
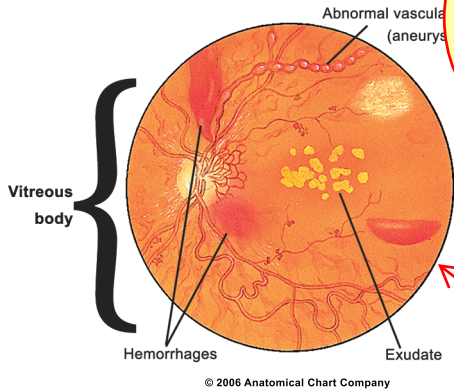


361.8 – 362.55

5th 361.8 Other forms of retinal detachment
361.81 Traction detachment of retina 
 Traction detachment with vitreoretinal organization

Code ranges at the top and in the page tabs for more efficient referencing.

5th 362.0 Diabetic retinopathy
Code first diabetes (249.5, 250.5)



Intuitive symbols denote new and revised 2009 ICD-9-CM codes as well as when additional digits are required.

Full-color, detailed anatomical illustrations give the coder or biller visual cues that facilitate correct code selection.

- 362.01 Background diabetic retinopathy**
 Diabetic retinal microaneurysms
 Diabetic retinopathy NOS
- 362.02 Proliferative diabetic retinopathy**
- 362.03 Nonproliferative diabetic retinopathy NOS**
- 362.04 Mild nonproliferative diabetic retinopathy**
- 362.05 Moderate nonproliferative diabetic retinopathy**
- 362.06 Severe nonproliferative diabetic retinopathy**
- 362.07 Diabetic macular edema**
Note: Code 362.07 must be used with a code for diabetic retinopathy (362.01-362.06)
 Diabetic retinal edema










- 5th 362.1 Other background retinopathy and retinal vascular changes**
- 362.10 Background retinopathy, unspecified**
- 362.11 Hypertensive retinopathy**

ICD-9-CM Official Guidelines (Chapter 7a):
6) Hypertensive Retinopathy
Two codes are necessary to identify the condition. First assign the code from subcategory 362.11, Hypertensive retinopathy, then the appropriate code from categories 401-405 to indicate the type of hypertension.

- 362.12 Exudative retinopathy**
 Coats' syndrome
- 362.13 Changes in vascular appearance**
 Vascular sheathing of retina
 Use additional code for any associated hypertension (440.8)
- 362.14 Retinal microaneurysms NOS**
- 362.15 Retinal telangiectasia**
- 362.16 Retinal neovascularization NOS**
 Neovascularization:
 choroidal
 subretinal
- 362.17 Other intraretinal microvascular abnormalities**
 Retinal varices

Symbols and color bars key located at the bottom of every spread.

- 362.18 Retinal vasculitis**
 Eales' disease
 Retinal:
 arteritis
 endarteritis
 perivasculitis
 phlebitis
- 5th 362.2 Other proliferative retinopathy**
- 362.20 Retinopathy of prematurity, unspecified**
 Retinopathy of prematurity NOS
- 362.21 Retrolental fibroplasia**
 Cicatricial retinopathy of prematurity
- 362.22 Retinopathy of prematurity, stage 0**
- 362.23 Retinopathy of prematurity, stage 1**
- 362.24 Retinopathy of prematurity, stage 2**
- 362.25 Retinopathy of prematurity, stage 3**
- 362.26 Retinopathy of prematurity, stage 4**
- 362.27 Retinopathy of prematurity, stage 5**
- 362.29 Other nondiabetic proliferative retinopathy**

