



# ICD-10-PCS

The complete official code set

Codes valid from October 1, 2020 through  
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Sample

**2021**

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# Introduction

## History of ICD-10-PCS

The World Health Organization has maintained the International Classification of Diseases (ICD) for recording cause of death since 1893. It has updated the ICD periodically to reflect new discoveries in epidemiology and changes in medical understanding of disease.

The International Classification of Diseases Tenth Revision (ICD-10), published in 1992, is the latest revision of the ICD. The WHO authorized the National Center for Health Statistics (NCHS) to develop a clinical modification of ICD-10 for use in the United States. This version, called ICD-10-CM, is intended to replace the previous U.S. clinical modification, ICD-9-CM, that has been in use since 1979. ICD-9-CM contains a procedure classification; ICD-10-CM does not.

CMS, the agency responsible for maintaining the inpatient procedure code set in the United States, contracted with 3M Health Information Systems in 1993 to design and then develop a procedure classification system to replace volume 3 of ICD-9-CM.

The result, ICD-10-PCS, was initially completed in 1998. The code set has been updated annually since that time to ensure that ICD-10-PCS includes classifications for new procedures, devices, and technologies.

The development of ICD-10-PCS had as its goal the incorporation of the following major attributes:

- **Completeness:** There should be a unique code for all substantially different procedures.
- **Unique definitions:** Because ICD-10-PCS codes are constructed of individual values rather than lists of fixed codes and text descriptions, the unique, stable definition of a code in the system is retained. New values may be added to the system to represent a specific new approach or device or qualifier, but whole codes by design cannot be given new meanings and reused.
- **Expandability:** As new procedures are developed, the structure of ICD-10-PCS should allow them to be easily incorporated as unique codes.
- **Multi-axial codes:** ICD-10-PCS codes should consist of independent characters, with each individual component retaining its meaning across broad ranges of codes to the extent possible.
- **Standardized terminology:** ICD-10-PCS should include definitions of the terminology used. While the meaning of specific words varies in common usage, ICD-10-PCS should not include multiple meanings for the same term, and each term must be assigned a specific meaning. There are no eponyms or common procedure terms in ICD-10-PCS.
- **Structural integrity:** ICD-10-PCS can be easily expanded without disrupting the structure of the system. ICD-10-PCS allows unique new codes to be added to the system because values for the seven characters that make up a code can be combined as needed. The system can evolve as medical technology and clinical practice evolve, without disrupting the ICD-10-PCS structure.

In the development of ICD-10-PCS, several additional general characteristics were added:

- **Diagnostic information is not included in procedure description:** When procedures are performed for specific diseases or disorders, the disease or disorder is not contained in the procedure code. The diagnosis codes, not the procedure codes, specify the disease or disorder.
- **Explicit not otherwise specified (NOS) options are restricted:** Explicit “not otherwise specified,” (NOS) options are restricted in ICD-10-PCS. A minimal level of specificity is required for each component of the procedure.
- **Limited use of not elsewhere classified (NEC) option:** Because all significant components of a procedure are specified in ICD-10-PCS, there is generally no need for a “not elsewhere classified” (NEC) code option. However, limited NEC options are incorporated into ICD-10-PCS where necessary. For example, new devices are frequently developed, and therefore it is necessary to provide an “other device” option for use until the new device can be explicitly added to the coding system.
- **Level of specificity:** All procedures currently performed can be specified in ICD-10-PCS. The frequency with which a procedure is performed was not a consideration in the development of the system. A unique code is available for variations of a procedure that can be performed.

