

ICD-10 Codes (Draft)

ICD-10 Codes For Sepsis

Sepsis Definition #1:

Denominator Codes:

ICD-9 Code		ICD-10 Code	
038.0	Streptococcal septicemia	A40.0	Sepsis due to streptococcus, group A
		A40.1	Sepsis due to streptococcus, group B
	No code	A40.8	Other streptococcal sepsis
	No code	A40.9	Streptococcal sepsis, unspecified
038.10	Staphylococcal septicemia, unspecified	A41.2	Sepsis due to unspecified staphylococcus
038.11	Methicillin susceptible Staphylococcus aureus septicemia (includes staphylococcus aureus septicemia NOS)	A41.0	Sepsis due to Staphylococcus aureus
038.12	Methicillin resistant Staphylococcus aureus septicemia	A41.0Z16	Sepsis due to Staphylococcus aureus Infection with drug resistant microorganisms
038.19	Other staphylococcal septicemia	A41.1	Sepsis due to other specified staphylococcus
038.2	Pneumococcal septicemia [Streptococcus pneumoniae septicemia]	A40.3	Sepsis due to Streptococcus pneumoniae
038.3	Septicemia due to anaerobes	A41.4	Sepsis due to anaerobes
038.40	Septicemia due to gram-negative organism, unspecified (includes gram-negative septicemia NOS)	A41.50	Gram-negative sepsis, unspecified
038.41	Septicemia due to Hemophilus influenza [H. influenza]	A41.3	Sepsis due to Hemophilus influenza
038.42	Septicemia due to Escherichia coli [E. coli]	A41.51	Sepsis due to Escherichia coli

038.43	Septicemia due to pseudomonas	A41.52	Sepsis due to pseudomonas
038.44	Septicemia due to serratia	A41.53	Sepsis due to serratia
038.49	Septicemia due to other gram-negative organisms	A41.59	Other gram-negative sepsis
	No code	A41.81	Sepsis due to Enterococcus
038.8	Other specified septicemias	A41.89	Other specified sepsis
038.9	Unspecified septicemia	A41.9	Sepsis, unspecified
995.92	Severe sepsis (SIRS due to infectious process with acute organ dysfunction)	R65.20	Severe sepsis without septic shock
995.92	Severe sepsis (SIRS due to infectious process with acute organ dysfunction)	R65.21	Severe sepsis with septic shock

Numerator:

Number of Sepsis Patients who expired from Denominator.

Sepsis Definition #2:

Denominator Codes:

Same codes stated above for identifying the sepsis patient population excluding those with admission day orders for no code, or comfort care only.

Numerator:

Number of Sepsis Patients who expired excluding those with admission day orders for no code, or comfort care only from Denominator.

ICD 10 Codes for Early Elective Deliveries <39 weeks

Denominator

ICD-9 Code		ICD-10 Code	
V27.0	Single Live Newborn	Z37.0	Patients delivering Single Live Birth with ≥ 37 weeks and <39 weeks completed excluding possible conditions justifying elective delivery prior to 39 weeks of gestation – Refer Table (TBD)

Numerator:

ICD-9 Code		ICD-10 Code	
73.01	Medical induction of labor	10900ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Open Approach OR
		10903ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception Percutaneous Approach OR
		10904ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception Percutaneous Endoscopic Approach OR
		10907ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception Via Natural or Artificial Opening OR
		10908ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception Via Natural or Artificial Opening Endoscopic
73.1	Medical induction of labor	0U7C7ZZ	Dilation of Cervix, Via Natural or Artificial Opening
73.4	Medical induction of labor	3E030VJ	Introduction of Other Hormone into Peripheral Vein open approach OR
		3E033VJ	Introduction of Other Hormone into Peripheral Vein Percutaneous Approach OR
		3E040VJ	Introduction of Other Hormone into Central Vein open Approach OR
		3E043VJ	Introduction of Other Hormone into Central Vein Percutaneous Approach OR

		3E050VJ 3E053VJ	Introduction of Other Hormone into Peripheral Artery (open) OR Introduction of Other Hormone into Peripheral Artery (Percutaneous) OR
		3E060VJ 3E063VJ	Introduction of Other Hormone into central Artery (open) OR Introduction of Other Hormone into central Artery (percutaneous) OR
		3E0DXGC	Introduction of Other Therapeutic Substance into Mouth and Pharynx, External Approach
74.0	Cesarean Section	10D00Z0	Extraction of Products of Conception, Classical, Open Approach
74.1	Cesarean Section	10D00Z1	Extraction of Products of Conception, Low Cervical, Open Approach
74.2	Cesarean Section	10D00Z2	Extraction of Products of Conception, Extraperitoneal, Open Approach
74.4	Cesarean Section	10D00Z0	Extraction of Products of Conception, Classical, Open Approach
74.99	Cesarean Section	10D00Z0 10D00Z1 10D00Z2	This code can convert into any of the given codes

