or abscess with bleeding  
K57.20 : Diverticulitis of large intestine with perforation and abscess without bleeding  
K57.21 : Diverticulitis of large intestine with perforation and abscess with bleeding  
K57.30 : Diverticulosis of large intestine without perforation or abscess without bleeding  
K57.31 : Diverticulosis of large intestine without perforation or abscess with bleeding  
K57.32 : Diverticulitis of large intestine without perforation or abscess without bleeding  
K57.33 : Diverticulitis of large intestine without perforation or abscess with bleeding  
K57.40 : Diverticulitis of both small and large intestine with perforation and abscess without bleeding  
K57.41 : Diverticulitis of both small and large intestine with perforation and abscess with bleeding  
K57.50 : Diverticulosis of both small and large intestine without perforation or abscess without bleeding  
K57.51 : Diverticulosis of both small and large intestine without perforation or abscess with bleeding  
K57.52 : Diverticulitis of both small and large intestine without perforation or abscess without bleeding  
K57.53 : Diverticulitis of both small and large intestine without perforation or abscess with bleeding  
K57.80 : Diverticulitis of intestine, part unspecified, with perforation and abscess without bleeding  
K57.81 : Diverticulitis of intestine, part unspecified, with perforation and abscess with bleeding  
K57.90 : Diverticulosis of intestine, part unspecified, without perforation or abscess without bleeding  
K57.91 : Diverticulosis of intestine, part unspecified, without perforation or abscess with bleeding  
K57.92 : Diverticulitis of intestine, part unspecified, without perforation or abscess without bleeding  
K57.93 : Diverticulitis of intestine, part unspecified, without perforation or abscess with bleeding  
K58.0 : Irritable bowel syndrome with diarrhea  
K58.1 : Irritable bowel syndrome with constipation  
K58.2 : Mixed irritable bowel syndrome  
K58.8 : Other irritable bowel syndrome  
K58.9 : Irritable bowel syndrome without diarrhea  
K59.00 : Constipation, unspecified  
K59.01 : Slow transit constipation  
K59.02 : Outlet dysfunction constipation  
K59.03 : Drug induced constipation  
K59.04 : Chronic idiopathic constipation  
K59.09 : Other constipation  
K59.1 : Functional diarrhea  
K59.2 : Neurogenic bowel, not elsewhere classified  
K59.31 : Toxic megacolon  
K59.39 : Other megacolon  
K59.4 : Anal spasm



K59.8 : Other specified functional intestinal disorders  
K59.9 : Functional intestinal disorder, unspecified  
K60.0 : Acute anal fissure  
K60.1 : Chronic anal fissure  
K60.2 : Anal fissure, unspecified  
K60.3 : Anal fistula  
K60.4 : Rectal fistula  
K60.5 : Anorectal fistula  
K61.0 : Anal abscess  
K61.1 : Rectal abscess  
K61.2 : Anorectal abscess  
K61.31 : Horseshoe abscess  
K61.39 : Other ischiorectal abscess  
K61.4 : Intrasphincteric abscess  
K61.5 : Supralelevator abscess  
K62.0 : Anal polyp  
K62.1 : Rectal polyp  
K62.2 : Anal prolapse  
K62.3 : Rectal prolapse  
K62.4 : Stenosis of anus and rectum  
K62.5 : Hemorrhage of anus and rectum  
K62.6 : Ulcer of anus and rectum  
K62.7 : Radiation proctitis  
K62.81 : Anal sphincter tear (healed) (nontraumatic) (old)  
K62.82 : Dysplasia of anus  
K62.89 : Other specified diseases of anus and rectum  
K62.9 : Disease of anus and rectum, unspecified  
K63.0 : Abscess of intestine  
K63.1 : Perforation of intestine (nontraumatic)  
K63.2 : Fistula of intestine  
K63.3 : Ulcer of intestine  
K63.4 : Enteroptosis  
K63.5 : Polyp of colon  
K63.81 : Dieulafoy lesion of intestine  
K63.89 : Other specified diseases of intestine  
K63.9 : Disease of intestine, unspecified  
K64.0 : First degree hemorrhoids  
K64.1 : Second degree hemorrhoids  
K64.2 : Third degree hemorrhoids  
K64.3 : Fourth degree hemorrhoids  
K64.4 : Residual hemorrhoidal skin tags  
K64.5 : Perianal venous thrombosis  
K64.8 : Other hemorrhoids  
K64.9 : Unspecified hemorrhoids  
K65.0 : Generalized (acute) peritonitis  
K65.1 : Peritoneal abscess  
K65.2 : Spontaneous bacterial peritonitis  
K65.3 : Choleperitonitis  
K65.4 : Sclerosing mesenteritis  
K65.8 : Other peritonitis  
K65.9 : Peritonitis, unspecified  
K66.0 : Peritoneal adhesions (postprocedural) (postinfection)



K66.1 : Hemoperitoneum  
K66.8 : Other specified disorders of peritoneum  
K66.9 : Disorder of peritoneum, unspecified  
K67 : Disorders of peritoneum in infectious diseases classified elsewhere  
K68.11 : Postprocedural retroperitoneal abscess  
K68.12 : Psoas muscle abscess  
K68.19 : Other retroperitoneal abscess  
K68.9 : Other disorders of retroperitoneum  
K70.0 : Alcoholic fatty liver  
K70.10 : Alcoholic hepatitis without ascites  
K70.11 : Alcoholic hepatitis with ascites  
K70.2 : Alcoholic fibrosis and sclerosis of liver  
K70.30 : Alcoholic cirrhosis of liver without ascites  
K70.31 : Alcoholic cirrhosis of liver with ascites  
K70.40 : Alcoholic hepatic failure without coma  
K70.41 : Alcoholic hepatic failure with coma  
K70.9 : Alcoholic liver disease, unspecified  
K71.0 : Toxic liver disease with cholestasis  
K71.10 : Toxic liver disease with hepatic necrosis, without coma  
K71.11 : Toxic liver disease with hepatic necrosis, with coma  
K71.2 : Toxic liver disease with acute hepatitis  
K71.3 : Toxic liver disease with chronic persistent hepatitis  
K71.4 : Toxic liver disease with chronic lobular hepatitis  
K71.50 : Toxic liver disease with chronic active hepatitis without ascites  
K71.51 : Toxic liver disease with chronic active hepatitis with ascites  
K71.6 : Toxic liver disease with hepatitis, not elsewhere classified  
K71.7 : Toxic liver disease with fibrosis and cirrhosis of liver  
K71.8 : Toxic liver disease with other disorders of liver  
K71.9 : Toxic liver disease, unspecified  
K72.00 : Acute and subacute hepatic failure without coma  
K72.01 : Acute and subacute hepatic failure with coma  
K72.10 : Chronic hepatic failure without coma  
K72.11 : Chronic hepatic failure with coma  
K72.90 : Hepatic failure, unspecified without coma  
K72.91 : Hepatic failure, unspecified with coma  
K73.0 : Chronic persistent hepatitis, not elsewhere classified  
K73.1 : Chronic lobular hepatitis, not elsewhere classified  
K73.2 : Chronic active hepatitis, not elsewhere classified  
K73.8 : Other chronic hepatitis, not elsewhere classified  
K73.9 : Chronic hepatitis, unspecified  
K74.0 : Hepatic fibrosis  
K74.1 : Hepatic sclerosis  
K74.2 : Hepatic fibrosis with hepatic sclerosis  
K74.3 : Primary biliary cirrhosis  
K74.4 : Secondary biliary cirrhosis  
K74.5 : Biliary cirrhosis, unspecified  
K74.60 : Unspecified cirrhosis of liver  
K74.69 : Other cirrhosis of liver  
K75.0 : Abscess of liver  
K75.1 : Phlebitis of portal vein  
K75.2 : Nonspecific reactive hepatitis  
K75.3 : Granulomatous hepatitis, not elsewhere classified