ICD-10-PCS code structure results in qualities that optimize the performance of the system in electronic applications, and maximize the usefulness of the coded healthcare data. These qualities include:

- **Optimal search capability:** ICD-10-PCS is designed for maximum versatility in the ability to aggregate coded data. Values belonging to the same character as defined in a section or sections can be easily compared, since they occupy the same position in a code. This provides a high degree of flexibility and functionality for data mining.
- **Consistent characters and values:** Stability of characters and values across vast ranges of codes provides the maximum degree of functionality and flexibility for the collection and analysis of data. Because the character definition is consistent, and only the individual values assigned to that character differ as needed, meaningful comparisons of data over time can be conducted across a virtually infinite range of procedures.
- **Code readability:** ICD-10-PCS resembles a language in the sense that it is made up of semi-independent values combined by following the rules of the system, much the way a sentence is formed by combining words and following the rules of grammar and syntax. As with words in their context, the meaning of any single value is a combination of its position in the code and any preceding values on which it may be dependent.

# ICD-10-PCS Official Guidelines for Coding and Reporting

Narrative changes appear in **bold** text.

The Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS), two departments within the U.S. Federal Government's Department of Health and Human Services (DHHS) provide the following guidelines for coding and reporting using the International Classification of Diseases, 10th Revision, Procedure Coding System (ICD-10-PCS). These guidelines should be used as a companion document to the official version of the ICD-10-PCS as published on the CMS website. The ICD-10-PCS is a procedure classification published by the United States for classifying procedures performed in hospital inpatient health care settings.

These guidelines have been approved by the four organizations that make up the Cooperating Parties for the ICD-10-PCS: the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), CMS, and NCHS.

These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD-10-PCS itself. **They are intended to provide direction that is applicable in most circumstances. However, there may be unique circumstances where exceptions are applied.** The instructions and conventions of the classification take precedence over guidelines. These guidelines are based on the coding and sequencing instructions in the Tables, Index and Definitions of ICD-10-PCS, but provide additional instruction. Adherence to these guidelines when assigning ICD-10-PCS procedure codes is required under the Health Insurance Portability and Accountability Act (HIPAA). The procedure codes have been adopted under HIPAA for hospital inpatient healthcare settings. A joint effort between the healthcare provider and the coder is essential to achieve complete and accurate documentation, code assignment, and reporting of diagnoses and procedures. These guidelines have been developed to assist both the healthcare provider and the coder in identifying those procedures that are to be reported. The importance of consistent, complete documentation in the medical record cannot be overemphasized. Without such documentation accurate coding cannot be achieved.

## Conventions

**A1.** ICD-10-PCS codes are composed of seven characters. Each character is an axis of classification that specifies information about the procedure performed. Within a defined code range, a character specifies the same type of information in that axis of classification.

*Example:*

The fifth axis of classification specifies the approach in sections 0 through 4 and 7 through 9 of the system.

**A2.** One of 34 possible values can be assigned to each axis of classification in the seven-character code: they are the numbers 0 through 9 and the alphabet (except I and O because they are easily confused with the numbers 1 and 0). The number of unique values used in an axis of classification differs as needed.

*Example:*

Where the fifth axis of classification specifies the approach, seven different approach values are currently used to specify the approach.

**A3.** The valid values for an axis of classification can be added to as needed.

*Example:*

If a significantly distinct type of device is used in a new procedure, a new device value can be added to the system.

**A4.** As with words in their context, the meaning of any single value is a combination of its axis of classification and any preceding values on which it may be dependent.

*Example:*

The meaning of a body part value in the Medical and Surgical section is always dependent on the body system value. The body part value 0 in the Central Nervous body system specifies Brain and the body part value 0 in the Peripheral Nervous body system specifies Cervical Plexus.

**A5.** As the system is expanded to become increasingly detailed, over time more values will depend on preceding values for their meaning.

*Example:*

In the Lower Joints body system, the device value 3 in the root operation Insertion specifies Infusion Device and the device value 3 in the root operation Replacement specifies Ceramic Synthetic Substitute.

**A6.** The purpose of the alphabetic index is to locate the appropriate table that contains all information necessary to construct a procedure code. The PCS Tables should always be consulted to find the most appropriate valid code.

**A7.** It is not required to consult the index first before proceeding to the tables to complete the code. A valid code may be chosen directly from the tables.

