

# Local Coverage Determination (LCD) for Serum Magnesium (L16734)

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## Contractor Information

<b>Contractor Name</b> Noridian Administrative Services, LLC <a href="#">Back to Top</a>	<b>Contractor Number</b> 00320	<b>Contractor Type</b> FI
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## LCD Information

### Document Information

**LCD ID Number**  
L16734

**Primary Geographic Jurisdiction**  
Minnesota

**LCD Title**  
Serum Magnesium

**Oversight Region**  
Region VIII

**Contractor's Determination Number**  
A2004.07 R13

**Original Determination Effective Date**  
For services performed on or after 08/15/2004

**AMA CPT/ADA CDT Copyright Statement**  
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**Original Determination Ending Date**

**Revision Effective Date**  
For services performed on or after 10/01/2011

**Revision Ending Date**

### CMS National Coverage Policy

Title XVIII of the Social Security Act, Section 1862(a)(7). This section excludes routine physical examinations.

Title XVIII of the Social Security Act, Section 1862(a)(1)(A). This section allows coverage and payment for only those services that are considered to be medically reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.

Title XVIII of the Social Security Act, Section 1833(e). This section prohibits Medicare payment for any claim, which lacks the necessary information to process the claim.

### Indications and Limitations of Coverage and/or Medical Necessity

Note: Providers should seek information related to National Coverage Determinations (NCD) and other Centers for Medicare & Medicaid Services (CMS) instructions in CMS Manuals. This LCD only pertains to the contractor's discretionary coverage related to this service.

Magnesium is a mineral required by the body for the use of adenosine triphosphate (ATP) as a source of energy. It is also necessary for neuromuscular irritability and blood clotting. Magnesium deficiency produces neuromuscular disorders. It may cause weakness, tremors, tetany, and convulsions. Hypomagnesemia is associated with hypocalcemia, hypokalemia, long-term hyperalimentation, intravenous therapy, diabetes mellitus, especially during treatment of ketoacidosis; alcoholism and other types of malnutrition; malabsorption; hyperparathyroidism; dialysis; pregnancy; and hyperaldosteronism. The following are other conditions which may cause magnesium deficiencies.

- Renal loss of magnesium occurs with cis-platinum therapy.

- Hypomagnesemia may also be induced by amphotericin or anti-EGFR (some monoclonal antibodies) toxicity.
- Magnesium deficiency is described with cardiac arrhythmias. There is evidence that magnesium may cause arrhythmias.

**Indications:**

- Utilization of certain cardiac drugs which cause adverse effects in the presence of low magnesium (i.e., quinidine, procainamide, and disopyramide phosphate or Norpace). Patients taking these drugs should have their magnesium checked approximately once every six months.
- Long term parenteral nutrition. Patients on long term parenteral nutrition that are otherwise asymptomatic should have their serum magnesium checked monthly.
- Malabsorption syndrome. The frequency should depend on the severity of the syndrome, but once the patient's level is stabilized, a monthly check should be adequate.
- Renal loss secondary to diuretic use.
- Chronic alcoholism, diabetic acidosis, and renal tubular acidosis. These patients should be followed on an as needed basis according to their symptomatology. Without symptoms, they should be checked no more than annually.
- Chronic diarrhea, otherwise unexplained and persistent.
- Prolonged nasogastric suction greater than five days. Should have a magnesium check every two to three weeks.
- Cisplatin treatment.
- Amphotericin
- EGFR monoclonal antibodies
- Patients receiving IV magnesium therapy for a low serum level. Serum level should be monitored appropriately.
- Patients with hypocalcemia. If the hypocalcemia persists, the level should probably be checked on a six-month basis as long as the patient does not have symptoms of arrhythmias which would warrant closer follow up.
- Lethargy and confusion which are not otherwise explained. Once a patient has been diagnosed with processes such as Alzheimer or psychotic depression, etc., there is no indication to follow their magnesium level on a regular basis.
- Patients receiving oral magnesium in the face of impaired renal function should have their magnesium level checked on a monthly basis.
  - Pre-eclampsia
  - Unexplained muscular paralysis
  - Neuromuscular irritability
  - Blood clotting abnormalities
  - Long Q-T syndrome, torsades de pointes and ventricular arrhythmias.

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# Coding Information

## Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

012x	Hospital Inpatient (Medicare Part B only)
013x	Hospital Outpatient
014x	Hospital - Laboratory Services Provided to Non-patients
022x	Skilled Nursing - Inpatient (Medicare Part B only)
023x	Skilled Nursing - Outpatient
085x	Critical Access Hospital

## Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory; unless specified in the policy services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

030X	Laboratory - General Classification
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## CPT/HCPCS Codes

### GroupName

**The Section titled “Does the ‘CPT 30% Rule’ apply?” needs clarification. This rule comes from the AMA (American Medical Association), the organization that holds the copyrights for all CPT codes. The rule states that if, in a given section (e.g., surgery) or subsection (e.g., surgery, integumentary) of the CPT Manual, more than 30% of the codes are listed in the LMRP, then the short descriptors must be used rather than the long descriptors found in the CPT Manual.**

83735	MAGNESIUM
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## ICD-9 Codes that Support Medical Necessity

These are the **only** ICD-9-CM codes that support medical necessity:

249.00	SECONDARY DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.01	SECONDARY DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, UNCONTROLLED
249.10	SECONDARY DIABETES MELLITUS WITH KETOACIDOSIS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.11	SECONDARY DIABETES MELLITUS WITH KETOACIDOSIS, UNCONTROLLED
249.20	SECONDARY DIABETES MELLITUS WITH HYPEROSMOLARITY, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.21	SECONDARY DIABETES MELLITUS WITH HYPEROSMOLARITY, UNCONTROLLED
249.30	SECONDARY DIABETES MELLITUS WITH OTHER COMA, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.31	SECONDARY DIABETES MELLITUS WITH OTHER COMA, UNCONTROLLED
249.40	SECONDARY DIABETES MELLITUS WITH RENAL MANIFESTATIONS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.41	SECONDARY DIABETES MELLITUS WITH RENAL MANIFESTATIONS, UNCONTROLLED
249.50	SECONDARY DIABETES MELLITUS WITH OPHTHALMIC MANIFESTATIONS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.51	SECONDARY DIABETES MELLITUS WITH OPHTHALMIC MANIFESTATIONS, UNCONTROLLED
249.60	

	SECONDARY DIABETES MELLITUS WITH NEUROLOGICAL MANIFESTATIONS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.61	SECONDARY DIABETES MELLITUS WITH NEUROLOGICAL MANIFESTATIONS, UNCONTROLLED
249.70	SECONDARY DIABETES MELLITUS WITH PERIPHERAL CIRCULATORY DISORDERS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.71	SECONDARY DIABETES MELLITUS WITH PERIPHERAL CIRCULATORY DISORDERS, UNCONTROLLED
249.80	SECONDARY DIABETES MELLITUS WITH OTHER SPECIFIED MANIFESTATIONS, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.81	SECONDARY DIABETES MELLITUS WITH OTHER SPECIFIED MANIFESTATIONS, UNCONTROLLED
249.90	SECONDARY DIABETES MELLITUS WITH UNSPECIFIED COMPLICATION, NOT STATED AS UNCONTROLLED, OR UNSPECIFIED
249.91	SECONDARY DIABETES MELLITUS WITH UNSPECIFIED COMPLICATION, UNCONTROLLED
250.00	DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.01	DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.02	DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.03	DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.10	DIABETES WITH KETOACIDOSIS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.11	DIABETES WITH KETOACIDOSIS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.12	DIABETES WITH KETOACIDOSIS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.13	DIABETES WITH KETOACIDOSIS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.20	DIABETES WITH HYPEROSMOLARITY, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.21	DIABETES WITH HYPEROSMOLARITY, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.22	DIABETES WITH HYPEROSMOLARITY, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.23	DIABETES WITH HYPEROSMOLARITY, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.30	DIABETES WITH OTHER COMA, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.31	DIABETES WITH OTHER COMA, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.32	DIABETES WITH OTHER COMA, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.33	DIABETES WITH OTHER COMA, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.40	DIABETES WITH RENAL MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.41	DIABETES WITH RENAL MANIFESTATIONS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.42	DIABETES WITH RENAL MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.43	DIABETES WITH RENAL MANIFESTATIONS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.50	DIABETES WITH OPHTHALMIC MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.51	DIABETES WITH OPHTHALMIC MANIFESTATIONS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.52	