K75.4 : Autoimmune hepatitis  
K75.81 : Nonalcoholic steatohepatitis (NASH)  
K75.89 : Other specified inflammatory liver diseases  
K75.9 : Inflammatory liver disease, unspecified  
K76.0 : Fatty (change of) liver, not elsewhere classified  
K76.1 : Chronic passive congestion of liver  
K76.2 : Central hemorrhagic necrosis of liver  
K76.3 : Infarction of liver  
K76.4 : Peliosis hepatis  
K76.5 : Hepatic veno-occlusive disease  
K76.6 : Portal hypertension  
K76.7 : Hepatorenal syndrome  
K76.81 : Hepatopulmonary syndrome  
K76.89 : Other specified diseases of liver  
K76.9 : Liver disease, unspecified  
K77 : Liver disorders in diseases classified elsewhere  
K80.00 : Calculus of gallbladder with acute cholecystitis without obstruction  
K80.01 : Calculus of gallbladder with acute cholecystitis with obstruction  
K80.10 : Calculus of gallbladder with chronic cholecystitis without obstruction  
K80.11 : Calculus of gallbladder with chronic cholecystitis with obstruction  
K80.12 : Calculus of gallbladder with acute and chronic cholecystitis without obstruction  
K80.13 : Calculus of gallbladder with acute and chronic cholecystitis with obstruction  
K80.18 : Calculus of gallbladder with other cholecystitis without obstruction  
K80.19 : Calculus of gallbladder with other cholecystitis with obstruction  
K80.20 : Calculus of gallbladder without cholecystitis without obstruction  
K80.21 : Calculus of gallbladder without cholecystitis with obstruction  
K80.30 : Calculus of bile duct with cholangitis, unspecified, without obstruction  
K80.31 : Calculus of bile duct with cholangitis, unspecified, with obstruction  
K80.32 : Calculus of bile duct with acute cholangitis without obstruction  
K80.33 : Calculus of bile duct with acute cholangitis with obstruction  
K80.34 : Calculus of bile duct with chronic cholangitis without obstruction  
K80.35 : Calculus of bile duct with chronic cholangitis with obstruction  
K80.36 : Calculus of bile duct with acute and chronic cholangitis without obstruction  
K80.37 : Calculus of bile duct with acute and chronic cholangitis with obstruction  
K80.40 : Calculus of bile duct with cholecystitis, unspecified, without obstruction  
K80.41 : Calculus of bile duct with cholecystitis, unspecified, with obstruction  
K80.42 : Calculus of bile duct with acute cholecystitis without obstruction  
K80.43 : Calculus of bile duct with acute cholecystitis with obstruction  
K80.44 : Calculus of bile duct with chronic cholecystitis without obstruction  
K80.45 : Calculus of bile duct with chronic cholecystitis with obstruction  
K80.46 : Calculus of bile duct with acute and chronic cholecystitis without obstruction  
K80.47 : Calculus of bile duct with acute and chronic cholecystitis with obstruction  
K80.50 : Calculus of bile duct without cholangitis or cholecystitis without obstruction  
K80.51 : Calculus of bile duct without cholangitis or cholecystitis with obstruction  
K80.60 : Calculus of gallbladder and bile duct with cholecystitis, unspecified, without obstruction  
K80.61 : Calculus of gallbladder and bile duct with cholecystitis, unspecified, with obstruction  
K80.62 : Calculus of gallbladder and bile duct with acute cholecystitis without obstruction  
K80.63 : Calculus of gallbladder and bile duct with acute cholecystitis with obstruction  
K80.64 : Calculus of gallbladder and bile duct with chronic cholecystitis without obstruction  
K80.65 : Calculus of gallbladder and bile duct with chronic cholecystitis with obstruction  
K80.66 : Calculus of gallbladder and bile duct with acute and chronic cholecystitis without obstruction  
K80.67 : Calculus of gallbladder and bile duct with acute and chronic cholecystitis with obstruction



K80.70 : Calculus of gallbladder and bile duct without cholecystitis without obstruction  
K80.71 : Calculus of gallbladder and bile duct without cholecystitis with obstruction  
K80.80 : Other cholelithiasis without obstruction  
K80.81 : Other cholelithiasis with obstruction  
K81.0 : Acute cholecystitis  
K81.1 : Chronic cholecystitis  
K81.2 : Acute cholecystitis with chronic cholecystitis  
K81.9 : Cholecystitis, unspecified  
K82.0 : Obstruction of gallbladder  
K82.1 : Hydrops of gallbladder  
K82.2 : Perforation of gallbladder  
K82.3 : Fistula of gallbladder  
K82.4 : Cholesterolosis of gallbladder  
K82.8 : Other specified diseases of gallbladder  
K82.9 : Disease of gallbladder, unspecified  
K82.A1 : Gangrene of gallbladder in cholecystitis  
K82.A2 : Perforation of gallbladder in cholecystitis  
K83.01 : Primary sclerosing cholangitis  
K83.09 : Other cholangitis  
K83.1 : Obstruction of bile duct  
K83.2 : Perforation of bile duct  
K83.3 : Fistula of bile duct  
K83.4 : Spasm of sphincter of Oddi  
K83.5 : Biliary cyst  
K83.8 : Other specified diseases of biliary tract  
K83.9 : Disease of biliary tract, unspecified  
K85.00 : Idiopathic acute pancreatitis without necrosis or infection  
K85.01 : Idiopathic acute pancreatitis with uninfected necrosis  
K85.02 : Idiopathic acute pancreatitis with infected necrosis  
K85.10 : Biliary acute pancreatitis without necrosis or infection  
K85.11 : Biliary acute pancreatitis with uninfected necrosis  
K85.12 : Biliary acute pancreatitis with infected necrosis  
K85.20 : Alcohol induced acute pancreatitis without necrosis or infection  
K85.21 : Alcohol induced acute pancreatitis with uninfected necrosis  
K85.22 : Alcohol induced acute pancreatitis with infected necrosis  
K85.30 : Drug induced acute pancreatitis without necrosis or infection  
K85.31 : Drug induced acute pancreatitis with uninfected necrosis  
K85.32 : Drug induced acute pancreatitis with infected necrosis  
K85.80 : Other acute pancreatitis without necrosis or infection  
K85.81 : Other acute pancreatitis with uninfected necrosis  
K85.82 : Other acute pancreatitis with infected necrosis  
K85.90 : Acute pancreatitis without necrosis or infection, unspecified  
K85.91 : Acute pancreatitis with uninfected necrosis, unspecified  
K85.92 : Acute pancreatitis with infected necrosis, unspecified  
K86.0 : Alcohol-induced chronic pancreatitis  
K86.1 : Other chronic pancreatitis  
K86.2 : Cyst of pancreas  
K86.3 : Pseudocyst of pancreas  
K86.81 : Exocrine pancreatic insufficiency  
K86.89 : Other specified diseases of pancreas  
K86.9 : Disease of pancreas, unspecified  
K87 : Disorders of gallbladder, biliary tract and pancreas in diseases classified elsewhere