**A8.** All seven characters must be specified to be a valid code. If the documentation is incomplete for coding purposes, the physician should be queried for the necessary information.

**A9.** Within a PCS table, valid codes include all combinations of choices in characters 4 through 7 contained in the same row of the table. In the example below, 0JHT3VZ is a valid code, and 0JHW3VZ is *not* a valid code.

**Section:** 0 **Medical and Surgical**  
**Body System:** J **Subcutaneous Tissue and Fascia**  
**Operation:** H **Insertion** Putting in a nonbiological appliance that monitors, assists, performs, or prevents a physiological function but does not physically take the place of a body part

Body Part	Approach	Device	Qualifier
S Subcutaneous Tissue and Fascia, Head and Neck V Subcutaneous Tissue and Fascia, Upper Extremity W Subcutaneous Tissue and Fascia, Lower Extremity	0 Open	1 Radioactive Element	Z No Qualifier
	3 Percutaneous	3 Infusion Device Y <b>Other Device</b>	
	0 Open	1 Radioactive Element	
T Subcutaneous Tissue and Fascia, Trunk	3 Percutaneous	3 Infusion Device V Infusion Pump Y <b>Other Device</b>	Z No Qualifier

# ICD-10-PCS Tables

## Central Nervous System and Cranial Nerves 001–00X

### Character Meanings

This Character Meaning table is provided as a guide to assist the user in the identification of character members that may be found in this section of code tables. It **SHOULD NOT** be used to build a PCS code.

Operation–Character 3	Body Part–Character 4	Approach–Character 5	Device–Character 6	Qualifier–Character 7
1 Bypass	0 Brain	0 Open	0 Drainage Device	0 Nasopharynx
2 Change	1 Cerebral Meninges	3 Percutaneous	2 Monitoring Device	1 Mastoid Sinus
5 Destruction	2 Dura Mater	4 Percutaneous Endoscopic	3 Infusion Device	2 Atrium
7 Dilation	3 Epidural Space, Intracranial	X External	4 Radioactive Element, Cesium-131 Collagen Implant	3 Blood Vessel
8 Division	4 Subdural Space, Intracranial		7 Autologous Tissue Substitute	4 Pleural Cavity
9 Drainage	5 Subarachnoid Space, Intracranial		J Synthetic Substitute	5 Intestine
B Excision	6 Cerebral Ventricle		K Nonautologous Tissue Substitute	6 Peritoneal Cavity
C Extirpation	7 Cerebral Hemisphere		M Neurostimulator Lead	7 Urinary Tract
D Extraction	8 Basal Ganglia		Y Other Device	8 Bone Marrow
F Fragmentation	9 Thalamus		Z No Device	9 Fallopian Tube
H Insertion	A Hypothalamus			A Subgaleal Space
J Inspection	B Pons			B Cerebral Cisterns
K Map	C Cerebellum			F Olfactory Nerve
N Release	D Medulla Oblongata			G Optic Nerve
P Removal	E Cranial Nerve			H Oculomotor Nerve
Q Repair	F Olfactory Nerve			J Trochlear Nerve
R Replacement	G Optic Nerve			K Trigeminal Nerve
S Reposition	H Oculomotor Nerve			L Abducens Nerve
T Resection	J Trochlear Nerve			M Facial Nerve
U Supplement	K Trigeminal Nerve			N Acoustic Nerve
W Revision	L Abducens Nerve			P Glossopharyngeal Nerve
X Transfer	M Facial Nerve			Q Vagus Nerve
	N Acoustic Nerve			R Accessory Nerve
	P Glossopharyngeal Nerve			S Hypoglossal Nerve
	Q Vagus Nerve			X Diagnostic
	R Accessory Nerve			Z No Qualifier
	S Hypoglossal Nerve			
	T Spinal Meninges			
	U Spinal Canal			
	V Spinal Cord			
	W Cervical Spinal Cord			
	X Thoracic Spinal Cord			
	Y Lumbar Spinal Cord			

# Upper Veins 051–05W

## Character Meanings

This Character Meaning table is provided as a guide to assist the user in the identification of character members that may be found in this section of code tables. It **SHOULD NOT** be used to build a PCS code.

