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**HEALTH CARE QUALITY INDICATORS PROJECT: PATIENT SAFETY INDICATORS
REPORT 2009**

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Cross-country comparisons on patient safety are cautioned given that data presented in this working paper require further research and development.

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This paper presents the work of several years of research and development work by the HCQI Expert Group, particularly the members of the Patient Safety Subgroup and the data experts contributing data from the following countries: Australia, Belgium, Canada, Denmark, Finland, France, Germany, Iceland, Italy, Ireland, Latvia, Netherlands, New Zealand, Norway, Portugal, Singapore, Spain, Sweden, the United Kingdom and the United States. The authors would like to thank Daniel Tancredi (University of California, Davis) for statistical analysis, Mark Pearson, Gaetan Lafortune, Ian Brownwood and Niek Klazinga for their contributions and Isabelle Vallard for editorial assistance.

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SUMMARY

This paper reports on the progress in the research and development of the set of patient safety indicators developed by the Health Care Quality Indicators project. The indicators presented here have been recommended by an expert group for further consideration in international reporting on the quality of care on the key dimension of safety. The indicators have been selected by expert consensus, undergone validity testing and have been tested for comparability. While concern remains related to differences in coding and reporting from administrative hospital databases, the rigour with which the indicator work has been undertaken has resulted in the improved ability of countries to report on the quality of care. The work on the development of the patient safety indicators highlights the technical progress made in constructing measures and the ongoing need for methodological improvements. The indicators reported here should not be considered as making inferences on the state of patient safety in countries, but are intended to raise questions towards improving understanding of the reported differences.

RÉSUMÉ

Ce document présente l'état d'avancement de la recherche et du développement d'un ensemble d'indicateurs en matière de sécurité des patients dans le cadre du projet sur les indicateurs de la qualité des soins (HCQI). Un groupe d'experts a recommandé l'utilisation des indicateurs présentés ici pour les comparaisons internationales sur une dimension clé de la qualité des soins : la sécurité. Les indicateurs ont été sélectionnés par un consensus d'experts, leur validité et leur comparabilité ont été testées. Bien qu'il reste quelques problèmes quant aux différences de codage et de déclaration venant des bases de données administratives hospitalières, la rigueur du travail sur les indicateurs a permis d'améliorer la capacité des pays à rendre compte de la qualité des soins. Le développement des indicateurs de la sécurité des patients met l'accent sur les progrès techniques réalisés dans la construction de mesures et le besoin récurrent d'améliorer la méthodologie. Les indicateurs présentés ici ne doivent pas donner lieu à des conclusions quant à la situation de la sécurité des patients dans les pays, mais visent plutôt à poser des questions pour une meilleure compréhension des différences observées.

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INTRODUCTION

Background

1. The OECD HCQI project identified patient safety as one of the priority areas for internationally comparable quality indicators. Government officials, national experts, academic researchers from participating countries, and the Secretariat have collaborated in the selection, data collection and validation of the recommended indicators. An extended discussion is presented here outlining the research and development for the seven proposed and agreed-upon indicators.

Box 1. History of the patient safety indicators project

In 2004, the OECD Health Care Quality Indicators Project identified patient safety as one of the five core priority areas for the development of quality indicators (along with cardiac care, primary care, mental health care and diabetes care). Using a structured review process, including a comprehensive literature review, clinician panel review, risk adjustment and empirical analysis, an expert panel selected, evaluated and recommended a set of patient safety indicators for comprehensiveness and cohesiveness across the five domains of patient safety: hospital-acquired infections; operative and postoperative complications; sentinel events¹; obstetrics; and other care-related adverse events. From a total of 59 identified possible indicators, a group of 21 indicators was agreed upon based on their importance and scientific soundness (Millar *et al*, 2004).

In 2006, the first patient safety subgroup expert meeting met to discuss and evaluate the current state of patient safety data systems in OECD countries and potential areas of improvement in order to obtain reliable data for the proposed measures. Adverse events that occur rarely were identified as being somewhat outside the standardised data collection systems. National systems of coding patient safety were identified in OECD countries, although differing versions and adaptations employed in hospital administrative databases were recognised as a key area of development for international data comparability. One of the main outcomes of the meeting was the decision to develop an ICD crosswalk across versions of coding for international harmonisation of data comparability.

A comprehensive technical manual was developed to support the calculation of the 15 patient safety indicators to be collected in national hospital administrative databases. For each of the indicators, the manual provided detailed definitions of the indicators, coding and calculation processes, and a crosswalk from ICD 9 to ICD 10 coding (Drösler, 2008).

¹ While all patient safety indicators refer to events that should occur rarely, sentinel events (including foreign body left in during procedure, transfusion reaction, wrong site surgery, etc.) are those that in theory and practice should never happen and thus whose occurrence should stand as a signal for immediate investigation.

Three years of data collection, indicator development and methodology testing (2007-2009) have included a total participation from 21 countries (Table 1), with monthly teleconference meetings to refine definitions and methodology and yearly meetings of the patient safety expert subgroup to evaluate the validity of the methodology, data reliability and development of the data set. The 2009 data collection included a *revised* technical manual for the calculation of the indicators reflecting refinements and improvements in the methodology (see the Annex).

The long-term objective of the Health Care Quality Indicators project remains to develop a set of internationally comparable indicators that can then be used to raise questions for further exploration of the underlying reasons as to why these differences exist across and within countries. The patient safety indicators (as part of the larger set of quality indicators) represent measures selected for their importance - affect on health, policy relevance and susceptibility to influence by the health care system - and scientific soundness - face validity, content validity and reliability (Mattke *et al.*, 2006).

2. Patient Safety Indicators (PSIs) originally published by the US Agency for Healthcare Research and Quality (AHRQ) have been evaluated to explore the potential of international comparison for patient safety and public reporting. Preliminary pilot studies among seven OECD member countries in 2007 (Drösler *et al.*, 2009), and sixteen countries in 2008 showed the feasibility of the method. Countries were able to calculate most of the PSIs using their administrative hospital databases. Pilot results demonstrated that relative PSI rates appeared to be highly correlated across countries, although some countries had much lower rates for all PSIs than others.

3. The objectives of the PSI development work are:

- 1) To investigate the validity of the PSI rates of participating countries.
- 2) To evaluate the potential impacts on country-specific PSI rates of variation in the distribution of age and gender, length of hospital stay and diagnoses coding practices.

Participating countries

4. During the first three years of indicator development, the following countries (Table 1) participated in the data collection, validity testing and evaluation of the patient safety indicators.

Table 1. Countries participating in the development of the patient safety indicators

| | 2007 | 2008 | 2009 |
|----------------|------|------|------|
| Australia | X | | |
| Belgium | | X | X |
| Canada | X | X | X |
| Denmark | | X | X |
| Finland | | X | X |
| France | | X | X |
| Germany | X | X | X |
| Iceland | | | X |
| Italy | | X | X |
| Ireland | | | X |
| Latvia | | | X |
| Netherlands | | X | |
| New Zealand | | X | X |
| Norway | | X | X |
| Portugal | | X | X |
| Singapore | | X | X |
| Spain | X | X | X |
| Sweden | X | X | X |
| Switzerland | | | X |
| United Kingdom | X | X | X |
| United States | X | X | X |

Methodology

5. A set of 15 patient safety indicators was initially selected for development in 2007. Of these, seven were determined to be ready for data collection and analysis, based on the decision of the OECD's Patient Safety Expert Subgroup in October 2008 (Table 2). The other eight indicators either rely on procedure codes that proved difficult to map across countries (e.g., postoperative respiratory failure, iatrogenic pneumothorax), or they were found to have limited validity in North American studies that distinguished conditions present on admission from hospital-acquired complications (e.g., complications of anaesthesia, decubitus ulcer, postoperative hip fracture).

Table 2: List of patient safety indicators evaluated

| Area | Indicator name | AHRQ PSI | Recommended for ongoing evaluation |
|--|---|----------|------------------------------------|
| Hospital-acquired infections | Catheter-related bloodstream infection | PSI 7 | X |
| | Decubitus ulcer | PSI 3 | |
| Operative and post-operative complications | Complications of anaesthesia | PSI 1 | |
| | Postoperative hip fracture | PSI 8 | |
| | Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT) | PSI 12 | X |
| | Postoperative sepsis | PSI 13 | X |
| | Accidental puncture or laceration | PSI 15 | X |
| | Postoperative respiratory failure | PSI 11 | |
| | Iatrogenic pneumothorax | PSI 6 | |
| Sentinel events | Transfusion reaction | PSI 16 | |
| | Foreign body left in during procedure | PSI 5 | X |
| Obstetrics | Birth trauma - injury to neonate | PSI 17 | |
| | Obstetric trauma – vaginal delivery with instrument | PSI 18 | X |
| | Obstetric trauma – vaginal delivery without instrument | PSI 19 | X |
| | Obstetric trauma - caesarean section | PSI 20 | |

6. An OECD calculation manual was provided (Annex), which adopted the PSI definitions as published by AHRQ (AHRQ, 2007) for most of the indicators. In addition, the manual provided internationally harmonised code lists in ICD-10 (Quan, 2008) as more than half of the participating countries use ICD-10 (Table 3). Countries were asked to complete an accompanying questionnaire to provide information on the databases and related data collection procedures.

7. Patient safety indicators are largely constructed from secondary diagnoses. The calculation of the numerator builds on secondary diagnosis for most of the indicators. The indicator definitions refer to conditions produced post admission.

8. Nineteen countries performed PSI calculations and delivered their results between February and June 2009. Table 3 shows some key country-related information derived from the questionnaires. Most of the participating countries use a hospital reimbursement system based on Diagnosis Related Groups (DRGs). This information is important as DRGs are based on coded health information. The use of coded health data for reimbursement creates incentives for accurate and complete documentation. However, although many countries use a DRG-based reimbursement system, the mean number of secondary diagnoses among eligible cases varied substantially between 0.87 (Italy, postoperative sepsis – PSI 15) and 7.02 (Belgium, accidental puncture or laceration – PSI 13). Finland reported relatively few secondary diagnoses (0.47) in the 2008 PSI calculation pilot but did not provide any information on the number of secondary diagnoses in 2009. Iceland and Latvia provided only obstetric indicators from registry data, so the number of secondary diagnoses is not relevant for these countries.

Table 3. Country-related key information on medical classifications, documentation and reimbursement

| Country | Year | Diagnosis classification | Procedure classification | Mean number of secondary diagnoses, derived from PSI 5 | DRG reimbursement |
|---------------------|------|--------------------------|--------------------------|--|-------------------|
| Belgium | 2006 | ICD-9 CM | ICD-9 CM | 6.72 | Yes |
| Canada | 2007 | ICD-10 CA | CCI | 3.11 | Yes |
| Denmark | 2008 | ICD-10 | NOMESCO | 2.41 | Yes |
| Finland | 2007 | ICD-10 | NOMESCO | NA | Yes |
| France | 2007 | ICD-10 | CCAM | NA | Yes |
| Germany | 2007 | ICD-10 GM (2007) | OPS 2007 | 5.31 | Yes |
| Iceland | 2007 | ICD-10 | NOMESCO | NA | Yes |
| Ireland | 2007 | ICD-10 AM 4th Edition | ACHI | 2.57 | Yes |
| Italy | 2007 | ICD-9 CM (1997) | ICD-9 CM | 1.50 | Yes |
| Latvia | 2007 | NA | NA | NA | NA |
| New Zealand | 2007 | ICD-10 AM | ACHI | 3.93 | Yes |
| Norway | 2007 | ICD-10 | NOMESCO | 1.90 | Yes |
| Portugal | 2007 | ICD-9 CM | ICD-9 CM | NA | Yes |
| Singapore | 2007 | ICD-9-AM | ICD-9-AM | 3.89 | Yes |
| Spain | 2007 | ICD-9 CM V22 (2004) | ICD-9 CM | 3.71 | No ¹ |
| Sweden ² | 2007 | NA | NA | 2.50 | NA |
| Switzerland | 2007 | ICD-10 WHO 1.3 | CHOP (ICD-9-CM) | 3.03 | Yes (partially) |
| United Kingdom | 2007 | ICD-10 | OPCS 4.3 | 2.72 | Yes |
| United States | 2006 | ICD-9 CM | ICD-9 CM | 6.02 | Yes |

1. Reported that a DRG hospital payment system was in use for 2008 pilot.

2. From earlier data collections in 2007 and 2008, Sweden uses ICD-10, NOMESCO and a DRG system in some parts of the country.

9. The number of cases included from each participating country can be approximated by the denominator of PSI 5 (foreign body left in during procedure). The eligible population for this indicator includes nearly all adult medical and surgical cases (Table 4). A comparison to the hospital discharge numbers reported by the OECD (2009) suggests that most countries used their complete administrative database for PSI calculation with the observed differences largely due to the exclusion of paediatric and obstetric patients from the denominator of PSI 5. Three countries (*e.g.* Germany, USA, and Sweden) used a sample for calculating their PSI rates. Only Denmark reported a slightly higher count in the PSI denominator than the total number of hospital discharges, presumably because these data come from 2008 and 2007, respectively.

Table 4. Country-related information on discharge numbers and average length of stay

| Country | Denominator population PSI 5 (in millions) | Estimated annual hospital discharges (in millions, 2007) | Average length of stay (denominator PSI 5) | Average length of stay (2007) |
|----------------|--|--|--|-------------------------------|
| Belgium | 1.52 | 1.83 ¹ | 8.55 | 7.2 ¹ |
| Canada | 1.52 | 2.75 ¹ | 8.14 | 7.3 |
| Denmark | 1.00 | 0.93 | 4.49 | 3.5 ² |
| Finland | 0.94 | 1.00 | 3.60 | 4.6 |
| Germany | 1.27 ³ | 18.67 | 8.76 | 7.8 |
| Ireland | 0.46 | 0.60 | 7.30 | 5.9 ¹ |
| Italy | 7.25 | 8.11 ¹ | 8.34 | 6.7 ¹ |
| New Zealand | 0.43 | 0.59 | 5.51 | NA |
| Norway | 0.62 | 0.82 | 5.30 | 5.0 |
| Portugal | NA | 1.15 | NA | 6.8 |
| Singapore | 0.24 | 0.43 ⁵ | 5.91 | NA |
| Spain | 3.29 | 4.78 | 7.73 | 6.6 ¹ |
| Sweden | 1.26 ³ | 1.51 | 5.05 | 4.5 |
| Switzerland | 0.93 | 1.26 | 8.25 | 7.8 |
| United Kingdom | 6.68 | 7.32 | NA | 7.2 |
| United States | 32.81 ⁴ | 37.74 ² | 4.79 | 5.5 ⁶ |

1. 2006.

2. 2005.

3. PSI calculations are based on a 10% representative sample of the entire population of hospital discharges.

4. PSI calculations are based on a 20% representative sample of US hospital discharges, extrapolated to the total population.

5. www.moh.gov.sg

6. When the same data set (Nationwide Inpatient Sample) from which PSI rates were derived was also used to estimate mean length of stay in the USA, the value was 4.6 days.

Source: OECD Health Data 2009 (for estimated annual hospital discharges and average length of stay)

10. A comparison of mean length of stay between the PSI calculation data and annually reported OECD data on health care activities shows concordance for most countries. It is expected that the average length of stay is longer among the denominator cases of PSI 5 than the corresponding average extracted from OECD Health Data, as children are excluded from the denominator population of PSI 5. Only Finland and USA report a shorter average length of stay in their PSI 5 data than the data they have submitted for OECD Health Data. This discrepancy for the USA is likely due to the use of a different data source for annual reporting to OECD on average length of stay (*i.e.* the American Hospital Associations voluntary annual survey of hospitals).

Validity

11. Applying general concepts of validation to the field of patient safety measurement, several potential domains of validity can be identified. Some of these domains are easier to evaluate than others; unfortunately, the most challenging domains to evaluate are often the most useful for those who wish to understand the meaning of the data.

12. Content validity addresses the extent to which the content of a measure is consistent with professional knowledge about health care quality and the outcomes of high-quality care. Consensual validation is the most rigorous approach for assessing the content validity of health care quality indicators, because it requires agreement or near-consensus among professionals from different disciplines, different regions, and different practice environments. Ideally, the expert panels convened for consensual validation represent all of the disciplines involved in treating the condition(s) of interest, include at least 8-10 members, and discuss all of the relevant evidence supporting use of the quality indicator.

13. Construct validity addresses the extent to which one purported measure of quality is correlated with other measures with which a high correlation would be expected, according to the conceptual framework underlying quality improvement research. The most common application of this approach, known as convergent validity, is to estimate correlations between measures of the process of care and measures of the outcomes of that care. Process measures include both implicit assessments, in which health professionals review available documents or other evidence to formulate a global assessment of quality, and explicit assessments, which focus on specific evidence-based diagnostic tests or treatments. Explicit process measures are typically preferred, because they are often (but not always) based on randomised controlled trials, which are relatively immune to bias from unmeasured confounders. Another approach to construct validation is to study associations between outcome measures and structural indicators, such as nurse staffing levels and skill mix, which have previously been shown to represent markers of quality. Finally, some authors test the construct that any meaningful adverse outcome should be associated with other adverse outcomes. Applied to patient safety measurement, this construct suggests that in-hospital adverse events should be associated with subsequent mortality, re-admissions, prolonged length of stay, and long-term disability.

14. Criterion validity addresses the extent to which one purported measure of quality is correlated with other, better measures of the same phenomenon. It implies the existence of a “gold standard” that can be used to evaluate less costly – and presumably less accurate – measurement methods. Applied to patient safety measurement, this approach typically involves comparing indicators based on routinely collected administrative data with indicators of the same outcomes based on more complex linked data, in-depth medical record review, physician/nurse interview, patient interview, or even direct observation. Criterion validity may represent the strongest validation approach, but its applicability is often limited by the lack of an accepted “gold standard”.

Discussion of the recommended indicators

15. Charts in the following sections do not contain all data displayed in Table 6 (detailed results section below) due to validity concerns. Analysis of data quality revealed documentation patterns with the data that may indicate that some rates from some countries may not have been appropriate for PSI calculation. Even for rare events, zero rates are considered implausible for patient safety events (except sentinel events).

Catheter-related bloodstream infection

Validity

16. *Rationale and concerns.* As nosocomial infections are often preventable (Eggimann *et al.*, 2000), the occurrence of infections in the course of medical care is an important measure of the quality of care. The indicator catheter-related bloodstream infection is supposed to flag cases with a hospital-acquired infection caused by intravenous lines or catheters. Infections related to medical care can be a very serious problem, leading to death in some cases. Often patients experience pain and others discomfort. Currently, WHO Patient Safety promotes the campaign “Clean Care is Safer Care” as it is proven that proper hand hygiene reduces the incidence of catheter-related bloodstream infections (WHO, 2009).

17. *Content (consensual) validity.* Content validity was addressed in the technical report accompanying the original release of the AHRQ PSIs (AHRQ, 2007). Although panellists’ ratings of the “usefulness” of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median rating of this indicator was 7, with indeterminate agreement, on the former dimension, leading to a classification of “acceptable”. The median rating was 6, with indeterminate agreement, on the latter dimension, leading to a classification of “unclear”. Through similar processes, this PSI was endorsed by the OECD Patient Safety Panel (Millar *et al.*, 2004), but rejected by the SimPatIE (Safety Improvement for Patients in Europe) project as “not suitable for implementation” due to potential casemix bias (Kristensen *et al.*, 2009). A 47-member Delphi panel convened by RAND rated this indicator “low” in importance, although an otherwise identical indicator based on clinical data was rated “moderate” in importance and “close to ready for use” (Farley *et al.*, 2008).

18. *Construct (convergent, predictive) validity.* This indicator rates very highly on predictive validity. Cases from the US Nationwide Inpatient Sample (NIS) that were flagged by this PSI in 2000 had 4.3% excess mortality, 9.6 days of excess hospitalisation, and \$38 700 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). This finding was confirmed in the Veterans Affairs (VA) hospital system, where cases that were flagged by this PSI in 2001 had 2.7% excess mortality, 4.5-9.5 days of excess hospitalisation, and \$7 292-13 816 in excess hospital costs, relative to carefully matched controls that were not flagged (Rivard *et al.*, 2008). A more recent replication using 2007 data, corrected for infections that were reported as “present on admission”, estimated 16.1 attributable hospital days and \$33 118 in attributable hospital costs for the average case (Foster *et al.*, 2009). In a commercial claims database from 45 large employers in the USA, each event (aggregating this PSI with postoperative sepsis) was associated not just with 3.1% excess mortality, but also with 7.7% excess readmissions, which added \$2 594 to the total attributable cost per event (Encinosa and Hellinger, 2008). A case control analysis from England estimated excess mortality of 5.7% and 11.4 days of excess hospitalisation (Raleigh *et al.*, 2008). Finally, the largest reported estimates of these impacts came from a study of children at 38 freestanding paediatric hospitals in the USA in 2006 (i.e., 22.4 hospital days, \$172 484 in hospital charges) (Kronman *et al.*, 2008).

19. In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2 116 hospitals surveyed by the Joint Commission in 1997-1999 were not associated with summary evaluation scores (although a later study of 115 hospitals surveyed in 2002 found a significant association with one patient safety practice subscore on “assessing patient needs”) (Thornlow and Merwin, 2009). Indeed, the occurrence of one or more events flagged by this indicator, among 3 594 hospitals that treated Medicare patients in the USA in 2003, was associated with *better* performance on process-of-care measures for three medical conditions and *lower* risk-adjusted mortality for five of six high-risk categories of patients (Isaac and Jha, 2008). Rates of this PSI were inversely associated with adoption of strategic information technology applications among 98 Florida hospitals (Menachemi *et al.*, 2007), and with adoption of electronic medical record (EMR) systems among Medicare patients (Parente and McCullough 2009), but not among 66 Georgia hospitals (Culler *et al.*, 2007).

20. A correlational study based on the 1997-2002 Nationwide Inpatient Sample (USA) labelled this indicator as a “canary measure” because it was significantly and consistently associated with at least nine other AHRQ Patient Safety Indicators at the hospital level (Yao *et al.*, 2009). For both Medicare and Veterans Health Administration patients, this indicator loaded strongly with two other PSIs (iatrogenic pneumothorax and postoperative DVT/PE) on a common factor (Rosen *et al.*, 2009). Finally, this indicator was significantly associated with re-admission within three months (risk ratio= 1.29), but not within one month (risk ratio=1.00), after adjusting for patient characteristics using 2004 surgical data from seven US states (Friedman *et al.*, 2009). Unadjusted data from England confirm the association between this PSI and re-admission (Bottle and Aylin, 2009).

21. Although children aged less than 15 years were excluded from OECD analyses, data on the validity of this indicator in paediatric populations may still be relevant. Physicians participating in the National Association of Children’s Hospitals and Related Institutions’ (NACHRI) Pediatric PSI Collaborative reviewed 145 flagged events from 14 hospitals in 2003, using an online tool to assess implicit process of care, and judged 39% to be preventable and only 31% to be clearly non-preventable (Sedman *et al.*, 2005; Scanlon *et al.*, 2006). In a follow-up study of 2003-2005 data from 28 children’s hospitals (N=285 events), 11% were incorrectly coded and 43% of the remainder were present on admission; only 20-41% of all flagged events were judged to be preventable (Scanlon *et al.*, 2008).

22. *Criterion validity.* No evidence about the criterion validity of this indicator was available before its original release as an AHRQ indicator. It is now known that this indicator has a minor problem due to missing data about timing. Some US data sets now include a “flag” variable denoting whether each diagnosis was present at admission. The percentage of cases flagged by this PSI for whom the event was reported to be a complication of the hospital stay was 65% in California, 65% in New York, 60% in the Rochester, Minnesota area, and 36-44% at the University of Michigan (Houchens *et al.*, 2008; Naessens *et al.*, 2007; Bahl *et al.*, 2008). Hospital-specific rates including infections reported as present on admission were moderately correlated with hospital-specific rates excluding such infections ($r=0.91$ in California, $r=0.88$ in New York), especially among coronary artery bypass surgery patients ($r=0.99$ in California) (Glance *et al.*, 2008).

23. The best recent evidence about the positive predictive value (PPV) of this indicator comes from the 47 hospitals participating in the AHRQ PSI Validation Pilot Project (N=191). In this study, 20% of the flagged events were present at admission, 21% lacked clear documentation of an eligible infection, and 4% had an unreported disqualifying comorbid condition (i.e., cancer, severe malnutrition, immunodeficiencies), leaving 55% that were confirmed as iatrogenic complications (Zrelak *et al.*, 2009). All of the confirmed events were attributable to a vascular device, including central venous catheters (74%), peripheral venous catheters, and arterial catheters.

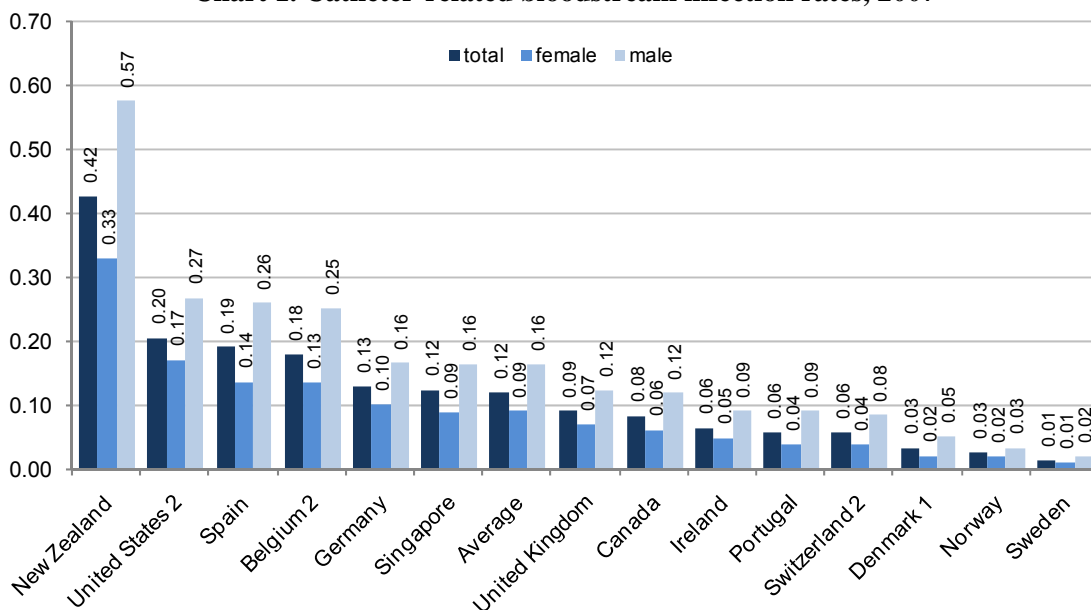
24. A similar review of medical records of 168 cases from 18 English NHS (National Health Service) trusts found that 6% of the flagged events were present at admission and 12% were miscoded, leaving 79% that were confirmed (Bottle and Aylin 2008). Finally, evidence from New York and New Zealand suggests that a significant number of true events may not be ascertained because they occur after hospital discharge; linking 30-day re-admissions in New York increased the overall rate of this PSI from 2.02 to 2.52 per 1 000 eligible discharges; 56% of the post-discharge events were complications of haemodialysis (Gallagher *et al.*, 2005a; Stevanovic 2009). One study from 24 US hospitals participating in a patient safety collaborative reported the sensitivity of this PSI as only 9% relative to case ascertainment using National Healthcare Safety Network protocols (N=89); PPV could not be evaluated due to the study design (Stone *et al.*, 2007).

25. In summary, recent evidence on construct validity and criterion validity is moderately supportive of this indicator. A recent change to the ICD-9-CM coding of catheter-associated infections (999.31 = “infection due to central venous catheter”) should enhance its criterion validity in countries that use ICD-9-CM, by excluding most of the false positive cases captured by the previous definition. Based on limited information, underreporting is a serious concern. Risk adjustment is recommended for inter-provider comparisons (AHRQ, 2007) to ensure that variation due to different patient populations across institutions is removed.

Findings

26. Reported catheter-related bloodstream infection rates vary across participating OECD countries between 0.01 and 0.4% (Chart 1). Hospital-acquired infections occur far more often in male patients than in females in all countries. Direct adjustment for 5-year age-gender strata did not affect indicator rates or rankings across countries. A correlation between indicator rate and amount of documentation can be found for the indicator (Chart 2, Spearman $r=0.912$, $p<0.0001$). In Belgium and USA the mean number of secondary diagnoses is more than two times greater than in Denmark and Switzerland, which might explain elevated infection rates reported by these countries. Underreporting is likely for countries with low infection rates. The rates represented in the charts below have not been age-sex standardised or adjusted for secondary diagnoses or length of stay.

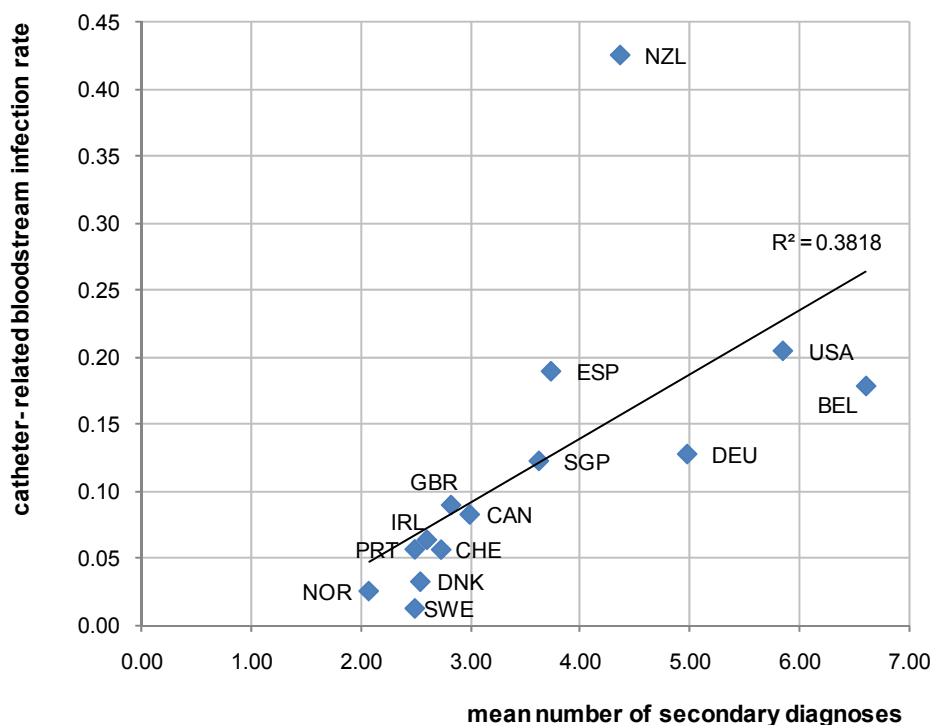
Chart 1. Catheter-related bloodstream infection rates, 2007



1. 2008. 2. 2006

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 2. Catheter-related bloodstream infection rates and mean number of secondary diagnoses, 2007



Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT)*Validity*

27. *Rationale and concerns.* The occurrence of postoperative PE/DVT can range from mild symptoms to devastating clinical consequences including pain, respiratory distress, and death. Regarding pulmonary embolism, the mortality rate is less than 8% when detected and correctly treated but about 30% when the condition is unrecognised and not treated (Olin, 2002). Because PE/DVT can cause unnecessary prolongation of hospital stays as well as unnecessary pain, suffering and death, this indicator has important financial and quality improvement implications. This adverse event can be prevented through the appropriate use of anticoagulants and other preventive measures; evidence based guidelines are available (Geerts *et al.*, 2004). This indicator based on administrative hospital data was proposed in 1994 (Iezzoni *et al.*, 1994) and subsequently further investigated (Miller *et al.*, 2001).

28. *Content (consensual) validity.* Content validity was addressed in the technical report accompanying the original release of the AHRQ PSIs. Although panellists' ratings of the "usefulness" of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median ratings of this indicator on the former dimension from two independent panels were 7 and 6, with indeterminate agreement and disagreement, respectively, leading to classifications of "acceptable" and "unclear", respectively. The median ratings of this indicator on the latter dimension were 6 and 3, with indeterminate agreement, leading to classifications of "unclear" and "unacceptable", respectively.

29. Through similar processes, this PSI was endorsed by the OECD Patient Safety Panel (Millar *et al.*, 2004) and the National Quality Forum (time-limited due to ICD-9-CM changes), but rejected by the SimPatIE (Safety Improvement for Patients in Europe) project as "not suitable for implementation" due to potential casemix bias (Kristensen *et al.*, 2009). A 47-member Delphi panel convened by RAND rated this indicator "moderate" in importance, but lower on validity (i.e., median ratings 8 and 6, respectively) (Farley *et al.*, 2008). Over diagnosis through increased ultrasound screening of high-risk but asymptomatic postoperative patients is an emerging concern (Haut *et al.*, 2007).

30. *Construct (convergent, predictive) validity.* This indicator rates very highly on predictive validity. Cases from the NIS that were flagged by this PSI had 6.6% excess mortality, 5.4 days of excess hospitalisation, and \$21 700 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). This finding was confirmed in the Veterans Affairs hospital system, where cases that were flagged by this PSI had 6.1% excess mortality, 4.5-5.5 days of excess hospitalisation, and \$7 205-9 064 in excess hospital costs, relative to carefully matched controls that were not flagged (Rivard *et al.*, 2008). A more recent replication using 2007 data, corrected for thromboses that were reported as "present on admission", estimated 7.8 attributable hospital days and \$18 331 in attributable hospital costs for the average case (Foster *et al.*, 2009).

31. In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2 116 hospitals surveyed by the Joint Commission in 1997-1999 were marginally ($p=0.06$) associated with summary evaluation scores, in the expected direction. In addition, hospitals with high smoothed rates of this PSI were less likely to receive favourable accreditation decisions than hospitals with lower rates. For both Medicare and Veterans Health Administration patients, this indicator loaded strongly with two other PSIs (iatrogenic pneumothorax and selected infections due to medical care) on a common factor (Rosen *et al.*, 2009). Finally, this indicator was significantly associated with re-admission within either three months (risk ratio=1.28) or one month (risk ratio=1.25), after adjusting for patient characteristics using 2004 surgical data from seven US states (Friedman *et al.*, 2009).

32. Although children aged less than 15 years were excluded from OECD analyses, data on the validity of this indicator in paediatric populations may still be relevant. Physicians participating in the NACHRI Pediatric PSI Collaborative reviewed 120 flagged events from 14 hospitals, using an online tool to assess implicit process of care, and judged only 28% to be preventable and 49% to be clearly non-preventable (Sedman *et al.*, 2005; Scanlon *et al.*, 2006). As a result, this indicator was dropped from the AHRQ Pediatric Quality Indicator module.

33. Historically, this indicator evolved from one of the “flags” in Iezzoni’s Complications Screening Program (CSP). Explicit process of care failures in the CSP validation study were relatively frequent among cases flagged on this indicator (72% of major surgery patients, 69% of medical patients), after excluding patients who had DVT/PE at admission, but unflagged controls were not evaluated on the same criteria (Iezzoni *et al.*, 1999). Major surgical cases flagged on this indicator and unflagged controls differed marginally (11% versus 4%, $p=0.09$) on a composite of 17 generic process criteria. Physician reviewers identified potential quality problems in 50% of major surgery patients and 20% of medical patients flagged on this indicator, versus 2% of unflagged controls for each risk group (Weingart *et al.*, 2000).

34. At least two older studies assessed the construct validity of the ICD-9-CM codes mapped to this PSI through correlation with structural measures of nurse staffing. Needleman and Buerhaus (Needleman *et al.*, 2002) found that nurse staffing was independent of the occurrence of DVT/PE among both major surgical and medical patients from 799 hospitals in 11 states in 1997. However, Kovner and Gergen reported that among 506 community hospitals in the 1993 NIS, having more registered nurse hours and non-RN hours per adjusted patient day were both associated with a lower rate of DVT/PE after major surgery (Kovner and Gergen, 1998). Nurse staffing was not associated with the rate of DVT/PE after invasive vascular procedures. Rates of this PSI were marginally ($p=0.06$) associated with adoption of clinical information technology applications among 98 Florida hospitals (Menachemi *et al.*, 2007), but were not associated with adoption of EMR systems among Medicare patients (Parente and McCullough, 2009) or among 66 Georgia hospitals (Culler *et al.*, 2007).

35. *Criterion validity.* The original CSP definition of this PSI, which differed slightly from the current AHRQ definition, had an adequate confirmation rate among major surgical cases sampled from FY1994 Medicare inpatient claims from California and Connecticut (i.e., 59% according to coders, 70% according to physicians, 68% according to nurses who relied on physician documentation) (Lawthers *et al.*, 2000; Weingart *et al.*, 2000; McCarthy *et al.*, 2000). Several smaller, older studies also suggested adequate sensitivity and PPV of PE codes among surgical patients, although the sensitivity of DVT codes was notably poorer (Keeler *et al.*, 1992; Romano *et al.*, 2002; Hawker *et al.*, 1997; Best *et al.*, 2002). Based on these findings, AHRQ limited this PSI to surgical cases (defined using DRGs).

36. One weakness of this indicator is its inability to distinguish thromboses that were present at admission from thromboses that developed during a hospital stay. Some US data sets now include a “flag” variable denoting whether each diagnosis was present at admission. The percentage of cases flagged by this PSI for whom the event was reported to be a complication of the hospital stay was only 46% in California, 43% in New York, 40% in the Rochester, Minnesota area, and 51-67% at the University of Michigan (Houchens *et al.*, 2008; Naessens *et al.*, 2007; Bahl *et al.*, 2008). Hospital-specific rates including thromboses reported as present on admission were variably correlated with hospital-specific rates excluding such thromboses ($r=0.80$ in California, $r=0.41$ in New York), even among coronary artery bypass surgery patients ($r=0.63$ in California) (Glance *et al.*, 2008).

37. The best recent evidence about the PPV of this indicator comes from the 47 hospitals participating in the AHRQ PSI Validation Pilot project (N=155) and the 33 hospitals participating in a parallel benchmarking initiative by the University Health System Consortium (UHC, N=505). In this study, only 13% of the flagged events were present at admission and 8% lacked clear documentation of an

acute venous thrombosis, leaving 79% that were confirmed as iatrogenic complications (White *et al.*, 2009). However, 29% of the confirmed events involved upper extremity, thoracic, or superficial veins (which are not the target for prevention), reducing the overall PPV for clinical purposes to 56% (95% CI, 52-60%). In the 33 teaching hospitals, abstractors also reviewed 517 cases that were not flagged as having this PSI, and found zero false-negatives (sensitivity=100%; 95% CI, 53-100%). A single US teaching hospital (not in the UHC study) separately reported 87% sensitivity and 50% PPV, using the same clinical definition (Henderson *et al.*, 2009), and eight Belgian hospitals reported 54-59% PPV with only one false negative case among 1,392 records reviewed (Gillet *et al.*, 2008). These estimates significantly exceed the sensitivity and PPV estimates of 68% and 29%, respectively, based on 2002-2004 data from the Medicare Patient Safety Monitoring System (Zhan *et al.*, 2007), suggesting that the validity of this indicator may depend on the number of available diagnosis fields (as Medicare data are limited to nine secondary diagnoses).

38. Comparing hospital administrative data from the Department of Veterans Affairs against the National Surgical Quality Improvement Program's clinically abstracted data from 2001, Romano *et al.*, (2009) reported a sensitivity of 56% and a PPV of 22%, although the PPV in a more recent review of 112 randomly selected cases from 2004-2007 was 56% (Borzecki *et al.*, 2009). As in the AHRQ PSI Validation Pilot, most of the false positives in the VA were attributable to chronic thromboses that were present at admission, upper extremity thromboses, or superficial lower extremity thromboses that did not require anticoagulation.

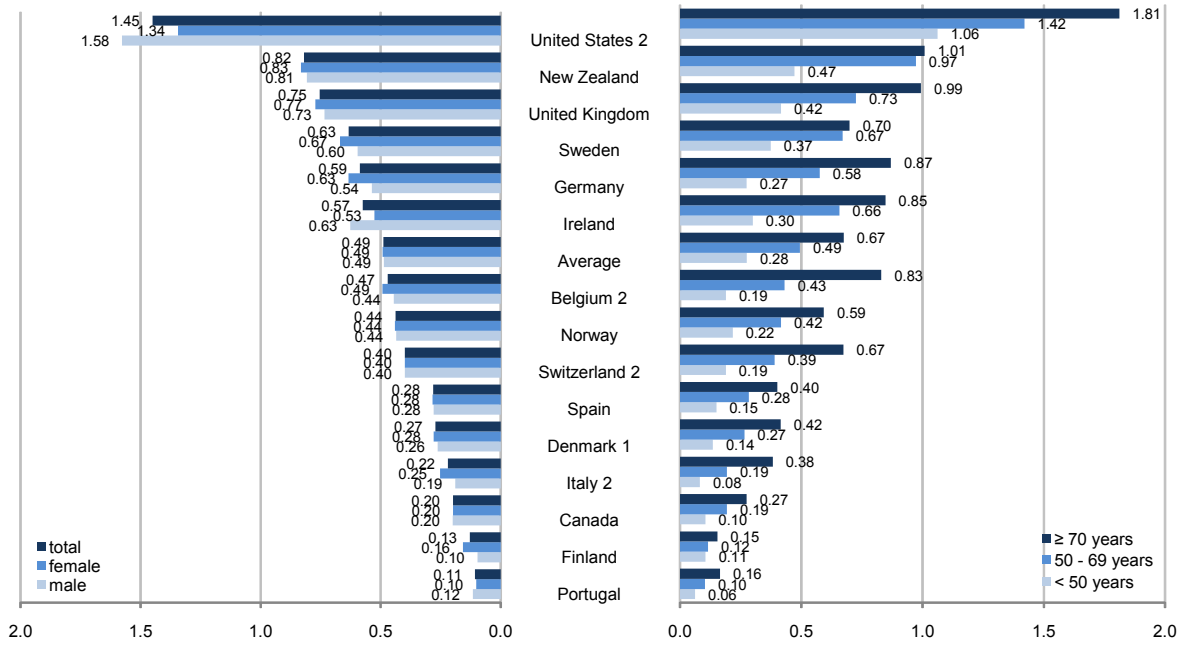
39. Finally, evidence from New York, Denmark, and New Zealand suggests that a significant number of true events may not be ascertained because they occur after hospital discharge; linking 30-day re-admissions in New York increased the overall rate of this PSI from 9.3 to 11.3 per 1,000; 45% of the post-discharge events were pulmonary emboli (Weller *et al.*, 2004; Stevanovic 2009).

40. In summary, recent evidence suggests that this indicator should be used very cautiously for comparing hospital performance unless validated information is available about the timing of the diagnosis and/or the specific veins involved. Recent changes to the ICD-9-CM coding of deep vein thromboses, including new codes specifying superficial, upper extremity, and thoracic thromboses, should enhance criterion validity in countries that use ICD-9-CM, by excluding most of the false positive cases captured by the previous definition. Underreporting does NOT appear to be a problem, based on studies from the USA and Belgium. Over diagnosis through screening of high-risk but asymptomatic postoperative patients is an emerging concern, and may explain the markedly elevated risk of this event at major teaching hospitals and large hospitals (Vartak *et al.*, 2008). Risk adjustment is recommended for inter-provider comparisons (AHRQ, 2007) to ensure that variation due to different patient populations across institutions is removed.

Findings

41. Reported postoperative PE/DVT rates vary across participating OECD countries between 0.1 and 1.4% (Chart 3). Most countries report slightly higher rates in females, but the U.S. and Ireland have higher rates in men and a larger gender discrepancy. As expected, rates are higher in patients aged 70 years and older than in younger age groups in all countries (Chart 3). Direct adjustment for 5-year age-gender strata did not materially affect indicator rates across countries, although two countries moved up one rank (and two others moved down one rank to compensate). A statistically significant dependency between indicator rates and amount of administrative documentation, expressed as the mean number of secondary diagnoses, was found and is shown in Chart 4 (Spearman $r=0.670$, $p=0.009$). Countries with more coded diagnoses reported higher rates. The rates represented in the charts below have not been age-sex standardised or adjusted for secondary diagnoses or length of stay.

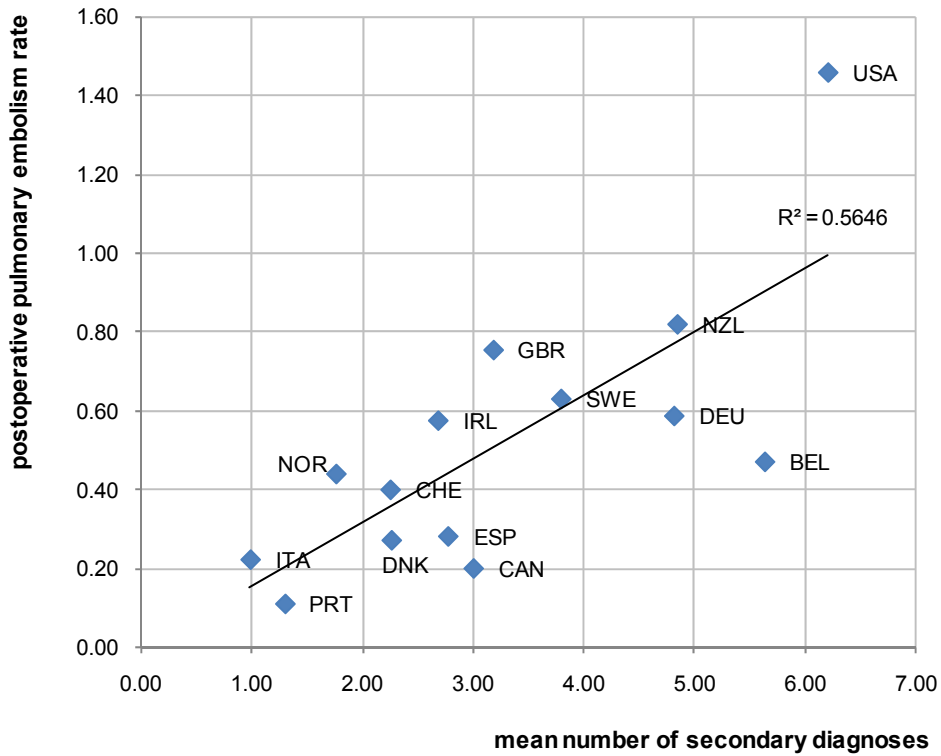
Chart 3. Postoperative pulmonary embolism or deep vein thrombosis, 2007



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 4. Postoperative pulmonary embolism and mean number of secondary diagnoses



Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Postoperative sepsis

Validity

42. *Rationale and concerns.* The occurrence of sepsis following surgery is a severe complication with a mortality rate of up to 30%. Many cases of postoperative sepsis can be prevented through the appropriate use of prophylactic antibiotics, good surgical site preparation, careful and sterile surgical techniques and good postoperative care. Sepsis after elective surgery is considered a severe complication. It usually results from less severe infective complications, such as urinary tract infections, pneumonia and wound infection, which should be avoided and/or properly treated. Consequently, this indicator is a plausible patient safety measure. Given the dramatic nature of this complication, it is likely to be reliably coded in administrative data sources, relative to less serious complications (Miller *et al.*, 2004).

43. *Content (consensual) validity.* Content validity was addressed in a technical report accompanying the original release of the AHRQ PSIs. Although panellists' ratings of the "usefulness" of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median rating of this indicator was 6.5 (with agreement) on the former dimension, and 6 (with indeterminate agreement) on the latter dimension, leading to a classification of "unclear" on both dimensions. Through similar processes, this PSI was endorsed by both the OECD Patient Safety Panel (Millar *et al.*, 2004) and the SimPatIE (Safety Improvement for Patients in Europe) project (Kristensen *et al.*, 2009). A 47-member Delphi panel convened by RAND rated this indicator "moderate" in importance, but lower on validity (i.e., median ratings 8 and 5, respectively) (Farley *et al.*, 2008).

44. *Construct (convergent, predictive) validity.* This indicator rates very highly on predictive validity. Cases from the NIS that were flagged by this PSI had 21.9% excess mortality, 10.9 days of excess hospitalisation, and \$57 700 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). This finding was confirmed in the Veterans Affairs hospital system, where cases that were flagged by this PSI had 30.2% excess mortality, 5.7-18.8 days of excess hospitalisation, and \$13 395-31 262 in excess hospital costs, relative to carefully matched controls that were not flagged (Rivard *et al.*, 2008). A more recent replication using 2007 data, corrected for sepsis that was reported as "present on admission", estimated 13.7 attributable hospital days and \$39 117 in attributable hospital costs for the average case (Foster *et al.*, 2009). In a commercial claims database from 45 large employers in the USA, each event (aggregating this PSI with catheter-related bloodstream infections) was associated not just with 3.1% excess mortality, but also with 7.7% excess readmissions, which added \$2 594 to the total attributable cost per event (Encinosa and Hellinger, 2008). A case control analysis from England estimated excess mortality of 27.1% and 15.9 days of excess hospitalisation (Raleigh *et al.*, 2008). Finally, the largest reported estimates of these impacts came from a study of children at 38 freestanding paediatric hospitals in the USA in 2006 (i.e., 23.5 hospital days, \$261 173 in hospital charges) (Kronman *et al.*, 2008). In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2 116 hospitals surveyed by the Joint Commission in 1997-1999 were marginally ($p=0.10$) associated with summary evaluation scores, in the expected direction. For both Medicare and Veterans Health Administration patients, this indicator loaded strongly with two other PSIs (postoperative sepsis and respiratory failure) on a common factor representing perioperative continuity of care (Rosen *et al.*, 2009). Finally, this indicator was significantly associated with re-admission within three months (risk ratio=1.26), but not within one month (risk ratio=0.99), after adjusting for patient characteristics using 2004 surgical data from seven US states (Friedman *et al.*, 2009). Unadjusted data from England confirm the association between this PSI and re-admission (Bottle and Aylin, 2009).

Although children aged less than 15 years were excluded from OECD analyses, data on the validity of this indicators in paediatric populations may still be relevant. In a study of 2003-2005 data from 28 children's hospitals (N=279 events), 20% were incorrectly coded and 40% of the remainder were present on admission; only 12-32% of all flagged events were judged to be preventable (Scanlon *et al.*, 2008).

45. At least one older study assessed the construct validity of the ICD-9-CM codes mapped to this PSI through correlation with structural measures of nurse staffing. Needleman and Buerhaus (Needleman *et al.*, 2002) found that nurse staffing was independent of the occurrence of sepsis among both major surgical and medical patients from 799 hospitals in 11 states in 1997. Rates of this PSI were inversely associated with adoption of clinical information technology applications among 98 Florida hospitals (Menachemi *et al.*, 2007), but not among 66 Georgia hospitals (Culler *et al.*, 2007).

46. *Criterion validity.* Several small studies provided limited data about the criterion validity of the ICD-9-CM codes mapped to this indicator before its release. Unfortunately, several of these studies either did not clearly document their ICD-9 definitions (Massanari *et al.*, 1987; Belio-Blasco *et al.*, 2000) or did not stratify the subgroup of patients with a secondary diagnosis of DVT/PE (Barbour, 1993). In comparison with the VA's National Surgical Quality Improvement Program database from 123 hospitals in 1994-95, in which "systemic sepsis" was defined by a positive blood culture with systemic manifestations of sepsis within 30 days after surgery, ICD-9-CM diagnoses had a sensitivity of 37% and a PPV of 30% (Best *et al.*, 2002).

47. This indicator has a minor problem due to missing data about timing. Some US data sets now include a "flag" variable denoting whether each diagnosis was present at admission. The percentage of cases flagged by this PSI for whom the event was reported to be a complication of the hospital stay was 73% in California, 70% in New York, 76% in the Rochester, Minnesota area, and 59-60% at the University of Michigan (Houchens *et al.*, 2008; Naessens *et al.*, 2007; Bahl *et al.*, 2008). Hospital-specific rates including sepsis reported as present on admission were moderately correlated with hospital-specific rates excluding such infections ($r=0.72$ in California, $r=0.82$ in New York), especially among coronary artery bypass surgery patients ($r=0.93$ in California) (Glance *et al.*, 2008).

48. The best recent evidence about the PPV of this indicator comes from the 47 hospitals participating in the AHRQ PSI Validation Pilot Project (N=164). In this study, 17% of the flagged events (or precursor infections) were present at admission, and 17% lacked clear documentation of sepsis, bacteraemia, or SIRS (systemic inflammatory response syndrome) with infection, leaving 66% that were confirmed as complications. (However, an additional 25% of flagged cases may have been ineligible because the reviewer perceived the "index" surgery as being non-elective.) The primary site of infection was catheter-related in 24%, lungs in 39%, surgical site in 9%, and urinary tract in 19%. Comparing hospital administrative data from the Department of Veterans Affairs against the National Surgical Quality Improvement Program's clinically abstracted data from 2001, Romano *et al.*, (2009) reported a sensitivity of 37%, PPV of 45%, and positive likelihood ratio of 131. Most of the "false positives" were patients with clinical evidence of sepsis, who were treated for presumptive sepsis, but lacked "definitive evidence of infection". A similar review of medical records of 53 cases from 18 English NHS trusts found that 6% of the flagged events were present at admission and 21% were miscoded, leaving 70% that were confirmed (Bottle and Aylin, 2008). Eight Belgian hospitals reported 45% PPV (largely due to overreporting or failure to satisfy clinical criteria for sepsis), with 25 false negative cases among 1 396 records reviewed (98.2% negative predictive value) (Gillet *et al.*, 2008).

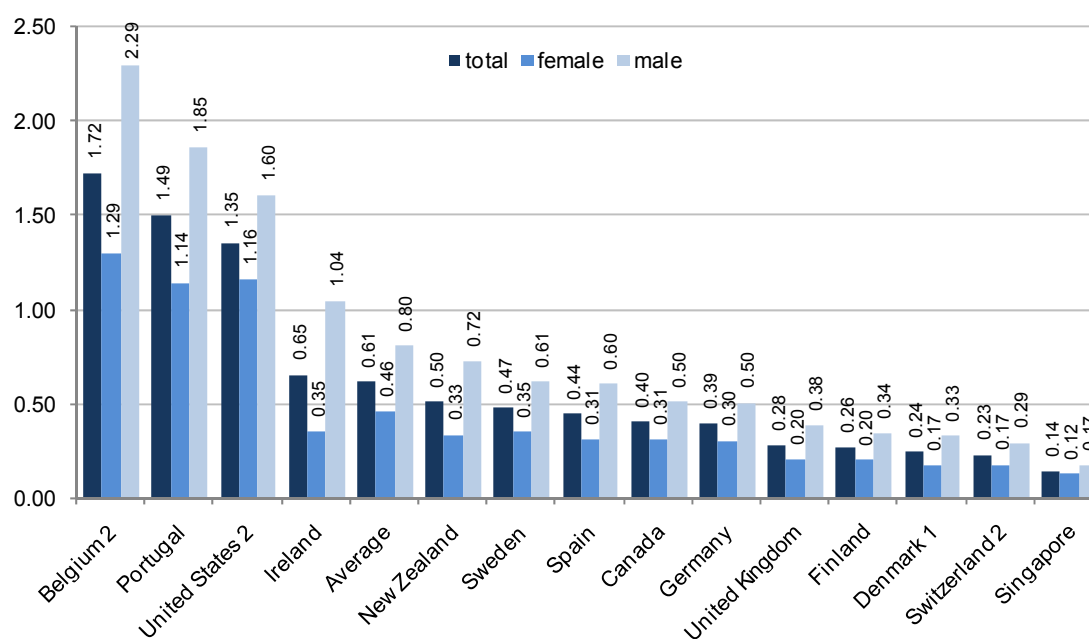
49. In summary, recent evidence on construct validity and criterion validity is somewhat supportive of this indicator, but raises questions about the ability to accurately identify patients for elective surgery. Very little evidence is available on potential underreporting. Risk adjustment is recommended for inter-

provider comparisons (AHRQ, 2007) to ensure that variation due to different patient populations across institutions is removed.

Findings

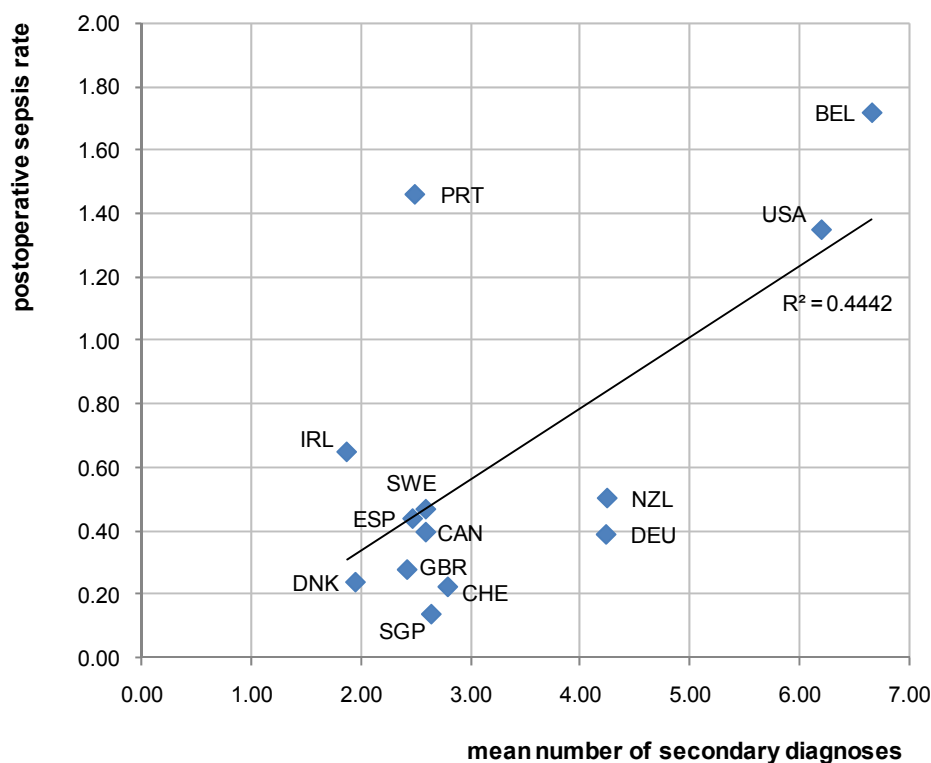
50. Reported postoperative sepsis rates vary across participating countries between 0.2 and 1.7% (Chart 5); the average is 0.61%. Three countries (Belgium, Portugal, and USA) reported markedly higher sepsis rates than the others. Postoperative sepsis occurs far more often in male patients than in females in all countries. This finding corresponds to the literature (Angus *et al.*, 2001). Direct adjustment for 5-year age-gender strata did not materially affect indicator rates across countries, although three countries moved up one rank (and three others moved down one rank to compensate). A non-significant correlation between indicator rates and amount of documentation was found (Chart 6, Spearman $r=0.414$, $p=0.142$), based on the mean number of secondary diagnoses in denominator cases. In Belgium and USA, the mean number of secondary diagnoses is more than two times greater than in Singapore, which might explain elevated infection rates in the first two countries. Underreporting is likely for countries with low infection rates. The rates represented in the charts below have not been age-sex standardised or adjusted for secondary diagnoses or length of stay.

Chart 5. Postoperative sepsis rates, 2007



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 6. Postoperative sepsis rates and mean number of secondary diagnoses, 2007

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Accidental puncture or laceration

Validity

51. *Rationale and concerns.* This indicator captures events related to technical and process limitations of hospital care. While accidental cut, puncture, perforation or laceration during a surgical procedure is a recognised risk, for example of abdominal surgery, elevated rates of such complications may indicate systems problems, such as inadequate training or fatigued health staff. Experts involved in the selection of this indicator stated that some incidents might not be preventable (AHRQ, 2007). The indicator captures surgical as well as medical discharges based on administrative hospital data. They were proposed in 1994 (Iezzoni *et al.*, 1994) and subsequently further investigated (Miller *et al.*, 2001).

52. *Content (consensual) validity.* Content validity was addressed in the technical report accompanying the original release of the AHRQ PSIs. Although panellists' ratings of the "usefulness" of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median rating of this indicator was 7, with agreement, on the former dimension, leading to a classification of "acceptable". The median rating was 6, with indeterminate agreement, on the latter dimension, leading to a classification of "unclear". Through similar processes, this PSI was endorsed by the OECD Patient Safety Panel (Millar *et al.*, 2004) and the US National Quality Forum, but rejected by the SimPatIE (Safety Improvement for Patients in Europe) project as "not workable for implementation in Europe". A 47-member Delphi panel convened by RAND rated this indicator "low" in importance, although the median rating of 7 would have qualified for endorsement in the AHRQ panel process (Farley *et al.*, 2008).