K90.0 : Celiac disease  
K90.1 : Tropical sprue  
K90.2 : Blind loop syndrome, not elsewhere classified  
K90.3 : Pancreatic steatorrhea  
K90.41 : Non-celiac gluten sensitivity  
K90.49 : Malabsorption due to intolerance, not elsewhere classified  
K90.81 : Whipple's disease  
K90.89 : Other intestinal malabsorption  
K90.9 : Intestinal malabsorption, unspecified  
K91.0 : Vomiting following gastrointestinal surgery  
K91.1 : Postgastric surgery syndromes  
K91.2 : Postsurgical malabsorption, not elsewhere classified  
K91.30 : Postprocedural intestinal obstruction, unspecified as to partial versus complete  
K91.31 : Postprocedural partial intestinal obstruction  
K91.32 : Postprocedural complete intestinal obstruction  
K91.5 : Postcholecystectomy syndrome  
K91.61 : Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating a digestive system procedure  
K91.62 : Intraoperative hemorrhage and hematoma of a digestive system organ or structure complicating other procedure  
K91.71 : Accidental puncture and laceration of a digestive system organ or structure during a digestive system procedure  
K91.72 : Accidental puncture and laceration of a digestive system organ or structure during other procedure  
K91.81 : Other intraoperative complications of digestive system  
K91.82 : Postprocedural hepatic failure  
K91.83 : Postprocedural hepatorenal syndrome  
K91.840 : Postprocedural hemorrhage of a digestive system organ or structure following a digestive system procedure  
K91.841 : Postprocedural hemorrhage of a digestive system organ or structure following other procedure  
K91.850 : Pouchitis  
K91.858 : Other complications of intestinal pouch  
K91.86 : Retained cholelithiasis following cholecystectomy  
K91.870 : Postprocedural hematoma of a digestive system organ or structure following a digestive system procedure  
K91.871 : Postprocedural hematoma of a digestive system organ or structure following other procedure  
K91.872 : Postprocedural seroma of a digestive system organ or structure following a digestive system procedure  
K91.873 : Postprocedural seroma of a digestive system organ or structure following other procedure  
K91.89 : Other postprocedural complications and disorders of digestive system  
K92.0 : Hematemesis  
K92.1 : Melena  
K92.2 : Gastrointestinal hemorrhage, unspecified  
K92.81 : Gastrointestinal mucositis (ulcerative)  
K92.89 : Other specified diseases of the digestive system  
K92.9 : Disease of digestive system, unspecified  
K94.00 : Colostomy complication, unspecified  
K94.01 : Colostomy hemorrhage  
K94.02 : Colostomy infection  
K94.03 : Colostomy malfunction  
K94.09 : Other complications of colostomy  
K94.10 : Enterostomy complication, unspecified  
K94.11 : Enterostomy hemorrhage  
K94.12 : Enterostomy infection



K94.13 : Enterostomy malfunction  
K94.19 : Other complications of enterostomy  
K94.20 : Gastrostomy complication, unspecified  
K94.21 : Gastrostomy hemorrhage  
K94.22 : Gastrostomy infection  
K94.23 : Gastrostomy malfunction  
K94.29 : Other complications of gastrostomy  
K94.30 : Esophagostomy complications, unspecified  
K94.31 : Esophagostomy hemorrhage  
K94.32 : Esophagostomy infection  
K94.33 : Esophagostomy malfunction  
K94.39 : Other complications of esophagostomy  
K95.01 : Infection due to gastric band procedure  
K95.09 : Other complications of gastric band procedure  
K95.81 : Infection due to other bariatric procedure  
K95.89 : Other complications of other bariatric procedure  
L40.52 : Psoriatic arthritis mutilans  
L40.53 : Psoriatic spondylitis  
L40.54 : Psoriatic juvenile arthropathy  
L40.59 : Other psoriatic arthropathy  
L40.8 : Other psoriasis  
L40.9 : Psoriasis, unspecified  
L41.0 : Pityriasis lichenoides et varioliformis acuta  
L41.1 : Pityriasis lichenoides chronica  
L41.3 : Small plaque parapsoriasis  
L41.4 : Large plaque parapsoriasis  
L41.5 : Retiform parapsoriasis  
L41.8 : Other parapsoriasis  
L41.9 : Parapsoriasis, unspecified  
L42 : Pityriasis rosea  
L43.0 : Hypertrophic lichen planus  
L43.1 : Bullous lichen planus  
L43.2 : Lichenoid drug reaction  
L43.3 : Subacute (active) lichen planus  
L43.8 : Other lichen planus  
L43.9 : Lichen planus, unspecified  
L44.0 : Pityriasis rubra pilaris  
L44.1 : Lichen nitidus  
L44.2 : Lichen striatus  
L44.3 : Lichen ruber moniliformis  
L44.4 : Infantile papular acrodermatitis [Gianotti-Crosti]  
L44.8 : Other specified papulosquamous disorders  
L44.9 : Papulosquamous disorder, unspecified  
L45 : Papulosquamous disorders in diseases classified elsewhere  
M05.60 : Rheumatoid arthritis of unspecified site with involvement of other organs and systems  
M05.611 : Rheumatoid arthritis of right shoulder with involvement of other organs and systems  
M05.612 : Rheumatoid arthritis of left shoulder with involvement of other organs and systems  
M05.619 : Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems  
M05.621 : Rheumatoid arthritis of right elbow with involvement of other organs and systems  
M05.622 : Rheumatoid arthritis of left elbow with involvement of other organs and systems  
M05.629 : Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems  
M05.631 : Rheumatoid arthritis of right wrist with involvement of other organs and systems



M05.632 : Rheumatoid arthritis of left wrist with involvement of other organs and systems  
M05.639 : Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems  
M05.641 : Rheumatoid arthritis of right hand with involvement of other organs and systems  
M05.642 : Rheumatoid arthritis of left hand with involvement of other organs and systems  
M05.649 : Rheumatoid arthritis of unspecified hand with involvement of other organs and systems  
M05.651 : Rheumatoid arthritis of right hip with involvement of other organs and systems  
M05.652 : Rheumatoid arthritis of left hip with involvement of other organs and systems  
M05.659 : Rheumatoid arthritis of unspecified hip with involvement of other organs and systems  
M05.661 : Rheumatoid arthritis of right knee with involvement of other organs and systems  
M05.662 : Rheumatoid arthritis of left knee with involvement of other organs and systems  
M05.669 : Rheumatoid arthritis of unspecified knee with involvement of other organs and systems  
M05.671 : Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems  
M05.672 : Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems  
M05.679 : Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems  
M05.69 : Rheumatoid arthritis of multiple sites with involvement of other organs and systems  
M05.70 : Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement  
M05.711 : Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement  
M05.712 : Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement  
M05.719 : Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement  
M05.721 : Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement  
M05.722 : Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement  
M05.729 : Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement  
M05.731 : Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement  
M05.732 : Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement  
M05.739 : Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement  
M05.741 : Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement  
M05.742 : Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement  
M05.749 : Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement  
M05.751 : Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement  
M05.752 : Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement  
M05.759 : Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement  
M05.761 : Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement  
M05.762 : Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement  
M05.769 : Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement  
M05.771 : Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement  
M05.772 : Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement  
M05.779 : Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement  
M05.79 : Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement  
M05.80 : Other rheumatoid arthritis with rheumatoid factor of unspecified site  
M05.811 : Other rheumatoid arthritis with rheumatoid factor of right shoulder  
M05.812 : Other rheumatoid arthritis with rheumatoid factor of left shoulder  
M05.819 : Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder  
M05.821 : Other rheumatoid arthritis with rheumatoid factor of right elbow  
M05.822 : Other rheumatoid arthritis with rheumatoid factor of left elbow  
M05.829 : Other rheumatoid arthritis with rheumatoid factor of unspecified elbow  
M05.831 : Other rheumatoid arthritis with rheumatoid factor of right wrist  
M05.832 : Other rheumatoid arthritis with rheumatoid factor of left wrist  
M05.839 : Other rheumatoid arthritis with rheumatoid factor of unspecified wrist  
M05.841 : Other rheumatoid arthritis with rheumatoid factor of right hand