ICD 10 Codes for Cesarean Rate for Low Risk, First Birth Women (NTSV CS Rate)

Denominator

ICD-9 Code		ICD-10 Code	
V27.0	Single Live Newborn	Z37.0	Single Live Birth (Nulliparous delivered in vertex presentation with 37 weeks or more gestation completed) Excluded population: Contraindication of vaginal delivery defined by the ICD-10 codes (Exclusion Table TBD)

Numerator:

ICD-9 Code		ICD-10 Code	
74.0	Cesarean Section	10D00Z0	Extraction of Products of Conception, Classical, Open Approach
74.1	Cesarean Section	10D00Z1	Extraction of Products of Conception, Low Cervical, Open Approach
74.2	Cesarean Section	10D00Z2	Extraction of Products of Conception, Extraperitoneal, Open Approach
74.4	Cesarean Section	10D00Z0	Extraction of Products of Conception, Classical, Open Approach
74.99	Cesarean Section	10D00Z0 10D00Z1 10D00Z2	This code can convert into any of the given codes

ICD 10 Codes for OB Hemorrhage

Denominator (OB Hemorrhage Measure #1):

All Women during the birth admission (>20 weeks of gestation) and were discharged in the time period identified by using the following codes

ICD-9 Code		ICD-10 Code	
V27.0	Single Live Newborn	Z37.0	Single Live birth
V27.2	Twin Live births	Z37.2	Twin, both Live births
V27.5	Multiple Live births	Z37.59	Multiple Live births

Numerator (OB Hemorrhage Measure # 1):

Total Number of women in the denominator who received \geq units of RBCs

Procedures/ Diagnosis	ICD-9 Code	ICD-10 Code	Definitions
RBC Transfusion Codes	99.00	30233NO	Transfusion of Red Blood Cells into Peripheral Vein, Percutaneous Approach
		30243NO	Transfusion of Autologous Red Blood Cells into Central Vein, Percutaneous Approach
		30253NO	Transfusion of Autologous Red Blood Cells into Peripheral Artery, Percutaneous Approach
		30263NO	Transfusion of Autologous Red Blood Cells into Central Artery, Percutaneous Approach

Other RBC Transfusion Codes	99.04	30233N1	Transfusion of Nonautologous Red Blood Cells into Peripheral Vein, Percutaneous Approach
		30233P1	Transfusion of Nonautologous Frozen Red Blood Cells into Peripheral Vein, Percutaneous Approach
		30243N1	Transfusion of Nonautologous Red Blood Cells into Central Vein, Percutaneous Approach
		30243P1	Transfusion of Nonautologous Frozen Red Blood Cells into Central Vein, Percutaneous Approach
		30253N1	Transfusion of Nonautologous Red Blood Cells into Peripheral Artery, Percutaneous Approach
		30253P1	Transfusion of Nonautologous Frozen Red Blood Cells into Peripheral Artery, Percutaneous Approach
		30263N1	Transfusion of Nonautologous Red Blood Cells into Central Artery, Percutaneous Approach
		30263P1	Transfusion of Nonautologous Frozen Red Blood Cells into Central Artery, Percutaneous Approach

Denominator (OB Hemorrhage Measure #2)

Following codes to identify all possible obstetric Hemorrhage Case

Procedures/ Diagnosis	ICD-9 Code	ICD-10 Code	Definitions
Abruptio, previa or antepartum hemorrhage	641.00 thru 641.93	044.00	Placenta previa specified as without hemorrhage, unspecified trimester
		044.01	Placenta previa specified as without hemorrhage, First trimester
		044.02	Placenta previa specified as without hemorrhage, Second trimester
		044.03	Placenta previa specified as without hemorrhage, Third trimester
		044.10	Placenta previa with hemorrhage, unspecified trimester
		044.11	Placenta previa with hemorrhage, First trimester
		044.12	Placenta previa with hemorrhage, Second trimester
		044.13	Placenta previa with hemorrhage, Third trimester
		045.8X9	Other premature separation of placenta, unspecified trimester
		045.8X1	Other premature separation of placenta, First trimester
		045.8X2	Other premature separation of placenta, Second trimester
		045.8X3	Other premature separation of placenta, Third trimester
		045.91	Premature separation of placenta, unspecified, First trimester
		045.92	Premature separation of placenta, unspecified, Second trimester
		045.93	Premature separation of placenta, unspecified, Third trimester
		046.009	
		046.019	Antepartum hemorrhage with different coagulation defects, unspecified,
		046.029	unspecified trimester
		046.099	
		045.001 to 046.093 and 067.0 046.8X9	Antepartum hemorrhage associated with coagulation defects, delivered, with or without mention of antepartum condition