	DIABETES WITH OPHTHALMIC MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.53	DIABETES WITH OPHTHALMIC MANIFESTATIONS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.60	DIABETES WITH NEUROLOGICAL MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.61	DIABETES WITH NEUROLOGICAL MANIFESTATIONS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.62	DIABETES WITH NEUROLOGICAL MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.63	DIABETES WITH NEUROLOGICAL MANIFESTATIONS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.70	DIABETES WITH PERIPHERAL CIRCULATORY DISORDERS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.71	DIABETES WITH PERIPHERAL CIRCULATORY DISORDERS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.72	DIABETES WITH PERIPHERAL CIRCULATORY DISORDERS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.73	DIABETES WITH PERIPHERAL CIRCULATORY DISORDERS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.80	DIABETES WITH OTHER SPECIFIED MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.81	DIABETES WITH OTHER SPECIFIED MANIFESTATIONS, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.82	DIABETES WITH OTHER SPECIFIED MANIFESTATIONS, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.83	DIABETES WITH OTHER SPECIFIED MANIFESTATIONS, TYPE I [JUVENILE TYPE], UNCONTROLLED
250.90	DIABETES WITH UNSPECIFIED COMPLICATION, TYPE II OR UNSPECIFIED TYPE, NOT STATED AS UNCONTROLLED
250.91	DIABETES WITH UNSPECIFIED COMPLICATION, TYPE I [JUVENILE TYPE], NOT STATED AS UNCONTROLLED
250.92	DIABETES WITH UNSPECIFIED COMPLICATION, TYPE II OR UNSPECIFIED TYPE, UNCONTROLLED
250.93	DIABETES WITH UNSPECIFIED COMPLICATION, TYPE I [JUVENILE TYPE], UNCONTROLLED
252.00	HYPERPARATHYROIDISM, UNSPECIFIED
252.01	PRIMARY HYPERPARATHYROIDISM
252.02	SECONDARY HYPERPARATHYROIDISM, NON-RENAL
252.08	OTHER HYPERPARATHYROIDISM
252.1	HYPOPARATHYROIDISM
252.8	OTHER SPECIFIED DISORDERS OF PARATHYROID GLAND
252.9	UNSPECIFIED DISORDER OF PARATHYROID GLAND
255.10	HYPERALDOSTERONISM, UNSPECIFIED
255.11	GLUCOCORTICOID-REMEDIALBLE ALDOSTERONISM
255.12	CONN'S SYNDROME
255.13	BARTTER'S SYNDROME
255.14	OTHER SECONDARY ALDOSTERONISM
259.3	ECTOPIC HORMONE SECRETION NOT ELSEWHERE CLASSIFIED
260	KWASHIORKOR
261	NUTRITIONAL MARASMUS
262	OTHER SEVERE PROTEIN-CALORIE MALNUTRITION
263.0	MALNUTRITION OF MODERATE DEGREE
263.8	OTHER PROTEIN-CALORIE MALNUTRITION

263.9	UNSPECIFIED PROTEIN-CALORIE MALNUTRITION
275.2	DISORDERS OF MAGNESIUM METABOLISM
275.3	DISORDERS OF PHOSPHORUS METABOLISM
275.40	UNSPECIFIED DISORDER OF CALCIUM METABOLISM
275.41	HYPOCALCEMIA
275.42	HYPERCALCEMIA
275.49	OTHER DISORDERS OF CALCIUM METABOLISM
275.5	HUNGRY BONE SYNDROME
276.0	HYPEROSMOLALITY AND/OR HYPERNATREMIA
276.1	HYPOSMOLALITY AND/OR HYPONATREMIA
276.2	ACIDOSIS
276.4	MIXED ACID-BASE BALANCE DISORDER
276.50	VOLUME DEPLETION, UNSPECIFIED
276.51	DEHYDRATION
276.52	HYPOVOLEMIA
276.7	HYPERPOTASSEMIA
276.8	HYPOPOTASSEMIA
276.9	ELECTROLYTE AND FLUID DISORDERS NOT ELSEWHERE CLASSIFIED
278.8	OTHER HYPERALIMENTATION
286.9	OTHER AND UNSPECIFIED COAGULATION DEFECTS
289.50	DISEASE OF SPLEEN UNSPECIFIED
289.51	CHRONIC CONGESTIVE SPLENOMEGALY
289.52	SPLENIC SEQUESTRATION
289.53	NEUTROPENIC SPLENOMEGALY
289.59	OTHER DISEASES OF SPLEEN
293.0	DELIRIUM DUE TO CONDITIONS CLASSIFIED ELSEWHERE
293.1	SUBACUTE DELIRIUM
298.9	UNSPECIFIED PSYCHOSIS
303.00	ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM UNSPECIFIED DRINKING BEHAVIOR
303.01	ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM CONTINUOUS DRINKING BEHAVIOR
303.02	ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM EPISODIC DRINKING BEHAVIOR
303.03	ACUTE ALCOHOLIC INTOXICATION IN ALCOHOLISM IN REMISSION
303.90	OTHER AND UNSPECIFIED ALCOHOL DEPENDENCE UNSPECIFIED DRINKING BEHAVIOR
303.91	OTHER AND UNSPECIFIED ALCOHOL DEPENDENCE CONTINUOUS DRINKING BEHAVIOR
303.92	OTHER AND UNSPECIFIED ALCOHOL DEPENDENCE EPISODIC DRINKING BEHAVIOR
303.93	OTHER AND UNSPECIFIED ALCOHOL DEPENDENCE IN REMISSION
307.1	ANOREXIA NERVOSA
307.20	TIC DISORDER UNSPECIFIED
307.22	CHRONIC MOTOR OR VOCAL TIC DISORDER
307.50	EATING DISORDER UNSPECIFIED
307.51	BULIMIA NERVOSA
307.52	PICA
307.53	RUMINATION DISORDER
307.54	PSYCHOGENIC VOMITING
307.59	OTHER DISORDERS OF EATING
333.2	MYOCLONUS
333.3	TICS OF ORGANIC ORIGIN

336.1	VASCULAR MYELOPATHIES
345.60	INFANTILE SPASMS WITHOUT INTRACTABLE EPILEPSY
345.61	INFANTILE SPASMS WITH INTRACTABLE EPILEPSY
359.5	MYOPATHY IN ENDOCRINE DISEASES CLASSIFIED ELSEWHERE
359.81	CRITICAL ILLNESS MYOPATHY
359.89	OTHER MYOPATHIES
359.9	MYOPATHY UNSPECIFIED
401.0	MALIGNANT ESSENTIAL HYPERTENSION
401.1	BENIGN ESSENTIAL HYPERTENSION
401.9	UNSPECIFIED ESSENTIAL HYPERTENSION
402.00	MALIGNANT HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE
402.01	MALIGNANT HYPERTENSIVE HEART DISEASE WITH HEART FAILURE
402.10	BENIGN HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE
402.11	BENIGN HYPERTENSIVE HEART DISEASE WITH HEART FAILURE
402.90	UNSPECIFIED HYPERTENSIVE HEART DISEASE WITHOUT HEART FAILURE
402.91	UNSPECIFIED HYPERTENSIVE HEART DISEASE WITH HEART FAILURE
403.00	HYPERTENSIVE CHRONIC KIDNEY DISEASE, MALIGNANT, WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
403.01	HYPERTENSIVE CHRONIC KIDNEY DISEASE, MALIGNANT, WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
403.10	HYPERTENSIVE CHRONIC KIDNEY DISEASE, BENIGN, WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
403.11	HYPERTENSIVE CHRONIC KIDNEY DISEASE, BENIGN, WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
403.90	HYPERTENSIVE CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
403.91	HYPERTENSIVE CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.00	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, MALIGNANT, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.01	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, MALIGNANT, WITH HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.02	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, MALIGNANT, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.03	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, MALIGNANT, WITH HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.10	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, BENIGN, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.11	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, BENIGN, WITH HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.12	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, BENIGN, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.13	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, BENIGN, WITH HEART FAILURE AND CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.90	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.91	