M05.842 : Other rheumatoid arthritis with rheumatoid factor of left hand  
M05.849 : Other rheumatoid arthritis with rheumatoid factor of unspecified hand  
M05.851 : Other rheumatoid arthritis with rheumatoid factor of right hip  
M05.852 : Other rheumatoid arthritis with rheumatoid factor of left hip  
M05.859 : Other rheumatoid arthritis with rheumatoid factor of unspecified hip  
M05.861 : Other rheumatoid arthritis with rheumatoid factor of right knee  
M05.862 : Other rheumatoid arthritis with rheumatoid factor of left knee  
M05.869 : Other rheumatoid arthritis with rheumatoid factor of unspecified knee  
M05.871 : Other rheumatoid arthritis with rheumatoid factor of right ankle and foot  
M05.872 : Other rheumatoid arthritis with rheumatoid factor of left ankle and foot  
M05.879 : Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot  
M05.89 : Other rheumatoid arthritis with rheumatoid factor of multiple sites  
M05.9 : Rheumatoid arthritis with rheumatoid factor, unspecified  
M06.00 : Rheumatoid arthritis without rheumatoid factor, unspecified site  
M06.011 : Rheumatoid arthritis without rheumatoid factor, right shoulder  
M06.012 : Rheumatoid arthritis without rheumatoid factor, left shoulder  
M06.019 : Rheumatoid arthritis without rheumatoid factor, unspecified shoulder  
M06.021 : Rheumatoid arthritis without rheumatoid factor, right elbow  
M06.022 : Rheumatoid arthritis without rheumatoid factor, left elbow  
M06.029 : Rheumatoid arthritis without rheumatoid factor, unspecified elbow  
M06.031 : Rheumatoid arthritis without rheumatoid factor, right wrist  
M06.032 : Rheumatoid arthritis without rheumatoid factor, left wrist  
M06.039 : Rheumatoid arthritis without rheumatoid factor, unspecified wrist  
M06.041 : Rheumatoid arthritis without rheumatoid factor, right hand  
M06.042 : Rheumatoid arthritis without rheumatoid factor, left hand  
M06.049 : Rheumatoid arthritis without rheumatoid factor, unspecified hand  
M06.051 : Rheumatoid arthritis without rheumatoid factor, right hip  
M06.052 : Rheumatoid arthritis without rheumatoid factor, left hip  
M06.059 : Rheumatoid arthritis without rheumatoid factor, unspecified hip  
M06.061 : Rheumatoid arthritis without rheumatoid factor, right knee  
M06.062 : Rheumatoid arthritis without rheumatoid factor, left knee  
M06.069 : Rheumatoid arthritis without rheumatoid factor, unspecified knee  
M06.071 : Rheumatoid arthritis without rheumatoid factor, right ankle and foot  
M06.072 : Rheumatoid arthritis without rheumatoid factor, left ankle and foot  
M06.079 : Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot  
M06.08 : Rheumatoid arthritis without rheumatoid factor, vertebrae  
M06.09 : Rheumatoid arthritis without rheumatoid factor, multiple sites  
N18.1 : Chronic kidney disease, stage 1  
N18.2 : Chronic kidney disease, stage 2 (mild)  
N18.3 : Chronic kidney disease, stage 3 (moderate)  
N18.4 : Chronic kidney disease, stage 4 (severe)  
N18.5 : Chronic kidney disease, stage 5  
N18.6 : End stage renal disease  
N18.9 : Chronic kidney disease, unspecified  
O09.00 : Supervision of pregnancy with history of infertility, unspecified trimester  
O09.01 : Supervision of pregnancy with history of infertility, first trimester  
O09.02 : Supervision of pregnancy with history of infertility, second trimester  
O09.03 : Supervision of pregnancy with history of infertility, third trimester  
O09.10 : Supervision of pregnancy with history of ectopic pregnancy, unspecified trimester  
O09.11 : Supervision of pregnancy with history of ectopic pregnancy, first trimester  
O09.12 : Supervision of pregnancy with history of ectopic pregnancy, second trimester  
O09.13 : Supervision of pregnancy with history of ectopic pregnancy, third trimester



009.211 : Supervision of pregnancy with history of pre-term labor, first trimester  
009.212 : Supervision of pregnancy with history of pre-term labor, second trimester  
009.213 : Supervision of pregnancy with history of pre-term labor, third trimester  
009.219 : Supervision of pregnancy with history of pre-term labor, unspecified trimester  
009.291 : Supervision of pregnancy with other poor reproductive or obstetric history, first trimester  
009.292 : Supervision of pregnancy with other poor reproductive or obstetric history, second trimester  
009.293 : Supervision of pregnancy with other poor reproductive or obstetric history, third trimester  
009.299 : Supervision of pregnancy with other poor reproductive or obstetric history, unspecified trimester  
009.30 : Supervision of pregnancy with insufficient antenatal care, unspecified trimester  
009.31 : Supervision of pregnancy with insufficient antenatal care, first trimester  
009.32 : Supervision of pregnancy with insufficient antenatal care, second trimester  
009.33 : Supervision of pregnancy with insufficient antenatal care, third trimester  
009.40 : Supervision of pregnancy with grand multiparity, unspecified trimester  
009.41 : Supervision of pregnancy with grand multiparity, first trimester  
009.42 : Supervision of pregnancy with grand multiparity, second trimester  
009.43 : Supervision of pregnancy with grand multiparity, third trimester  
009.70 : Supervision of high risk pregnancy due to social problems, unspecified trimester  
009.71 : Supervision of high risk pregnancy due to social problems, first trimester  
009.72 : Supervision of high risk pregnancy due to social problems, second trimester  
009.73 : Supervision of high risk pregnancy due to social problems, third trimester  
009.811 : Supervision of pregnancy resulting from assisted reproductive technology, first trimester  
009.812 : Supervision of pregnancy resulting from assisted reproductive technology, second trimester  
009.813 : Supervision of pregnancy resulting from assisted reproductive technology, third trimester  
009.819 : Supervision of pregnancy resulting from assisted reproductive technology, unspecified trimester  
009.821 : Supervision of pregnancy with history of in utero procedure during previous pregnancy, first trimester  
009.822 : Supervision of pregnancy with history of in utero procedure during previous pregnancy, second trimester  
009.823 : Supervision of pregnancy with history of in utero procedure during previous pregnancy, third trimester  
009.829 : Supervision of pregnancy with history of in utero procedure during previous pregnancy, unspecified trimester  
009.90 : Supervision of high risk pregnancy, unspecified, unspecified trimester  
009.91 : Supervision of high risk pregnancy, unspecified, first trimester  
009.92 : Supervision of high risk pregnancy, unspecified, second trimester  
009.93 : Supervision of high risk pregnancy, unspecified, third trimester  
010.011 : Pre-existing essential hypertension complicating pregnancy, first trimester  
010.012 : Pre-existing essential hypertension complicating pregnancy, second trimester  
010.013 : Pre-existing essential hypertension complicating pregnancy, third trimester  
010.019 : Pre-existing essential hypertension complicating pregnancy, unspecified trimester  
010.111 : Pre-existing hypertensive heart disease complicating pregnancy, first trimester  
010.112 : Pre-existing hypertensive heart disease complicating pregnancy, second trimester  
010.113 : Pre-existing hypertensive heart disease complicating pregnancy, third trimester  
010.119 : Pre-existing hypertensive heart disease complicating pregnancy, unspecified trimester  
010.211 : Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester  
010.212 : Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester  
010.213 : Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester  
010.219 : Pre-existing hypertensive chronic kidney disease complicating pregnancy, unspecified trimester  
010.311 : Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester  
010.312 : Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester  
010.313 : Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester  
010.319 : Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, unspecified trimester  
010.411 : Pre-existing secondary hypertension complicating pregnancy, first trimester  
010.412 : Pre-existing secondary hypertension complicating pregnancy, second trimester