Operation–Character 3	Body Part–Character 4	Approach–Character 5	Device–Character 6	Qualifier–Character 7
1 Bypass	0 Azygos Vein	0 Open	0 Drainage Device	1 Drug-Coated Balloon
5 Destruction	1 Hemiazygos Vein	3 Percutaneous	2 Monitoring Device	X Diagnostic
7 Dilation	3 Innominate Vein, Right	4 Percutaneous Endoscopic	3 Infusion Device	Y Upper Vein
9 Drainage	4 Innominate Vein, Left	X External	7 Autologous Tissue Substitute	Z No Qualifier
B Excision	5 Subclavian Vein, Right		9 Autologous Venous Tissue	
C Extirpation	6 Subclavian Vein, Left		A Autologous Arterial Tissue	
D Extraction	7 Axillary Vein, Right		C Extraluminal Device	
H Insertion	8 Axillary Vein, Left		D Intraluminal Device	
J Inspection	9 Brachial Vein, Right		J Synthetic Substitute	
L Occlusion	A Brachial Vein, Left		K Nonautologous Tissue Substitute	
N Release	B Basilic Vein, Right		M Neurostimulator Lead	
P Removal	C Basilic Vein, Left		Y Other Device	
Q Repair	D Cephalic Vein, Right		Z No Device	
R Replacement	F Cephalic Vein, Left			
S Reposition	G Hand Vein, Right			
U Supplement	H Hand Vein, Left			
V Restriction	L Intracranial Vein			
W Revision	M Internal Jugular Vein, Right			
	N Internal Jugular Vein, Left			
	P External Jugular Vein, Right			
	Q External Jugular Vein, Left			
	R Vertebral Vein, Right			
	S Vertebral Vein, Left			
	T Face Vein, Right			
	V Face Vein, Left			
	Y Upper Vein			

