

## FREQUENTLY USED CODES

### Commonly Used ICD-9 Codes in Reproductive Healthcare

#### Female Reproductive Healthcare

##### Breast Conditions

610.0	Solitary cyst of breast
610.1	Fibrocystic change
611.0	Inflam disease of breast
611.2	Fissure of nipple
611.6	Galactorrhea
611.71	Mastodynia
611.72	Lump or mass in breast
611.79	Symptoms in breast NEC
793.80	Abnormal mammogram

##### Cervix

180.0	Endocervical cancer
180.1	Exocervical cancer
180.9	Cervical cancer, NOS
233.1	CIN 3 biopsy
622.0	Erosion/ectropion cervix
622.10	Dysplasia, NOS
622.11	CIN 1 biopsy
622.12	CIN 2 biopsy
622.2	Leukoplakia
622.7	Cervical polyp
795.00	AGC cytology
795.01	ASC-US cytology
795.02	ASC-H cytology
795.03	LSIL cytology
795.04	HSIL cytology
795.05	High risk HPV-DNA positive
795.06	Cytologic evidence of malignancy
795.07	Lacking transformation zone
795.08	Unsatisfactory cytology

##### Early Pregnancy

630	Hydatidiform mole
631	Blighted ovum
632	Missed abortion
633.10	Tubal pregnancy
634.91	Incomplete SAB
634.92	Complete SAB
635.90	Therapeutic abortion (TAB)
640.00	Threatened SAB

##### Endometriosis

617.0	Adenomyosis
617.3	Pelvic endometriosis
617.6	Endometriosis in scar
617.9	Endometriosis NOS

##### Gyn Endocrine

704.1	Hirsutism
256.31	Premature menopause
256.4	PCOS
278.00	Obesity, unspecified
278.01	Obesity, morbid
278.02	Overweight
307.50	Eating Disorder, unspecified

##### Infertility

628.0	Infertility-anovulation
628.1	Infertility-pituitary origin
628.2	Infertility-tubal origin
628.3	Infertility-uterine origin
628.4	Infertility-cervical origin
628.9	Female infertility, NOS

##### Menopause

627.0	Perimenopausal menorrhagia
627.1	Postmenopausal bleeding
627.2	Menopausal syndrome
627.3	Atrophic vaginitis
627.4	Symptoms w artificial menopause
627.9	Menopausal disorder NOS

##### Menstrual Disorders

625.4	Premenstrual syndrome
626.0	Amenorrhea
626.1	Oligomenorrhea
626.2	Menorrhagia
626.3	Pubertal menorrhagia
626.4	Irregular menstruation
626.5	Intermenstrual bleeding
626.6	Metrorrhagia
626.7	Postcoital bleeding
626.9	Menstrual disorder, NOS

##### Ovary and Adnexa

182.3	Ovarian cancer
620.0	Follicular cyst of ovary
620.1	Corpus luteum cyst
620.2	Ovarian cyst, NOS
620.5	Torsion of ovary or tube
620.9	Noninflam. disorder ovary, NOS

##### Pain Syndromes

789.04	Abdominal pain, LLQ
789.05	Abdominal pain, RLQ
789.09	Abdominal pain, bilateral
625.0	Dyspareunia
625.1	Vaginismus
625.2	Mittelschmerz
625.3	Dysmenorrhea
625.70	Vulvodynia, NOS
625.71	Vulvar vestibulitis
625.9	Pelvic pain

##### Uterus

182.0	Endometrial cancer
218.9	Uterine myoma
621.0	Endometrial polyp
621.30	Endometrial hyperplasia
621.4	Hematometra
621.5	Asherman's syndrome
621.6	Malposition of uterus
621.9	Disorder of uterus, NOS

##### Urinary Tract

595.1	Interstitial cystitis
597.81	Urethral syndrome
625.6	Stress incontinence
788.30	Urinary incontinence, unspecified
788.31	Urge incontinence
788.33	Mixed incontinence

##### Vagina

623.0	Dysplasia of vagina (VaIN)
623.3	Tight hymenal ring
623.5	Noninfectious leukorrhea
623.6	Vaginal hematoma
623.8	Vaginal cyst
623.9	Noninflammatory disorder, NOS