53. *Construct (convergent, predictive) validity.* This indicator rates highly on predictive validity. Cases from the NIS that were flagged by this PSI had 2.2% excess mortality, 1.3 days of excess hospitalisation, and \$8 300 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). This finding was confirmed in the Veterans Affairs hospital system, where cases that were flagged by this PSI had 3.2% excess mortality, 1.4-3.1 days of excess hospitalisation, and \$3 359-6 880 in excess hospital costs, relative to carefully matched controls that were not flagged (Rivard *et al.*, 2008). A more recent replication using 2007 data, corrected for injuries that were reported as “present on admission”, estimated 3.7 attributable hospital days and \$12 087 in attributable hospital costs for the average case (Foster *et al.*, 2009). In a commercial claims database from 45 large employers in the USA, these events (aggregated with four rarer PSIs) were not associated with either excess mortality or excess readmissions (Encinosa and Hellinger, 2008). Finally, the largest reported estimates of these impacts came from a study of children at 38 freestanding paediatric hospitals in the USA in 2006 (i.e., 2.8 hospital days, \$34 884 in hospital charges) (Kronman *et al.*, 2008).

54. In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2,116 hospitals surveyed by the Joint Commission in 1997-1999 were significantly ($p < 0.01$) associated with summary evaluation scores, in the expected direction. For both Medicare and Veterans Health Administration patients, this indicator loaded strongly with three other PSIs (foreign body left in, postoperative haemorrhage or hematoma, and wound dehiscence) on a common factor representing technical complications of care (Rosen *et al.*, 2009). Finally, this indicator was significantly associated with re-admission within either three months (risk ratio=1.29) or one month (risk ratio=1.00), after adjusting for patient characteristics using 2004 surgical data from seven US states (Friedman *et al.*, 2009). Unadjusted data from England confirm the association between this PSI and re-admission (Bottle and Aylin, 2009).

55. Rates of this PSI were inversely associated with adoption of strategic information technology applications among 98 Florida hospitals (Menachemi *et al.*, 2007), but not among 66 Georgia hospitals (Culler *et al.*, 2007).

56. Although children aged less than 15 years were excluded from OECD analyses, data on the validity of this indicator in paediatric populations may still be relevant. Physicians participating in the NACHRI Pediatric PSI Collaborative reviewed 119 flagged events from 14 hospitals, using an online tool to assess implicit process of care, and judged 64% to be preventable and only 14% to be clearly non-preventable (Sedman *et al.*, 2005; Scanlon *et al.*, 2006). In a follow-up study of 2003-2005 data from 28 children’s hospitals (N=285 events), 9% were incorrectly coded and 7% of the remainder were present on admission; 27-57% of all flagged events were judged to be preventable (Scanlon *et al.*, 2008).

57. *Criterion validity.* Several studies that were published before the release of this indicator offered conflicting conclusions about the criterion validity of the underlying ICD-9 codes. For example, a study of laparoscopic cholecystectomy in 18 Ontario hospitals in 1991-95 (Taylor, 1998) found that 95% (99/104) of patients with an ICD-9 code of 998.2 or E870.0 had a confirmed injury to the bile duct or gallbladder (although only 27% were “clinically significant”). A similar study of all cholecystectomies performed in Western Australia between 1988 and 1994 reported that these two codes had a sensitivity of 40% (19/48) and a PPV of 23% (19/84) in identifying bile duct injuries (Valinsky *et al.*, 1999). Among 185 total knee replacement patients from 5 Ontario hospitals in 1984-90, Hawker *et al.*, (1997) found that the sensitivity and PPV of codes describing “miscellaneous mishaps during or as a direct result of surgery” were 86% (6/7) and 55% (6/11), respectively. Romano *et al.*, (2002) identified 19 of 45 chart-confirmed episodes of accidental puncture or laceration using discharge abstracts of discectomy patients at 30 California hospitals in 1990-91, with only one false positive.

58. This indicator does not appear to have a significant problem due to missing data about timing. Some US data sets now include a “flag” variable denoting whether each diagnosis was present at admission. The percentage of cases flagged by this PSI for whom the event was reported to be a complication of the hospital stay was 87% in California, 87% in New York, 85% in the Rochester, Minnesota area, and 84-91% at the University of Michigan (Houchens *et al.*, 2008; Naessens *et al.*, 2007; Bahl *et al.*, 2008). Hospital-specific rates including injuries reported as present on admission were highly correlated with hospital-specific rates excluding such injuries ($r=0.97$ in California, $r=0.96$ in New York, $r=0.95$ for CABG patients).

59. The best recent evidence about the PPV of this indicator comes from the 47 hospitals participating in the AHRQ PSI Validation Pilot Project (N=249). In this study, 2% of the flagged events were present at admission, and 7% lacked clear documentation of an accidental puncture or laceration, leaving about 91% (95% CI, 88-94%) that were confirmed as complications. Of these events, 71% occurred in the abdomen or pelvis, 10% in the chest, and 16% in the spine (Utter *et al.*, 2009). About 75% of the confirmed injuries were categorised as “potentially consequential”, meaning that they would generally require surgical repair. Similarly, the PPV in a recent review of 112 randomly selected cases from the Department of Veterans Affairs in 2004-2007 was 86% (95% CI, 78-92%) (Borzecki *et al.*, 2009).

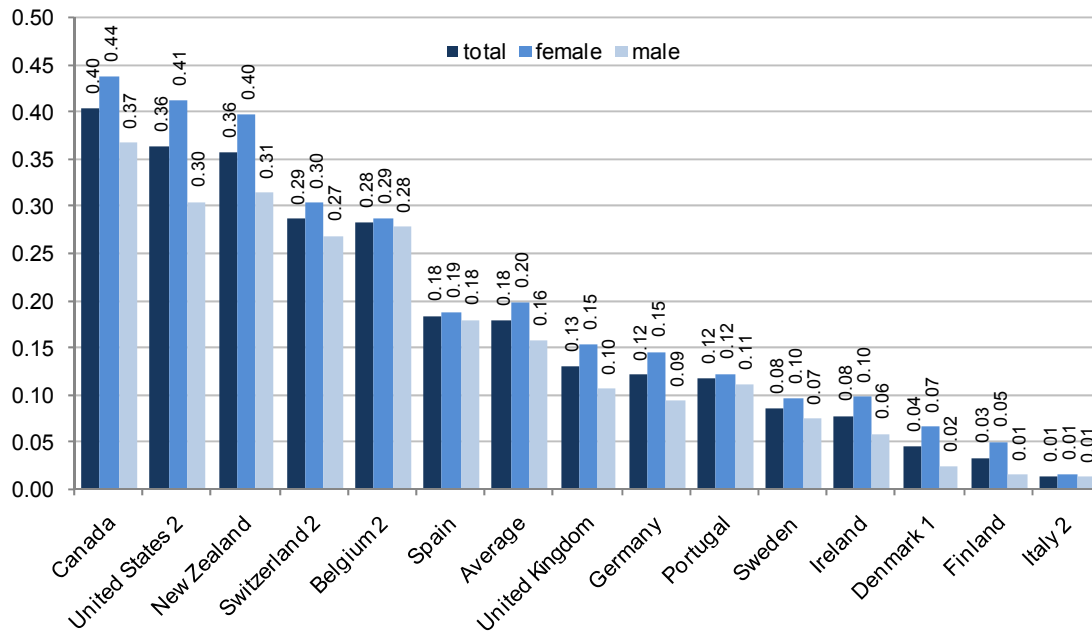
60. There is very limited evidence about the sensitivity of this indicator. Investigators in New York systematically searched their hospital administrative data for procedure codes suggesting repair of iatrogenic injuries, and reported that this PSI may have missed 27% of bladder injuries from hysterectomy, 21% of bowel injuries from cholecystectomy, 47% of abdominal injuries from lysis of adhesions, 54% of abdominal injuries from nephroureterectomy, and 20% of spinal injuries from lumbar surgery (Gallagher *et al.*, 2005b). AHRQ is currently evaluating whether these procedure codes can be added to the PSI definition to improve its sensitivity, without compromising its PPV.

61. In summary, recent evidence on construct validity and criterion validity is moderately supportive of this indicator. Based on limited information, underreporting is a valid concern. Risk adjustment is recommended for inter-provider comparisons (AHRQ, 2007) to ensure that variation due to different patient populations across institutions is removed.

Findings

62. Reported accidental puncture or laceration rates vary across participating OECD countries between 0.01 and 0.4% (Chart 7). Gender subgroups show a slight female predominance of rates in all countries. Direct adjustment for 5-year age-gender strata did not materially affect indicator rates across countries, although two countries switched ranks. Underreporting is assumed for countries reporting low rates. Chart 8 supports this assumption and demonstrates how rates of this indicator are correlated with the amount of administrative documentation (Spearman $r=0.714$, $p=0.006$); however, not all participating countries provided this additional information. The rates represented in the charts below have not been age-sex standardised or adjusted for secondary diagnoses or length of stay.

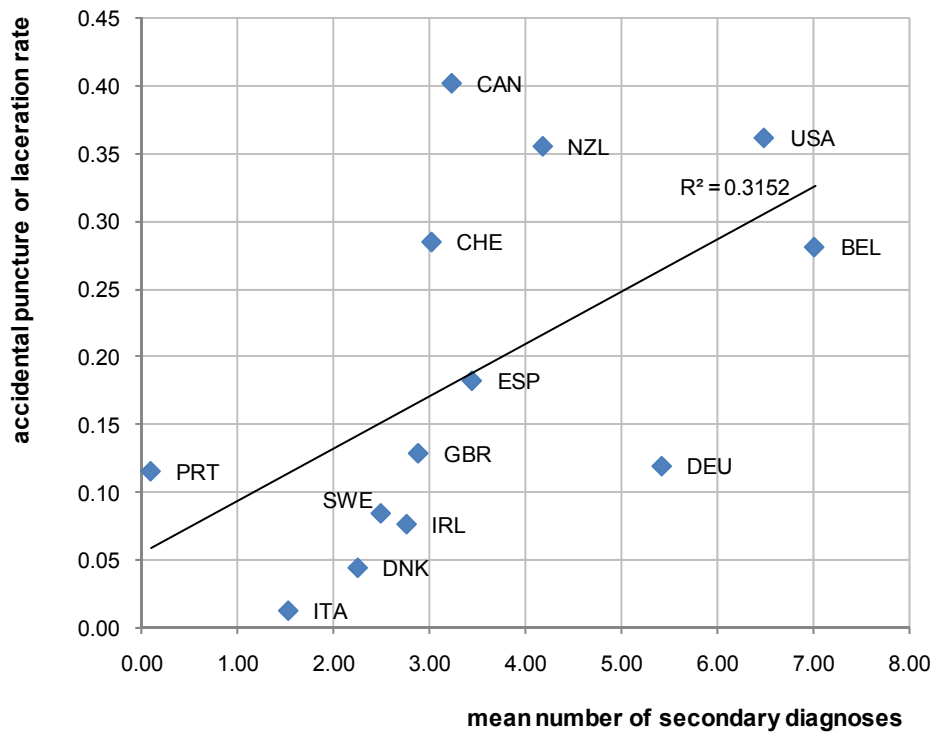
Chart 7. Accidental puncture or laceration rates, 2007



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 8. Accidental puncture or laceration rates and mean number of secondary diagnoses



Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Foreign body left in during procedure*Validity*

63. *Rationale and concerns.* This indicator captures events related to technical and process limitations of hospital care. Errors relating to the failure to remove surgical instruments at the end of a procedure (*i.e.* needles, knife blades, electrosurgical adaptors, safety pins or sponges) are clinically significant in about 50% of all patients with a 10 % mortality following intra-abdominal surgery (Gonzalez-Ojeda *et al.*, 1999). The true frequency of this adverse event remains unclear as underreporting is assumed. Although this indicator captures a rather infrequent complication, it should be addressed after happening. So called sentinel events might reflect serious process problems. This complication is susceptible to be influenced by the health care system: one study identified risk factors for retained instruments and sponges after surgery, namely emergencies, unplanned changes in procedure and obesity (Gawande *et al.*, 2003). The Joint Commission assesses these events as “reviewable” even when the outcome is not death or major permanent loss of function.

64. The indicator captures surgical as well as medical discharges, based on administrative hospital data. It was proposed in 1994 (Iezzoni *et al.*, 1994) and subsequently further investigated (Miller *et al.*, 2001).

65. *Content (consensual) validity.* Content validity was addressed in the technical report accompanying the original release of the AHRQ PSIs. Although panellists’ ratings of the “usefulness” of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median ratings of this indicator on the former dimension from two independent panels were 8 and 7.5, with agreement, leading to classifications of “acceptable” from both panels. The median ratings of this indicator on the latter dimension were 8 and 7, with agreement and indeterminate agreement, respectively, leading to classifications of “acceptable” from both panels. Through similar processes, this PSI was endorsed by the OECD Patient Safety Panel (Millar *et al.* 2004) and the US National Quality Forum, but rejected by the SimPatIE (Safety Improvement for Patients in Europe) project as “not suitable for implementation” due to potential casemix bias (Kristensen *et al.*, 2009). A 47-member Delphi panel convened by RAND rated this indicator “high” in importance, but lower on validity (*i.e.*, median ratings 8 and 6, respectively) (Farley *et al.*, 2008).

66. *Construct (convergent, predictive) validity.* This indicator rates highly on predictive validity. Cases from the NIS that were flagged by this PSI had 2.1% excess mortality, 2.1 days of excess hospitalisation, and \$13 300 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). A more recent replication using 2007 data, corrected for foreign bodies that were reported as “present on admission”, estimated 4.5 attributable hospital days and \$13 202 in attributable hospital costs for the average case (Foster *et al.*, 2009). Finally, the largest reported estimates of these impacts came from a study of children at 38 freestanding paediatric hospitals in the USA in 2006 (*i.e.*, 14.3 hospital days, \$144 889 in hospital charges) (Kronman *et al.*, 2008).

67. In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2 116 hospitals surveyed by the Joint Commission in 1997-1999 were not associated with summary evaluation scores. For both Medicare and Veterans Health Administration patients, this indicator loaded strongly with three other PSIs (accidental puncture or laceration, postoperative haemorrhage or hematoma, and wound dehiscence) on a common factor representing technical complications of care (Rosen *et al.*, 2009). However, unadjusted data from England showed no association between this PSI and readmission (Bottle and Aylin, 2009).

68. Although children aged less than 15 years were excluded from OECD analyses, data on the validity of this indicators in paediatric populations may still be relevant. Physicians participating in the NACHRI Pediatric PSI Collaborative reviewed 45 flagged events from 14 hospitals, using an online tool to assess implicit process of care, and judged 51% to be preventable and only 27% to be clearly non-preventable (Sedman *et al.*, 2005; Scanlon *et al.*, 2006). In a follow-up study of 2003-2005 data from 28 children's hospitals (N=72 events), 22% were incorrectly coded and 20% of the remainder were present on admission; 28-50% of all flagged events were judged to be preventable (Scanlon *et al.*, 2008).

69. *Criterion validity.* No evidence about the criterion validity of this indicator was available before its original release as an AHRQ indicator. This indicator may have a problem due to missing data about timing. Some US data sets now include a "flag" variable denoting whether each diagnosis was present at admission. The percentage of cases flagged by this PSI for whom the event was reported to be a complication of the hospital stay was 64% in California, 76% in New York, 54% in the Rochester, Minnesota area, and 33-80% at the University of Michigan (Houchens *et al.*, 2008; Naessens *et al.*, 2007; Bahl *et al.*, 2008). Hospital-specific rates including foreign bodies reported as present on admission were highly correlated with hospital-specific rates excluding such foreign bodies ($r=0.89$ in California, $r=0.94$ in New York).

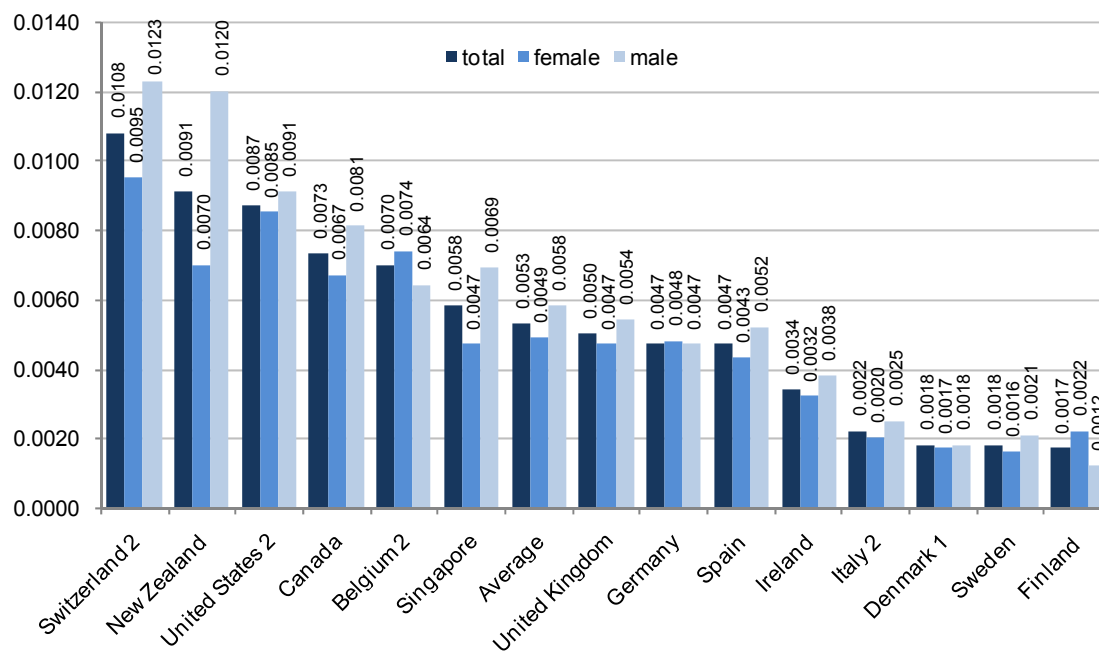
70. A review of medical records of 29 cases from 18 English NHS (National Health Service) trusts found that 10% of the flagged events were present at admission and 38% were miscoded, leaving 52% that were confirmed (Bottle and Aylin, 2008). A validation study in the USA is currently underway. However, recent evidence from New Zealand suggests that a significant number of true events may not be ascertained because they occur after hospital discharge (Stevanovic, 2009).

71. In summary, recent evidence on construct validity and criterion validity is moderately supportive of this indicator. No information on underreporting is currently available. Risk adjustment is not recommended, based on the rarity and sentinel nature of this outcome (AHRQ, 2007).

Findings

72. Reported rates of foreign body left in during procedure vary across participating OECD countries from 2 to 11 cases per 100 000 hospital admissions (Chart 9). Regarding inter-country variability, this indicator varies least across countries among all patient safety indicators. Rather low rates in general reflect the nature of a sentinel event indicator and make scientifically sound interpretations of age or gender subgroup data difficult. Direct adjustment for 5-year age-gender strata did not materially affect indicator rates across countries, although one country moved up two ranks (and two others moved down one rank to compensate). Underreporting is suspected for countries reporting low rates. Chart 10 supports this hypothesis and demonstrates how indicator rates are dependent on the amount of administrative documentation (Spearman $r=0.621$, $p=0.024$); however, the relationship is less consistent than for other PSIs. The rates represented in the charts below have not been age-sex standardised or adjusted for secondary diagnoses or length of stay.

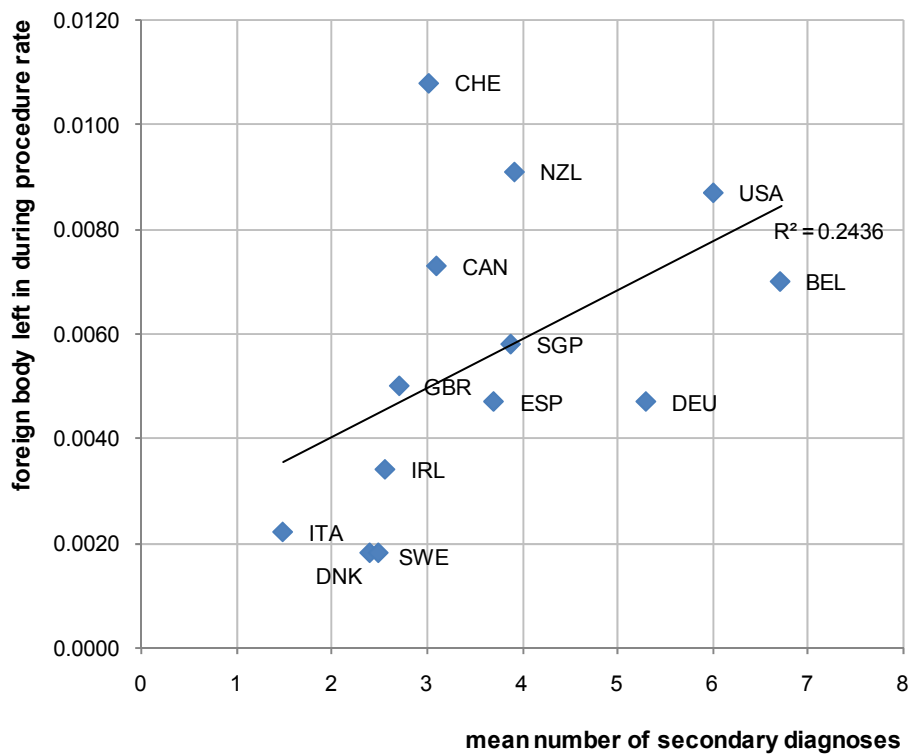
Chart 9. Foreign body left in during procedure rates, 2007



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 10. Foreign body left in during procedure and mean number of secondary diagnoses



Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Obstetric trauma – vaginal delivery with instrument***Obstetric trauma – vaginal delivery without instrument****Validity*

73. *Rationale and concerns.* These indicators are intended to flag cases of potentially preventable trauma (3rd and 4th degree perineal tears) during vaginal delivery. It is estimated that in about 11% of all deliveries perineal trauma associated with subsequent faecal incontinence occurs (Dudding *et al.*, 2008). Although risk factors as prolonged labour and no previous deliveries have been identified, precise recommendations for labour management in order to prevent obstetric lacerations remain unclear (Wheeler and Richter, 2007) resulting in an unclear preventability of these indicators. However, the percentage of deliveries involving higher degree lacerations is a useful monitor for the quality of obstetrical care and can assist in reducing the morbidity. Obstetric trauma indicators have been used by the US Joint Commission as well as by different international quality initiatives analysing obstetric data such as “BQS” the German statutory external quality assurance programme. As the risk of a perineal laceration is significantly increased in instrument-assisted labour (vacuum, forceps), rates for this patient population are reported separately.

74. *Content (consensual) validity.* Content validity was addressed in the technical report accompanying the original release of the AHRQ PSIs. Although panellists’ ratings of the “usefulness” of each candidate indicator were used to select the final PSI set, panellists were also asked to rate each indicator on its preventability and its likelihood of being due to medical error. The median rating of this indicator was 7, with agreement, on the former dimension, leading to a classification of “acceptable”. The median rating was 5, with disagreement, on the latter dimension, leading to a classification of “unclear”. Through similar processes, this PSI was endorsed by both the OECD Patient Safety Panel (Millar *et al.*, 2004) and the SimPatIE (Safety Improvement for Patients in Europe) project (Kristensen *et al.*, 2009). A 47-member Delphi panel convened by RAND rated this indicator “moderate” in importance, but lower on validity (i.e., median ratings 8 and 5, respectively) (Farley *et al.*, 2008). A similar indicator was initially implemented by the Joint Commission, which accredits health care organisations in the US, but subsequently withdrawn. The obstetric indicator was withdrawn because of clinical controversy about how often these lacerations are preventable, and whether use of the indicator could inadvertently promote caesarean delivery for questionable clinical indications. Empirically, we found no association between risk-adjusted laceration rates and caesarean rates at the hospital level (unpublished data) in California.

75. *Construct (convergent, predictive) validity.* This indicator rates moderately on predictive validity. Cases from the NIS that were flagged by this PSI had no excess mortality, but they did have 0.05-0.07 excess hospital days and up to \$220 in excess hospital charges, relative to carefully matched controls that were not flagged (Zhan and Miller, 2003). The reported differences in hospital length-of-stay and total charges were small, but statistically significant given the large number of events. A more recent replication using 2007 data, corrected for lacerations that were reported as “present on admission”, estimated 0.13-0.14 attributable hospital days and \$210-243 in attributable hospital costs for the average case (Foster *et al.*, 2009). Finally, a case control analysis from England estimated 0.48-0.56 days of excess hospitalisation (Raleigh *et al.*, 2008).

76. In a study testing construct validity using an implicit process measure of quality (Miller *et al.*, 2005), smoothed rates of this PSI among 2,116 hospitals surveyed by the Joint Commission in 1997-1999 were positively (counter intuitively) associated ($p=0.04$) with summary evaluation scores, but only in the subset of women with forceps or vacuum deliveries. Similarly, unadjusted data from England showed no association between this PSI and readmission (Bottle and Aylin, 2009).

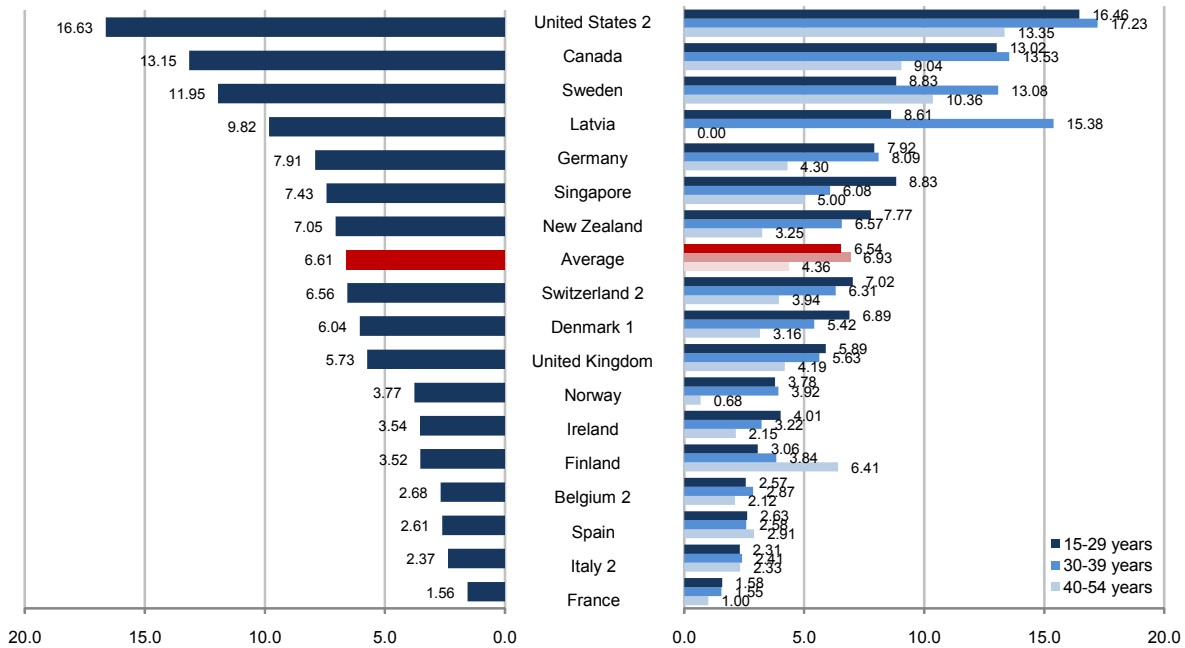
77. *Criterion validity.* No evidence about the criterion validity of this indicator was available before its release. This indicator is not likely to have a significant problem due to missing data about timing, because the indicator is inherently limited to women who have an in-hospital delivery. The best data about criterion validity come from the California Obstetric Validation Study (Romano *et al.*, 2005), which involved a stratified random cluster sample of 1 662 records from 52 hospitals (51% vaginal), of which over 97% were reviewed by an “expert” coder and obstetric nurse abstractor. This PSI demonstrated a sensitivity of 90% (95% CI, 82-96%) and a PPV of 90-95%; adjusting for the complex stratified sampling design increased the sensitivity to 93% (95% CI, 82-97%) but decreased the PPV to 73%. A subsequent study based on a clinical research data set with 393 indicator-positive (3rd/4th degree tears) and 383 indicator-negative vaginal deliveries (Brubaker *et al.*, 2007) reported a sensitivity of 77% (95% CI, 72-81%) and a specificity of 99.7% (95% CI, 98.5-99.4%). PPV could not be estimated due to the sampling design, but should be approximately 93% given a typical prevalence of 5%. A similar review of medical records of 955 cases from 18 English NHS (National Health Service) trusts found that none of the flagged events was present at admission and 15% were miscoded, leaving 85% that were confirmed (Bottle and Aylin, 2008).

78. In summary, recent evidence on construct validity of this indicator is inconclusive, but the evidence on criterion validity is quite supportive. Risk adjustment for maternal age and comorbidity is recommended for these indicators (AHRQ, 2007; Grobman *et al.*, 2006). To take the individual birth weight of the newborn into account when calculating these indicators would be a desirable risk adjustment approach. As maternal and neonatal data are stored separately in many administrative hospital databases, this methodological improvement is not feasible in most countries.

Findings

79. The rate of obstetric trauma after vaginal delivery with instrument shows rather high variability among countries (Chart 11). Reported rates vary from below 3% (France, Italy, Spain, Belgium) to more than 10% (Sweden, Canada, USA), and the rate of the USA is ten-fold higher than the rate of France. Rates of obstetric trauma after vaginal delivery without instrument (Chart 12) range from 0.2% to 3.8 %. Charts 11 and 12 display corresponding rates by age categories. In most countries, obstetric trauma rates are lower at age 40 years and older, probably due to the fact that in higher age groups, the risk factor of a first delivery is not as frequent as in younger age groups. As two countries (Finland and Sweden) use probably more reliable register data instead of administrative hospital data to report these indicators, validity concerns regarding the obstetric indicators are not as marked as compared to the other patient safety indicators. Direct adjustment for 5-year age-gender strata did not materially affect indicator rates across countries, although two countries moved up one rank (and two others moved down one rank to compensate). Rates of these obstetric indicators were not associated with the mean number of secondary diagnoses at the country level ($R^2 < 2\%$, $p > 0.5$). Ongoing projects on comparisons of obstetric trauma rates drawn from different data sources will provide information on the validity of these indicators in the near future. The rates represented in the charts below have not been age standardised or adjusted for secondary diagnoses or length of stay.

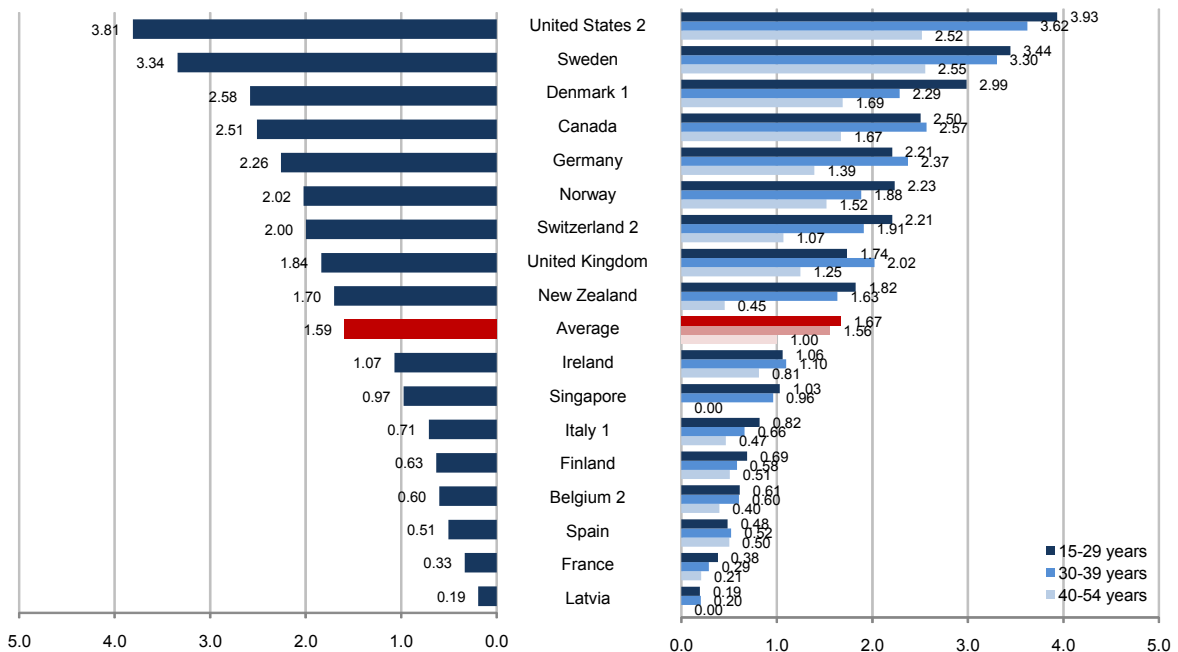
Chart 11. Obstetric trauma after vaginal delivery with instrument



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Chart 12. Obstetric trauma after vaginal delivery without instrument



1. 2008. 2. 2006.

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Detailed results

80. Table 6 depicts all reported PSI rates from each country. Empty cells represent missing rates. In one country (Norway), rates of zero (no numerator cases) occurred. PSI rates of zero are suspicious and might reflect under-coding. Table 7 shows minimal and maximal rates for each PSI across all reporting countries, replacing zero rates with the lowest nonzero rate of another country in Table 6 to permit calculation of ratios between the highest and lowest PSI rate. Portugal and Norway contributed most of the minimal values. The ratios between the highest and the lowest rates, representing inter-country variability, were rather high for some PSIs; for example, the ratio was 106 for PSI 7 (catheter-related bloodstream infection). The least variability was found for PSI 5 (foreign body left in during procedure) and obstetric trauma - vaginal delivery with instrument (9.8). Regarding PSI 13 (postoperative sepsis), the reported rates varied between 0.1 and 8.8%.

Table 6. PSI rates (%) reported by 19 countries in 2009

| | Foreign body left in during procedure (PSI 5) | Catheter-related bloodstream infection (PSI 7) | Post operative pulmonary embolism or deep vein thrombosis (PSI 12) | Post operative sepsis (PSI 13) | Accidental Puncture or Laceration (PSI 15) | Obstetric trauma – vaginal delivery with instrument (PSI 18) | Obstetric trauma – vaginal delivery without instrument (PSI 19) |
|----------------|---|--|--|--------------------------------|--|--|---|
| Belgium | 0.007 | 0.178 | 0.470 | 1.717 | 0.281 | 2.682 | 0.602 |
| Canada | 0.007 | 0.083 | 0.199 | 0.398 | 0.402 | 13.147 | 2.511 |
| Denmark | 0.002 | 0.033 | 0.271 | 0.240 | 0.045 | 6.043 | 2.582 |
| Finland | 0.002 | 0.004 | 0.128 | 0.264 | 0.033 | 3.521 | 0.633 |
| France | | | | | | 1.556 | 0.338 |
| Germany | 0.005 | 0.128 | 0.587 | 0.391 | 0.120 | 7.905 | 2.257 |
| Iceland | | | | | | | 6.681 |
| Ireland | 0.003 | 0.064 | 0.575 | 0.650 | 0.077 | 3.537 | 1.070 |
| Italy | 0.002 | 0.006 | 0.220 | 0.144 | 0.013 | 2.370 | 0.710 |
| Latvia | | | | | | 9.821 | 0.193 |
| New Zealand | 0.009 | 0.425 | 0.819 | 0.505 | 0.356 | 7.055 | 1.704 |
| Norway | 0.000 | 0.026 | 0.438 | 8.081 | 0.000 | 3.768 | 2.021 |
| Portugal | | 0.057 | 0.108 | 1.493 | 0.116 | 1.698 | 0.632 |
| Singapore | 0.006 | 0.123 | | 0.140 | | 7.434 | 0.975 |
| Spain | 0.005 | 0.189 | 0.281 | 0.440 | 0.183 | 2.611 | 0.505 |
| Sweden | 0.002 | 0.013 | 0.170 | 0.474 | 0.085 | 11.950 | 3.342 |
| Switzerland | 0.011 | 0.056 | 0.399 | 0.226 | 0.285 | 6.564 | 1.997 |
| United Kingdom | 0.005 | 0.090 | 0.754 | 0.276 | 0.129 | 5.731 | 1.837 |
| United States | 0.009 | 0.205 | 1.450 | 1.349 | 0.362 | 16.626 | 3.811 |

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project. Minimal and maximal rates printed in bold.

Table 7. Minimum and maximum PSI rates (%) reported by all 18 countries

| | N (countries) | Min Rate (%) | Max Rate (%) | Ratio between highest and lowest PSI rate, 16 countries |
|--|--------------------------|-------------------------|-------------------------|--|
| Foreign body left in during procedure (PSI 5) | 15 | 0.002 | 0.011 | 6.0 |
| Catheter-related bloodstream infection (PSI 7) | 16 | 0.004 | 0.425 | 106.25 |
| Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT) (PSI 12) | 15 | 0.108 | 1.450 | 13.50 |
| Postoperative sepsis (PSI 13) | 16 | 0.140 | 8.081 | 57.73 |
| Accidental Puncture or Laceration (PSI 15) | 15 | 0.013 | 0.402 | 31.15 |
| Obstetric trauma - vaginal delivery with instrument (PSI 18) | 17 | 1.556 | 16.626 | 10.69 |
| Obstetric trauma - vaginal delivery without instrument (PSI 19) | 18 | 0.193 | 6.681 | 34.62 |

Note: Rates based on hospital administrative databases as reported by countries for the research and development work of the HCQI project.

Administrative reporting

Age and sex adjustment

81. Direct adjustment for age and gender did not materially affect the rates across countries for most indicators.

Secondary diagnoses

82. Thirteen countries reported the average number of secondary diagnoses calculated from the denominator-eligible cases for each PSI; Table 8 shows the corresponding data.

Table 8. Reported averages of secondary diagnoses per PSI

| | Foreign body left in during procedure (PSI 5) | Catheter-related bloodstream infection (PSI 7) | Post operative pulmonary embolism (PE) or deep vein thrombosis (DVT) (PSI 12) | Post operative sepsis (PSI 13) | Accidental Puncture or Laceration (PSI 15) | Obstetric trauma – vaginal delivery with instrument (PSI 18) | Obstetric trauma – vaginal delivery w/o instrument (PSI 19) |
|-----------------------------|---|--|---|--------------------------------|--|--|---|
| Belgium | 6.72 | 6.61 | 5.63 | 6.66 | 7.02 | 4.89 | 3.75 |
| Canada | 3.11 | 3.00 | 3.00 | 2.60 | 3.24 | 3.59 | 2.00 |
| Denmark | 2.41 | 2.55 | 2.26 | 1.96 | 2.26 | 6.88 | 6.62 |
| Germany | 5.31 | 4.98 | 4.81 | 4.24 | 5.43 | 5.30 | 3.32 |
| Ireland | 2.57 | 2.61 | 2.68 | 1.88 | 2.77 | 2.67 | 1.83 |
| Italy | 1.50 | | 0.99 | 0.87 | 1.54 | 1.79 | 1.50 |
| New Zealand | 3.93 | 4.37 | 4.84 | 4.25 | 4.19 | 3.77 | 2.20 |
| Norway | 1.90 | 2.08 | 1.76 | 7.00 | 1.90 | 2.30 | 2.00 |
| Portugal | | 2.50 | 1.30 | 2.50 | 0.10 | | |
| Singapore | 3.89 | 3.63 | | 2.65 | | 3.85 | 2.21 |
| Spain | 3.71 | 3.74 | 2.77 | 2.48 | 3.45 | 3.32 | 2.79 |
| Sweden | 2.50 | 2.50 | 3.79 | 2.60 | 2.50 | 2.60 | 1.40 |
| Switzerland | 3.03 | 2.74 | 2.25 | 2.80 | 3.03 | 4.07 | 3.09 |
| United Kingdom ¹ | 2.72 | 2.83 | 3.18 | 2.43 | 2.89 | 2.83 | 1.90 |
| United States | 6.02 | 5.85 | 6.20 | 6.20 | 6.50 | 3.77 | 2.83 |

1. Data for the United Kingdom refers to England only.

83. There is currently no valid information on the mean number of secondary diagnoses from Finland, Portugal and Sweden. The United Kingdom reported this information only for England, which contributed most of the cases to the denominator. Age-sex standardised PSI rates were significantly correlated with the mean number of secondary diagnoses across countries for all of the non-obstetric indicators. Among 12 countries that reported the mean number of secondary diagnoses for PSI 15 (accidental puncture or laceration), the Spearman rank correlation coefficient was 0.706 ($p=0.010$). Among 13 countries that reported the mean number of secondary diagnoses for PSI 5 (foreign body left in during procedure), the rank correlation was 0.643 ($p=0.018$). Among 12 countries that reported the mean number of secondary diagnoses for PSI 12 (postoperative PE or DVT), the rank correlation was 0.657 ($p=0.020$). Among 13 countries that reported the mean number of secondary diagnoses for PSI 13 (postoperative sepsis), the rank correlation was 0.643 ($p=0.018$). Among 13 countries that reported the mean number of secondary diagnoses for PSI 7 (catheter-related bloodstream infection), the rank correlation was 0.918 ($p<0.0001$). The corresponding R-squared statistics (proportion of variance explained) ranged from 28% to 52%. Italy, followed by Norway (except PSI 13), reported the lowest mean number of secondary diagnoses among eligible cases, which explains some rather low PSI rates reported by these countries.

84. Based on the consistent country-level association between the mean number of secondary diagnoses (among denominator cases) and rates of all non-obstetric PSIs, it is possible to adjust country-

specific PSI rates for variation in coding intensity. Specifically, an ordinary least squares unweighted regression model was estimated for each PSI using data from all countries that reported both the mean number of secondary diagnoses and the corresponding rate for that PSI. Data from Norway were excluded from the analyses of accidental puncture or laceration, foreign body, and postoperative sepsis, because Norway reported implausibly low (zero) or high rates on these three indicators. The outcome variable in these regression models was a country's age-sex standardised PSI rate; the predictor variable was the mean number of secondary diagnoses among denominator cases. Parameter estimates from these models were used to estimate country-specific residuals, which were then linearly transformed into adjusted PSI rates with the same mean value as the unadjusted but standardised rates. The resulting adjusted PSI rates demonstrate far less variation (measured by the range, maximum-minimum ratio, standard deviation, and coefficient of variation) than unadjusted rates, for all non-obstetric PSIs. Based on the R^2 statistic, 28% to 52% of the observed variation at the country level in PSI rates is attributable to variation in diagnostic coding. Removing this portion of the variation appears to yield more valid country-specific PSI rates.

Length of stay

85. Mean length of stay data among denominator-eligible cases for each indicator were reported by 14 countries. In no case was there a statistically significant association between mean length of stay and the age-sex standardised PSI rate. This finding suggests that international variation in length of stay does not meaningfully contribute to the variation in PSI rates, probably because all participating countries attempted to remove same-day hospital cases in the 2009 cycle of data submission

Year to year reliability

86. To estimate divergence across years, PSI rates reported in the current calculation cycle were compared to rates reported in the 2008 OECD cycle. Most indicators did not significantly change in definition and were used for this analysis. Thirteen of seventeen countries participating in 2008 also participated in 2009 and completely recalculated their PSI rates: Belgium, Canada, Denmark, Finland, Germany, Italy, New Zealand, Norway, Portugal, Singapore, Spain, Sweden, the United Kingdom, and the United States.

87. To assess the reliability of country-specific PSI rates across years, correlation analyses were performed using the 2008 and 2009 rates reported by each country for each PSI. The correlation analyses show high reliability both within countries (Table 9) and within PSIs (Table 10).

88. The year-to-year reliability of PSI rates, based on Pearson's correlation coefficient, was greater than $r=0.94$ ($p \leq 0.01$) for all countries except Portugal. However, the correlation coefficient between Portuguese and US data improved, suggesting that year-to-year reliability was poor simply because of an improvement of the Portuguese data or calculation methods. The correlation coefficient is slightly lower for the United Kingdom than for other countries, probably due to the fact that only data from England were included in last year's calculation.

Table 9. Pearson's correlation coefficients of PSI rates between 2008 and 2009, by participating country

| | n (number of PSI rates [%]) | Pearson's correlation coefficient | Year of data collection (2008 calculation) | Year of data collection (2009 calculation) |
|----------------|-----------------------------|-----------------------------------|--|--|
| Belgium | 7 | 0.999 | 2004 | 2006 |
| Canada | 7 | 1 | 2006-2007 | 2007 |
| Denmark | 7 | 1 | 2007 | 2008 |
| Finland | 7 | 0.997 | 2006 | 2007 |
| Germany | 7 | 0.999 | 2006 | 2007 |
| Italy | 7 | 1 | 2005 | 2007 |
| New Zealand | 7 | 0.998 | 2006-2007 | 2007 |
| Norway | 7 | 0.941 | 2006 | 2007 |
| Portugal | 6 | 0.546 | 2006 | 2007 |
| Singapore | 5 | 1 ² | 2007 | 2007 |
| Spain | 7 | 0.996 | 2006 | 2007 |
| Sweden | 7 | 0.999 | 2006 | 2007 |
| United Kingdom | 7 | 0.994 | 2006-2007 | 2007 |
| United States | 7 | 1 ¹ | 2006 | 2006 |

1. The year-to-year correlation for the USA is close to one, because 2007 data were not yet available from all participating states at the time of this data submission.

2. Singapore used data from the same year of data collection in both calculations and shows a year-to-year correlation close to one.

Table 10. Pearson's correlation coefficients of PSI rates between 2008 and 2009 calculations, by PSI

| Indicator name | n (countries) | Pearson's correlation coefficient (p≤0.01) |
|--|---------------|--|
| Foreign body left in during procedure (PSI 5) | 13 | 0.920 |
| Catheter-related bloodstream infection (PSI 7) | 14 | 0.994 |
| Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT) (PSI 12) | 13 | 0.821 |
| Postoperative sepsis (PSI 13) | 14 | 0.970 |
| Accidental Puncture or Laceration (PSI 15) | 13 | 0.916 |
| Obstetric trauma – vaginal delivery with instrument (PSI 18) | 14 | 0.996 |
| Obstetric trauma – vaginal delivery without instrument (PSI 19) | 14 | 0.981 |

89. The year-to-year reliability of PSI 12 (postoperative pulmonary embolism or deep vein thrombosis) was 0.892 ($p \leq 0.01$), which was less than that of the other indicators listed in Table 10.

Conclusions

90. All participating countries performed PSI calculations and contributed data; however, validity concerns arose in the analysis of data from several countries, as discussed above. Criteria to ensure data quality proposed in the last year's project are partially applied: rates of indicators of zero are regarded as invalid (except for the sentinel event indicator transfusion reaction which was not investigated this year) and should not be publicly reported.

91. As several countries did not report average counts of secondary diagnoses, it was not feasible to implement a quality criterion based on the “mean number of secondary diagnoses among denominator cases”. As the PSI methodology is based on analyses of secondary diagnoses reported in administrative hospital databases, thorough reporting of the average number of secondary diagnoses together with the corresponding PSI rate will be required in future projects envisaging public reporting.

92. The test-retest analyses suggest excellent reliability for eleven of twelve countries participating in 2008 and 2009 and using data from different collection periods. One country (Portugal) showed poorer year-to-year reliability, probably due to reported difficulties in the data collection and analysis during 2008, with subsequent improvement this year. Similarly, there was good test-to-retest reliability for all tested PSIs except for the postoperative pulmonary embolism or deep vein thrombosis indicator.

93. Standardisation of PSI rates using relatively narrow, five-year age strata proved that international variation in hospitalisation practices and population age structure explains very little of the observed variation in PSI rates. For all of the non obstetric PSIs, the consistent relationship between a country’s standardised PSI rate and its mean number of secondary diagnoses is a cause for concern. This finding suggests that some countries have more thorough reporting of secondary diagnoses than others, and that variation in reporting may account for 28-52% of the observed variation in PSI rates. Further analyses are underway to model the impact of underreporting on PSI rates, and to impute corrected PSI rates after adjusting for underreporting. Underreporting does not appear to be an issue for postoperative DVT/PE and obstetric trauma, based on both published literature and empirical analyses of OECD data, although overdiagnosis due to widespread ultrasound screening in some hospitals or areas is an emerging concern for the former PSI.

94. Research and development work on patient safety indicators over the past four years has provided encouraging evidence that system-level patient safety indicators can be calculated from administrative databases by a majority of OECD countries. Although significant advancement in methodology and international comparability has been achieved during this period the requirement remains for ongoing research and development. During 2010-2011, work in this domain will focus on the technical specifications of the existing indicators, impact of different coding practices and classification systems on indicator rates and the potential use of data adjustment methods.

REFERENCES

- AHRQ (Agency for Health Care Research and Quality) (2007), PSI Technical Specifications. Version 3.1, Revision 3 http://www.qualityindicators.ahrq.gov/archives/psi/psi_technical_specs_v30a.pdf.
- Angus DC, Linde-Zwirble WT, Lidicker J, Clermont G, Carcillo J, Pinsky MR. "Epidemiology of severe sepsis in the United States: analysis of incidence, outcome, and associated costs of care." *Crit Care Med.* 2001 Jul;29(7):1303-10.
- Bahl V, Thompson MA, Kau TY, Hu HM, Campbell DA. (2008), "Do the AHRQ Patient Safety Indicators flag conditions that are present at the time of hospital admission?" *Medical Care*, Vol. 46, No. 5, pp. 516-522.
- Barbour GL. (1993), "Usefulness of a discharge diagnosis of sepsis in detecting iatrogenic infection and quality of care problems", *American Journal of Medical Quality*, Vol. 8, No. 1, pp. 2-5.
- Belío-Blasco C, Torres-Fernández-Gil MA, Echeverría-Echarri JL, Gómez-López LI. (2000), "Evaluation of two retrospective active surveillance methods for the detection of nosocomial infection in surgical patients", *Infection Control and Hospital Epidemiology*, Vol. 21, No. 1, pp 24-27.
- Best WR, Khuri SF, Phelan M, Hur K, Henderson WG, Demakis JG, Daley J. (2002), "Identifying patient preoperative risk factors and postoperative adverse events in administrative databases: results from the Department of Veterans Affairs National Surgical Quality Improvement Program", *Journal of the American College of Surgeons*, Vol. 194, No. 3, pp.257-266.
- Borzecki A, Kaafarani H, Hanchate A, Loveland S, Mull H, Shin M, Rosen A. (2009), "Validating the Patient Safety Indicators (PSI) in the Veterans Health Administration", abstract presented at AcademyHealth Annual Research Meeting, <http://www.academyhealth.org/files/2009/tuesday/borzecki.pdf>
- Bottle A, Aylin P. (2008), "How NHS trusts could use patient safety indicators to help improve care", *HealthCareRiskReport*, May 2008, pp. 12-14.
- Bottle A, Aylin P. (2009), "Application of AHRQ Patient Safety Indicators to English hospital data", *Quality and Safety in Health Care*, Vol. 18, pp. 303-308.
- Brubaker L, Bradley CS, Handa VL, Richter HE, Visco A, Brown MB, Weber AM. (2007), "Anal sphincter laceration at vaginal delivery: is this event coded accurately?", *Obstetrics and Gynecology*, Vol. 109, No.5, pp.1141-1145.
- Culler SD, Hawley JN, Naylor V, Rask KJ. (2007), "Is the availability of hospital IT applications associated with a hospital's risk adjusted incidence rate for Patient Safety Indicators: Results from 66 Georgia hospitals", *Journal of Medical Systems*, Vol. 31, pp. 319-327.
- Drösler SE, (2008), "Facilitating Cross-National Comparisons of Indicators for Patient Safety at the Health-System Level in OECD Countries", *OECD Health Technical Papers*, No. 19, OECD, Paris.

- Drösler SE, Klazinga NS, Romano PS, Tancredi DJ, Gogorcena Aoiz MA, Hewitt MC, Scobie S, Soop M, Wen E, Quan H, Ghali WA, Mattke S, Kelley E., (2009), "Application of patient safety indicators internationally: a pilot study among seven countries", *International Journal for Quality in Health Care*, Vol.21, No.4, pp.272-278.
- Dudding TC, Vaizey CJ, Kamm MA. (2008), "Obstetric anal sphincter injury: incidence, risk factors, and management", *Annals of Surgery*, Vol. 247, No.2, pp.224-237.
- Eggimann P, Harbarth S, Constantin MN, Touveneau S, Chevrolet JC, Pittet D. (2000), "Impact of a prevention strategy targeted at vascular-access care on incidence of infections acquired in intensive care", *Lancet*, Vol. 355, No.9218, pp.1864-1868.
- Encinosa WE, Hellinger FJ. (2008), "The impact of medical errors on ninety-day costs and outcomes: An examination of surgical patients", *Health Services Research*, Vol. 43, No. 6, pp. 2067-2085.
- Farley DO, Greenberg MD, Haviland AM, Lovejoy S. (2008), "Prioritizing Patient Safety Outcomes Measures: Results of an Expert Consensus Process", prepared for the Agency for Healthcare Research and Quality, http://192.5.14.110/pubs/working_papers/2008/RAND_WR601.pdf.
- Foster D, Young J, Heller S. (2009), "US national estimates of mortality, length of stay, and costs attributable to inpatient complications of care", abstract presented at AcademyHealth 2009 Annual Research Meeting (<http://www.academyhealth.org/files/arm/ARM-2009-Posters.pdf>).
- Friedman B, Encinosa W, Jiang HJ, Mutter R. (2009), "Do patient safety events increase readmissions?" *Medical Care*, Vol. 47, No. 5, pp. 583-590.
- Gallagher B, Cen L, Hannan EL. (2005a), "Readmissions for Selected Infections Due to Medical Care: Expanding the definition of a Patient Safety Indicator", In "Advances in Patient Safety: from Research to Implementation", Agency for Health Care Research and Quality 2005.
- Gallagher B, Cen L, Hannan EL. (2005b), "Validation of AHRQ's Patient Safety Indicator for Accidental Puncture or Laceration." In "Advances in Patient Safety: from Research to Implementation", Agency for Health Care Research and Quality 2005.
- Gawande AA, Studdert DM, Orav EJ, Brennan TA, Zinner MJ. (2003), "Risk factors for retained instruments and sponges after surgery", *New England Journal of Medicine*, Vol. 348, No.3, pp.229-235.
- Gonzalez-Ojeda A, Rodriguez-Alcantar DA, Arenas-Marquez H, Sanchez Perez-Verdia E, Chavez-Perez R, Alvarez-Quintero R, Perea-Sanchez A. (1999), "Retained foreign bodies following intra-abdominal surgery", *Hepatology*, Vol.46, No.26, pp.808-812.
- Geerts WH, Pineo GF, Heit JA, Bergqvist D, Lassen MR, Colwell CW, Ray JG. (2004), "Prevention of venous thromboembolism: the Seventh ACCP Conference on Antithrombotic and Thrombolytic Therapy", *Chest*, Vol.126, No.3 Suppl., pp.338S-400S.
- Gillet P, Kolh P, Sermeus W, Vleugels A, Jacques J, Van Den Heede K, Devriese S, Vrijens F, Verelst S. (2008), "Détection des événements indésirables dans les bases de données administratives", KCE reports 93B, http://www.kce.fgov.be/index_fr.aspx?SGREF=3439&CREF=11889.

- Glance LG, Li Y, Osler TM, Mukamel DB, Dick AW. (2008), "Impact of date stamping on patient safety measurement in patients undergoing CABG: Experience with the AHRQ Patient Safety Indicators", *BMC Health Services Research*, Vol. 8, pp. 176.
- Grobman WA, Feinglass J, Murthy S. (2006), "Are the Agency for Healthcare Research and Quality obstetric trauma indicators valid measures of hospital safety?" *American Journal of Obstetrics and Gynecology*, Vol. 195, pp. 868-874.
- Haut ER, Noll K, Efron DT, Berenholz SM, Haider A, Cornwell EE, Pronovost PJ. (2007), "Can increased incidence of deep vein thrombosis (DVT) be used as a marker of quality of care in the absence of standardized screening? The potential effect of surveillance bias on reported DVT rates after trauma", *Journal of Trauma*, Vol. 63, No. 5, pp. 1132-1137.
- Hawker GA, Coyte PC, Wright JG, Paul JE, Bombardier C. (1997), "Accuracy of administrative data for assessing outcomes after knee replacement surgery", *Journal of Clinical Epidemiology*, Vol.50, No.3, pp.265-273.
- Henderson KE, Recktenwald AJ, Reichley RM, Bailey TC, Waterman BM, Diekemper RL, Storey PE, Ireland BK, Dunagan WC. (2009), "Clinical validation of the AHRQ Postoperative Venous Thromboembolism Patient Safety Indicator", *Joint Commission Journal on Quality and Patient Safety*, Vol. 35, No. 7, pp. 370-376.
- Houchens RL, Elixhauser A, Romano PS. (2008), "How often are potential patient safety events present on admission?" *Joint Commission Journal on Quality and Patient Safety*, Vol.34, No.3, pp.154-163.
- Iezzoni LI, Daley J, Heeren T, Foley SM, Hughes JS, Fisher ES, Duncan CC, Coffman GA. (1994a), "Using administrative data to screen hospitals for high complication rates", *Inquiry*, Vol.31, No.1, pp.40-55.
- Iezzoni LI, Shwartz M, Ash AS, Mackiernan Y, Hotchkin EK. (1994b), "Risk adjustment methods can affect perceptions of outcomes", *American Journal of Medical Quality*, Vol.9, No.2, pp.43-48.
- Iezzoni LI, Davis RB, Palmer RH, Cahalane M, Hamel MB, Mukamal K, Phillips RS, Banks NJ, Davis DT Jr. (1999), "Does the Complications Screening Program flag cases with process of care problems? Using explicit criteria to judge processes", *International Journal of Quality in Health Care*, Vol.11, No.2, pp.107-118.
- Isaac T, Jha AK. (2008), "Are Patient Safety Indicators related to widely used measures of hospital quality?" *Journal of General Internal Medicine*, Vol. 23, No. 9, pp. 1373-1378.
- Keeler EB, Kahn KL, Bentow SS. (1992), *Assessing quality of care for hospitalized Medicare patients with hip fracture using coded diagnoses from the Medicare Provider Analysis and Review File (Prepared for the Health Care Financing Administration, US Department HHS) RAND 1992*
- Kovner C, Gergen PJ. (1998), "Nurse staffing levels and adverse events following surgery in U.S. hospitals", *Image - the Journal of Nursing Scholarship*, Vol.30, No.4, pp.315-321.
- Kristensen S, Mainz J, Bartels P. (2009), "Selection of indicators for continuous monitoring of patient safety: recommendations of the project 'Safety Improvement for Patients in Europe'", *International Journal for Quality in Health Care*, Vol. 21, No. 3, pp. 169-175.

- Kronman MP, Hall M, Slonim AD, Shah SS. (2008), "Charges and length of stay attributable to adverse patient-care events using pediatric-specific quality indicators: A multicenter study of freestanding children's hospitals", *Pediatrics*, Vol. 121, No. 6, pp. e1653-e1659.
- Lawthers AG, McCarthy EP, Davis RB, Peterson LE, Palmer RH, Iezzoni LI. (2000), "Identification of in-hospital complications from claims data. Is it valid?", *Medical Care*, Vol.38, No.8, pp785-795.
- Massanari RM, Wilkerson K, Streed SA, Hierholzer WJ Jr. (1987), "Reliability of reporting nosocomial infections in the discharge abstract and implications for receipt of revenues under prospective reimbursement", *American Journal of Public Health*, Vol.77, No.5, pp.561-564.
- McCarthy EP, Iezzoni LI, Davis RB, Palmer RH, Cahalane M, Hamel MB, Mukamal K, Phillips RS, Davies DT Jr. (2000), "Does clinical evidence support ICD-9-CM diagnosis coding of complications?", *Medical Care*, Vol.38, No.8, pp.868-876.
- Mattke S, et al. (2006), "Health Care Quality Indicators Project Initial Indicators Report", OECD Health Working Papers, No. 22, OECD, Paris
- Menachemi N, Saunders C, Chukmaitov A, Matthews MC, Brooks RG. (2007), "Hospital adoption of information technologies and improved patient safety: A study of 98 hospitals in Florida", *Journal of Healthcare Management*, Vol. 52, No. 6, pp. 398-409.
- Millar J, Mattke S and the members of the OECD Patient Safety Panel (2004), "Selecting Indicators for Patient Safety at the Health Systems Level in OECD Countries", OECD Health Technical Papers, No. 18, OECD, Paris.
- Miller MR, Elixhauser A, Zhan C, Meyer GS. (2001), "Patient Safety Indicators: using administrative data to identify potential patient safety concerns", *Health Services Research*, Vol.36, No.6 (part 2), pp.110-132.
- Miller MR, Pronovost P, Donithan M, Zeger S, Zhan C, Morlock L, Meyer GS. (2005), "Relationship between performance measurement and accreditation: implications for quality of care and patient safety", *American Journal of Medical Quality*, Vol.20, No.5, pp.239-252.
- Naessens JM, Campbell CR, Berg B, Williams AR, Culbertson R. (2007), "Impact of diagnosis-timing indicators on measures of safety, comorbidity, and case mix groupings from administrative data sources", *Medical Care*, Vol.45, No.12, pp.1234.
- Needleman J, Buerhaus P, Mattke S, Stewart M, Zelevinsky K. (2002), "Nurse-staffing levels and the quality of care in hospitals", *New England Journal of Medicine*, Vol.346, No.22, pp.1715-1722.
- OECD Health Data 2008, June 2008, Frequently Requested Data.
- Olin JW. (2002), "Pulmonary embolism", *Reviews in Cardiovascular Medicine*, Vol.3, No.Suppl 2, pp.S68-75.
- Parente ST, McCullough JS. (2009), "Health information technology and patient safety: Evidence from panel data", *Health Affairs*, Vol. 28, No. 2, pp. 357-360.
- Quan, H et al.(2008) for the IMECCHI Investigators. Adaptation of AHRQ Patient Safety Indicators for Use in ICD-10 Administrative Data by an International Consortium. 2008.
http://www.ahrq.gov/downloads/pub/advances2/vol1/advances-quan_52.pdf.