- 5th 362.3 Retinal vascular occlusion**
- 362.30 Retinal vascular occlusion, unspecified** 
- 362.31 Central retinal artery occlusion** 
- 362.32 Arterial branch occlusion** 
- 362.33 Partial arterial occlusion** 
- Hollenhorst plaque
 Retinal microembolism
- 362.34 Transient arterial occlusion** 
- Amaurosis fugax
- 362.35 Central retinal vein occlusion** 
- 362.36 Venous tributary (branch) occlusion**
- 362.37 Venous engorgement**
 Occlusion:
 incipient of retinal vein
 of retinal vein
 of retinal vein
- 362.38 Arteriovenous anastomosis**
 Arteriovenous shunt (serous) (361.2)
 Arteriovenous (361.00-361.07)
- 362.39 Retinal detachment, unspecified** 
- 362.40 Serous retinopathy**
- 362.41 Serous detachment of retinal pigment epithelium** 
- Exudative detachment of retinal pigment epithelium
- 362.43 Hemorrhagic detachment of retinal pigment epithelium** 

Unobtrusive color bars highlight "unacceptable" and "questionable" principal diagnoses, and "manifestation" codes that may require manual claims submission with additional documentation or the use of multiple codes.

Official ICD-9-CM Guidelines incorporated inline with the relevant codes for correct coding guidance directly from CMS and the CDC.

- 5th 362.5 Degeneration of macula and posterior pole**
Excludes degeneration of optic disc (377.21-377.24)
 hereditary retinal degeneration [dystrophy] (362.70-362.77)
- 362.50 Macular degeneration (senile), unspecified**
- 362.51 Nonexudative senile macular degeneration**
 Senile macular degeneration:
 atrophic
 dry
- 362.52 Exudative senile macular degeneration**
 Kuhnt-Junius degeneration
 Senile macular degeneration:
 disciform
 wet
- 362.53 Cystoid macular degeneration**
 Cystoid macular edema
- 362.54 Macular cyst, hole, or pseudohole**
- 362.55 Toxic maculopathy**
 Use additional E to identify drug, if drug induced

- 4th 817 Multiple fractures of hand bones
 - Includes** metacarpal bone(s) with phalanx or phalanges of same hand
 - 817.0 Closed
 - 817.1 Open H E
- 4th 818 Ill-defined fractures of upper limb
 - Includes** arm NOS
multiple bones of same upper limb
 - Excludes** multiple fractures of:
metacarpal bone(s) with phalanx or phalanges (817.0-817.1)
phalanges of hand alone (816.0-816.1)
radius with ulna (813.0-813.9)
 - 818.0 Closed
 - 818.1 Open H E
- 4th 819 Multiple fractures involving both upper limbs, and upper limb with rib(s) and sternum
 - Includes** arm(s) with rib(s) or sternum
both arms [any bones]

ICD-9-CM Official Guidelines (Chapter 17):

b. Coding of Traumatic Fractures

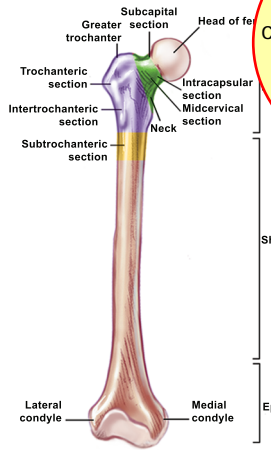
4) Multiple fracture categories 819 and 828

Multiple fracture categories 819 and 828 classify bilateral fractures of both upper limbs (819) and both lower limbs (828), but without any detail at the fourth-digit level other than open and closed type of fractures.

- 819.0 Closed E
- 819.1 Open H E

FRACTURE OF LOWER LIMB (820-829)

4th 820 Fracture of neck of femur



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- 5th 820.0 Transcervical fracture, closed
 - 820.00 Intracapsular section, unspecified H E
 - 820.01 Epiphysis (separation) (upper) H E
Transepiphyseal
 - 820.02 Midcervical section H E
Transcervical NOS
 - 820.03 Base of neck H E
Cervicotrochanteric section
 - 820.09 Other H E
Head of femur
Subcapital
- 5th 820.1 Transcervical fracture, open
 - 820.10 Intracapsular section, unspecified H E
 - 820.11 Epiphysis (separation) (upper) H E
 - 820.12 Midcervical section H E
 - 820.13 Base of neck H E
 - 820.19 Other H E