O10.413 : Pre-existing secondary hypertension complicating pregnancy, third trimester  
O10.419 : Pre-existing secondary hypertension complicating pregnancy, unspecified trimester  
O10.911 : Unspecified pre-existing hypertension complicating pregnancy, first trimester  
O10.912 : Unspecified pre-existing hypertension complicating pregnancy, second trimester  
O10.913 : Unspecified pre-existing hypertension complicating pregnancy, third trimester  
O10.919 : Unspecified pre-existing hypertension complicating pregnancy, unspecified trimester  
O13.1 : Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester  
O13.2 : Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester  
O13.3 : Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester  
O13.9 : Gestational [pregnancy-induced] hypertension without significant proteinuria, unspecified trimester  
R00.0 : Tachycardia, unspecified  
R00.1 : Bradycardia, unspecified  
R00.2 : Palpitations  
R00.8 : Other abnormalities of heart beat  
R00.9 : Unspecified abnormalities of heart beat  
R01.0 : Benign and innocent cardiac murmurs  
R01.1 : Cardiac murmur, unspecified  
R01.2 : Other cardiac sounds  
R03.0 : Elevated blood-pressure reading, without diagnosis of hypertension  
R03.1 : Nonspecific low blood-pressure reading  
R04.0 : Epistaxis  
R04.1 : Hemorrhage from throat  
R04.2 : Hemoptysis  
R04.81 : Acute idiopathic pulmonary hemorrhage in infants  
R04.89 : Hemorrhage from other sites in respiratory passages  
R04.9 : Hemorrhage from respiratory passages, unspecified  
R05 : Cough  
R06.00 : Dyspnea, unspecified  
R06.01 : Orthopnea  
R06.02 : Shortness of breath  
R06.09 : Other forms of dyspnea  
R06.1 : Stridor  
R06.2 : Wheezing  
R06.3 : Periodic breathing  
R06.4 : Hyperventilation  
R06.5 : Mouth breathing  
R06.6 : Hiccough  
R06.7 : Sneezing  
R06.81 : Apnea, not elsewhere classified  
R06.82 : Tachypnea, not elsewhere classified  
R06.83 : Snoring  
R06.89 : Other abnormalities of breathing  
R06.9 : Unspecified abnormalities of breathing  
R07.0 : Pain in throat  
R07.1 : Chest pain on breathing  
R07.2 : Precordial pain  
R07.81 : Pleurodynia  
R07.82 : Intercostal pain  
R07.89 : Other chest pain  
R07.9 : Chest pain, unspecified  
R09.01 : Asphyxia  
R09.02 : Hypoxemia





R09.1 : Pleurisy  
R09.2 : Respiratory arrest  
R09.3 : Abnormal sputum  
R09.81 : Nasal congestion  
R09.82 : Postnasal drip  
R09.89 : Other specified symptoms and signs involving the circulatory and respiratory systems  
R10.0 : Acute abdomen  
R10.10 : Upper abdominal pain, unspecified  
R10.11 : Right upper quadrant pain  
R10.12 : Left upper quadrant pain  
R10.13 : Epigastric pain  
R10.2 : Pelvic and perineal pain  
R10.30 : Lower abdominal pain, unspecified  
R10.31 : Right lower quadrant pain  
R10.32 : Left lower quadrant pain  
R10.33 : Periumbilical pain  
R10.811 : Right upper quadrant abdominal tenderness  
R10.812 : Left upper quadrant abdominal tenderness  
R10.813 : Right lower quadrant abdominal tenderness  
R10.814 : Left lower quadrant abdominal tenderness  
R10.815 : Periumbilic abdominal tenderness  
R10.816 : Epigastric abdominal tenderness  
R10.817 : Generalized abdominal tenderness  
R10.819 : Abdominal tenderness, unspecified site  
R10.821 : Right upper quadrant rebound abdominal tenderness  
R10.822 : Left upper quadrant rebound abdominal tenderness  
R10.823 : Right lower quadrant rebound abdominal tenderness  
R10.824 : Left lower quadrant rebound abdominal tenderness  
R10.825 : Periumbilic rebound abdominal tenderness  
R10.826 : Epigastric rebound abdominal tenderness  
R10.827 : Generalized rebound abdominal tenderness  
R10.829 : Rebound abdominal tenderness, unspecified site  
R10.83 : Colic  
R10.84 : Generalized abdominal pain  
R10.9 : Unspecified abdominal pain  
R11.0 : Nausea  
R11.10 : Vomiting, unspecified  
R11.11 : Vomiting without nausea  
R11.12 : Projectile vomiting  
R11.13 : Vomiting of fecal matter  
R11.14 : Bilious vomiting  
R11.2 : Nausea with vomiting, unspecified  
R12 : Heartburn  
R13.0 : Aphagia  
R13.10 : Dysphagia, unspecified  
R13.11 : Dysphagia, oral phase  
R13.12 : Dysphagia, oropharyngeal phase  
R13.13 : Dysphagia, pharyngeal phase  
R13.14 : Dysphagia, pharyngoesophageal phase  
R13.19 : Other dysphagia  
R14.0 : Abdominal distension (gaseous)  
R14.1 : Gas pain



R14.2 : Eructation  
R14.3 : Flatulence  
R15.0 : Incomplete defecation  
R15.1 : Fecal smearing  
R15.2 : Fecal urgency  
R15.9 : Full incontinence of feces  
R16.0 : Hepatomegaly, not elsewhere classified  
R16.1 : Splenomegaly, not elsewhere classified  
R16.2 : Hepatomegaly with splenomegaly, not elsewhere classified  
R17 : Unspecified jaundice  
R18.0 : Malignant ascites  
R18.8 : Other ascites  
R19.00 : Intra-abdominal and pelvic swelling, mass and lump, unspecified site  
R19.01 : Right upper quadrant abdominal swelling, mass and lump  
R19.02 : Left upper quadrant abdominal swelling, mass and lump  
R19.03 : Right lower quadrant abdominal swelling, mass and lump  
R19.04 : Left lower quadrant abdominal swelling, mass and lump  
R19.05 : Periumbilic swelling, mass or lump  
R19.06 : Epigastric swelling, mass or lump  
R19.07 : Generalized intra-abdominal and pelvic swelling, mass and lump  
R19.09 : Other intra-abdominal and pelvic swelling, mass and lump  
R19.11 : Absent bowel sounds  
R19.12 : Hyperactive bowel sounds  
R19.15 : Other abnormal bowel sounds  
R19.2 : Visible peristalsis  
R19.30 : Abdominal rigidity, unspecified site  
R19.31 : Right upper quadrant abdominal rigidity  
R19.32 : Left upper quadrant abdominal rigidity  
R19.33 : Right lower quadrant abdominal rigidity  
R19.34 : Left lower quadrant abdominal rigidity  
R19.35 : Periumbilic abdominal rigidity  
R19.36 : Epigastric abdominal rigidity  
R19.37 : Generalized abdominal rigidity  
R19.4 : Change in bowel habit  
R19.5 : Other fecal abnormalities  
R19.6 : Halitosis  
R19.7 : Diarrhea, unspecified  
R19.8 : Other specified symptoms and signs involving the digestive system and abdomen  
R20.0 : Anesthesia of skin  
R20.1 : Hypoesthesia of skin  
R20.2 : Paresthesia of skin  
R20.3 : Hyperesthesia  
R20.8 : Other disturbances of skin sensation  
R20.9 : Unspecified disturbances of skin sensation  
R21 : Rash and other nonspecific skin eruption  
R22.0 : Localized swelling, mass and lump, head  
R22.1 : Localized swelling, mass and lump, neck  
R22.2 : Localized swelling, mass and lump, trunk  
R22.30 : Localized swelling, mass and lump, unspecified upper limb  
R22.31 : Localized swelling, mass and lump, right upper limb  
R22.32 : Localized swelling, mass and lump, left upper limb  
R22.33 : Localized swelling, mass and lump, upper limb, bilateral