**AHA Coding Clinic for table 051**

2017, 3Q, 15 Bypass of innominate vein to atrial appendage

**AHA Coding Clinic for table 059**

2018, 3Q, 7 Catheter placement for treatment of congestive heart failure

**AHA Coding Clinic for table 05B**

2016, 2Q, 12 Resection of malignant neoplasm of infratemporal fossa

**AHA Coding Clinic for table 05H**

2016, 4Q, 97-98 Phrenic neurostimulator

**AHA Coding Clinic for table 05P**

2016, 4Q, 97-98 Phrenic neurostimulator

**AHA Coding Clinic for table 05Q**

2017, 3Q, 15 Bypass of innominate vein to atrial appendage

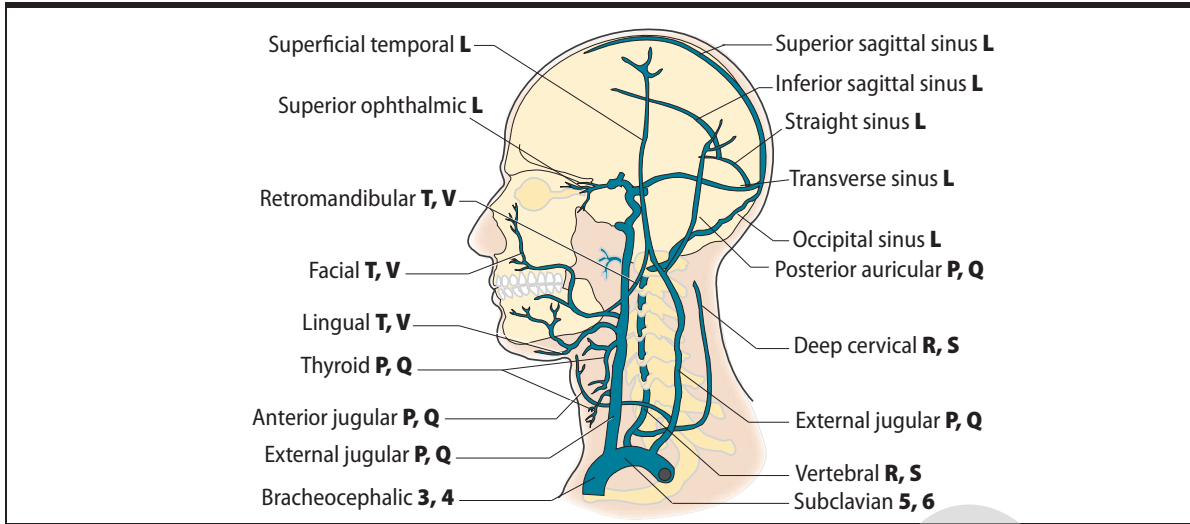
**AHA Coding Clinic for table 05S**

2013, 4Q, 125 Stage II cephalic vein transposition (superficialization) of arteriovenous fistula