##### Vulva

184.4	Vulvar neoplasm, malignant
221.2	Vulvar neoplasm, benign
233.32	VIN 3
624.01	VIN 1
624.02	VIN 2
624.5	Hematoma of vulva
624.6	Polyp of labia and vulva
624.9	Noninflam dis vulva, NOS
698.3	Squamous cell hyperplasia (LSC)
701.0	Lichen sclerosis (LS)

#### Male Reproductive Healthcare

099.40	Nonspecific urethritis (NGU)
569.49	Proctitis (anus/rectum)
604.90	Epididymitis: unspecified
607.9	Disorder of penis: unspecified
608.9	Scrotal pain (disorder of male genital organs, unspecified)
788.7	Urethral discharge

#### Contraceptive Complications

V 26.51	Tubal ligation status
V 26.52	Vasectomy status
V 45.51	Presence of IUD
V 45.52	Presence of implant
996.30	Mechanical complication of implant
996.32	Mechanical comp IUD
996.65	Infection due to IUD

#### General Complications

780.2	Syncope (vasovagal)
995.27	Drug allergy or hypersensitivity
998.11	Hemorrhage complicating procedure
998.59	Post-operative infection

Key: See Page 4

# Icd 9 Codes 2011

**Carol J. Buck**



## **Icd 9 Codes 2011:**

*ICD-9-CM Inpatient Coding Reference and Study Guide* Ba Kobayashi, 2010-07 If you need to have a strong understanding of how ICD 9 CM diagnosis and procedure codes are determined then you have chosen the right book ICD 9 CM Inpatient Coding Reference and Study Guide The author designed a book that goes beyond the fundamentals that gets into the details of ICD 9 CM diagnosis and procedure code assignment as would be experienced on the job This user friendly reference teaches coders how to handle many coding situations while also being comprehensive enough to teach someone with a basic knowledge of medical coding how to move to the next level of advanced inpatient coding Updated every year to reflect the annual ICD 9 CM coding changes the text enables HIM professionals to master the concepts of medical coding while also gaining critical knowledge to pass the CCS exam administered by AHIMA and the CPC H exam from the AAPC The book also serves as an excellent desk reference and resource for coders who need to refresh their ICD 9 CM coding skills Among the topics covered in Volume 1 are inpatient coding guidelines coding conventions coding tables and a drug reference However the heart of this manual is the body system analysis based on chapters 1 17 of the Tabular list in Volume I of the ICD 9 CM Official Coding Guidelines The chapters are categorized by body system such as respiratory digestive et al The chapters in this study guide follow the same sequence as the Official Coding Guidelines All chapters in addition to highlighting basic coding guidelines contain situation based coding tips and coding examples A quiz follows each chapter reinforcing concepts in a rigorous manner that applies directly to the professional coding environment The book also contains a selective discussion of invasive procedures that the coder will most likely encounter on the job and on the exam At the end of ICD 9 CM Inpatient Coding Reference and Study Guide are 15 case studies providing the reader with an opportunity to assess their ICD 9 CM coding skill set and speed at coding inpatient medical records Each record contains a face sheet history physical progress notes and answer sheet Some of the case studies contain ER reports consultations as well as operative and pathology reports The answer key at the end of this study guide contains a rationale for all code assignments 456 short answer questions 116 multiple choice questions 15 full medical record case studies Each question is highly relevant and reflects a coding situation most hospital based inpatient coders will face The text strives to ensure the reader understands every diagnosis and procedure discussed thorough discussion of symptoms standard treatment protocols and medications Coding examples and quizzes help clarify the information presented Linda Kobayashi BA RHIT CCS has been a coder and coding manager for almost 20 years Since 1998 Ms Kobayashi has owned and operated Codebusters Inc a nationwide coding consulting company Widely regarded as a medical coding and auditing expert she has conducted workshops on a variety of coding topics including CCS Exam preparation workshops Throughout her career the author has remained professionally active as an AHIMA member as well as a member of her state association CHIA California health Information Association Her formal training includes a teaching credential from California State University Los Angeles a B A degree in English Literature