- Raleigh VS, Cooper J, Bremner SA, Scobie S. (2008), "Patient safety indicators for England from hospital administrative data: case-control analysis and comparison with US data", *BMJ*, Vol.337, No.a, pp.1702.
- Rivard PE, Luther SL, Christiansen CL, Shibe Zhao, Loveland S, Elixhauser A, Romano PS, Rosen AK. (2008), "Using patient safety indicators to estimate the impact of potential adverse events on outcomes", *Medical Care Research and Review*, Vol.65, No.1, pp.67-87.
- Romano PS, Schembri ME, Rainwater JA. (2002), "Can administrative data be used to ascertain clinically significant postoperative complications?", *American Journal of Medical Quality*, Vol. 17, No.4, pp.145-154.
- Romano PS, Yasmeen S, Schembri ME, Keyzer JM, Gilbert WM. (2005), "Coding of perineal lacerations and other complications of obstetric care in hospital discharge data", *Obstetrics and Gynecology*, Vol.106, No.4, pp.717-725.
- Romano PS, Mull HJ, Rivard PE, Zhao S, Henderson WG, Loveland S, Tsilimingras D, Christiansen CL, Rosen AK. (2009), "Validity of selected AHRQ patient safety indicators based on VA National Surgical Quality Improvement Program data", *Health Services Research*, Vol.44, No.1, pp.182-204.
- Rosen AK, Loveland SA, Romano PS, Itani KMF, Silber JH, Even-Shoshan OO, Halenar MJ, Teng Y, Zhu J, Volpp KG. (2009), "Effects of resident duty hour reform on surgical and procedural Patient Safety Indicators among hospitalized Veterans Health Administration and Medicare patients", *Medical Care*, Vol. 47, No. 7, pp. 723-731.
- Scanlon MC, Miller M, Harris JM, Schulz K, Sedman A. (2006), "Targeted chart review of pediatric patient safety events identified by the Agency for Healthcare Research and Quality's Patient Safety Indicators methodology", *Journal of Patient Safety*, Vol. 2, No. 4, pp. 191-197.
- Scanlon MC, Harris JM, Levy F, Sedman A. (2008), "Evaluation of the Agency for Healthcare Research and Quality Pediatric Quality Indicators", *Pediatrics*, Vol. 121, No. 6, pp. e1723-1731.
- Sedman A, Harris JM 2nd, Schulz K, Schwalenstocker E, Remus D, Scanlon M, Bahl V. (2005), "Relevance of the Agency for Healthcare Research and Quality Patient Safety Indicators for children's hospitals", *Pediatrics*, Vol.115, No.1, pp.135-145.
- Stevanovic V. (2009), "Technical Analysis of the Validity and Comparability of the Patient Safety Indicators: Impact of the AHRQ Exclusions", presented at the Patient Safety Experts Subgroup of the HCQI Project, OECD, Paris, 23 October.
- Stone PW, Horan TC, Shih HC, Mooney-Kane C, Larson E. (2007), "Comparisons of health care-associated infections identification using two mechanisms for public reporting", *American Journal of Infection Control*, Vol. 35, No. 3, pp. 145-149.
- Taylor B. (1998), "Common bile duct injury during laparoscopic cholecystectomy in Ontario: does ICD-9 coding indicate true incidence?", *CMAJ*, Vol.158, No.4, pp.481-485.
- Thornlow DK, Merwin E. (2009), "Managing to improve quality: The relationship between accreditation standards, safety practices, and patient outcomes", *Health Care Management Review*, Vol. 34, No. 3, pp. 267-272.

- Utter GH, Zrelak PA, Baron R, Tancredi DJ, Sadeghi B, Geppert JJ, Romano PS. (2009), "Positive predictive value of the AHRQ Accidental Puncture or Laceration Patient Safety Indicator", *Medical Care*, epub ahead of print.
- Valinsky LJ, Hockey RL, Hobbs MS, Fletcher DR, Pikora TJ, Parsons RW, Tan P. (1999), "Finding bile duct injuries using record linkage: a validated study of complications following cholecystectomy", *Journal of Clinical Epidemiology*, Vol.52, No.9, pp.893-901.
- Vartak S, Ward MM, Vaughn TE. (2008), "Do postoperative complications vary by hospital teaching status", *Medical Care*, Vol. 46, No. 1, pp. 25-32.
- Weingart SN, Iezzoni LI, Davis RB, Palmer RH, Cahalane M, Hamel MB, Mukamal K, Phillips RS, Davies DT Jr, Banks NJ. (2000), "Use of administrative data to find substandard care: validation of the complications screening program", *Medical Care*, Vol.38, No.8, pp.796-806.
- Weller WE, Gallagher BK, Cen L, Hannan EL. (2004), "Readmissions for venous thromboembolism: Expanding the definition of Patient Safety Indicators", *Joint Commission Journal on Quality and Safety*, Vol. 30, No. 9, pp. 497-504.
- Wheeler TL 2nd, Richter HE. Delivery method, anal sphincter tears and fecal incontinence: new information on a persistent problem. *Curr Opin Obstet Gynecol*. 2007 Oct;19(5):474-9.
- White RH, Sadeghi B, Tancredi DJ, Zrelak P, Cuny J, Sama P, Utter GH, Geppert JJ, Romano PS. (2009), "How valid is the ICD-9-CM based AHRQ Patient Safety Indicator for Postoperative Venous Thromboembolism?" *Medical Care*, Vol. 47, epub ahead of print.
- WHO (2009), "WHO Guidelines on Hand Hygiene in Health Care: First Global Patient Safety Challenge - Clean Care is Safer Care", WHO, Geneva.
- Yao H, Greenberg MD, Haviland AM, Farley DO. (2009), "'Canary measures' among the AHRQ Patient Safety Indicators", *American Journal of Medical Quality*, Vol. 24, epub ahead of print.
- Zhan C, Miller MR. (2003), "Excess length of stay, charges, and mortality attributable to medical injuries during hospitalization", *JAMA*, Vol.290, No.14, pp.1868-1874.
- Zhan C, Battles J, Chiang Y, Hunt D. (2007), "The validity of ICD-9-CM codes in identifying postoperative deep vein thrombosis and pulmonary embolism", *Joint Commission Journal on Quality and Patient Safety*, Vol. 33, No. 6, pp. 326-331.
- Zrelak PA, Sadeghi B, Utter GH, Baron R, Tancredi DJ, Geppert JJ, Romano PS. (2009), "Positive predictive value of the AHRQ Patient Safety Indicator for Central Line Associated Bloodstream Infection (Selected Infections Due to Medical Care)", under review.

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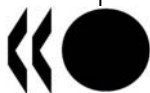
ANNEX

Saskia Drösler

Technical Manual for Facilitating Cross-National Comparisons for Patient Safety Indicators - This document represents a revised and updated version of OECD Technical Paper No. 19 for the set of patient safety indicators calculated for the 2008-2009 data collection of the OECD Health Care Quality Indicators project.

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INTRODUCTION

1. This technical manual was prepared to assist countries in calculating the Patient Safety Indicators included in the OECD Health Care Quality Indicator data collection for 2008-2009.
2. It provides detailed practical advice on calculating each indicator in a selected set of Patient Safety Indicators (PSI) utilising national hospital administrative databases.
3. The selected indicators are set out in Table 1.

Table 1. Selected patient safety indicators for 2008-2009 HCQI data collection

| Area | Indicator name |
|--|--|
| Hospital-acquired infections | Catheter-related bloodstream infection (PSI 7) |
| Operative and post-operative complications | Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT) (PSI 12) |
| | Postoperative sepsis (PSI 13) |
| | Accidental puncture or laceration (PSI 15) |
| Sentinel events | Foreign body left in during procedure (PSI 5) |
| Obstetrics | Obstetric trauma – vaginal delivery with instrument (PSI 18) |
| | Obstetric trauma – vaginal delivery without instrument (PSI 19) |

4. These indicators are derived from the Quality Indicators developed by the US Agency for Healthcare Research and Quality. AHRQ's Patient Safety Indicators (PSIs) are a set of indicators providing information on potential in hospital complications and adverse events following surgeries, procedures, and childbirth. The PSIs were developed after a comprehensive literature review, analysis of ICD-9-CM codes, clinician panel review, implementation of risk adjustment, and empirical analyses (AHRQ, 2006).
5. For each of these indicators, the manual provides:
 - Generic coding and calculation instructions related to national hospital administrative databases,
 - Cross walk from ICD 9 to ICD 10 codes for each indicator,
 - Detailed definitions for calculation of indicators, and
 - Flow charts for visualising the calculation process.

METHODOLOGICAL ISSUES

Introduction

6. The methodology for facilitating internationally comparable Patient Safety Indicators set out in this manual contains two key elements:

- Cross-walk between the key disease classifications
- Detailed process of calculation

7. The Patient Safety Indicators dealt with in this manual are specified according to certain diagnosis and, in some instances, procedure codes. There are currently different medical classifications in use for coding diagnosis; the ICD-9 (International Classification of Diseases) classification which is no longer updated by the World Health Organisation (WHO) is the precursor of the present ICD-10 classification. OECD member countries use ICD-9 (e.g. Spain, USA) as well as ICD-10 (e.g. Australia, Canada, Germany). For that reason this manual contains both versions of the coding system.

8. Usually countries do not use the original version of a classification published by the WHO but modify it according to their needs. Country modifications are still consistent with the WHO version, keeping the structure of the classification tree. In some chapters of the ICD classification the country versions are more extensive than the WHO version while in others they are not. This manual does not cover all the different country versions of the ICD.

9. The technical specifications of diagnosis in this manual are based on the ICD-10-WHO, 2006 and on the ICD-9-CM1. Therefore countries seeking to utilise this manual must ensure that before applying the definitions the defined codes for inclusion or exclusion criteria are currently in use. Otherwise the definitions at hand must be extended to include the subgroups added in the country modifications.

10. For example, Table 2 shows that one three-digit WHO code for decubitus ulcer corresponds to 8 four-digit codes in Canada, 5 four-digit codes in Australia and 50 five-digit German codes. To calculate the numerator for the indicator decubitus ulcer, all country specific subgroups of the listed WHO code L89 must be taken into account.

¹ Definitions in ICD-9-CM are adopted from AHRQ (2003).

Table 2. Examples of country versions

| ICD-10 WHO (2006) | | ICD-10-CA (Canada, 2006) | ICD-10-AM (Australia, 2006) | ICD-10-GM (Germany, 2006), a 5th digit has to be used to specify the location (10 subgroups) |
|------------------------------------|--------------|---|---|--|
| L89 Decubitus ulcer | L89.0 | Decubitus ulcer limited to erythema only [redness] without skin breakdown (Stage 1) | Decubitus [pressure] ulcer, stage I | |
| | L89.1 | Decubitus ulcer limited to breakdown of skin (Stage 2) | Decubitus [pressure] ulcer, stage II | Decubitus ulcer Stage 1 |
| | L89.2 | Decubitus ulcer with fat layer exposed (Stage 3) | Decubitus [pressure] ulcer, stage III | Decubitus ulcer Stage 2 |
| | L89.3 | Decubitus ulcer with depth involving muscle (Stage 4) | Decubitus [pressure] ulcer, stage IV | Decubitus ulcer Stage 3 |
| | L89.4 | Decubitus ulcer with depth involving bone (Stage 5) | | Decubitus ulcer Stage 4 |
| | L89.5 | Decubitus ulcer with joint space involvement (Stage 5) | | |
| | L89.8 | Decubitus ulcer with necrosis involving muscle or bone (Stage X) | | |
| | L89.9 | Decubitus ulcer without mention of severity | Decubitus [pressure] ulcer, unspecified | Decubitus ulcer, unspecified |

11. There are several criteria which are not consistent between countries that may influence the calculated rates of the indicators. These are:

- Coding rules
 - Definition of principal diagnosis
 - Definition of secondary diagnosis
- Use of diagnosis type indicators (e.g. marking of secondary diagnosis as “present at admission”)
- Use of DRG for hospital reimbursement
- Certain administrative case information
 - Admission type (elective, from long-term care, transferred from acute care)
 - Admission weight of neonates

Cross walking from ICD-9 to ICD-10

12. The quantitative relationship between ICD-9 and ICD-10 is not one to one. The ICD-10 is much more extensive than the ICD-9 and structures in the classification trees vary between the two. In a preliminary German project (Drösler *et al.*, 2007), mapping of diagnoses and procedures was performed for each definition of the patient safety indicators (AHRQ 2004). Diagnosis mapping was performed using cross walking tables (DIMDI, 2007) between ICD-9-WHO V6.0 and ICD-10-German Modification 2004 in two steps. Updates of the PSI definitions published by the AHRQ have been appended to the translated version.

13. ICD-10 codes were manually revised after a preliminary crosswalk. Mapped ICD-10 codes with an unclear relationship to the original ICD-9-WHO code were compared to the ICD-9-CM, which is the origin of the AHRQ definitions. ICD-10 codes with correspondence in ICD-9-CM were rejected when the matching ICD-9-CM code had not been selected by the AHRQ. Transferred ICD-10 codes were accepted when the medical concept matched the intention of the AHRQ definition. For example, the ICD-10 code

T80.2 “Infections following infusion, transfusion and therapeutic injection ” was included to the numerator specification of indicator “Catheter-related bloodstream infection ” because it was a mapped result to the corresponding ICD-9-CM-code 999.3 “Complications of medical care, not elsewhere classified: other infection”.

14. Due to the different country versions of the diagnosis classification, for an international project such as the OECD Health Care Quality Indicators project it is necessary to find a common “classification language”. Thus the country specific ICD-10 translations of the indicator definitions have been transformed to the ICD-10-WHO 2006 (WHO, 2006) to serve as the basis for the crosswalk. The ICD-10 codes listed in this manual underwent an international harmonisation process initiated by the International Methodology Consortium for Coded Health Information (IMECCHI) research collaboration (Quan *et al.*, 2008).

Process of Calculation

15. The numerators pertain to subsets of the denominators. Calculate the denominator quantity first. Then apply the numerator definition to the selected denominator data.

Exclusions of Principal Diagnosis

16. Verify the documentation rules for the principal diagnosis (main diagnosis, discharge diagnosis) in use for each country is required to decide how the exclusions of the principal diagnosis should be performed.

Definitions of Principal Diagnosis (PDx)²

- A. The condition established after evaluation to be chiefly responsible for causing the hospitalisation.
- B. The diagnosis that is finally established to be the main reason for the hospital stay; that is demanding the most resources/medical effort over the course of the patients stay.

17. The original AHRQ patient safety manual is based on definition A (Department of Health and Human Services, 2005). For that reason most indicator definitions contain an exclusion rule if the principal diagnosis of the case is equal to a numerator defining ICD code. For these cases it is unlikely that the indicator-defining condition had been acquired during the hospital stay but was pre-existing.

18. In this manual it is assumed that countries using definition B for assignment of principal diagnosis are able to identify the case-related **admission** diagnosis (ADx) in their data sets. In this case patients with admission diagnosis corresponding to the numerator definition of the indicator should be excluded (see left sided flow chart Figure 1. Primary diagnosis algorithm). Furthermore it shall be avoided that countries using definition B for assignment of principal diagnosis miss numerator cases by assigning specific complications as principal diagnosis. If a diagnosis type indicator is in use, data can be properly rearranged (see right sided flow chart Figure 1. Primary diagnosis algorithm).

Secondary diagnosis

19. Patient safety indicators are largely constructed from secondary diagnoses. The calculation of the numerator builds on secondary diagnosis for most of the indicators. The indicator definitions refer to

² Adapted from CIHI (2004).

conditions aroused **post admission**. To make sure that all participating countries use the same definition of secondary diagnosis it is presented here:

Definition of Secondary Diagnosis (SDx)⁸

Comorbid conditions are those conditions for which the patient received treatment and consumed hospital resources in addition to those conditions considered to be the principal, main or discharge diagnosis.

20. Pre-admission conditions without any necessary treatment during the hospital stay do not meet the definition. Pre-admission comorbidities with in-hospital treatment meet the definition of the secondary diagnosis. Countries using diagnosis type indicators have the possibility to distinguish between pre- and post-admission comorbidities. If they perform additional exclusions of numerator cases their calculated rates might be lower than in countries where additional criteria for secondary diagnosis documentation are not in use.

Use of codes for external causes of morbidity and mortality (“E-codes”)

21. Several indicators (e.g. Foreign body left in during procedure) build on diagnoses codes from chapter XX of the ICD-10 or the corresponding supplement of the ICD-9 respectively. The WHO designates those codes for additional documentation of external causes of morbidity. The availability of these codes in country modifications of the ICD may vary. Furthermore their use is optional in some countries. Depending on the extent of available e-codes in country modifications indicator rates may vary between countries.

Exclusions of MDC

22. In countries using DRG for hospital reimbursement each case is assigned to a MDC (Major Diagnostic Category) by the grouper software. The MDC assignment relies exclusively on the principal diagnosis of the case (definition A above). The calculation of several indicators (Table 3) requires the exclusion of certain MDCs to ensure that whole populations with high risk for a condition are not counted. For example, MDC 14 (pregnancy, childbirth and puerperium) is excluded from the calculation of indicator Postoperative sepsis. Lists of ICD-10-WHO codes referring to certain MDCs are provided in the Appendix 2 - Code List M³ for countries using ICD-10 without DRG reimbursement or if the MDC assignment of data is impossible.

Table 3. Indicators with MDC exclusion

| MDC | Condition | Indicators |
|--------|--------------------------------------|--|
| MDC 14 | Pregnancy, childbirth and puerperium | Postoperative PE or DVT (PSI 12) |
| | | Postoperative sepsis (PSI 13) |
| | | Accidental puncture or laceration (PSI 15) |

Procedure Codes

23. The calculations of three indicators require procedure codes. Those indicators are “Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT)” and “Obstetric trauma – vaginal delivery with / without instrument”. There is no common international medical procedure classification and each country participating in the calculation of the indicators uses a different catalogue for procedure coding. In the

³ Code lists are adapted from (InEK, 2006 and Commonwealth of Australia, 1998).

project at hand it was not possible to provide a procedure code list for each participating country. The procedure codes from the US ICD-9-CM are listed in this manual because they are part of the original indicator definitions provided by AHRQ. Furthermore, the procedure list provided in this manual shall support countries in adopting corresponding procedures from their classifications in order to perform a precise PSI calculation.

24. Two indicators refer to denominator cases with operative treatment only. Those are:

- Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT)
- Postoperative sepsis

25. For selection of these cases a comparison between the coded procedures and a list of all operating room procedures available in a country's procedure classification is necessary. For the reasons explained above it is not possible to generate lists of operating room procedures for each country. The following interventional procedures are regarded as operative procedures: Pacemaker Implants, PTCA⁴ or endovascular vessel repair. D&C⁵ is regarded as an operating room procedure where as a perineal laceration repair during a regular vaginal delivery is not.

Flow Charts

26. For each indicator a flow chart is provided to facilitate the understanding of the indicator definition and the calculation process. For the construction of the flowcharts, definition A of the principal diagnosis ("condition to be chiefly responsible") had been assumed. Countries using definition B ("condition demanding the most resources") for assignment of principal diagnosis are advised to rearrange their data in order to gain comparable results. A proposal for rearrangement is given in the flowchart at Figure 1. Primary diagnosis algorithm.

General Note

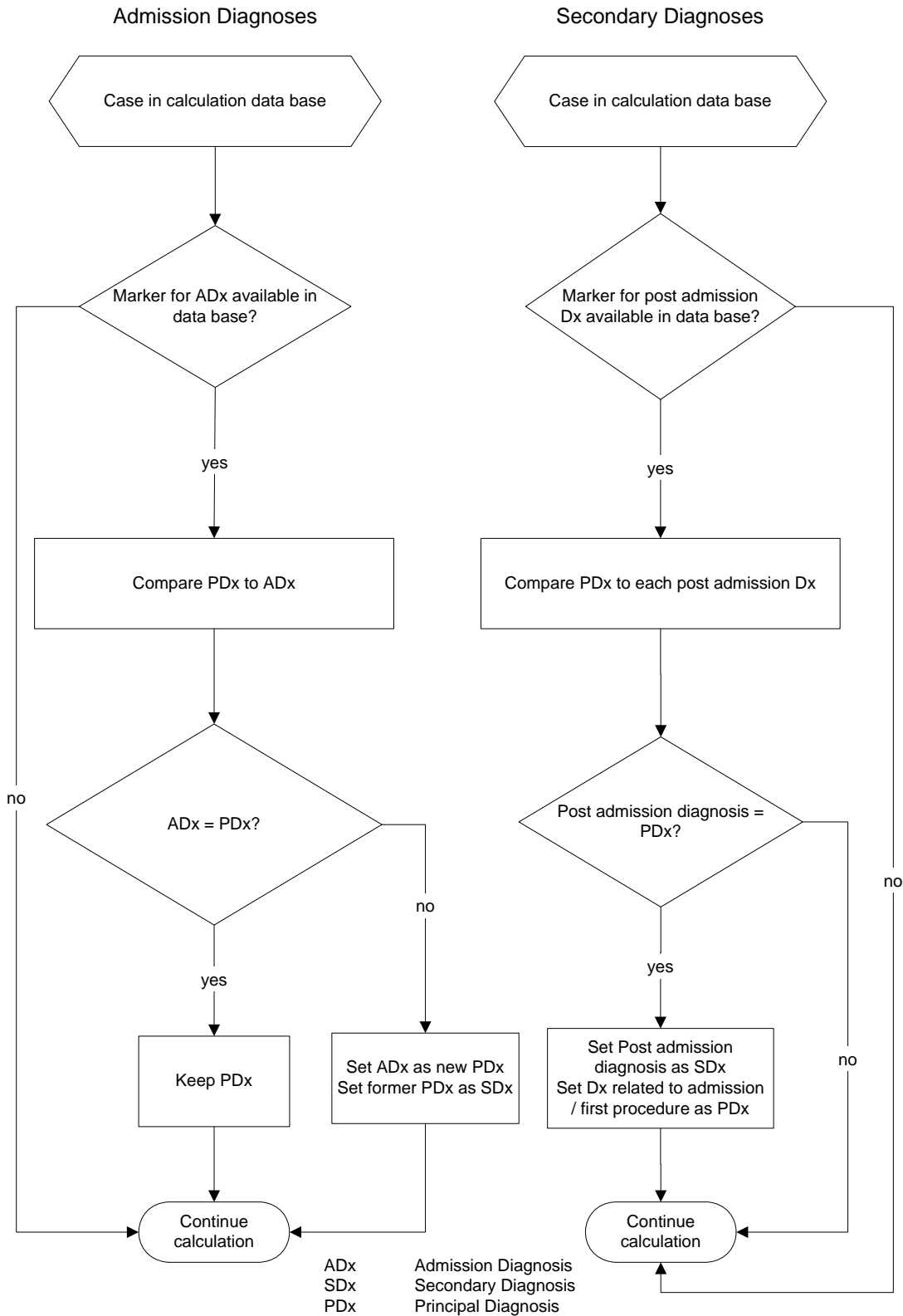
27. Data quality is always a concern in health indicator analysis that can also substantially affect patient safety indicators. In addition to the proposed definitions, a comprehensive review of coding practices, distribution of key data elements and country specific coding standards is strongly recommended for data analysis of these PSIs. Given the nature of the PSIs, small sample size may lead to less precise estimates and requires special attention when reporting these indicators. All of these factors can affect comparability of the PSIs, and need to be addressed when making such comparisons.

⁴ Percutaneous Transluminal Coronary Angioplasty, an intervention in cardiology.

⁵ Dilation and Curettage, a gynaecological or obstetric treatment.

Figure 1. Primary Diagnosis Algorithm

Algorithms for countries using principal diagnosis definition 2 (“condition demanding the most resources”). Repeat algorithm for each case.



QUICK STEP OVERVIEW OF ESSENTIAL TASKS FOR DATA PREPARATION

- 1) The following outlines the key steps in preparing data for the calculation of the Patient Safety Indicators.
- 2) Convert listed ICD codes to your country's version of ICD.
- 3) Look up in your ICD classification if there are codes available for SIRS (Systemic Inflammatory Response syndrome). If these codes are available add them to the numerator inclusion list of the indicator *Postoperative Sepsis*.
- 4) Look up the procedure codes in use in your country procedure classification for the following procedures:
 - a. "Interruption of Vena Cava"
 - i. Add a) to the denominator calculation of indicator *Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT)*.
 - b. "Obstetric Trauma"
 - i. Add b) to the numerator calculation of all Obstetric trauma indicators.
 - c. "Instrument-Assisted Delivery procedure codes"
 - i. Use c) to select the denominator population of indicator Obstetric trauma - vaginal delivery with instrument.
- 5) Check the definition of principal diagnosis (PDx) applied in your country.
- 6) If the PDx definition is "the condition to be chiefly responsible" proceed to step 6. If the PDx definition is "the condition demanding the most resources", rearrange the data as shown in the flowchart at Figure 1. Primary diagnosis algorithm.
- 7) Flag cases with OR (operating room) procedures designated as "surgical". A comprehensive list of OR procedures must be provided by your country. An exemplarily list of OR procedures in ICD-9 CM is provided in Appendix 1 of this manual.
- 8) Check if your database contains cases treated in psychiatric institutions. Such cases are to be excluded from the calculation, however particular psychiatric cases treated in acute care institutions can be retained.
- 9) Check to which length of stay (either 0 days or 1 day) same day cases are assigned in your database. Make sure that those cases with a length of stay < 24 hours (or 0 days, if a time stamp is not available in the data) are excluded from the calculation of PSIs 5 and 15. Definitions of PSIs 7 and 13 already contain explicit rules for length of stay exclusions.
- 10) Apply calculation algorithm to each case as shown in the indicator-related flowcharts.

Table 4. List of minimal case-related data-fields used for indicator calculation

| Data fields - Case | Mandatory Information | Possible Variables - Used for QI Calculation |
|---------------------------|------------------------------|--|
| patient ID | x | |
| patient age | x | years |
| length of stay | x | days |
| admission status | x | elective - emergency - birth |
| admission source | | home - from acute care - from long-term care |
| principal diagnosis | x | |
| secondary diagnosis | | data field should be repeated - number of repetitions depends on the country's definition of the dataset |
| procedure | | data field may repeat - number of repetitions depends on the country's definition of the dataset |
| date of procedure | | dependant on data field procedure |

DETAILED DEFINITIONS OF INDICATORS

Catheter-related bloodstream infection, secondary diagnosis field per 100 discharges (PSI 7)

Numerator:

Discharges with selected ICD-codes in any secondary diagnosis field among cases meeting the inclusion and exclusion rules for the denominator.

ICD-9-CM

Discharges with ICD-9-CM code of 999.3 or 996.62 in any secondary diagnosis field.

| | |
|--------|--|
| 999.3 | Complications of medical care, not elsewhere classified: Other infection |
| 996.62 | Infection and inflammatory reaction due to internal prosthetic device, implant, and graft: Due to vascular device, implant and graft |

ICD-10-WHO

Discharges with ICD-10-WHO code of T80.2 or T82.7 or T88.0 in any secondary diagnosis field.

| | |
|-------|--|
| T80.2 | Infections following infusion, transfusion and therapeutic injection |
| T82.7 | Infection and inflammatory reaction due to other cardiac and vascular devices, implants and grafts |
| T88.0 | Infection following immunization |

Denominator:

All surgical and medical discharges, 18 years and older **or** MDC 14 (pregnancy, childbirth, and puerperium). Assign a principal diagnosis from Appendix 2 - Code List M-3 if criteria “MDC 14” is not available.

Exclude cases:

- with **ICD-9-CM** code of 999.3 or 996.62 in the principal diagnosis field or secondary diagnosis present on admission, if known
- with **ICD-10-WHO** code of T80.2 or T82.7 or T88.0 in the principal diagnosis field
- with length of stay less than 2 days
- with any code for immunocompromised state or cancer (principal diagnosis or secondary diagnosis)

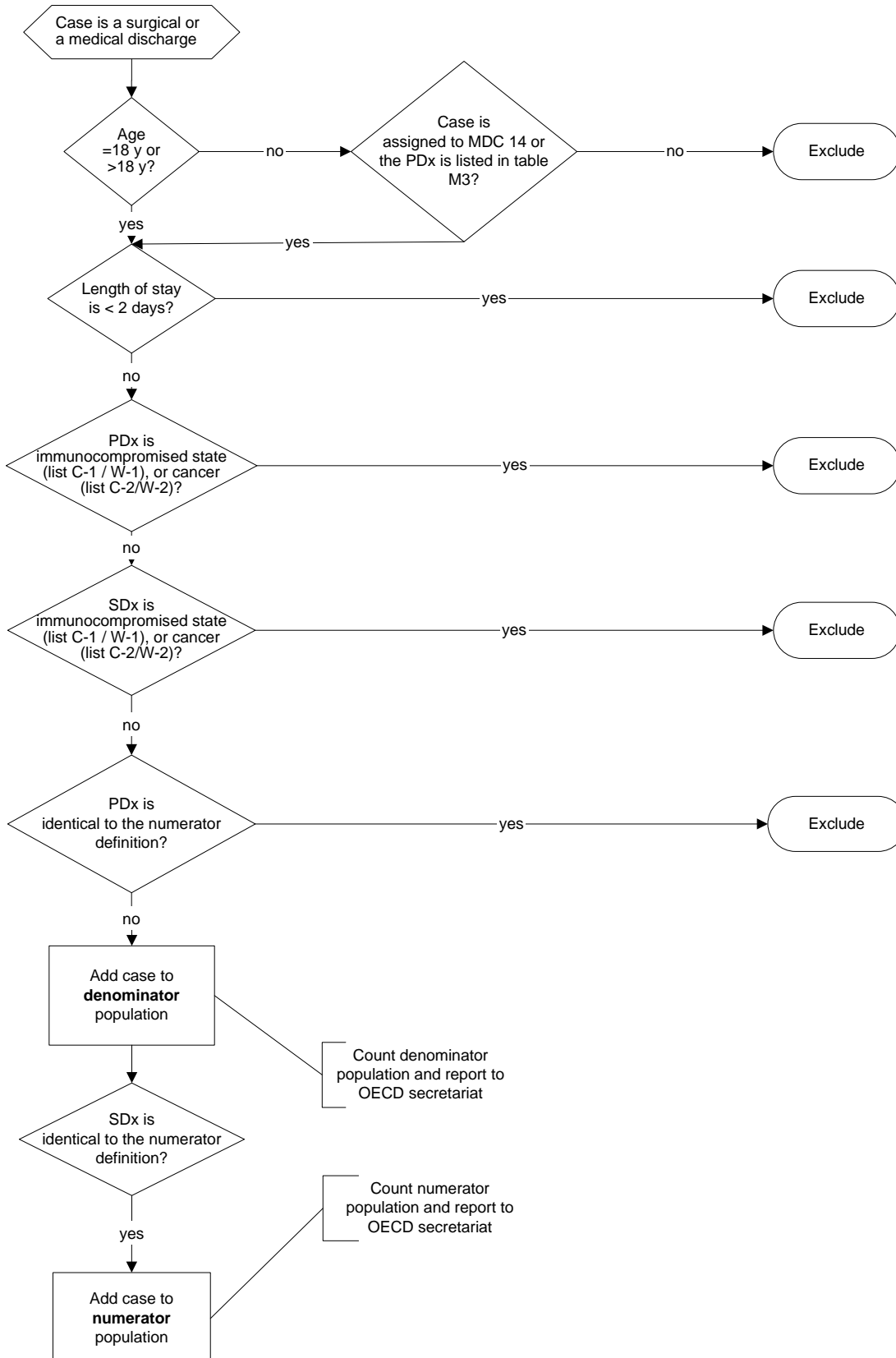
See Appendix 1 - Code List C-1 for ICD-9-CM immunocompromised state codes

See Appendix 1 - Code List W-1 for ICD-10-WHO immunocompromised state codes

See Appendix 1 - Code List C-2 for ICD-9-CM cancer codes

See Appendix 1 - Code List W-2 for ICD-10-WHO cancer codes

Catheter-Related Bloodstream Infection



Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT), secondary diagnosis field per 100 discharges (PSI 12)

Numerator:

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD codes for deep vein thrombosis or pulmonary embolism in any secondary diagnosis field.

ICD-9-CM Pulmonary Embolism and Deep Vein Thrombosis diagnosis codes:

ICD-9-CM Pulmonary Embolism diagnosis codes:

| | |
|-------|--|
| 41511 | Iatrogenic pulmonary embolism and infarction |
| 41519 | Pulmonary embolism and infarction, other |

ICD-9-CM Deep Vein Thrombosis diagnosis codes:

| | |
|-------|--|
| 45111 | Phlebitis and thrombosis of femoral vein (deep) (superficial) |
| 45119 | Phlebitis and thrombophlebitis of deep vessel of lower extremities – other |
| 4512 | Phlebitis and thrombophlebitis of lower extremities |
| 45181 | Phlebitis and thrombophlebitis of iliac vein |
| 4519 | Phlebitis and thrombophlebitis of other sites – of unspecified site |
| 45340 | DVT-embolism lower ext nos (Oct 04) |
| 45341 | DVT-emb prox lower ext |
| 45342 | DVT-emb distal lower ext |
| 4538 | Other venous embolism and thrombosis of other specified veins |
| 4539 | Other venous embolism and thrombosis of unspecified site |

ICD-10-WHO Pulmonary Embolism and Deep Vein Thrombosis diagnosis codes:

| | |
|-------|---|
| I26.0 | Pulmonary embolism with mention of acute cor pulmonale |
| I26.9 | Pulmonary embolism without mention of acute cor pulmonale |
| I80.1 | Phlebitis and thrombophlebitis of femoral vein |
| I80.2 | Phlebitis and thrombophlebitis of other deep vessels of lower extremities |
| I80.3 | Phlebitis and thrombophlebitis of lower extremities, unspecified |
| I80.8 | Phlebitis and thrombophlebitis of other sites |
| I80.9 | Phlebitis and thrombophlebitis of unspecified site |
| I82.8 | Embolism and thrombosis of other specified veins |
| I82.9 | Embolism and thrombosis of unspecified vein |

Denominator:

All surgical discharges age 18 and older with a code for an operating room procedure

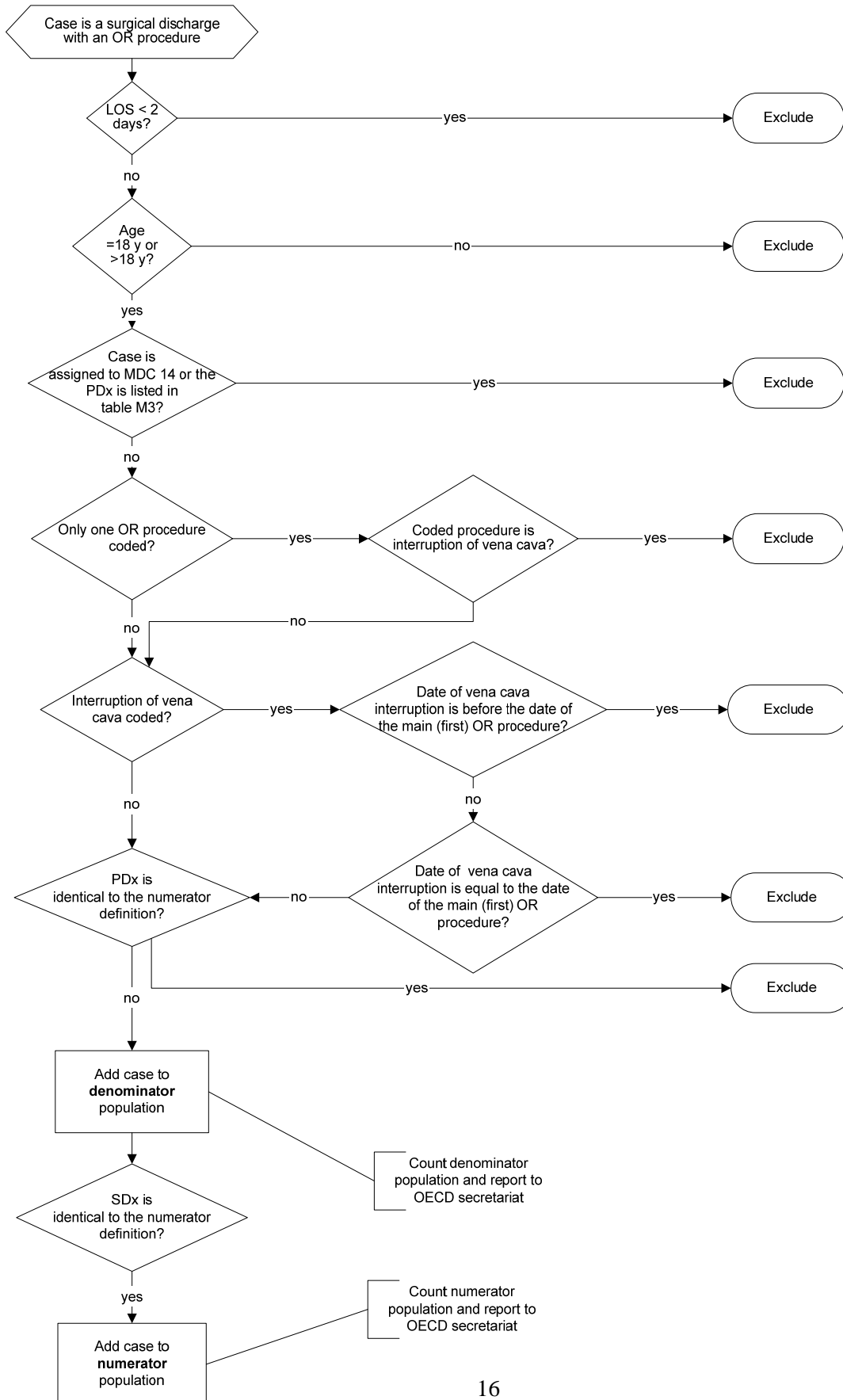
Exclude cases:

- with pre-existing (principal diagnosis or secondary diagnosis present on admission, if known) deep vein thrombosis or pulmonary embolism
- where a procedure for interruption of vena cava is the only operating room procedure
- where a procedure for interruption of vena cava occurs before or on the same day as the first / main operating room procedure. (Note that if day of procedure is not available in the input data file, the rate may be slightly lower than if the information was available)
- MDC 14 (pregnancy, childbirth, and puerperium) or principal diagnosis in Appendix M-3
- with length of stay less than 2 days

ICD-9-CM Interruption of Vena Cava procedure code:

| | |
|-----|---------------------------|
| 387 | Interruption of vena cava |
|-----|---------------------------|

Postoperative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT)



Postoperative sepsis, secondary diagnosis field per 100 discharges (PSI 13)**Numerator:**

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD code for sepsis in any secondary diagnosis field.

ICD-9-CM Sepsis diagnosis codes:

| | |
|-------|--|
| 0380 | Streptococcal septicaemia |
| 03810 | Staphylococcal ependence, unspecified |
| 03811 | Staphylococcus aureus septicaemia |
| 03819 | Other staphylococcal septicaemia |
| 0382 | Pneumococcal ependence (streptococcus pneumoniae ependence) |
| 0383 | Septicaemia due to anaerobes |
| 78552 | Septic shock |
| 78559 | Other shock w/o mention of trauma |
| 9980 | Postoperative shock |

Septicaemia due to:

| | |
|-------|---|
| 03840 | Gram-negative organism, unspecified |
| 03841 | Hemophilus influenzae |
| 03842 | Escherichia coli |
| 03843 | Pseudomonas |
| 03844 | Serratia |
| 03849 | Septicaemia due to other gram-negative organisms |
| 0388 | Other specified septicaemias |
| 0389 | Unspecified septicaemia |
| 99591 | Systemic inflammatory response syndrome due to infectious process w/o organ dysfunction |
| 99592 | Systemic inflammatory response syndrome due to infectious process w/organ dysfunction |

ICD-10-WHO Sepsis diagnosis codes:

| | |
|-------|--|
| A40.0 | Septicaemia due to streptococcus, group a |
| A40.1 | Septicaemia due to streptococcus, group b |
| A40.2 | Septicaemia due to streptococcus, group d |
| A40.3 | Septicaemia due to streptococcus pneumoniae |
| A40.8 | Other streptococcal septicaemia |
| A40.9 | Streptococcal septicaemia, unspecified |
| A41.0 | Septicaemia due to staphylococcus aureus |
| A41.1 | Septicaemia due to other specified staphylococcus |
| A41.2 | Septicaemia due to unspecified staphylococcus |
| A41.3 | Septicaemia due to haemophilus influenzae |
| A41.4 | Septicaemia due to anaerobes |
| A41.5 | Septicaemia due to other gram-negative organisms |
| A41.8 | Other specified septicaemia |
| A41.9 | Septicaemia, unspecified |
| R57.8 | Other shock |
| T81.1 | Shock during or resulting from a procedure, not elsewhere classified |

Note: If country version of ICD contains a certain ICD-code for SIRS (Systemic Inflammatory Response syndrome, ICD-10: R65.-) add to numerator inclusion list.

Denominator:

All **elective** (defined by the admission type) surgical discharges age 18 and older with a code for an operating room procedure.

Exclude cases:

- with pre-existing (principal diagnosis or secondary diagnosis present on admission, if known) sepsis or infection
- with a **principal diagnosis of infection, or any** code for immunocompromised state, or cancer
- MDC 14 (pregnancy, childbirth, and puerperium) or principal diagnosis in Appendix 2 - Code List M-3
- with length of stay of less than 4 days

See Appendix 1 - Code List C-1 for ICD-9-CM immunocompromised state codes

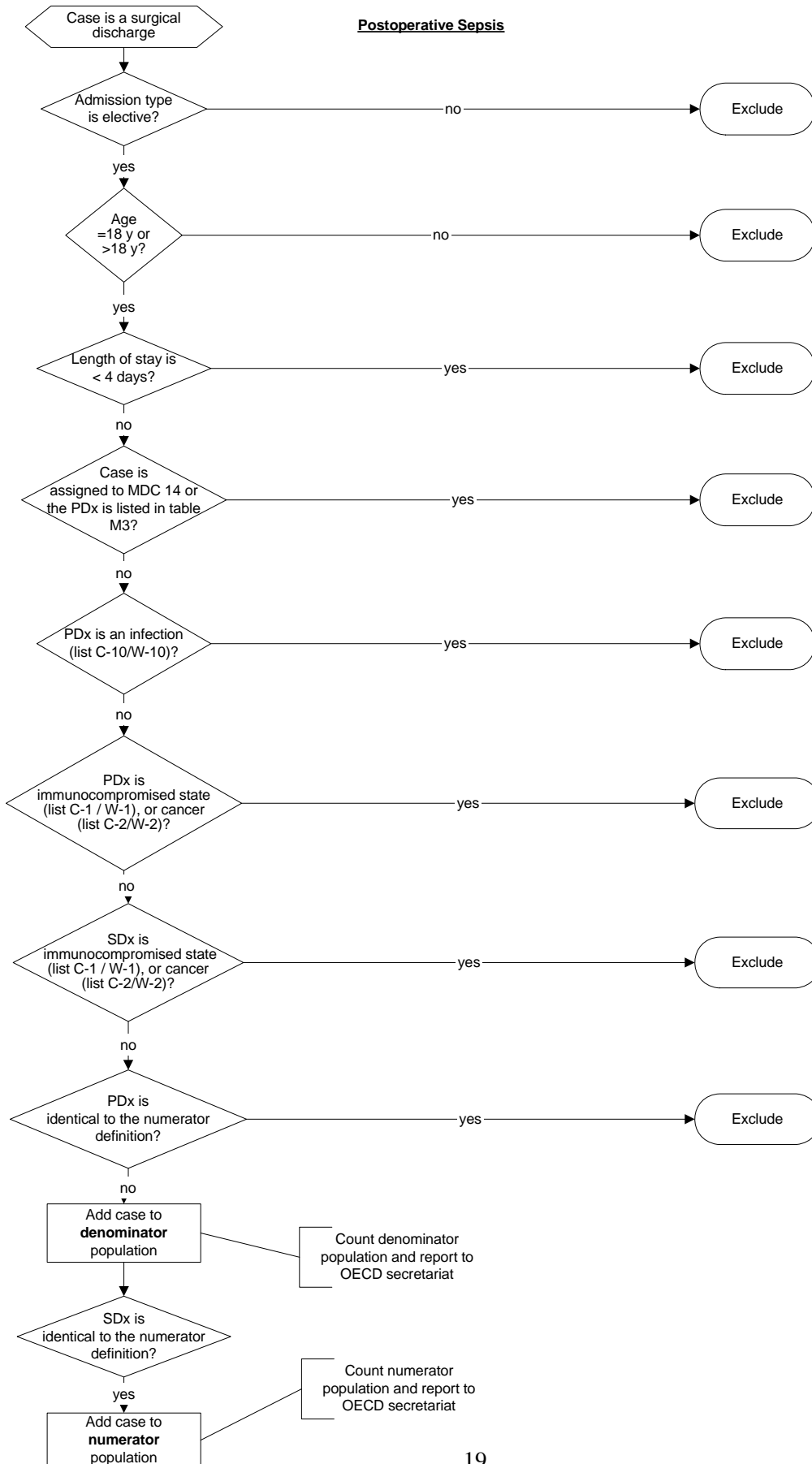
See Appendix 1 - Code List W-1 for ICD-10-WHO immunocompromised state codes

See Appendix 1 - Code List C-2 for ICD-9-CM cancer codes

See Appendix 1 - Code List W-2 for ICD-10-WHO cancer codes

See Appendix 1 - Code List C-10 for ICD-9-CM infection codes

See Appendix 1 - Code List W-10 for ICD-10-WHO infection codes



Accidental puncture or laceration, secondary diagnosis field per 100 discharges (PSI 15)**Numerator:**

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD code denoting accidental cut, puncture, perforation or laceration during a procedure in any secondary diagnosis field.

ICD-9-CM Accidental Puncture or Laceration diagnosis codes:

Accidental cut, puncture, perforation, or haemorrhage during medical care.

| | |
|-------|--|
| E8700 | Surgical operation |
| E8701 | Infusion or transfusion |
| E8702 | Kidney dialysis or other perfusion |
| E8703 | Injection or vaccination |
| E8704 | Endoscopic examination |
| E8705 | Aspiration of fluid or tissue, puncture, and catheterization |
| E8706 | Heart catheterization |
| E8707 | Administration of enema |
| E8708 | Other specified medical care |
| E8709 | Unspecified medical care |
| 9982 | Accidental puncture or laceration during a procedure |

ICD-10-WHO Accidental Puncture or Laceration diagnosis codes:

| | |
|-------|---|
| T81.2 | Accidental puncture and laceration during a procedure, not elsewhere classified |
| Y60.0 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during surgical operation |
| Y60.1 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during infusion or transfusion |
| Y60.2 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during kidney dialysis or other perfusion |
| Y60.3 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during injection or immunization |
| Y60.4 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during endoscopic examination |
| Y60.5 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during heart catheterization |
| Y60.6 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during aspiration, puncture and other catheterization |
| Y60.7 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during administration of enema |
| Y60.8 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during other surgical and medical care |
| Y60.9 | Unintentional cut, puncture, perforation or haemorrhage during surgical and medical care: during unspecified surgical and medical care |

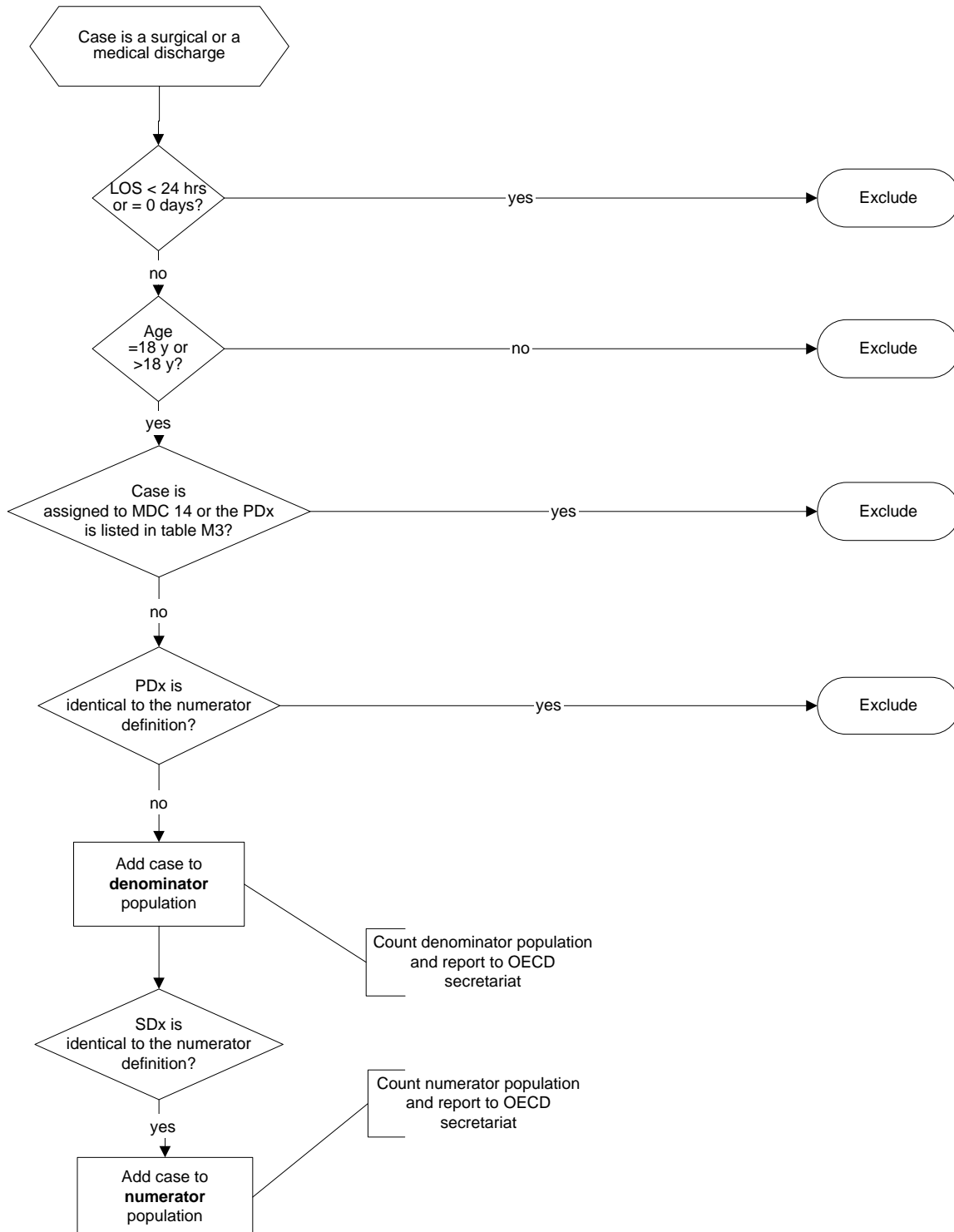
Denominator:

All surgical and medical discharges age 18 years and older.

Exclude cases:

- with ICD-9-CM code denoting technical difficulty (e.g., accidental cut, puncture, perforation, or laceration) in the principal diagnosis field or secondary diagnosis present on admission, if known
- MDC 14 (pregnancy, childbirth, and puerperium) or principal diagnosis in Appendix 2 - Code List M-3
- with a length of stay less than 24 hours (in those countries where a timestamp of admission or discharge is not available cases with a length of stay of 0 days shall be excluded)

Accidental puncture or laceration



Foreign body left in during procedure, secondary diagnosis field per 100 discharges (PSI 5)**Numerator:**

Discharges with ICD codes for foreign body left in during procedure in any secondary diagnosis field among cases meeting the inclusion and exclusion rules for the denominator.

ICD-9-CM Foreign Body Left in During Procedure diagnosis codes:

| | |
|------|---|
| 9984 | Foreign body accidentally left during a procedure |
| 9987 | Acute reactions to foreign substance accidentally left during a procedure |

Foreign body left in during:

| | |
|-------|--|
| E8710 | Surgical operation |
| E8711 | Infusion or transfusion |
| E8712 | Kidney dialysis or other perfusion |
| E8713 | Injection or vaccination |
| E8714 | Endoscopic examination |
| E8715 | Aspiration of fluid or tissue, puncture, and catheterization |
| E8716 | Heart catheterization |
| E8717 | Removal of catheter or packing |
| E8718 | Other specified procedures |
| E8719 | Unspecified procedure |

ICD-10-WHO Foreign Body Left in During Procedure diagnosis codes:

| | |
|-------|--|
| T81.5 | Foreign body accidentally left in body cavity or operation wound following a procedure |
| T81.6 | Acute reaction to foreign substance accidentally left during a procedure |
| Y61.0 | Foreign object accidentally left in body during surgical and medical care: During surgical operation |
| Y61.1 | Foreign object accidentally left in body during surgical and medical care: During infusion or transfusion |
| Y61.2 | Foreign object accidentally left in body during surgical and medical care: During kidney dialysis or other perfusion |
| Y61.3 | Foreign object accidentally left in body during surgical and medical care: During injection or immunization |
| Y61.4 | Foreign object accidentally left in body during surgical and medical care: During endoscopic examination |
| Y61.5 | Foreign object accidentally left in body during surgical and medical care: During heart catheterization |
| Y61.6 | Foreign object accidentally left in body during surgical and medical care: During aspiration, puncture and other catheterization |
| Y61.7 | Foreign object accidentally left in body during surgical and medical care: During removal of catheter or packing |
| Y61.8 | Foreign object accidentally left in body during surgical and medical care: During other surgical and medical care |
| Y61.9 | Foreign object accidentally left in body during surgical and medical care: During unspecified surgical and medical care |

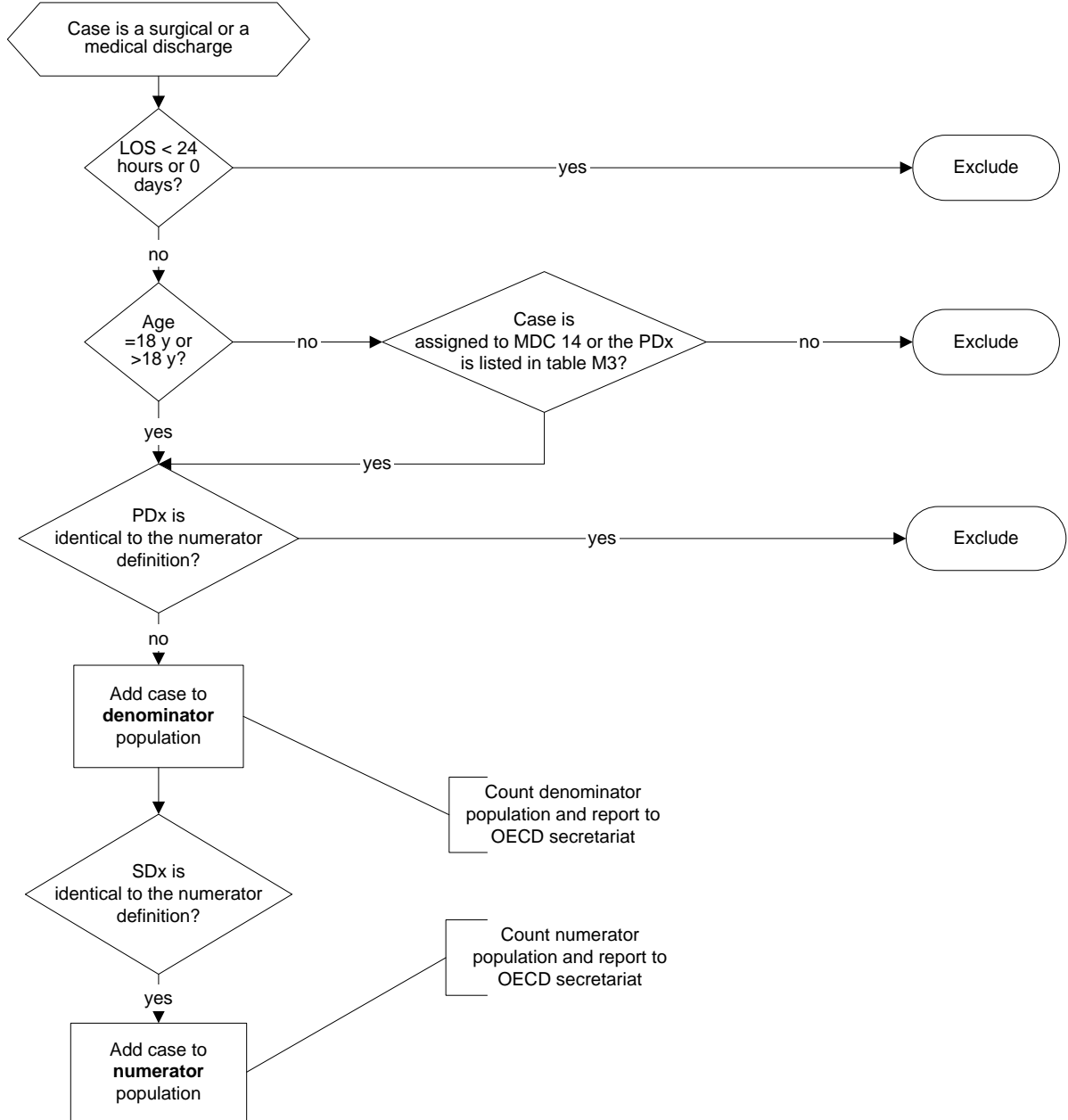
Denominator:

All surgical and medical discharges, 18 years and older **or** MDC 14 (pregnancy, childbirth, and puerperium). Assign a principal diagnosis from Appendix 2 - Code List M-3 if criteria “MDC 14” is not available.

Exclude cases

- with ICD-9-CM codes for foreign body left in during procedure in the principal diagnosis field or secondary diagnosis present on admission, if known.
- with a length of stay less than 24 hours (in those countries where a timestamp of admission or discharge is not available cases with a length of stay of 0 days shall be excluded)

Foreign body left in during procedure



Obstetric trauma – vaginal delivery with instrument, any diagnosis or procedure field per 100 vaginal deliveries (PSI 18)**Numerator⁶:**

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM codes for 3rd and 4th degree obstetric trauma in any diagnosis or procedure field.

ICD-9-CM Obstetric Trauma diagnosis codes:

| | |
|-----------|---|
| 66420.1,4 | Trauma to perineum and vulva during delivery, third degree perineal laceration |
| 66430.1,4 | Trauma to perineum and vulva during delivery, fourth degree perineal laceration |

ICD-9-CM Obstetric Trauma procedure codes:

| | |
|------|---|
| 7550 | Repair of current obstetric lacerations of uterus |
| 7551 | Repair of current obstetric lacerations of cervix |
| 7552 | Repair of current obstetric lacerations of corpus uteri |
| 7561 | Repair of current obstetric lacerations of bladder and urethra |
| 7562 | Repair of current obstetric lacerations of rectum and sphincter |

ICD-10-WHO Obstetric Trauma diagnosis codes:

| | |
|-------|---|
| O70.2 | Third degree perineal laceration during delivery |
| O70.3 | Fourth degree perineal laceration during delivery |

Denominator:

All vaginal delivery discharges with any procedure code for instrument-assisted delivery.

ICD-9-CM Instrument-Assisted Delivery procedure codes:

| | |
|------|--|
| 720 | Low forceps operation |
| 721 | Low forceps operation w/ episiotomy |
| 7221 | Mid forceps operation w/ episiotomy |
| 7229 | Other mid forceps operation |
| 7231 | High forceps operation w/ episiotomy |
| 7239 | Other high forceps operation |
| 724 | Forceps rotation of fetal head |
| 7251 | Partial breech extraction w/ forceps to aftercoming head |
| 7253 | Total breech extraction w/ forceps to aftercoming head |
| 726 | Forceps application to aftercoming head |
| 7271 | Vacuum extraction w/ episiotomy |
| 7279 | Vacuum extraction delivery nec |
| 728 | Other specified instrumental delivery |
| 729 | Unspecified instrumental delivery |

⁶ In contrast to OECD Health Technical Paper No.18 (OECD, 2004) the definition of this numerator had been harmonised to the AHRQ definition.

