

# ICD-9-CM Coding Chapters 1-9



## Objectives

- Chapter 1: Infectious and Parasitic Disease
- Chapter 2: Neoplasms
- Chapter 3: Endocrine, Nutritional, and Metabolic Diseases  
and Immunity Disorders
- Chapter 4: Diseases of Blood and Blood Forming Organs
- Chapter 5: Mental Disorders
- Chapter 6: Diseases of Nervous System and Sense  
Organs
- Chapter 7: Diseases of Circulatory System
- Chapter 8: Diseases of Respiratory System
- Chapter 9: Diseases of Digestive System



# Chapter 1:

## Infectious and Parasitic Disease

- Communicable diseases
- Infectious organisms
  - Bacteria
  - Chlamydia
  - Fungi
  - Helminthes
  - Mycoplasmas
  - Protozoans
  - Rickettsias
  - Viruses



## Human Immunodeficiency Virus (HIV) Infections

1. Is the patient asymptomatic?
2. Has the patient had an HIV or AIDS related condition in the past?
3. What is the purpose for the encounter or admission?



## Human Immunodeficiency Virus (HIV) Infections

- “Patients with any prior diagnosis of an HIV-related illness should be coded to 042. Once a patient has developed an HIV related illness, the patient should always be assigned code 042 on every subsequent admission/encounter.”
- “...If a patient with HIV disease is admitted for an unrelated condition (such as traumatic injury), the code for the unrelated condition should be the principal diagnosis.”



## Human Immunodeficiency Virus (HIV) Infections

Patient with V08 status diagnosed with Kaposi’s sarcoma on chest



## Human Immunodeficiency Virus (HIV) Infections

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- AIDS 042
- Kaposi's Sarcoma 176.0



## Human Immunodeficiency Virus (HIV) Infections

Patient with V08 status diagnosed with melanoma on chest



## Human Immunodeficiency Virus (HIV) Infections

Patient with V08 status diagnosed with  
melanoma on chest

- Melanoma 172.5
- HIV-Positive Status V08



## Human Immunodeficiency Virus (HIV) Infections

- Conditions always assumed to be related to HIV Disease:
  - Kaposi's sarcoma
  - Lymphoma
  - Pneumocystis carinii pneumonia (PCP)
  - Cryptococcal meningitis
  - Cytomegaloviral disease
- These diseases will always change an HIV-positive diagnosis to an AIDS diagnosis



## Septicemia, SIRS, Sepsis

- Septicemia – systemic disease associated with microorganisms or toxins in the blood.
- Systemic inflammatory response syndrome (SIRS) – systemic response to infection, burns, trauma, or cancer.
- Sepsis – whole body inflammatory state. It generally refers to SIRS that is due to an infection.
- Severe Sepsis – Sepsis with associated acute organ dysfunction.



## SIRS, Sepsis, Severe Sepsis

- Minimum 2 codes:
  - Underlying condition (infection, infecting organism, injury)
  - Subcategory 995.9 *Systemic inflammatory response syndrome (SIRS)*
- Use a 3<sup>rd</sup> code when acute organ dysfunction is also identified.



## Septic Shock

- Systemic infection
- Severe sepsis 995.92
- Septic shock 785.52
- Acute organ dysfunction



## Urosepsis

- Urosepsis 599.0
  - meaning sepsis 995.91
  - meaning urinary tract infection 599.0
- If unsure, query the provider



## Methicillin Resistant Staphylococcus Aureus (MRSA)

- Code with:
  - Combination code; or
  - A code for the condition, and another code for MRSA
- MRSA carrier without active infection – V02.54
- Personal history with no mention of colonization – V12.04



## Chapter 2: Neoplasms

- An abnormal growth of new tissue.
- Two ways to find in the Index:
  - If histology is known, look up the term in the Index to Diseases
  - Neoplasm Table





# Neoplasm Table

Neoplasm, neoplastic	Malignant					
	Primary	Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified
Neoplasm, neoplastic	199.1	199.1	234.9	229.9	238.9	239.9
abdomen, abdominal	195.2	198.89	234.8	229.8	238.8	239.89
cavity	195.2	198.89	234.8	229.8	238.8	239.89
organ	195.2	198.89	234.8	229.8	238.8	239.89
viscera	195.2	198.89	234.8	229.8	238.8	239.89
wall	173.50	198.2	232.5	216.5	238.2	239.2
basal cell carcinoma	173.51	----	----	----	----	----
connective tissue	171.5	198.89	----	215.5	238.1	239.2
specified type NEC	173.59	----	----	----	----	----
squamous cell carcinoma	173.52	----	----	----	----	----
abdominopelvic	195.8	198.89	234.8	229.8	238.8	239.89



# Neoplasms

**Pilomatrixoma (M8110/0) – see Neoplasm, skin, benign**

Neoplasm, neoplastic	Malignant					
	Primary	Secondary	Ca in situ	Benign	Uncertain Behavior	Unspecified
Skin NEC						
scalp	173.40	198.2	232.4	216.4	238.2	239.2