- 5th 820.2 Petrochanteric fracture, closed
 - 820.20 Trochanteric section, unspecified H E
Trochanter:
NOS
greater
lesser
 - 820.21 Intertrochanteric section H E
 - 820.22 Subtrochanteric section H E
- 5th 820.3 Petrochanteric fracture, open
 - 820.30 Trochanteric section, unspecified H E
 - 820.31 Intertrochanteric section H E
 - 820.32 Subtrochanteric section H E
- 820.8 Unspecified part of neck of femur, closed H E
Hip NOS
Neck of femur NOS
- 820.9 Unspecified part of neck of femur, open H E
- 4th 821 Fracture of other and unspecified parts of femur
 - 5th 821.0 Shaft or unspecified part, closed
 - 821.00 Unspecified part of femur H E
Thigh
Upper leg
 - Excludes** hip NOS (820.8)
 - 821.01 Shaft H E
 - 5th 821.1 Shaft or unspecified part, open
 - 821.10 Unspecified part of femur H E
 - 821.11 Shaft H E
 - 5th 821.2 Lower end, closed
 - Distal end
 - 821.20 Lower end, unspecified part H E
 - 821.21 Condyle, femoral H E
 - 821.22 Epiphysis, lower (separation) H E
 - 821.23 Supracondylar fracture of femur H E
 - 821.29 Other H E
Multiple fractures of lower end
 - 5th 821.3 Lower end, open
 - 821.30 Lower end, unspecified part H E
 - 821.31 Condyle, femoral H E
 - 821.32 Epiphysis, lower (separation) H E
 - 821.33 Supracondylar fracture of femur H E
 - 821.39 Other H E
- 4th 822 Fracture of patella
 - 822.0 Closed H E
 - 822.1 Open H E
- 4th 823 Fracture of tibia and fibula
 - Excludes** Dupuytren's fracture (824.4-824.5)
ankle (824.4-824.5)
radius (813.42, 813.52)
Pott's fracture (824.4-824.5)
that involving ankle (824.0-824.9)

Symbols at the code level provide guidance on which codes can impact DRG assignment as complications and comorbidities (CCs) or major CCs (MCCs).

The following fifth-digit subclassification is for use with category 823:

- 0 tibia alone
- 1 fibula alone
- 2 fibula with tibia

Conditions that trigger non-payment under the new Present on Admissions guidelines are flagged with the Hospital Acquired Conditions flag.

- 823.0 Upper end, closed H E
 - Head
 - Proximal end
 - Tibia:
 - condyles
 - tuberosity
- 5th 823.1 Upper end, open H E
[0-2]

- 36.2 **Heart revascularization by arterial implant**
 Implantation of:
 aortic branches [ascending aortic branches] into heart muscle
 blood vessels into myocardium
 internal mammary artery [internal thoracic artery] into:
 heart muscle
 myocardium
 ventricle
 ventricular wall
 Indirect heart revascularization NOS

4th 36.3 **Other heart revascularization**

- 36.31 **Open chest transmymocardial revascularization**
 36.32 **Other transmymocardial revascularization**
 36.33 **Endoscopic transmymocardial revascularization**
 Robot-assisted transmymocardial revascularization
 Thoracoscopic transmymocardial revascularization
 36.34 **Percutaneous transmymocardial revascularization**
 Endovascular transmymocardial revascularization
 36.39 **Other heart revascularization**
 Abrasion of epicardium
 Cardio-omentopexy
 Intrapericardial poudrage
 Myocardial graft:
 mediastinal fat
 omentum
 pectoral muscles

4th 36.9 **Other operations on vessels of heart**

Code also cardiopulmonary bypass [extracorporeal circulation] [heart-lung machine] (39.61)

- 36.91 **Repair of aneurysm of coronary vessel**
 36.99 **Other operations on vessels of heart**
 Exploration of coronary artery
 Incision of coronary artery
 Ligation of coronary artery
 Repair of arteriovenous fistula

3rd 37 **Other operations on heart and pericardium**

Code also any injection or infusion of platelet inhibitor (99.20)

37.0 **Pericardiocentesis**

4th 37.1 **Cardiotomy and pericardiotomy**

Code also cardiopulmonary bypass [extracorporeal circulation] [heart-lung machine] (39.61)