ICD-9-CM Outcome of delivery codes:

Note: This category is intended for the coding of the outcome of delivery on the mother's record. (Department of Health and Human Services, 2007)

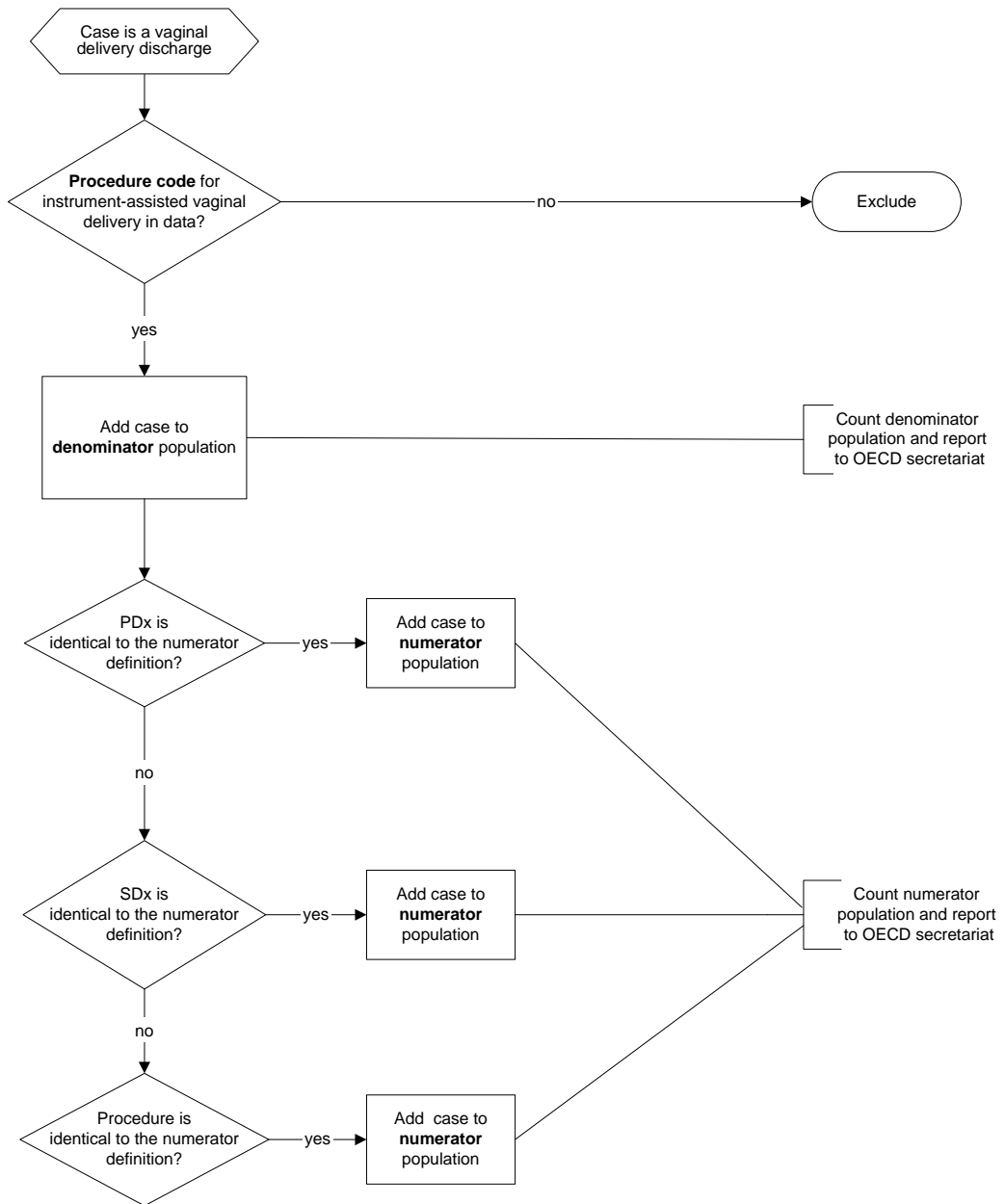
| | |
|-------|---------------------------------------|
| V27.0 | Single liveborn |
| V27.1 | Single stillborn |
| V27.2 | Twins, both liveborn |
| V27.3 | Twins, one liveborn and one stillborn |
| V27.4 | Twins, both stillborn |
| V27.5 | Other multiple birth, all liveborn |
| V27.6 | Other multiple birth, some liveborn |
| V27.7 | Other multiple birth, all stillborn |
| V27.9 | Unspecified outcome of delivery |

ICD-10-WHO Outcome of delivery codes:

Note: This category is intended for use as an additional code to identify the outcome of delivery on the mother's record. (WHO, 2006)

| | |
|-------|---------------------------------------|
| Z37.0 | Single live birth |
| Z37.1 | Single stillbirth |
| Z37.2 | Twins, both liveborn |
| Z37.3 | Twins, one liveborn and one stillborn |
| Z37.4 | Twins, both stillborn |
| Z37.5 | Other multiple births, all liveborn |
| Z37.6 | Other multiple births, some liveborn |
| Z37.7 | Other multiple births, all stillborn |
| Z37.9 | Outcome of delivery, unspecified |

Obstetric trauma - Vaginal Delivery with Instrument



Obstetric trauma—vaginal delivery without instrument (PSI 19)**Numerator:**

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM codes for 3rd and 4th degree obstetric trauma in any diagnosis or procedure field.

ICD-9-CM Obstetric Trauma diagnosis codes:

| | |
|-----------|---|
| 66420.1,4 | Trauma to perineum and vulva during delivery, third degree perineal laceration |
| 66430.1,4 | Trauma to perineum and vulva during delivery, fourth degree perineal laceration |

ICD-9-CM Obstetric Trauma procedure codes:

| | |
|------|---|
| 7550 | Repair of current obstetric lacerations of uterus |
| 7551 | Repair of current obstetric lacerations of cervix |
| 7552 | Repair of current obstetric lacerations of corpus uteri |
| 7561 | Repair of current obstetric lacerations of bladder and urethra |
| 7562 | Repair of current obstetric lacerations of rectum and sphincter |

ICD-10-WHO Obstetric Trauma diagnosis codes:

| | |
|-------|---|
| O70.2 | Third degree perineal laceration during delivery |
| O70.3 | Fourth degree perineal laceration during delivery |

Denominator:

All vaginal delivery discharge patients.

ICD-9-CM Outcome of delivery codes:

Note: This category is intended for the coding of the outcome of delivery on the mother's record.
(Department of Health and Human Services, 2007)

| | |
|-------|---------------------------------------|
| V27.0 | Single liveborn |
| V27.1 | Single stillborn |
| V27.2 | Twins, both liveborn |
| V27.3 | Twins, one liveborn and one stillborn |
| V27.4 | Twins, both stillborn |
| V27.5 | Other multiple birth, all liveborn |
| V27.6 | Other multiple birth, some liveborn |
| V27.7 | Other multiple birth, all stillborn |
| V27.9 | Unspecified outcome of delivery |

ICD-10-WHO Outcome of delivery codes:

Note: This category is intended for use as an additional code to identify the outcome of delivery on the mother's record. (WHO, 2006)

| | |
|-------|---------------------------------------|
| Z37.0 | Single live birth |
| Z37.1 | Single stillbirth |
| Z37.2 | Twins, both liveborn |
| Z37.3 | Twins, one liveborn and one stillborn |
| Z37.4 | Twins, both stillborn |
| Z37.5 | Other multiple births, all liveborn |
| Z37.6 | Other multiple births, some liveborn |
| Z37.7 | Other multiple births, all stillborn |
| Z37.9 | Outcome of delivery, unspecified |

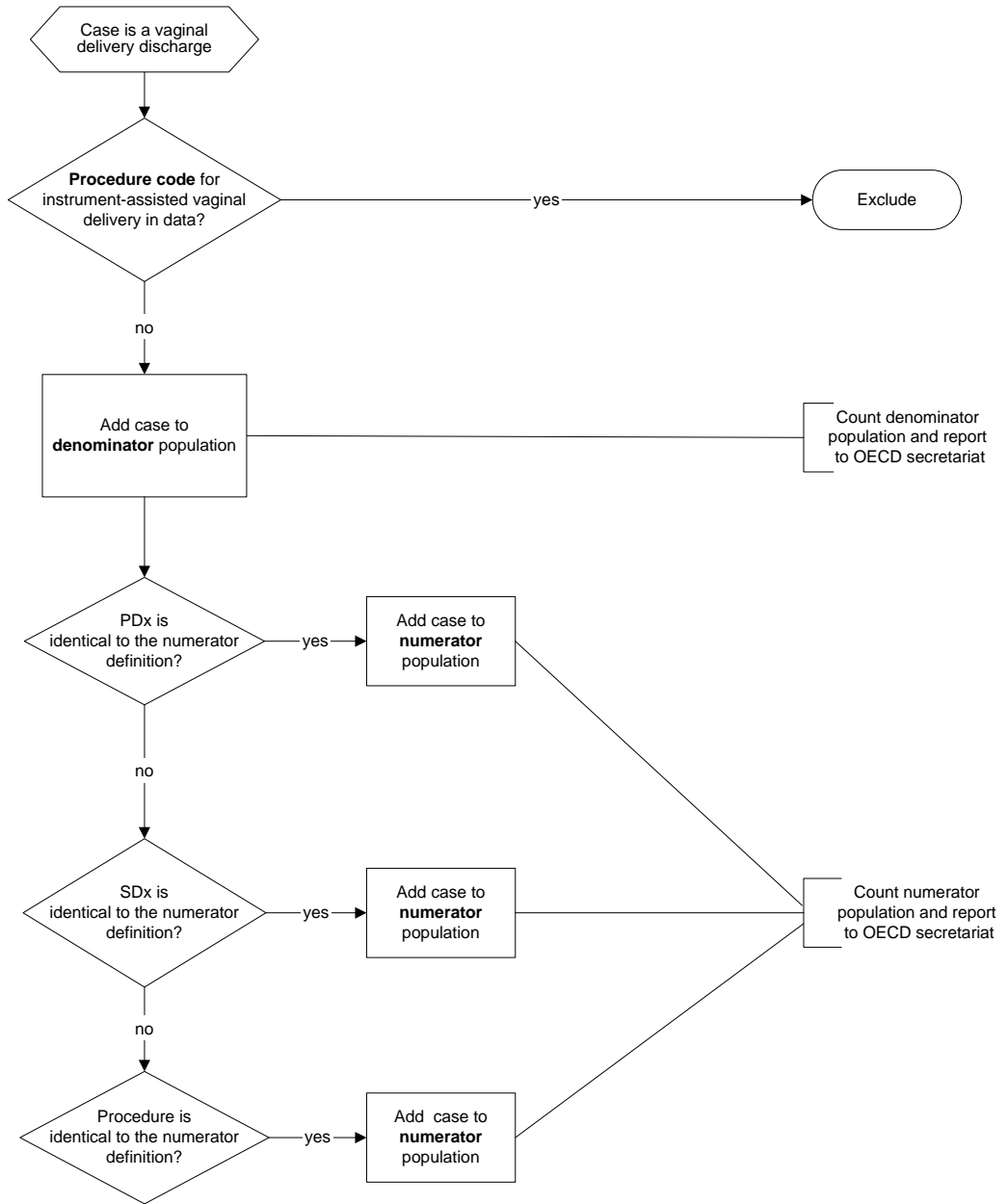
Exclude cases:

- With instrument-assisted delivery.

ICD-9-CM Instrument-Assisted Delivery procedure codes

| | |
|------|--|
| 720 | Low forceps operation |
| 721 | Low forceps operation w/ episiotomy |
| 7221 | Mid forceps operation w/ episiotomy |
| 7229 | Other mid forceps operation |
| 7231 | High forceps operation w/ episiotomy |
| 7239 | Other high forceps operation |
| 724 | Forceps rotation of fetal head |
| 7251 | Partial breech extraction w/ forceps to aftercoming head |
| 7253 | Total breech extraction w/ forceps to aftercoming head |
| 726 | Forceps application to aftercoming head |
| 7271 | Vacuum extraction w/ episiotomy |
| 7279 | Vacuum extraction delivery nec |
| 728 | Other specified instrumental delivery |
| 729 | Unspecified instrumental delivery |

Obstetric trauma - Vaginal Delivery without Instrument



APPENDIX 1. DENOMINATOR CALCULATION CODE LISTS

Code List C: ICD-9-CM codes for denominator calculation (refer to codes below)

| App No. | Code List | Indicator | Function |
|---------|--|---|--|
| C-1 | ICD-9-CM immunocompromised state codes | Catheter-Related Bloodstream Infection Postoperative sepsis | Denominator exclusion, if principal diagnosis or secondary diagnosis |
| C-2 | ICD-9-CM cancer codes | Catheter-Related Bloodstream Infection, Postoperative sepsis | Denominator exclusion, if principal diagnosis or secondary diagnosis |
| C-10 | ICD-9-CM codes for infections | Postoperative sepsis | Denominator exclusion, if principal diagnosis |

C-1: ICD-9-CM Immunocompromised States diagnosis codes:

| | |
|-------|--|
| 042 | HUMAN IMMUNODEFICIENCY VIRUS DISEASE |
| 363 | PNEUMOCYSTOSIS |
| 260 | KWASHIORKOR OCT05- |
| 261 | NUTRITIONAL MARASMUS OCT05- |
| 262 | OTH SEVERE MALNUTRITION OCT05- |
| 23873 | HI GRDE MYELODYS SYN LES OCT06- |
| 23876 | MYELOFI W MYELO METAPLAS OCT06 |
| 27900 | HYPOGAMMAGLOBULINEM NOS |
| 27901 | SELECTIVE IGA IMMUNODEF |
| 27902 | SELECTIVE IGM IMMUNODEF |
| 27903 | SELECTIVE IG DEFIC NEC |
| 27904 | CONG HYPOGAMMAGLOBULINEM |
| 27905 | IMMUNODEFIC W HYPER-IGM |
| 27906 | COMMON VARIABL IMMUNODEF |
| 27909 | HUMORAL IMMUNITY DEF NEC |
| 27910 | IMMUNDEF T-CELL DEF NOS |
| 27911 | DIGEORGES SYNDROME |
| 27912 | WISKOTT-ALDRICH SYNDROME |
| 27913 | NEZELOFS SYNDROME |
| 27919 | DEFIC CELL IMMUNITY NOS |
| 2792 | COMBINED IMMUNITY DEFICIENCY |
| 2793 | UNSPECIFIED IMMUNITY DEFICIENCY |
| 2794 | AUTOIMMUNE DISEASE, NOT ELSEWHERE CLASSIFIED |
| 2798 | OTHER SPECIFIED DISORDERS INVOLVING THE IMMUNE MECHANISM |
| 2799 | UNSPECIFIED DISORDER OF IMMUNE MECHANISM |
| 28409 | CONST APLASTC ANEMIA NEC OCT06- |
| 2841 | PANCYTOPENIA OCT06- |
| 2880 | AGRANULOCYTOSIS OCT05- |
| 28800 | NEUTROPENIA NOS OCT06- |

| | |
|-------|--|
| 28801 | CONGENITAL NEUTROPENIA OCT06- |
| 28802 | CYCLIC NEUTROPENIA OCT06- |
| 28803 | DRUG INDUCED NEUTROPENIA OCT06- |
| 28809 | NEUTROPENIA NEC OCT06- |
| 2881 | FUNCTION DIS NEUTROPHILS OCT05- |
| 2882 | GENETIC ANOMALY LEUKOCYT OCT05- |
| 2884 | HEMOPHAGOCYTIC SYNDROMES OCT06- |
| 28850 | LEUKOCYTOPENIA NOS OCT06- |
| 28851 | LYMPHOCYTOPENIA OCT06- |
| 28859 | DECREASED WBC COUNT NEC OCT06- |
| 28953 | NEUTROPENIC SPLENOMEGALY OCT06- |
| 28983 | MYELOFIBROSIS OCT06- |
| 40301 | MAL HYP KIDNEY W CHR KID OCT05- |
| 40311 | BEN HYP KIDNEY W CHR KID OCT05- |
| 40391 | HYP KIDNEY NOS W CHR KID OCT05- |
| 40402 | MAL HY HRT/KID W CHR KID OCT05- |
| 40403 | MAL HYP HRT/KID W HF/KID OCT05- |
| 40412 | BEN HYP HT/KID W CHR KID OCT05- |
| 40413 | BEN HYP HT/KID W HF/KID OCT05- |
| 40492 | HYP HT/KID NOS W CHR KID OCT05- |
| 40493 | HYP HRT/KID NOS W HF/KID OCT05- |
| 5793 | INTEST POSTOP NONABSORB OCT05- |
| 585 | CHRONIC KIDNEY DISEASE OCT05- |
| 5855 | CHRON KIDNEY DIS STAGE V OCT05- |
| 5856 | END STAGE RENAL DISEASE OCT05- |
| 9968 | COMPLICATIONS OF TRANSPLANTED ORGAN |
| 99680 | COMP ORGAN TRANSPLNT NOS |
| 99681 | COMPL KIDNEY TRANSPLANT |
| 99682 | COMPL LIVER TRANSPLANT |
| 99683 | COMPL HEART TRANSPLANT |
| 99684 | COMPL LUNG TRANSPLANT |
| 99685 | COMPL MARROW TRANSPLANT |
| 99686 | COMPL PANCREAS TRANSPLNT |
| 99687 | COMP INTESTINE TRANSPLNT |
| 99689 | COMP OTH ORGAN TRANSPLNT |
| V420 | KIDNEY REPLACED BY TRANSPLANT |
| V421 | HEART REPLACED BY TRANSPLANT |
| V426 | LUNG REPLACED BY TRANSPLANT |
| V427 | LIVER REPLACED BY TRANSPLANT |
| V428 | OTHER SPECIFIED ORGAN OR TISSUE |
| V4281 | BONE MARROW SPECIFIED BY TRANSPLANT |
| V4282 | PERIPHERAL STEM CELLS REPLACED BY TRANSPLANT |
| V4283 | PANCREAS REPLACED BY TRANSPLANT |
| V4284 | INTESTINES REPLACE BY TRANSPLANT |
| V4289 | OTHER REPLACED BY TRANSPLANT |
| V451 | RENAL DIALYSIS STATUS OCT05- |
| V560 | RENAL DIALYSIS ENCOUNTER OCT05- |
| V561 | FT/ADJ XTRCORP DIAL CATH OCT05- |
| V562 | FIT/ADJ PERIT DIAL CATH OCT05- |

C-2: ICD-9-CM cancer codes (includes 4th and 5th digits)

| | | | |
|-----|--|-----|---|
| 140 | Malignant neoplasm of lip | 179 | Malignant neoplasm of uterus, part unspecified |
| 141 | Malignant neoplasm of tongue | 180 | Malignant neoplasm of cervix uteri |
| 142 | Malignant neoplasm of major salivary glands | 181 | Malignant neoplasm of placenta |
| 143 | Malignant neoplasm of gum | 182 | Malignant neoplasm of body of uterus |
| 144 | Malignant neoplasm of floor of mouth | 183 | Malignant neoplasm of ovary and other uterine adnexa |
| 145 | Malignant neoplasm of other and unspecified parts of mouth | 184 | Malignant neoplasm of other and unspecified female genital organs |
| 146 | Malignant neoplasm of oropharynx | 185 | Malignant neoplasm of prostate |
| 147 | Malignant neoplasm of nasopharynx | 186 | Malignant neoplasm of testes |
| 148 | Malignant neoplasm of hypopharynx | 187 | Malignant neoplasm of penis and other male genital organs |
| 149 | Malignant neoplasm of other and ill-defined sites within the lip, oral cavity, and pharynx | 188 | Malignant neoplasm of bladder |
| 150 | Malignant neoplasm of esophagus | 189 | Malignant neoplasm of kidney and other and unspecified urinary organs |
| 151 | Malignant neoplasm of stomach | 190 | Malignant neoplasm of eye |
| 152 | Malignant neoplasm of small intestine, including duodenum | 191 | Malignant neoplasm of brain |
| 153 | Malignant neoplasm of colon | 192 | Malignant neoplasm of other and unspecified parts of nervous system |
| 154 | Malignant neoplasm of rectum, rectosigmoid junction, and anus | 193 | Malignant neoplasm of thyroid gland |
| 155 | Malignant neoplasm of liver and intrahepatic bile ducts | 194 | Endocrine glands and related structures |
| 156 | Malignant neoplasm of gallbladder and extrahepatic bile ducts | 195 | Malignant neoplasm of other, and ill-defined sites |
| 157 | Malignant neoplasm of pancreas | 196 | Secondary and unspecified malignant neoplasm of lymph nodes |
| 158 | Malignant neoplasm of retroperitoneum and peritoneum | 197 | Secondary malignant neoplasm of respiratory and digestive systems |
| 159 | Malignant neoplasm of other and ill-defined sites within the digestive organs and peritoneum | 198 | Secondary malignant neoplasm of other specified sites |
| 160 | Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses | 199 | Malignant neoplasm w/o specification of site |
| 161 | Malignant neoplasm of larynx | 200 | Lymphosarcoma and reticulosarcoma |
| 162 | Malignant neoplasm of trachea, bronchus, and lung | 201 | Hodgkin's Disease |
| 163 | Malignant neoplasm of pleura | 202 | Other malignant neoplasms of lymphoid and histiocytic tissues |
| 164 | Malignant neoplasm of thymus, heart, and mediastinum | 203 | Multiple myeloma and immunoproliferative neoplasms |
| 165 | Malignant neoplasm of other and ill-defined sites within the respiratory system and intrathoracic organs | 204 | Lymphoid leukemia |

| | | | |
|-----|--|------|---|
| 170 | Malignant neoplasm of bone and articular cartilage | 205 | Myeloid leukemia |
| 171 | Malignant neoplasm of connective and other soft tissue | 206 | Monocytic leukemia |
| 172 | Malignant melanoma of skin | 207 | Other specified leukemia |
| 174 | Malignant neoplasm of female breast | 208 | Leukemia of unspecified cell type |
| 175 | Malignant neoplasm of male breast | 2386 | Neoplasm of uncertain behavior of other and unspecified sites and tissues, plasma cells |
| 176 | Karposi's Sarcoma | 2733 | Macroglobulinemia |

Personal history of malignant neoplasm:

| | | | |
|-------|---|-------|--|
| V1000 | Gastrointestinal tract, unspecified | V1049 | Other male genital organs |
| V1001 | Tongue | V1050 | Urinary organ, unspecified |
| V1002 | Other and unspecified oral cavity and pharynx | V1051 | Bladder |
| V1003 | Esophagus | V1052 | Kidney |
| V1004 | Stomach | V1053 | Renal pelvis |
| V1005 | Large intestine | V1059 | Urinary organs, other |
| V1006 | Rectum, rectosigmoid junction, and anus | V1060 | Leukemia, unspecified |
| V1007 | Liver | V1061 | Lymphoid leukemia |
| V1009 | Other | V1062 | Myeloid leukemia |
| V1011 | Bronchus and lung | V1063 | Monocytic leukemia |
| V1012 | Trachea | V1069 | Leukemia, other |
| V1020 | Respiratory organ, unspecified | V1071 | Lymphosarcoma and reticulosarcoma |
| V1021 | Larynx | V1072 | Hodgkin's Disease |
| V1022 | Nasal cavities, middle ear, and accessory sinuses | V1079 | Other lymphatic and hematopoietic neoplasms, other |
| V1029 | Other respiratory and intrathoracic organs, other | V1081 | Bone |
| V103 | Breast | V1082 | Malignant melanoma of skin |
| V1040 | Female genital organ, unspecified | V1083 | Other malignant neoplasm of skin |
| V1041 | Cervix uteri | V1084 | Eye |
| V1042 | Other parts of uterus | V1085 | Brain |
| V1043 | Ovary | V1086 | Other parts of nervous system |
| V1044 | Other female genital organs | V1087 | Thyroid |
| V1045 | Male genital organ, unspecified | V1088 | Other endocrine glands and related structures |
| V1046 | Prostate | V1089 | Other |
| V1047 | Testes | V109 | Unspecified personal history of malignant neoplasm |
| V1048 | Epididymis | | |

C-10: ICD-9-CM codes for infections

| | | | |
|------|-----------------------------------|-------|----------------------------------|
| 0010 | Cholera d/t vib cholerae (Oct 05) | 56213 | Dvrtcli colon w hmrhg |
| 0011 | Cholera d/t vib el tor (Oct 05) | 566 | Anal & rectal abscess |
| 0019 | Cholera nos (Oct 05) | 5670 | Peritonitis in infec dis |
| 0020 | Typhoid fever (Oct 05) | 5671 | Pneumococcal peritonitis |
| 0021 | Paratyphoid fever a (Oct 05) | 5672 | Suppurat peritonitis nec |
| 0022 | Paratyphoid fever b (Oct 05) | 56721 | Peritonitis (acute) gen (Oct 05) |

| | | | |
|-------|------------------------------------|-------|-----------------------------------|
| 0023 | Paratyphoid fever c (Oct 05) | 56722 | Peritoneal abscess (Oct 05) |
| 0029 | Paratyphoid fever nos (Oct 05) | 56723 | Spontan bact peritonitis (Oct 05) |
| 0030 | Salmonella enteritis (Oct 05) | 56729 | Suppurat peritonitis nec (Oct 05) |
| 0031 | Salmonella septicemia (Oct 05) | 56731 | Psoas muscle abscess (Oct 05) |
| 00320 | Local salmonella inf nos (Oct 05) | 56738 | Retroperiton abscess nec (Oct 05) |
| 00321 | Salmonella meningitis (Oct 05) | 56739 | Retroperiton infect nec (Oct 05) |
| 00322 | Salmonella pneumonia (Oct 05) | 56781 | Choleperitonitis (Oct 05) |
| 00323 | Salmonella arthritis (Oct 05) | 56782 | Sclerosing mesenteritis (Oct 05) |
| 00324 | Salmonella osteomyelitis (Oct 05) | 56789 | Peritonitis nec (Oct 05) |
| 00329 | Local salmonella inf nec (Oct 05) | 5679 | Peritonitis nos |
| 0038 | Salmonella infection nec (Oct 05) | 5695 | Intestinal abscess |
| 0039 | Salmonella infection nos (Oct 05) | 56961 | Colosty/enterost infectn |
| 0040 | Shigella dysenteriae (Oct 05) | 5720 | Abscess of liver |
| 0041 | Shigella flexneri (Oct 05) | 5721 | Portal pyemia |
| 0042 | Shigella boydii (Oct 05) | 57400 | Cholelith w ac cholecyst |
| 0043 | Shigella sonnei (Oct 05) | 57401 | Cholelith/ac gb inf-obst |
| 0048 | Shigella infection nec (Oct 05) | 57430 | Choledocholith/ac gb inf |
| 0049 | Shigellosis nos (Oct 05) | 57431 | Choledochlith/ac gb-obst |
| 0050 | Staph food poisoning (Oct 05) | 57460 | Gall&bil cal w/ac w/o ob |
| 0051 | Botulism (Oct 05) | 57461 | Gall&bil cal w/ac w obs |
| 0052 | Food pois d/t c. Perfrin (Oct 05) | 57480 | Gal&bil cal w/ac&chr w/o |
| 0053 | Food pois: clostrid nec (Oct 05) | 57481 | Gal&bil cal w/ac&ch w ob |
| 0054 | Food pois: v. Parahaem (Oct 05) | 5750 | Acute cholecystitis |
| 00581 | Food poisn d/t v. Vulnif (Oct 05) | 57510 | Cholecystitis unspec (Oct 05) |
| 00589 | Bact food poisoning nec (Oct 05) | 57512 | Ac&chron cholecystitis (Oct 05) |
| 0059 | Food poisoning nos (Oct 05) | 5754 | Perforation gallbladder |
| 00800 | Intest infec e coli nos (Oct 05) | 5761 | Cholangitis |
| 00801 | Int inf e coli entrpath (Oct 05) | 5763 | Perforation of bile duct |
| 00802 | Int inf e coli entrtoxgn (Oct 05) | 5770 | Acute pancreatitis (Oct 05) |
| 00803 | Int inf e coli entrmvsv (Oct 05) | 59010 | Ac pyelonephritis nos (Oct 05) |
| 00804 | Int inf e coli entrhmrgr (Oct 05) | 59011 | Ac pyelonephr w med necr (Oct 05) |
| 00809 | Int inf e coli spcf nec (Oct 05) | 5902 | Renal/perirenal abscess (Oct 05) |
| 0081 | Arizona enteritis (Oct 05) | 5903 | Pyeloureteritis cystica (Oct 05) |
| 0082 | Aerobacter enteritis (Oct 05) | 59080 | Pyelonephritis nos (Oct 05) |
| 0083 | Proteus enteritis (Oct 05) | 59081 | Pyelonephrit in oth dis (Oct 05) |
| 00841 | Staphylococc enteritis (Oct 05) | 5909 | Infection of kidney nos (Oct 05) |
| 00842 | Pseudomonas enteritis (Oct 05) | 5950 | Acute cystitis (Oct 05) |
| 00843 | Int infec campylobacter (Oct 05) | 5954 | Cystitis in oth dis (Oct 05) |
| 00844 | Int inf yrsnia entreltca (Oct 05) | 59581 | Cystitis cystica (Oct 05) |
| 00845 | Int inf clstridium dfcile (Oct 05) | 59589 | Cystitis nec (Oct 05) |
| 00846 | Intes infec oth anerobes (Oct 05) | 5959 | Cystitis nos (Oct 05) |
| 00847 | Int inf oth grm neg bctr (Oct 05) | 5970 | Urethral abscess (Oct 05) |
| 00849 | Bacterial enteritis nec (Oct 05) | 59800 | Urethr strict:infect nos (Oct 05) |
| 0085 | Bacterial enteritis nos (Oct 05) | 59801 | Ureth strict:oth infect (Oct 05) |
| 0200 | Bubonic plague (Oct 05) | 5990 | Urin tract infection nos (Oct 05) |
| 0201 | Cellulocutaneous plague (Oct 05) | 6010 | Acute prostatitis (Oct 05) |
| 0202 | Septicemic plague (Oct 05) | 6012 | Abscess of prostate (Oct 05) |
| 0203 | Primary pneumonic plague (Oct 05) | 6013 | Prostatocystitis (Oct 05) |
| 0204 | Secondary pneumon plague (Oct 05) | 6014 | Prostatitis in oth dis (Oct 05) |

| | | | |
|-------|-----------------------------------|-------|------------------------------------|
| 0205 | Pneumonic plague nos (Oct 05) | 6018 | Prostatitis (Oct 05) |
| 0208 | Other types of plague (Oct 05) | 6019 | Prostatitis nos (Oct 05) |
| 0209 | Plague nos (Oct 05) | 6031 | Infected hydrocele (Oct 05) |
| 0210 | Ulceroglandul tularemia (Oct 05) | 6040 | Orchitis with abscess (Oct 05) |
| 0211 | Enteric tularemia (Oct 05) | 60490 | Orchitis/epididymit nos (Oct 05) |
| 0212 | Pulmonary tularemia (Oct 05) | 60491 | Orchitis in oth disease (Oct 05) |
| 0213 | Oculoglandular tularemia (Oct 05) | 6071 | Balanoposthitis (Oct 05) |
| 0218 | Tularemia nec (Oct 05) | 6072 | Inflam dis, penis nec (Oct 05) |
| 0219 | Tularemia nos (Oct 05) | 6080 | Seminal vesiculitis (Oct 05) |
| 0220 | Cutaneous anthrax (Oct 05) | 6084 | Male gen inflam dis nec (Oct 05) |
| 0221 | Pulmonary anthrax (Oct 05) | 6110 | Inflam disease of breast (Oct 05) |
| 0222 | Gastrointestinal anthrax (Oct 05) | 6140 | Ac salpingo-oophoritis (Oct 05) |
| 0223 | Anthrax septicemia (Oct 05) | 6141 | Chron salpingitis oophoritis (Oct |
| 0228 | Other anthrax manifest (Oct 05) | 6142 | Salpingo-oophoritis nos (Oct 05) |
| 0229 | Anthrax nos (Oct 05) | 6143 | Acute parametritis (Oct 05) |
| 0230 | Brucella melitensis (Oct 05) | 6144 | Chron or unsp cellulitis (Oct 05) |
| 0231 | Brucella abortus (Oct 05) | 6145 | Ac pelv peritonitis-fem (Oct 05) |
| 0232 | Brucella suis (Oct 05) | 6149 | Pid nos (Oct 05) |
| 0233 | Brucella canis (Oct 05) | 6150 | Ac uterine inflammation (Oct 05) |
| 0238 | Brucellosis nec (Oct 05) | 6159 | Uterine inflam dis nos (Oct 05) |
| 0239 | Brucellosis nos (Oct 05) | 6160 | Cervicitis (Oct 05) |
| 024 | Glanders (Oct 05) | 61610 | Vaginitis nos (Oct 05) |
| 025 | Melioidosis (Oct 05) | 6163 | Bartholin's gland abscess (Oct 05) |
| 0260 | Spirillary fever (Oct 05) | 6164 | Abscess of vulva nec (Oct 05) |
| 0261 | Streptobacillary fever (Oct 05) | 63400 | Spon abor w pel inf-unsp (Oct 05) |
| 0269 | Rat-bite fever nos (Oct 05) | 63401 | Spon abor w pelv inf-inc (Oct 05) |
| 0270 | Listeriosis (Oct 05) | 63402 | Spon abor w pel inf-comp (Oct 05) |
| 0271 | Erysipelothrix infection (Oct 05) | 63500 | Leg abor w pelv inf-unsp (Oct 05) |
| 0272 | Pasteurellosis (Oct 05) | 63501 | Leg abor w pelv inf-inc (Oct 05) |
| 0278 | Zoonotic bact dis nec (Oct 05) | 63502 | Leg abor w pelv inf-comp (Oct 05) |
| 0279 | Zoonotic bact dis nos (Oct 05) | 63600 | Illeg ab w pelv inf-unsp (Oct 05) |
| 0320 | Faucial diphtheria (Oct 05) | 63601 | Illeg ab w pelv inf-inc (Oct 05) |
| 0321 | Nasopharynx diphtheria (Oct 05) | 63602 | Illeg ab w pelv inf-comp (Oct 05) |
| 0322 | Ant nasal diphtheria (Oct 05) | 63700 | Abort nos w pel inf-unsp (Oct 05) |
| 0323 | Laryngeal diphtheria (Oct 05) | 63701 | Abort nos w pel inf-inc (Oct 05) |
| 03281 | Conjunctival diphtheria (Oct 05) | 63702 | Abort nos w pel inf-comp (Oct 05) |
| 03282 | Diphtheritic myocarditis (Oct 05) | 6380 | Attem abort w pelvic inf (Oct 05) |
| 03283 | Diphtheritic peritonitis (Oct 05) | 6390 | Postabortion gu infect (Oct 05) |
| 03284 | Diphtheritic cystitis (Oct 05) | 64650 | Bacteriuria preg-unspec (Oct 05) |
| 03285 | Cutaneous diphtheria (Oct 05) | 64651 | Asym bacteriuria-deliver (Oct 05) |
| 03289 | Diphtheria nec (Oct 05) | 64652 | Asy bacteriuria-del w p/p (Oct 05) |
| 0329 | Diphtheria nos (Oct 05) | 64653 | Asy bacteriuria-antepart (Oct 05) |
| 0330 | Bordetella pertussis (Oct 05) | 64654 | Asy bacteriuria-postpart (Oct 05) |
| 0331 | Bordetella parapertussis (Oct 05) | 64660 | Gu infect in preg-unspec (Oct 05) |
| 0338 | Whooping cough nec (Oct 05) | 64661 | Gu infection-delivered (Oct 05) |
| 0339 | Whooping cough nos (Oct 05) | 64662 | Gu infection-deliv w p/p (Oct 05) |
| 0340 | Strep sore throat (Oct 05) | 64663 | Gu infection-antepartum (Oct 05) |
| 0341 | Scarlet fever (Oct 05) | 64664 | Gu infection-postpartum (Oct 05) |
| 035 | Erysipelas (Oct 05) | 64710 | Gonorrhea in preg-unspec (Oct 05) |

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|-------|-----------------------------------|-------|-----------------------------------|
| 0360 | Meningococcal meningitis (Oct 05) | 64711 | Gonorrhea-delivered (Oct 05) |
| 0361 | Meningococc encephalitis (Oct 05) | 64712 | Gonorrhea-deliver w p/p (Oct 05) |
| 0362 | Meningococemia (Oct 05) | 64713 | Gonorrhea-antepartum (Oct 05) |
| 0363 | Meningococc adrenal synd (Oct 05) | 64714 | Gonorrhea-postpartum (Oct 05) |
| 03640 | Meningococc carditis nos (Oct 05) | 64780 | Inf dis in preg nec-unsp (Oct 05) |
| 03641 | Meningococc pericarditis (Oct 05) | 64781 | Infect dis nec-delivered (Oct 05) |
| 03642 | Meningococc endocarditis (Oct 05) | 64782 | Infect dis nec-del w p/p (Oct 05) |
| 03643 | Meningococc myocarditis (Oct 05) | 64783 | Infect dis nec-antepart (Oct 05) |
| 03681 | Meningococc optic neurit (Oct 05) | 64784 | Infect dis nec-postpart (Oct 05) |
| 03682 | Meningococc arthropathy (Oct 05) | 64790 | Infect in preg nos-unsp (Oct 05) |
| 03689 | Meningococcal infect nec (Oct 05) | 64791 | Infect nos-delivered (Oct 05) |
| 0369 | Meningococcal infect nos (Oct 05) | 64792 | Infect nos-deliver w p/p (Oct 05) |
| 037 | Tetanus (Oct 05) | 64793 | Infect nos-antepartum (Oct 05) |
| 0380 | Streptococcal septicemia (Oct 05) | 64794 | Infect nos-postpartum (Oct 05) |
| 03810 | Staphylcocc septicem nos (Oct 05) | 65840 | Amniotic infection-unsp (Oct 05) |
| 03811 | Staph aureus septicemia (Oct 05) | 65841 | Amniotic infection-deliv (Oct 05) |
| 03819 | Staphylcocc septicem nec (Oct 05) | 65843 | Amniotic infect-antepart (Oct 05) |
| 0382 | Pneumococcal septicemia (Oct 05) | 67000 | Major puerp infect-unsp (Oct 05) |
| 0383 | Anaerobic septicemia (Oct 05) | 67002 | Major puerp inf-del p/p (Oct 05) |
| 03840 | Gram-neg septicemia nos (Oct 05) | 67004 | Major puerp inf-postpart (Oct 05) |
| 03841 | H. Influenae septicemia (Oct 05) | 67500 | Infect nipple preg-unsp (Oct 05) |
| 03842 | E coli septicemia (Oct 05) | 67501 | Infect nipple-delivered (Oct 05) |
| 03843 | Pseudomonas septicemia (Oct 05) | 67502 | Infect nipple-del w p/p (Oct 05) |
| 03844 | Serratia septicemia (Oct 05) | 67503 | Infect nipple-antepartum (Oct 05) |
| 03849 | Gram-neg septicemia nec (Oct 05) | 67504 | Infect nipple-postpartum (Oct 05) |
| 0388 | Septicemia nec (Oct 05) | 67510 | Breast abscess preg-unsp (Oct 05) |
| 0389 | Septicemia nos (Oct 05) | 67511 | Breast abscess-delivered (Oct 05) |
| 0390 | Cutaneous actinomycosis (Oct 05) | 67512 | Breast abscess-del w p/p (Oct 05) |
| 0391 | Pulmonary actinomycosis (Oct 05) | 67513 | Breast abscess-antepart (Oct 05) |
| 0392 | Abdominal actinomycosis (Oct 05) | 67514 | Breast abscess-postpart (Oct 05) |
| 0393 | Cervicofac actinomycosis (Oct 05) | 67580 | Breast inf preg nec-unsp (Oct 05) |
| 0394 | Madura foot (Oct 05) | 67581 | Breast infect nec-deliv (Oct 05) |
| 0398 | Actinomycosis nec (Oct 05) | 67582 | Breast inf nec-del w p/p (Oct 05) |
| 0399 | Actinomycosis nos (Oct 05) | 67583 | Breast inf nec-antepart (Oct 05) |
| 0400 | Gas gangrene (Oct 05) | 67584 | Breast inf nec-postpart (Oct 05) |
| 0401 | Rhinoscleroma (Oct 05) | 67590 | Breast inf preg nos-unsp (Oct 05) |
| 0402 | Whipple's disease (Oct 05) | 67591 | Breast infect nos-deliv (Oct 05) |
| 0403 | Necrobacillosis (Oct 05) | 67592 | Breast inf nos-del w p/p (Oct 05) |
| 04081 | Tropical pyomyositis (Oct 05) | 67593 | Breast inf nos-antepart (Oct 05) |
| 04082 | Toxic shock syndrome (Oct 05) | 67594 | Breast inf nos-postpart (Oct 05) |
| 04089 | Bacterial diseases nec (Oct 05) | 6800 | Carbuncle of face (Oct 05) |
| 04100 | Streptococcus unspcf (Oct 05) | 6801 | Carbuncle of neck (Oct 05) |
| 04101 | Streptococcus group a (Oct 05) | 6802 | Carbuncle of trunk (Oct 05) |
| 04102 | Streptococcus group b (Oct 05) | 6803 | Carbuncle of arm (Oct 05) |
| 04103 | Streptococcus group c (Oct 05) | 6804 | Carbuncle of hand (Oct 05) |
| 04104 | Enterococcus group d (Oct 05) | 6805 | Carbuncle of buttock (Oct 05) |
| 04105 | Streptococcus group g (Oct 05) | 6806 | Carbuncle of leg (Oct 05) |
| 04109 | Other streptococcus (Oct 05) | 6807 | Carbuncle of foot (Oct 05) |
| 04110 | Staphylococcus unspcfied (Oct 05) | 6808 | Carbuncle, site nec (Oct 05) |

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|-------|-----------------------------------|-------|-----------------------------------|
| 04111 | Staphylococcus aureus (Oct 05) | 6809 | Carbuncle nos (Oct 05) |
| 04119 | Other staphylococcus (Oct 05) | 68100 | Cellulitis, finger nos (Oct 05) |
| 0412 | Pneumococcus infect nos (Oct 05) | 68101 | Felon (Oct 05) |
| 0413 | Klebsiella infect nos (Oct 05) | 68102 | Onychia of finger (Oct 05) |
| 0414 | E. Coli infect nos (Oct 05) | 68110 | Cellulitis, toe nos (Oct 05) |
| 0415 | H. Influenzae infect nos (Oct 05) | 68111 | Onychia of toe (Oct 05) |
| 0416 | Proteus infection nos (Oct 05) | 6819 | Cellulitis of digit nos (Oct 05) |
| 0417 | Pseudomonas infect nos (Oct 05) | 6820 | Cellulitis of face (Oct 05) |
| 04182 | Bacteroides fragilis (Oct 05) | 6821 | Cellulitis of neck (Oct 05) |
| 04183 | Clostridium perfringens (Oct 05) | 6822 | Cellulitis of trunk (Oct 05) |
| 04184 | Other anaerobes (Oct 05) | 6823 | Cellulitis of arm (Oct 05) |
| 04185 | Oth gram negatv bacteria (Oct 05) | 6824 | Cellulitis of hand (Oct 05) |
| 04186 | Helicobacter pylori (Oct 05) | 6825 | Cellulitis of buttock (Oct 05) |
| 04189 | Oth specf bacteria (Oct 05) | 6826 | Cellulitis of leg (Oct 05) |
| 0419 | Bacterial infection nos (Oct 05) | 6827 | Cellulitis of foot (Oct 05) |
| 0980 | Acute gc infect lower gu (Oct 05) | 6828 | Cellulitis, site nec (Oct 05) |
| 09810 | Gc (acute) upper gu nos (Oct 05) | 6829 | Cellulitis, site nos (Oct 05) |
| 09811 | Gc cystitis (acute) (Oct 05) | 683 | Acute lymphadenitis (Oct 05) |
| 09812 | Gc prostatitis (acute) (Oct 05) | 684 | Impetigo (Oct 05) |
| 09813 | Gc orchitis (acute) (Oct 05) | 68600 | Pyoderma nos (Oct 05) |
| 09814 | Gc sem vesiculit (acute) (Oct 05) | 68601 | Pyoderma gangrenosum (Oct 05) |
| 09815 | Gc cervicitis (acute) (Oct 05) | 68609 | Pyoderma other (Oct 05) |
| 09816 | Gc endometritis (acute) (Oct 05) | 6868 | Local skin infection nec (Oct 05) |
| 09817 | Acute gc salpingitis (Oct 05) | 6869 | Local skin infection nos (Oct 05) |
| 09819 | Gc (acute) upper gu nec (Oct 05) | 69581 | Ritter's disease (Oct 05) |
| 0982 | Chr gc infect lower gu (Oct 05) | 70700 | Decubitus ulcer site nos (Oct 05) |
| 09830 | Chr gc upper gu nos (Oct 05) | 70701 | Decubitus ulcer,elbow (Oct 05) |
| 09831 | Gc cystitis, chronic (Oct 05) | 70702 | Decubitus ulcer,up back (Oct 05) |
| 09832 | Gc prostatitis, chronic (Oct 05) | 70703 | Decubitus ulcer,low back (Oct 05) |
| 09833 | Gc orchitis, chronic (Oct 05) | 70704 | Decubitus ulcer,hip (Oct 05) |
| 09834 | Gc sem vesiculitis, chr (Oct 05) | 70705 | Decubitus ulcer,buttock (Oct 05) |
| 09835 | Gc cervicitis, chronic (Oct 05) | 70706 | Decubitus ulcer,ankle (Oct 05) |
| 09836 | Gc endometritis, chronic (Oct 05) | 70707 | Decubitus ulcer,heel (Oct 05) |
| 09837 | Gc salpingitis (chronic) (Oct 05) | 70709 | Decubitus ulcer,site nec (Oct 05) |
| 09839 | Chr gc upper gu nec (Oct 05) | 71100 | Pyogen arthritis-unspec (Oct 05) |
| 09840 | Gonococcal conjunctivit (Oct 05) | 71101 | Pyogen arthritis-shlder (Oct 05) |
| 09841 | Gonococcal iridocyclitis (Oct 05) | 71102 | Pyogen arthritis-up/arm (Oct 05) |
| 09842 | Gonococcal endophthalmia (Oct 05) | 71103 | Pyogen arthritis-forearm (Oct 05) |
| 09843 | Gonococcal keratitis (Oct 05) | 71104 | Pyogen arthritis-hand (Oct 05) |
| 09849 | Gonococcal eye nec (Oct 05) | 71105 | Pyogen arthritis-pelvis (Oct 05) |
| 09850 | Gonococcal arthritis (Oct 05) | 71106 | Pyogen arthritis-l/leg (Oct 05) |
| 09851 | Gonococcal synovitis (Oct 05) | 71107 | Pyogen arthritis-ankle (Oct 05) |
| 09852 | Gonococcal bursitis (Oct 05) | 71108 | Pyogen arthritis nec (Oct 05) |
| 09853 | Gonococcal spondylitis (Oct 05) | 71109 | Pyogen arthritis-mult (Oct 05) |
| 09859 | Gc infect joint nec (Oct 05) | 71190 | Inf arthritis nos-unspec (Oct 05) |
| 0986 | Gonococcal infec pharynx (Oct 05) | 71191 | Inf arthritis nos-shlder (Oct 05) |
| 0987 | Gc infect anus & rectum (Oct 05) | 71192 | Inf arthritis nos-up/arm (Oct 05) |
| 09881 | Gonococcal keratosis (Oct 05) | 71193 | Inf arthrit nos-forearm (Oct 05) |
| 09882 | Gonococcal meningitis (Oct 05) | 71194 | Inf arthrit nos-hand (Oct 05) |

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|-------|------------------------------------|-------|-----------------------------------|
| 09883 | Gonococcal pericarditis (Oct 05) | 71195 | Inf arthrit nos-pelvis (Oct 05) |
| 09884 | Gonococcal endocarditis (Oct 05) | 71196 | Inf arthrit nos-l/leg (Oct 05) |
| 09885 | Gonococcal heart dis nec (Oct 05) | 71197 | Inf arthrit nos-ankle (Oct 05) |
| 09886 | Gonococcal peritonitis (Oct 05) | 71198 | Inf arthrit nos-oth site (Oct 05) |
| 09889 | Gonococcal inf site nec (Oct 05) | 71199 | Inf arthritis nos-mult (Oct 05) |
| 3200 | Hemophilus meningitis (Oct 05) | 7280 | Infective myositis (Oct 05) |
| 3201 | Pneumococcal meningitis (Oct 05) | 72886 | Necrotizing fasciitis (Oct 05) |
| 3202 | Streptococcal meningitis (Oct 05) | 73000 | Ac osteomyelitis-unspec (Oct 05) |
| 3203 | Staphylococcal meningitis (Oct 05) | 73001 | Ac osteomyelitis-shlder (Oct 05) |
| 3207 | Mening in oth bact dis (Oct 05) | 73002 | Ac osteomyelitis-up/arm (Oct 05) |
| 32081 | Anaerobic meningitis (Oct 05) | 73003 | Ac osteomyelitis-forearm (Oct 05) |
| 32082 | Mningits gram-neg bct nec (Oct 05) | 73004 | Ac osteomyelitis-hand (Oct 05) |
| 32089 | Meningitis oth spcf bact (Oct 05) | 73005 | Ac osteomyelitis-pelvis (Oct 05) |
| 3209 | Bacterial meningitis nos (Oct 05) | 73006 | Ac osteomyelitis-l/leg (Oct 05) |
| 3229 | Meningitis nos (Oct 05) | 73007 | Ac osteomyelitis-ankle (Oct 05) |
| 3240 | Intracranial abscess (Oct 05) | 73008 | Ac osteomyelitis nec (Oct 05) |
| 3241 | Intraspinial abscess (Oct 05) | 73009 | Ac osteomyelitis-mult (Oct 05) |
| 3249 | Cns abscess nos (Oct 05) | 73010 | Chr osteomyelitis-unsp (Oct 05) |
| 36000 | Purulent endophthalm nos (Oct 05) | 73011 | Chr osteomyelit-shlder (Oct 05) |
| 36001 | Acute endophthalmitis (Oct 05) | 73012 | Chr osteomyelit-up/arm (Oct 05) |
| 36002 | Panophthalmitis (Oct 05) | 73013 | Chr osteomyelit-forearm (Oct 05) |
| 36004 | Vitreous abscess (Oct 05) | 73014 | Chr osteomyelit-hand (Oct 05) |
| 37055 | Corneal abscess (Oct 05) | 73015 | Chr osteomyelit-pelvis (Oct 05) |
| 37200 | Acute conjunctivitis nos (Oct 05) | 73016 | Chr osteomyelit-l/leg (Oct 05) |
| 37203 | Mucopur conjunctivit nec (Oct 05) | 73017 | Chr osteomyelit-ankle (Oct 05) |
| 37204 | Pseudomemb conjunctivit (Oct 05) | 73018 | Chr osteomyelit nec (Oct 05) |
| 37220 | Blepharoconjunctivit nos (Oct 05) | 73019 | Chr osteomyelit-mult (Oct 05) |
| 37221 | Angular blepharoconjunct (Oct 05) | 73020 | Osteomyelitis nos-unspec (Oct 05) |
| 37230 | Conjunctivitis nos (Oct 05) | 73021 | Osteomyelitis nos-shlder (Oct 05) |
| 37300 | Blepharitis nos (Oct 05) | 73022 | Osteomyelitis nos-up/arm (Oct 05) |
| 37301 | Ulcerative blepharitis (Oct 05) | 73023 | Osteomyelit nos-forearm (Oct 05) |
| 37311 | Hordeolum externum (Oct 05) | 73024 | Osteomyelitis nos-hand (Oct 05) |
| 37312 | Hordeolum internum (Oct 05) | 73025 | Osteomyelitis nos-pelvis (Oct 05) |
| 37313 | Abscess of eyelid (Oct 05) | 73026 | Osteomyelitis nos-l/leg (Oct 05) |
| 37500 | Dacryoadenitis nos (Oct 05) | 73027 | Osteomyelitis nos-ankle (Oct 05) |
| 37501 | Acute dacryoadenitis (Oct 05) | 73028 | Osteomyelit nos-oth site (Oct 05) |
| 37530 | Dacryocystitis nos (Oct 05) | 73029 | Osteomyelitis nos-mult (Oct 05) |
| 37531 | Acute canaliculitis (Oct 05) | 73030 | Periostitis-unspec (Oct 05) |
| 37532 | Acute dacryocystitis (Oct 05) | 73031 | Periostitis-shlder (Oct 05) |
| 37600 | Acute inflam nos, orbit (Oct 05) | 73032 | Periostitis-up/arm (Oct 05) |
| 37601 | Orbital cellulitis (Oct 05) | 73033 | Periostitis-forearm (Oct 05) |
| 37602 | Orbital periostitis (Oct 05) | 73034 | Periostitis-hand (Oct 05) |
| 37603 | Orbital osteomyelitis (Oct 05) | 73035 | Periostitis-pelvis (Oct 05) |
| 37604 | Tenonitis (Oct 05) | 73036 | Periostitis-l/leg (Oct 05) |
| 38010 | Infec otitis externa nos (Oct 05) | 73037 | Periostitis-ankle (Oct 05) |
| 38011 | Acute infection of pinna (Oct 05) | 73038 | Periostitis nec (Oct 05) |
| 38012 | Acute swimmers' ear (Oct 05) | 73039 | Periostitis-mult (Oct 05) |
| 38013 | Ac infect extern ear nec (Oct 05) | 73080 | Bone infect nec-unspec (Oct 05) |
| 38014 | Malignant otitis externa (Oct 05) | 73081 | Bone infect nec-shlder (Oct 05) |

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|-------|--|-------|-----------------------------------|
| 38150 | Eustachian salping nos (Oct 05) | 73082 | Bone infect nec-up/arm (Oct 05) |
| 38151 | Ac eustachian salping (Oct 05) | 73083 | Bone infect nec-forearm (Oct 05) |
| 38200 | Ac supp otitis media nos (Oct 05) | 73084 | Bone infect nec-hand (Oct 05) |
| 38201 | Ac supp om w drum rupt (Oct 05) | 73085 | Bone infect nec-pelvis (Oct 05) |
| 38202 | Ac supp om in oth dis (Oct 05) | 73086 | Bone infect nec-l/leg (Oct 05) |
| 3821 | Chr tubotymp supp otitis media (Oct 05) | 73087 | Bone infect nec-ankle (Oct 05) |
| 3822 | Chr atticoantral supp otitis media(Oct 05) | 73088 | Bone infect nec-oth site (Oct 05) |
| 3823 | Chr supp otitis media nos (Oct 05) | 73089 | Bone infect nec-mult (Oct 05) |
| 3824 | Suppur otitis media nos (Oct 05) | 73090 | Bone infec nos-unsp site (Oct 05) |
| 3829 | Otitis media nos (Oct 05) | 73091 | Bone infect nos-shldr (Oct 05) |
| 38300 | Ac mastoiditis w/o compl (Oct 05) | 73092 | Bone infect nos-up/arm (Oct 05) |
| 38301 | Subperi mastoid abscess (Oct 05) | 73093 | Bone infect nos-forearm (Oct 05) |
| 38302 | Ac mastoiditis-compl nec (Oct 05) | 73094 | Bone infect nos-hand (Oct 05) |
| 38320 | Petrositis nos (Oct 05) | 73095 | Bone infect nos-pelvis (Oct 05) |
| 38321 | Acute petrositis (Oct 05) | 73096 | Bone infect nos-l/leg (Oct 05) |
| 38400 | Acute myringitis nos (Oct 05) | 73097 | Bone infect nos-ankle (Oct 05) |
| 38630 | Labyrinthitis nos (Oct 05) | 73098 | Bone infect nos-oth site (Oct 05) |
| 38631 | Serous labyrinthitis (Oct 05) | 73099 | Bone infect nos-mult (Oct 05) |
| 38632 | Circumscri labyrinthitis (Oct 05) | 7713 | Tetanus neonatorum (Oct 05) |
| 38633 | Suppurativ labyrinthitis (Oct 05) | 7714 | Omphalitis of newborn (Oct 05) |
| 4200 | Ac pericardit in oth dis (Oct 05) | 7715 | Neonatal infec mastitis (Oct 05) |
| 42090 | Acute pericarditis nos (Oct 05) | 77181 | Nb septicemia sepsis (Oct 05) |
| 42099 | Acute pericarditis nec (Oct 05) | 77182 | Nb urinary tract infectn (Oct 05) |
| 4210 | Ac/subac bact endocard (Oct 05) | 77183 | Bacteremia of newborn (Oct 05) |
| 4211 | Ac/subac infect endocard (Oct 05) | 77189 | Perinatal infection nec (Oct 05) |
| 4219 | Ac/subac endocardit nos (Oct 05) | 7775 | Necrot enterocolitis nb (Oct 05) |
| 42292 | Septic myocarditis (Oct 05) | 7854 | Gangrene (Oct 05) |
| 4610 | Ac maxillary sinusitis (Oct 05) | 78552 | Septic shock (Oct 05) |
| 4611 | Ac frontal sinusitis (Oct 05) | 7907 | Bacteremia (Oct 05) |
| 4612 | Ac ethmoidal sinusitis (Oct 05) | 9101 | Abrasion head-infected (Oct 05) |
| 4613 | Ac sphenoidal sinusitis (Oct 05) | 9103 | Blister head-infected (Oct 05) |
| 4618 | Other acute sinusitis (Oct 05) | 9105 | Insect bite head-infect (Oct 05) |
| 4619 | Acute sinusitis nos (Oct 05) | 9107 | Foreign body head-infect (Oct 05) |
| 462 | Acute pharyngitis (Oct 05) | 9109 | Superf inj head nec-inf (Oct 05) |
| 463 | Acute tonsillitis (Oct 05) | 9111 | Abrasion trunk-infected (Oct 05) |
| 46430 | Ac epiglottitis no obstr (Oct 05) | 9113 | Blister trunk-infected (Oct 05) |
| 46431 | Ac epiglottitis w obstr (Oct 05) | 9115 | Insect bite trunk-infec (Oct 05) |
| 4660 | Acute bronchitis (Oct 05) | 9117 | Foreign body trunk-infec (Oct 05) |
| 475 | Peritonsillar abscess (Oct 05) | 9119 | Superf inj trnk nec-inf (Oct 05) |
| 47822 | Parapharyngeal abscess (Oct 05) | 9121 | Abrasion shldr/arm-infec (Oct 05) |
| 47824 | Retropharyngeal abscess (Oct 05) | 9123 | Blister shoulder/arm-inf (Oct 05) |
| 481 | Pneumococcal pneumonia (Oct 05) | 9125 | Insect bite shld/arm-inf (Oct 05) |
| 4820 | K. Pneumoniae pneumonia (Oct 05) | 9127 | Fb shoulder/arm-infect (Oct 05) |
| 4821 | Pseudomonal pneumonia (Oct 05) | 9129 | Superf inj shldr nec-inf (Oct 05) |
| 4822 | H.influenzae pneumonia (Oct 05) | 9131 | Abrasion forearm-infect (Oct 05) |
| 48230 | Streptococcal pneumn nos (Oct 05) | 9133 | Blister forearm-infected (Oct 05) |
| 48231 | Pneumonia strptococcus a (Oct 05) | 9135 | Insect bite forearm-inf (Oct 05) |
| 48232 | Pneumonia strptococcus b (Oct 05) | 9137 | Foreign body forearm-inf (Oct 05) |
| 48239 | Pneumonia oth strep (Oct 05) | 9139 | Suprf inj forarm nec-inf (Oct 05) |