**216.4 Benign neoplasm of scalp and skin of neck**



## Neoplasms Not in Table

- Lipoma (fatty benign tumor)
- Melanoma (malignant skin cancer)
- Neuroendocrine tumor
- Merkel cell carcinoma (malignant skin cancer)

*Always check the index FIRST*



## Neoplasms

### Sequencing

- Metastatic (primary and secondary sites)
  - Code first the site that is the primary reason for the encounter
- Primary site unknown
  - Use 199.1 Other malignant neoplasm of unspecified site



# Neoplasms

“When a primary malignancy has been previously excised or eradicated from its site and there is no further treatment directed to that site and there is no evidence of any existing primary malignancy, a code from category V10 *Personal history of malignant neoplasm* should be used to indicate the former site of the malignancy.”



# Neoplasms

## CA or HX CA?

- A staged reconstruction of the breast is undertaken for a patient two months post bilateral mastectomy. She is also undergoing chemotherapy for DCIS of the left breast.
- An excisional biopsy result is positive for carcinoma in situ at its margins. A second surgery is scheduled for wide excision and repair.
- Mohs is performed on the patient’s nose to treat basal cell carcinoma. The open wound is dressed, and the patient is escorted down the hall to the office of a plastic surgeon for flap repair.
- Post oophorectomy for ovarian CA, the MRI picks up secondary CA in the brain.



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**Active – Brain CA, Hx - Ovarian CA**



# Neoplasms

## Malignancy

- “When admission/encounter is for the management of an anemia associated with the malignancy, and the treatment is only for anemia, the appropriate anemia code (285.22 Anemia in neoplastic disease) is designated the principal diagnosis”
- “When the admission/encounter is for management of an anemia associated with chemotherapy, immunotherapy, or radiotherapy and the only treatment is for the anemia, the anemia is sequenced first (284.89 Other specified aplastic anemias)”



# Neoplasms

- **Epogen/Procrit:**

The FDA has issued specific warnings against off-label use of Epogen/Procrit in cancer patients whose anemia is not directly linked to chemotherapy



## Neoplasms

- The chief complaint today is inflammation and discharge at the site of the patient's colostomy stoma. She has a temporary colostomy following her colectomy for colon cancer, and is still undergoing chemotherapy treatments with her oncologist. We have placed her on a Z pack and are also culturing a sample from the site, as we have seen a lot of MRSA lately. We should have the results Friday. A sample tube of palliative salve was supplied.
- What are the diagnosis codes?



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- What are the diagnosis codes?
  - 569.61 - Infection of colostomy and enterostomy
  - 153.9 – Malignant neoplasm of colon, unspecified site



## Chapter 3: Endocrine, Nutritional and Metabolic Diseases and Immunity Disorders

- Disorders of the thyroid gland
- Diabetes mellitus
- Disorders of the parathyroid gland
- Diseases of the thymus gland
- Disorders of adrenal glands
- Disorders of ovaries and testes



## Diabetes Mellitus

- Type I: Autoimmune dysfunction kills islet cells
  - Ultimately, no insulin is produced by the patient
  - Often occurs with other autoimmune disorders: thyroid, adrenal, gastric parietal cells
- Type II diabetes: Capacity defect
  - The insulin-producing cells are overworked, or the body's insulin receptors are malfunctioning or resistant due to age, obesity, or genetic predisposition
  - Pancreas still produces insulin, but cannot keep up with demands
  - 90 percent of diabetes in the United States is Type II
- Secondary
  - Use 249.xx unless post-pancreatectomy (251.3)





## Diabetes Mellitus

- Default: 250.00 Type II, not stated as uncontrolled, without complications
- Poorly controlled is not “uncontrolled.”
  - Uncontrolled should be documented, and its definition changes from physician to physician.
  - Get clarification from your physician regarding when to report uncontrolled diabetes.
- Report V58.67 only with type II diabetes



## Diabetes Mellitus

### Insulin pump failure:

- Under dose of insulin
  - 996.57 Mechanical complications due to insulin pump failure
  - Diabetes mellitus code
- Over dose of insulin
  - 996.57 Mechanical complications due to insulin pump failure
  - 962.3 Poisoning by insulin and antidiabetic agents
  - Diabetes mellitus code



## Chapter 4: Diseases of Blood and Blood Forming Organs

### Anemia

- Common Types
  - Iron deficiency
  - Vitamin B<sub>12</sub> deficiency
  - Folic Acid deficiency
  
- Type unknown
  - 285.9 Unspecified anemia



## Anemia

- Chronic Kidney Disease (CKD)
  - 285.21 Anemia in chronic kidney disease
  - Stage of chronic kidney disease
  
- Neoplastic Disease
  - 285.22 Anemia in neoplastic disease
  - Type of neoplasm
  