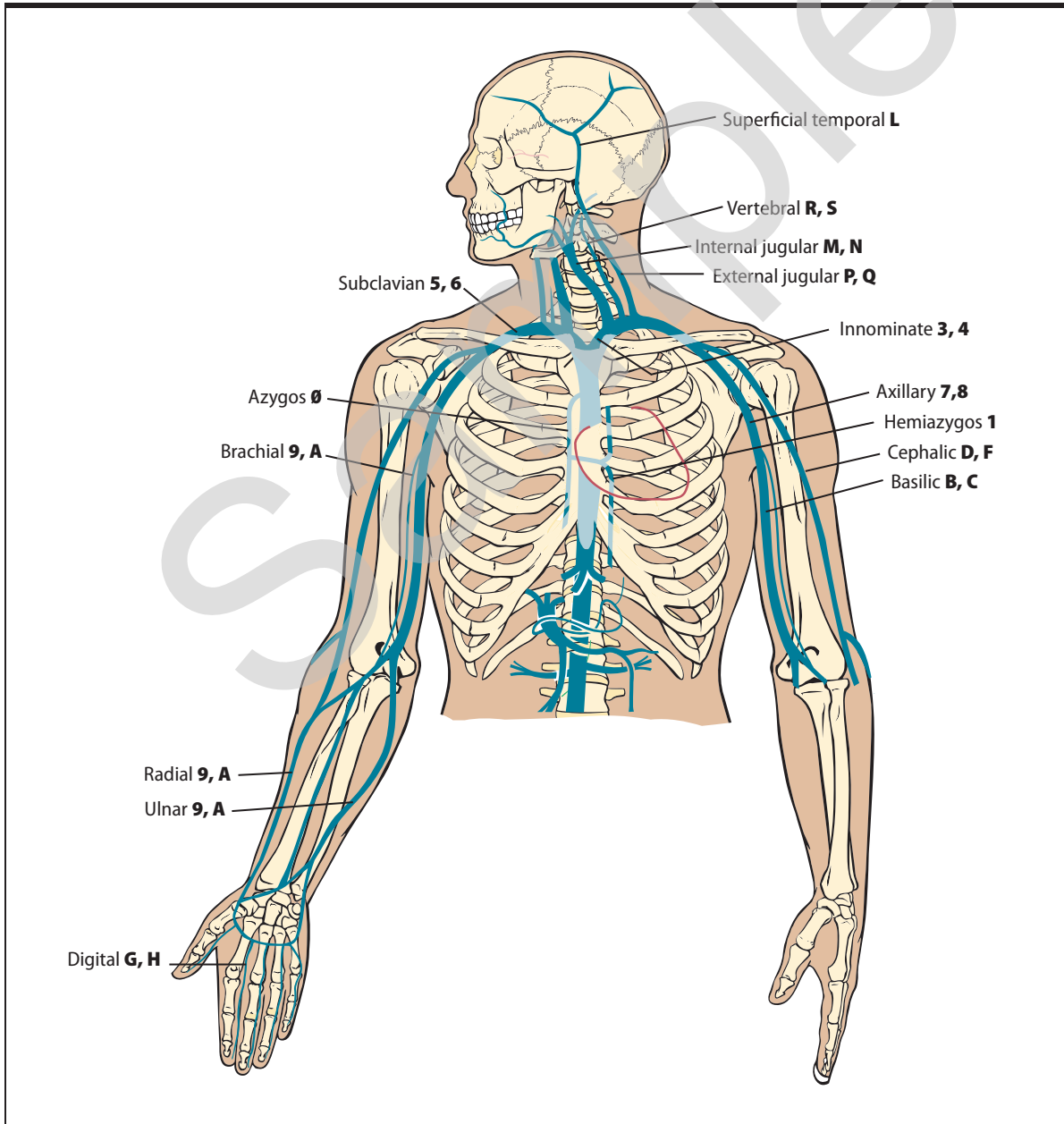
**AHA Coding Clinic for table 05W**

2016, 4Q, 97-98 Phrenic neurostimulator

Head and Neck Veins



Upper Veins



# Mouth and Throat 0C0–0CX

## Character Meanings

This Character Meaning table is provided as a guide to assist the user in the identification of character members that may be found in this section of code tables. It **SHOULD NOT** be used to build a PCS code.

Operation–Character 3	Body Part–Character 4	Approach–Character 5	Device–Character 6	Qualifier–Character 7
0 Alteration	0 Upper Lip	0 Open	0 Drainage Device	0 Single
2 Change	1 Lower Lip	3 Percutaneous	1 Radioactive Element	1 Multiple
5 Destruction	2 Hard Palate	4 Percutaneous Endoscopic	5 External Fixation Device	2 All
7 Dilation	3 Soft Palate	7 Via Natural or Artificial Opening	7 Autologous Tissue Substitute	X Diagnostic
9 Drainage	4 Buccal Mucosa	8 Via Natural or Artificial Opening Endoscopic	B Intraluminal Device, Airway	Z No Qualifier
B Excision	5 Upper Gingiva	X External	C Extraluminal Device	
C Extirpation	6 Lower Gingiva		D Intraluminal Device	
D Extraction	7 Tongue		J Synthetic Substitute	
F Fragmentation	8 Parotid Gland, Right		K Nonautologous Tissue Substitute	
H Insertion	9 Parotid Gland, Left		Y Other Device	
J Inspection	A Salivary Gland		Z No Device	
L Occlusion	B Parotid Duct, Right			
M Reattachment	C Parotid Duct, Left			
N Release	D Sublingual Gland, Right			
P Removal	F Sublingual Gland, Left			
Q Repair	G Submaxillary Gland, Right			
R Replacement	H Submaxillary Gland, Left			
S Reposition	J Minor Salivary Gland			
T Resection	M Pharynx			
U Supplement	N Uvula			
V Restriction	P Tonsils			
W Revision	Q Adenoids			
X Transfer	R Epiglottis			
	S Larynx			
	T Vocal Cord, Right			
	V Vocal Cord, Left			
	W Upper Tooth			
	X Lower Tooth			
	Y Mouth and Throat			

### AHA Coding Clinic for table 0C9

2017, 2Q, 16 Incision and drainage of floor of mouth

### AHA Coding Clinic for table 0CB

2017, 2Q, 16 Excision of floor of mouth  
 2016, 3Q, 28 Lingual tonsillectomy, tongue base excision and epiglottopexy  
 2016, 2Q, 19 Biopsy of the base of tongue  
 2014, 3Q, 21 Superficial parotidectomy

### AHA Coding Clinic for table 0CC

2016, 2Q, 20 Sialendoscopy with stone removal

### AHA Coding Clinic for table 0CQ

2017, 1Q, 20 Preparatory nasal adhesion repair before definitive cleft palate repair