	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITH HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE I THROUGH STAGE IV, OR UNSPECIFIED
404.92	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITHOUT HEART FAILURE AND WITH CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
404.93	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE, UNSPECIFIED, WITH HEART FAILURE AND CHRONIC KIDNEY DISEASE STAGE V OR END STAGE RENAL DISEASE
405.01	MALIGNANT RENOVASCULAR HYPERTENSION
405.09	OTHER MALIGNANT SECONDARY HYPERTENSION
405.11	BENIGN RENOVASCULAR HYPERTENSION
405.19	OTHER BENIGN SECONDARY HYPERTENSION
405.91	UNSPECIFIED RENOVASCULAR HYPERTENSION
405.99	OTHER UNSPECIFIED SECONDARY HYPERTENSION
410.00	ACUTE MYOCARDIAL INFARCTION OF ANTEROLATERAL WALL EPISODE OF CARE UNSPECIFIED
410.01	ACUTE MYOCARDIAL INFARCTION OF ANTEROLATERAL WALL INITIAL EPISODE OF CARE
410.02	ACUTE MYOCARDIAL INFARCTION OF ANTEROLATERAL WALL SUBSEQUENT EPISODE OF CARE
410.10	ACUTE MYOCARDIAL INFARCTION OF OTHER ANTERIOR WALL EPISODE OF CARE UNSPECIFIED
410.11	ACUTE MYOCARDIAL INFARCTION OF OTHER ANTERIOR WALL INITIAL EPISODE OF CARE
410.12	ACUTE MYOCARDIAL INFARCTION OF OTHER ANTERIOR WALL SUBSEQUENT EPISODE OF CARE
410.20	ACUTE MYOCARDIAL INFARCTION OF INFEROLATERAL WALL EPISODE OF CARE UNSPECIFIED
410.21	ACUTE MYOCARDIAL INFARCTION OF INFEROLATERAL WALL INITIAL EPISODE OF CARE
410.22	ACUTE MYOCARDIAL INFARCTION OF INFEROLATERAL WALL SUBSEQUENT EPISODE OF CARE
410.30	ACUTE MYOCARDIAL INFARCTION OF INFEROPOSTERIOR WALL EPISODE OF CARE UNSPECIFIED
410.31	ACUTE MYOCARDIAL INFARCTION OF INFEROPOSTERIOR WALL INITIAL EPISODE OF CARE
410.32	ACUTE MYOCARDIAL INFARCTION OF INFEROPOSTERIOR WALL SUBSEQUENT EPISODE OF CARE
410.40	ACUTE MYOCARDIAL INFARCTION OF OTHER INFERIOR WALL EPISODE OF CARE UNSPECIFIED
410.41	ACUTE MYOCARDIAL INFARCTION OF OTHER INFERIOR WALL INITIAL EPISODE OF CARE
410.42	ACUTE MYOCARDIAL INFARCTION OF OTHER INFERIOR WALL SUBSEQUENT EPISODE OF CARE
410.50	ACUTE MYOCARDIAL INFARCTION OF OTHER LATERAL WALL EPISODE OF CARE UNSPECIFIED
410.51	ACUTE MYOCARDIAL INFARCTION OF OTHER LATERAL WALL INITIAL EPISODE OF CARE
410.52	ACUTE MYOCARDIAL INFARCTION OF OTHER LATERAL WALL SUBSEQUENT EPISODE OF CARE
410.60	TRUE POSTERIOR WALL INFARCTION EPISODE OF CARE UNSPECIFIED
410.61	TRUE POSTERIOR WALL INFARCTION INITIAL EPISODE OF CARE
410.62	TRUE POSTERIOR WALL INFARCTION SUBSEQUENT EPISODE OF CARE
410.70	SUBENDOCARDIAL INFARCTION EPISODE OF CARE UNSPECIFIED
410.71	SUBENDOCARDIAL INFARCTION INITIAL EPISODE OF CARE



410.72	SUBENDOCARDIAL INFARCTION SUBSEQUENT EPISODE OF CARE
410.80	ACUTE MYOCARDIAL INFARCTION OF OTHER SPECIFIED SITES EPISODE OF CARE UNSPECIFIED
410.81	ACUTE MYOCARDIAL INFARCTION OF OTHER SPECIFIED SITES INITIAL EPISODE OF CARE
410.82	ACUTE MYOCARDIAL INFARCTION OF OTHER SPECIFIED SITES SUBSEQUENT EPISODE OF CARE
410.90	ACUTE MYOCARDIAL INFARCTION OF UNSPECIFIED SITE EPISODE OF CARE UNSPECIFIED
410.91	ACUTE MYOCARDIAL INFARCTION OF UNSPECIFIED SITE INITIAL EPISODE OF CARE
410.92	ACUTE MYOCARDIAL INFARCTION OF UNSPECIFIED SITE SUBSEQUENT EPISODE OF CARE
411.81	ACUTE CORONARY OCCLUSION WITHOUT MYOCARDIAL INFARCTION
414.8	OTHER SPECIFIED FORMS OF CHRONIC ISCHEMIC HEART DISEASE
415.11	IATROGENIC PULMONARY EMBOLISM AND INFARCTION
415.19	OTHER PULMONARY EMBOLISM AND INFARCTION
425.4	OTHER PRIMARY CARDIOMYOPATHIES
427.0	PAROXYSMAL SUPRAVENTRICULAR TACHYCARDIA
427.1	PAROXYSMAL VENTRICULAR TACHYCARDIA
427.2	PAROXYSMAL TACHYCARDIA UNSPECIFIED
427.31	ATRIAL FIBRILLATION
427.32	ATRIAL FLUTTER
427.41	VENTRICULAR FIBRILLATION
427.42	VENTRICULAR FLUTTER
427.5	CARDIAC ARREST
427.60	PREMATURE BEATS UNSPECIFIED
427.61	SUPRAVENTRICULAR PREMATURE BEATS
427.69	OTHER PREMATURE BEATS
427.81	SINOATRIAL NODE DYSFUNCTION
427.89	OTHER SPECIFIED CARDIAC DYSRHYTHMIAS
427.9	CARDIAC DYSRHYTHMIA UNSPECIFIED
428.0	CONGESTIVE HEART FAILURE UNSPECIFIED
429.79	CERTAIN SEQUELAE OF MYOCARDIAL INFARCTION NOT ELSEWHERE CLASSIFIED OTHER
429.83	TAKOTSUBO SYNDROME
429.89	OTHER ILL-DEFINED HEART DISEASES
458.0	ORTHOSTATIC HYPOTENSION
458.1	CHRONIC HYPOTENSION
458.21	HYPOTENSION OF HEMODIALYSIS
458.29	OTHER IATROGENIC HYPOTENSION
458.9	HYPOTENSION UNSPECIFIED
536.2	PERSISTENT VOMITING
558.41	EOSINOPHILIC GASTROENTERITIS
558.9	OTHER AND UNSPECIFIED NONINFECTIOUS GASTROENTERITIS AND COLITIS
560.81	INTESTINAL OR PERITONEAL ADHESIONS WITH OBSTRUCTION (POSTOPERATIVE) (POSTINFECTION)
569.60	COLOSTOMY AND ENTEROSTOMY COMPLICATION UNSPECIFIED
569.81	FISTULA OF INTESTINE EXCLUDING RECTUM AND ANUS
579.0	CELIAC DISEASE
579.2	BLIND LOOP SYNDROME
579.3	OTHER AND UNSPECIFIED POSTSURGICAL NONABSORPTION
579.8	OTHER SPECIFIED INTESTINAL MALABSORPTION

579.9	UNSPECIFIED INTESTINAL MALABSORPTION
580.0	ACUTE GLOMERULONEPHRITIS WITH LESION OF PROLIFERATIVE GLOMERULONEPHRITIS
580.4	ACUTE GLOMERULONEPHRITIS WITH LESION OF RAPIDLY PROGRESSIVE GLOMERULONEPHRITIS
580.81	ACUTE GLOMERULONEPHRITIS IN DISEASES CLASSIFIED ELSEWHERE
580.89	ACUTE GLOMERULONEPHRITIS WITH OTHER SPECIFIED PATHOLOGICAL LESION IN KIDNEY
580.9	ACUTE GLOMERULONEPHRITIS WITH UNSPECIFIED PATHOLOGICAL LESION IN KIDNEY
581.0	NEPHROTIC SYNDROME WITH LESION OF PROLIFERATIVE GLOMERULONEPHRITIS
581.1	NEPHROTIC SYNDROME WITH LESION OF MEMBRANOUS GLOMERULONEPHRITIS
581.2	NEPHROTIC SYNDROME WITH LESION OF MEMBRANOPROLIFERATIVE GLOMERULONEPHRITIS
581.3	NEPHROTIC SYNDROME WITH LESION OF MINIMAL CHANGE GLOMERULONEPHRITIS
581.81	NEPHROTIC SYNDROME IN DISEASES CLASSIFIED ELSEWHERE
581.89	OTHER NEPHROTIC SYNDROME WITH SPECIFIED PATHOLOGICAL LESION IN KIDNEY
581.9	NEPHROTIC SYNDROME WITH UNSPECIFIED PATHOLOGICAL LESION IN KIDNEY
582.0	CHRONIC GLOMERULONEPHRITIS WITH LESION OF PROLIFERATIVE GLOMERULONEPHRITIS
582.1	CHRONIC GLOMERULONEPHRITIS WITH LESION OF MEMBRANOUS GLOMERULONEPHRITIS
582.2	CHRONIC GLOMERULONEPHRITIS WITH LESION OF MEMBRANOPROLIFERATIVE GLOMERULONEPHRITIS
582.4	CHRONIC GLOMERULONEPHRITIS WITH LESION OF RAPIDLY PROGRESSIVE GLOMERULONEPHRITIS
582.81	CHRONIC GLOMERULONEPHRITIS IN DISEASES CLASSIFIED ELSEWHERE
582.89	OTHER CHRONIC GLOMERULONEPHRITIS WITH SPECIFIED PATHOLOGICAL LESION IN KIDNEY
582.9	CHRONIC GLOMERULONEPHRITIS WITH UNSPECIFIED PATHOLOGICAL LESION IN KIDNEY
583.0	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF PROLIFERATIVE GLOMERULONEPHRITIS
583.1	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF MEMBRANOUS GLOMERULONEPHRITIS
583.2	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF MEMBRANOPROLIFERATIVE GLOMERULONEPHRITIS
583.4	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF RAPIDLY PROGRESSIVE GLOMERULONEPHRITIS
583.6	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF RENAL CORTICAL NECROSIS
583.7	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH LESION OF RENAL MEDULLARY NECROSIS
583.81	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC IN DISEASES CLASSIFIED ELSEWHERE
583.89	OTHER NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH SPECIFIED PATHOLOGICAL LESION IN KIDNEY
583.9	NEPHRITIS AND NEPHROPATHY NOT SPECIFIED AS ACUTE OR CHRONIC WITH UNSPECIFIED PATHOLOGICAL LESION IN KIDNEY
584.5	ACUTE KIDNEY FAILURE WITH LESION OF TUBULAR NECROSIS
584.6	ACUTE KIDNEY FAILURE WITH LESION OF RENAL CORTICAL NECROSIS
584.7	ACUTE KIDNEY FAILURE WITH LESION OF RENAL MEDULLARY [PAPILLARY] NECROSIS
584.8	ACUTE KIDNEY FAILURE WITH OTHER SPECIFIED PATHOLOGICAL LESION IN KIDNEY