- Chemotherapy
  - 285.3 Antineoplastic chemotherapy induced anemia



## Chapter 5: Mental Disorders

- Diagnostic and Statistical Manual, Fourth Edition (DSM-IV)
- Multiaxial coding system
  - Axis I – Clinical disorders and other conditions
  - Axis II – Personality disorders; mental retardation
  - Axis III – General medical condition
  - Axis IV – Psychosocial problems
  - Axis V – Global assessment of functioning



## Chapter 5: Mental Disorders

- Dementia – group of symptoms that effect memory and cognitive functions such as judgment and communication
- Alzheimer’s disease – characterized by degeneration of the brain tissue



## Chapter 5: Mental Disorders

- Substance Abuse Categories
  - 303 Alcohol dependence syndrome
  - 304 Drug dependence
  - 305 Nondependent abuse of drugs
- 5<sup>th</sup> digit sub classification
  - 0 unspecified
  - 1 continuous
  - 2 episodic
  - 3 in remission



## Chapter 6: Diseases of Nervous System and Sense Organs

- Headaches
- Epilepsy
- Parkinson's Disease



# Pain

- Acute and chronic pain
- Pain associated with neoplasms
- Postoperative pain
- Central pain syndrome



# Chapter 7: Diseases of Circulatory Systems

- Hypertension
- CVA, Postoperative CVA, Late effects of Cerebrovascular disease
- Acute myocardial infarction (AMI)



## Hypertension Table

Hypertension, hypertensive	Malignant	Benign	Unspecified
Hypertension, hypertensive (arterial) (arteriolar) (crisis) (degeneration) (disease) (essential) (fluctuating) (idiopathic) (intermittent) (labile) (low renin) (orthostatic) (paroxysmal) (primary) (systemic) (uncontrolled) (vascular)	401.0	401.1	401.9
with chronic kidney disease stage I through stage IV, or unspecified stage V or end state renal disease	403.00	403.10	403.90
heart involvement (conditions classifiable to 429.0-429.3, 429.8, 429.9 due to hypertension) (see also Hypertension, Heart)	402.00	402.10	402.90



## Hypertension

- Hypertension with Heart Disease
- Hypertensive Chronic Kidney Disease
- Hypertensive Heart and Chronic Kidney Disease
- Hypertensive Cerebrovascular Disease
- Hypertensive Retinopathy



# Hypertension

- Hypertension, secondary  
Hypertension caused by another disorder
- Hypertension, transient  
An elevated blood pressure reading due to change in activity or emotions



## Chapter 8: Diseases of Respiratory System

- Pneumonia
- Chronic obstructive pulmonary disease (COPD)
- Asthma
- Pleural effusion
- Respiratory Failure
- Influenza



## Chapter 9: Diseases of Digestive System

- Gastroesophageal reflux disease (GERD)
- Cholelithiasis and cholecystitis
- Hernias



## Case 1

Established patient here today for head congestion, cough, low grade fever, chills, and sweats, which have become worse over the last five days. Felt better after two days but then got worse again. She was exposed to a dog on Tuesday and symptoms started two days later. She has a history of recurrent/chronic sinusitis.

PMH/FamHx/SocHx reviewed. All other ROS negative beyond the above.

Vital signs as listed above. Pleasant female NAD. Voice is nasal. Nares are completely occluded despite using Nasonex. Oropharynx reveals a moderate amount of yellow mucus drainage, mildly hyperemic mucosa. TMs and EACs normal. Neck is supple with bilateral anterior cervical lymphadenopathy, minimally tender, no rigidity. She has tenderness over the nasal bridge and left side of the forehead.

### Assessment & Plan

Acute sinusitis—Bactrim DS 1 p.o. b.i.d. times 10 days. Referral to Dr. Milligan. I have asked her to increase her Nasonex to twice per day. Medications and side effects reviewed with patient and patient voices understanding.





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**ICD-9-CM Code: 461.9**



# Case 2

**Chief Complaints/Concerns:** Patient is here to follow up on chronic illnesses

1. Diabetes Sugars are: avg 170 Readings: 139, 192, 143, 149, 237, 151, 183, 210, 215. Was given Novolin® samples and was taking same dose as when taking Novolog®. Ran out of insurance, so ran out of all meds. Sugar drop seen, but unable to get to machine to check reading. Had to get sugar in system right away.

## Review of Systems

**Constitutional:** No fever, fatigue, night sweats. No significant weight loss or gain.

**HEENT:** No vision changes, no chronic nasal congestion, no hearing loss.

**Respiratory:** No wheezes or cough respirations are 20/minute.

**Neuro/Psychiatric:** Negative for headache, psychiatric/emotional problems. Lightheadedness/dizziness.

**Dermatologic:** No unusual rashes.

**Vital Signs:** BP 130/78 Weight 150.0

## Assessment/Plan

1. Diabetes, type 2 Fair Control with the long term use of insulin. Will not make drastic changes due to the fact pt was out of meds.



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**ICD-9-CM Codes:**  
250.00, V58.67

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1. **Diabetes, type 2 Fair Control** with the **long term use of insulin.** Will not make drastic changes due to the fact pt was out of meds.



## The End