- 37.10 **Incision of heart, not otherwise specified**
 Cardiolysis NOS
 37.11 **Cardiotomy**
 Incision of:
 atrium
 endocardium
 myocardium
 ventricle
 37.12 **Pericardiotomy**
 Pericardial window operation
 Pericardiolysis
 Pericardiotomy

4th 37.2 **Diagnostic procedures on heart and pericardium**

37.20 **Noninvasive programmed electrical stimulation (NIPS)**

Excludes that as part of intraoperative testing – omit code
 catheter based invasive electrophysiologic testing (37.26)
 device interrogation only without arrhythmia induction (bedside check) (89.45-89.49)

37.21 **Right heart cardiac catheterization**

Cardiac catheterization NOS
Excludes that with catheterization of left heart (37.23)

37.22 **Left heart cardiac catheterization**

Excludes that with catheterization of right heart (37.23)

37.23 **Combined right and left heart cardiac catheterization**

37.24 **Biopsy of pericardium**

37.25 **Biopsy of heart**

37.26 **Catheter based invasive electrophysiologic testing**

Electrophysiologic studies [EPS]
 Code also any concomitant procedure
Excludes that as part of intraoperative testing – omit code
 device interrogation only without arrhythmia induction (bedside check) (89.45-89.49)
 His bundle recording (37.29)
 noninvasive programmed electrical stimulation (NIPS) (37.20)

37.27 **Cardiac mapping**

Code also any concomitant procedure
Excludes electrocardiogram (89.52)
 His bundle recording (37.29)

37.28 **Intracardiac echocardiography**

Echocardiography of heart chambers
 ICE
 Code also any synchronous Doppler flow mapping (88.72)

Excludes intravascular imaging of coronary vessels (intravascular ultrasound) (IVUS) (00.24)

37.29 **Other diagnostic procedures on heart and pericardium**

Excludes angiocardiography (88.50-88.58)
 cardiac function tests (89.41-89.69)
 cardiovascular radioisotopic scan and function study (92.05)
 coronary arteriography (88.55-88.57)
 diagnostic pericardiocentesis (37.0)
 diagnostic ultrasound of heart (88.72)
 x-ray of heart (87.49)

4th 37.3 **Pericardiectomy and excision of lesion of heart**

Code also cardiopulmonary bypass [extracorporeal circulation] [heart-lung machine] (39.61)

37.31 **Pericardiectomy**

Excision of:
 adhesions of pericardium constricting scar of:
 epicardium
 pericardium

37.32 **Excision of aneurysm of heart**

Repair of aneurysm of heart

37.33 **Excision or destruction of other lesion or tissue of heart, open approach**

Ablation of heart tissue (cryoablation) (electrocurrent) (laser) (microwave) (radiofrequency) (resection), open chest approach

Cox-maze procedure
 Maze procedure
 Modified maze procedure, trans-thoracic approach

Excludes ablation, excision or destruction of lesion or tissue of heart, endovascular approach (37.34)
 excision or destruction of left atrial appendage (LAA) (37.36)

Unobtrusive color bars highlight "Valid Operating Room" and "Non-OR" procedure codes to facilitate correct DRG identification