584.9	ACUTE KIDNEY FAILURE, UNSPECIFIED
585.1	CHRONIC KIDNEY DISEASE, STAGE I
585.2	CHRONIC KIDNEY DISEASE, STAGE II (MILD)
585.3	CHRONIC KIDNEY DISEASE, STAGE III (MODERATE)
585.4	CHRONIC KIDNEY DISEASE, STAGE IV (SEVERE)
585.5	CHRONIC KIDNEY DISEASE, STAGE V
585.6	END STAGE RENAL DISEASE
585.9	CHRONIC KIDNEY DISEASE, UNSPECIFIED
586	RENAL FAILURE UNSPECIFIED
587	RENAL SCLEROSIS UNSPECIFIED
588.0	RENAL OSTEODYSTROPHY
588.1	NEPHROGENIC DIABETES INSIPIDUS
588.81	SECONDARY HYPERPARATHYROIDISM (OF RENAL ORIGIN)
588.89	OTHER SPECIFIED DISORDERS RESULTING FROM IMPAIRED RENAL FUNCTION
593.81	VASCULAR DISORDERS OF KIDNEY
593.9	UNSPECIFIED DISORDER OF KIDNEY AND URETER
632	MISSED ABORTION
634.10	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
634.11	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
634.12	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
634.20	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
634.21	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
634.22	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
634.30	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY RENAL FAILURE
634.31	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY RENAL FAILURE
634.32	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY RENAL FAILURE
634.40	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY METABOLIC DISORDER
634.41	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY METABOLIC DISORDER
634.42	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY METABOLIC DISORDER
634.50	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY SHOCK
634.51	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY SHOCK
634.52	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY SHOCK
634.60	SPONTANEOUS ABORTION UNSPECIFIED COMPLICATED BY EMBOLISM
634.61	SPONTANEOUS ABORTION INCOMPLETE COMPLICATED BY EMBOLISM
634.62	SPONTANEOUS ABORTION COMPLETE COMPLICATED BY EMBOLISM
634.70	SPONTANEOUS ABORTION UNSPECIFIED WITH OTHER SPECIFIED COMPLICATIONS
634.71	SPONTANEOUS ABORTION INCOMPLETE WITH OTHER SPECIFIED COMPLICATIONS
634.72	SPONTANEOUS ABORTION COMPLETE WITH OTHER SPECIFIED COMPLICATIONS
634.80	SPONTANEOUS ABORTION UNSPECIFIED WITH UNSPECIFIED COMPLICATION
634.81	SPONTANEOUS ABORTION INCOMPLETE WITH UNSPECIFIED COMPLICATION
634.82	SPONTANEOUS ABORTION COMPLETE WITH UNSPECIFIED COMPLICATION
635.10	LEGALLY INDUCED ABORTION UNSPECIFIED COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
635.11	LEGALLY INDUCED ABORTION INCOMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
635.12	

	LEGALLY INDUCED ABORTION COMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
635.30	LEGALLY INDUCED ABORTION UNSPECIFIED COMPLICATED BY RENAL FAILURE
635.31	LEGALLY INDUCED ABORTION INCOMPLETE COMPLICATED BY RENAL FAILURE
635.32	LEGALLY INDUCED ABORTION COMPLETE COMPLICATED BY RENAL FAILURE
635.40	LEGALLY INDUCED ABORTION UNSPECIFIED COMPLICATED BY METABOLIC DISORDER
635.41	LEGALLY INDUCED ABORTION INCOMPLETE COMPLICATED BY METABOLIC DISORDER
635.42	LEGALLY INDUCED ABORTION COMPLETE COMPLICATED BY METABOLIC DISORDER
635.50	LEGALLY INDUCED ABORTION UNSPECIFIED COMPLICATED BY SHOCK
635.51	LEGALLY INDUCED ABORTION INCOMPLETE COMPLICATED BY SHOCK
635.52	LEGALLY INDUCED ABORTION COMPLETE COMPLICATED BY SHOCK
635.60	LEGALLY INDUCED ABORTION UNSPECIFIED COMPLICATED BY EMBOLISM
635.61	LEGALLY INDUCED ABORTION INCOMPLETE COMPLICATED BY EMBOLISM
635.62	LEGALLY INDUCED ABORTION COMPLETE COMPLICATED BY EMBOLISM
635.70	LEGALLY INDUCED ABORTION UNSPECIFIED WITH OTHER SPECIFIED COMPLICATIONS
635.71	LEGALLY INDUCED ABORTION INCOMPLETE WITH OTHER SPECIFIED COMPLICATIONS
635.72	LEGALLY INDUCED ABORTION COMPLETE WITH OTHER SPECIFIED COMPLICATIONS
635.80	LEGALLY INDUCED ABORTION UNSPECIFIED WITH UNSPECIFIED COMPLICATION
635.81	LEGALLY INDUCED ABORTION INCOMPLETE WITH UNSPECIFIED COMPLICATION
635.82	LEGALLY INDUCED ABORTION COMPLETE WITH UNSPECIFIED COMPLICATION
636.10	ILLEGAL ABORTION UNSPECIFIED COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
636.11	ILLEGAL ABORTION INCOMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
636.12	ILLEGAL ABORTION COMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
636.30	ILLEGAL ABORTION UNSPECIFIED COMPLICATED BY RENAL FAILURE
636.31	ILLEGAL ABORTION INCOMPLETE COMPLICATED BY RENAL FAILURE
636.32	ILLEGAL ABORTION COMPLETE COMPLICATED BY RENAL FAILURE
636.40	ILLEGAL ABORTION UNSPECIFIED COMPLICATED BY METABOLIC DISORDER
636.41	ILLEGAL ABORTION INCOMPLETE COMPLICATED BY METABOLIC DISORDER
636.42	ILLEGAL ABORTION COMPLETE COMPLICATED BY METABOLIC DISORDER
636.50	ILLEGAL ABORTION UNSPECIFIED COMPLICATED BY SHOCK
636.51	ILLEGAL ABORTION INCOMPLETE COMPLICATED BY SHOCK
636.52	ILLEGAL ABORTION COMPLETE COMPLICATED BY SHOCK
636.60	ILLEGAL ABORTION UNSPECIFIED COMPLICATED BY EMBOLISM
636.61	ILLEGAL ABORTION INCOMPLETE COMPLICATED BY EMBOLISM
636.62	ILLEGAL ABORTION COMPLETE COMPLICATED BY EMBOLISM
636.70	ILLEGAL ABORTION UNSPECIFIED WITH OTHER SPECIFIED COMPLICATIONS
636.71	ILLEGAL ABORTION INCOMPLETE WITH OTHER SPECIFIED COMPLICATIONS
636.72	ILLEGAL ABORTION COMPLETE WITH OTHER SPECIFIED COMPLICATIONS
636.80	ILLEGAL ABORTION UNSPECIFIED WITH UNSPECIFIED COMPLICATION
636.81	ILLEGAL ABORTION INCOMPLETE WITH UNSPECIFIED COMPLICATION
636.82	ILLEGAL ABORTION COMPLETE WITH UNSPECIFIED COMPLICATION
637.10	UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
637.11	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE

637.12	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
637.20	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
637.21	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
637.22	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
637.30	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY RENAL FAILURE
637.31	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY RENAL FAILURE
637.32	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY RENAL FAILURE
637.40	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY METABOLIC DISORDER
637.41	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY METABOLIC DISORDER
637.42	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY METABOLIC DISORDER
637.50	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY SHOCK
637.51	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY SHOCK
637.52	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY SHOCK
637.60	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED COMPLICATED BY EMBOLISM
637.61	LEGALLY UNSPECIFIED ABORTION INCOMPLETE COMPLICATED BY EMBOLISM
637.62	LEGALLY UNSPECIFIED ABORTION COMPLETE COMPLICATED BY EMBOLISM
637.70	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED WITH OTHER SPECIFIED COMPLICATIONS
637.71	LEGALLY UNSPECIFIED ABORTION INCOMPLETE WITH OTHER SPECIFIED COMPLICATIONS
637.72	LEGALLY UNSPECIFIED ABORTION COMPLETE WITH OTHER SPECIFIED COMPLICATIONS
637.80	LEGALLY UNSPECIFIED TYPE OF ABORTION UNSPECIFIED WITH UNSPECIFIED COMPLICATION
637.81	LEGALLY UNSPECIFIED ABORTION INCOMPLETE WITH UNSPECIFIED COMPLICATION
637.82	LEGALLY UNSPECIFIED ABORTION COMPLETE WITH UNSPECIFIED COMPLICATION
638.1	FAILED ATTEMPTED ABORTION COMPLICATED BY DELAYED OR EXCESSIVE HEMORRHAGE
638.2	FAILED ATTEMPTED ABORTION COMPLICATED BY DAMAGE TO PELVIC ORGANS OR TISSUES
638.3	FAILED ATTEMPTED ABORTION COMPLICATED BY RENAL FAILURE
638.4	FAILED ATTEMPTED ABORTION COMPLICATED BY METABOLIC DISORDER
638.5	FAILED ATTEMPTED ABORTION COMPLICATED BY SHOCK
638.6	FAILED ATTEMPTED ABORTION COMPLICATED BY EMBOLISM
638.7	FAILED ATTEMPTED ABORTION WITH OTHER SPECIFIED COMPLICATIONS
638.8	FAILED ATTEMPTED ABORTION WITH UNSPECIFIED COMPLICATION
638.9	FAILED ATTEMPTED ABORTION WITHOUT COMPLICATION
639.1	DELAYED OR EXCESSIVE HEMORRHAGE FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
639.3	KIDNEY FAILURE FOLLOWING ABORTION AND ECTOPIC AND MOLAR PREGNANCIES
639.4	METABOLIC DISORDERS FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
639.5	SHOCK FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
639.6	EMBOLISM FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
639.8	