R22.40 : Localized swelling, mass and lump, unspecified lower limb  
R22.41 : Localized swelling, mass and lump, right lower limb  
R22.42 : Localized swelling, mass and lump, left lower limb  
R22.43 : Localized swelling, mass and lump, lower limb, bilateral  
R22.9 : Localized swelling, mass and lump, unspecified  
R23.0 : Cyanosis  
R23.1 : Pallor  
R23.2 : Flushing  
R23.3 : Spontaneous ecchymoses  
R23.4 : Changes in skin texture  
R23.8 : Other skin changes  
R23.9 : Unspecified skin changes  
R25.0 : Abnormal head movements  
R25.1 : Tremor, unspecified  
R25.2 : Cramp and spasm  
R25.3 : Fasciculation  
R25.8 : Other abnormal involuntary movements  
R25.9 : Unspecified abnormal involuntary movements  
R26.0 : Ataxic gait  
R26.1 : Paralytic gait  
R26.2 : Difficulty in walking, not elsewhere classified  
R26.81 : Unsteadiness on feet  
R26.89 : Other abnormalities of gait and mobility  
R26.9 : Unspecified abnormalities of gait and mobility  
R27.0 : Ataxia, unspecified  
R27.8 : Other lack of coordination  
R27.9 : Unspecified lack of coordination  
R29.0 : Tetany  
R29.1 : Meningismus  
R29.2 : Abnormal reflex  
R29.3 : Abnormal posture  
R29.4 : Clicking hip  
R29.5 : Transient paralysis  
R29.6 : Repeated falls  
R29.810 : Facial weakness  
R29.818 : Other symptoms and signs involving the nervous system  
R29.890 : Loss of height  
R29.891 : Ocular torticollis  
R29.898 : Other symptoms and signs involving the musculoskeletal system  
R29.90 : Unspecified symptoms and signs involving the nervous system  
R29.91 : Unspecified symptoms and signs involving the musculoskeletal system  
R30.0 : Dysuria  
R30.1 : Vesical tenesmus  
R30.9 : Painful micturition, unspecified  
R31.0 : Gross hematuria  
R31.1 : Benign essential microscopic hematuria  
R31.9 : Hematuria, unspecified  
R32 : Unspecified urinary incontinence  
R33.0 : Drug induced retention of urine  
R33.8 : Other retention of urine  
R33.9 : Retention of urine, unspecified  
R34 : Anuria and oliguria



R35.0 : Frequency of micturition  
R35.1 : Nocturia  
R35.8 : Other polyuria  
R36.0 : Urethral discharge without blood  
R36.1 : Hematospermia  
R36.9 : Urethral discharge, unspecified  
R37 : Sexual dysfunction, unspecified  
R39.0 : Extravasation of urine  
R39.11 : Hesitancy of micturition  
R39.12 : Poor urinary stream  
R39.13 : Splitting of urinary stream  
R39.14 : Feeling of incomplete bladder emptying  
R39.15 : Urgency of urination  
R39.16 : Straining to void  
R39.2 : Extrarenal uremia  
R39.81 : Functional urinary incontinence  
R39.89 : Other symptoms and signs involving the genitourinary system  
R39.9 : Unspecified symptoms and signs involving the genitourinary system  
R40.0 : Somnolence  
R40.1 : Stupor  
R41.3 : Other amnesia  
R41.4 : Neurologic neglect syndrome  
R41.81 : Age-related cognitive decline  
R41.82 : Altered mental status, unspecified  
R41.83 : Borderline intellectual functioning  
R41.840 : Attention and concentration deficit  
R41.841 : Cognitive communication deficit  
R41.842 : Visuospatial deficit  
R41.843 : Psychomotor deficit  
R41.844 : Frontal lobe and executive function deficit  
R41.89 : Other symptoms and signs involving cognitive functions and awareness  
R41.9 : Unspecified symptoms and signs involving cognitive functions and awareness  
R42 : Dizziness and giddiness  
R43.0 : Anosmia  
R43.1 : Parosmia  
R43.2 : Parageusia  
R43.8 : Other disturbances of smell and taste  
R43.9 : Unspecified disturbances of smell and taste  
R44.0 : Auditory hallucinations  
R44.1 : Visual hallucinations  
R44.2 : Other hallucinations  
R44.3 : Hallucinations, unspecified  
R44.8 : Other symptoms and signs involving general sensations and perceptions  
R44.9 : Unspecified symptoms and signs involving general sensations and perceptions  
R45.0 : Nervousness  
R45.1 : Restlessness and agitation  
R45.2 : Unhappiness  
R45.3 : Demoralization and apathy  
R45.4 : Irritability and anger  
R45.5 : Hostility  
R45.6 : Violent behavior  
R45.7 : State of emotional shock and stress, unspecified



R45.81 : Low self-esteem  
R45.82 : Worries  
R45.83 : Excessive crying of child, adolescent or adult  
R45.84 : Anhedonia  
R45.850 : Homicidal ideations  
R45.851 : Suicidal ideations  
R45.86 : Emotional lability  
R45.87 : Impulsiveness  
R45.89 : Other symptoms and signs involving emotional state  
R46.0 : Very low level of personal hygiene  
R46.1 : Bizarre personal appearance  
R46.2 : Strange and inexplicable behavior  
R46.3 : Overactivity  
R46.4 : Slowness and poor responsiveness  
R46.5 : Suspiciousness and marked evasiveness  
R46.6 : Undue concern and preoccupation with stressful events  
R46.7 : Verbosity and circumstantial detail obscuring reason for contact  
R46.81 : Obsessive-compulsive behavior  
R46.89 : Other symptoms and signs involving appearance and behavior  
R47.01 : Aphasia  
R47.02 : Dysphasia  
R47.1 : Dysarthria and anarthria  
R47.81 : Slurred speech  
R47.82 : Fluency disorder in conditions classified elsewhere  
R47.89 : Other speech disturbances  
R47.9 : Unspecified speech disturbances  
R48.0 : Dyslexia and alexia  
R48.1 : Agnosia  
R48.2 : Apraxia  
R48.3 : Visual agnosia  
R48.8 : Other symbolic dysfunctions  
R48.9 : Unspecified symbolic dysfunctions  
R49.0 : Dysphonia  
R49.1 : Aphonia  
R49.21 : Hypernasality  
R49.22 : Hyponasality  
R49.8 : Other voice and resonance disorders  
R49.9 : Unspecified voice and resonance disorder  
R50.2 : Drug induced fever  
R50.81 : Fever presenting with conditions classified elsewhere  
R50.82 : Postprocedural fever  
R50.83 : Postvaccination fever  
R50.84 : Febrile nonhemolytic transfusion reaction  
R50.9 : Fever, unspecified  
R51 : Headache  
R52 : Pain, unspecified  
R53.0 : Neoplastic (malignant) related fatigue  
R53.1 : Weakness  
R53.2 : Functional quadriplegia  
R53.81 : Other malaise  
R53.82 : Chronic fatigue, unspecified  
R53.83 : Other fatigue