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| 48240 | Staphylococcal pneu nos (Oct 05) | 9141 | Abrasion hand-infected (Oct 05) |
| 48241 | Staph aureus pneumonia (Oct 05) | 9143 | Blister hand-infected (Oct 05) |
| 48249 | Staph pneumonia nec (Oct 05) | 9145 | Insect bite hand-infect (Oct 05) |
| 48281 | Pneumonia anaerobes (Oct 05) | 9147 | Foreign body hand-infect (Oct 05) |
| 48282 | Pneumonia e coli (Oct 05) | 9149 | Superf inj hand nec-inf (Oct 05) |
| 48283 | Pneumo oth grm-neg bact (Oct 05) | 9151 | Abrasion finger-infected (Oct 05) |
| 48284 | Legionnaires' disease (Oct 05) | 9153 | Blister finger-infected (Oct 05) |
| 48289 | Pneumonia oth spcf bact (Oct 05) | 9155 | Insect bite finger-infec (Oct 05) |
| 4829 | Bacterial pneumonia nos (Oct 05) | 9157 | Foreign body finger-inf (Oct 05) |
| 4843 | Pneumonia in whooping cough (Oct | 9159 | Suprf inj finger nec-inf (Oct 05) |
| 4845 | Pneumonia in anthrax (Oct 05) | 9161 | Abrasion hip/leg-infect (Oct 05) |
| 4848 | Pneumonia in other inf dis (Oct 05) | 9163 | Blister hip & leg-infect (Oct 05) |
| 485 | Bronchopneumonia org nos (Oct | 9165 | Insect bite hip/leg-inf (Oct 05) |
| 486 | Pneumonia, organism nos (Oct 05) | 9167 | Foreign bdy hip/leg-inf (Oct 05) |
| 490 | Bronchitis nos (Oct 05) | 9169 | Superf inj leg nec-infec (Oct 05) |
| 49122 | Obs chr bronc w ac bronc (Oct 05) | 9171 | Abrasion foot/toe-infec (Oct 05) |
| 4941 | Bronchiectasis w ac exac (Oct 05) | 9173 | Blister foot & toe-infec (Oct 05) |
| 5100 | Empyema with fistula (Oct 05) | 9175 | Insect bite foot/toe-inf (Oct 05) |
| 5109 | Empyema w/o fistula (Oct 05) | 9177 | Foreign bdy foot/toe-inf (Oct 05) |
| 5111 | Bact pleur/effus not tb (Oct 05) | 9179 | Superf inj foot nec-inf (Oct 05) |
| 5130 | Abscess of lung (Oct 05) | 9191 | Abrasion nec-infected (Oct 05) |
| 5131 | Abscess of mediastinum (Oct 05) | 9193 | Blister nec-infected (Oct 05) |
| 51901 | Tracheostomy infection (Oct 05) | 9195 | Insect bite nec-infected (Oct 05) |
| 5192 | Mediastinitis (Oct 05) | 9197 | Superficial fb nec-infec (Oct 05) |
| 5220 | Pulpitis (Oct 05) | 9199 | Superfic inj nec-infect (Oct 05) |
| 5225 | Periapical abscess (Oct 05) | 99590 | Sirs, nos (Oct 05) |
| 5227 | Periapical absc w sinus (Oct 05) | 99591 | Sirs-infect w/o org dysf (Oct 05) |
| 5230 | Acute gingivitis (Oct 05) | 99592 | Sirs-infect w organ dysf (Oct 05) |
| 5233 | Acute periodontitis (Oct 05) | 99660 | Infect inflamm device implant graft nos (Oct 05) |
| 5264 | Inflammation of jaw (Oct 05) | 99661 | Infect inflamm cardiac device implant graft (Oct 05) |
| 5273 | Salivary gland abscess (Oct 05) | 99662 | Infect inflamm vascular device implant graft (Oct 05) |
| 5283 | Cellulitis/abscess mouth (Oct 05) | 99663 | Infect inflamm nerv device implant graft (Oct 05) |
| 53641 | Gastrostomy infection (Oct 05) | 99664 | Infect inflamm urinary cath (Oct 05) |
| 5400 | Ac append w peritonitis | 99665 | Infect inflamm gu device implant graft (Oct 05) |
| 5401 | Abscess of appendix | 99666 | Infect inflamm joint prosth (Oct 05) |
| 5409 | Acute appendicitis nos | 99667 | Infect inflamm oth orthop device implant graft nos (Oct 05) |
| 541 | Appendicitis nos | 99669 | Infect inflamm oth device implant graft (Oct 05) |
| 542 | Other appendicitis | 99762 | Infection amputat stump (Oct 05) |
| 56201 | Dvrtcli sml int w/o hmrhg | 99851 | Infected postop seroma (Oct 05) |
| 56203 | Dvrtcli sml int w hmrhg | 99859 | Other postop infection (Oct 05) |
| 56211 | Dvrtcli colon w/o hmrhg | 9993 | Infec compl med care nec (Oct 05) |

Code List W: ICD-10-WHO codes for denominator calculation (refer to codes below)

| App No. | Code List | Indicator | Function |
|---------|--|--|--|
| W-1 | ICD-10-WHO immunocompromised state codes | Catheter-Related Bloodstream Infection, Postoperative sepsis | Denominator exclusion, if principal diagnosis or secondary diagnosis |
| W-2 | ICD-10-WHO cancer codes | Catheter-Related Bloodstream Infection, Postoperative sepsis | Denominator exclusion, if principal diagnosis or secondary diagnosis |
| W-10 | ICD-10-WHO codes for infections | Postoperative sepsis | Denominator exclusion, if principal diagnosis |

W-1 ICD-10-WHO immunocompromised state codes

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|-------|---|
| B20.0 | HIV disease resulting in mycobacterial infection |
| B20.1 | HIV disease resulting in other bacterial infections |
| B20.2 | HIV disease resulting in cytomegaloviral disease |
| B20.3 | HIV disease resulting in other viral infections |
| B20.4 | HIV disease resulting in candidiasis |
| B20.5 | HIV disease resulting in other mycoses |
| B20.6 | HIV disease resulting in Pneumocystis carinii pneumonia |
| B20.7 | HIV disease resulting in multiple infections |
| B20.8 | HIV disease resulting in other infectious and parasitic diseases |
| B20.9 | HIV disease resulting in unspecified infectious or parasitic disease |
| B21.0 | HIV disease resulting in Kaposi's sarcoma |
| B21.1 | HIV disease resulting in Burkitt's lymphoma |
| B21.2 | HIV disease resulting in other types of non-Hodgkin's lymphoma |
| B21.3 | HIV disease resulting in other malignant neoplasms of lymphoid, haematopoietic and related tissue |
| B21.7 | HIV disease resulting in multiple malignant neoplasms |
| B21.8 | HIV disease resulting in other malignant neoplasms |
| B21.9 | HIV disease resulting in unspecified malignant neoplasm |
| B22.0 | HIV disease resulting in encephalopathy |
| B22.1 | HIV disease resulting in lymphoid interstitial pneumonitis |
| B22.2 | HIV disease resulting in wasting syndrome |
| B22.7 | HIV disease resulting in multiple diseases classified elsewhere |
| B23.1 | HIV disease resulting in (persistent) generalized lymphadenopathy |
| B23.2 | HIV disease resulting in haematological and immunological abnormalities, not elsewhere classified |
| B23.8 | HIV disease resulting in other specified conditions |
| B24 | Unspecified human immunodeficiency virus [HIV] disease |
| B59 | Pneumocystosis |
| D47.1 | Chronic myeloproliferative disease |
| D70 | Agranulocytosis |
| D71 | Functional disorders of polymorphonuclear neutrophils |
| D72.0 | Genetic anomalies of leukocytes |
| D80.0 | Hereditary hypogammaglobulinaemia |
| D80.1 | Nonfamilial hypogammaglobulinaemia |

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| D80.2 | Selective deficiency of immunoglobulin A [IgA] |
| D80.3 | Selective deficiency of immunoglobulin G [IgG] subclasses |
| D80.4 | Selective deficiency of immunoglobulin M [IgM] |
| D80.5 | Immunodeficiency with increased immunoglobulin M [IgM] |
| D80.6 | Antibody deficiency with near-normal immunoglobulins or with hyperimmunoglobulinaemia |
| D80.7 | Transient hypogammaglobulinaemia of infancy |
| D80.8 | Other immunodeficiencies with predominantly antibody defects |
| D80.9 | Immunodeficiency with predominantly antibody defects, unspecified |
| D81.0 | Severe combined immunodeficiency [SCID] with reticular dysgenesis |
| D81.1 | Severe combined immunodeficiency [SCID] with low T- and B-cell numbers |
| D81.2 | Severe combined immunodeficiency [SCID] with low or normal B-cell numbers |
| D81.3 | Adenosine deaminase [ADA] deficiency |
| D81.4 | Nezelof's syndrome |
| D81.5 | Purine nucleoside phosphorylase [PNP] deficiency |
| D81.6 | Major histocompatibility complex class I deficiency |
| D81.7 | Major histocompatibility complex class II deficiency |
| D81.8 | Other combined immunodeficiencies |
| D81.9 | Combined immunodeficiency, unspecified |
| D82.0 | Wiskott-Aldrich syndrome |
| D82.1 | Di George's syndrome |
| D82.2 | Immunodeficiency with short-limbed stature |
| D82.3 | Immunodeficiency following hereditary defective response to Epstein-Barr virus |
| D82.4 | Hyperimmunoglobulin E [IgE] syndrome |
| D82.8 | Immunodeficiency associated with other specified major defects |
| D82.9 | Immunodeficiency associated with major defect, unspecified |
| D83.0 | Common variable immunodeficiency with predominant abnormalities of B-cell numbers and function |
| D83.1 | Common variable immunodeficiency with predominant immunoregulatory T-cell disorders |
| D83.2 | Common variable immunodeficiency with autoantibodies to B- or T-cells |
| D83.8 | Other common variable immunodeficiencies |
| D83.9 | Common variable immunodeficiency, unspecified |
| D84.0 | Lymphocyte function antigen-1 [LFA-1] defect |
| D84.1 | Defects in the complement system |
| D84.8 | Other specified immunodeficiencies |
| D84.9 | Immunodeficiency, unspecified |
| D89.8 | Other specified disorders involving the immune mechanism, not elsewhere classified |
| D89.9 | Disorder involving the immune mechanism, unspecified |
| E40 | Kwashiorkor |
| E41 | Nutritional marasmus |
| E42 | Marasmic kwashiorkor |
| E43 | Unspecified severe protein-energy malnutrition |
| I12.0 | Hypertensive renal disease with renal failure |
| I13.1 | Hypertensive heart and renal disease with renal failure |
| I13.2 | Hypertensive heart and renal disease with both (congestive) heart failure and renal failure |
| K91.2 | Postsurgical malabsorption, not elsewhere classified |
| N18.0 | End-stage renal disease |
| N18.8 | Other chronic renal failure |

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| T86.0 | Bone-marrow transplant rejection |
| T86.1 | Kidney transplant failure and rejection |
| T86.2 | Heart transplant failure and rejection |
| T86.3 | Heart-lung transplant failure and rejection |
| T86.4 | Liver transplant failure and rejection |
| T86.8 | Failure and rejection of other transplanted organs and tissues |
| T86.9 | Failure and rejection of unspecified transplanted organ and tissue |
| Y83.0 | Surgical Operation with transplant of whole organ or tissue |
| Z49.0 | Preparatory care for dialysis |
| Z49.1 | Extracorporeal dialysis |
| Z49.2 | Other dialysis |
| Z94.0 | Kidney transplant status |
| Z94.1 | Heart transplant status |
| Z94.2 | Lung transplant status |
| Z94.3 | Heart and lungs transplant status |
| Z94.4 | Liver transplant status |
| Z94.8 | Other transplanted organ and tissue status |
| Z94.9 | Transplanted organ and tissue status, unspecified |

W-2 ICD-10-WHO cancer codes

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| C00.0 | Malignant neoplasm: External upper lip |
| C00.1 | Malignant neoplasm: External lower lip |
| C00.2 | Malignant neoplasm: External lip, unspecified |
| C00.3 | Malignant neoplasm: Upper lip, inner aspect |
| C00.4 | Malignant neoplasm: Lower lip, inner aspect |
| C00.5 | Malignant neoplasm: Lip, unspecified, inner aspect |
| C00.6 | Malignant neoplasm: Commissure of lip |
| C00.8 | Malignant neoplasm: Overlapping lesion of lip |
| C00.9 | Malignant neoplasm: Lip, unspecified |
| C01 | Malignant neoplasm of base of tongue |
| C02.0 | Malignant neoplasm: Dorsal surface of tongue |
| C02.1 | Malignant neoplasm: Border of tongue |
| C02.2 | Malignant neoplasm: Ventral surface of tongue |
| C02.3 | Malignant neoplasm: Anterior two-thirds of tongue, part unspecified |
| C02.4 | Malignant neoplasm: Lingual tonsil |
| C02.8 | Malignant neoplasm: Overlapping lesion of tongue |
| C02.9 | Malignant neoplasm: Tongue, unspecified |
| C03.0 | Malignant neoplasm: Upper gum |
| C03.1 | Malignant neoplasm: Lower gum |
| C03.9 | Malignant neoplasm: Gum, unspecified |
| C04.0 | Malignant neoplasm: Anterior floor of mouth |
| C04.1 | Malignant neoplasm: Lateral floor of mouth |
| C04.8 | Malignant neoplasm: Overlapping lesion of floor of mouth |
| C04.9 | Malignant neoplasm: Floor of mouth, unspecified |
| C05.0 | Malignant neoplasm: Hard palate |
| C05.1 | Malignant neoplasm: Soft palate |
| C05.2 | Malignant neoplasm: Uvula |
| C05.8 | Malignant neoplasm: Overlapping lesion of palate |

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| C05.9 | Malignant neoplasm: Palate, unspecified |
| C06.0 | Malignant neoplasm: Cheek mucosa |
| C06.1 | Malignant neoplasm: Vestibule of mouth |
| C06.2 | Malignant neoplasm: Retromolar area |
| C06.8 | Malignant neoplasm: Overlapping lesion of other and unspecified parts of mouth |
| C06.9 | Malignant neoplasm: Mouth, unspecified |
| C07 | Malignant neoplasm of parotid gland |
| C08.0 | Malignant neoplasm: Submandibular gland |
| C08.1 | Malignant neoplasm: Sublingual gland |
| C08.8 | Malignant neoplasm: Overlapping lesion of major salivary glands |
| C08.9 | Malignant neoplasm: Major salivary gland, unspecified |
| C09.0 | Malignant neoplasm: Tonsillar fossa |
| C09.1 | Malignant neoplasm: Tonsillar pillar (anterior)(posterior) |
| C09.8 | Malignant neoplasm: Overlapping lesion of tonsil |
| C09.9 | Malignant neoplasm: Tonsil, unspecified |
| C10.0 | Malignant neoplasm: Vallecula |
| C10.1 | Malignant neoplasm: Anterior surface of epiglottis |
| C10.2 | Malignant neoplasm: Lateral wall of oropharynx |
| C10.3 | Malignant neoplasm: Posterior wall of oropharynx |
| C10.4 | Malignant neoplasm: Branchial cleft |
| C10.8 | Malignant neoplasm: Overlapping lesion of oropharynx |
| C10.9 | Malignant neoplasm: Oropharynx, unspecified |
| C11.0 | Malignant neoplasm: Superior wall of nasopharynx |
| C11.1 | Malignant neoplasm: Posterior wall of nasopharynx |
| C11.2 | Malignant neoplasm: Lateral wall of nasopharynx |
| C11.3 | Malignant neoplasm: Anterior wall of nasopharynx |
| C11.8 | Malignant neoplasm: Overlapping lesion of nasopharynx |
| C11.9 | Malignant neoplasm: Nasopharynx, unspecified |
| C12 | Malignant neoplasm of piriform sinus |
| C13.0 | Malignant neoplasm: Postcricoid region |
| C13.1 | Malignant neoplasm: Aryepiglottic fold, hypopharyngeal aspect |
| C13.2 | Malignant neoplasm: Posterior wall of hypopharynx |
| C13.8 | Malignant neoplasm: Overlapping lesion of hypopharynx |
| C13.9 | Malignant neoplasm: Hypopharynx, unspecified |
| C14.0 | Malignant neoplasm: Pharynx, unspecified |
| C14.2 | Malignant neoplasm: Waldeyer's ring |
| C14.8 | Malignant neoplasm: Overlapping lesion of lip, oral cavity and pharynx |
| C15.0 | Malignant neoplasm: Cervical part of oesophagus |
| C15.1 | Malignant neoplasm: Thoracic part of oesophagus |
| C15.2 | Malignant neoplasm: Abdominal part of oesophagus |
| C15.3 | Malignant neoplasm: Upper third of oesophagus |
| C15.4 | Malignant neoplasm: Middle third of oesophagus |
| C15.5 | Malignant neoplasm: Lower third of oesophagus |
| C15.8 | Malignant neoplasm: Overlapping lesion of oesophagus |
| C15.9 | Malignant neoplasm: Oesophagus, unspecified |
| C16.0 | Malignant neoplasm: Cardia |
| C16.1 | Malignant neoplasm: Fundus of stomach |
| C16.2 | Malignant neoplasm: Body of stomach |

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| C16.3 | Malignant neoplasm: Pyloric antrum |
| C16.4 | Malignant neoplasm: Pylorus |
| C16.5 | Malignant neoplasm: Lesser curvature of stomach, unspecified |
| C16.6 | Malignant neoplasm: Greater curvature of stomach, unspecified |
| C16.8 | Malignant neoplasm: Overlapping lesion of stomach |
| C16.9 | Malignant neoplasm: Stomach, unspecified |
| C17.0 | Malignant neoplasm: Duodenum |
| C17.1 | Malignant neoplasm: Jejunum |
| C17.2 | Malignant neoplasm: Ileum |
| C17.3 | Malignant neoplasm: Meckel's diverticulum |
| C17.8 | Malignant neoplasm: Overlapping lesion of small intestine |
| C17.9 | Malignant neoplasm: Small intestine, unspecified |
| C18.0 | Malignant neoplasm: Caecum |
| C18.1 | Malignant neoplasm: Appendix |
| C18.2 | Malignant neoplasm: Ascending colon |
| C18.3 | Malignant neoplasm: Hepatic flexure |
| C18.4 | Malignant neoplasm: Transverse colon |
| C18.5 | Malignant neoplasm: Splenic flexure |
| C18.6 | Malignant neoplasm: Descending colon |
| C18.7 | Malignant neoplasm: Sigmoid colon |
| C18.8 | Malignant neoplasm: Overlapping lesion of colon |
| C18.9 | Malignant neoplasm: Colon, unspecified |
| C19 | Malignant neoplasm of rectosigmoid junction |
| C20 | Malignant neoplasm of rectum |
| C21.0 | Malignant neoplasm: Anus, unspecified |
| C21.1 | Malignant neoplasm: Anal canal |
| C21.2 | Malignant neoplasm: Cloacogenic zone |
| C21.8 | Malignant neoplasm: Overlapping lesion of rectum, anus and anal canal |
| C22.0 | Malignant neoplasm: Liver cell carcinoma |
| C22.1 | Malignant neoplasm: Intrahepatic bile duct carcinoma |
| C22.2 | Malignant neoplasm: Hepatoblastoma |
| C22.3 | Malignant neoplasm: Angiosarcoma of liver |
| C22.4 | Malignant neoplasm: Other sarcomas of liver |
| C22.7 | Malignant neoplasm: Other specified carcinomas of liver |
| C22.9 | Malignant neoplasm: Liver, unspecified |
| C23 | Malignant neoplasm of gallbladder |
| C24.0 | Malignant neoplasm: Extrahepatic bile duct |
| C24.1 | Malignant neoplasm: Ampulla of Vater |
| C24.8 | Malignant neoplasm: Overlapping lesion of biliary tract |
| C24.9 | Malignant neoplasm: Biliary tract, unspecified |
| C25.0 | Malignant neoplasm: Head of pancreas |
| C25.1 | Malignant neoplasm: Body of pancreas |
| C25.2 | Malignant neoplasm: Tail of pancreas |
| C25.3 | Malignant neoplasm: Pancreatic duct |
| C25.4 | Malignant neoplasm: Endocrine pancreas |
| C25.7 | Malignant neoplasm: Other parts of pancreas |
| C25.8 | Malignant neoplasm: Overlapping lesion of pancreas |
| C25.9 | Malignant neoplasm: Pancreas, unspecified |

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| C26.0 | Malignant neoplasm: Intestinal tract, part unspecified |
| C26.1 | Malignant neoplasm: Spleen |
| C26.8 | Malignant neoplasm: Overlapping lesion of digestive system |
| C26.9 | Malignant neoplasm: Ill-defined sites within the digestive system |
| C30.0 | Malignant neoplasm: Nasal cavity |
| C30.1 | Malignant neoplasm: Middle ear |
| C31.0 | Malignant neoplasm: Maxillary sinus |
| C31.1 | Malignant neoplasm: Ethmoidal sinus |
| C31.2 | Malignant neoplasm: Frontal sinus |
| C31.3 | Malignant neoplasm: Sphenoidal sinus |
| C31.8 | Malignant neoplasm: Overlapping lesion of accessory sinuses |
| C31.9 | Malignant neoplasm: Accessory sinus, unspecified |
| C32.0 | Malignant neoplasm: Glottis |
| C32.1 | Malignant neoplasm: Supraglottis |
| C32.2 | Malignant neoplasm: Subglottis |
| C32.3 | Malignant neoplasm: Laryngeal cartilage |
| C32.8 | Malignant neoplasm: Overlapping lesion of larynx |
| C32.9 | Malignant neoplasm: Larynx, unspecified |
| C33 | Malignant neoplasm of trachea |
| C34.0 | Malignant neoplasm: Main bronchus |
| C34.1 | Malignant neoplasm: Upper lobe, bronchus or lung |
| C34.2 | Malignant neoplasm: Middle lobe, bronchus or lung |
| C34.3 | Malignant neoplasm: Lower lobe, bronchus or lung |
| C34.8 | Malignant neoplasm: Overlapping lesion of bronchus and lung |
| C34.9 | Malignant neoplasm: Bronchus or lung, unspecified |
| C37 | Malignant neoplasm of thymus |
| C38.0 | Malignant neoplasm: Heart |
| C38.1 | Malignant neoplasm: Anterior mediastinum |
| C38.2 | Malignant neoplasm: Posterior mediastinum |
| C38.3 | Malignant neoplasm: Mediastinum, part unspecified |
| C38.4 | Malignant neoplasm: Pleura |
| C38.8 | Malignant neoplasm: Overlapping lesion of heart, mediastinum and pleura |
| C39.0 | Malignant neoplasm: Upper respiratory tract, part unspecified |
| C39.8 | Malignant neoplasm: Overlapping lesion of respiratory and intrathoracic organs |
| C39.9 | Malignant neoplasm: Ill-defined sites within the respiratory system |
| C40.0 | Malignant neoplasm: Scapula and long bones of upper limb |
| C40.1 | Malignant neoplasm: Short bones of upper limb |
| C40.2 | Malignant neoplasm: Long bones of lower limb |
| C40.3 | Malignant neoplasm: Short bones of lower limb |
| C40.8 | Malignant neoplasm: Overlapping lesion of bone and articular cartilage of limbs |
| C40.9 | Malignant neoplasm: Bone and articular cartilage of limb, unspecified |
| C41.0 | Malignant neoplasm: Bones of skull and face |
| C41.1 | Malignant neoplasm: Mandible |
| C41.2 | Malignant neoplasm: Vertebral column |
| C41.3 | Malignant neoplasm: Ribs, sternum and clavicle |
| C41.4 | Malignant neoplasm: Pelvic bones, sacrum and coccyx |
| C41.8 | Malignant neoplasm: Overlapping lesion of bone and articular cartilage |
| C41.9 | Malignant neoplasm: Bone and articular cartilage, unspecified |

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| C43.0 | Malignant neoplasm: Malignant melanoma of lip |
| C43.1 | Malignant neoplasm: Malignant melanoma of eyelid, including canthus |
| C43.2 | Malignant neoplasm: Malignant melanoma of ear and external auricular canal |
| C43.3 | Malignant neoplasm: Malignant melanoma of other and unspecified parts of face |
| C43.4 | Malignant neoplasm: Malignant melanoma of scalp and neck |
| C43.5 | Malignant neoplasm: Malignant melanoma of trunk |
| C43.6 | Malignant neoplasm: Malignant melanoma of upper limb, including shoulder |
| C43.7 | Malignant neoplasm: Malignant melanoma of lower limb, including hip |
| C43.8 | Malignant neoplasm: Overlapping malignant melanoma of skin |
| C43.9 | Malignant neoplasm: Malignant melanoma of skin, unspecified |
| C45.0 | Mesothelioma of pleura |
| C45.1 | Mesothelioma of peritoneum |
| C45.2 | Mesothelioma of pericardium |
| C45.7 | Mesothelioma of other sites |
| C45.9 | Mesothelioma, unspecified |
| C46.0 | Kaposi's sarcoma of skin |
| C46.1 | Kaposi's sarcoma of soft tissue |
| C46.2 | Kaposi's sarcoma of palate |
| C46.3 | Kaposi's sarcoma of lymph nodes |
| C46.7 | Kaposi's sarcoma of other sites |
| C46.8 | Kaposi's sarcoma of multiple organs |
| C46.9 | Kaposi's sarcoma, unspecified |
| C47.0 | Malignant neoplasm: Peripheral nerves of head, face and neck |
| C47.1 | Malignant neoplasm: Peripheral nerves of upper limb, including shoulder |
| C47.2 | Malignant neoplasm: Peripheral nerves of lower limb, including hip |
| C47.3 | Malignant neoplasm: Peripheral nerves of thorax |
| C47.4 | Malignant neoplasm: Peripheral nerves of abdomen |
| C47.5 | Malignant neoplasm: Peripheral nerves of pelvis |
| C47.6 | Malignant neoplasm: Peripheral nerves of trunk, unspecified |
| C47.8 | Malignant neoplasm: Overlapping lesion of peripheral nerves and autonomic nervous system |
| C47.9 | Malignant neoplasm: Peripheral nerves and autonomic nervous system, unspecified |
| C48.0 | Malignant neoplasm: Retroperitoneum |
| C48.1 | Malignant neoplasm: Specified parts of peritoneum |
| C48.2 | Malignant neoplasm: Peritoneum, unspecified |
| C48.8 | Malignant neoplasm: Overlapping lesion of retroperitoneum and peritoneum |
| C49.0 | Malignant neoplasm: Connective and soft tissue of head, face and neck |
| C49.1 | Malignant neoplasm: Connective and soft tissue of upper limb, including shoulder |
| C49.2 | Malignant neoplasm: Connective and soft tissue of lower limb, including hip |
| C49.3 | Malignant neoplasm: Connective and soft tissue of thorax |
| C49.4 | Malignant neoplasm: Connective and soft tissue of abdomen |
| C49.5 | Malignant neoplasm: Connective and soft tissue of pelvis |
| C49.6 | Malignant neoplasm: Connective and soft tissue of trunk, unspecified |
| C49.8 | Malignant neoplasm: Overlapping lesion of connective and soft tissue |
| C49.9 | Malignant neoplasm: Connective and soft tissue, unspecified |
| C50.0 | Malignant neoplasm: Nipple and areola |
| C50.1 | Malignant neoplasm: Central portion of breast |
| C50.2 | Malignant neoplasm: Upper-inner quadrant of breast |

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| C50.3 | Malignant neoplasm: Lower-inner quadrant of breast |
| C50.4 | Malignant neoplasm: Upper-outer quadrant of breast |
| C50.5 | Malignant neoplasm: Lower-outer quadrant of breast |
| C50.6 | Malignant neoplasm: Axillary tail of breast |
| C50.8 | Malignant neoplasm: Overlapping lesion of breast |
| C50.9 | Malignant neoplasm: Breast, unspecified |
| C51.0 | Malignant neoplasm: Labium majus |
| C51.1 | Malignant neoplasm: Labium minus |
| C51.2 | Malignant neoplasm: Clitoris |
| C51.8 | Malignant neoplasm: Overlapping lesion of vulva |
| C51.9 | Malignant neoplasm: Vulva, unspecified |
| C52 | Malignant neoplasm of vagina |
| C53.0 | Malignant neoplasm: Endocervix |
| C53.1 | Malignant neoplasm: Exocervix |
| C53.8 | Malignant neoplasm: Overlapping lesion of cervix uteri |
| C53.9 | Malignant neoplasm: Cervix uteri, unspecified |
| C54.0 | Malignant neoplasm: Isthmus uteri |
| C54.1 | Malignant neoplasm: Endometrium |
| C54.2 | Malignant neoplasm: Myometrium |
| C54.3 | Malignant neoplasm: Fundus uteri |
| C54.8 | Malignant neoplasm: Overlapping lesion of corpus uteri |
| C54.9 | Malignant neoplasm: Corpus uteri, unspecified |
| C55 | Malignant neoplasm of uterus, part unspecified |
| C56 | Malignant neoplasm of ovary |
| C57.0 | Malignant neoplasm: Fallopian tube |
| C57.1 | Malignant neoplasm: Broad ligament |
| C57.2 | Malignant neoplasm: Round ligament |
| C57.3 | Malignant neoplasm: Parametrium |
| C57.4 | Malignant neoplasm: Uterine adnexa, unspecified |
| C57.7 | Malignant neoplasm: Other specified female genital organs |
| C57.8 | Malignant neoplasm: Overlapping lesion of female genital organs |
| C57.9 | Malignant neoplasm: Female genital organ, unspecified |
| C58 | Malignant neoplasm of placenta |
| C60.0 | Malignant neoplasm: Prepuce |
| C60.1 | Malignant neoplasm: Glans penis |
| C60.2 | Malignant neoplasm: Body of penis |
| C60.8 | Malignant neoplasm: Overlapping lesion of penis |
| C60.9 | Malignant neoplasm: Penis, unspecified |
| C61 | Malignant neoplasm of prostate |
| C62.0 | Malignant neoplasm: Undescended testis |
| C62.1 | Malignant neoplasm: Descended testis |
| C62.9 | Malignant neoplasm: Testis, unspecified |
| C63.0 | Malignant neoplasm: Epididymis |
| C63.1 | Malignant neoplasm: Spermatic cord |
| C63.2 | Malignant neoplasm: Scrotum |
| C63.7 | Malignant neoplasm: Other specified male genital organs |
| C63.8 | Malignant neoplasm: Overlapping lesion of male genital organs |
| C63.9 | Malignant neoplasm: Male genital organ, unspecified |

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| C64 | Malignant neoplasm of kidney, except renal pelvis |
| C65 | Malignant neoplasm of renal pelvis |
| C66 | Malignant neoplasm of ureter |
| C67.0 | Malignant neoplasm: Trigone of bladder |
| C67.1 | Malignant neoplasm: Dome of bladder |
| C67.2 | Malignant neoplasm: Lateral wall of bladder |
| C67.3 | Malignant neoplasm: Anterior wall of bladder |
| C67.4 | Malignant neoplasm: Posterior wall of bladder |
| C67.5 | Malignant neoplasm: Bladder neck |
| C67.6 | Malignant neoplasm: Ureteric orifice |
| C67.7 | Malignant neoplasm: Urachus |
| C67.8 | Malignant neoplasm: Overlapping lesion of bladder |
| C67.9 | Malignant neoplasm: Bladder, unspecified |
| C68.0 | Malignant neoplasm: Urethra |
| C68.1 | Malignant neoplasm: Paraurethral gland |
| C68.8 | Malignant neoplasm: Overlapping lesion of urinary organs |
| C68.9 | Malignant neoplasm: Urinary organ, unspecified |
| C69.0 | Malignant neoplasm: Conjunctiva |
| C69.1 | Malignant neoplasm: Cornea |
| C69.2 | Malignant neoplasm: Retina |
| C69.3 | Malignant neoplasm: Choroid |
| C69.4 | Malignant neoplasm: Ciliary body |
| C69.5 | Malignant neoplasm: Lacrimal gland and duct |
| C69.6 | Malignant neoplasm: Orbit |
| C69.8 | Malignant neoplasm: Overlapping lesion of eye and adnexa |
| C69.9 | Malignant neoplasm: Eye, unspecified |
| C70.0 | Malignant neoplasm: Cerebral meninges |
| C70.1 | Malignant neoplasm: Spinal meninges |
| C70.9 | Malignant neoplasm: Meninges, unspecified |
| C71.0 | Malignant neoplasm: Cerebrum, except lobes and ventricles |
| C71.1 | Malignant neoplasm: Frontal lobe |
| C71.2 | Malignant neoplasm: Temporal lobe |
| C71.3 | Malignant neoplasm: Parietal lobe |
| C71.4 | Malignant neoplasm: Occipital lobe |
| C71.5 | Malignant neoplasm: Cerebral ventricle |
| C71.6 | Malignant neoplasm: Cerebellum |
| C71.7 | Malignant neoplasm: Brain stem |
| C71.8 | Malignant neoplasm: Overlapping lesion of brain |
| C71.9 | Malignant neoplasm: Brain, unspecified |
| C72.0 | Malignant neoplasm: Spinal cord |
| C72.1 | Malignant neoplasm: Cauda equina |
| C72.2 | Malignant neoplasm: Olfactory nerve |
| C72.3 | Malignant neoplasm: Optic nerve |
| C72.4 | Malignant neoplasm: Acoustic nerve |
| C72.5 | Malignant neoplasm: Other and unspecified cranial nerves |
| C72.8 | Malignant neoplasm: Overlapping lesion of brain and other parts of central nervous system |
| C72.9 | Malignant neoplasm: Central nervous system, unspecified |

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| C73 | Malignant neoplasm of thyroid gland |
| C74.0 | Malignant neoplasm: Cortex of adrenal gland |
| C74.1 | Malignant neoplasm: Medulla of adrenal gland |
| C74.9 | Malignant neoplasm: Adrenal gland, unspecified |
| C75.0 | Malignant neoplasm: Parathyroid gland |
| C75.1 | Malignant neoplasm: Pituitary gland |
| C75.2 | Malignant neoplasm: Craniopharyngeal duct |
| C75.3 | Malignant neoplasm: Pineal gland |
| C75.4 | Malignant neoplasm: Carotid body |
| C75.5 | Malignant neoplasm: Aortic body and other paraganglia |
| C75.8 | Malignant neoplasm: Pluriglandular involvement, unspecified |
| C75.9 | Malignant neoplasm: Endocrine gland, unspecified |
| C76.0 | Malignant neoplasm of other and ill-defined sites: Head, face and neck |
| C76.1 | Malignant neoplasm of other and ill-defined sites: Thorax |
| C76.2 | Malignant neoplasm of other and ill-defined sites: Abdomen |
| C76.3 | Malignant neoplasm of other and ill-defined sites: Pelvis |
| C76.4 | Malignant neoplasm of other and ill-defined sites: Upper limb |
| C76.5 | Malignant neoplasm of other and ill-defined sites: Lower limb |
| C76.7 | Malignant neoplasm of other and ill-defined sites: Other ill-defined sites |
| C76.8 | Malignant neoplasm of other and ill-defined sites: Overlapping lesion of other and ill-defined sites |
| C77.0 | Secondary and unspecified malignant neoplasm: Lymph nodes of head, face and neck |
| C77.1 | Secondary and unspecified malignant neoplasm: Intrathoracic lymph nodes |
| C77.2 | Secondary and unspecified malignant neoplasm: Intra-abdominal lymph nodes |
| C77.3 | Secondary and unspecified malignant neoplasm: Axillary and upper limb lymph nodes |
| C77.4 | Secondary and unspecified malignant neoplasm: Inguinal and lower limb lymph nodes |
| C77.5 | Secondary and unspecified malignant neoplasm: Intrapelvic lymph nodes |
| C77.8 | Secondary and unspecified malignant neoplasm: Lymph nodes of multiple regions |
| C77.9 | Secondary and unspecified malignant neoplasm: Lymph node, unspecified |
| C78.0 | Secondary malignant neoplasm of lung |
| C78.1 | Secondary malignant neoplasm of mediastinum |
| C78.2 | Secondary malignant neoplasm of pleura |
| C78.3 | Secondary malignant neoplasm of other and unspecified respiratory organs |
| C78.4 | Secondary malignant neoplasm of small intestine |
| C78.5 | Secondary malignant neoplasm of large intestine and rectum |
| C78.6 | Secondary malignant neoplasm of retroperitoneum and peritoneum |
| C78.7 | Secondary malignant neoplasm of liver |
| C78.8 | Secondary malignant neoplasm of other and unspecified digestive organs |
| C79.0 | Secondary malignant neoplasm of kidney and renal pelvis |
| C79.1 | Secondary malignant neoplasm of bladder and other and unspecified urinary organs |
| C79.2 | Secondary malignant neoplasm of skin |
| C79.3 | Secondary malignant neoplasm of brain and cerebral meninges |
| C79.4 | Secondary malignant neoplasm of other and unspecified parts of nervous system |
| C79.5 | Secondary malignant neoplasm of bone and bone marrow |
| C79.6 | Secondary malignant neoplasm of ovary |
| C79.7 | Secondary malignant neoplasm of adrenal gland |

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| C79.8 | Secondary malignant neoplasm of other specified sites |
| C80 | Malignant neoplasm without specification of site |
| C81.0 | Hodgkin's disease: Lymphocytic predominance |
| C81.1 | Hodgkin's disease: Nodular sclerosis |
| C81.2 | Hodgkin's disease: Mixed cellularity |
| C81.3 | Hodgkin's disease: Lymphocytic depletion |
| C81.7 | Hodgkin's disease: Other Hodgkin's disease |
| C81.9 | Hodgkin's disease: Hodgkin's disease, unspecified |
| C82.0 | Non-Hodgkin's lymphoma: Small cleaved cell, follicular |
| C82.1 | Non-Hodgkin's lymphoma: Mixed small cleaved and large cell, follicular |
| C82.2 | Non-Hodgkin's lymphoma: Large cell, follicular |
| C82.7 | Other types of follicular non-Hodgkin's lymphoma |
| C82.9 | Follicular non-Hodgkin's lymphoma, unspecified |
| C83.0 | Non-Hodgkin's lymphoma: Small cell (diffuse) |
| C83.1 | Non-Hodgkin's lymphoma: Small cleaved cell (diffuse) |
| C83.2 | Non-Hodgkin's lymphoma: Mixed small and large cell (diffuse) |
| C83.3 | Non-Hodgkin's lymphoma: Large cell (diffuse) |
| C83.4 | Non-Hodgkin's lymphoma: Immunoblastic (diffuse) |
| C83.5 | Non-Hodgkin's lymphoma: Lymphoblastic (diffuse) |
| C83.6 | Non-Hodgkin's lymphoma: Undifferentiated (diffuse) |
| C83.7 | Burkitt's tumour |
| C83.8 | Other types of diffuse non-Hodgkin's lymphoma |
| C83.9 | Diffuse non-Hodgkin's lymphoma, unspecified |
| C84.0 | Mycosis fungoides |
| C84.1 | Sezary's disease |
| C84.2 | T-zone lymphoma |
| C84.3 | Lymphoepithelioid lymphoma |
| C84.4 | Peripheral T-cell lymphoma |
| C84.5 | Other and unspecified T-cell lymphomas |
| C85.0 | Lymphosarcoma |
| C85.1 | B-cell lymphoma, unspecified |
| C85.7 | Other specified types of non-Hodgkin's lymphoma |
| C85.9 | Non-Hodgkin's lymphoma, unspecified type |
| C88.0 | Waldenström's macroglobulinaemia |
| C90.0 | Multiple myeloma |
| C90.1 | Plasma cell leukaemia |
| C90.2 | Plasmacytoma, extramedullary |
| C91.0 | Acute lymphoblastic leukaemia |
| C91.1 | Chronic lymphocytic leukaemia |
| C91.2 | Subacute lymphocytic leukaemia |
| C91.3 | Prolymphocytic leukaemia |
| C91.4 | Hairy-cell leukaemia |
| C91.5 | Adult T-cell leukaemia |
| C91.7 | Other lymphoid leukaemia |
| C91.9 | Lymphoid leukaemia, unspecified |
| C92.0 | Acute myeloid leukaemia |
| C92.1 | Chronic myeloid leukaemia |
| C92.2 | Subacute myeloid leukaemia |

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| C92.3 | Myeloid sarcoma |
| C92.4 | Acute promyelocytic leukaemia |
| C92.5 | Acute myelomonocytic leukaemia |
| C92.7 | Other myeloid leukaemia |
| C92.9 | Myeloid leukaemia, unspecified |
| C93.0 | Acute monocytic leukaemia |
| C93.1 | Chronic monocytic leukaemia |
| C93.2 | Subacute monocytic leukaemia |
| C93.7 | Other monocytic leukaemia |
| C93.9 | Monocytic leukaemia, unspecified |
| C94.0 | Acute erythraemia and erythroleukaemia |
| C94.1 | Chronic erythraemia |
| C94.2 | Acute megakaryoblastic leukaemia |
| C94.3 | Mast cell leukaemia |
| C94.4 | Acute panmyelosis |
| C94.5 | Acute myelofibrosis |
| C94.7 | Other specified leukaemias |
| C95.0 | Acute leukaemia of unspecified cell type |
| C95.1 | Chronic leukaemia of unspecified cell type |
| C95.2 | Subacute leukaemia of unspecified cell type |
| C95.7 | Other leukaemia of unspecified cell type |
| C95.9 | Leukaemia, unspecified |
| C96.0 | Letterer-Siwe disease |
| C96.1 | Malignant histiocytosis |
| C96.2 | Malignant mast cell tumour |
| C96.3 | True histiocytic lymphoma |
| C96.7 | Other specified malignant neoplasms of lymphoid, haematopoietic and related tissue |
| C96.9 | Malignant neoplasm of lymphoid, haematopoietic and related tissue, unspecified |
| C97 | Malignant neoplasms of independent (primary) multiple sites |
| Z85.0 | Personal history of malignant neoplasm of digestive organs |
| Z85.1 | Personal history of malignant neoplasm of trachea, bronchus and lung |
| Z85.2 | Personal history of malignant neoplasm of other respiratory and intrathoracic organs |
| Z85.3 | Personal history of malignant neoplasm of breast |
| Z85.4 | Personal history of malignant neoplasm of genital organs |
| Z85.5 | Personal history of malignant neoplasm of urinary tract |
| Z85.6 | Personal history of leukaemia |
| Z85.7 | Personal history of other malignant neoplasms of lymphoid, haematopoietic and related tissues |
| Z85.8 | Personal history of malignant neoplasms of other organs and systems |
| Z85.9 | Personal history of malignant neoplasm, unspecified |

W-10 ICD-10-WHO codes for infections

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| A00.0 | Cholera due to <i>Vibrio cholerae</i> 01, biovar cholerae |
| A00.1 | Cholera due to <i>Vibrio cholerae</i> 01, biovar eltor |
| A00.9 | Cholera, unspecified |
| A01.0 | Typhoid fever |
| A01.1 | Paratyphoid fever A |
| A01.2 | Paratyphoid fever B |
| A01.3 | Paratyphoid fever C |

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| A01.4 | Paratyphoid fever, unspecified |
| A02.0 | Salmonella enteritis |
| A02.1 | Salmonella septicaemia |
| A02.2 | Localized salmonella infections |
| A02.8 | Other specified salmonella infections |
| A02.9 | Salmonella infection, unspecified |
| A03.0 | Shigellosis due to <i>Shigella dysenteriae</i> |
| A03.1 | Shigellosis due to <i>Shigella flexneri</i> |
| A03.2 | Shigellosis due to <i>Shigella boydii</i> |
| A03.3 | Shigellosis due to <i>Shigella sonnei</i> |
| A03.8 | Other shigellosis |
| A03.9 | Shigellosis, unspecified |
| A04.0 | Enteropathogenic <i>Escherichia coli</i> infection |
| A04.1 | Enterotoxigenic <i>Escherichia coli</i> infection |
| A04.2 | Enteroinvasive <i>Escherichia coli</i> infection |
| A04.3 | Enterohaemorrhagic <i>Escherichia coli</i> infection |
| A04.4 | Other intestinal <i>Escherichia coli</i> infections |
| A04.5 | <i>Campylobacter</i> enteritis |
| A04.6 | Enteritis due to <i>Yersinia enterocolitica</i> |
| A04.7 | Enterocolitis due to <i>Clostridium difficile</i> |
| A04.8 | Other specified bacterial intestinal infections |
| A04.9 | Bacterial intestinal infection, unspecified |
| A05.0 | Foodborne staphylococcal intoxication |
| A05.1 | Botulism |
| A05.2 | Foodborne <i>Clostridium perfringens</i> [<i>Clostridium welchii</i>] intoxication |
| A05.3 | Foodborne <i>Vibrio parahaemolyticus</i> intoxication |
| A05.4 | Foodborne <i>Bacillus cereus</i> intoxication |
| A05.8 | Other specified bacterial foodborne intoxications |
| A05.9 | Bacterial foodborne intoxication, unspecified |
| A20.0 | Bubonic plague |
| A20.1 | Cellulocutaneous plague |
| A20.2 | Pneumonic plague |
| A20.3 | Plague meningitis |
| A20.7 | Septicaemic plague |
| A20.8 | Other forms of plague |
| A20.9 | Plague, unspecified |
| A21.0 | Ulceroglandular tularaemia |
| A21.1 | Oculoglandular tularaemia |
| A21.2 | Pulmonary tularaemia |
| A21.3 | Gastrointestinal tularaemia |
| A21.7 | Generalized tularaemia |
| A21.8 | Other forms of tularaemia |
| A21.9 | Tularaemia, unspecified |
| A22.0 | Cutaneous anthrax |
| A22.1 | Pulmonary anthrax |
| A22.2 | Gastrointestinal anthrax |
| A22.7 | Anthrax septicaemia |
| A22.8 | Other forms of anthrax |
| A22.9 | Anthrax, unspecified |

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| A23.0 | Brucellosis due to <i>Brucella melitensis</i> |
| A23.1 | Brucellosis due to <i>Brucella abortus</i> |
| A23.2 | Brucellosis due to <i>Brucella suis</i> |
| A23.3 | Brucellosis due to <i>Brucella canis</i> |
| A23.8 | Other brucellosis |
| A23.9 | Brucellosis, unspecified |
| A24.0 | Glanders |
| A24.1 | Acute and fulminating melioidosis |
| A24.2 | Subacute and chronic melioidosis |
| A24.3 | Other melioidosis |
| A24.4 | Melioidosis, unspecified |
| A25.0 | Spirillosis |
| A25.1 | Streptobacillosis |
| A25.9 | Rat-bite fever, unspecified |
| A26.0 | Cutaneous erysipeloid |
| A26.7 | <i>Erysipelothrix</i> septicaemia |
| A26.8 | Other forms of erysipeloid |
| A26.9 | Erysipeloid, unspecified |
| A28.0 | Pasteurellosis |
| A28.1 | Cat-scratch disease |
| A28.2 | Extraintestinal yersiniosis |
| A28.8 | Other specified zoonotic bacterial diseases, not elsewhere classified |
| A28.9 | Zoonotic bacterial disease, unspecified |
| A32.0 | Cutaneous listeriosis |
| A32.1 | Listerial meningitis and meningoencephalitis |
| A32.7 | Listerial septicaemia |
| A32.8 | Other forms of listeriosis |
| A32.9 | Listeriosis, unspecified |
| A33 | Tetanus neonatorum |
| A34 | Obstetrical tetanus |
| A35 | Other tetanus |
| A36.0 | Pharyngeal diphtheria |
| A36.1 | Nasopharyngeal diphtheria |
| A36.2 | Laryngeal diphtheria |
| A36.3 | Cutaneous diphtheria |
| A36.8 | Other diphtheria |
| A36.9 | Diphtheria, unspecified |
| A37.0 | Whooping cough due to <i>Bordetella pertussis</i> |
| A37.1 | Whooping cough due to <i>Bordetella parapertussis</i> |
| A37.8 | Whooping cough due to other <i>Bordetella</i> species |
| A37.9 | Whooping cough, unspecified |
| A38 | Scarlet fever |
| A39.0 | Meningococcal meningitis |
| A39.1 | Waterhouse-Friderichsen syndrome |
| A39.2 | Acute meningococcaemia |
| A39.3 | Chronic meningococcaemia |
| A39.4 | Meningococcaemia, unspecified |
| A39.5 | Meningococcal heart disease |
| A39.8 | Other meningococcal infections |

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| A39.9 | Meningococcal infection, unspecified |
| A40.0 | Septicaemia due to streptococcus, group A |
| A40.1 | Septicaemia due to streptococcus, group B |
| A40.2 | Septicaemia due to streptococcus, group D |
| A40.3 | Septicaemia due to <i>Streptococcus pneumoniae</i> |
| A40.8 | Other streptococcal septicaemia |
| A40.9 | Streptococcal septicaemia, unspecified |
| A41.0 | Septicaemia due to <i>Staphylococcus aureus</i> |
| A41.1 | Septicaemia due to other specified staphylococcus |
| A41.2 | Septicaemia due to unspecified staphylococcus |
| A41.3 | Septicaemia due to <i>Haemophilus influenzae</i> |
| A41.4 | Septicaemia due to anaerobes |
| A41.5 | Septicaemia due to other Gram-negative organisms |
| A41.8 | Other specified septicaemia |
| A41.9 | Septicaemia, unspecified |
| A42.0 | Pulmonary actinomycosis |
| A42.1 | Abdominal actinomycosis |
| A42.2 | Cervicofacial actinomycosis |
| A42.7 | Actinomycotic septicaemia |
| A42.8 | Other forms of actinomycosis |
| A42.9 | Actinomycosis, unspecified |
| A43.0 | Pulmonary nocardiosis |
| A43.1 | Cutaneous nocardiosis |
| A43.8 | Other forms of nocardiosis |
| A43.9 | Nocardiosis, unspecified |
| A46 | Erysipelas |
| A48.0 | Gas gangrene |
| A48.1 | Legionnaires' disease |
| A48.2 | Nonpneumonic Legionnaires' disease [Pontiac fever] |
| A48.3 | Toxic shock syndrome |
| A48.4 | Brazilian purpuric fever |
| A48.8 | Other specified bacterial diseases |
| A49.0 | Staphylococcal infection, unspecified |
| A49.1 | Streptococcal infection, unspecified |
| A49.2 | <i>Haemophilus influenzae</i> infection, unspecified |
| A49.3 | <i>Mycoplasma</i> infection, unspecified |
| A49.8 | Other bacterial infections of unspecified site |
| A49.9 | Bacterial infection, unspecified |
| A54.0 | Gonococcal infection of lower genitourinary tract without periurethral or accessory gland abscess |
| A54.1 | Gonococcal infection of lower genitourinary tract with periurethral and accessory gland abscess |
| A54.2 | Gonococcal pelviperitonitis and other gonococcal genitourinary infections |
| A54.3 | Gonococcal infection of eye |
| A54.4 | Gonococcal infection of musculoskeletal system |
| A54.5 | Gonococcal pharyngitis |
| A54.6 | Gonococcal infection of anus and rectum |
| A54.8 | Other gonococcal infections |
| A54.9 | Gonococcal infection, unspecified |

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| B95.0 | Streptococcus, group A, as the cause of diseases classified to other chapters |
| B95.1 | Streptococcus, group B, as the cause of diseases classified to other chapters |
| B95.2 | Streptococcus, group D, as the cause of diseases classified to other chapters |
| B95.3 | Streptococcus pneumoniae as the cause of diseases classified to other chapters |
| B95.4 | Other streptococcus as the cause of diseases classified to other chapters |
| B95.5 | Unspecified streptococcus as the cause of diseases classified to other chapters |
| B95.6 | Staphylococcus aureus as the cause of diseases classified to other chapters |
| B95.7 | Other staphylococcus as the cause of diseases classified to other chapters |
| B95.8 | Unspecified staphylococcus as the cause of diseases classified to other chapters |
| B96.0 | Mycoplasma pneumoniae [M. pneumoniae] as the cause of diseases classified to other chapters |
| B96.1 | Klebsiella pneumoniae [K. pneumoniae] as the cause of diseases classified to other chapters |
| B96.2 | Escherichia coli [E. coli] as the cause of diseases classified to other chapters |
| B96.3 | Haemophilus influenzae [H. influenzae] as the cause of diseases classified to other chapters |
| B96.4 | Proteus (mirabilis)(morganii) as the cause of diseases classified to other chapters |
| B96.5 | Pseudomonas (aeruginosa)(mallei)(pseudomallei) as the cause of diseases classified to other chapters |
| B96.6 | Bacillus fragilis [B. fragilis] as the cause of diseases classified to other chapters |
| B96.7 | Clostridium perfringens [C. perfringens] as the cause of diseases classified to other chapters |
| B96.8 | Other specified bacterial agents as the cause of diseases classified to other chapters |
| D73.3 | Abscess of spleen |
| E32.1 | Abscess of thymus |
| G00.0 | Haemophilus meningitis |
| G00.1 | Pneumococcal meningitis |
| G00.2 | Streptococcal meningitis |
| G00.3 | Staphylococcal meningitis |
| G00.8 | Other bacterial meningitis |
| G00.9 | Bacterial meningitis, unspecified |
| G03.8 | Meningitis due to other specified causes |
| G03.9 | Meningitis, unspecified |
| G04.2 | Bacterial meningoencephalitis and meningomyelitis, not elsewhere classified |
| G06.0 | Intracranial abscess and granuloma |
| G06.1 | Intraspinal abscess and granuloma |
| G06.2 | Extradural and subdural abscess, unspecified |
| G07 | Intracranial and intraspinal abscess and granuloma in diseases classified elsewhere |
| H00.0 | Hordeolum and other deep inflammation of eyelid |
| H01.0 | Blepharitis |
| H01.8 | Other specified inflammation of eyelid |
| H04.0 | Dacryoadenitis |
| H04.3 | Acute and unspecified inflammation of lacrimal passages |
| H04.4 | Chronic inflammation of lacrimal passages |
| H05.0 | Acute inflammation of orbit |
| H10.0 | Mucopurulent conjunctivitis |
| H10.2 | Other acute conjunctivitis |
| H10.3 | Acute conjunctivitis, unspecified |
| H10.5 | Blepharoconjunctivitis |
| H10.8 | Other conjunctivitis |
| H10.9 | Conjunctivitis, unspecified |
| H13.1 | Conjunctivitis in infectious and parasitic diseases classified elsewhere |

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| H44.0 | Purulent endophthalmitis |
| H60.0 | Abscess of external ear |
| H60.1 | Cellulitis of external ear |
| H60.2 | Malignant otitis externa |
| H60.3 | Other infective otitis externa |
| H60.9 | Otitis externa, unspecified |
| H66.0 | Acute suppurative otitis media |
| H66.1 | Chronic tubotympanic suppurative otitis media |
| H66.2 | Chronic atticofacial suppurative otitis media |
| H66.3 | Other chronic suppurative otitis media |
| H66.4 | Suppurative otitis media, unspecified |
| H66.9 | Otitis media, unspecified |
| H68.0 | Eustachian salpingitis |
| H70.0 | Acute mastoiditis |
| H70.2 | Petrositis |
| H73.0 | Acute myringitis |
| H83.0 | Labyrinthitis |
| I30.1 | Infective pericarditis |
| I30.8 | Other forms of acute pericarditis |
| I30.9 | Acute pericarditis, unspecified |
| I32.0 | Pericarditis in bacterial diseases classified elsewhere |
| I33.0 | Acute and subacute infective endocarditis |
| I33.9 | Acute endocarditis, unspecified |
| I40.0 | Infective myocarditis |
| J01.0 | Acute maxillary sinusitis |
| J01.1 | Acute frontal sinusitis |
| J01.2 | Acute ethmoidal sinusitis |
| J01.3 | Acute sphenoidal sinusitis |
| J01.4 | Acute pansinusitis |
| J01.8 | Other acute sinusitis |
| J01.9 | Acute sinusitis, unspecified |
| J02.0 | Streptococcal pharyngitis |
| J02.8 | Acute pharyngitis due to other specified organisms |
| J02.9 | Acute pharyngitis, unspecified |
| J03.0 | Streptococcal tonsillitis |
| J03.8 | Acute tonsillitis due to other specified organisms |
| J03.9 | Acute tonsillitis, unspecified |
| J05.1 | Acute epiglottitis |
| J13 | Pneumonia due to <i>Streptococcus pneumoniae</i> |
| J14 | Pneumonia due to <i>Haemophilus influenzae</i> |
| J15.0 | Pneumonia due to <i>Klebsiella pneumoniae</i> |
| J15.1 | Pneumonia due to <i>Pseudomonas</i> |
| J15.2 | Pneumonia due to staphylococcus |
| J15.3 | Pneumonia due to streptococcus, group B |
| J15.4 | Pneumonia due to other streptococci |
| J15.5 | Pneumonia due to <i>Escherichia coli</i> |
| J15.6 | Pneumonia due to other aerobic Gram-negative bacteria |
| J15.7 | Pneumonia due to <i>Mycoplasma pneumoniae</i> |
| J15.8 | Other bacterial pneumonia |

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| J15.9 | Bacterial pneumonia, unspecified |
| J17.0 | Pneumonia in bacterial diseases classified elsewhere |
| J18.0 | Bronchopneumonia, unspecified |
| J18.1 | Lobar pneumonia, unspecified |
| J18.8 | Other pneumonia, organism unspecified |
| J20.0 | Acute bronchitis due to <i>Mycoplasma pneumoniae</i> |
| J20.1 | Acute bronchitis due to <i>Haemophilus influenzae</i> |
| J20.2 | Acute bronchitis due to streptococcus |
| J34.0 | Abscess, furuncle and carbuncle of nose |
| J36 | Peritonsillar abscess |
| J39.0 | Retropharyngeal and parapharyngeal abscess |
| J39.1 | Other abscess of pharynx |
| J40 | Bronchitis, not specified as acute or chronic |
| J44.0 | Chronic obstructive pulmonary disease with acute lower respiratory infection |
| J85.0 | Gangrene and necrosis of lung |
| J85.1 | Abscess of lung with pneumonia |
| J85.2 | Abscess of lung without pneumonia |
| J85.3 | Abscess of mediastinum |
| J86.0 | Pyothorax with fistula |
| J86.9 | Pyothorax without fistula |
| J90 | Pleural effusion, not elsewhere classified |
| J98.5 | Diseases of mediastinum, not elsewhere classified |
| K04.0 | Pulpitis |
| K04.6 | Periapical abscess with sinus |
| K04.7 | Periapical abscess without sinus |
| K05.0 | Acute gingivitis |
| K05.2 | Acute periodontitis |
| K10.2 | Inflammatory conditions of jaws |
| K11.3 | Abscess of salivary gland |
| K12.2 | Cellulitis and abscess of mouth |
| K35.0 | Acute appendicitis with generalized peritonitis |
| K35.1 | Acute appendicitis with peritoneal abscess |
| K35.9 | Acute appendicitis, unspecified |
| K36 | Other appendicitis |
| K37 | Unspecified appendicitis |
| K57.0 | Diverticular disease of small intestine with perforation and abscess |
| K57.1 | Diverticular disease of small intestine without perforation or abscess |
| K57.2 | Diverticular disease of large intestine with perforation and abscess |
| K57.3 | Diverticular disease of large intestine without perforation or abscess |
| K57.4 | Diverticular disease of both small and large intestine with perforation and abscess |
| K57.5 | Diverticular disease of both small and large intestine without perforation or abscess |
| K57.8 | Diverticular disease of intestine, part unspecified, with perforation and abscess |
| K57.9 | Diverticular disease of intestine, part unspecified, without perforation or abscess |
| K61.0 | Anal abscess |
| K61.1 | Rectal abscess |
| K61.2 | Anorectal abscess |
| K61.3 | Ischiorectal abscess |
| K61.4 | Intrasphincteric abscess |
| K63.0 | Abscess of intestine |

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| K65.0 | Acute peritonitis |
| K65.8 | Other peritonitis |
| K65.9 | Peritonitis, unspecified |
| K67.1 | Gonococcal peritonitis |
| K75.0 | Abscess of liver |
| K75.1 | Phlebitis of portal vein |
| K80.0 | Calculus of gallbladder with acute cholecystitis |
| K80.3 | Calculus of bile duct with cholangitis |
| K80.4 | Calculus of bile duct with cholecystitis |
| K81.0 | Acute cholecystitis |
| K81.8 | Other cholecystitis |
| K81.9 | Cholecystitis, unspecified |
| K82.2 | Perforation of gallbladder |
| K83.0 | Cholangitis |
| K83.2 | Perforation of bile duct |
| K85.0 | Idiopathic acute pancreatitis |
| K85.1 | Biliary acute pancreatitis |
| K85.2 | Alcohol-induced acute pancreatitis |
| K85.3 | Drug-induced acute pancreatitis |
| K85.8 | Other acute pancreatitis |
| K85.9 | Acute pancreatitis, unspecified |
| L00 | Staphylococcal scalded skin syndrome |
| L01.0 | Impetigo [any organism] [any site] |
| L01.1 | Impetiginization of other dermatoses |
| L02.0 | Cutaneous abscess, furuncle and carbuncle of face |
| L02.1 | Cutaneous abscess, furuncle and carbuncle of neck |
| L02.2 | Cutaneous abscess, furuncle and carbuncle of trunk |
| L02.3 | Cutaneous abscess, furuncle and carbuncle of buttock |
| L02.4 | Cutaneous abscess, furuncle and carbuncle of limb |
| L02.8 | Cutaneous abscess, furuncle and carbuncle of other sites |
| L02.9 | Cutaneous abscess, furuncle and carbuncle, unspecified |
| L03.0 | Cellulitis of finger and toe |
| L03.1 | Cellulitis of other parts of limb |
| L03.2 | Cellulitis of face |
| L03.3 | Cellulitis of trunk |
| L03.8 | Cellulitis of other sites |
| L03.9 | Cellulitis, unspecified |
| L04.0 | Acute lymphadenitis of face, head and neck |
| L04.1 | Acute lymphadenitis of trunk |
| L04.2 | Acute lymphadenitis of upper limb |
| L04.3 | Acute lymphadenitis of lower limb |
| L04.8 | Acute lymphadenitis of other sites |
| L04.9 | Acute lymphadenitis, unspecified |
| L05.0 | Pilonidal cyst with abscess |
| L08.0 | Pyoderma |
| L08.8 | Other specified local infections of skin and subcutaneous tissue |
| L08.9 | Local infection of skin and subcutaneous tissue, unspecified |
| L30.3 | Infective dermatitis |
| M00.0 | Staphylococcal arthritis and polyarthritis |