from University of California Los Angeles an RHIT from AHIMA after completing the RHIT program at East Los Angeles College and a CCS certificate from AHIMA Extensive experience as a hands on coder auditor and educator and has given the author the expertise to help coders prepare for the professional coding environment 2012 ICD-9-CM for Physicians, Volumes 1 and 2 Professional Edition - E-Book Carol J. Buck, 2011-10-20 Elsevier and the American Medical Association have partnered to co publish this ICD 9 CM reference by Carol J Buck Code efficiently and effectively with Carol J Buck s 2012 ICD 9 CM for Physicians Volumes 1 2 Professional Edition Combining Netter s Anatomy artwork and the 2011 Official Guidelines for Coding and Reporting OCGR with a format designed by coders for coders this handy spiral bound reference helps you easily access the information you need to stay up to date and ensure the most accurate billing and optimal reimbursement in physician based coding Plus you can take this resource into your certification exams for enhanced testing support Exclusive focus on ICD 9 CM Volumes 1 and 2 provides clear concise coverage of physician based and outpatient coding essentials Convenient spiral binding makes it easy to access the information you need UNIQUE Full color Netter s Anatomy artwork clarifies complex anatomic information to help you appropriately code related procedures Use Additional Digit s symbol in the index identifies codes that require an additional digit to remind you to check the tabular Full color design incorporates color coded symbols to help you quickly find the information you need The 2011 Official Guidelines for Coding and Reporting OCGR are listed within the lists of codes and in a separate index for fast easy access to the coding rules when you need them Items provide detailed information on common diseases and conditions helping you code more effectively Symbols throughout the text alert you to new revised and deleted codes and clearly identify codes that require special consideration before assigning including unspecified codes includes and excludes use additional code first and codes that cannot be assigned as first listed diagnoses Additional hints tips and definitions within specific codes provide extra guidance in coding anatomy pathophysiology or other coding directions Guide to the Updates enables you to reference all annual coding changes at a glance References to the American Hospital Association s Coding Clinics help you find expanded information about specific codes and their usage Age and Sex edits alert you to codes that are used only with patients of a specific age or sex helping to ensure accurate reporting Omit and Code Also codes highlight government text needing special attention Coding updates on the companion codingupdates.com website keep you informed of changes to ICD codes Authorized support you can take into your certification exams to enhance your testing experience and help you ensure certification success **2012 ICD-9-CM for Hospitals, Volumes 1, 2 and 3 Professional Edition - E-Book** Carol J. Buck, 2011-10-20 Elsevier and the American Medical Association have partnered to co publish this ICD 9 CM reference by Carol J Buck Code efficiently and effectively with Carol J Buck s 2012 ICD 9 CM for Hospitals Volumes 1 2 3 Professional Edition Combining Netter s Anatomy artwork and the 2011 Official Guidelines for Coding and Reporting OCGR with a format designed by coders for coders this handy spiral bound reference helps you easily access the information you need to stay up to date and ensure the most

accurate billing and maximum reimbursement in physician based and inpatient coding Plus you can take this resource into your certification exams for enhanced testing support     **"Code of Massachusetts regulations, 2011"** ,2011 Archival snapshot of entire looseleaf Code of Massachusetts Regulations held by the Social Law Library of Massachusetts as of January 2020     *2014 ICD-9-CM for Physicians, Volumes 1 and 2, Standard Edition - E-Book* Carol J. Buck,2016-07-04 Codingupdates com companion website includes ICD 9 CM coding updates an ICD 9 CM to ICD 10 CM crosswalk and MS DRG information     Federal Register ,2013-05     **Assessing Health Outcomes Among Veterans of Project SHAD (Shipboard Hazard and Defense)** National Academies of Sciences, Engineering, and Medicine,Institute of Medicine,Board on the Health of Select Populations,Committee on Shipboard Hazard and Defense II (SHAD II),2016-02-15 Between 1963 and 1969 the U S military carried out a series of tests termed Project SHAD Shipboard Hazard and Defense to evaluate the vulnerabilities of U S Navy ships to chemical and biological warfare agents These tests involved use of active chemical and biological agents stimulants tracers and decontaminants Approximately 5 900 military personnel primarily from the Navy and Marine Corps are reported to have been included in Project SHAD testing In the 1990s some veterans who participated in the SHAD tests expressed concerns to the Department of Veterans Affairs VA that they were experiencing health problems that might be the result of exposures in the testing These concerns led to a 2002 request from VA to the Institute of Medicine IOM to carry out an epidemiological study of the health of SHAD veterans and a comparison population of veterans who had served on similar ships or in similar units during the same time period In response to continuing concerns Congress in 2010 requested an additional IOM study This second study expands on the previous IOM work by making use of additional years of follow up and some analysis of diagnostic data from Medicare and the VA health care system     **2014 ICD-9-CM for Hospitals, Volumes 1, 2 and 3 Standard Edition - E-Book** Carol J. Buck,2013-08-30 Codingupdates com companion website includes ICD 9 CM coding updates an ICD 9 CM to ICD 10 CM crosswalk and MS DRG information     *2014 ICD-9-CM for Physicians, Volumes 1 and 2 Professional Edition - E-Book* Carol J. Buck,2013-08-28 Codingupdates com companion website includes ICD 9 CM coding updates an ICD 9 CM to ICD 10 CM crosswalk and MS DRG information     **Emerging Infectious Diseases** ,2012     *2014 ICD-9-CM for Hospitals, Volumes 1, 2 and 3 Professional Edition - E-Book* Carol J. Buck,2013-08-28 Codingupdates com companion website includes ICD 9 CM coding updates an ICD 9 CM to ICD 10 CM crosswalk and MS DRG information     Injury Research Guohua Li,Susan P. Baker,2012-01-07 Injury is recognized as a major public health issue worldwide In most countries injury is the leading cause of death and disability for children and young adults age 1 to 39 years Each year in the United States injury claims about 170 000 lives and results in over 30 million emergency room visits and 2 5 million hospitalizations Injury is medically defined as organ tissue damages inflicted upon oneself or by an external agent either accidentally or deliberately Injury encompasses the undesirable consequences of a wide array of events such as motor vehicle crashes poisoning burns falls and drowning medical error