S99.009A : Unspecified physeal fracture of unspecified calcaneus, initial encounter for closed fracture  
S99.009B : Unspecified physeal fracture of unspecified calcaneus, initial encounter for open fracture  
S99.011A : Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for closed fracture  
S99.011B : Salter-Harris Type I physeal fracture of right calcaneus, initial encounter for open fracture  
S99.012A : Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for closed fracture  
S99.012B : Salter-Harris Type I physeal fracture of left calcaneus, initial encounter for open fracture  
S99.019A : Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for closed fracture  
S99.019B : Salter-Harris Type I physeal fracture of unspecified calcaneus, initial encounter for open fracture  
S99.021A : Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for closed fracture  
S99.021B : Salter-Harris Type II physeal fracture of right calcaneus, initial encounter for open fracture  
S99.022A : Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for closed fracture  
S99.022B : Salter-Harris Type II physeal fracture of left calcaneus, initial encounter for open fracture  
S99.029A : Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for closed fracture  
S99.029B : Salter-Harris Type II physeal fracture of unspecified calcaneus, initial encounter for open fracture  
S99.031A : Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for closed fracture  
S99.031B : Salter-Harris Type III physeal fracture of right calcaneus, initial encounter for open fracture  
S99.032A : Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for closed fracture  
S99.032B : Salter-Harris Type III physeal fracture of left calcaneus, initial encounter for open fracture  
S99.039A : Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for closed fracture  
S99.039B : Salter-Harris Type III physeal fracture of unspecified calcaneus, initial encounter for open fracture  
T36.0X6A : Underdosing of penicillins, initial encounter  
T36.1X6A : Underdosing of cephalosporins and other beta-lactam antibiotics, initial encounter  
T36.2X6A : Underdosing of chloramphenicol group, initial encounter  
T36.3X6A : Underdosing of macrolides, initial encounter  
T36.4X6A : Underdosing of tetracyclines, initial encounter  
T36.6X6A : Underdosing of rifampicins, initial encounter  
T36.7X6A : Underdosing of antifungal antibiotics, systemically used, initial encounter  
T36.96XA : Underdosing of unspecified systemic antibiotic, initial encounter  
T37.4X6A : Underdosing of anthelmintics, initial encounter  
T37.5X6A : Underdosing of antiviral drugs, initial encounter  
T37.8X6A : Underdosing of other specified systemic anti-infectives and antiparasitics, initial encounter  
T37.96XA : Underdosing of unspecified systemic anti-infectives and antiparasitics, initial encounter  
T38.0X6A : Underdosing of glucocorticoids and synthetic analogues, initial encounter  
T38.3X6A : Underdosing of insulin and oral hypoglycemic [antidiabetic] drugs, initial encounter  
T38.4X6A : Underdosing of oral contraceptives, initial encounter  
T38.7X6A : Underdosing of androgens and anabolic congeners, initial encounter  
T38.806A : Underdosing of unspecified hormones and synthetic substitutes, initial encounter  
T38.816A : Underdosing of anterior pituitary [adenohypophyseal] hormones, initial encounter  
T38.896A : Underdosing of other hormones and synthetic substitutes, initial encounter  
T38.906A : Underdosing of unspecified hormone antagonists, initial encounter  
T38.996A : Underdosing of other hormone antagonists, initial encounter  
T39.016A : Underdosing of aspirin, initial encounter  
T39.096A : Underdosing of salicylates, initial encounter  
T39.2X6A : Underdosing of pyrazolone derivatives, initial encounter  
T39.316A : Underdosing of propionic acid derivatives, initial encounter  
T39.396A : Underdosing of other nonsteroidal anti-inflammatory drugs [NSAID], initial encounter  
T39.4X6A : Underdosing of antirheumatics, not elsewhere classified, initial encounter  
T39.8X6A : Underdosing of other nonopioid analgesics and antipyretics, not elsewhere classified, initial encounter  
T40.0X6A : Underdosing of opium, initial encounter  
T40.2X6A : Underdosing of other opioids, initial encounter  
T40.3X6A : Underdosing of methadone, initial encounter  
T40.4X6A : Underdosing of other synthetic narcotics, initial encounter



T40.5X6A : Underdosing of cocaine, initial encounter  
T40.606A : Underdosing of unspecified narcotics, initial encounter  
T40.696A : Underdosing of other narcotics, initial encounter  
T40.7X6A : Underdosing of cannabis (derivatives), initial encounter  
T40.906A : Underdosing of unspecified psychodysleptics, initial encounter  
T40.996A : Underdosing of other psychodysleptics, initial encounter  
T41.0X6A : Underdosing of inhaled anesthetics, initial encounter  
T41.1X6A : Underdosing of intravenous anesthetics, initial encounter  
T41.206A : Underdosing of unspecified general anesthetics, initial encounter  
T41.296A : Underdosing of other general anesthetics, initial encounter  
T42.0X6A : Underdosing of hydantoin derivatives, initial encounter  
T42.3X6A : Underdosing of barbiturates, initial encounter  
T43.216A : Underdosing of selective serotonin and norepinephrine reuptake inhibitors, initial encounter  
T43.226A : Underdosing of selective serotonin reuptake inhibitors, initial encounter  
T43.3X6A : Underdosing of phenothiazine antipsychotics and neuroleptics, initial encounter  
T43.506A : Underdosing of unspecified antipsychotics and neuroleptics, initial encounter  
T43.596A : Underdosing of other antipsychotics and neuroleptics, initial encounter  
T43.606A : Underdosing of unspecified psychostimulants, initial encounter  
T83.590A : Infection and inflammatory reaction due to implanted urinary neurostimulation device, initial encounter  
V00.01XA : Pedestrian on foot injured in collision with roller-skater, initial encounter  
V00.02XA : Pedestrian on foot injured in collision with skateboarder, initial encounter  
V00.09XA : Pedestrian on foot injured in collision with other pedestrian conveyance, initial encounter  
V00.112A : In-line roller-skater colliding with stationary object, initial encounter  
V00.118A : Other in-line roller-skate accident, initial encounter  
V00.122A : Non-in-line roller-skater colliding with stationary object, initial encounter  
V00.128A : Other non-in-line roller-skating accident, initial encounter  
V00.132A : Skateboarder colliding with stationary object, initial encounter  
V00.138A : Other skateboard accident, initial encounter  
V00.142A : Scooter (nonmotorized) colliding with stationary object, initial encounter  
V00.148A : Other scooter (nonmotorized) accident, initial encounter  
V00.152A : Heelies colliding with stationary object, initial encounter  
V00.158A : Other heelies accident, initial encounter  
V00.182A : Pedestrian on other rolling-type pedestrian conveyance colliding with stationary object, initial encounter  
V00.188A : Other accident on other rolling-type pedestrian conveyance, initial encounter  
V00.212A : Ice-skater colliding with stationary object, initial encounter  
V00.218A : Other ice-skates accident, initial encounter  
V00.222A : Sledder colliding with stationary object, initial encounter  
V00.228A : Other sled accident, initial encounter  
V00.282A : Pedestrian on other gliding-type pedestrian conveyance colliding with stationary object, initial encounter  
V00.288A : Other accident on other gliding-type pedestrian conveyance, initial encounter  
V00.312A : Snowboarder colliding with stationary object, initial encounter  
V00.318A : Other snowboard accident, initial encounter  
V00.322A : Snow-skier colliding with stationary object, initial encounter  
V00.328A : Other snow-ski accident, initial encounter  
V00.382A : Pedestrian on other flat-bottomed pedestrian conveyance colliding with stationary object, initial encounter  
X50.0XXA : Overexertion from strenuous movement or load, initial encounter  
X50.1XXA : Overexertion from prolonged static or awkward postures, initial encounter  
X50.3XXA : Overexertion from repetitive movements, initial encounter  
X50.9XXA : Other and unspecified overexertion or strenuous movements or postures, initial encounter  
Z19.1 : Hormone sensitive malignancy status



Z19.2 : Hormone resistant malignancy status  
Z33.3 : Pregnant state, gestational carrier  
Z79.84 : Long term (current) use of oral hypoglycemic drugs  
Z83.42 : Family history of familial hypercholesterolemia  
Z84.82 : Family history of sudden infant death syndrome  
Z92.84 : Personal history of unintended awareness under general anesthesia  
Z98.890 : Other specified postprocedural states  
Z98.891 : History of uterine scar from previous surgery

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### **HCPCS Crossref**

G0463 : Hospital outpatient clinic visit for assessment and management of a patient  
G0466 : Federally qualified health center (FQHC) visit, new patient; a medically-necessary, face-to-face encounter (one-on-one) between a new patient and a FQHC practitioner during which time one or more FQHC services are rendered and includes a typical bundle of medicare-covered services that would be furnished per diem to a patient receiving a FQHC visit  
G0501 : Resource-intensive services for patients for whom the use of specialized mobility-assistive technology (such as adjustable height chairs or tables, patient lift, and adjustable padded leg supports) is medically necessary and used during the provision of an office/outpatient, evaluation and management visit (list separately in addition to primary service)  
G0511 : Rural health clinic or federally qualified health center (RHC or FQHC) only, general care management, 20 minutes or more of clinical staff time for chronic care management services or behavioral health integration services directed by an RHC or FQHC practitioner (physician, NP, PA, or CNM), per calendar month  
G0512 : Rural health clinic or federally qualified health center (RHC or FQHC) only, psychiatric collaborative care model (psychiatric COCM), 60 minutes or more of clinical staff time for psychiatric cocm services directed by an RHC or FQHC practitioner (physician, NP, PA, or CNM) and including services furnished by a behavioral health care manager and consultation with a psychiatric consultant, per calendar month  
G9868 : Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the Next Generation ACO model, less than 10 minutes  
G9869 : Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the Next Generation ACO model, 10-20 minutes  
G9870 : Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the Next Generation ACO model, 20 or more minutes