	OTHER SPECIFIED COMPLICATIONS FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
639.9	UNSPECIFIED COMPLICATION FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES
640.00	THREATENED ABORTION UNSPECIFIED AS TO EPISODE OF CARE
640.01	THREATENED ABORTION DELIVERED
640.03	THREATENED ABORTION ANTEPARTUM
640.80	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
640.81	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY DELIVERED
640.83	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY ANTEPARTUM
640.90	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
640.91	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY DELIVERED
640.93	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY ANTEPARTUM
641.00	PLACENTA PREVIA WITHOUT HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
641.01	PLACENTA PREVIA WITHOUT HEMORRHAGE WITH DELIVERY
641.03	PLACENTA PREVIA WITHOUT HEMORRHAGE ANTEPARTUM
641.10	HEMORRHAGE FROM PLACENTA PREVIA UNSPECIFIED AS TO EPISODE OF CARE
641.11	HEMORRHAGE FROM PLACENTA PREVIA WITH DELIVERY
641.13	HEMORRHAGE FROM PLACENTA PREVIA ANTEPARTUM
641.20	PREMATURE SEPARATION OF PLACENTA UNSPECIFIED AS TO EPISODE OF CARE
641.21	PREMATURE SEPARATION OF PLACENTA WITH DELIVERY
641.23	PREMATURE SEPARATION OF PLACENTA ANTEPARTUM
641.30	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS UNSPECIFIED AS TO EPISODE OF CARE
641.31	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS WITH DELIVERY
641.33	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS
641.80	OTHER ANTEPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
641.81	OTHER ANTEPARTUM HEMORRHAGE WITH DELIVERY
641.83	OTHER ANTEPARTUM HEMORRHAGE
641.90	UNSPECIFIED ANTEPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
641.91	UNSPECIFIED ANTEPARTUM HEMORRHAGE WITH DELIVERY
641.93	UNSPECIFIED ANTEPARTUM HEMORRHAGE
642.00	BENIGN ESSENTIAL HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.01	BENIGN ESSENTIAL HYPERTENSION WITH DELIVERY
642.02	BENIGN ESSENTIAL HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.03	ANTEPARTUM BENIGN ESSENTIAL HYPERTENSION
642.04	POSTPARTUM BENIGN ESSENTIAL HYPERTENSION
642.10	HYPERTENSION SECONDARY TO RENAL DISEASE COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.11	HYPERTENSION SECONDARY TO RENAL DISEASE WITH DELIVERY
642.12	HYPERTENSION SECONDARY TO RENAL DISEASE WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.13	HYPERTENSION SECONDARY TO RENAL DISEASE ANTEPARTUM
642.14	HYPERTENSION SECONDARY TO RENAL DISEASE POSTPARTUM
642.20	OTHER PRE-EXISTING HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.21	OTHER PRE-EXISTING HYPERTENSION WITH DELIVERY

642.22	OTHER PRE-EXISTING HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.23	OTHER PRE-EXISTING HYPERTENSION ANTEPARTUM
642.24	OTHER PRE-EXISTING HYPERTENSION POSTPARTUM
642.30	TRANSIENT HYPERTENSION OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
642.31	TRANSIENT HYPERTENSION OF PREGNANCY WITH DELIVERY
642.32	TRANSIENT HYPERTENSION OF PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.33	ANTEPARTUM TRANSIENT HYPERTENSION
642.34	POSTPARTUM TRANSIENT HYPERTENSION
642.40	MILD OR UNSPECIFIED PRE-ECLAMPSIA UNSPECIFIED AS TO EPISODE OF CARE
642.41	MILD OR UNSPECIFIED PRE-ECLAMPSIA WITH DELIVERY
642.42	MILD OR UNSPECIFIED PRE-ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.43	MILD OR UNSPECIFIED PRE-ECLAMPSIA ANTEPARTUM
642.44	MILD OR UNSPECIFIED PRE-ECLAMPSIA POSTPARTUM
642.50	SEVERE PRE-ECLAMPSIA UNSPECIFIED AS TO EPISODE OF CARE
642.51	SEVERE PRE-ECLAMPSIA WITH DELIVERY
642.52	SEVERE PRE-ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.53	SEVERE PRE-ECLAMPSIA ANTEPARTUM
642.54	SEVERE PRE-ECLAMPSIA POSTPARTUM
642.60	ECLAMPSIA COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.61	ECLAMPSIA WITH DELIVERY
642.62	ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.63	ECLAMPSIA ANTEPARTUM
642.64	ECLAMPSIA POSTPARTUM
642.70	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.71	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION WITH DELIVERY
642.72	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.73	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION ANTEPARTUM
642.74	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION POSTPARTUM
642.90	UNSPECIFIED HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
642.91	UNSPECIFIED HYPERTENSION WITH DELIVERY
642.92	UNSPECIFIED HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
642.93	UNSPECIFIED ANTEPARTUM HYPERTENSION
642.94	UNSPECIFIED POSTPARTUM HYPERTENSION
643.00	MILD HYPEREMESIS GRAVIDARUM UNSPECIFIED AS TO EPISODE OF CARE
643.01	MILD HYPEREMESIS GRAVIDARUM DELIVERED
643.03	MILD HYPEREMESIS GRAVIDARUM ANTEPARTUM
643.10	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE UNSPECIFIED AS TO EPISODE OF CARE
643.11	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE DELIVERED
643.13	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE ANTEPARTUM
643.20	LATE VOMITING OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE

643.21	LATE VOMITING OF PREGNANCY DELIVERED
643.23	LATE VOMITING OF PREGNANCY ANTEPARTUM
643.80	OTHER VOMITING COMPLICATING PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
643.81	OTHER VOMITING COMPLICATING PREGNANCY DELIVERED
643.83	OTHER VOMITING COMPLICATING PREGNANCY ANTEPARTUM
643.90	UNSPECIFIED VOMITING OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
643.91	UNSPECIFIED VOMITING OF PREGNANCY DELIVERED
643.93	UNSPECIFIED VOMITING OF PREGNANCY ANTEPARTUM
646.20	UNSPECIFIED RENAL DISEASE IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
646.21	UNSPECIFIED RENAL DISEASE IN PREGNANCY WITH DELIVERY
646.22	UNSPECIFIED RENAL DISEASE IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
646.23	UNSPECIFIED ANTEPARTUM RENAL DISEASE
646.24	UNSPECIFIED POSTPARTUM RENAL DISEASE
646.80	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
646.81	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY
646.82	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
646.83	OTHER SPECIFIED ANTEPARTUM COMPLICATIONS
646.84	OTHER SPECIFIED POSTPARTUM COMPLICATIONS
646.90	UNSPECIFIED COMPLICATION OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
646.91	UNSPECIFIED COMPLICATION OF PREGNANCY WITH DELIVERY
646.93	UNSPECIFIED ANTEPARTUM COMPLICATION
648.00	DIABETES MELLITUS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
648.01	DIABETES MELLITUS OF MOTHER WITH DELIVERY
648.02	DIABETES MELLITUS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
648.03	ANTEPARTUM DIABETES MELLITUS
648.04	POSTPARTUM DIABETES MELLITUS
648.90	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
648.91	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER WITH DELIVERY
648.92	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
648.93	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER ANTEPARTUM
648.94	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER POSTPARTUM
655.70	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
655.71	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER DELIVERED
655.73	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
655.80	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
655.81	