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| M00.1 | Pneumococcal arthritis and polyarthritis |
| M00.2 | Other streptococcal arthritis and polyarthritis |
| M00.8 | Arthritis and polyarthritis due to other specified bacterial agents |
| M00.9 | Pyogenic arthritis, unspecified |
| M03.0 | Postmeningococcal arthritis |
| M03.1 | Postinfective arthropathy in syphilis |
| M03.2 | Other postinfectious arthropathies in diseases classified elsewhere |
| M03.6 | Reactive arthropathy in other diseases classified elsewhere |
| M46.2 | Osteomyelitis of vertebra |
| M60.0 | Infective myositis |
| M63.0 | Myositis in bacterial diseases classified elsewhere |
| M72..6 | Necrotizing fasciitis |
| M73.0 | Gonococcal bursitis |
| M86.0 | Acute haematogenous osteomyelitis |
| M86.1 | Other acute osteomyelitis |
| M86.2 | Subacute osteomyelitis |
| M86.3 | Chronic multifocal osteomyelitis |
| M86.4 | Chronic osteomyelitis with draining sinus |
| M86.5 | Other chronic haematogenous osteomyelitis |
| M86.6 | Other chronic osteomyelitis |
| M86.8 | Other osteomyelitis |
| M86.9 | Osteomyelitis, unspecified |
| M90.1 | Periostitis in other infectious diseases classified elsewhere |
| N10 | Acute tubulo-interstitial nephritis |
| N12 | Tubulo-interstitial nephritis, not specified as acute or chronic |
| N13.6 | Pyonephrosis |
| N15.1 | Renal and perinephric abscess |
| N30.0 | Acute cystitis |
| N30.8 | Other cystitis |
| N30.9 | Cystitis, unspecified |
| N34.0 | Urethral abscess |
| N39.0 | Urinary tract infection, site not specified |
| N41.0 | Acute prostatitis |
| N41.2 | Abscess of prostate |
| N41.3 | Prostatocystitis |
| N41.8 | Other inflammatory diseases of prostate |
| N41.9 | Inflammatory disease of prostate, unspecified |
| N43.1 | Infected hydrocele |
| N45.0 | Orchitis, epididymitis and epididymo-orchitis with abscess |
| N45.9 | Orchitis, epididymitis and epididymo-orchitis without abscess |
| N48.1 | Balanoposthitis |
| N48.2 | Other inflammatory disorders of penis |
| N49.0 | Inflammatory disorders of seminal vesicle |
| N49.1 | Inflammatory disorders of spermatic cord, tunica vaginalis and vas deferens |
| N49.2 | Inflammatory disorders of scrotum |
| N49.8 | Inflammatory disorders of other specified male genital organs |
| N49.9 | Inflammatory disorder of unspecified male genital organ |
| N51.0 | Disorders of prostate in diseases classified elsewhere |
| N51.1 | Disorders of testis and epididymis in diseases classified elsewhere |

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| N61 | Inflammatory disorders of breast |
| N70.0 | Acute salpingitis and oophoritis |
| N70.1 | Chronic salpingitis and oophoritis |
| N70.9 | Salpingitis and oophoritis, unspecified |
| N71.0 | Acute inflammatory disease of uterus |
| N71.9 | Inflammatory disease of uterus, unspecified |
| N72 | Inflammatory disease of cervix uteri |
| N73.0 | Acute parametritis and pelvic cellulitis |
| N73.1 | Chronic parametritis and pelvic cellulitis |
| N73.2 | Unspecified parametritis and pelvic cellulitis |
| N73.3 | Female acute pelvic peritonitis |
| N73.5 | Female pelvic peritonitis, unspecified |
| N73.9 | Female pelvic inflammatory disease, unspecified |
| N75.1 | Abscess of Bartholin's gland |
| N76.0 | Acute vaginitis |
| N76.1 | Subacute and chronic vaginitis |
| N76.2 | Acute vulvitis |
| N76.3 | Subacute and chronic vulvitis |
| N76.4 | Abscess of vulva |
| N76.8 | Other specified inflammation of vagina and vulva |
| O03.0 | Spontaneous abortion, incomplete, complicated by genital tract and pelvic infection |
| O03.5 | Spontaneous abortion, complete or unspecified, complicated by genital tract and pelvic infection |
| O04.0 | Medical abortion, incomplete, complicated by genital tract and pelvic infection |
| O04.5 | Medical abortion, complete or unspecified, complicated by genital tract and pelvic infection |
| O05.0 | Other abortion, incomplete, complicated by genital tract and pelvic infection |
| O05.5 | Other abortion, complete or unspecified, complicated by genital tract and pelvic infection |
| O06.0 | Unspecified abortion, incomplete, complicated by genital tract and pelvic infection |
| O06.5 | Unspecified abortion, complete or unspecified, complicated by genital tract and pelvic infection |
| O07.0 | Failed medical abortion, complicated by genital tract and pelvic infection |
| O07.5 | Other and unspecified failed attempted abortion, complicated by genital tract and pelvic infection |
| O08.0 | Genital tract and pelvic infection following abortion and ectopic and molar pregnancy |
| O23.0 | Infections of kidney in pregnancy |
| O23.1 | Infections of bladder in pregnancy |
| O23.2 | Infections of urethra in pregnancy |
| O23.3 | Infections of other parts of urinary tract in pregnancy |
| O23.4 | Unspecified infection of urinary tract in pregnancy |
| O23.5 | Infections of the genital tract in pregnancy |
| O23.9 | Other and unspecified genitourinary tract infection in pregnancy |
| O41.1 | Infection of amniotic sac and membranes |
| O86.1 | Other infection of genital tract following delivery |
| O86.2 | Urinary tract infection following delivery |
| O86.3 | Other genitourinary tract infections following delivery |
| O86.4 | Pyrexia of unknown origin following delivery |
| O91.0 | Infection of nipple associated with childbirth |
| O91.1 | Abscess of breast associated with childbirth |
| O91.2 | Nonpurulent mastitis associated with childbirth |

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| O98.2 | Gonorrhoea complicating pregnancy, childbirth and the puerperium |
| O98.8 | Other maternal infectious and parasitic diseases complicating pregnancy, childbirth and the puerperium |
| O98.9 | Unspecified maternal infectious or parasitic disease complicating pregnancy, childbirth and the puerperium |
| P36.0 | Sepsis of newborn due to streptococcus, group B |
| P36.1 | Sepsis of newborn due to other and unspecified streptococci |
| P36.2 | Sepsis of newborn due to Staphylococcus aureus |
| P36.3 | Sepsis of newborn due to other and unspecified staphylococci |
| P36.4 | Sepsis of newborn due to Escherichia coli |
| P36.5 | Sepsis of newborn due to anaerobes |
| P36.8 | Other bacterial sepsis of newborn |
| P36.9 | Bacterial sepsis of newborn, unspecified |
| P38 | Omphalitis of newborn with or without mild haemorrhage |
| P39.0 | Neonatal infective mastitis |
| P39.2 | Intra-amniotic infection of fetus, not elsewhere classified |
| P39.3 | Neonatal urinary tract infection |
| P39.4 | Neonatal skin infection |
| P39.8 | Other specified infections specific to the perinatal period |
| P39.9 | Infection specific to the perinatal period, unspecified |
| P77 | Necrotizing enterocolitis of fetus and newborn |
| R02 | Gangrene, not elsewhere classified |
| R57.8 | Other shock |
| T80.2 | Infections following infusion, transfusion and therapeutic injection |
| T81.4 | Infection following a procedure, not elsewhere classified |
| T82.6 | Infection and inflammatory reaction due to cardiac valve prosthesis |
| T82.7 | Infection and inflammatory reaction due to other cardiac and vascular devices, implants and grafts |
| T83.5 | Infection and inflammatory reaction due to prosthetic device, implant and graft in urinary system |
| T83.6 | Infection and inflammatory reaction due to prosthetic device, implant and graft in genital tract |
| T84.5 | Infection and inflammatory reaction due to internal joint prosthesis |
| T84.6 | Infection and inflammatory reaction due to internal fixation device [any site] |
| T84.7 | Infection and inflammatory reaction due to other internal orthopaedic prosthetic devices, implants and grafts |
| T84.9 | Unspecified complication of internal orthopaedic prosthetic device, implant and graft |
| T85.7 | Infection and inflammatory reaction due to other internal prosthetic devices, implants and grafts |
| T87.4 | Infection of amputation stump |
| T88.0 | Infection following immunization |

Code List P: ICD-9-CM Procedure codes for assignment of operative discharges (denominators in PSIs 12 and 13)⁷

⁷ Procedure code list adopted from Agency for Healthcare Research and Quality, PSI Technical Specifications, Version 3.2, March 2008 Patient Safety Indicators Download. AHRQ Quality Indicators. March 2007. Agency for Healthcare Research and Quality, Rockville, MD. http://www.qualityindicators.ahrq.gov/psi_download.htm

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| 0044 | PROC-VESSEL BIFURCATION OCT06- |
| 0050 | IMPL CRT PACEMAKER SYS |
| 0051 | IMPL CRT DEFIBRILLAT SYS |
| 0052 | IMP/REP LEAD LF VEN SYS |
| 0053 | IMP/REP CRT PACEMAKR GEN |
| 0054 | IMP/REP CRT DEFIB GENAT |
| 0056 | INS/REP IMPL SENSOR LEAD OCT06- |
| 0057 | IMP/REP SUBCUE CARD DEV OCT06- |
| 0061 | PERC ANGIO PRECEREB VES (OCT 04) |
| 0062 | PERC ANGIO INTRACRAN VES (OCT 04) |
| 0066 | PTCA OR CORONARY ATHER OCT05- |
| 0070 | REV HIP REPL-ACETAB/FEM OCT05- |
| 0071 | REV HIP REPL-ACETAB COMP OCT05- |
| 0072 | REV HIP REPL-FEM COMP OCT05- |
| 0073 | REV HIP REPL-LINER/HEAD OCT05- |
| 0074 | HIP REPL SURF-METAL/POLY OCT05- |
| 0075 | HIP REP SURF-METAL/METAL OCT05- |
| 0076 | HIP REP SURF-CERMC/CERMC OCT05- |
| 0077 | HIP REPL SURF-CERMC/POLY OCT06- |
| 0080 | REV KNEE REPLACEMT-TOTAL OCT05- |
| 0081 | REV KNEE REPL-TIBIA COMP OCT05- |
| 0082 | REV KNEE REPL-FEMUR COMP OCT05- |
| 0083 | REV KNEE REPLACE-PATELLA OCT05- |
| 0084 | REV KNEE REPL-TIBIA LIN OCT05- |
| 0085 | RESRF HIPTOTAL-ACET/FEM OCT06- |
| 0086 | RESRF HIPPART-FEM HEAD OCT06- |
| 0087 | RESRF HIPPART-ACETABLUM OCT06- |
| 0112 | OPEN CEREB MENINGES BX |
| 0114 | OPEN BRAIN BIOPSY |
| 0115 | SKULL BIOPSY |
| 0118 | OTHER BRAIN DX PROCEDURE |
| 0119 | OTHER SKULL DX PROCEDURE |
| 0121 | CRANIAL SINUS I & D |

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| 0122 | REMOV INTRACRAN STIMULAT |
| 0123 | REOPEN CRANIOTOMY SITE |
| 0124 | OTHER CRANIOTOMY |
| 0125 | OTHER CRANIECTOMY |
| 0126 | INS CATH-CRANIAL CAVITY OCT05- |
| 0127 | REM CATH-CRANIAL CAVITY OCT05- |
| 0128 | INTRACEREB CTH-BURR HOLE OCT06- |
| 0131 | INCISE CEREBRAL MENINGES |
| 0132 | LOBOTOMY & TRACTOTOMY |
| 0139 | OTHER BRAIN INCISION |
| 0141 | THALAMUS OPERATIONS |
| 0142 | GLOBUS PALLIDUS OPS |
| 0151 | EX CEREB MENINGEAL LES |
| 0152 | HEMISPHERECTOMY |
| 0153 | BRAIN LOBECTOMY |
| 0159 | OTHER BRAIN EXCISION |
| 016 | EXCISE SKULL LESION |
| 0201 | LINEAR CRANIECTOMY |
| 0202 | ELEVATE SKULL FX FRAGMNT |
| 0203 | SKULL FLAP FORMATION |
| 0204 | BONE GRAFT TO SKULL |
| 0205 | SKULL PLATE INSERTION |
| 0206 | CRANIAL OSTEOPLASTY NEC |
| 0207 | SKULL PLATE REMOVAL |
| 0211 | SIMPLE SUTURE OF DURA |
| 0212 | BRAIN MENINGE REPAIR NEC |
| 0213 | MENINGE VESSEL LIGATION |
| 0214 | CHOROID PLEXECTOMY |
| 022 | VENTRICULOSTOMY |
| 0231 | VENTRICL SHUNT-HEAD/NECK |
| 0232 | VENTRI SHUNT-CIRCULA SYS |
| 0233 | VENTRICL SHUNT-THORAX |
| 0234 | VENTRICL SHUNT-ABDOMEN |
| 0235 | VENTRI SHUNT-UNINARY SYS |
| 0239 | OTHER VENTRICULAR SHUNT |
| 0242 | REPLACE VENTRICLE SHUNT |
| 0243 | REMOVE VENTRICLE SHUNT |
| 0291 | LYSIS CORTICAL ADHESION |
| 0292 | BRAIN REPAIR |
| 0293 | IMPLANT BRAIN STIMULATOR |
| 0294 | INSERT/REPLAC SKULL TONG |
| 0299 | SKULL & BRAIN OP NEC |
| 0301 | REMOVAL FB SPINAL CANAL |
| 0302 | REOPEN LAMINECTOMY SITE |
| 0309 | SPINAL CANAL EXPLOR NEC |
| 031 | INTRASPIN NERVE ROOT DIV |
| 0321 | PERCUTANEOUS CHORDOTOMY |
| 0329 | OTHER CHORDOTOMY |

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| 0332 | SPINAL CORD/MENINGES BX |
| 0339 | OTHER SPINAL DX PROC |
| 034 | EXCIS SPINAL CORD LESION |
| 0351 | SPINE MENINGOCELE REPAIR |
| 0352 | MYELOMENINGOCEL REPAIR |
| 0353 | VERTEBRAL FX REPAIR |
| 0359 | SPINAL STRUCT REPAIR NEC |
| 036 | SPINAL CORD ADHESIOLYSIS |
| 0371 | SUBARACH-PERITON SHUNT |
| 0372 | SUBARACH-URETERAL SHUNT |
| 0379 | OTH SPINAL THECAL SHUNT |
| 0393 | INSERT SPINAL STIMULATOR |
| 0394 | REMOVE SPINAL STIMULATOR |
| 0397 | REVISE SPINE THECA SHUNT |
| 0398 | REMOVE SPINE THECA SHUNT |
| 0399 | SPINE CANAL STRUC OP NEC |
| 0401 | EXCISION ACOUSTIC NEUROMA |
| 0402 | TRIGEMINAL NERV DIVISION |
| 0403 | PERIPH NERVE DIV NEC |
| 0404 | PERIPH NERVE INCIS NEC |
| 0405 | GASSERIAN GANGLIONECTOMY |
| 0406 | PERIPH GANGLIONECT NEC |
| 0407 | PERIPH NERV EXCISION NEC |
| 0412 | OPEN PERIPH NERVE BIOPSY |
| 0419 | PERIPH NERVE DX PROC NEC |
| 043 | PERIPHERAL NERVE SUTURE |
| 0441 | DECOMPRESS TRIGEM ROOT |
| 0442 | CRAN NERV ROOT DECOM NEC |
| 0443 | CARPAL TUNNEL RELEASE |
| 0444 | TARSAL TUNNEL RELEASE |
| 0449 | PER NERVE ADHESIOLYS NEC |
| 045 | PERIPHERAL NERVE GRAFT |
| 046 | PERIPH NERVE TRANSPOSIT |
| 0471 | HYPOGLOSS-FACIAL ANASTOM |
| 0472 | ACCESSORY-FACIAL ANASTOM |
| 0473 | ACCESS-HYPOGLOSS ANASTOM |
| 0474 | PERIPH NERV ANASTOM NEC |
| 0475 | POSTOP REVIS PER NERV OP |
| 0476 | LATE REPAIR PER NERV INJ |
| 0479 | OTHER NEUROPLASTY |
| 0491 | NEURECTASIS |
| 0492 | IMPLANT PERIPH STIMULAT |
| 0493 | REMOVE PERIPH STIMULATOR |
| 0499 | PERIPHERAL NERVE OPS NEC |
| 050 | SYMPATH NERVE DIVISION |
| 0511 | SYMPATHETIC NERVE BIOPSY |
| 0519 | SYMPATH NRV DX PROC NEC |
| 0521 | SPHENOPALATIN GANGLIONEC |
| 0522 | CERVICAL SYMPATHECTOMY |
| 0523 | LUMBAR SYMPATHECTOMY |
| 0524 | PRESACRAL SYMPATHECTOMY |

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| 0525 | PERIART SYMPATHECTOMY |
| 0529 | OTHER SYMPATHECTOMY |
| 0581 | SYMPATHETIC NERVE REPAIR |
| 0589 | SYMPATHETIC NERVE OP NEC |
| 059 | OTHER NERVOUS SYSTEM OPS |
| 0602 | REOPEN THYROID FIELD WND |
| 0609 | INCIS THYROID FIELD NEC |
| 0612 | OPEN THYROID GLAND BX |
| 0613 | PARATHYROID BIOPSY |
| 0619 | THYR/PARATHY DX PROC NEC |
| 062 | UNILAT THYROID LOBECTOMY |
| 0631 | EXCISION THYROID LESION |
| 0639 | PART THYROIDECTOMY NEC |
| 064 | COMPLETE THYROIDECTOMY |
| 0650 | SUBSTERN THYROIDECT NOS |
| 0651 | PART SUBSTERN THYROIDECT |
| 0652 | TOT SUBSTERN THYROIDECT |
| 066 | LINGUAL THYROID EXCISION |
| 067 | THYROGLOSS DUCT EXCISION |
| 0681 | TOTAL PARATHYROIDECTOMY |
| 0689 | OTHER PARATHYROIDECTOMY |
| 0691 | THYROID ISTHMUS DIVISION |
| 0692 | THYROID VESSEL LIGATION |
| 0693 | THYROID SUTURE |
| 0694 | THYROID REIMPLANTATION |
| 0695 | PARATHYROID REIMPLANT |
| 0698 | OTHER THYROID OPERATIONS |
| 0699 | OTHER PARATHYROID OPS |
| 0700 | ADRENAL EXPLORATION NOS |
| 0701 | UNILAT ADRENAL EXPLORAT |
| 0702 | BILAT ADRENAL EXPLORAT |
| 0712 | OPEN ADRENAL GLAND BX |
| 0713 | TRANSFRONT PITUITARY BX |
| 0714 | TRANSPHEN PITUITARY BX |
| 0715 | PITUITARY BIOPSY NOS |
| 0716 | THYMUS BIOPSY |
| 0717 | PINEAL BIOPSY |
| 0719 | ENDOCRINE DX PROC NEC |
| 0721 | ADRENAL LESION EXCISION |
| 0722 | UNILATERAL ADRENALECTOMY |
| 0729 | PART ADRENALECTOMY NEC |
| 073 | BILATERAL ADRENALECTOMY |
| 0741 | ADRENAL INCISION |
| 0742 | ADRENAL NERVE DIVISION |
| 0743 | ADRENAL VESSEL LIGATION |
| 0744 | ADRENAL REPAIR |
| 0745 | ADRENAL REIMPLANTATION |
| 0749 | ADRENAL OPERATION NEC |
| 0751 | PINEAL FIELD EXPLORATION |
| 0752 | PINEAL GLAND INCISION |
| 0753 | PARTIAL PINEALECTOMY |

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| 0754 | TOTAL PINEALECTOMY |
| 0759 | PINEAL OPERATION NEC |
| 0761 | EXC PITUIT LES-TRANSFRON |
| 0762 | EXC PITUIT LES-TRANSPHEN |
| 0763 | PART EXCIS PITUITARY NOS |
| 0764 | TOT EXC PITUIT-TRANSFRON |
| 0765 | TOT EXC PITUIT-TRANSPHEN |
| 0768 | TOTAL EXC PITUITARY NEC |
| 0769 | TOTAL EXC PITUITARY NOS |
| 0771 | PITUITARY FOSSA EXPLORAT |
| 0772 | PITUITARY GLAND INCISION |
| 0779 | PITUITARY OPERATION NEC |
| 0780 | THYMECTOMY NOS |
| 0781 | PART EXCISION OF THYMUS |
| 0782 | TOTAL EXCISION OF THYMUS |
| 0791 | THYMUS FIELD EXPLORATION |
| 0792 | INCISION OF THYMUS |
| 0793 | REPAIR OF THYMUS |
| 0794 | THYMUS TRANSPLANTATION |
| 0799 | THYMUS OPERATION NEC |
| 0811 | EYELID BIOPSY |
| 0820 | REMOVE EYELID LESION NOS |
| 0821 | CHALAZION EXCISION |
| 0822 | EXCISE MINOR LES LID NEC |
| 0823 | EXC MAJ LES LID PRT-THIC |
| 0824 | EXC MAJ LES LID FUL-THIC |
| 0825 | DESTRUCTION LID LESION |
| 0831 | PTOSIS REP-FRONT MUS SUT |
| 0832 | PTOSIS REP-FRON MUS SLNG |
| 0833 | PTOSIS REP-LEVAT MUS ADV |
| 0834 | PTOSIS REP-LEVAT MUS NEC |
| 0835 | PTOS REP-TARSAL TECHNIQ |
| 0836 | BLEPHAROPTOS REPAIR NEC |
| 0837 | REDUC OVERCORRECT PTOSIS |
| 0838 | CORRECT LID RETRACTION |
| 0841 | THERMOCAUT/ENTROPION REP |
| 0842 | SUTURE ENTROPION REPAIR |
| 0843 | WEDG RESEC ENTROPION REP |
| 0844 | LID RECONS ENTROPION REP |
| 0849 | ENTROPION/ECTROP REP NEC |
| 0851 | CANTHOTOMY |
| 0852 | BLEPHARORRHAPHY |
| 0859 | ADJUST LID POSITION NEC |
| 0861 | LID RECONST W SKIN GRAFT |
| 0862 | LID RECONST W MUC GRAFT |
| 0863 | LID RECONST W HAIR GRAFT |
| 0864 | LID RECON-TARSOCONJ FLAP |
| 0869 | LID RECONSTR W GRAFT NEC |
| 0870 | LID RECONSTRUCTION NOS |
| 0871 | LID MARG RECON-PART THIC |
| 0872 | LID RECONS-PART THIC NEC |

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| 0873 | LID MARG RECONS FUL THIC |
| 0874 | LID RECONST-FUL THIC NEC |
| 0891 | ELECTROSURG LID EPILAT |
| 0892 | CRYOSURG LID EPILATION |
| 0893 | EYELID EPILATION NEC |
| 0899 | EYELID OPERATION NEC |
| 090 | LACRIMAL GLAND INCISION |
| 0911 | LACRIMAL GLAND BIOPSY |
| 0912 | LACRIMAL SAC BIOPSY |
| 0919 | LACRIMAL SYS DX PROC NEC |
| 0920 | EXC LACRIMAL GLAND NOS |
| 0921 | EXCIS LES LACRIMAL GLAND |
| 0922 | PART DACRYOADENECT NEC |
| 0923 | TOTAL DACRYOADENECTOMY |
| 093 | OTHER LACRIMAL GLAND OPS |
| 0941 | LACRIMAL PUNCTUM PROBE |
| 0942 | LAC CANALICULI PROBE |
| 0943 | NASOLACRIMAL DUCT PROBE |
| 0944 | NASOLAC DUCT INTUBAT |
| 0949 | LAC PASSAGE MANIP NEC |
| 0951 | LAC PUNCTUM INCISION |
| 0952 | LAC CANALICULI INCISION |
| 0953 | LACRIMAL SAC INCISION |
| 0959 | LACRIM PASSAGE INCIS NEC |
| 096 | LACRIM SAC/PASSAGE EXCIS |
| 0971 | CORRECT EVERTED PUNCTUM |
| 0972 | PUNCTUM REPAIR NEC |
| 0973 | CANALICULUS REPAIR |
| 0981 | DACRYOCYSTORHINOSTOMY |
| 0982 | CONJUNCTIVOCYSTORHINOST |
| 0983 | CONJUNCTIVORHINOS W TUBE |
| 0991 | LAC PUNCTUM OBLITERATION |
| 0999 | LACRIMAL SYSTEM OP NEC |
| 100 | INCISE/REMOV CONJUNCT FB |
| 101 | CONJUNCTIVA INCISION NEC |
| 1021 | CONJUNCTIVAL BIOPSY |
| 1029 | CONJUNCTIVA DX PROC NEC |
| 1031 | EXCISE CONJUNCTIV LESION |
| 1032 | DESTRUCT CONJUNC LES NEC |
| 1033 | OTH CONJUNC DESTRUC PROC |
| 1041 | SYMBLEPH REP W FREE GRFT |
| 1042 | GRAFT CONJUNC CUL-DE-SAC |
| 1043 | CONJUN CUL-DE-SAC RX NEC |
| 1044 | CONJUNC FREE GRAFT NEC |
| 1049 | CONJUNCTIVOPLASTY NEC |
| 105 | CONJUNC/LID ADHESIOLYSIS |
| 106 | REPAIR CONJUNCT LACERAT |
| 1091 | SUBCONJUNCTIVAL INJECT |
| 1099 | CONJUNCTIVAL OP NEC |
| 110 | MAGNET REMOVAL CORNEA FB |
| 111 | CORNEAL INCISION |

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| 1121 | CORNEAL SCRAPE FOR SMEAR |
| 1122 | CORNEAL BIOPSY |
| 1129 | CORNEAL DX PROC NEC |
| 1131 | PTERYGIUM TRANSPOSITION |
| 1132 | PTERYG EXC W CORNEA GRFT |
| 1139 | PTERYGIUM EXCISION NEC |
| 1141 | MECH REMOV CORNEA EPITH |
| 1142 | THERMOCAUT CORNEA LESION |
| 1143 | CRYOTHERAP CORNEA LESION |
| 1149 | DESTRUCT CORNEA LES NEC |
| 1151 | SUTURE CORNEA LACERATION |
| 1152 | REP CORNEA POSTOP DEHISC |
| 1153 | RX CORNEA LAC W CONJ FLP |
| 1159 | CORNEAL REPAIR NEC |
| 1160 | CORNEAL TRANSPLANT NOS |
| 1161 | LAM KERATPLAST W AUTGRFT |
| 1162 | LAMELLAR KERATOPLAST NEC |
| 1163 | PERF KERATOPL W AUTOGRFT |
| 1164 | PERFORAT KERATOPLAST NEC |
| 1169 | CORNEAL TRANSPLANT NEC |
| 1171 | KERATOMILEUSIS |
| 1172 | KERATOPHAKIA |
| 1173 | KERATOPROSTHESIS |
| 1174 | THERMOKERATOPLASTY |
| 1175 | RADIAL KERATOTOMY |
| 1176 | EPIKERATOPHAKIA |
| 1179 | CORNEA RECONSTRUCT NEC |
| 1191 | CORNEAL TATTOOING |
| 1192 | REMOVE CORNEAL IMPLANT |
| 1199 | CORNEAL OPERATION NEC |
| 1200 | REMOV ANT SEGMENT FB NOS |
| 1201 | MAGNET REMOV ANT SEG FB |
| 1202 | NONMAG REMOV ANT SEG FB |
| 1211 | IRIDOTOMY W TRANSFIXION |
| 1212 | IRIDOTOMY NEC |
| 1213 | PROLAPSED IRIS EXCISION |
| 1214 | IRIDECTOMY NEC |
| 1221 | DX ASPIRAT-ANT CHAMBER |
| 1222 | IRIS BIOPSY |
| 1229 | ANT SEGMENT DX PROC NEC |
| 1231 | GONIOSYNECHIAE LYSIS |
| 1232 | ANT SYNECHIA LYSIS NEC |
| 1233 | POST SYNECHIAE LYSIS |
| 1234 | CORNEOVITREAL ADHESIOLYS |
| 1235 | COREOPLASTY |
| 1239 | IRIDOPLASTY NEC |
| 1240 | REMOV ANT SEGMENT LES NOS |
| 1241 | NONEXC DESTRUCT IRIS LES |
| 1242 | EXCISION OF IRIS LESION |
| 1243 | NONEXC DESTR CIL BOD LES |
| 1244 | EXCISE CILIARY BODY LES |

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| 1251 | GONIOPUNCTURE |
| 1252 | GONIOTOMY |
| 1253 | GONIOTOMY W GONIOPUNCTUR |
| 1254 | TRABECULOTOMY AB EXTERNO |
| 1255 | CYCLODIALYSIS |
| 1259 | FACILIT INTRAOC CIRC NEC |
| 1261 | TREPHIN SCLERA W IRIDECT |
| 1262 | THERMCAUT SCLER W IRIDEC |
| 1263 | IRIDENCLEISIS/IRIDOTASIS |
| 1264 | TRABECULECTOM AB EXTERNO |
| 1265 | SCLER FISTULIZ W IRIDECT |
| 1266 | POSTOP REVIS SCL FISTUL |
| 1269 | SCLER FISTULIZING OP NEC |
| 1271 | CYCLODIATHERMY |
| 1272 | CYCLOCRYOTHERAPY |
| 1273 | CYCLOPHOTOCOAGULATION |
| 1274 | CIL BODY DIMINUTION NOS |
| 1279 | GLAUCOMA PROCEDURE NEC |
| 1281 | SUTURE SCLERAL LACER |
| 1282 | SCLERAL FISTULA REPAIR |
| 1283 | REVIS ANT SEG OP WND NEC |
| 1284 | DESTRUCT SCLERAL LESION |
| 1285 | REPAIR STAPHYLOM W GRAFT |
| 1286 | REP SCLER STAPHYLOMA NEC |
| 1287 | GRAFT REINFORCE SCLERA |
| 1288 | SCLERA REINFORCEMENT NEC |
| 1289 | SCLERAL OPERATION NEC |
| 1291 | THERAPEUT EVAC ANT CHAMB |
| 1292 | ANTERIOR CHAMBER INJECT |
| 1293 | REMOV EPITHEL DOWNGROWTH |
| 1297 | IRIS OPERATION NEC |
| 1298 | CILIARY BODY OP NEC |
| 1299 | ANTERIOR CHAMBER OP NEC |
| 1300 | REMOVE FB LENS NOS |
| 1301 | MAGNET REMOVE FB LENS |
| 1302 | NONMAGNET REMOVE FB LENS |
| 1311 | TEMP-INF INTRCAP LENS EX |
| 1319 | INTRACAPSUL LENS EXT NEC |
| 132 | LINEAR EXTRACAP LENS EXT |
| 133 | SIMPL ASPIR LENS EXTRACT |
| 1341 | CATARAC PHACOEMULS/ASPIR |
| 1342 | POST CATARAC FRAG/ASPIR |
| 1343 | CATARACT FRAG/ASPIR NEC |
| 1351 | TEMP-INF XTRACAP LENS EX |
| 1359 | EXTRACAP LENS EXTRAC NEC |
| 1361 | EXTRACAP LENS EXTRAC NEC |
| 1362 | EXTRACAP LENS EXTRAC NEC |
| 1363 | EXTRACAP LENS EXTRAC NEC |
| 1364 | AFTER-CATAR DISCISSION |
| 1365 | AFTER-CATARACT EXCISION |
| 1366 | AFTER CATAR FRAGMENTATION |

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| 1369 | CATARACT EXTRACTION NEC |
| 1370 | INSERT PSEUDOPHAKOS NOS |
| 1371 | INSERT LENS AT CATAR EXT |
| 1372 | SECONDARY INSERT LENS |
| 138 | IMPLANTED LENS REMOVAL |
| 139 | OTHER OPERATIONS ON LENS |
| 1390 | OPERATION ON LENS NEC OCT06- |
| 1391 | IMPL INTRAOC TELESC PROS OCT06- |
| 1400 | REMOV POST SEGMNT FB NOS |
| 1401 | MAGNET REMOV POST SEG FB |
| 1402 | NONMAG REMOV POST SEG FB |
| 1411 | DIAGNOST VITREOUS ASPIR |
| 1419 | DX PROC POST SEG NEC |
| 1421 | CHORIORET LES DIATHERMY |
| 1422 | CHORIORETIN LES CRYOTHER |
| 1426 | CHORIORET LES RADIOOTHER |
| 1427 | CHORIORET LES RAD IMPLAN |
| 1429 | CHORIORET LES DESTR NEC |
| 1431 | RETINAL TEAR DIATHERMY |
| 1432 | RETINAL TEAR CRYOTHERAPY |
| 1439 | RETINAL TEAR REPAIR NEC |
| 1441 | SCLERAL BUCKLE W IMPLANT |
| 1449 | SCLERAL BUCKLING NEC |
| 1451 | DETACH RETINA-DIATHERMY |
| 1452 | DETACH RETINA-CRYOTHERAP |
| 1453 | DETACH RETINA XENON COAG |
| 1454 | DETACH RETINA LASER COAG |
| 1455 | DETACH RET PHOTOCOAG NOS |
| 1459 | REPAIR RETINA DETACH NEC |
| 146 | REMOV PROS MAT POST SEG |
| 1471 | ANTERIOR REMOV VITREOUS |
| 1472 | VITREOUS REMOVAL NEC |
| 1473 | ANTERIOR MECHAN VITRECT |
| 1474 | MECH VITRECTOMY NEC |
| 1475 | VITREOUS SUBSTITUT INJEC |
| 1479 | VITREOUS OPERATION NEC |
| 149 | OTHER POST SEGMENT OPS |
| 1501 | EXTRAOC MUSC-TEND BIOPSY |
| 1509 | EXTRAOC MUSC DX PROC NEC |
| 1511 | ONE EXTRAOC MUS RECESS |
| 1512 | 1 EXTRAOC MUSCL ADVANCE |
| 1513 | 1 EXTRAOC MUSCL RESECT |
| 1519 | XTRAOC MUS OP/DETACH NEC |
| 1521 | LENGTHEN 1 EXTRAOC MUSC |
| 1522 | SHORTEN 1 EXTRAOC MUSC |
| 1529 | OP ON 1 EXTRAOC MUSC NEC |
| 153 | TEMP DETACH >1 XTROC MUS |
| 154 | OTH OP ON >L EXTRAOC MUS |
| 155 | EXTRAOCUL MUS TRANSPOSIT |
| 156 | REVIS EXTRAOC MUSC SURG |

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| 157 | EXTRAOC MUSC INJ REPAIR |
| 159 | OTH EXTRAOC MUS-TEND OP |
| 1601 | ORBITOTOMY W BONE FLAP |
| 1602 | ORBITOTOMY W IMPLANT |
| 1609 | ORBITOTOMY NEC |
| 161 | REMOVE PENETRAT FB EYE |
| 1622 | DIAGNOSTIC ASP OF ORBIT |
| 1623 | EYEBALL & ORBIT BIOPSY |
| 1629 | EYEBAL/ORBIT DX PROC NEC |
| 1631 | EYE EVISC W SYNCH IMPLAN |
| 1639 | EYEBALL EVISCERATION NEC |
| 1641 | EYE ENUC/IMPLAN/MUSC ATT |
| 1642 | EYE ENUC W IMPLANT NEC |
| 1649 | EYEBALL ENUCLEATION NEC |
| 1651 | RADICAL ORBITOMAXILLECT |
| 1652 | ORBIT EXENT W BONE REMOV |
| 1659 | ORBITAL EXENTERATION NEC |
| 1661 | 2NDRY OCULAR IMP INSERT |
| 1662 | REVIS/REINSERT OCUL IMP |
| 1663 | REVIS ENUC SOCKET W GRFT |
| 1664 | ENUC SOCKET REVIS NEC |
| 1665 | 2NDRY EXENT CAVITY GRAFT |
| 1666 | REVIS EXENTER CAVITY NEC |
| 1669 | 2ND OP POST EYE REM NEC |
| 1671 | REMOVE OCULAR IMPLANT |
| 1672 | REMOVE ORBITAL IMPLANT |
| 1681 | REPAIR OF ORBITAL WOUND |
| 1682 | REPAIR EYEBALL RUPTURE |
| 1689 | EYE/ORBIT INJ REPAIR NEC |
| 1692 | EXCISION ORBITAL LESION |
| 1693 | EXCISION EYE LESION NOS |
| 1698 | OPERATION ON ORBIT NEC |
| 1699 | OPERATION ON EYEBALL NEC |
| 1821 | PREAURICULAR SINUS EXCIS |
| 1831 | RAD EXCIS EXT EAR LES |
| 1839 | EXCIS EXTERNAL EAR NEC |
| 185 | CORRECTION PROMINENT EAR |
| 186 | EXT AUDIT CANAL RECONSTR |
| 1871 | CONSTRUCTION EAR AURICLE |
| 1872 | REATTACH AMPUTATED EAR |
| 1879 | PLASTIC REP EXT EAR NEC |
| 189 | OTHER EXT EAR OPERATIONS |
| 190 | STAPES MOBILIZATION |
| 1911 | STAPEDECT W REPLAC INCUS |
| 1919 | STAPEDECTOMY NEC |
| 1921 | REV STAPDEC W INCUS REPL |
| 1929 | STAPEDECTOMY REVIS NEC |
| 193 | OSSICULAR CHAIN OP NEC |
| 194 | MYRINGOPLASTY |
| 1952 | TYPE 2 TYMPANOPLASTY |
| 1953 | TYPE 3 TYMPANOPLASTY |

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| 1954 | TYPE 4 TYMPANOPLASTY | 2241 | FRONTAL SINUSOTOMY |
| 1955 | TYPE 5 TYMPANOPLASTY | 2242 | FRONTAL SINUSECTOMY |
| 196 | TYMPANOPLASTY REVISION | 2250 | SINUSOTOMY NOS |
| 199 | MIDDLE EAR REPAIR NEC | 2251 | ETHMOIDOTOMY |
| 2001 | MYRINGOTOMY W INTUBATION | 2252 | SPHENOIDOTOMY |
| 2021 | MASTOID INCISION | 2253 | MULTIPLE SINUS INCISION |
| 2022 | PETRUS PYRAM AIR CEL INC | 2260 | SINUSECTOMY NOS |
| 2023 | MIDDLE EAR INCISION | 2261 | C-LUC EXC MAX SINUS LES |
| 2032 | MID & INNER EAR BIOPSY | 2262 | EXC MAX SINUS LESION NEC |
| 2039 | MID/IN EAR DX PROC NEC | 2263 | ETHMOIDECTOMY |
| 2041 | SIMPLE MASTOIDECTOMY | 2264 | SPHENOIDECTOMY |
| 2042 | RADICAL MASTOIDECTOMY | 2271 | NASAL SINUS FISTULA CLOS |
| 2049 | MASTOIDECTOMY NEC | 2279 | NASAL SINUS REPAIR NEC |
| 2051 | EXCISE MIDDLE EAR LESION | 229 | OTHER NASAL SINUS OPS |
| 2059 | MIDDLE EAR EXCISION NEC | 242 | GINGIVOPLASTY |
| 2061 | INNER EAR FENESTRATION | 244 | EXC OF DENTAL LES OF JAW |
| 2062 | REVIS INNER EAR FENESTRA | 245 | ALVEOLOPLASTY |
| 2071 | ENDOLYMPHATIC SHUNT | 2502 | OPEN BIOPSY OF TONGUE |
| 2072 | INNER EAR INJECTION | 251 | DESTRUCTION TONGUE LES |
| 2079 | INC/EXC/DESTR IN EAR NEC | 252 | PARTIAL GLOSSECTOMY |
| 2091 | TYMPANOSYMPATHECTOMY | 253 | COMPLETE GLOSSECTOMY |
| 2092 | MASTOIDECTOMY REVISION | 254 | RADICAL GLOSSECTOMY |
| 2093 | REPAIR OVAL/ROUND WINDOW | 2559 | REPAIR OF TONGUE NEC |
| 2095 | ELECMAG HEAR DEV IMPLANT | 2594 | OTHER GLOSSOTOMY |
| 2096 | IMPLT COCHLEAR PROST NOS | 2599 | TONGUE OPERATION NEC |
| 2097 | IMP/REP SCHAN COCH PROS | 2612 | OPEN BX SALIV GLAND/DUCT |
| 2098 | IMP/REP MCHAN COCHL PROS | 2621 | SALIVARY CYST MARSUPIAL |
| 2099 | MID-INNER EAR OPS NEC | 2629 | SALIV LESION EXCIS NEC |
| 2104 | ETHMOID ART LIGAT-EPIST | 2630 | SIALOADENECTOMY NOS |
| 2105 | MAX ART LIG FOR EPISTAX | 2631 | PARTIAL SIALOADENECTOMY |
| 2106 | EXT CAROT ART LIG-EPIST | 2632 | COMPLETE SIALOADENECTOMY |
| 2107 | NASAL SEPT GRFT-EPISTAX | 2641 | SUTURE OF SALIV GLND LAC |
| 2109 | EPISTAXIS CONTROL NEC | 2642 | SALIVARY FISTULA CLOSURE |
| 214 | RESECTION OF NOSE | 2649 | SALIVARY REPAIR NEC |
| 215 | SUBMUC NASAL SEPT RESECT | 2699 | SALIVARY OPERATION NEC |
| 2161 | DIATHER/CRYO TURBINECTOM | 270 | DRAIN FACE & MOUTH FLOOR |
| 2162 | TURBINATE FRACTURE | 271 | INCISION OF PALATE |
| 2169 | TURBINECTOMY NEC | 2721 | BONY PALATE BIOPSY |
| 2172 | OPEN REDUCTION NASAL FX | 2722 | UVULA AND SOFT PALATE BX |
| 2182 | NASAL FISTULA CLOSURE | 2731 | LOC EXC BONY PALATE LES |
| 2183 | TOT NASAL RECONSTRUCTION | 2732 | WIDE EXC BONY PALATE LES |
| 2184 | REVISION RHINOPLASTY | 2742 | WIDE EXCISION OF LIP LES |
| 2185 | AUGMENTATION RHINOPLASTY | 2743 | EXCISION OF LIP LES NEC |
| 2186 | LIMITED RHINOPLASTY | 2749 | EXCISION OF MOUTH NEC |
| 2187 | RHINOPLASTY NEC | 2753 | CLOSURE OF MOUTH FISTULA |
| 2188 | SEPTOPLASTY NEC | 2754 | REPAIR OF CLEFT LIP |
| 2189 | NASAL REPAIR NEC | 2755 | FULL-THICK GRFT TO MOUTH |
| 2199 | NASAL OPERATION NEC | 2756 | SKIN GRAFT TO MOUTH NEC |
| 2212 | OPEN BIOPSY NASAL SINUS | 2757 | PEDICLE ATTACH TO MOUTH |
| 2231 | RADICAL MAXILLARY ANTROT | 2759 | MOUTH REPAIR NEC |
| 2239 | EXT MAXILLARY ANTROT NEC | 2761 | SUTURE OF PALATE LACERAT |

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| 2762 | CLEFT PALATE CORRECTION |
| 2763 | REVIS CLEFT PALAT REPAIR |
| 2769 | OTH PLASTIC REPAIR PALAT |
| 2771 | INCISION OF UVULA |
| 2772 | EXCISION OF UVULA |
| 2773 | REPAIR OF UVULA |
| 2779 | OTHER UVULA OPERATIONS |
| 2792 | MOUTH INCISION NOS |
| 2799 | ORAL CAVITY OPS NEC |
| 280 | PERITONSILLAR I & D |
| 2811 | TONSIL&ADENOID BIOPSY |
| 2819 | TONSIL&ADENOID DX OP NEC |
| 282 | TONSILLECTOMY |
| 283 | TONSILLECTOMY/ADENOIDEC |
| 284 | EXCISION OF TONSIL TAG |
| 285 | EXCISION LINGUAL TONSIL |
| 286 | ADENOIDECTOMY |
| 287 | HEMORR CONTRL POST T & A |
| 2891 | INCIS TO REMOV TONSIL FB |
| 2892 | EXCIS TONSIL/ADENOID LES |
| 2899 | TONSIL/ADENOID OPS NEC |
| 290 | PHARYNGOTOMY |
| 292 | EXC BRANCHIAL CLEFT CYST |
| 293 | EXC BRANCHIAL CLEFT CYST |
| 2931 | CRICOPHARYNGEAL MYOTOMY |
| 2932 | PHARYNGEAL DIVERTICULEC |
| 2933 | PHARYNGECTOMY |
| 2939 | EXCIS/DESTR LES PHAR NEC |
| 294 | PLASTIC OP ON PHARYNX |
| 2951 | SUTURE OF PHARYNGEAL LAC |
| 2952 | CLOS BRANCH CLEFT FISTUL |
| 2953 | CLOS PHARYNX FISTULA NEC |
| 2954 | LYSIS PHARYNGEAL ADHES |
| 2959 | PHARYNGEAL REPAIR NEC |
| 2992 | DIVIS GLOSSOPHARYNG NERV |
| 2999 | PHARYNGEAL OPERATION NEC |
| 3001 | LARYNX CYST MARSUPIALIZ |
| 3009 | DESTRUCT LARYNX LES NEC |
| 301 | HEMILARYNGECTOMY |
| 3021 | EPIGLOTTIDECTOMY |
| 3022 | VOCAL CORDECTOMY |
| 3029 | OTHER PART LARYNGECTOMY |
| 303 | COMPLETE LARYNGECTOMY |
| 304 | RADICAL LARYNGECTOMY |
| 3121 | MEDIASTINAL TRACHEOSTOMY |
| 3129 | OTHER PERM TRACHEOSTOMY |
| 313 | INCIS LARYNX TRACHEA NEC |
| 3145 | OPN BX LARYNX OR TRACHEA |
| 315 | LOCAL DESTRUC TRACH LES |
| 3161 | SUTURE OF LARYNGEAL LAC |
| 3162 | LARYNGEAL FISTULA CLOS |

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| 3163 | LARYNGOSTOMY REVISION |
| 3164 | LARYNGEAL FX REPAIR |
| 3169 | OTHER LARYNGEAL REPAIR |
| 3171 | SUTURE OF TRACHEAL LACER |
| 3172 | CLOSURE OF TRACHEOSTOMY |
| 3173 | TRACHEA FISTULA CLOS NEC |
| 3174 | REVISION OF TRACHEOSTOMY |
| 3175 | TRACHEAL RECONSTRUCTION |
| 3179 | OTHER TRACHEAL REPAIR |
| 3191 | LARYNGEAL NERV DIVISION |
| 3192 | LYSIS TRACH/LARYNX ADHES |
| 3198 | OTH LARYNGEAL OPERATION |
| 3199 | OTHER TRACHEAL OPERATION |
| 320 | OTHER TRACHEAL OPERATION |
| 3209 | OTHER DESTRUC BRONC LES |
| 321 | OTHER BRONCHIAL EXCISION |
| 3221 | EMPHYSEMA BLEB PPLICATION |
| 3222 | LUNG VOL REDUCTION SURG |
| 3223 | OPEN ABLTN LUNG LES/TISS OCT06- |
| 3224 | PERC ABLTN LUNG LES/TISS OCT06- |
| 3225 | THOR ABLTN LUNG LES/TISS OCT06- |
| 3226 | ABLTN LUNG TISS NEC/NOS OCT06- |
| 3229 | DESTROY LOC LUNG LES NEC |
| 323 | SEGMENTAL LUNG RESECTION |
| 324 | LOBECTOMY OF LUNG |
| 325 | COMPLETE PNEUMONECTOMY |
| 326 | RAD DISSEC THORAC STRUCT |
| 329 | OTHER EXCISION OF LUNG |
| 330 | INCISION OF BRONCHUS |
| 331 | INCISION OF LUNG |
| 3325 | OPEN BRONCHIAL BIOPSY |
| 3327 | CLOS ENDOSCOPIC LUNG BX |
| 3328 | OPEN LUNG BIOPSY |
| 3329 | BRONCH/LUNG DX PROC NEC |
| 3334 | THORACOPLASTY |
| 3339 | SURG COLLAPS OF LUNG NEC |
| 3341 | BRONCHIAL LACERAT SUTURE |
| 3342 | BRONCHIAL FISTULA CLOS |
| 3343 | LUNG LACERATION CLOSURE |
| 3348 | BRONCHIAL REPAIR NEC |
| 3349 | LUNG REPAIR NEC |
| 335 | LUNG REPAIR NEC |
| 3350 | LUNG TRANSPLANT NOS |
| 3351 | UNILAT LUNG TRANSPLANT |
| 3352 | BILAT LUNG TRANSPLANT |
| 336 | COMB HEART/LUNG TRANSPLA |
| 3392 | BRONCHIAL LIGATION |

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| 3393 | PUNCTURE OF LUNG |
| 3398 | BRONCHIAL OPERATION NEC |
| 3399 | LUNG OPERATION NEC |
| 3402 | EXPLORATORY THORACOTOMY |
| 3403 | REOPEN THORACOTOMY SITE |
| 341 | INCISION OF MEDIASTINUM |
| 3421 | TRANSPLEURA THORACOSCOPY |
| 3422 | MEDIASTINOSCOPY |
| 3426 | OPEN MEDIASTINAL BIOPSY |
| 3427 | BIOPSY OF DIAPHRAGM |
| 3428 | DX PROCEDURE THORAX NEC |
| 3429 | DX PROC MEDIASTINUM NEC |
| 343 | DESTRUCT MEDIASTIN LES |
| 344 | DESTRUCT CHEST WALL LES |
| 3451 | DECORTICATION OF LUNG |
| 3459 | OTHER PLEURAL EXCISION |
| 346 | SCARIFICATION OF PLEURA |
| 3473 | CLOS THORACIC FISTUL NEC |
| 3474 | PECTUS DEFORMITY REPAIR |
| 3479 | OTHER CHEST WALL REPAIR |
| 3481 | EXCISE DIAPHRAGM LESION |
| 3482 | SUTURE DIAPHRAGM LACERAT |
| 3483 | CLOSE DIAPHRAGM FISTULA |
| 3484 | OTHER DIAPHRAGM REPAIR |
| 3485 | IMPLANT DIAPHRA PACEMAKE |
| 3489 | DIAPHRAGM OPERATION NEC |
| 3493 | REPAIR OF PLEURA |
| 3499 | THORACIC OPERATION NEC |
| 3500 | CLOSED VALVOTOMY NOS |
| 3501 | CLOSED AORTIC VALVOTOMY |
| 3502 | CLOSED MITRAL VALVOTOMY |
| 3503 | CLOSED PULMON VALVOTOMY |
| 3504 | CLOSED TRICUSP VALVOTOMY |
| 3510 | OPEN VALVULOPLASTY NOS |
| 3511 | OPN AORTIC VALVULOPLASTY |
| 3512 | OPN MITRAL VALVULOPLASTY |
| 3513 | OPN PULMON VALVULOPLASTY |
| 3514 | OPN TRICUS VALVULOPLASTY |
| 3520 | REPLACE HEART VALVE NOS |
| 3521 | REPLACE AORT VALV-TISSUE |
| 3522 | REPLACE AORTIC VALVE NEC |
| 3523 | REPLACE MITR VALV-TISSUE |
| 3524 | REPLACE MITRAL VALVE NEC |
| 3525 | REPLACE PULM VALV-TISSUE |
| 3526 | REPLACE PULMON VALVE NEC |
| 3527 | REPLACE TRIC VALV-TISSUE |
| 3528 | REPLACE TRICUSP VALV NEC |
| 3531 | PAPILLARY MUSCLE OPS |
| 3532 | CHORDAE TENDINEAE OPS |
| 3533 | ANNULOPLASTY |
| 3534 | INFUNDIBULECTOMY |

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| 3535 | TRABECUL CARNEAE CORD OP |
| 3539 | TISS ADJ TO VALV OPS NEC |
| 3542 | CREATE SEPTAL DEFECT |
| 3550 | PROSTH REP HRT SEPTA NOS |
| 3551 | PROS REP ATRIAL DEF-OPN |
| 3552 | PROS REPAIR ATRIA DEF-CL |
| 3553 | PROST REPAIR VENTRIC DEF |
| 3554 | PROS REP ENDOCAR CUSHION |
| 3555 | PROS REP VENTRC DEF-CLOS OCT06- |
| 3560 | GRFT REPAIR HRT SEPT NOS |
| 3561 | GRAFT REPAIR ATRIAL DEF |
| 3562 | GRAFT REPAIR VENTRIC DEF |
| 3563 | GRFT REP ENDOCAR CUSHION |
| 3570 | HEART SEPTA REPAIR NOS |
| 3571 | ATRIA SEPTA DEF REP NEC |
| 3572 | VENTR SEPTA DEF REP NEC |
| 3573 | ENDOCAR CUSHION REP NEC |
| 3581 | TOT REPAIR TETRAL FALLOT |
| 3582 | TOTAL REPAIR OF TAPVC |
| 3583 | TOT REP TRUNCUS ARTERIOS |
| 3584 | TOT COR TRANSPOS GRT VES |
| 3591 | INTERAT VEN RETRN TRANSP |
| 3592 | CONDUIT RT VENT-PUL ART |
| 3593 | CONDUIT LEFT VENTR-AORTA |
| 3594 | CONDUIT ARTIUM-PULM ART |
| 3595 | HEART REPAIR REVISION |
| 3596 | PERC HEART VALVULOPLASTY |
| 3598 | OTHER HEART SEPTA OPS |
| 3599 | OTHER HEART VALVE OPS |
| 3600 | OTHER HEART VALVE OPS |
| 3601 | PTCA-1 VES/ATH W/O AGENT |
| 3602 | PTCA-1 VES/ATH W AGENT |
| 3603 | OPEN CORONRY ANGIOPLASTY |
| 3605 | PTCA-MULTIPLE VESSEL/ATH |
| 3609 | REM OF COR ART OBSTR NEC |
| 3610 | AORTOCORONARY BYPASS NOS |
| 3611 | AORTOCOR BYPAS-1 COR ART |
| 3612 | AORTOCOR BYPAS-2 COR ART |
| 3613 | AORTOCOR BYPAS-3 COR ART |
| 3614 | AORTCOR BYPAS-4+ COR ART |
| 3615 | 1 INT MAM-COR ART BYPASS |
| 3616 | 2 INT MAM-COR ART BYPASS |
| 3617 | ABD-CORON ARTERY BYPASS |
| 3619 | HRT REVAS BYPS ANAS NEC |
| 362 | ARTERIAL IMPLANT REVASC |
| 363 | ARTERIAL IMPLANT REVASC |
| 3631 | OPEN CHEST TRANS REVASC |
| 3632 | OTH TRANSMYO REVASCULAR |
| 3633 | ENDO TRANSMYO REVASCULAR OCT06- |

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| 3634 | PERC TRANSMYO REVASCULAR OCT06- |
| 3639 | OTH HEART REVASCULAR |
| 3691 | CORON VESS ANEURYSM REP |
| 3699 | HEART VESSEL OP NEC |
| 3710 | INCISION OF HEART NOS |
| 3711 | CARDIOTOMY |
| 3712 | PERICARDIOTOMY |
| 3724 | PERICARDIAL BIOPSY |
| 3731 | PERICARDIECTOMY |
| 3732 | HEART ANEURYSM EXCISION |
| 3733 | EXC/DEST HRT LESION OPEN |
| 3734 | EXC/DEST HRT LES OTHER |
| 3735 | PARTIAL VENTRICULECTOMY |
| 374 | HEART & PERICARD REPAIR |
| 3741 | IMPL CARDIAC SUPPORT DEV OCT05- |
| 3749 | HEART/PERICARD REPR NEC OCT05- |
| 375 | HEART & PERICARD REPAIR |
| 3751 | HEART TRANSPLANTATION OCT03- |
| 3752 | IMPLANT TOT REP HRT SYS |
| 3753 | REPL/REP THORAC UNIT HRT |
| 3754 | REPL/REP OTH TOT HRT SYS |
| 3761 | PULSATION BALLOON IMPLAN |
| 3762 | IMPLANT HRT ASST SYS NEC |
| 3763 | REPLACE HRT ASSIST SYST |
| 3764 | REMOVE HEART ASSIST SYS |
| 3765 | IMP EXT PUL HRT ASST SYS |
| 3766 | IMP IMP PUL HRT ASST SYS |
| 3767 | IMP CARDIOMYOSTIMUL SYS |
| 3774 | INT OR REPL LEAD EPICAR |
| 3775 | REVISION OF LEAD |
| 3776 | REPL TV ATRI-VENT LEAD |
| 3777 | REMOVAL OF LEAD W/O REPL |
| 3779 | REVIS OR RELOCATE POCKET |
| 3780 | INT OR REPL PERM PACEMKR |
| 3785 | REPL PACEM W 1-CHAM, NON |
| 3786 | REPL PACEM 1-CHAM, RATE |
| 3787 | REPL PACEM W DUAL-CHAM |
| 3789 | REVISE OR REMOVE PACEMAK |
| 3790 | INS LEFT ATR APPEND DEV (OCT 04) |
| 3791 | OPN CHEST CARDIAC MASSAG |
| 3794 | IMPLT/REPL CARDDEFIB TOT |
| 3795 | IMPLT CARDIODEFIB LEADS |
| 3796 | IMPLT CARDIODEFIB GENATR |
| 3797 | REPL CARDIODEFIB LEADS |
| 3798 | REPL CARDIODEFIB GENRATR |
| 3799 | OTHER HEART/PERICARD OPS |

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| 3800 | INCISION OF VESSEL NOS |
| 3801 | INTRACRAN VESSEL INCIS |
| 3802 | HEAD/NECK VES INCIS NEC |
| 3803 | UPPER LIMB VESSEL INCIS |
| 3804 | INCISION OF AORTA |
| 3805 | THORACIC VESSEL INC NEC |
| 3806 | ABDOMEN ARTERY INCISION |
| 3807 | ABDOMINAL VEIN INCISION |
| 3808 | LOWER LIMB ARTERY INCIS |
| 3809 | LOWER LIMB VEIN INCISION |
| 3810 | ENDARTERECTOMY NOS |
| 3811 | INTRACRAN ENDARTERECTOMY |
| 3812 | HEAD & NECK ENDARTER NEC |
| 3813 | UPPER LIMB ENDARTERECTOM |
| 3814 | ENDARTERECTOMY OF AORTA |
| 3815 | THORACIC ENDARTERECTOMY |
| 3816 | ABDOMINAL ENDARTERECTOMY |
| 3818 | LOWER LIMB ENDARTERECT |
| 3821 | BLOOD VESSEL BIOPSY |
| 3829 | BLOOD VESSEL DX PROC NEC |
| 3830 | VESSEL RESECT/ANAST NOS |
| 3831 | INTRACRAN VES RESEC-ANAS |
| 3832 | HEAD/NECK VES RESEC-ANAS |
| 3833 | ARM VESSEL RESECT/ANAST |
| 3834 | AORTA RESECTION & ANAST |
| 3835 | THOR VESSEL RESECT/ANAST |
| 3836 | ABD VESSEL RESECT/ANAST |
| 3837 | ABD VEIN RESECT & ANAST |
| 3838 | LEG ARTERY RESECT/ANAST |
| 3839 | LEG VEIN RESECT/ANASTOM |
| 3840 | VESSEL RESECT/REPLAC NOS |
| 3841 | INTRACRAN VES RESEC-REPL |
| 3842 | HEAD/NECK VES RESEC-REPL |
| 3843 | ARM VES RESECT W REPLACE |
| 3844 | RESECT ABDM AORTA W REPL |
| 3845 | RESECT THORAC VES W REPL |
| 3846 | ABD ARTERY RESEC W REPLA |
| 3847 | ABD VEIN RESECT W REPLAC |
| 3848 | LEG ARTERY RESEC W REPLA |
| 3849 | LEG VEIN RESECT W REPLAC |
| 3850 | VARICOSE V LIG-STRIP NOS |
| 3851 | INTCRAN VAR V LIG-STRIP |
| 3852 | HEAD/NECK VAR V LIG-STR |
| 3853 | ARM VARICOSE V LIG-STRIP |
| 3855 | THORAC VAR V LIG-STRIP |
| 3857 | ABD VARICOS V LIGA-STRIP |
| 3859 | LEG VARICOS V LIGA-STRIP |
| 3860 | EXCISION OF VESSEL NOS |
| 3861 | INTRACRAN VESSEL EXCIS |
| 3862 | HEAD/NECK VESSEL EXCIS |
| 3863 | ARM VESSEL EXCISION |