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### **Modifier Crossref**

25 : Significant, Separately Identifiable Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional on the Same Day of the Procedure or Other Service  
27 : Multiple Outpatient Hospital E/M Encounters on the Same Date  
32 : Mandated Services  
33 : Preventive Services  
57 : Decision for Surgery  
80 : Assistant Surgeon  
81 : Minimum Assistant Surgeon  
82 : Assistant Surgeon (when qualified resident surgeon not available)  
95 : Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System  
99 : Multiple Modifiers  
AF : Specialty physician  
AG : Primary physician  
AK : Non participating physician  
AQ : Physician providing a service in an unlisted health professional shortage area (hpsa)





AS : Physician assistant, nurse practitioner, or clinical nurse specialist services for assistant at surgery  
CR : Catastrophe/disaster related  
EP : Service provided as part of medicaid early periodic screening diagnosis and treatment (epsdt) program  
ET : Emergency services  
FP : Service provided as part of family planning program  
G0 : Telehealth Services For Diagnosis, Evaluation, Or Treatment, Of Symptoms Of An Acute Stroke  
GA : Waiver of liability statement issued as required by payer policy, individual case  
GC : This service has been performed in part by a resident under the direction of a teaching physician  
GE : This service has been performed by a resident without the presence of a teaching physician under the primary care exception  
GF : Non-physician (e.g. nurse practitioner (np), certified registered nurse anesthetist (crna), certified registered nurse (crn), clinical nurse specialist (cns), physician assistant (pa)) services in a critical access hospital  
GJ : "opt out" physician or practitioner emergency or urgent service  
GR : This service was performed in whole or in part by a resident in a department of veterans affairs medical center or clinic, supervised in accordance with va policy  
GV : Attending physician not employed or paid under arrangement by the patient's hospice provider  
GW : Service not related to the hospice patient's terminal condition  
HA : Child/adolescent program  
HB : Adult program, non geriatric  
HC : Adult program, geriatric  
HD : Pregnant/parenting women's program  
HU : Funded by child welfare agency  
KX : Requirements specified in the medical policy have been met  
PD : Diagnostic or related non diagnostic item or service provided in a wholly owned or operated entity to a patient who is admitted as an inpatient within 3 days  
Q0 : Investigational clinical service provided in a clinical research study that is in an approved clinical research study  
Q1 : Routine clinical service provided in a clinical research study that is in an approved clinical research study  
Q5 : Service furnished under a reciprocal billing arrangement by a substitute physician; or by a substitute physical therapist furnishing outpatient physical therapy services in a health professional shortage area, a medically underserved area, or a rural area  
Q6 : Service furnished under a fee-for-time compensation arrangement by a substitute physician; or by a substitute physical therapist furnishing outpatient physical therapy services in a health professional shortage area, a medically underserved area, or a rural area  
QJ : Services/items provided to a prisoner or patient in state or local custody, however the state or local government, as applicable, meets the requirements in 42 cfr 411.4 (b)  
TH : Obstetrical treatment/services, prenatal or postpartum

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## **CPT® Lay Terms**

The provider sees a new patient for a brief office visit or other outpatient encounter to treat one or more self-limited or minor medical problems.

## **Clinical Responsibility**

The provider spends approximately 10 minutes face-to-face with a new patient and/or the patient's family in the provider's office or in another outpatient setting to evaluate and manage self-limited or minor medical problems. The provider's evaluation consists of all three of these components: a problem-focused history, a problem-focused physical examination, and straightforward medical decision making. She may provide additional services, including counseling



or coordination of care with other healthcare professionals or agencies, if necessary.

### **Terminology**

Outpatient: A person receiving medical care that does not require admission to a hospital.

### **Tips**

The appropriate evaluation and management, or E/M, service level is based on the medical necessity of performing the key components of the service and also on review of the documentation of the key E/M criteria of the history, exam, and medical decision-making elements.

For other new patient E/M services, select the appropriate code from the range 99202–99205, New Patient Office or Other Outpatient Services.

Use time as the controlling factor to report an office and/or other outpatient visit if more than 50% of the visit is comprised of counseling and coordination of care.

Report a separate and significant E/M service, including outpatient visits with codes 99201–99215 on the same day as another service or procedure. In most of these cases it is appropriate to append a modifier to the E/M service code.

### **Additional Info**

#### **E/M Terms Easy Reference Guide:**

**CC:** Chief Complaint: A concise statement, usually in the patient's words, explaining the main reason for the visit. Look for a symptom, problem, condition, or diagnosis.

**Dx:** Diagnosis

**Hx:** History

**HPI:** History of Present Illness: The HPI consists of these eight areas:

1. Location is the place on the patient's body where the symptoms exist (the lower back, for instance).
2. Context is what the patient was doing when the problem occurred (such as "patient had lower back pain after standing on his feet all day").
3. Quality represents the chief complaint or signs or symptoms. So if a patient reports with a sharp pain in her shoulder, "sharp" is the quality.
4. Timing is the time of day the patient experienced the signs and symptoms. If the notes say, "Pain after standing for long periods, last two weeks," "after standing for long periods" is the timing.
5. Severity shows just how serious the patient's condition is. Providers often show severity in their notes with a scale of 1 (least painful) to 10 (most painful).
6. Duration is how long the patient's signs and symptoms have been present (for instance, "Patient has had sharp/severe shoulder pain, last three weeks").
7. Modifying factors are what the patient did herself to alleviate pain or exacerbate the symptoms (for example,



"Patient's low back pain was worsened by continuing to stand for long periods" or "Pain improved when patient sat for 15-20 minutes").

8. Associated signs and symptoms are any other problems the patient has in addition to the chief complaint (such as blurred vision, an associated symptom of migraines). For most upper-level E/M codes, the provider must cover and document in the HPI a minimum of four of these points.

**MDM:** Medical Decision Making: After gathering information, the clinician must decide what to do. That thinking process, which takes into account risk factors, is medical decision making.

**PFSH:** Past Family and Social History: "Past history" can be medical history, surgical history, and other personal history. "Family history" includes medical events in the patient's family line, such as hereditary diseases that put the patient at risk. "Social history" reviews the individual's past and current activities, such as smoking history, alcohol history, or sexual history.

**ROS:** Review of Systems: An ROS is an inventory of body systems or symptoms about which the provider asks the patient to help establish a diagnosis. CPT® breaks the body into these systems: constitutional symptoms; eyes, ears, nose, mouth, and throat; cardiovascular; respiratory; gastrointestinal; genitourinary; musculoskeletal; integumentary (skin and/or breasts); neurologic; psychiatric; endocrine; hematologic/lymphatic; allergic/immunologic.

## **CPT® Guidelines**

### **Section Specific Guideline**

The following codes are used to report evaluation and management services provided in the office or in an outpatient or other ambulatory facility. A patient is considered an outpatient until inpatient admission to a health care facility occurs.

To report services provided to a patient who is admitted to a hospital or nursing facility in the course of an encounter in the office or other ambulatory facility, see the notes for initial hospital inpatient care (page 16) or initial nursing facility care (page 26).

For services provided in the emergency department, see 99281-99285.

For observation care, see 99217-99226.

For observation or inpatient care services (including admission and discharge services), see 99234-99236.

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## **OPPS**

**This code is not an ASC approved procedure.**

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## **Upcoming and Historical Information**

**01-01-2013**

Code Changed

**Previous Descriptor**



Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.

**01-01-2008**

Code Changed

**Previous Descriptor**

Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.

**01-01-2007**

Code Changed

**Previous Descriptor**

Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a problem focused history; a problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.

**01-01-2006**

Code Changed

**Previous Descriptor**

Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a problem focused history; a problem focused examination; and straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problems are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.

**01-01-1992**

Code Added