Hemorrhage	666.34	043.211 through 043.233	Third stage Hemorrhage with postpartum complications
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Numerator (OB Hemorrhage Measure # 2)

Following diagnosis and procedure codes of significant complications that are related to hemorrhage

Procedures/ Diagnosis	ICD-9 Code	ICD-10 Code	Definitions	
Hysterectomy, exploratory laparotomy	68.3	0UT94ZZ	Resection of Uterus, Percutaneous Endoscopic Approach	
	68.4	0UTC4ZZ	Resection of Cervix, Percutaneous Endoscopic Approach	
	54.12		0W3G0ZZ	
			0W3H0ZZ	Control Bleeding in Peritoneal Cavity, Open Approach OR
			0W3P0ZZ	Control Bleeding in Retroperitoneum, Open Approach OR
			0WJG0ZZ	Control Bleeding in Gastrointestinal Tract, Open Approach OR
			0WJH0ZZ	
	54.11		0WJJ0ZZ	Inspection of Peritoneal Cavity, Open Approach OR Inspection of Retroperitoneum, Open Approach OR
			0DJ00ZZ	Inspection of Pelvic Cavity, Open Approach
			0DJ60ZZ	
			0DJD0ZZ	
			0DJU0ZZ	
			0DJW0ZZ	Inspection of Upper Intestinal Tract, Open Approach OR
			0DJG0ZZ	
		0WJJ0ZZ	Inspection of Stomach, Open Approach OR Inspection of Lower Intestinal Tract, Open Approach OR	

		0WJP0ZZ 0WJR0ZZ	Inspection of Upper Omentum, Open Approach OR Inspection of Upper Peritoneum, Open Approach OR Inspection of Upper Peritoneal Cavity, Open Approach OR Inspection of Upper Pelvic Cavity, Open Approach OR Inspection of Gastrointestinal Tract, Open Approach OR Inspection of Genitourinary Tract, Open Approach
Acute Renal Failure	669.3, 584	090.4	Postpartum acute kidney failure
Pulmonary Edema/Fluid Overload	518.4 428.0 276.6	J81.0 I50.9 E87.71 E87.70 E87.79	Acute Pulmonary Edema Heart Failure –Unspecified Transfusion Associated Circulatory Overload Fluid Overload- unspecified Other Fluid Overload
Adult Respiratory Distress Syndrome	518.5 518.81 518.82 518.84 799.1	J95.821 J96.00 or J96.90 J80 J96.20 R09.2	Acute Postprocedural Respiratory Failure Acute Respiratory Failure or Respiratory Failure Acute Respiratory Distress Syndrome Acute or Chronic Respiratory Failure Respiratory Arrest
Disseminated Intravascular Coagulation (DIC)	286.6 286.9 666.3	D65 D68.8 or D68.9 072.3	Disseminated Intravascular Coagulation Coagulation defects Specific or unspecified Postpartum Coagulation defects
Ventilation	93.90 96.01	5A09357 5A09457 5A09557 09HN7BZ or 09HN8BZ	Assistance with Respiratory Ventilator < 24 consecutive hrs Assistance with Respiratory Ventilator 24-96 consecutive hrs Assistance with Respiratory Ventilator >96 consecutive hrs Insertion of Airway via natural or artificial opening

	96.02	OCHY7BZ or OCHY8BZ	Insertion of airway into mouth or throat via natural or artificial opening
	96.03	ODH57BZ or ODH58BZ	Insertion of airway into Esophagus via natural or artificial opening
	96.04	OBH17EZ or OBH18EZ	Insertion of Endotracheal airway into Trachea via natural or artificial opening
	96.05	OB717DZ OB718DZ	Dilation of Trachea with Intraluminal Device, Via Natural or Artificial Opening
		OBH07DZ	Dilation of Trachea with Intraluminal Device, Via Natural or Artificial Opening- Endoscope
	96.7	OWHQ7YZ	Insertion of Intraluminal Device into Tracheobronchial Tree, Via Natural or Artificial Opening
		5A1935Z	Insertion of Other Device into Respiratory Tract, Via Natural or Artificial Opening
		5A1945Z	Respiratory Ventilator < 24 consecutive hrs
		5A1955Z	Respiratory Ventilator 24-96 consecutive hrs
			Respiratory Ventilator >96 consecutive hrs