adverse effects of drugs suicide and homicide The past two decades have witnessed a remarkable growth in injury research both in scope and in depth To address the tremendous health burden of injury morbidity and mortality at the global level the World Health Organization in 2000 created the Department of Injury and Violence Prevention which has produced several influential reports on violence traffic injury and childhood injury The biennial World Conference on Injury Control and Safety Promotion attracts a large international audience and has been successfully convened nine times in different countries In the United States the National Center for Injury Prevention and Control became an independent program of the federal Centers for Disease Prevention and Control in 1997 Since then each state health department has created an office in charge of injury prevention activities and over a dozen universities have established injury control research centers This volume will fill an important gap in the scientific literature by providing a comprehensive and up to date reference resource to researchers practitioners and students working on different aspects of the injury problem and in different practice settings and academic fields

*Kinn's The Administrative Medical Assistant - E-Book* Alexandra Patricia Adams,2013-11-28 Prepare for a successful career in medical assisting Kinn s The Administrative Medical Assistant 8th Edition helps you learn the real world administrative skills essential to working in the health care office In depth coverage ranges from professional behavior and interpersonal skills to billing and coding electronic health records and management of practice finances Written by administrative medical assisting expert Alexandra Adams this classic resource also includes an Evolve companion website with exercises and activities videos review questions for the CMA and RMA certification exams and an interactive portfolio builder Step by step illustrated procedures make it easier to learn and understand medical assisting skills and include rationales for each step Threaded case scenarios let you develop critical thinking skills and apply concepts learned in each chapter to realistic administrative situations Study Guide includes a variety of exercises to test your knowledge and critical thinking skills case scenarios from the book and a Procedure Checklists Manual Sold separately Emergency Preparedness and Assisting with Medical Emergencies chapter prepares you to take action during crises and urgent situations Detailed learning objectives and vocabulary with definitions in each chapter help you study more effectively with connections icons linking concepts in the text to exercises in the study guide and on the Evolve companion website Patient education and legal and ethical issues are described in relation to the Medical Assistant s job A Portfolio Builder on the Evolve website helps you demonstrate proficiency to potential employers NEW Charting examples within the procedures are highlighted for easier learning UPDATED coverage of the Electronic Health Record ensures that you are familiar with the technology you ll use on the job