	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER WITH DELIVERED
655.83	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
655.90	UNSPECIFIED SUSPECTED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
655.91	UNSPECIFIED SUSPECTED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER DELIVERED
655.93	UNSPECIFIED SUSPECTED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
656.00	FETAL-MATERNAL HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
656.01	FETAL-MATERNAL HEMORRHAGE WITH DELIVERY
656.03	FETAL-MATERNAL HEMORRHAGE ANTEPARTUM CONDITION OR COMPLICATION
656.30	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
656.31	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER DELIVERED
656.33	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
656.40	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
656.41	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER DELIVERED
656.43	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
666.00	THIRD-STAGE POSTPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
666.02	THIRD-STAGE POSTPARTUM HEMORRHAGE WITH DELIVERY
666.04	THIRD-STAGE POSTPARTUM HEMORRHAGE
666.10	OTHER IMMEDIATE POSTPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
666.12	OTHER IMMEDIATE POSTPARTUM HEMORRHAGE WITH DELIVERY
666.14	OTHER IMMEDIATE POSTPARTUM HEMORRHAGE
666.20	DELAYED AND SECONDARY POSTPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
666.22	DELAYED AND SECONDARY POSTPARTUM HEMORRHAGE WITH DELIVERY
666.24	DELAYED AND SECONDARY POSTPARTUM HEMORRHAGE
668.10	CARDIAC COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
668.11	CARDIAC COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED
668.12	CARDIAC COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED WITH POSTPARTUM COMPLICATION
668.13	CARDIAC COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY ANTEPARTUM
668.14	CARDIAC COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY POSTPARTUM
668.80	OTHER COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
668.81	OTHER COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED
668.82	OTHER COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED WITH POSTPARTUM COMPLICATION
668.83	OTHER COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY ANTEPARTUM
668.84	OTHER COMPLICATIONS OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY POSTPARTUM

668.90	UNSPECIFIED COMPLICATION OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
668.91	UNSPECIFIED COMPLICATION OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED
668.92	UNSPECIFIED COMPLICATION OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY DELIVERED WITH POSTPARTUM COMPLICATION
668.93	UNSPECIFIED COMPLICATION OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY ANTEPARTUM
668.94	UNSPECIFIED COMPLICATION OF ANESTHESIA OR OTHER SEDATION IN LABOR AND DELIVERY POSTPARTUM
669.10	OBSTETRIC SHOCK UNSPECIFIED AS TO EPISODE OF CARE
669.11	OBSTETRIC SHOCK WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
669.12	OBSTETRIC SHOCK WITH DELIVERY WITH POSTPARTUM COMPLICATION
669.13	ANTEPARTUM OBSTETRIC SHOCK
669.14	POSTPARTUM OBSTETRIC SHOCK
669.20	MATERNAL HYPOTENSION SYNDROME COMPLICATING LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
669.21	MATERNAL HYPOTENSION SYNDROME WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
669.22	MATERNAL HYPOTENSION SYNDROME WITH DELIVERY WITH POSTPARTUM COMPLICATION
669.23	MATERNAL HYPOTENSION SYNDROME ANTEPARTUM
669.24	MATERNAL HYPOTENSION SYNDROME POSTPARTUM
669.30	ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
669.32	ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, DELIVERED, WITH MENTION OF POSTPARTUM COMPLICATION
669.34	ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, POSTPARTUM CONDITION OR COMPLICATION
669.40	OTHER COMPLICATIONS OF OBSTETRICAL SURGERY AND PROCEDURES UNSPECIFIED AS TO EPISODE OF CARE
669.41	OTHER COMPLICATIONS OF OBSTETRICAL SURGERY AND PROCEDURES WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
669.42	OTHER COMPLICATIONS OF OBSTETRICAL SURGERY AND PROCEDURES WITH DELIVERY WITH POSTPARTUM COMPLICATION
669.43	OTHER COMPLICATIONS OF OBSTETRICAL SURGERY AND PROCEDURES ANTEPARTUM CONDITION OR COMPLICATION
669.44	OTHER COMPLICATIONS OF OBSTETRICAL SURGERY AND PROCEDURES POSTPARTUM CONDITION OR COMPLICATION
669.80	OTHER COMPLICATIONS OF LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
669.81	OTHER COMPLICATIONS OF LABOR AND DELIVERY DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
669.82	OTHER COMPLICATIONS OF LABOR AND DELIVERY DELIVERED WITH POSTPARTUM COMPLICATION
669.83	OTHER COMPLICATIONS OF LABOR AND DELIVERY ANTEPARTUM CONDITION OR COMPLICATION
669.84	OTHER COMPLICATIONS OF LABOR AND DELIVERY POSTPARTUM CONDITION OR COMPLICATION
669.90	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
669.91	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
669.92	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY WITH DELIVERY WITH POSTPARTUM COMPLICATION

669.93	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY ANTEPARTUM CONDITION OR COMPLICATION
669.94	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY POSTPARTUM CONDITION OR COMPLICATION
673.20	OBSTETRICAL BLOOD-CLOT EMBOLISM UNSPECIFIED AS TO EPISODE OF CARE
673.21	OBSTETRICAL BLOOD-CLOT EMBOLISM WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
673.22	OBSTETRICAL BLOOD-CLOT EMBOLISM WITH POSTPARTUM COMPLICATION
673.23	OBSTETRICAL BLOOD-CLOT EMBOLISM ANTEPARTUM
673.24	OBSTETRICAL BLOOD-CLOT EMBOLISM POSTPARTUM
728.9	UNSPECIFIED DISORDER OF MUSCLE LIGAMENT AND FASCIA
729.82	CRAMP OF LIMB
729.89	OTHER MUSCULOSKELETAL SYMPTOMS REFERABLE TO LIMBS
753.12	POLYCYSTIC KIDNEY UNSPECIFIED TYPE
753.13	POLYCYSTIC KIDNEY AUTOSOMAL DOMINANT
760.0	MATERNAL HYPERTENSIVE DISORDERS AFFECTING FETUS OR NEWBORN
760.1	MATERNAL RENAL AND URINARY TRACT DISEASES AFFECTING FETUS OR NEWBORN
760.4	MATERNAL NUTRITIONAL DISORDERS AFFECTING FETUS OR NEWBORN
760.71	NOXIOUS INFLUENCES AFFECTING FETUS OR NEWBORN VIA PLACENTA OR BREAST MILK, ALCOHOL
760.8	OTHER SPECIFIED MATERNAL CONDITIONS AFFECTING FETUS OR NEWBORN
763.81	ABNORMALITY IN FETAL HEART RATE OR RHYTHM BEFORE THE ONSET OF LABOR
763.82	ABNORMALITY IN FETAL HEART RATE OR RHYTHM DURING LABOR
763.83	ABNORMALITY IN FETAL HEART RATE OR RHYTHM UNSPECIFIED AS TO TIME OF ONSET
763.84	MECONIUM PASSAGE DURING DELIVERY
763.89	OTHER SPECIFIED COMPLICATIONS OF LABOR AND DELIVERY AFFECTING FETUS OR NEWBORN
763.9	UNSPECIFIED COMPLICATION OF LABOR AND DELIVERY AFFECTING FETUS OR NEWBORN
779.32	BILIOUS VOMITING IN NEWBORN
779.33	OTHER VOMITING IN NEWBORN
780.01	COMA
780.02	TRANSIENT ALTERATION OF AWARENESS
780.09	ALTERATION OF CONSCIOUSNESS OTHER
780.2	SYNCOPE AND COLLAPSE
780.31	FEBRILE CONVULSIONS (SIMPLE), UNSPECIFIED
780.32	COMPLEX FEBRILE CONVULSIONS
780.39	OTHER CONVULSIONS
780.71	CHRONIC FATIGUE SYNDROME
780.79	OTHER MALAISE AND FATIGUE
781.0	ABNORMAL INVOLUNTARY MOVEMENTS
781.7	TETANY
783.0	ANOREXIA
783.21	LOSS OF WEIGHT
783.22	UNDERWEIGHT
783.3	FEEDING DIFFICULTIES AND MISMANAGEMENT
783.9	OTHER SYMPTOMS CONCERNING NUTRITION METABOLISM AND DEVELOPMENT
785.0	TACHYCARDIA UNSPECIFIED
785.50	SHOCK UNSPECIFIED
785.51	CARDIOGENIC SHOCK