- 37.34 **Excision or destruction of other lesion or tissue of heart, other approach**
 Ablation of heart tissue (cryoablation) (electrocurrent)(laser) (microwave) (radiofrequency) (resection), via peripherally inserted catheter
 Modified maze procedure, endovascular approach
- 37.35 **Partial ventriculectomy** **N**
 Ventricular reduction surgery
 Ventricular remodeling
Code also any synchronous:
 mitral valve repair (35.02, 35.12)
 mitral valve replacement (35.23-35.24)
- 37.36 **Excision or destruction of left atrial appendage (LAA)**
 Clipping of left atrial appendage
 Exclusion of left atrial appendage
 Oversewing of left atrial appendage
 Stapling of left atrial appendage
Includes thoracoscopic approach, minithoracotomy approach
Code also any concomitant procedure performed
Excludes ablation, excision or destruction of lesion or tissue of heart, endovascular approach (37.34)
- ^{4th} 37.4 **Repair of heart and pericardium**
- 37.41 **Implantation of prosthetic cardiac support device around the heart**
 Cardiac support device (CSD)
 Epicardial support device
 Fabric (textile) (mesh) device
 Ventricular support device on surface of heart
Code also any:
 cardiopulmonary bypass [extracorporeal circulation] [heart-lung machine] if performed (39.61)
 mitral valve repair (35.02, 35.12)
 mitral valve replacement (35.23-35.24)
 transesophageal echocardiography (88.72)
Excludes circulatory assist systems (37.61-37.68)
- 37.49 **Other repair of heart and pericardium**
- ^{4th} 37.5 **Heart replacement procedures**
- 37.51 **Heart transplantation** **L**
Excludes combined heart-lung transplantation (33.6)
- ▲ 37.52 **Implantation of total internal biventricular heart replacement heart system** **N/L**
 Artificial heart
 Implantation of fully implantable total replacement heart system, including ventriculectomy
 37.52 is exempt from **N** when billed with diagnosis code V70.7. When covered, 37.52 is subject to **L**
Note: This procedure includes substantial removal of part or all of the biological heart. Both ventricles are resected, and the native heart is no longer intact. Ventriculectomy is included in this procedure; do not code separately.
Excludes implantation of heart assist system [VAD] (37.62, 37.65, 37.66, 37.68)
- ▲ 37.53 **Replacement or repair of thoracic unit of (total) replacement heart system** **N**
Excludes replacement and repair of heart assist system [VAD] (37.63)
- ▲ 37.54 **Replacement or repair of other implantable component of (total) replacement heart system** **N**
 Implantable battery
 Implantable controller
 Transcutaneous energy transfer [TET] device
Excludes replacement and repair of heart assist system [VAD] (37.63)
 replacement or repair of thoracic unit of (total) replacement heart system (37.53)
- 37.55 **Removal of internal biventricular heart replacement system**
 Explantation of artificial heart
Code also any concomitant procedure, such as:
 combined heart-lung transplantation (33.6) heart transplantation (37.51)
 implantation of internal biventricular heart replacement system (37.52)
Excludes explantation [removal] of external heart assist system (37.64)
 explantation [removal] of percutaneous external heart assist device (97.44)
 nonoperative removal of heart assist system (97.44)
 that with replacement or repair of heart replacement system (37.53, 37.54)
- ▲ ^{4th} 37.6 **Implantation of heart and circulatory assist system(s)**
Excludes implantation of prosthetic cardiac support system (37.41)
- 37.60 **Implantation or insertion of biventricular external heart assist system**
 Temporary cardiac support for both left and right ventricles, inserted in the same operative episode
Note: Device (outside the body but connected to heart) with external circulation pump. Ventriculotomy is included; do not code separately.
Includes open chest (sternotomy) procedure for cannulae attachments
Excludes implantation of internal biventricular heart replacement system (artificial heart) (37.52)
 implant of pulsation balloon (37.61)
 insertion of percutaneous external heart assist device (37.68)
 insertion of temporary non-implantable extracorporeal circulatory assist device (37.62)
- 37.61 **Implant of pulsation balloon**
- ▲ 37.62 **Insertion of temporary non-implantable extracorporeal heart circulatory assist system device**
 Acute circulatory support device
 Insertion of heart assist system, NOS
 Insertion of heart pump
 Short-term circulatory support (up to six hours)
Note: Includes explantation of this device; do not code separately.
Excludes implantation of total internal biventricular heart replacement heart system [artificial heart] (37.52)
 implant of external heart assist system (37.65)
 insertion of implantable extracorporeal heart assist system (37.66)
 insertion of percutaneous external heart assist device (37.68)
 removal of heart assist system (37.64)

Intuitive symbols at the code level provide Medicare coverage information for non-covered or limited coverage procedures.

In addition to the "new" and "revised" code symbology, new or revised text is shown with underlines or strike-through to accentuate this year's changes.