*ICD-9-CM Coding: Theory and Practice with ICD-10, 2013/2014 Edition - E-Book* Karla R. Lovaasen,Jennifer Schwerdtfeger,2012-08-20 Learn to code effectively with ICD 9 CM medical coding and gain a thorough introduction to ICD 10 CM PCS coding with one book ICD 9 CM Coding 2013 2014 Edition combines basic coding principles with proven practical insight and the ICD 9 CM and ICD 10 CM ICD 10 PCS Official Guidelines for Coding and Reporting to prepare you

for the upcoming implementation of ICD 10 CM PCS Whether you re learning to code for the first time or making the transition from ICD 9 CM to ICD 10 CM PCS leading medical coding authors Karla Lovaasen and Jennifer Schwerdtfeger deliver the fundamental understanding you need to succeed in hospital and physician settings Both ICD 9 CM codes and ICD 10 CM ICD 10 PCS codes are shown in all coding exercises and examples including answer keys Emphasis on ICD 10 CM and ICD 10 PCS coding prepares you for the upcoming implementation of ICD 10 MS DRG documentation and reimbursement details guide you through this key component of the coding process Line coding exercises and activities challenge you to apply concepts to solve problems ICD 10 Official Guidelines for Coding and Reporting OGCR are included in each coding chapter immediately following the ICD 9 CM coding guidelines Full color A P content disease coverage procedure guidelines and drug data ensure that you re familiar with key topics affecting medical coding Medical record coverage introduces the records and documents you ll encounter on the job Updated Coding Clinic references direct you to the definitive coding resource from the American Hospital Association AHA A companion Evolve website provides convenient online access to the OGCR medical and surgical root operations definitions a MS DRG list partial answer keys and more **2015 ICD-9-CM for Hospitals, Volumes 1, 2 and 3 Standard Edition - E-Book** Carol J. Buck,2015-01-22 UPDATED Coding Clinic citations provide official ICD 9 CM coding advice ensuring accurate coding by identifying the year quarter and page number for information about specific codes in the AHA s Coding Clinic for ICD 9 CM *Practical Predictive Analytics and Decisioning Systems for Medicine* Gary D. Miner,Linda A. Miner,Mitchell Goldstein,Robert Nisbet,Nephi Walton,Pat Bolding,Joseph Hilbe,Thomas Hill,2014-09-27 With the advent of electronic medical records years ago and the increasing capabilities of computers our healthcare systems are sitting on growing mountains of data Not only does the data grow from patient volume but the type of data we store is also growing exponentially Practical Predictive Analytics and Decisioning Systems for Medicine provides research tools to analyze these large amounts of data and addresses some of the most pressing issues and challenges where data integrity is compromised patient safety patient communication and patient information Through the use of predictive analytic models and applications this book is an invaluable resource to predict more accurate outcomes to help improve quality care in the healthcare and medical industries in the most cost efficient manner Practical Predictive Analytics and Decisioning Systems for Medicine provides the basics of predictive analytics for those new to the area and focuses on general philosophy and activities in the healthcare and medical system It explains why predictive models are important and how they can be applied to the predictive analysis process in order to solve real industry problems Researchers need this valuable resource to improve data analysis skills and make more accurate and cost effective decisions Includes models and applications of predictive analytics why they are important and how they can be used in healthcare and medical research Provides real world step by step tutorials to help beginners understand how the predictive analytic processes works and to successfully do the computations Demonstrates methods to help sort through data to make better

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**Assessing Impairment** Sam Goldstein, Jack A. Naglieri, 2009-06-15 Impairment and disability are widely used terms yet considerable disagreement exists as to their relationship especially when impairment means different things to different professionals in the fields of mental health medicine and education Although diagnostic criteria for various disorders are clearly detailed in the DSM IV and elsewhere criteria for impairment remain elusive And patients with severe limitations but minimal symptoms or the reverse further complicate the discussion The first in depth treatment of the theory definition and evaluation of this core concept Assessing Impairment From Theory to Practice cuts through the confusion and cross talk Leading scholars and clinicians offer a robust evidence base for a much needed reconceptualization of impairment within the context of diagnosis and disability arguing for a wide ranging quality of life perspective This contextual approach to assessment goes beyond mere symptom counting resulting in more accurate diagnosis targeted interventions and improved patient functioning Within this concise but comprehensive volume coverage focuses on key areas including Current conceptualizations from the DSM IV and other medical models Methodologies for measuring symptom severity and impairment Social behavioral issues such as resilience adaptive behaviors and family environment Developmental issues across the life span Legal and ethical questions and civil rights issues Impairment and disability as they relate to trauma The interdisciplinary model proposed in Assessing Impairment gives clinicians vital tools for working with the unique limitations and strengths of every patient Child school and educational psychologists will find it particularly useful given the critical importance of early detection and the complexity of young people's lives

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