785.59	OTHER SHOCK WITHOUT TRAUMA
787.04	BILIOUS EMESIS
787.91	DIARRHEA
790.6	OTHER ABNORMAL BLOOD CHEMISTRY
794.31	NONSPECIFIC ABNORMAL ELECTROCARDIOGRAM (ECG) (EKG)
794.4	NONSPECIFIC ABNORMAL RESULTS OF FUNCTION STUDY OF KIDNEY
796.2	ELEVATED BLOOD PRESSURE READING WITHOUT DIAGNOSIS OF HYPERTENSION
799.4	CACHEXIA
958.4	TRAUMATIC SHOCK
995.23	UNSPECIFIED ADVERSE EFFECT OF INSULIN
995.29	UNSPECIFIED ADVERSE EFFECT OF OTHER DRUG, MEDICINAL AND BIOLOGICAL SUBSTANCE
996.81	COMPLICATIONS OF TRANSPLANTED KIDNEY
996.86	COMPLICATIONS OF TRANSPLANTED PANCREAS
997.1	CARDIAC COMPLICATIONS NOT ELSEWHERE CLASSIFIED
998.02	POSTOPERATIVE SHOCK, SEPTIC
998.9	UNSPECIFIED COMPLICATION OF PROCEDURE NOT ELSEWHERE CLASSIFIED
999.9	OTHER AND UNSPECIFIED COMPLICATIONS OF MEDICAL CARE NOT ELSEWHERE CLASSIFIED
E933.1*	ANTINEOPLASTIC AND IMMUNOSUPPRESSIVE DRUGS CAUSING ADVERSE EFFECTS IN THERAPEUTIC USE
V23.0	SUPERVISION OF HIGH-RISK PREGNANCY WITH HISTORY OF INFERTILITY
V23.1	SUPERVISION OF HIGH-RISK PREGNANCY WITH HISTORY OF TROPHO BLASTIC DISEASE
V23.2	SUPERVISION OF HIGH-RISK PREGNANCY WITH HISTORY OF ABORTION
V23.3	SUPERVISION OF HIGH-RISK PREGNANCY WITH GRAND MULTIPARITY
V23.41	SUPERVISION OF HIGH-RISK PREGNANCY WITH HISTORY OF PRE-TERM LABOR
V23.49	SUPERVISION OF HIGH-RISK PREGNANCY WITH OTHER POOR OBSTETRIC HISTORY
V23.5	SUPERVISION OF HIGH-RISK PREGNANCY WITH OTHER POOR REPRODUCTIVE HISTORY
V23.7	SUPERVISION OF HIGH-RISK PREGNANCY WITH INSUFFICIENT PRENATAL CARE
V23.81	SUPERVISION OF HIGH-RISK PREGNANCY WITH ELDERLY PRIMIGRAVIDA
V23.82	SUPERVISION OF HIGH-RISK PREGNANCY WITH ELDERLY MULTIGRAVIDA
V23.83	SUPERVISION OF HIGH-RISK PREGNANCY WITH YOUNG PRIMIGRAVIDA
V23.84	SUPERVISION OF HIGH-RISK PREGNANCY WITH YOUNG MULTIGRAVIDA
V23.89	SUPERVISION OF OTHER HIGH-RISK PREGNANCY
V23.9	SUPERVISION OF UNSPECIFIED HIGH-RISK PREGNANCY
V42.0	KIDNEY REPLACED BY TRANSPLANT
V42.1	HEART REPLACED BY TRANSPLANT
V42.7	LIVER REPLACED BY TRANSPLANT
V42.83	PANCREAS REPLACED BY TRANSPLANT
V56.0	AFTERCARE INVOLVING EXTRACORPOREAL DIALYSIS
V56.8	AFTERCARE INVOLVING OTHER DIALYSIS
V58.11	ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY
V58.12	ENCOUNTER FOR IMMUNOTHERAPY FOR NEOPLASTIC CONDITION
V58.69	LONG-TERM (CURRENT) USE OF OTHER MEDICATIONS

\*"Use in addition to the code that indicates the nature of the condition."

### Diagnoses that Support Medical Necessity

All ICD-9-CM codes listed in this policy under "ICD-9-CM Codes that Support Medical Necessity" above.

### ICD-9 Codes that DO NOT Support Medical Necessity

All diagnosis codes other than those used in the covered ICD-9-CM codes will be denied.

## ICD-9 Codes that DO NOT Support Medical Necessity Asterisk Explanation

### Diagnoses that DO NOT Support Medical Necessity

All ICD-9-CM codes **not** listed in this policy under "ICD-9-CM Codes that Support Medical Necessity" above.

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## General Information

### Documentations Requirements

Documentation must be made available to Medicare upon request. Failure to do so, may result in denial of claims.

Documentation of the medical necessity of the test must be retained in the ordering physician's patient medical record. Documentation should state the signs/symptoms or diagnosis which caused the need of the test procedure.

Claims should be submitted with an ICD-9-CM diagnosis code, which reflects the patient's condition and is found in the "ICD-9-CM Codes that Support Medical Necessity" section.

Medical records must contain the lab test results.

Laboratories must maintain the record of the physician's order for the test.

The HCPCS/CPT code(s) may be subject to Correct Coding Initiative (CCI) edits. This policy does not take precedence over CCI edits. Please refer to the CCI for correct coding guidelines and specific applicable code combinations prior to billing Medicare.

When requesting an *individual consideration* through the written redetermination (formerly appeal) process, providers must include all relevant medical records and literature that supports the request. At a minimum two (2) Phase II studies (human feasibility studies suggesting efficacy, pilots) or one (1) Phase III study (primary evidence of safety and efficacy, pivotal) must be submitted for the Medical Director's review.

## Appendices

### Utilization Guidelines

#### Sources of Information and Basis for Decision

Ferri: Ferri's Best Test: A Practical Guide to Clinical Laboratory Medicine and Diagnostic Imaging, 1st ed., Copyright© 2004 Mosby, Inc.

Goldman: Cecil Textbook of Medicine, 22nd ed., Copyright© 2004 W. B. Saunders Company

Stalnikowicz R - The significance of routine serum magnesium determination in the ED. - Am J Emerg Med - 01-SEP-2003; 21(5): 444-7

Saris NE, Mervaala E, Karppanen H, Khawaja JA, Lewenstam A. Magnesium: an update on physiological, clinical, and analytical aspects. Clinica Chimica Acta 2000;294:1-26

Ramsay LE, Yeo WW, Jackson PR. Metabolic effects of diuretics. Cardiology 1994;84 Suppl 2:48-56

Lajer H and Daugaard G. Cisplatin and hypomagnesemia. Ca Treat Rev 1999;25:47-58

Tosiello L. Hypomagnesemia and diabetes mellitus. A review of clinical implications. Arch Intern Med 1996;156:1143-8

Paolisso G, Scheen A, D'Onofrio F, Lefebvre P. Magnesium and glucose homeostasis. *Diabetologia* 1990;33:511-4

Svetkey LP, Simons-Morton D, Vollmer WM, Appel LJ, Conlin PR, Ryan DH, Ard J, Kennedy BM. Effects of dietary patterns on blood pressure: Subgroup analysis of the Dietary Approaches to Stop Hypertension (DASH) randomized clinical trial. *Arch Intern Med* 1999;159:285-93

Peacock JM, Folsom AR, Arnett DK, Eckfeldt JH, Szklo M. Relationship of serum and dietary magnesium to incident hypertension: the Atherosclerosis Risk in Communities (ARIC) Study. *Annals of Epidemiology* 1999;9:159-65

National Heart, Lung, and Blood Institute. Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. The sixth report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. *Arch Intern Med* 1997;157:2413-46

Schwartz GL and Sheps SG. A review of the sixth report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. *Curr Opin Cardiol* 1999;14:161-8

Kaplan NM. Treatment of hypertension: Insights from the JNC-VI report. *Am Fam Physician* 1998;58:1323-30

American Diabetes Association. Nutrition recommendations and principles for people with diabetes mellitus. *Diabetes Care* 1999;22:542-5

Other carriers' policies

NAS Carrier Advisory Committee members **Advisory Committee Meeting Notes** This LCD was discussed in the Part A Open Door Coverage Meeting on October 19, 2006 and on January 18, 2007.

This medical policy was presented at the Medicare Part B Open Public Meeting on May 04, 2004, and discussed at the following Carrier Advisory Committee meetings on the following dates:

Alaska - June 22, 2004  
Arizona - June 08, 2004  
Colorado - June 17, 2004  
Hawaii - May 28, 2004  
Iowa - June 24, 2004  
Nevada - June 10, 2004  
North Dakota - June 08, 2004  
Oregon - June 26, 2004  
South Dakota - June 10, 2004  
Washington - June 08, 2004  
Wyoming - June 11, 2004

This policy does not reflect the sole opinion of the contractor or contractor medical director. Although the final decision rests with the contractor, this policy was developed in cooperation with representatives from various medical specialties and Part A providers.

**Noridian's Response to Comments:**

There were no comments received on this LCD.

**Comment:** One provider request multiple ICD-9-CM codes ranges to be included in the LCD.

**NAS Response:** Medicare will add one of the codes. The remaining codes describe conditions that in and of themselves are not associated with Magnesium abnormalities.

**Start Date of Comment Period** 12/22/2005

**End Date of Comment Period** 02/06/2006

**Start Date of Notice Period** 03/01/2006

**Revision History Number** R13

**Revision History Explanation** Addition of codes V42.0 and V42.7 for payable diagnosis with effective date of April 15, 2005.

09/04/2005 - This policy was updated by the ICD-9 2005-2006 Annual Update.

09/26/2005 Due to the ICD-9-CM 2005-2006 annual updates the following dx codes were added to the payable diagnoses:

763.84-Meconium passage during delivery was added to the payable code range 763.81-763.89.

09/26/2005-276.50, 276.51, 276.52, 585.3, 585.4, 585.5, 585.6, V58.11 and V58.12 were added to the payable ICD-9-CM codes for 83735 with an effective date of 10/01/2005.

12/15/2006-The language in the section "Indications and Limitations of Coverage and/or Medical Necessity" is more restrictive due to the change from supraventricular and ventricular arrhythmias, not elsewhere classified to Long Q-T syndrome, torsades de pointes and ventricular arrhythmias.