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| 3864 | EXCISION OF AORTA |
| 3865 | THORACIC VESSEL EXCISION |
| 3866 | ABDOMINAL ARTERY EXCIS |
| 3867 | ABDOMINAL VEIN EXCISION |
| 3868 | LEG ARTERY EXCISION |
| 3869 | LEG VEIN EXCISION |
| 387 | INTERRUPTION VENA CAVA |
| 3880 | SURG VESSEL OCCLUS NEC |
| 3881 | OCCLUS INTRACRAN VES NEC |
| 3882 | OCCLUS HEAD/NECK VES NEC |
| 3883 | OCCLUDE ARM VESSEL NEC |
| 3884 | OCCLUDE AORTA NEC |
| 3885 | OCCLUDE THORACIC VES NEC |
| 3886 | OCCLUDE ABD ARTERY NEC |
| 3887 | OCCLUDE ABD VEIN NEC |
| 3888 | OCCLUDE LEG ARTERY NEC |
| 3889 | OCCLUDE LEG VEIN NEC |
| 390 | SYSTEMIC-PULM ART SHUNT |
| 391 | INTRA-ABD VENOUS SHUNT |
| 3921 | CAVAL-PULMON ART ANASTOM |
| 3922 | AORTA-SUBCLV-CAROT BYPAS |
| 3923 | INTRATHORACIC SHUNT NEC |
| 3924 | AORTA-RENAL BYPASS |
| 3925 | AORTA-ILIAC-FEMOR BYPASS |
| 3926 | INTRA-ABDOMIN SHUNT NEC |
| 3927 | DIALYSIS ARTERIOVENOSTOM |
| 3928 | EXTRACRAN-INTRACR BYPASS |
| 3929 | VASC SHUNT & BYPASS NEC |
| 3930 | SUTURE OF VESSEL NOS |
| 3931 | SUTURE OF ARTERY |
| 3932 | SUTURE OF VEIN |
| 3941 | POSTOP VASC OP HEM CONTR |
| 3942 | REVIS REN DIALYSIS SHUNT |
| 3943 | REMOV REN DIALYSIS SHUNT |
| 3949 | VASC PROC REVISION NEC |
| 3950 | ANGIO/ATH NON-CORO VES |
| 3951 | CLIPPING OF ANEURYSM |
| 3952 | ANEURYSM REPAIR NEC |
| 3953 | ARTERIOVEN FISTULA REP |
| 3954 | RE-ENTRY OPERATION |
| 3955 | REIMPLAN ABERR RENAL VES |
| 3956 | REPAIR VESS W TIS PATCH |
| 3957 | REP VESS W SYNTH PATCH |
| 3958 | REPAIR VESS W PATCH NOS |
| 3959 | REPAIR OF VESSEL NEC |
| 397 | PER CARDIOPULMON BYPASS |
| 3971 | ENDO IMPL GRFT ABD AORTA |
| 3972 | ENDOVASC REPAIR HEAD VES |
| 3973 | ENDO IMP GRFT THOR AORTA OCT05- |
| 3974 | ENDO REM OBS HD/NECK VES |

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| | OCT06- |
| 3979 | ENDO REPAIR OTHER VESSEL |
| 398 | VASCULAR BODY OPERATIONS |
| 3991 | FREEING OF VESSEL |
| 3992 | VEIN INJECT-SCLEROS AGNT |
| 3993 | INSERT VES-TO-VES CANNUL |
| 3994 | REPLAC VES-TO-VES CANNUL |
| 3998 | HEMORRHAGE CONTROL NOS |
| 3999 | VESSEL OPERATION NEC |
| 400 | INCIS LYMPHATIC STRUCTUR |
| 4011 | LYMPHATIC STRUCT BIOPSY |
| 4019 | LYMPHATIC DIAG PROC NEC |
| 4021 | EXCIS DEEP CERVICAL NODE |
| 4022 | EXCISE INT MAMMARY NODE |
| 4023 | EXCISE AXILLARY NODE |
| 4024 | EXCISE INGUINAL NODE |
| 4029 | SIMP EXC LYMPH STRUC NEC |
| 403 | REGIONAL LYMPH NODE EXC |
| 4040 | RAD NECK DISSECTION NOS |
| 4041 | UNILAT RAD NECK DISSECT |
| 4042 | BILAT RAD NECK DISSECT |
| 4050 | RAD NODE DISSECTION NOS |
| 4051 | RAD DISSEC AXILLARY NODE |
| 4052 | RAD DISSEC PERIAORT NODE |
| 4053 | RAD DISSECT ILIAC NODES |
| 4054 | RADICAL GROIN DISSECTION |
| 4059 | RAD NODE DISSECTION NEC |
| 4061 | THORAC DUCT CANNULATION |
| 4062 | THORACIC DUCT FISTULIZAT |
| 4063 | CLOSE THORACIC DUCT FIST |
| 4064 | LIGATE THORACIC DUCT |
| 4069 | THORACIC DUCT OP NEC |
| 409 | LYMPH STRUCTURE OP NEC |
| 410 | BONE MARROW TRNSPLNT |
| 4100 | BONE MARROW TRNSPLNT NOS |
| 4101 | AUTO BONE MT W/O PURG |
| 4102 | ALO BONE MARROW TRNSPLNT |
| 4103 | ALLOGRFT BONE MARROW NOS |
| 4104 | AUTO HEM STEM CT W/O PUR |
| 4105 | ALLO HEM STEM CT W/O PUR |
| 4106 | CORD BLD STEM CELL TRANS |
| 4107 | AUTO HEM STEM CT W PURG |
| 4108 | ALLO HEM STEM CT W PURG |
| 4109 | AUTO BONE MT W PURGING |
| 412 | SPLENOTOMY |
| 4133 | OPEN SPLEEN BIOPSY |
| 4141 | SPLENIC CYST MARSUPIAL |
| 4142 | EXC SPLENIC LESION/TISS |
| 4143 | PARTIAL SPLENECTOMY |
| 415 | TOTAL SPLENECTOMY |
| 4193 | EXC OF ACCESSORY SPLEEN |

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| 4194 | SPLEEN TRANSPLANTATION |
| 4195 | REPAIR OF SPLEEN |
| 4199 | SPLEEN OPERATION NEC |
| 4201 | ESOPHAGEAL WEB INCISION |
| 4209 | ESOPHAGEAL INCISION NEC |
| 4210 | ESOPHAGOSTOMY NOS |
| 4211 | CERVICAL ESOPHAGOSTOMY |
| 4212 | ESOPH POUCH EXTERIORIZAT |
| 4219 | EXT FISTULIZAT ESOPH NEC |
| 4221 | ESOPHAGOSCOPY BY INCIS |
| 4225 | OPEN BIOPSY OF ESOPHAGUS |
| 4231 | LOC EXCIS ESOPH DIVERTIC |
| 4232 | LOCAL EXCIS ESOPHAG NEC |
| 4239 | DESTRUCT ESOPHAG LES NEC |
| 4240 | ESOPHAGECTOMY NOS |
| 4241 | PARTIAL ESOPHAGECTOMY |
| 4242 | TOTAL ESOPHAGECTOMY |
| 4251 | THORAC ESOPHAGUESOPHAGOS |
| 4252 | THORAC ESOPHAGOGASTROST |
| 4253 | THORAC SM BOWEL INTERPOS |
| 4254 | THORAC ESOPHAGOENTER NEC |
| 4255 | THORAC LG BOWEL INTERPOS |
| 4256 | THORAC ESOPHAGOCOLOS NEC |
| 4258 | THORAC INTERPOSITION NEC |
| 4259 | THORAC ESOPHAG ANAST NEC |
| 4261 | STERN ESOPHAGUESOPHAGOST |
| 4262 | STERN ESOPHAGOGASTROSTOM |
| 4263 | STERN SM BOWEL INTERPOS |
| 4264 | STERN ESOPHAGOENTER NEC |
| 4265 | STERN LG BOWEL INTERPOS |
| 4266 | STERN ESOPHAGOCOLOS NEC |
| 4268 | STERN INTERPOSITION NEC |
| 4269 | STERN ESOPHAG ANAST NEC |
| 427 | ESOPHAGOMYOTOMY |
| 4282 | SUTURE ESOPHAGEAL LACER |
| 4283 | ESOPHAGOSTOMY CLOSURE |
| 4284 | ESOPH FISTULA REPAIR NEC |
| 4285 | ESOPHAG STRICTURE REPAIR |
| 4286 | PROD SUBQ TUNNEL NO ANAS |
| 4287 | ESOPHAGEAL GRAFT NEC |
| 4289 | ESOPHAGEAL REPAIR NEC |
| 4291 | LIGATION ESOPH VARIX |
| 430 | GASTROTOMY |
| 431 | GASTROTOMY |
| 432 | OTHER GASTROSTOMY |
| 433 | PYLOROMYOTOMY |
| 4342 | LOCAL GASTR EXCISION NEC |
| 4349 | LOCAL GASTR DESTRUCT NEC |
| 435 | PROXIMAL GASTRECTOMY |
| 436 | DISTAL GASTRECTOMY |
| 437 | PART GASTREC W JEJ ANAST |

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| 4381 | PART GAST W JEJ TRANSPOS |
| 4389 | PARTIAL GASTRECTOMY NEC |
| 4391 | TOT GAST W INTES INTERPO |
| 4399 | TOTAL GASTRECTOMY NEC |
| 4400 | VAGOTOMY NOS |
| 4401 | TRUNCAL VAGOTOMY |
| 4402 | HIGHLY SELECT VAGOTOMY |
| 4403 | SELECTIVE VAGOTOMY NEC |
| 4411 | TRANSABDOMIN GASTROSCOPY |
| 4415 | OPEN GASTRIC BIOPSY |
| 442 | GASTRIC DIAGNOS PROC NEC |
| 4421 | DILATE PYLORUS, INCISION |
| 4429 | OTHER PYLOROPLASTY |
| 4431 | HIGH GASTRIC BYPASS |
| 4432 | PERCU GASTROJEJUNOSTOMY |
| 4438 | LAP GASTROENTEROSTOMY (OCT 04) |
| 4439 | GASTROENTEROSTOMY NEC |
| 4440 | SUTURE PEPTIC ULCER NOS |
| 4441 | SUT GASTRIC ULCER SITE |
| 4442 | SUTURE DUODEN ULCER SITE |
| 445 | REVISION GASTRIC ANASTOM |
| 4461 | SUTURE GASTRIC LACERAT |
| 4463 | CLOSE GASTRIC FISTUL NEC |
| 4464 | GASTROPEXY |
| 4465 | ESOPHAGOGASTROPLASTY |
| 4466 | CREAT ESOPHAGASTR SPHINC |
| 4467 | LAP CREAT ESOPH SPHINCT (OCT 04) |
| 4468 | LAPAROSCOPI GASTROPLSTY (OCT 04) |
| 4469 | GASTRIC REPAIR NEC |
| 4491 | LIGATE GASTRIC VARICES |
| 4492 | INTRAOP GASTRIC MANIPUL |
| 4495 | LAP GASTRIC RESTRICT PROC (OCT 04) |
| 4496 | LAP REV GAST RESTRI PROC (OCT 04) |
| 4497 | LAP REM GAST RESTRICT DEV (OCT 04) |
| 4498 | ADJUST GAST RESTRICT DEV (OCT 04) |
| 4499 | GASTRIC OPERATION NEC |
| 4500 | INTESTINAL INCISION NOS |
| 4501 | DUODENAL INCISION |
| 4502 | SMALL BOWEL INCISION NEC |
| 4503 | LARGE BOWEL INCISION |
| 4511 | TRANSAB SM BOWEL ENDOSC |
| 4515 | OPEN SMALL BOWEL BIOPSY |
| 4521 | TRANSAB LG BOWEL ENDOSC |
| 4526 | OPEN LARGE BOWEL BIOPSY |

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| 4531 | OTH EXCISE DUODENUM LES | 4672 | DUODENAL FISTULA CLOSURE |
| 4532 | DESTRUCT DUODEN LES NEC | 4673 | SMALL BOWEL SUTURE NEC |
| 4533 | LOCAL EXCIS SM BOWEL NEC | 4674 | CLOSE SM BOWEL FIST NEC |
| 4534 | DESTR SM BOWEL LES NEC | 4675 | SUTURE LG BOWEL LACERAT |
| 4541 | EXCISE LG INTESTINE LES | 4676 | CLOSE LG BOWEL FISTULA |
| 4549 | DESTRUC LG BOWEL LES NEC | 4679 | REPAIR OF INTESTINE NEC |
| 4550 | INTEST SEG ISOLAT NOS | 4680 | INTRA-AB BOWEL MANIP NOS |
| 4551 | SM BOWEL SEGMENT ISOLAT | 4681 | INTRA-ABD SM BOWEL MANIP |
| 4552 | LG BOWEL SEGMENT ISOLAT | 4682 | INTRA-ABD LG BOWEL MANIP |
| 4561 | MULT SEG SM BOWEL EXCIS | 4691 | MYOTOMY OF SIGMOID COLON |
| 4562 | PART SM BOWEL RESECT NEC | 4692 | MYOTOMY OF COLON NEC |
| 4563 | TOTAL REMOVAL SM BOWEL | 4693 | REVISE SM BOWEL ANASTOM |
| 4571 | MULT SEG LG BOWEL EXCIS | 4694 | REVISE LG BOWEL ANASTOM |
| 4572 | CECECTOMY | 4697 | TRANSPLANT OF INTESTINE |
| 4573 | RIGHT HEMICOLECTOMY | 4699 | INTESTINAL OP NEC |
| 4574 | TRANSVERSE COLON RESECT | 470 | INTESTINAL OP NEC |
| 4575 | LEFT HEMICOLECTOMY | 4701 | LAP APPENDECTOMY |
| 4576 | SIGMOIDECTOMY | 4709 | OTHER APPENDECTOMY |
| 4579 | PART LG BOWEL EXCIS NEC | 471 | OTHER APPENDECTOMY |
| 458 | TOT INTRA-ABD COLECTOMY | 4711 | LAP INCID APPENDECTOMY |
| 4590 | INTESTINAL ANASTOM NOS | 4719 | OTHER INCID APPENDECTOMY |
| 4591 | SM-TO-SM BOWEL ANASTOM | 472 | DRAIN APPENDICEAL ABSC |
| 4592 | SM BOWEL-RECT STUMP ANAS | 4791 | APPENDICOSTOMY |
| 4593 | SMALL-TO-LARGE BOWEL NEC | 4792 | CLOSE APPENDICEAL FISTUL |
| 4594 | LG-TO-LG BOWEL ANASTOM | 4799 | APPENDICEAL OPS NEC |
| 4595 | ANAL ANASTOMOSIS | 480 | PROCTOTOMY |
| 4601 | SM BOWEL EXTERIORIZATION | 481 | PROCTOSTOMY |
| 4602 | RESECT EXT SEG SM BOWEL | 4821 | TRANSAB PROCTOSIGMOIDOSC |
| 4603 | LG BOWEL EXTERIORIZATION | 4825 | OPEN RECTAL BIOPSY |
| 4604 | RESECT EXT SEG LG BOWEL | 4835 | LOCAL EXCIS RECTAL LES |
| 4610 | COLOSTOMY NOS | 4841 | SOAVE SUBMUC RECT RESECT |
| 4611 | TEMPORARY COLOSTOMY | 4849 | PULL-THRU RECT RESEC NEC |
| 4612 | TEMPORARY COLOSTOMY | 485 | ABD-PERINEAL RECT RESECT |
| 4613 | PERMANENT COLOSTOMY | 4861 | TRANS SAC RECTOSIGMOIDECT |
| 4620 | ILEOSTOMY NOS | 4862 | ANT RECT RESECT W COLOST |
| 4621 | TEMPORARY ILEOSTOMY | 4863 | ANTERIOR RECT RESECT NEC |
| 4622 | CONTINENT ILEOSTOMY | 4864 | POSTERIOR RECT RESECTION |
| 4623 | PERMANENT ILEOSTOMY NEC | 4865 | DUHAMEL RECTAL RESECTION |
| 4640 | INTEST STOMA REVIS NOS | 4866 | DUHAMEL RECTAL RESECTION |
| 4641 | SM BOWEL STOMA REVISION | 4869 | RECTAL RESECTION NEC |
| 4642 | PERICOLOST HERNIA REPAIR | 4871 | SUTURE OF RECTAL LACER |
| 4643 | LG BOWEL STOMA REVIS NEC | 4872 | CLOSURE OF PROCTOSTOMY |
| 4650 | INTEST STOMA CLOSURE NOS | 4873 | CLOSE RECTAL FIST NEC |
| 4651 | SM BOWEL STOMA CLOSURE | 4874 | RECTORECTOSTOMY |
| 4652 | LG BOWEL STOMA CLOSURE | 4875 | ABDOMINAL PROCTOPEXY |
| 4660 | INTESTINAL FIXATION NOS | 4876 | PROCTOPEXY NEC |
| 4661 | SM BOWEL-ABD WALL FIXAT | 4879 | REPAIR OF RECTUM NEC |
| 4662 | SMALL BOWEL FIXATION NEC | 4881 | PERIRECTAL INCISION |
| 4663 | LG BOWEL-ABD WALL FIXAT | 4882 | PERIRECTAL EXCISION |
| 4664 | LARGE BOWEL FIXATION NEC | 4891 | INCIS RECTAL STRICTURE |
| 4671 | DUODENAL LACERAT SUTURE | 4892 | ANORECTAL MYOMECTOMY |

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| 4893 | REPAIR PERIRECT FISTULA |
| 4899 | RECTAL PERIRECT OP NEC |
| 4901 | INCIS PERIANAL ABSCESS |
| 4902 | PERIANAL INCISION NEC |
| 4904 | PERIANAL EXCISION NEC |
| 4911 | ANAL FISTULOTOMY |
| 4912 | ANAL FISTULECTOMY |
| 493 | ANAL/PERIAN DX PROC NEC |
| 4939 | OTHER DESTRUC ANUS LES |
| 4944 | HEMORRHOID CRYOTHERAPY |
| 4945 | HEMORRHOID LIGATION |
| 4946 | HEMORRHOIDECTOMY |
| 4949 | HEMORRHOID PROCEDURE NEC |
| 4951 | LEFT LAT SPHINCTEROTOMY |
| 4952 | POST SPHINCTEROTOMY |
| 4959 | ANAL SPHINCTEROTOMY NEC |
| 496 | EXCISION OF ANUS |
| 4971 | SUTURE ANAL LACERATION |
| 4972 | ANAL CERCLAGE |
| 4973 | CLOSURE OF ANAL FISTULA |
| 4974 | GRACILIS MUSC TRANSPLAN |
| 4975 | IMPL OR REV ART ANAL SPH |
| 4976 | REMOV ART ANAL SPHINCTER |
| 4979 | ANAL SPHINCT REPAIR NEC |
| 4991 | INCISION OF ANAL SEPTUM |
| 4992 | INSERT SUBQ ANAL STIMUL |
| 4993 | ANAL INCISION NEC |
| 4994 | REDUCTION ANAL PROLAPSE |
| 4995 | CONTROL ANAL HEMORRHAGE |
| 4999 | ANAL OPERATION NEC |
| 500 | HEPATOTOMY |
| 5012 | OPEN LIVER BIOPSY |
| 5019 | HEPATIC DX PROC NEC |
| 5021 | MARSUPIALIZAT LIVER LES |
| 5022 | PARTIAL HEPATECTOMY |
| 5023 | OPN ABLTN LIVER LES/TISS OCT06- |
| 5024 | PERC ABLTN LIVER LES/TIS OCT06- |
| 5025 | LAP ABLTN LIVER LES/TISS OCT06- |
| 5026 | ABLTN LIVER LES/TISS NEC OCT06- |
| 5029 | DESTRUC HEPATIC LES NEC |
| 503 | HEPATIC LOBECTOMY |
| 504 | TOTAL HEPATECTOMY |
| 5051 | AUXILIARY LIVER TRANSPL |
| 5059 | LIVER TRANSPLANT NEC |
| 5061 | CLOSURE LIVER LACERAT |
| 5069 | LIVER REPAIR NEC |
| 5102 | TROCAR CHOLECYSTOSTOMY |
| 5103 | CHOLECYSTOSTOMY NEC |
| 5104 | CHOLECYSTOTOMY NEC |

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| 5113 | OPEN BILIARY TRACT BX |
| 5119 | BILIARY TR DX PROC NEC |
| 5121 | OTH PART CHOLECYSTECTOMY |
| 5122 | CHOLECYSTECTOMY |
| 5123 | LAPAROSCOPIC CHOLECYSTEC |
| 5124 | LAP PART CHOLECYSTECTOMY |
| 5131 | GB-TO-HEPAT DUCT ANAST |
| 5132 | GB-TO-INTESTINE ANASTOM |
| 5133 | GB-TO-PANCREAS ANASTOM |
| 5134 | GB-TO-STOMACH ANASTOMOS |
| 5135 | GALLBLADDER ANASTOM NEC |
| 5136 | CHOLEDOCHOENTEROSTOMY |
| 5137 | HEPATIC DUCT-GI ANASTOM |
| 5139 | BILE DUCT ANASTOMOS NEC |
| 5141 | CDE FOR CALCULUS REMOV |
| 5142 | CDE FOR OBSTRUCTION NEC |
| 5143 | CHOLEDOCHOHEPAT INTUBAT |
| 5149 | INCIS OBSTR BILE DUC NEC |
| 5151 | COMMON DUCT EXPLORATION |
| 5159 | BILE DUCT INCISION NEC |
| 5161 | EXCIS CYST DUCT REMNANT |
| 5162 | EXCIS AMPULLA OF VATER |
| 5163 | COMMON DUCT EXCIS NEC |
| 5169 | BILE DUCT EXCISION NEC |
| 5171 | SIMPLE SUT-COMMON DUCT |
| 5172 | CHOLEDOCHOPLASTY |
| 5179 | BILE DUCT REPAIR NEC |
| 5181 | SPHINCTER OF ODDI DILAT |
| 5182 | PANCREAT SPHINCTEROTOM |
| 5183 | PANCREAT SPHINCTEROPLAS |
| 5189 | SPHINCT OF ODDI OP NEC |
| 5191 | REPAIR GB LACERATION |
| 5192 | CLOSURE CHOLECYSTOSTOMY |
| 5193 | CLOS BILIARY FISTUL NEC |
| 5194 | REVIS BILE TRACT ANASTOM |
| 5195 | REMOVE BILE DUCT PROSTH |
| 5199 | BILIARY TRACT OP NEC |
| 5201 | CATH DRAIN-PANCREAT CYST |
| 5209 | PANCREATOTOMY NEC |
| 5212 | OPEN PANCREATIC BIOPSY |
| 5219 | PANCREATIC DX PROC NEC |
| 522 | PANCREATIC DX PROC NEC |
| 5222 | OTHER DESTRU PANCREA LES |
| 523 | PANCREAT CYST MARSUPIALI |
| 524 | INT DRAIN PANCREAT CYST |
| 5251 | PROXIMAL PANCREATECTOMY |
| 5252 | DISTAL PANCREATECTOMY |
| 5253 | RAD SUBTOT PANCREATECTOM |
| 5259 | PARTIAL PANCREATECT NEC |
| 526 | TOTAL PANCREATECTOMY |
| 527 | RAD PANCREATICODUODENECT |

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| 5280 | PANCREAT TRANSPLANT NOS |
| 5281 | REIMPLANT PANCREATIC TIS |
| 5282 | PANCREATIC HOMOTRANSPLAN |
| 5283 | PANCREATIC HETEROTRANSPL |
| 5291 | TRNSPLNT ISLETS LANG NOS |
| 5292 | CANNULATION PANCREA DUC |
| 5295 | PANCREATIC REPAIR NEC |
| 5296 | PANCREATIC ANASTOMOSIS |
| 5299 | PANCREATIC OPERATION NEC |
| 5300 | UNILAT ING HERN REP NOS |
| 5301 | REPAIR DIRECT ING HERNIA |
| 5302 | REPAIR INDIR ING HERNIA |
| 5303 | DIR ING HERNIA REP-GRAFT |
| 5304 | IND ING HERNIA REP-GRAFT |
| 5305 | ING HERNIA REP-GRAFT NOS |
| 5310 | BILAT ING HERNIA REP NOS |
| 5311 | BILAT DIR ING HERN REP |
| 5312 | BILAT IND ING HERN REP |
| 5313 | BIL DIR/IND ING HRN REP |
| 5314 | BIL DIR ING HRN REP-GRFT |
| 5315 | BIL IND ING HRN REP-GRFT |
| 5316 | BIL DIR/IND ING HERN-PRO |
| 5317 | BIL ING HRN REP-GRFT NOS |
| 5321 | UNIL FEMOR HRN REP-GRFT |
| 5329 | UNIL FEMOR HERN REP NEC |
| 5331 | BIL FEM HERN REPAIR-GRFT |
| 5339 | BIL FEM HERN REPAIR NEC |
| 5341 | UMBIL HERNIA REPAIR-GRFT |
| 5349 | UMBIL HERNIA REPAIR NEC |
| 5351 | INCISIONAL HERNIA REPAIR |
| 5359 | ABD WALL HERN REPAIR NEC |
| 5361 | INCIS HERNIA REPAIR-GRFT |
| 5369 | ABD HERN REPAIR-GRFT NEC |
| 537 | ABD REPAIR-DIAPHR HERNIA |
| 5380 | THOR REP-DIAPH HERN NOS |
| 5381 | DIAPHRAGMATIC PLICATION |
| 5382 | PARASTERN HERNIA REPAIR |
| 539 | OTHER HERNIA REPAIR |
| 540 | ABDOMINAL WALL INCISION |
| 5411 | EXPLORATORY LAPAROTOMY |
| 5412 | REOPEN RECENT LAP SITE |
| 5419 | LAPAROTOMY NEC |
| 5421 | LAPAROSCOPY |
| 5422 | ABDOMINAL WALL BIOPSY |
| 5423 | PERITONEAL BIOPSY |
| 5429 | ABD REGION DX PROC NEC |
| 543 | DESTRUCT ABD WALL LESION |
| 544 | DESTRUCT PERITONEAL TISS |
| 545 | DESTRUCT PERITONEAL TISS |
| 5451 | LAP PERITON ADHESIOLYSIS |
| 5459 | OTH PERITON ADHESIOLYSIS |

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| 5461 | RECLOSE POST OP DISRUPT |
| 5462 | DELAYED CLOS ABD WOUND |
| 5463 | ABD WALL SUTURE NEC |
| 5464 | PERITONEAL SUTURE |
| 5471 | REPAIR OF GASTROSCHISIS |
| 5472 | ABDOMEN WALL REPAIR NEC |
| 5473 | PERITONEAL REPAIR NEC |
| 5474 | OMENTAL REPAIR NEC |
| 5475 | MESENTERIC REPAIR NEC |
| 5492 | REMOVE FB FROM PERITON |
| 5493 | CREATE CUTANPERITON FIST |
| 5494 | CREAT PERITONEOVAS SHUNT |
| 5495 | PERITONEAL INCISION |
| 5501 | NEPHROTOMY |
| 5502 | NEPHROSTOMY |
| 5503 | PERCU NEPHROSTM W/O FRAG |
| 5504 | PERCU NEPHROSTMY W FRAG |
| 5511 | PYELOTOMY |
| 5512 | PYELOSTOMY |
| 5524 | OPEN RENAL BIOPSY |
| 5529 | RENAL DIAGNOST PROC NEC |
| 5531 | RENAL LES MARSUPIALIZAT |
| 5532 | OPN ABLTN RENAL LES/TISS OCT06- |
| 5533 | PERC ABLTN RENL LES/TISS OCT06- |
| 5534 | LAP ABLTN RENAL LES/TISS OCT06- |
| 5535 | ABLTN RENAL LES/TISS NEC OCT06- |
| 5539 | LOC DESTR RENAL LES NEC |
| 554 | PARTIAL NEPHRECTOMY |
| 5551 | NEPHROURETERECTOMY |
| 5552 | SOLITARY KIDNEY NEPHRECT |
| 5553 | REJECTED KIDNEY NEPHRECT |
| 5554 | BILATERAL NEPHRECTOMY |
| 5561 | RENAL AUTOTRANSPLANT |
| 5569 | KIDNEY TRANSPLANT NEC |
| 557 | NEPHROPEXY |
| 5581 | SUTURE KIDNEY LACERATION |
| 5582 | CLOSE NEPHROST & PYELOST |
| 5583 | CLOSE RENAL FISTULA NEC |
| 5584 | REDUCE RENAL PEDICL TORS |
| 5585 | SYMPHYSIOTOMY |
| 5586 | RENAL ANASTOMOSIS |
| 5587 | CORRECT URETEROPELV JUNC |
| 5589 | RENAL REPAIR NEC |
| 5591 | RENAL DECAPSULATION |
| 5597 | IMPLANT MECHANIC KIDNEY |
| 5598 | REMOV MECHANICAL KIDNEY |
| 5599 | RENAL OPERATION NEC |

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| 560 | TU REMOV URETER OBSTRUCT |
| 561 | URETERAL MEATOTOMY |
| 562 | URETEROTOMY |
| 5634 | OPEN URETERAL BIOPSY |
| 5639 | URETERAL DX PROCEDUR NEC |
| 5640 | URETERECTOMY NOS |
| 5641 | PARTIAL URETERECTOMY |
| 5642 | TOTAL URETERECTOMY |
| 5651 | FORM CUTAN ILEOURETEROST |
| 5652 | REVIS CUTAN ILEOURETEROS |
| 5661 | FORM CUTAN URETEROSTOMY |
| 5662 | REVIS CUTAN URETEROS NEC |
| 5671 | URIN DIVERSION TO BOWEL |
| 5672 | REVIS URETEROENTEROSTOMY |
| 5673 | NEPHROCYSTANASTOMOSI NOS |
| 5674 | URETERONEOCYSTOSTOMY |
| 5675 | TRANSURETEROURETEROSTOMY |
| 5679 | URETERAL ANASTOMOSIS NEC |
| 5681 | INTRALUM URETE ADHESIOLY |
| 5682 | SUTURE URETERAL LACERAT |
| 5683 | URETEROSTOMY CLOSURE |
| 5684 | CLOSE URETER FISTULA NEC |
| 5685 | URETEROPEXY |
| 5686 | REMOVE URETERAL LIGATURE |
| 5689 | REPAIR OF URETER NEC |
| 5692 | IMPLANT URETERAL STIMUL |
| 5693 | REPLACE URETERAL STIMUL |
| 5694 | REMOVE URETERAL STIMULAT |
| 5695 | LIGATION OF URETER |
| 5699 | URETERAL OPERATION NEC |
| 5712 | CYSTOTOMY & ADHESIOLYSIS |
| 5718 | OTHER SUPRAPU CYSTOSTOMY |
| 5719 | CYSTOTOMY NEC |
| 5721 | VESICOSTOMY |
| 5722 | REVISE CLO VESICOSTOMY |
| 5733 | CLOS TRANSURETH BLADD BX |
| 5734 | OPEN BLADDER BIOPSY |
| 5739 | BLADDER DIAGNOS PROC NEC |
| 5741 | TU ADHESIOLYSIS BLADDER |
| 5749 | TU DESTRUC BLADD LES NEC |
| 5751 | EXCISION OF URACHUS |
| 5759 | BLADDER LES DESTRUCT NEC |
| 576 | PARTIAL CYSTECTOMY |
| 5771 | RADICAL CYSTECTOMY |
| 5779 | TOTAL CYSTECTOMY NEC |
| 5781 | SUTURE BLADDER LACERAT |
| 5782 | CYSTOSTOMY CLOSURE |
| 5783 | ENTEROVESICO FIST REPAIR |
| 5784 | VESIC FISTULA REPAIR NEC |
| 5785 | CYSTOURETHROPLASTY |
| 5786 | BLADDER EXSTROPHY REPAIR |

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| 5787 | BLADDER RECONSTRUCTION |
| 5788 | BLADDER ANASTOMOSIS NEC |
| 5789 | BLADDER REPAIR NEC |
| 5791 | BLADDER SPHINCTEROTOMY |
| 5793 | CONTROL BLADD HEMORRHAGE |
| 5796 | IMPLANT BLADDER STIMULAT |
| 5797 | REPLACE BLADDER STIMULAT |
| 5798 | REMOVE BLADDER STIMULAT |
| 5799 | BLADDER OPERATION NEC |
| 580 | URETHROTOMY |
| 581 | URETHRAL MEATOTOMY |
| 5841 | SUTURE URETHRAL LACERAT |
| 5842 | URETHROSTOMY CLOSURE |
| 5843 | CLOSE URETH FISTULA NEC |
| 5844 | URETHRAL REANASTOMOSIS |
| 5845 | HYPO-EPISPADIUS REPAIR |
| 5846 | URETH RECONSTRUCTION NEC |
| 5847 | URETHRAL MEATOPLASTY |
| 5849 | URETHRAL REPAIR NEC |
| 585 | URETH STRICTURE RELEASE |
| 5891 | PERIURETHRAL INCISION |
| 5892 | PERIURETHRAL EXCISION |
| 5893 | IMPLT ARTF URIN SPHINCT |
| 5899 | URETH/PERIURETH OP NEC |
| 5900 | RETROPERIT DISSECT NOS |
| 5901 | RETROPERIT DISSECT NOS |
| 5902 | PERIREN ADHESIOLYS NEC |
| 5903 | LAP LYS PERIREN/URET ADH |
| 5909 | PERIREN/URETER INCIS NEC |
| 5911 | OTH LYS PERIVES ADHESIO |
| 5912 | LAP LYS PERIVESURETH ADH |
| 5919 | PERIVESICAL INCISION NEC |
| 5921 | PERIREN/URETERAL BIOPSY |
| 5929 | PERIREN/URET DX PROC NEC |
| 593 | URETHROVES JUNCT PPLICAT |
| 594 | SUPRAPUBIC SLING OP |
| 595 | RETROPUBIC URETH SUSPENS |
| 596 | PARAURETHRAL SUSPENSION |
| 5971 | LEVATOR MUSC SUSPENSION |
| 5979 | URIN INCONTIN REPAIR NEC |
| 5991 | PERIREN/VESICLE EXCISION |
| 5992 | PERIREN/VESICLE OP NEC |
| 600 | INCISION OF PROSTATE |
| 6012 | OPEN PROSTATIC BIOPSY |
| 6014 | OPEN SEMINAL VESICLES BX |
| 6015 | PERIPROSTATIC BIOPSY |
| 6018 | PROSTATIC DX PROCED NEC |
| 6019 | SEMIN VES DX PROCED NEC |
| 602 | SEMIN VES DX PROCED NEC |
| 6021 | TRANSURETH PROSTATECTOMY |
| 6029 | OTH TRANSURETH PROSTATEC |

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| 603 | SUPRAPUBIC PROSTATECTOMY |
| 604 | RETROPUBIC PROSTATECTOMY |
| 605 | RADICAL PROSTATECTOMY |
| 6061 | LOS EXCIS PROSTATIC LES |
| 6062 | PERINEAL PROSTATECTOMY |
| 6069 | PROSTATECTOMY NEC |
| 6072 | SEMINAL VESICLE INCISION |
| 6073 | SEMINAL VESICLE EXCISION |
| 6079 | SEMINAL VESICLE OP NEC |
| 6081 | PERIPROSTATIC INCISION |
| 6082 | PERIPROSTATIC EXCISION |
| 6093 | REPAIR OF PROSTATE |
| 6094 | CONTROL PROSTATE HEMORR |
| 6095 | TRANS BAL DIL PROS URETH |
| 6096 | TU DESTR PROSTATE BY MT |
| 6097 | OTH TU DESTR PROS - RT |
| 6099 | PROSTATIC OPERATION NEC |
| 612 | EXCISION OF HYDROCELE |
| 6142 | SCROTAL FISTULA REPAIR |
| 6149 | SCROTUM/TUNIC REPAIR NEC |
| 6192 | EXCISION TUNICA LES NEC |
| 6199 | SCROTUM & TUNICA OP NEC |
| 620 | INCISION OF TESTES |
| 6212 | OPEN TESTICULAR BIOPSY |
| 6219 | TESTES DX PROCEDURE NEC |
| 622 | TESTICULAR LES DESTRUCT |
| 623 | UNILATERAL ORCHIECTOMY |
| 6241 | REMOVE BOTH TESTES |
| 6242 | REMOVE SOLITARY TESTIS |
| 625 | ORCHIOPEXY |
| 6261 | SUTURE TESTICULAR LACER |
| 6269 | TESTICULAR REPAIR NEC |
| 627 | INSERT TESTICULAR PROSTH |
| 6299 | TESTICULAR OPERATION NEC |
| 6309 | SPERMAT CORD/VAS DX NEC |
| 631 | EXC SPERMATIC VARICOCELE |
| 632 | EXCISE EPIDIDYMIS CYST |
| 633 | EXCISE CORD/EPID LES NEC |
| 634 | EPIDIDYMECTOMY |
| 6351 | SUTURE CORD & EPID LACER |
| 6353 | TRANSPLANT SPERMAT CORD |
| 6359 | CORD & EPIDID REPAIR NEC |
| 6381 | SUTURE VAS & EPIDID LAC |
| 6382 | POSTOP VAS RECONSTRUCT |
| 6383 | EPIDIDYMOVASOSTOMY |
| 6385 | REMOV VAS DEFERENS VALVE |
| 6389 | VAS & EPIDIDY REPAIR NEC |
| 6392 | EPIDIDYMYCTOMY |
| 6393 | SPERMATIC CORD INCISION |
| 6394 | SPERM CORD ADHESIOLYSIS |
| 6395 | INSERT VALVE IN VAS DEF |

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| 6399 | CORD/EPID/VAS OPS NEC |
| 640 | CIRCUMCISION |
| 6411 | PENILE BIOPSY |
| 642 | LOCAL EXCIS PENILE LES |
| 643 | AMPUTATION OF PENIS |
| 6441 | SUTURE PENILE LACERATION |
| 6442 | RELEASE OF CHORDEE |
| 6443 | CONSTRUCTION OF PENIS |
| 6444 | RECONSTRUCTION OF PENIS |
| 6445 | REPLANTATION OF PENIS |
| 6449 | PENILE REPAIR NEC |
| 645 | SEX TRANSFORMAT OP NEC |
| 6492 | INCISION OF PENIS |
| 6493 | DIVISION OF PENILE ADHES |
| 6495 | INS NONINFL PENIS PROSTH |
| 6496 | REMOVE INT PENILE PROSTH |
| 6497 | INS INFLATE PENIS PROSTH |
| 6498 | PENILE OPERATION NEC |
| 6499 | MALE GENITAL OP NEC |
| 650 | MALE GENITAL OP NEC |
| 6501 | LAPAROSCOPIC OOPHOROTOMY |
| 6509 | OTHER OOPHOROTOMY |
| 6511 | OVARIAN ASPIRAT BIOPSY |
| 6512 | OVARIAN BIOPSY NEC |
| 6513 | LAP BIOPSY OF OVARY |
| 6514 | OTH LAP DX PROC OVARIES |
| 6519 | OVARIAN DX PROCEDURE NEC |
| 6521 | OVARIAN CYST MARSUPIALIZ |
| 6522 | OVARIAN WEDGE RESECTION |
| 6523 | LAP MARSUP OVARIAN CYST |
| 6524 | LAP WEDGE RESECT OVARY |
| 6525 | OTH LAP LOC EXC DEST OVA |
| 6529 | LOCAL DESTR OVA LES NEC |
| 653 | LOCAL DESTR OVA LES NEC |
| 6531 | LAP UNILAT OOPHORECTOMY |
| 6539 | OTH UNILAT OOPHORECTOMY |
| 654 | OTH UNILAT OOPHORECTOMY |
| 6541 | LAP UNI SALPINGO-OOPHOR |
| 6549 | OTH UNI SALPINGO-OOPHOR |
| 6551 | OTH REMOVE BOTH OVARIES |
| 6552 | OTH REMOVE REMAIN OVARY |
| 6553 | LAP REMOVE BOTH OVARIES |
| 6554 | LAP REMOVE REMAIN OVARY |
| 6561 | OTH REMOVE OVARIES/TUBES |
| 6562 | OTH REMOVE REM OVA/TUBE |
| 6563 | LAP REMOVE OVARIES/TUBES |
| 6564 | LAP REMOVE REM OVA/TUBE |
| 6571 | OTH SIMPLE SUTURE OVARY |
| 6572 | OTH REIMPLANT OF OVARY |
| 6573 | OTH SALPINGO-OOPHOROPLAS |
| 6574 | LAP SIMPLE SUTURE OVARY |

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| 6575 | LAP REIMPLANT OF OVARY |
| 6576 | LAP SALPINGO-OOPHOROPLAS |
| 6579 | REPAIR OF OVARY NEC |
| 658 | REPAIR OF OVARY NEC |
| 6581 | LAP ADHESIOLYS OVA/TUBE |
| 6589 | ADHESIOLYSIS OVARY/TUBE |
| 6591 | ASPIRATION OF OVARY |
| 6592 | TRANSPLANTATION OF OVARY |
| 6593 | MANUAL RUPT OVARIAN CYST |
| 6594 | OVARIAN DENERVATION |
| 6595 | OVARIAN TORSION RELEASE |
| 6599 | OVARIAN OPERATION NEC |
| 660 | OVARIAN OPERATION NEC |
| 6601 | SALPINGOTOMY |
| 6602 | SALPINGOSTOMY |
| 6611 | FALLOPIAN TUBE BIOPSY |
| 6619 | FALLOP TUBE DX PROC NEC |
| 6621 | BILAT ENDOSC CRUSH TUBE |
| 6622 | BILAT ENDOSC DIVIS TUBE |
| 6629 | BILAT ENDOSC OCC TUBE NEC |
| 6631 | BILAT TUBAL CRUSHING NEC |
| 6632 | BILAT TUBAL DIVISION NEC |
| 6639 | BILAT TUBAL DESTRUCT NEC |
| 664 | TOTAL UNILAT SALPINGECT |
| 6651 | REMOVE BOTH FALLOP TUBES |
| 6652 | REMOVE SOLITARY FAL TUBE |
| 6661 | DESTROY FALLOP TUBE LES |
| 6662 | REMOV TUBE & ECTOP PREG |
| 6663 | BILAT PART SALPINGEC NOS |
| 6669 | PARTIAL SALPINGECTOM NEC |
| 6671 | SIMPL SUTURE FALLOP TUBE |
| 6672 | SALPINGO-OOPHOROSTOMY |
| 6673 | SALPINGO-SALPINGOSTOMY |
| 6674 | SALPINGO-UTEROSTOMY |
| 6679 | FALLOP TUBE REPAIR NEC |
| 6692 | UNILAT FALLOP TUBE DESTR |
| 6693 | IMPL FALLOP TUBE PROSTH |
| 6694 | REMOV FALLOP TUBE PROSTH |
| 6695 | BLOW THERAPEUT INTO TUBE |
| 6696 | FALLOPIAN TUBE DILATION |
| 6697 | BURY FIMBRIAE IN UTERUS |
| 6699 | FALLOPIAN TUBE OP NEC |
| 6711 | ENDOCERVICAL BIOPSY |
| 6712 | CERVICAL BIOPSY NEC |
| 6719 | CERVICAL DX PROCEDUR NEC |
| 672 | CONIZATION OF CERVIX |
| 6731 | CERVICAL CYST MARSUPIAL |
| 6732 | CERVICAL LES CAUTERIZAT |
| 6733 | CERVICAL LES CRYOTHERAPY |
| 6739 | CERVICAL LES DESTRUC NEC |
| 674 | AMPUTATION OF CERVIX |

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| 675 | AMPUTATION OF CERVIX |
| 6751 | TRANSAB CERCLAGE CERVIX |
| 6759 | OTH REP INT CERVICAL OS |
| 6761 | SUTURE CERVICAL LACERAT |
| 6762 | CERVICAL FISTULA REPAIR |
| 6769 | CERVICAL REPAIR NEC |
| 680 | HYSTEROTOMY |
| 6813 | OPEN UTERINE BIOPSY |
| 6814 | OPEN UTERINE LIGAMENT BX |
| 6815 | CLOS UTERINE LIGAMENT BX |
| 6816 | CLOSED UTERINE BIOPSY |
| 6819 | UTERUS/ADNEX DX PROC NEC |
| 6821 | ENDOMET SYNECHIAE DIVIS |
| 6822 | INCISION UTERINE SEPTUM |
| 6823 | ENDOMETRIAL ABLATION |
| 6829 | UTERINE LES DESTRUCT NEC |
| 683 | UTERINE LES DESTRUCT NEC |
| 6831 | LAP SCERVIC HYSTERECTOMY |
| 6839 | OTH SUBTOT ABD HYSTERECT OCT03- |
| 684 | TOTAL ABD HYSTERECTOMY |
| 6841 | LAP TOTAL ABDOMINAL HYST OCT06- |
| 6849 | TOTAL ABD HYST NEC/NOS OCT06- |
| 685 | VAGINAL HYSTERECTOMY |
| 6851 | LAP AST VAG HYSTERECTOMY |
| 6859 | VAG HYSTERECTOMY NEC/NOS |
| 686 | RADICAL ABD HYSTERECTOMY |
| 6861 | LAP RADICAL ABDOMNL HYST OCT06- |
| 6869 | RADICAL ABD HYST NEC/NOS OCT06- |
| 687 | RADICAL VAG HYSTERECTOMY |
| 6871 | LAP RADICAL VAGINAL HYST OCT06- |
| 6879 | RADICAL VAG HYST NEC/NOS OCT06- |
| 688 | PELVIC EVISCERATION |
| 689 | HYSTERECTOMY NEC/NOS |
| 6901 | D & C FOR PREG TERMINAT |
| 6902 | D & C POST DELIVERY |
| 6909 | D & C NEC |
| 6911 | D & C NEC |
| 6919 | DESTRUC UTER SUPPORT NEC |
| 6921 | INTERPOSIT OP UTERIN LIG |
| 6922 | UTERINE SUSPENSION NEC |
| 6923 | VAG REPAIR INVERS UTERUS |
| 6929 | UTERUS/ADNEXA REPAIR NEC |
| 693 | PARACERV UTERINE DENERV |
| 6941 | SUTURE UTERINE LACERAT |
| 6942 | CLOSURE UTERINE FISTULA |

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| 6949 | UTERINE REPAIR NEC | 7394 | PUBIOTOMY TO ASSIST DEL |
| 6951 | ASPIRAT CURET-PREG TERMI | 7399 | OPS ASSISTING DELIV NEC |
| 6952 | ASPIRAT CURET-POST DELIV | 740 | CLASSICAL C-SECTION |
| 6995 | INCISION OF CERVIX | 741 | LOW CERVICAL C-SECTION |
| 6997 | REMOVE PENETRAT CERV FB | 742 | EXTRAPERITONEAL C-SECT |
| 6998 | UTERINE SUPPORT OP NEC | 743 | REM EXTRATUB ECTOP PREG |
| 6999 | UTERINE OPERATION NEC | 744 | CESAREAN SECTION NEC |
| 7012 | CULDOTOMY | 7491 | HYSTEROTOMY TO TERMIN PG |
| 7013 | INTRALUM VAG ADHESIOLYS | 7499 | CESAREAN SECTION NOS |
| 7014 | VAGINOTOMY NEC | 7536 | CORRECTION FETAL DEFECT |
| 7023 | CUL-DE-SAC BIOPSY | 7550 | REPAIR OB LAC UTERUS NOS |
| 7024 | VAGINAL BIOPSY | 7551 | REPAIR OB LACERAT CERVIX |
| 7029 | VAGIN/CUL-DE-SAC DX NEC | 7552 | REPAIR OB LAC CORP UTERI |
| 7031 | HYMENECTOMY | 7561 | REPAIR OB LAC BLAD/URETH |
| 7032 | EXCIS CUL-DE-SAC LESION | 7593 | SURG CORR INVERT UTERUS |
| 7033 | EXCISION VAGINAL LESION | 7599 | OBSTETRIC OPERATION NEC |
| 704 | VAGINAL OBLITERATION | 7601 | FACIAL BONE SEQUESTRECT |
| 7050 | CYSTOCEL/RECTOCEL REPAIR | 7609 | FACIAL BONE INCISION NEC |
| 7051 | CYSTOCELE REPAIR | 7611 | FACIAL BONE BIOPSY |
| 7052 | RECTOCELE REPAIR | 7619 | FACIAL BONE DX PROC NEC |
| 7061 | VAGINAL CONSTRUCTION | 762 | DESTRUCT FACIAL BONE LES |
| 7062 | VAGINAL RECONSTRUCTION | 7631 | PARTIAL MANDIBULECTOMY |
| 7071 | SUTURE VAGINA LACERATION | 7639 | PART FACIAL OSTECTOM NEC |
| 7072 | REPAIR COLOVAGIN FISTULA | 7641 | TOT MANDIBULEC W RECONST |
| 7073 | REPAIR RECTOVAG FISTULA | 7642 | TOTAL MANDIBULECTOMY NEC |
| 7074 | REP VAGINOENT FISTUL NEC | 7643 | MANDIBULAR RECONST NEC |
| 7075 | REPAIR VAG FISTULA NEC | 7644 | TOT FACE OSTECT W RECONS |
| 7076 | HYMENORRHAPHY | 7645 | TOT FACE BONE OSTECT NEC |
| 7077 | VAGINAL SUSPENS & FIXAT | 7646 | FACIAL BONE RECONSTR NEC |
| 7079 | VAGINAL REPAIR NEC | 765 | TEMPOROMAND ARTHROPLASTY |
| 708 | VAGINAL VAULT OBLITERAT | 7661 | CL OSTEOPLASTY MAND RAMI |
| 7091 | VAGINAL OPERATION NEC | 7662 | OPEN OSTEOPLAS MAND RAMI |
| 7092 | CUL-DE-SAC OPERATION NEC | 7663 | OSTEOPLASTY MANDIBLE BDY |
| 7101 | VULVAR ADHESIOLYSIS | 7664 | MAND ORTHOGNATHIC OP NEC |
| 7109 | INCIS VULVA/PERINEUM NEC | 7665 | SEG OSTEOPLASTY MAXILLA |
| 7111 | VULVAR BIOPSY | 7666 | TOT OSTEOPLASTY MAXILLA |
| 7119 | VULVAR DIAGNOS PROC NEC | 7667 | REDUCTION GENIOPLASTY |
| 7122 | INCISE BARTHOLIN'S GLAND | 7668 | AUGMENTATION GENIOPLASTY |
| 7123 | BARTHOLIN GLAND MARSUP | 7669 | FACIAL BONE REPAIR NEC |
| 7124 | DESTRUC BARTHOLIN GLAND | 7670 | REDUCTION FACIAL FX NOS |
| 7129 | BARTHOLIN'S GLAND OP NEC | 7672 | OPN REDUCT MALAR/ZYGO FX |
| 713 | LOCAL VULVAR EXCIS NEC | 7674 | OPEN REDUCT MAXILLARY FX |
| 714 | OPERATIONS ON CLITORIS | 7676 | OPEN REDUCT MANDIBLE FX |
| 715 | RADICAL VULVECTOMY | 7677 | OPEN REDUCT ALVEOLAR FX |
| 7161 | UNILATERAL VULVECTOMY | 7679 | OPEN REDUCT FACE FX NEC |
| 7162 | BILATERAL VULVECTOMY | 7691 | BONE GRAFT TO FACE BONE |
| 7171 | SUTURE VULVAR LACERATION | 7692 | SYN IMPLANT TO FACE BONE |
| 7172 | REPAIR VULVAR FISTULA | 7694 | OPEN REDUCT TM DISLOCAT |
| 7179 | VULVAR/PERIN REPAIR NEC | 7697 | REMOVE INT FIX FACE BONE |
| 718 | OTHER VULVAR OPERATIONS | 7699 | FACIAL BONE/JNT OP NEC |
| 719 | OTHER FEMALE GENITAL OPS | 7700 | SEQUESTRECTOMY NOS |

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| 7701 | CHEST CAGE SEQUESTREC |
| 7702 | HUMERUS SEQUESTRECTOMY |
| 7703 | RADIUS & ULNA SEQUESTREC |
| 7704 | METACARP/CARP SEQUESTREC |
| 7705 | FEMORAL SEQUESTRECTOMY |
| 7706 | PATELLAR SEQUESTRECTOMY |
| 7707 | TIBIA/FIBULA SEQUESTREC |
| 7708 | METATAR/TAR SEQUESTREC |
| 7709 | SEQUESTRECTOMY NEC |
| 7710 | OTHER BONE INCISION NOS |
| 7711 | OTHER CHEST CAGE INCIS |
| 7712 | OTHER HUMERUS INCISION |
| 7713 | OTHER RADIUS/ULNA INCIS |
| 7714 | OTH METACARP/CARP INCIS |
| 7715 | OTHER FEMORAL INCISION |
| 7716 | OTHER PATELLAR INCISION |
| 7717 | OTHER TIBIA/FIBULA INCIS |
| 7718 | OTH METATARS/TARS INCIS |
| 7719 | BONE INCIS W/O DIV NEC |
| 7720 | WEDGE OSTEOTOMY NOS |
| 7721 | CHEST CAGE WEDG OSTEOTOM |
| 7722 | HUMERUS WEDGE OSTEOTOMY |
| 7723 | RADIUS/ULNA WEDG OSTEOTO |
| 7724 | METACAR/CAR WEDG OSTEOTO |
| 7725 | FEMORAL WEDGE OSTEOTOMY |
| 7726 | PATELLAR WEDGE OSTEOTOMY |
| 7727 | TIBIA/FIBUL WEDG OSTEOT |
| 7728 | METATAR/TAR WEDG OSTEOT |
| 7729 | WEDGE OSTEOTOMY NEC |
| 7730 | OTHER BONE DIVISION NOS |
| 7731 | CHEST CAGE BONE DIV NEC |
| 7732 | HUMERUS DIVISION NEC |
| 7733 | RADIUS/ULNA DIVISION NEC |
| 7734 | METACAR/CAR DIVISION NEC |
| 7735 | FEMORAL DIVISION NEC |
| 7736 | PATELLAR DIVISION NEC |
| 7737 | TIBIA/FIBULA DIV NEC |
| 7738 | METATAR/TAR DIVISION NEC |
| 7739 | BONE DIVISION NEC |
| 7740 | BONE BIOPSY NOS |
| 7741 | CHEST CAGE BONE BIOPSY |
| 7742 | HUMERUS BIOPSY |
| 7743 | RADIUS & ULNA BIOPSY |
| 7744 | METACARPAL/CARPAL BIOPSY |
| 7745 | FEMORAL BIOPSY |
| 7746 | PATELLAR BIOPSY |
| 7747 | TIBIA & FIBULA BIOPSY |
| 7748 | METATARSAL/TARSAL BIOPSY |
| 7749 | BONE BIOPSY NEC |
| 7751 | BUNIONECT/SFT/OSTEOTOMY |
| 7752 | BUNIONECT/SFT/ARTHRODES |

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| 7753 | OTH BUNIONECT W SFT CORR |
| 7754 | EXC CORRECT BUNIONETTE |
| 7756 | REPAIR OF HAMMER TOE |
| 7757 | REPAIR OF CLAW TOE |
| 7758 | OTH EXC, FUS, REPAIR TOE |
| 7759 | BUNIONECTOMY NEC |
| 7760 | LOC EXC BONE LESION NOS |
| 7761 | EXC CHEST CAGE BONE LES |
| 7762 | LOC EXC BONE LES HUMERUS |
| 7763 | LOC EXC LES RADIUS/ULNA |
| 7764 | LOC EXC LES METACAR/CAR |
| 7765 | LOC EXC BONE LES FEMUR |
| 7766 | LOC EXC BONE LES PATELLA |
| 7767 | LOC EXC LES TIBIA/FIBULA |
| 7768 | LOC EXC LES METATAR/TAR |
| 7769 | LOC EXC BONE LESION NEC |
| 7770 | EXCISE BONE FOR GRFT NOS |
| 7771 | EX CHEST CAGE BONE-GFT |
| 7772 | EXCISE HUMERUS FOR GRAFT |
| 7773 | EXCIS RADIUS/ULNA-GRAFT |
| 7774 | EXCIS METACAR/CAR-GRAFT |
| 7775 | EXCISE FEMUR FOR GRAFT |
| 7776 | EXCISE PATELLA FOR GRAFT |
| 7777 | EXCISE TIB/FIB FOR GRAFT |
| 7778 | EXCIS METATAR/TAR-GRAFT |
| 7779 | EXCISE BONE FOR GFT NEC |
| 7780 | OTH PART OSTECTOMY NOS |
| 7781 | OTH CHEST CAGE OSTECTOMY |
| 7782 | PARTIAL HUMERECTOMY NEC |
| 7783 | PART OSTECT-RADIUS/ULNA |
| 7784 | PART OSTECT-METACAR/CAR |
| 7785 | PART OSTECTOMY-FEMUR |
| 7786 | PARTIAL PATELLECTOMY |
| 7787 | PART OSTECT-TIBIA/FIBULA |
| 7788 | PART OSTECT-METATAR/TAR |
| 7789 | PARTIAL OSTECTOMY NEC |
| 7790 | TOTAL OSTECTOMY NOS |
| 7791 | TOT CHEST CAGE OSTECTOMY |
| 7792 | TOTAL OSTECTOMY-HUMERUS |
| 7793 | TOT OSTECT-RADIUS/ULNA |
| 7794 | TOT OSTECT-METACARP/CARP |
| 7795 | TOT OSTECTOMY-FEMUR |
| 7796 | TOTAL PATELLECTOMY |
| 7797 | TOT OSTECT-TIBIA/FIBULA |
| 7798 | TOT OSTECT-METATARS/TARS |
| 7799 | TOTAL OSTECTOMY NEC |
| 7800 | BONE GRAFT NOS |
| 7801 | BONE GRAFT TO CHEST CAGE |
| 7802 | BONE GRAFT TO HUMERUS |
| 7803 | BONE GRAFT-RADIUS/ULNA |
| 7804 | BONE GRFT TO METACAR/CAR |

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| 7805 | BONE GRAFT TO FEMUR | 7859 | INT FIX-NO FX REDUCT NEC |
| 7806 | BONE GRAFT TO PATELLA | 7860 | REMOVE IMP DEVICE NOS |
| 7807 | BONE GRAFT-TIBIA/FIBULA | 7861 | REMOV IMP DEV-CHEST CAGE |
| 7808 | BONE GRAFT-METATAR/TAR | 7862 | REMOVE IMPL DEV-HUMERUS |
| 7809 | BONE GRAFT NEC | 7863 | REMOV IMP DEV-RADIUS/ULN |
| 7810 | APPLIC EXT FIX DEV NOS | 7864 | REMOV IMP DEV-METAC/CARP |
| 7811 | APPL EXT FIX-CHEST CAGE | 7865 | REMOVE IMP DEVICE-FEMUR |
| 7812 | APPLIC EXT FIX-HUMERUS | 7866 | REMOV IMP DEVICE-PATELLA |
| 7813 | APPL EXT FIX-RADIUS/ULNA | 7867 | REMOV IMP DEV-TIB/FIBULA |
| 7814 | APPL EXT FIX-METACAR/CAR | 7868 | REMOVE IMP DEV-METAT/TAR |
| 7815 | APPLIC EXT FIX DEV-FEMUR | 7869 | REMOVE IMPL DEVICE NEC |
| 7816 | APPL EXT FIX DEV-PATELLA | 7870 | OSTEOCLASIS NOS |
| 7817 | APPL EXT FIX-TIB/FIBULA | 7871 | OSTEOCLASIS-CHEST CAGE |
| 7818 | APPL EXT FIX-METATAR/TAR | 7872 | OSTEOCLASIS-HUMERUS |
| 7819 | APPLIC EXT FIX DEV NEC | 7873 | OSTEOCLASIS-RADIUS/ULNA |
| 7820 | LIMB SHORTEN PROC NOS | 7874 | OSTEOCLASIS-METACAR/CAR |
| 7822 | LIMB SHORT PROC-HUMERUS | 7875 | OSTEOCLASIS-FEMUR |
| 7823 | LIMB SHORTEN-RADIUS/ULNA | 7876 | OSTEOCLASIS-PATELLA |
| 7824 | LIMB SHORTEN-METACAR/CAR | 7877 | OSTEOCLASIS-TIBIA/FIBULA |
| 7825 | LIMB SHORT PROC-FEMUR | 7878 | OSTEOCLASIS-METATAR/TAR |
| 7827 | LIMB SHORTEN-TIB/FIBULA | 7879 | OSTEOCLASIS NEC |
| 7828 | LIMB SHORTEN-METATAR/TAR | 7880 | OTHER BONE DX PROC NOS |
| 7829 | LIMB SHORTEN PROC NEC | 7881 | OTH DX PROCED-CHEST CAGE |
| 7830 | LIMB LENGTHEN PROC NOS | 7882 | OTH DX PROCED-HUMERUS |
| 7831 | LIMB LENGTHEN PROC NOS | 7883 | OTH DX PROC-RADIUS/ULNA |
| 7832 | LIMB LENGTH PROC-HUMERUS | 7884 | OTH DX PROC-METACAR/CAR |
| 7833 | LIMB LENGTH-RADIUS/ULNA | 7885 | OTH DX PROCED-FEMUR |
| 7834 | LIMB LENGTH-METACAR/CAR | 7886 | OTH DX PROCED-PATELLA |
| 7835 | LIMB LENGTH PROC-FEMUR | 7887 | OTH DX PROC-TIBIA/FIBULA |
| 7837 | LIMB LENGTHEN-TIB/FIBULA | 7888 | OTH DX PROC-METATAR/TAR |
| 7838 | LIMB LENGTHN-METATAR/TAR | 7889 | OTHER BONE DX PROC NEC |
| 7839 | LIMB LENGTHEN PROC NEC | 7890 | INSERT BONE STIMUL NOS |
| 7840 | OTH BONE REPAIR/PLAST OP | 7891 | INSERT BONE STIMUL-CHEST |
| 7841 | OTH CHEST CAGE REP/PLAST | 7892 | INSERT BONE STIM-HUMERUS |
| 7842 | OTH HUMERUS REPAIR/PLAST | 7893 | INSER BONE STIM-RAD/ULNA |
| 7843 | OTH RAD/ULN REPAIR/PLAST | 7894 | INSER BONE STIM-META/CAR |
| 7844 | OTH METAC/CARP REP/PLAST | 7895 | INSERT BONE STIM-FEMUR |
| 7845 | OTH FEMUR REPAIR/PLASTIC | 7896 | INSERT BONE STIM-PATELLA |
| 7846 | OTH PATELLA REPAIR/PLAST | 7897 | INSER BONE STIM-TIB/FIB |
| 7847 | OTH TIB/FIB REPAIR/PLAST | 7898 | INSER BONE STIM-META/TAR |
| 7848 | OTH META/TAR REPA/PLAST | 7899 | INSERT BONE STIMUL NEC |
| 7849 | OTH BONE REPA/PLAST NEC | 7910 | CL FX REDUC-INT FIX NOS |
| 7850 | INT FIX W/O FX REDUC NOS | 7911 | CLOS RED-INT FIX HUMERUS |
| 7851 | INT FIXATION-CHEST CAGE | 7912 | CL RED-INT FIX RAD/ULNA |
| 7852 | INT FIXATION-HUMERUS | 7913 | CL RED-INT FIX METAC/CAR |
| 7853 | INT FIXATION-RADIUS/ULNA | 7914 | CLOSE RED-INT FIX FINGER |
| 7854 | INT FIXATION-METACAR/CAR | 7915 | CLOSED RED-INT FIX FEMUR |
| 7855 | INTERNAL FIXATION-FEMUR | 7916 | CL RED-INT FIX TIB/FIBU |
| 7856 | INTERNAL FIX-PATELLA | 7917 | CL RED-INT FIX METAT/TAR |
| 7857 | INT FIXATION-TIBIA/FIBUL | 7918 | CLOSE RED-INT FIX TOE FX |
| 7858 | INT FIXATION-METATAR/TAR | 7919 | CL FX REDUC-INT FIX NEC |