02/25/2006 - Updated Start Date of Notice Period to 03/01/2006. Added Projected Determination Effective Date of 04/16/2006. No Comments Received for this draft LCD.  
Added 250.60 to the section: ICD-9 Codes that Support Medical Necessity.

7/2/2006 - The description for Bill code 14 was changed

09/04/2006 - This policy was updated by the ICD-9 2006-2007 Annual Update.

R4) 09/13/2006-2007 ICD-9 diagnosis code updates completed.

The following ICD-9 diagnosis code are invalid on 10/01/2006:

995.2.

The following ICD-9 diagnosis codes were added to the section "ICD-9 Codes that Support Medical Necessity":

289.53, 429.3, 780.32, 995.23 and 995.29.

The following ICD-9 diagnosis code descriptions were revised:

255.10, 403.00, 403.01, 403.10, 403.11, 403.90, 403.91, 404.00, 404.01, 404.02, 404.03, 404.10, 404.11, 404.12, 404.13, 404.90, 404.91, 404.92, 404.93, and 780.31.

10/08/06 R5-Typographic error corrected under section "ICD-9 Codes that Support Medical Necessity" ICD-9-CM code 429.3 changed to the correct code 429.83.

01/20/2007-Update to the language in section "Indications and Limitations of Coverage and/or Medical Necessity", and added ICD-9-CM codes to the section "ICD-9 Codes that Support Medical Necessity".

11/30/2006 - In accordance with Section 911 of the Medicare Modernization Act of 2003, North Dakota was transitioned from FI Noridian Administrative Services, LLC (00320) to MAC - Part A Noridian Administrative Services (03301).

R7) 03/30/2007 - Added first paragraph to Indications and Limitations of Coverage and/or Medical Necessity, Added first paragraph and comment/response to Advisory Committee Meeting Notes. Added "Serum" to the title of this LCD. Added E933.1 to the payable ICD-9-CM code due to the request of a provider.

R8) 04/04/2007 - Added the following to the section "ICD-9 Codes that Support Medical Necessity": E933.1\*, 428.0, 587, 593.9, 996.81, 996.86, & V42.1.

\*"Use in addition to the code that indicates the nature of the condition."

Annual LCD review has been completed.

LCD has been reviewed and updated with the 2008-2009 ICD-9 CM diagnoses codes.

New ICD-9 CM codes applicable to this LCD:

249.00, 249.01, 249.10, 249.11, 249.20, 249.21, 249.30, 249.31, 249.40, 249.41, 249.50, 249.51, 249.60, 249.61, 249.70, 249.71, 249.80, 249.81, 249.90, 249.91, 275.5, and 558.41.

08/08/2009 - This policy was updated by the ICD-9 2009-2010 Annual Update.

A2004.07 R10

08/11/2009-The annual review of this LCD has been completed. NAS has added the type of bill (TOB) back into the LCD. The TOB were inadvertently deleted by the Medicare Coverage Database (MCD) periodic updates.

The following updates were due to the new ICD-9 CM codes. The effective DOS will be on/or after 10/01/2009:

Revised Descriptions

ICD-9CM CODE: 584.5

OLD DESCRIPTION: ACUTE RENAL FAILURE WITH LESION OF TUBULAR NECROSIS

NEW DESCRIPTION : ACUTE KIDNEY FAILURE WITH LESION OF TUBULAR NECROSIS

ICD-9CM CODE: 584.6

OLD DESCRIPTION: ACUTE RENAL FAILURE WITH LESION OF RENAL CORTICAL NECROSIS

NEW DESCRIPTION : ACUTE KIDNEY FAILURE WITH LESION OF RENAL CORTICAL NECROSIS

ICD-9CM CODE: 584.7

OLD DESCRIPTION: ACUTE RENAL FAILURE WITH LESION OF RENAL MEDULLARY (PAPILLARY) NECROSIS

NEW DESCRIPTION : ACUTE KIDNEY FAILURE WITH LESION OF RENAL MEDULLARY [PAPILLARY] NECROSIS

ICD-9CM CODE: 584.8

OLD DESCRIPTION: ACUTE RENAL FAILURE WITH OTHER SPECIFIED PATHOLOGICAL LESION IN KIDNEY

NEW DESCRIPTION : ACUTE KIDNEY FAILURE WITH OTHER SPECIFIED PATHOLOGICAL LESION IN KIDNEY

ICD-9CM CODE: 584.9

OLD DESCRIPTION: ACUTE RENAL FAILURE UNSPECIFIED

NEW DESCRIPTION : ACUTE KIDNEY FAILURE, UNSPECIFIED

ICD-9CM CODE: 639.3

OLD DESCRIPTION: RENAL FAILURE FOLLOWING ABORTION OR ECTOPIC AND MOLAR PREGNANCIES

NEW DESCRIPTION : KIDNEY FAILURE FOLLOWING ABORTION AND ECTOPIC AND MOLAR PREGNANCIES

ICD-9CM CODE: 669.30

OLD DESCRIPTION: ACUTE RENAL FAILURE FOLLOWING LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE

NEW DESCRIPTION : ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE



ICD-9CM CODE: 669.32

OLD DESCRIPTION: ACUTE RENAL FAILURE WITH DELIVERY WITH POSTPARTUM COMPLICATION  
NEW DESCRIPTION : ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, DELIVERED, WITH MENTION OF POSTPARTUM COMPLICATION

ICD-9CM CODE: 669.34

OLD DESCRIPTION: ACUTE RENAL FAILURE FOLLOWING LABOR AND DELIVERY POSTPARTUM CONDITION OR COMPLICATION  
NEW DESCRIPTION : ACUTE KIDNEY FAILURE FOLLOWING LABOR AND DELIVERY, POSTPARTUM CONDITION OR COMPLICATION

The following are new ICD-9 CM codes which were added to section "ICD-9 Codes that Support Medical Necessity":

ICD-9 CM CODE DESCRIPTION

779.32 BILIOUS VOMITING IN NEWBORN

779.33 OTHER VOMITING IN NEWBORN

787.04 BILIOUS EMESIS

A2004.07 R11

The section "Indications and Limitations of Coverage and/or Medical Necessity" has been updated.

Old language

Hypomagnesemia may also be induced by amphotericin toxicity.

New Language

- Hypomagnesemia may also be induced by amphotericin or anti-EGFR (some monoclonal antibodies) toxicity.

Indications:

Additional language added:

- Amphotericin

- EGFR monoclonal antibodies

8/1/2010 - The description for Bill Type Code 12 was changed

8/1/2010 - The description for Bill Type Code 13 was changed

8/1/2010 - The description for Bill Type Code 14 was changed

8/1/2010 - The description for Bill Type Code 22 was changed

8/1/2010 - The description for Bill Type Code 23 was changed

8/1/2010 - The description for Bill Type Code 85 was changed

8/1/2010 - The description for Revenue code 0300 was changed

8/1/2010 - The description for Revenue code 0301 was changed

8/1/2010 - The description for Revenue code 0302 was changed

8/1/2010 - The description for Revenue code 0303 was changed

8/1/2010 - The description for Revenue code 0304 was changed

8/1/2010 - The description for Revenue code 0305 was changed

8/1/2010 - The description for Revenue code 0306 was changed

8/1/2010 - The description for Revenue code 0307 was changed

8/1/2010 - The description for Revenue code 0309 was changed

Annual review completed no changes to this LCD at this time.

A2004.07 R12

The LCD annual review was completed on June 14, 2011.

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**Effective 06/15/2011**, the following sections have been updated:

Indications and Limitations of Coverage and/or Medical Necessity

The typographical errors are corrected.

Documentation Requirements

When requesting an individual consideration through the written redetermination (formerly appeal) process, providers must include all relevant medical records and literature that supports the request. At a minimum two (2) Phase II studies (human feasibility studies suggesting efficacy, pilots) or one (1) Phase III study (primary evidence of safety and efficacy, pivotal) must be submitted for the Medical Director's review.

08/27/2011 - This policy was updated by the ICD-9 2011-2012 Annual Update.

A2004.07 R13

Based on ICD-9 CM 2011-2012 annual updates the following changes are effective for 10/01/2011:

Invalid codes: 998.0

ICD-9 CM codes added to the section "ICD-9 Codes that Support Medical Necessity": 998.02

**Reason for Change** ICD9 Addition/Deletion

#### **Related Documents**

This LCD has no Related Documents.

#### **LCD Attachments**

There are no attachments for this LCD.

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## **All Versions**

Updated on 09/02/2011 with effective dates 10/01/2011 - N/A

Updated on 06/23/2011 with effective dates 06/15/2011 - 09/30/2011

Updated on 09/15/2010 with effective dates 05/28/2010 - 06/14/2011

Updated on 09/15/2010 with effective dates 05/28/2010 - N/A

Updated on 08/01/2010 with effective dates 05/28/2010 - N/A

Updated on 08/01/2010 with effective dates 05/28/2010 - N/A

Updated on 05/20/2010 with effective dates 05/28/2010 - N/A

Updated on 05/20/2010 with effective dates 05/28/2010 - N/A

Updated on 08/27/2009 with effective dates 10/01/2009 - 05/27/2010

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