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| 7920 | OPEN FX REDUCTION NOS |
| 7921 | OPEN REDUC-HUMERUS FX |
| 7922 | OPEN REDUC-RADIUS/ULN FX |
| 7923 | OPEN REDUC-METAC/CAR FX |
| 7924 | OPEN REDUCTION-FINGER FX |
| 7925 | OPEN REDUCTION-FEMUR FX |
| 7926 | OPEN REDUC-TIBIA/FIB FX |
| 7927 | OPEN REDUC-METAT/TARS FX |
| 7928 | OPEN REDUCTION-TOE FX |
| 7929 | OPEN FX REDUCTION NEC |
| 7930 | OPN FX RED W INT FIX NOS |
| 7931 | OPEN RED-INT FIX HUMERUS |
| 7932 | OP RED-INT FIX RAD/ULNA |
| 7933 | OP RED-INT FIX METAC/CAR |
| 7934 | OPEN RED-INT FIX FINGER |
| 7935 | OPEN REDUC-INT FIX FEMUR |
| 7936 | OP RED-INT FIX TIB/FIBUL |
| 7937 | OP RED-INT FIX METAT/TAR |
| 7938 | OPEN REDUCT-INT FIX TOE |
| 7939 | OPN FX RED W INT FIX NEC |
| 7940 | CLS REDUC-SEP EPIPHY NOS |
| 7941 | CLOSE RED-HUMERUS EPIPHY |
| 7942 | CLS RED-RADIUS/UL EPIPHY |
| 7945 | CLOSE REDUC-FEMUR EPIPHY |
| 7946 | CLS RED-TIBIA/FIB EPIPHY |
| 7949 | CLS REDUC-SEP EPIPHY NEC |
| 7950 | OPEN RED-SEP EPIPHY NOS |
| 7951 | OPN RED-SEP EPIPHY-HUMER |
| 7952 | OP RED-RADIUS/ULN EPIPHY |
| 7955 | OPN RED-SEP EPIPHY-FEMUR |
| 7956 | OP RED-TIBIA/FIB EPIPHYS |
| 7959 | OPEN RED-SEP EPIPHY NEC |
| 7960 | OPEN FX SITE DEBRIDE NOS |
| 7961 | DEBRID OPEN FX-HUMERUS |
| 7962 | DEBRID OPN FX-RADIUS/ULN |
| 7963 | DEBRID OPN FX-METAC/CAR |
| 7964 | DEBRID OPN FX-FINGER |
| 7965 | DEBRID OPN FX-FEMUR |
| 7966 | DEBRID OPN FX-TIBIA/FIB |
| 7967 | DEBRID OPN FX-METAT/TAR |
| 7968 | DEBRID OPN FX-TOE |
| 7969 | OPEN FX SITE DEBRIDE NEC |
| 7980 | OPEN REDUC-DISLOCAT NOS |
| 7981 | OPN REDUC DISLOC-SHOULDR |
| 7982 | OPEN REDUC-ELBOW DISLOC |
| 7983 | OPEN REDUC-WRIST DISLOC |
| 7984 | OPN REDUC DISLOC-HAND |
| 7985 | OPEN REDUC-HIP DISLOCAT |
| 7986 | OPEN REDUC-KNEE DISLOCAT |
| 7987 | OPEN REDUC-ANKLE DISLOC |
| 7988 | OPN REDUC DISLOC-FT/TOE |

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| 7989 | OPEN REDUC-DISLOCAT NEC |
| 7990 | UNSPEC OP BONE INJ NOS |
| 7991 | HUMERUS INJURY OP NOS |
| 7992 | RADIUS/ULNA INJ OP NOS |
| 7993 | METACARP/CARP INJ OP NOS |
| 7994 | FINGER INJURY OP NOS |
| 7995 | FEMUR INJURY OP NOS |
| 7996 | TIBIA/FIBULA INJ OP NOS |
| 7997 | METATARS/TARS INJ OP NOS |
| 7998 | TOE INJURY OPERATION NOS |
| 7999 | UNSPEC OP-BONE INJ NEC |
| 8000 | ARTHROT & PROS REMOV NOS |
| 8001 | ARTHROT/PROS REMOV-SHLDR |
| 8002 | ARTHROT/PROS REMOV-ELBOW |
| 8003 | ARTHROT/PROS REMOV-WRIST |
| 8004 | ARTHROT/PROS REMOV-HAND |
| 8005 | ARTHROT/PROS REMOV-HIP |
| 8006 | ARTHROT/PROS REMOV-KNEE |
| 8007 | ARTHROT/PROS REMOV-ANKLE |
| 8008 | ARTHROT/PROS REMOV-FOOT |
| 8009 | ARTHROT & PROS REMOV NEC |
| 8010 | OTHER ARTHROTOMY NOS |
| 8011 | OTH ARTHROTOMY-SHOULDER |
| 8012 | OTH ARTHROTOMY-ELBOW |
| 8013 | OTH ARTHROTOMY-WRIST |
| 8014 | OTH ARTHROTOMY-HAND/FNGR |
| 8015 | OTH ARTHROTOMY-HIP |
| 8016 | OTH ARTHROTOMY-KNEE |
| 8017 | OTH ARTHROTOMY-ANKLE |
| 8018 | OTH ARTHROTOMY-FOOT/TOE |
| 8019 | OTHER ARTHROTOMY NEC |
| 8020 | ARTHROSCOPY NOS |
| 8021 | SHOULDER ARTHROSCOPY |
| 8022 | ELBOW ARTHROSCOPY |
| 8023 | WRIST ARTHROSCOPY |
| 8024 | HAND & FINGER ARTHROSCOP |
| 8025 | HIP ARTHROSCOPY |
| 8026 | KNEE ARTHROSCOPY |
| 8027 | ANKLE ARTHROSCOPY |
| 8028 | FOOT & TOE ARTHROSCOPY |
| 8029 | ARTHROSCOPY NEC |
| 8040 | JT STRUCTUR DIVISION NOS |
| 8041 | SHOULDER STRUCT DIVISION |
| 8042 | ELBOW STRUCTURE DIVISION |
| 8043 | WRIST STRUCTURE DIVISION |
| 8044 | HAND JOINT STRUCT DIVIS |
| 8045 | HIP STRUCTURE DIVISION |
| 8046 | KNEE STRUCTURE DIVISION |
| 8047 | ANKLE STRUCTURE DIVISION |
| 8048 | FOOT JOINT STRUCT DIVIS |
| 8049 | JT STRUCTUR DIVISION NEC |

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| 805 | JT STRUCTUR DIVISION NEC | 8117 | OTHER FUSION OF FOOT |
| 8050 | EXC/DEST INTVRT DISC NOS | 8118 | OTHER FUSION OF FOOT |
| 8051 | EXCISION INTERVERT DISC | 8120 | ARTHRODESIS NOS |
| 8059 | OTH EXC/DEST INTVRT DISC | 8121 | ARTHRODESIS OF HIP |
| 806 | EXCIS KNEE SEMILUN CARTL | 8122 | ARTHRODESIS OF KNEE |
| 8070 | SYNOVECTOMY-SITE NOS | 8123 | ARTHRODESIS OF SHOULDER |
| 8071 | SHOULDER SYNOVECTOMY | 8124 | ARTHRODESIS OF ELBOW |
| 8072 | ELBOW SYNOVECTOMY | 8125 | CARPORADIAL FUSION |
| 8073 | WRIST SYNOVECTOMY | 8126 | METACARPOCARPAL FUSION |
| 8074 | HAND SYNOVECTOMY | 8127 | METACARPOPHALANGEAL FUS |
| 8075 | HIP SYNOVECTOMY | 8128 | INTERPHALANGEAL FUSION |
| 8076 | KNEE SYNOVECTOMY | 8129 | ARTHRODESIS NEC |
| 8077 | ANKLE SYNOVECTOMY | 8130 | SPINAL REFUSION NOS |
| 8078 | FOOT SYNOVECTOMY | 8131 | REFUSION OF ATLAS-AXIS |
| 8079 | SYNOVECTOMY-SITE NEC | 8132 | REFUSION OF OTH CERV ANT |
| 8080 | DESTRUCT JOINT LES NOS | 8133 | REFUS OF OTH CERV POST |
| 8081 | DESTRUC-SHOULDER LES NEC | 8134 | REFUSION OF DORSAL ANT |
| 8082 | DESTRUC-ELBOW LESION NEC | 8135 | REFUSION OF DORSAL POST |
| 8083 | DESTRUC-WRIST LESION NEC | 8136 | REFUSION OF LUMBAR ANT |
| 8084 | DESTRUC-HAND JT LES NEC | 8137 | REFUSION OF LUMBAR LAT |
| 8085 | DESTRUCT-HIP LESION NEC | 8138 | REFUSION OF LUMBAR POST |
| 8086 | DESTRUCT-KNEE LESION NEC | 8139 | REFUSION OF SPINE NEC |
| 8087 | DESTRUC-ANKLE LESION NEC | 8140 | REPAIR OF HIP, NEC |
| 8088 | DESTRUC-FOOT JT LES NEC | 8141 | REPAIR OF HIP, NEC |
| 8089 | DESTRUCT JOINT LES NEC | 8142 | FIVE-IN-ONE KNEE REPAIR |
| 8090 | EXCISION OF JOINT NOS | 8143 | TRIAD KNEE REPAIR |
| 8091 | EXCISION OF SHOULDER NEC | 8144 | PATELLAR STABILIZATION |
| 8092 | EXCISION OF ELBOW NEC | 8145 | CRUCIATE LIG REPAIR NEC |
| 8093 | EXCISION OF WRIST NEC | 8146 | COLLATERL LIG REPAIR NEC |
| 8094 | EXCISION HAND JOINT NEC | 8147 | OTHER REPAIR OF KNEE |
| 8095 | EXCISION OF HIP NEC | 8148 | OTHER REPAIR OF KNEE |
| 8096 | EXCISION OF KNEE NEC | 8149 | OTHER REPAIR OF ANKLE |
| 8097 | EXCISION OF ANKLE NEC | 8151 | TOTAL HIP REPLACEMENT |
| 8098 | EXCISION FOOT JOINT NEC | 8152 | PARTIAL HIP REPLACEMENT |
| 8099 | EXCISION OF JOINT NEC | 8153 | REVISE HIP REPLACEMENT |
| 8100 | SPINAL FUSION NOS | 8154 | TOTAL KNEE REPLACEMENT |
| 8101 | ATLAS-AXIS FUSION | 8155 | REVISE KNEE REPLACEMENT |
| 8102 | OTHER CERVICAL FUS ANT | 8156 | TOTAL ANKLE REPLACEMENT |
| 8103 | OTHER CERVICAL FUS POST | 8157 | REPL JOINT OF FOOT, TOE |
| 8104 | DORSAL/DORSOLUM FUS ANT | 8159 | REV JT REPL LOW EXT NEC |
| 8105 | DORSAL/DORSOLUM FUS POST | 8161 | 360 SPINAL FUSION |
| 8106 | LUMBAR/LUMBOSAC FUS ANT | 8162 | FUS/REFUS 2-3 VERTEBRAE |
| 8107 | LUMBAR/LUMBOSAC FUS LAT | 8163 | FUS/REFUS 4-8 VERTEBRAE |
| 8108 | LUMBAR/LUMBOSAC FUS POST | 8164 | FUS/REFUS 9 VERTEBRAE |
| 8109 | LUMBAR/LUMBOSAC FUS POST | 8165 | VERTEBROPLASTY (OCT 04) |
| 8111 | ANKLE FUSION | 8166 | KYPHOPLASTY (OCT 04) |
| 8112 | TRIPLE ARTHRODESIS | 8169 | OTH HIP REPAIR JAN80--SEP89 OCT05- |
| 8113 | SUBTALAR FUSION | 8171 | ARTHROPLAS METACARP WIT |
| 8114 | MIDTARSAL FUSION | 8172 | ARTHROPLASTY METACAR W/O |
| 8115 | TARSOMETATARSAL FUSION | 8173 | TOTAL WRIST REPLACEMENT |
| 8116 | METATARSOPHALANGEAL FUS | | |

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| 8174 | ARTHROPLASTY CARPAL WIT |
| 8175 | ARTHROPLASTY CARPAL W/O |
| 8179 | OTH REPAIR HAN/FIN/WRIS |
| 8180 | TOTAL SHOULDER REPLACE |
| 8181 | PARTIAL SHOULDER REPLACE |
| 8182 | REP RECUR SHLDER DISLOC |
| 8183 | SHOULDER ARTHROPLAST NEC |
| 8184 | TOTAL ELBOW REPLACEMENT |
| 8185 | ELBOW ARTHROPLASTY NEC |
| 8186 | ELBOW ARTHROPLASTY NEC |
| 8187 | ELBOW ARTHROPLASTY NEC |
| 8193 | SUTUR CAPSUL/LIGAMEN ARM |
| 8194 | SUTURE CAPSUL/LIG ANK/FT |
| 8195 | SUTUR CAPSUL/LIG LEG NEC |
| 8196 | OTHER REPAIR OF JOINT |
| 8197 | REV JT REPL UPPER EXTREM |
| 8198 | OTHER JOINT DX PROCEDURE |
| 8199 | JOINT STRUCTURE OP NEC |
| 8201 | EXPLOR TEND SHEATH-HAND |
| 8202 | MYOTOMY OF HAND |
| 8203 | BURSOTOMY OF HAND |
| 8209 | INC SOFT TISSUE HAND NEC |
| 8211 | TENOTOMY OF HAND |
| 8212 | FASCIOTOMY OF HAND |
| 8219 | DIV SOFT TISSUE HAND NEC |
| 8221 | EXC LES TEND SHEATH HAND |
| 8222 | EXCISION HAND MUSCLE LES |
| 8229 | EXC LES SFT TISS HND NEC |
| 8231 | BURSECTOMY OF HAND |
| 8232 | EXCIS HAND TEND FOR GRFT |
| 8233 | HAND TENONECTOMY NEC |
| 8234 | EXC HND MUS/FAS FOR GRFT |
| 8235 | HAND FASCIECTOMY NEC |
| 8236 | OTHER MYECTOMY OF HAND |
| 8239 | HAND SOFT TISSUE EXC NEC |
| 8241 | SUTURE TENDN SHEATH HAND |
| 8242 | DELAY SUT FLEX TEND HAND |
| 8243 | DELAY SUT HAND TEND NEC |
| 8244 | SUTUR FLEX TEND HAND NEC |
| 8245 | SUTURE HAND TENDON NEC |
| 8246 | SUTURE HAND MUSCLE/FASC |
| 8251 | HAND TENDON ADVANCEMENT |
| 8252 | HAND TENDON RECESSON |
| 8253 | HAND TENDON REATTACHMENT |
| 8254 | HAND MUSCLE REATTACHMENT |
| 8255 | CHNG HND MUS/TEN LNG NEC |
| 8256 | TRANSPLANT HAND TEND NEC |
| 8257 | TRANSPOSIT HAND TEND NEC |
| 8258 | TRANSPLANT HAND MUSC NEC |
| 8259 | TRANSPOSIT HAND MUSC NEC |
| 8261 | POLLICIZATION OPERATION |

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| 8269 | THUMB RECONSTRUCTION NEC |
| 8271 | HAND TEND PULLEY RECONST |
| 8272 | PLAST OP HND-MUS/FAS GRF |
| 8279 | PLAST OP HAND W GRFT NEC |
| 8281 | TRANSFER OF FINGER |
| 8282 | REPAIR OF CLEFT HAND |
| 8283 | REPAIR OF MACRODACTYLY |
| 8284 | REPAIR OF MALLET FINGER |
| 8285 | OTHER TENODESIS OF HAND |
| 8286 | OTHER TENOPLASTY OF HAND |
| 8289 | HAND PLASTIC OP NEC |
| 8291 | LYSIS OF HAND ADHESIONS |
| 8299 | HAND MUS/TEN/FAS/OPS NEC |
| 8301 | TENDON SHEATH EXPLORAT |
| 8302 | MYOTOMY |
| 8303 | BURSOTOMY |
| 8309 | SOFT TISSUE INCISION NEC |
| 8311 | ACHILLOTENOTOMY |
| 8312 | ADDUCTOR TENOTOMY OF HIP |
| 8313 | OTHER TENOTOMY |
| 8314 | FASCIOTOMY |
| 8319 | SOFT TISSUE DIVISION NEC |
| 8321 | SOFT TISSUE BIOPSY |
| 8329 | SOFT TISSUE DX PROC NEC |
| 8331 | EXCIS LES TENDON SHEATH |
| 8332 | EXCIS LESION OF MUSCLE |
| 8339 | EXC LES SOFT TISSUE NEC |
| 8341 | TENDON EXCISION FOR GRFT |
| 8342 | OTHER TENONECTOMY |
| 8343 | MUSC/FASC EXCIS FOR GRFT |
| 8344 | OTHER FASCIECTOMY |
| 8345 | OTHER MYECTOMY |
| 8349 | OTHER SOFT TISSUE EXCIS |
| 835 | BURSECTOMY |
| 8361 | TENDON SHEATH SUTURE |
| 8362 | DELAYED TENDON SUTURE |
| 8363 | ROTATOR CUFF REPAIR |
| 8364 | OTHER SUTURE OF TENDON |
| 8365 | OTHER MUSCLE/FASC SUTURE |
| 8371 | TENDON ADVANCEMENT |
| 8372 | TENDON RECESSON |
| 8373 | TENDON REATTACHMENT |
| 8374 | MUSCLE REATTACHMENT |
| 8375 | TENDON TRNSFR/TRANSPLANT |
| 8376 | OTHER TENDON TRANSPOSIT |
| 8377 | MUSCLE TRNSFR/TRANSPLANT |
| 8379 | OTHER MUSCLE TRANSPOSIT |
| 8381 | TENDON GRAFT |
| 8382 | MUSCLE OR FASCIA GRAFT |
| 8383 | TENDON PULLEY RECONSTRUC |
| 8384 | CLUBFOOT RELEASE NEC |

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| 8385 | MUSC/TEND LNG CHANGE NEC |
| 8386 | QUADRICEPSPLASTY |
| 8387 | OTHER PLASTIC OPS MUSCLE |
| 8388 | OTHER PLASTIC OPS TENDON |
| 8389 | OTHER PLASTIC OPS FASCIA |
| 8391 | ADHESIOLYSIS MUS/TEN/FAS |
| 8392 | INSERT SKEL MUSC STIMULA |
| 8393 | REMOV SKEL MUSC STIMULAT |
| 8399 | MUS/TEN/FAS/BUR OP NEC |
| 8400 | UPPER LIMB AMPUTAT NOS |
| 8401 | FINGER AMPUTATION |
| 8402 | THUMB AMPUTATION |
| 8403 | AMPUTATION THROUGH HAND |
| 8404 | DISARTICULATION OF WRIST |
| 8405 | AMPUTATION THRU FOREARM |
| 8406 | DISARTICULATION OF ELBOW |
| 8407 | AMPUTATION THRU HUMERUS |
| 8408 | SHOULDER DISARTICULATION |
| 8409 | FOREQUARTER AMPUTATION |
| 8410 | LOWER LIMB AMPUTAT NOS |
| 8411 | TOE AMPUTATION |
| 8412 | AMPUTATION THROUGH FOOT |
| 8413 | DISARTICULATION OF ANKLE |
| 8414 | AMPUTAT THROUGH MALLEOLI |
| 8415 | BELOW KNEE AMPUTAT NEC |
| 8416 | DISARTICULATION OF KNEE |
| 8417 | ABOVE KNEE AMPUTATION |
| 8418 | DISARTICULATION OF HIP |
| 8419 | HINDQUARTER AMPUTATION |
| 8421 | THUMB REATTACHMENT |
| 8422 | FINGER REATTACHMENT |
| 8423 | FOREARM/WRIST/HAND REATT |
| 8424 | UPPER ARM REATTACHMENT |
| 8425 | TOE REATTACHMENT |
| 8426 | FOOT REATTACHMENT |
| 8427 | LOWER LEG/ANKLE REATTACH |
| 8428 | THIGH REATTACHMENT |
| 8429 | REATTACHMENT NEC |
| 843 | AMPUTATION STUMP REVIS |
| 8440 | IMPLNT/FIT PROS LIMB NOS |
| 8444 | IMPLANT ARM PROSTHESIS |
| 8448 | IMPLANT LEG PROSTHESIS |
| 8458 | IMP INTRSPINE DECOMP DEV OCT05- |
| 8459 | INSERT OTH SPIN DEVICE |
| 8460 | INSERT DISC PROS NOS (OCT 04) |
| 8461 | INS PART DISC PROS CERV (OCT 04) |
| 8462 | INS TOT DISC PROST CERV (OCT 04) |
| 8463 | INS SPIN DISC PROS THOR (OCT 04) |

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| 8464 | INS PART DISC PROS LUMB (OCT 04) |
| 8465 | INS TOTL DISC PROS LUMB (OCT 04) |
| 8466 | REVISE DISC PROST CERV (OCT 04) |
| 8467 | REVISE DISC PROST THORA (OCT 04) |
| 8468 | REVISE DISC PROSTH LUMB (OCT 04) |
| 8469 | REVISE DISC PROSTH NOS (OCT 04) |
| 8472 | APP EXT FIX DEV-RING SYS OCT05- |
| 8473 | APP HYBRID EXT FIX DEV OCT05- |
| 8491 | AMPUTATION NOS |
| 8492 | SEPARAT EQUAL JOIN TWIN |
| 8493 | SEPARAT UNEQUL JOIN TWIN |
| 8499 | MUSCULOSKELETAL OP NEC |
| 8512 | OPEN BREAST BIOPSY |
| 8520 | BREAST TISSU DESTRUC NOS |
| 8521 | LOCAL EXCIS BREAST LES |
| 8522 | QUADRANT RESECT BREAST |
| 8523 | SUBTOTAL MASTECTOMY |
| 8524 | EXC ECTOPIC BREAST TISSU |
| 8525 | EXCISION OF NIPPLE |
| 8531 | UNILAT REDUCT MAMMOPLAST |
| 8532 | BILAT REDUCT MAMMOPLASTY |
| 8533 | UNIL SUBQ MAMMECT-IMPLNT |
| 8534 | UNILAT SUBQ MAMMECT NEC |
| 8535 | BIL SUBQ MAMMECT-IMPLANT |
| 8536 | BILAT SUBQ MAMMECTOM NEC |
| 8541 | UNILAT SIMPLE MASTECTOMY |
| 8542 | BILAT SIMPLE MASTECTOMY |
| 8543 | UNILAT EXTEN SIMP MASTEC |
| 8544 | BILAT EXTEND SIMP MASTEC |
| 8545 | UNILAT RADICAL MASTECTOM |
| 8546 | BILAT RADICAL MASTECTOMY |
| 8547 | UNIL EXT RAD MASTECTOMY |
| 8548 | BIL EXTEN RAD MASTECTOMY |
| 8550 | AUGMENT MAMMOPLASTY NOS |
| 8553 | UNILAT BREAST IMPLANT |
| 8554 | BILATERAL BREAST IMPLANT |
| 856 | MASTOPEXY |
| 857 | TOTAL BREAST RECONSTRUCT |
| 8582 | BREAST SPLIT-THICK GRAFT |
| 8583 | BREAST FULL-THICK GRAFT |
| 8584 | BREAST PEDICLE GRAFT |
| 8585 | BREAST MUSCLE FLAP GRAFT |
| 8586 | TRANSPOSITION OF NIPPLE |
| 8587 | NIPPLE REPAIR NEC |
| 8589 | MAMMOPLASTY NEC |
| 8593 | BREAST IMPLANT REVISION |
| 8594 | BREAST IMPLANT REMOVAL |

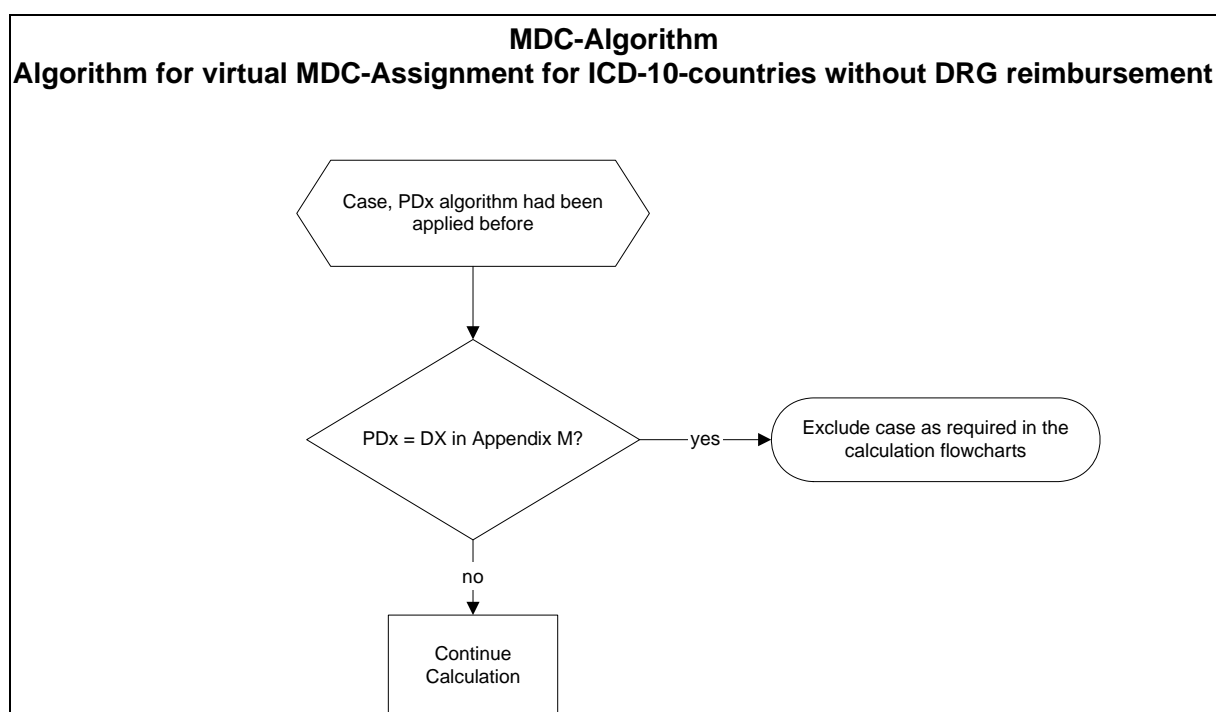
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| 8595 | INSER BREAST TISSU EXPAN |
| 8596 | REMOV BREAST TISSU EXPAN |
| 8599 | BREAST OPERATION NEC |
| 8606 | INSERT INFUSION PUMP |
| 8621 | EXCISION OF PILONID CYST |
| 8622 | EXC WOUND DEBRIDEMENT |
| 8625 | DERMABRASION |
| 864 | RADICAL EXCIS SKIN LES |
| 8660 | FREE SKIN GRAFT NOS |
| 8661 | FULL-THICK HAND SKIN GRF |
| 8662 | HAND SKIN GRAFT NEC |
| 8663 | FULL-THICK SKIN GRFT NEC |
| 8665 | HETEROGRAFT TO SKIN |
| 8666 | HOMOGRAFT TO SKIN |
| 8667 | DERMAL REGENER GRAFT |
| 8669 | FREE SKIN GRAFT NEC |
| 8670 | PEDICLE GRAFT/FLAP NOS |
| 8671 | CUT & PREP PEDICLE GRAFT |
| 8672 | PEDICLE GRAFT ADVANCEMEN |
| 8673 | ATTACH PEDICLE TO HAND |
| 8674 | ATTACH PEDICLE GRAFT NEC |

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| 8675 | REVISION OF PEDICLE GRFT |
| 8681 | REPAIR FACIAL WEAKNESS |
| 8682 | FACIAL RHYTIDECTOMY |
| 8683 | SIZE REDUCT PLASTIC OP |
| 8684 | RELAXATION OF SCAR |
| 8685 | SYNDACTYLY CORRECTION |
| 8686 | ONYCHOPLASTY |
| 8689 | SKIN REPAIR & PLASTY NEC |
| 8691 | SKIN EXCISION FOR GRAFT |
| 8693 | INSERT TISSUE EXPANDER |
| 8694 | INS/REPL SINGLE PUL GEN (OCT 04) |
| 8695 | INS/REPL DUAL PULSE GEN (OCT 04) |
| 8696 | INSERT/REPL OTH NEUROST (OCT 04) |
| 8697 | INS/REP 1 PUL GEN OCT05- |
| 8698 | INS/REP 2 PUL GEN OCT05- |
| 8753 | INTRAOPER CHOLANGIOGRAM |
| 9504 | ANESTHETIZED EYE EXAM |

APPENDIX 2. VIRTUAL MDC-ASSIGNMENT

Code lists in ICD-10-WHO for simulation of MDC assignment, see separate excel file.

- M-3 Code list for MDC-14 (Postoperative PE or DVT, Postoperative sepsis, Accidental puncture or laceration)



Code lists are adapted from:

- German Diagnosis Related Groups, Version 2006. Definitionshandbuch. Institut für das Entgeltsystem im Krankenhaus gGmbH (InEK), Siegburg, Germany, and
- Australian Refined Diagnosis Related Groups V 4.1. Definitions Manual, Vol. 1-3. Commonwealth of Australia 1998App.

M-3 Code list for MDC-14 (Postop PE or DVT, Postop sepsis, Accidental puncture or laceration)

| ICD-10 WHO | Title | MDC |
|------------|--|-----|
| A34 | Obstetrical tetanus | 14 |
| F53.0 | Mild mental and behavioural disorders associated with the puerperium, not elsewhere classified | 14 |
| F53.1 | Severe mental and behavioural disorders associated with the puerperium, not elsewhere classified | 14 |
| F53.8 | Other mental and behavioural disorders associated with the puerperium, not elsewhere classified | 14 |
| F53.9 | Puerperal mental disorder, unspecified | 14 |
| O00.0 | Abdominal pregnancy | 14 |
| O00.1 | Tubal pregnancy | 14 |
| O00.2 | Ovarian pregnancy | 14 |
| O00.8 | Other ectopic pregnancy | 14 |
| O00.9 | Ectopic pregnancy, unspecified | 14 |
| O01.0 | Classical hydatidiform mole | 14 |
| O01.1 | Incomplete and partial hydatidiform mole | 14 |
| O01.9 | Hydatidiform mole, unspecified | 14 |
| O02.0 | Blighted ovum and nonhydatidiform mole | 14 |
| O02.1 | Missed abortion | 14 |
| O02.8 | Other specified abnormal products of conception | 14 |
| O02.9 | Abnormal product of conception, unspecified | 14 |
| O03.0 | Spontaneous abortion, incomplete, complicated by genital tract and pelvic infection | 14 |
| O03.1 | Spontaneous abortion, incomplete, complicated by delayed or excessive haemorrhage | 14 |
| O03.2 | Spontaneous abortion, incomplete, complicated by embolism | 14 |
| O03.3 | Spontaneous abortion, incomplete, with other and unspecified complications | 14 |
| O03.4 | Spontaneous abortion, incomplete, without complication | 14 |
| O03.5 | Spontaneous abortion, complete or unspecified, complicated by genital tract and pelvic infection | 14 |
| O03.6 | Spontaneous abortion, complete or unspecified, complicated by delayed or excessive haemorrhage | 14 |
| O03.7 | Spontaneous abortion, complete or unspecified, complicated by embolism | 14 |
| O03.8 | Spontaneous abortion, complete or unspecified, with other and unspecified complications | 14 |
| O03.9 | Spontaneous abortion, complete or unspecified, without complication | 14 |
| O04.0 | Medical abortion, incomplete, complicated by genital tract and pelvic infection | 14 |
| O04.1 | Medical abortion, incomplete, complicated by delayed or excessive haemorrhage | 14 |
| O04.2 | Medical abortion, incomplete, complicated by embolism | 14 |
| O04.3 | Medical abortion, incomplete, with other and unspecified complications | 14 |
| O04.4 | Medical abortion, incomplete, without complication | 14 |
| O04.5 | Medical abortion, complete or unspecified, complicated by genital tract and pelvic infection | 14 |
| O04.6 | Medical abortion, complete or unspecified, complicated by delayed or excessive haemorrhage | 14 |
| O04.7 | Medical abortion, complete or unspecified, complicated by embolism | 14 |
| O04.8 | Medical abortion, complete or unspecified, with other and unspecified complications | 14 |
| O04.9 | Medical abortion, complete or unspecified, without complication | 14 |
| O05.0 | Other abortion, incomplete, complicated by genital tract and pelvic infection | 14 |
| O05.1 | Other abortion, incomplete, complicated by delayed or excessive haemorrhage | 14 |

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| O05.2 | Other abortion, incomplete, complicated by embolism | 14 |
| O05.3 | Other abortion, incomplete, with other and unspecified complications | 14 |
| O05.4 | Other abortion, incomplete, without complication | 14 |
| O05.5 | Other abortion, complete or unspecified, complicated by genital tract and pelvic infection | 14 |
| O05.6 | Other abortion, complete or unspecified, complicated by delayed or excessive haemorrhage | 14 |
| O05.7 | Other abortion, complete or unspecified, complicated by embolism | 14 |
| O05.8 | Other abortion, complete or unspecified, with other and unspecified complications | 14 |
| O05.9 | Other abortion, complete or unspecified, without complication | 14 |
| O06.0 | Unspecified abortion, incomplete, complicated by genital tract and pelvic infection | 14 |
| O06.1 | Unspecified abortion, incomplete, complicated by delayed or excessive haemorrhage | 14 |
| O06.2 | Unspecified abortion, incomplete, complicated by embolism | 14 |
| O06.3 | Unspecified abortion, incomplete, with other and unspecified complications | 14 |
| O06.4 | Unspecified abortion, incomplete, without complication | 14 |
| O06.5 | Unspecified abortion, complete or unspecified, complicated by genital tract and pelvic infection | 14 |
| O06.6 | Unspecified abortion, complete or unspecified, complicated by delayed or excessive haemorrhage | 14 |
| O06.7 | Unspecified abortion, complete or unspecified, complicated by embolism | 14 |
| O06.8 | Unspecified abortion, complete or unspecified, with other and unspecified complications | 14 |
| O06.9 | Unspecified abortion, complete or unspecified, without complication | 14 |
| O07.0 | Failed medical abortion, complicated by genital tract and pelvic infection | 14 |
| O07.1 | Failed medical abortion, complicated by delayed or excessive haemorrhage | 14 |
| O07.2 | Failed medical abortion, complicated by embolism | 14 |
| O07.3 | Failed medical abortion, with other and unspecified complications | 14 |
| O07.4 | Failed medical abortion, without complication | 14 |
| O07.5 | Other and unspecified failed attempted abortion, complicated by genital tract and pelvic infection | 14 |
| O07.6 | Other and unspecified failed attempted abortion, complicated by delayed or excessive haemorrhage | 14 |
| O07.7 | Other and unspecified failed attempted abortion, complicated by embolism | 14 |
| O07.8 | Other and unspecified failed attempted abortion, with other and unspecified complications | 14 |
| O07.9 | Other and unspecified failed attempted abortion, without complication | 14 |
| O08.0 | Genital tract and pelvic infection following abortion and ectopic and molar pregnancy | 14 |
| O08.1 | Delayed or excessive haemorrhage following abortion and ectopic and molar pregnancy | 14 |
| O08.2 | Embolism following abortion and ectopic and molar pregnancy | 14 |
| O08.3 | Shock following abortion and ectopic and molar pregnancy | 14 |
| O08.4 | Renal failure following abortion and ectopic and molar pregnancy | 14 |
| O08.5 | Metabolic disorders following abortion and ectopic and molar pregnancy | 14 |
| O08.6 | Damage to pelvic organs and tissues following abortion and ectopic and molar pregnancy | 14 |
| O08.7 | Other venous complications following abortion and ectopic and molar pregnancy | 14 |
| O08.8 | Other complications following abortion and ectopic and molar pregnancy | 14 |
| O08.9 | Complication following abortion and ectopic and molar pregnancy, unspecified | 14 |
| O10.0 | Pre-existing essential hypertension complicating pregnancy, childbirth and the puerperium | 14 |

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| O10.1 | Pre-existing hypertensive heart disease complicating pregnancy, childbirth and the puerperium | 14 |
| O10.2 | Pre-existing hypertensive renal disease complicating pregnancy, childbirth and the puerperium | 14 |
| O10.3 | Pre-existing hypertensive heart and renal disease complicating pregnancy, childbirth and the puerperium | 14 |
| O10.4 | Pre-existing secondary hypertension complicating pregnancy, childbirth and the puerperium | 14 |
| O10.9 | Unspecified pre-existing hypertension complicating pregnancy, childbirth and the puerperium | 14 |
| O11 | Pre-existing hypertensive disorder with superimposed proteinuria | 14 |
| O12.0 | Gestational oedema | 14 |
| O12.1 | Gestational proteinuria | 14 |
| O12.2 | Gestational oedema with proteinuria | 14 |
| O13 | Gestational [pregnancy-induced] hypertension without significant proteinuria | 14 |
| O14.0 | Moderate pre-eclampsia | 14 |
| O14.1 | Severe pre-eclampsia | 14 |
| O14.9 | Pre-eclampsia, unspecified | 14 |
| O15.0 | Eclampsia in pregnancy | 14 |
| O15.1 | Eclampsia in labour | 14 |
| O15.2 | Eclampsia in the puerperium | 14 |
| O15.9 | Eclampsia, unspecified as to time period | 14 |
| O16 | Unspecified maternal hypertension | 14 |
| O20.0 | Threatened abortion | 14 |
| O20.8 | Other haemorrhage in early pregnancy | 14 |
| O20.9 | Haemorrhage in early pregnancy, unspecified | 14 |
| O21.0 | Mild hyperemesis gravidarum | 14 |
| O21.1 | Hyperemesis gravidarum with metabolic disturbance | 14 |
| O21.2 | Late vomiting of pregnancy | 14 |
| O21.8 | Other vomiting complicating pregnancy | 14 |
| O21.9 | Vomiting of pregnancy, unspecified | 14 |
| O22.0 | Varicose veins of lower extremity in pregnancy | 14 |
| O22.1 | Genital varices in pregnancy | 14 |
| O22.2 | Superficial thrombophlebitis in pregnancy | 14 |
| O22.3 | Deep phlebothrombosis in pregnancy | 14 |
| O22.4 | Haemorrhoids in pregnancy | 14 |
| O22.5 | Cerebral venous thrombosis in pregnancy | 14 |
| O22.8 | Other venous complications in pregnancy | 14 |
| O22.9 | Venous complication in pregnancy, unspecified | 14 |
| O23.0 | Infections of kidney in pregnancy | 14 |
| O23.1 | Infections of bladder in pregnancy | 14 |
| O23.2 | Infections of urethra in pregnancy | 14 |
| O23.3 | Infections of other parts of urinary tract in pregnancy | 14 |
| O23.4 | Unspecified infection of urinary tract in pregnancy | 14 |
| O23.5 | Infections of the genital tract in pregnancy | 14 |
| O23.9 | Other and unspecified genitourinary tract infection in pregnancy | 14 |
| O24.0 | Diabetes mellitus in pregnancy: Pre-existing diabetes mellitus, insulin-dependent | 14 |
| O24.1 | Diabetes mellitus in pregnancy: Pre-existing diabetes mellitus, non-insulin-dependent | 14 |
| O24.2 | Diabetes mellitus in pregnancy: Pre-existing malnutrition-related diabetes mellitus | 14 |
| O24.3 | Diabetes mellitus in pregnancy: Pre-existing diabetes mellitus, unspecified | 14 |

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| O24.4 | Diabetes mellitus arising in pregnancy | 14 |
| O24.9 | Diabetes mellitus in pregnancy, unspecified | 14 |
| O25 | Malnutrition in pregnancy | 14 |
| O26.0 | Excessive weight gain in pregnancy | 14 |
| O26.1 | Low weight gain in pregnancy | 14 |
| O26.2 | Pregnancy care of habitual aborter | 14 |
| O26.3 | Retained intrauterine contraceptive device in pregnancy | 14 |
| O26.4 | Herpes gestationis | 14 |
| O26.5 | Maternal hypotension syndrome | 14 |
| O26.6 | Liver disorders in pregnancy, childbirth and the puerperium | 14 |
| O26.7 | Subluxation of symphysis (pubis) in pregnancy, childbirth and the puerperium | 14 |
| O26.8 | Other specified pregnancy-related conditions | 14 |
| O26.9 | Pregnancy-related condition, unspecified | 14 |
| O28.0 | Abnormal haematological finding on antenatal screening of mother | 14 |
| O28.1 | Abnormal biochemical finding on antenatal screening of mother | 14 |
| O28.2 | Abnormal cytological finding on antenatal screening of mother | 14 |
| O28.3 | Abnormal ultrasonic finding on antenatal screening of mother | 14 |
| O28.4 | Abnormal radiological finding on antenatal screening of mother | 14 |
| O28.5 | Abnormal chromosomal and genetic finding on antenatal screening of mother | 14 |
| O28.8 | Other abnormal findings on antenatal screening of mother | 14 |
| O28.9 | Abnormal finding on antenatal screening of mother, unspecified | 14 |
| O29.0 | Pulmonary complications of anaesthesia during pregnancy | 14 |
| O29.1 | Cardiac complications of anaesthesia during pregnancy | 14 |
| O29.2 | Central nervous system complications of anaesthesia during pregnancy | 14 |
| O29.3 | Toxic reaction to local anaesthesia during pregnancy | 14 |
| O29.4 | Spinal and epidural anaesthesia-induced headache during pregnancy | 14 |
| O29.5 | Other complications of spinal and epidural anaesthesia during pregnancy | 14 |
| O29.6 | Failed or difficult intubation during pregnancy | 14 |
| O29.8 | Other complications of anaesthesia during pregnancy | 14 |
| O29.9 | Complication of anaesthesia during pregnancy, unspecified | 14 |
| O30.0 | Twin pregnancy | 14 |
| O30.1 | Triplet pregnancy | 14 |
| O30.2 | Quadruplet pregnancy | 14 |
| O30.8 | Other multiple gestation | 14 |
| O30.9 | Multiple gestation, unspecified | 14 |
| O31.0 | Papyraceous fetus | 14 |
| O31.1 | Continuing pregnancy after abortion of one fetus or more | 14 |
| O31.2 | Continuing pregnancy after intrauterine death of one fetus or more | 14 |
| O31.8 | Other complications specific to multiple gestation | 14 |
| O32.0 | Maternal care for unstable lie | 14 |
| O32.1 | Maternal care for breech presentation | 14 |
| O32.2 | Maternal care for transverse and oblique lie | 14 |
| O32.3 | Maternal care for face, brow and chin presentation | 14 |
| O32.4 | Maternal care for high head at term | 14 |
| O32.5 | Maternal care for multiple gestation with malpresentation of one fetus or more | 14 |
| O32.6 | Maternal care for compound presentation | 14 |
| O32.8 | Maternal care for other malpresentation of fetus | 14 |
| O32.9 | Maternal care for malpresentation of fetus, unspecified | 14 |
| O33.0 | Maternal care for disproportion due to deformity of maternal pelvic bones | 14 |
| O33.1 | Maternal care for disproportion due to generally contracted pelvis | 14 |

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| O33.2 | Maternal care for disproportion due to inlet contraction of pelvis | 14 |
| O33.3 | Maternal care for disproportion due to outlet contraction of pelvis | 14 |
| O33.4 | Maternal care for disproportion of mixed maternal and fetal origin | 14 |
| O33.5 | Maternal care for disproportion due to unusually large fetus | 14 |
| O33.6 | Maternal care for disproportion due to hydrocephalic fetus | 14 |
| O33.7 | Maternal care for disproportion due to other fetal deformities | 14 |
| O33.8 | Maternal care for disproportion of other origin | 14 |
| O33.9 | Maternal care for disproportion, unspecified | 14 |
| O34.0 | Maternal care for congenital malformation of uterus | 14 |
| O34.1 | Maternal care for tumour of corpus uteri | 14 |
| O34.2 | Maternal care due to uterine scar from previous surgery | 14 |
| O34.3 | Maternal care for cervical incompetence | 14 |
| O34.4 | Maternal care for other abnormalities of cervix | 14 |
| O34.5 | Maternal care for other abnormalities of gravid uterus | 14 |
| O34.6 | Maternal care for abnormality of vagina | 14 |
| O34.7 | Maternal care for abnormality of vulva and perineum | 14 |
| O34.8 | Maternal care for other abnormalities of pelvic organs | 14 |
| O34.9 | Maternal care for abnormality of pelvic organ, unspecified | 14 |
| O35.0 | Maternal care for (suspected) central nervous system malformation in fetus | 14 |
| O35.1 | Maternal care for (suspected) chromosomal abnormality in fetus | 14 |
| O35.2 | Maternal care for (suspected) hereditary disease in fetus | 14 |
| O35.3 | Maternal care for (suspected) damage to fetus from viral disease in mother | 14 |
| O35.4 | Maternal care for (suspected) damage to fetus from alcohol | 14 |
| O35.5 | Maternal care for (suspected) damage to fetus by drugs | 14 |
| O35.6 | Maternal care for (suspected) damage to fetus by radiation | 14 |
| O35.7 | Maternal care for (suspected) damage to fetus by other medical procedures | 14 |
| O35.8 | Maternal care for other (suspected) fetal abnormality and damage | 14 |
| O35.9 | Maternal care for (suspected) fetal abnormality and damage, unspecified | 14 |
| O36.0 | Maternal care for rhesus isoimmunization | 14 |
| O36.1 | Maternal care for other isoimmunization | 14 |
| O36.2 | Maternal care for hydrops fetalis | 14 |
| O36.3 | Maternal care for signs of fetal hypoxia | 14 |
| O36.4 | Maternal care for intrauterine death | 14 |
| O36.5 | Maternal care for poor fetal growth | 14 |
| O36.6 | Maternal care for excessive fetal growth | 14 |
| O36.7 | Maternal care for viable fetus in abdominal pregnancy | 14 |
| O36.8 | Maternal care for other specified fetal problems | 14 |
| O36.9 | Maternal care for fetal problem, unspecified | 14 |
| O40 | Polyhydramnios | 14 |
| O41.0 | Oligohydramnios | 14 |
| O41.1 | Infection of amniotic sac and membranes | 14 |
| O41.8 | Other specified disorders of amniotic fluid and membranes | 14 |
| O41.9 | Disorder of amniotic fluid and membranes, unspecified | 14 |
| O42.0 | Premature rupture of membranes, onset of labour within 24 hours | 14 |
| O42.1 | Premature rupture of membranes, onset of labour after 24 hours | 14 |
| O42.2 | Premature rupture of membranes, labour delayed by therapy | 14 |
| O42.9 | Premature rupture of membranes, unspecified | 14 |
| O43.0 | Placental transfusion syndromes | 14 |
| O43.1 | Malformation of placenta | 14 |
| O43.8 | Other placental disorders | 14 |

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| O43.9 | Placental disorder, unspecified | 14 |
| O44.0 | Placenta praevia specified as without haemorrhage | 14 |
| O44.1 | Placenta praevia with haemorrhage | 14 |
| O45.0 | Premature separation of placenta with coagulation defect | 14 |
| O45.8 | Other premature separation of placenta | 14 |
| O45.9 | Premature separation of placenta, unspecified | 14 |
| O46.0 | Antepartum haemorrhage with coagulation defect | 14 |
| O46.8 | Other antepartum haemorrhage | 14 |
| O46.9 | Antepartum haemorrhage, unspecified | 14 |
| O47.0 | False labour before 37 completed weeks of gestation | 14 |
| O47.1 | False labour at or after 37 completed weeks of gestation | 14 |
| O47.9 | False labour, unspecified | 14 |
| O48 | Prolonged pregnancy | 14 |
| O60.0 | Preterm labour without delivery | 14 |
| O60.1 | Preterm labour with preterm delivery | 14 |
| O60.2 | Preterm labour with term delivery | 14 |
| O61.0 | Failed medical induction of labour | 14 |
| O61.1 | Failed instrumental induction of labour | 14 |
| O61.8 | Other failed induction of labour | 14 |
| O61.9 | Failed induction of labour, unspecified | 14 |
| O62.0 | Primary inadequate contractions | 14 |
| O62.1 | Secondary uterine inertia | 14 |
| O62.2 | Other uterine inertia | 14 |
| O62.3 | Precipitate labour | 14 |
| O62.4 | Hypertonic, incoordinate, and prolonged uterine contractions | 14 |
| O62.8 | Other abnormalities of forces of labour | 14 |
| O62.9 | Abnormality of forces of labour, unspecified | 14 |
| O63.0 | Prolonged first stage (of labour) | 14 |
| O63.1 | Prolonged second stage (of labour) | 14 |
| O63.2 | Delayed delivery of second twin, triplet, etc. | 14 |
| O63.9 | Long labour, unspecified | 14 |
| O64.0 | Obstructed labour due to incomplete rotation of fetal head | 14 |
| O64.1 | Obstructed labour due to breech presentation | 14 |
| O64.2 | Obstructed labour due to face presentation | 14 |
| O64.3 | Obstructed labour due to brow presentation | 14 |
| O64.4 | Obstructed labour due to shoulder presentation | 14 |
| O64.5 | Obstructed labour due to compound presentation | 14 |
| O64.8 | Obstructed labour due to other malposition and malpresentation | 14 |
| O64.9 | Obstructed labour due to malposition and malpresentation, unspecified | 14 |
| O65.0 | Obstructed labour due to deformed pelvis | 14 |
| O65.1 | Obstructed labour due to generally contracted pelvis | 14 |
| O65.2 | Obstructed labour due to pelvic inlet contraction | 14 |
| O65.3 | Obstructed labour due to pelvic outlet and mid-cavity contraction | 14 |
| O65.4 | Obstructed labour due to fetopelvic disproportion, unspecified | 14 |
| O65.5 | Obstructed labour due to abnormality of maternal pelvic organs | 14 |
| O65.8 | Obstructed labour due to other maternal pelvic abnormalities | 14 |
| O65.9 | Obstructed labour due to maternal pelvic abnormality, unspecified | 14 |
| O66.0 | Obstructed labour due to shoulder dystocia | 14 |
| O66.1 | Obstructed labour due to locked twins | 14 |
| O66.2 | Obstructed labour due to unusually large fetus | 14 |

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| O66.3 | Obstructed labour due to other abnormalities of fetus | 14 |
| O66.4 | Failed trial of labour, unspecified | 14 |
| O66.5 | Failed application of vacuum extractor and forceps, unspecified | 14 |
| O66.8 | Other specified obstructed labour | 14 |
| O66.9 | Obstructed labour, unspecified | 14 |
| O67.0 | Intrapartum haemorrhage with coagulation defect | 14 |
| O67.8 | Other intrapartum haemorrhage | 14 |
| O67.9 | Intrapartum haemorrhage, unspecified | 14 |
| O68.0 | Labour and delivery complicated by fetal heart rate anomaly | 14 |
| O68.1 | Labour and delivery complicated by meconium in amniotic fluid | 14 |
| O68.2 | Labour and delivery complicated by fetal heart rate anomaly with meconium in amniotic fluid | 14 |
| O68.3 | Labour and delivery complicated by biochemical evidence of fetal stress | 14 |
| O68.8 | Labour and delivery complicated by other evidence of fetal stress | 14 |
| O68.9 | Labour and delivery complicated by fetal stress, unspecified | 14 |
| O69.0 | Labour and delivery complicated by prolapse of cord | 14 |
| O69.1 | Labour and delivery complicated by cord around neck, with compression | 14 |
| O69.2 | Labour and delivery complicated by other cord entanglement | 14 |
| O69.3 | Labour and delivery complicated by short cord | 14 |
| O69.4 | Labour and delivery complicated by vasa praevia | 14 |
| O69.5 | Labour and delivery complicated by vascular lesion of cord | 14 |
| O69.8 | Labour and delivery complicated by other cord complications | 14 |
| O69.9 | Labour and delivery complicated by cord complication, unspecified | 14 |
| O70.0 | First degree perineal laceration during delivery | 14 |
| O70.1 | Second degree perineal laceration during delivery | 14 |
| O70.2 | Third degree perineal laceration during delivery | 14 |
| O70.3 | Fourth degree perineal laceration during delivery | 14 |
| O70.9 | Perineal laceration during delivery, unspecified | 14 |
| O71.0 | Rupture of uterus before onset of labour | 14 |
| O71.1 | Rupture of uterus during labour | 14 |
| O71.2 | Postpartum inversion of uterus | 14 |
| O71.3 | Obstetric laceration of cervix | 14 |
| O71.4 | Obstetric high vaginal laceration alone | 14 |
| O71.5 | Other obstetric injury to pelvic organs | 14 |
| O71.6 | Obstetric damage to pelvic joints and ligaments | 14 |
| O71.7 | Obstetric haematoma of pelvis | 14 |
| O71.8 | Other specified obstetric trauma | 14 |
| O71.9 | Obstetric trauma, unspecified | 14 |
| O72.0 | Third-stage haemorrhage | 14 |
| O72.1 | Other immediate postpartum haemorrhage | 14 |
| O72.2 | Delayed and secondary postpartum haemorrhage | 14 |
| O72.3 | Postpartum coagulation defects | 14 |
| O73.0 | Retained placenta without haemorrhage | 14 |
| O73.1 | Retained portions of placenta and membranes, without haemorrhage | 14 |
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| O74.8 | Other complications of anaesthesia during labour and delivery | 14 |
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| O89.3 | Toxic reaction to local anaesthesia during the puerperium | 14 |
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| O89.6 | Failed or difficult intubation during the puerperium | 14 |
| O89.8 | Other complications of anaesthesia during the puerperium | 14 |
| O89.9 | Complication of anaesthesia during the puerperium, unspecified | 14 |
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| O99.4 | Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium | 14 |
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| Z32.0 | Pregnancy, not (yet) confirmed | 14 |
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| Z37.0 | Single live birth | 14 |
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| Z37.2 | Twins, both liveborn | 14 |
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SUMMARY OF REVISIONS

The following revisions to the former version (OECD Technical Paper 19) of this manual were introduced subsequent to an initial pilot calculation of the indicators by several participating countries:

Manual

The list of Patient Safety Indicators specified has been reduced to the 7 indicators endorsed by the OECD HCQI Expert Group in Paris on October 23 2008.

The title of PSI 7 (“Selected infections due to medical care”) is changed to “Catheter-Related Bloodstream Infection”. The title of PSI 15 (“Technical difficulty with procedure”) is changed to “Accidental Puncture or Laceration”

For PSIs 5 and 15 a note was added that hospital discharges with a length of stay less than 24 hours (or 0 days if timestamps are not available) shall be excluded from the denominator population.

For PSI 12 a note was added that hospital discharges with a length of stay less than 2 days shall be excluded from the denominator population.

Appendices

- Code Lists:
 - Code lists are limited to those needed for calculation of the PSIs listed in this manual
 - In Appendix 1 a code list with operation room procedures in ICD-9 CM is added
- Questionnaire:
 - Use of electronic list functions to facilitate answers in the section referring to administrative databases.
 - After the experiences of the 2008 pilot calculation supplementary questions have been included in relation to:
 - denominator population related numbers of average length of stay for all indicators
 - denominator-related average number of secondary diagnoses for all indicators
 - optional: distribution of the coded numerator events in relation to their position in the database
 - All countries were asked to provide age (5 year age cohorts) and/or sex stratified data for each of the indicators.

REFERENCES

- AHRQ (2003) “Quality Indicators Patient Safety Indicators: Technical Specifications - March 2003 Version 3.1” Agency for Healthcare Research and Quality, Rockville, MD, AHRC website http://www.qualityindicators.ahrq.gov/downloads/psi/psi_technical_specs_v31.pdf (accessed 01/11/2008)
- AHRQ (2006) “Patient Safety Indicators Overview: AHRQ Quality Indicators - February 2006” Agency for Healthcare Research and Quality, Rockville, MD, AHRC website http://www.qualityindicators.ahrq.gov/psi_overview.htm (accessed 11/13/2008).
- Commonwealth of Australia (1998) “Australian Refined Diagnosis Related Groups V 4.1. Definitions Manual, Vol. 1-3”, Commonwealth of Australia, Canberra, Australia.
- CIHI (Canadian Institute for Health Information) (2004) “Diagnosis Typing: Current Canadian and International Practices Background Paper for the Development of the ICD-10-CA/CCI Acute Care Inpatient Grouping Methodology” CIHI website, http://www.cihi.ca/cihiweb/en/downloads/Diagnosis_Typing_Background_v1.pdf (accessed 11/13/2008).
- Department of Health and Human Services (2005) “ICD-9-CM Official Guidelines for Coding and Reporting”, Centers for Disease Control and Prevention website, <http://www.cdc.gov/nchs/data/icd9/icdguide.pdf> (accessed 11/13/2008)
- Department of Health and Human Services (2007) “ICD-9-CM Tabular List of Diseases (FY07)”, Centers for Disease Control and Prevention website, <http://www.cdc.gov/nchs/icd9.htm#RTF>. (accessed 11/13/2008).
- DIMDI (German Institute of Medical Documentation and Information) (2007) DIMDI website, <http://www.dimdi.de/static/en/klassi/diagnosen/ueberl/index.htm> (accessed 11/13/2008).
- Drösler S E, Cools A, Köpfer T, Stausberg J. (2007) “Are Quality Indicators Derived from Routine Data Suitable for Evaluation Hospital Performance? First Results Using the AHRQ Patient Safety Indicators in Germany”, *ZaeFQ* 2007; 101(1):35-42.
- Drösler S E (2008) “Facilitating Cross National Comparisons of Indicators for Patient Safety at the Health-System Level in the OECD Countries” Health Technical Paper No 19, OECD, Paris
- INEK (Institute for the Hospital Remuneration System) (2006) “German Diagnosis Related Groups, Version 2006. Definitionshandbuch, Vol. 1-5”, Institut für das Entgeltsystem im Krankenhaus gGmbH (InEK), Siegburg, Germany.
- Millar J, S Mattke and the Members of the OECD Patient Safety Panel (2004) “Selecting Indicators for Patient Safety at the Health System Level in OECD Countries” Health Technical Paper No 18, OECD, Paris.
- Mattke S, E Kelley, P Scherer, J Hurst, M L Gil Lapetra and the HCQI Expert Group Members (2006) “Health Care Quality Indicators Project Initial Indicators Report: Initial Indicators Report OECD” Health Working Paper No 22 OECD, Paris.

DELSA/HEA/WD/HWP(2009)5/ANN

OECD (2007) "Patient Safety Data Systems in the OECD: A Report of a Joint Irish Department of Health - OECD Conference" OECD, Paris.

Quan H, Drösler S, Sundararajan V, Wen E, Burnand B, Couris C, et al. (2008) Adaptation of AHRQ Patient Safety Indicators for Use in ICD-10 Administrative Data by an International Consortium. http://www.ahrq.gov/downloads/pub/advances2/vol1/Advances-Quan_52.pdf (accessed 11/13/2008).

WHO (2006) "World Health Organization: International Statistical Classification of Diseases and Related Health Problems 10th Revision Version for 2006", WHO website, <http://www.who.int/classifications/apps/icd/icd10online2006/> (accessed 11/13/2008).

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