### AHA Coding Clinic for table 0CR

2014, 3Q, 25 Excision of soft palate with placement of surgical obturator  
 2014, 2Q, 5 Oasis acellular matrix graft  
 2014, 2Q, 6 Composite grafting (synthetic versus nonautologous tissue substitute)

### AHA Coding Clinic for table 0CS

2016, 3Q, 28 Lingual tonsillectomy, tongue base excision and epiglottopexy

### AHA Coding Clinic for table 0CT

2016, 2Q, 12 Resection of malignant neoplasm of infratemporal fossa  
 2014, 3Q, 21 Superficial parotidectomy  
 2014, 3Q, 23 Le Fort I osteotomy



**0 Medical and Surgical****C Mouth and Throat****5 Destruction** Definition: Physical eradication of all or a portion of a body part by the direct use of energy, force, or a destructive agent

Explanation: None of the body part is physically taken out

Body Part Character 4		Approach Character 5	Device Character 6	Qualifier Character 7
<b>0</b> Upper Lip Frenulum labii superioris Labial gland Vermilion border	<b>5</b> Upper Gingiva <b>6</b> Lower Gingiva <b>7</b> Tongue Frenulum linguae	<b>0</b> Open <b>3</b> Percutaneous <b>X</b> External	<b>Z</b> No Device	<b>Z</b> No Qualifier
<b>1</b> Lower Lip Frenulum labii inferioris Labial gland Vermilion border	<b>N</b> Uvula Palatine uvula			
<b>2</b> Hard Palate	<b>P</b> Tonsils Palatine tonsil			
<b>3</b> Soft Palate	<b>Q</b> Adenoids Pharyngeal tonsil			
<b>4</b> Buccal Mucosa Buccal gland Molar gland Palatine gland				
<b>8</b> Parotid Gland, Right	<b>F</b> Sublingual Gland, Left	<b>0</b> Open	<b>Z</b> No Device	<b>Z</b> No Qualifier
<b>9</b> Parotid Gland, Left	<b>G</b> Submaxillary Gland, Right Submandibular gland	<b>3</b> Percutaneous		
<b>B</b> Parotid Duct, Right Stensen's duct	<b>H</b> Submaxillary Gland, Left <i>See G Submaxillary Gland, Right</i>			
<b>C</b> Parotid Duct, Left <i>See B Parotid Duct, Right</i>	<b>J</b> Minor Salivary Gland Anterior lingual gland			
<b>D</b> Sublingual Gland, Right				
<b>M</b> Pharynx Base of tongue Hypopharynx Laryngopharynx Lingual tonsil Oropharynx Piriform recess (sinus) Tongue, base of	<b>S</b> Larynx Aryepiglottic fold Arytenoid cartilage Corniculate cartilage Cuneiform cartilage False vocal cord Glottis Rima glottidis Thyroid cartilage Ventricular fold	<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>7</b> Via Natural or Artificial Opening <b>8</b> Via Natural or Artificial Opening Endoscopic	<b>Z</b> No Device	<b>Z</b> No Qualifier
<b>R</b> Epiglottis Glossoepiglottic fold	<b>T</b> Vocal Cord, Right Vocal fold			
	<b>V</b> Vocal Cord, Left <i>See T Vocal Cord, Right</i>			
<b>W</b> Upper Tooth		<b>0</b> Open	<b>Z</b> No Device	<b>0</b> Single
<b>X</b> Lower Tooth		<b>X</b> External		<b>1</b> Multiple <b>2</b> All

Non-OR 0C5[5,6][0,3,X]ZZ

Non-OR 0C5[W,X][0,X]Z[0,1,2]

**0 Medical and Surgical****C Mouth and Throat****7 Dilation** Definition: Expanding an orifice or the lumen of a tubular body part

Explanation: The orifice can be a natural orifice or an artificially created orifice. Accomplished by stretching a tubular body part using intraluminal pressure or by cutting part of the orifice or wall of the tubular body part.

Body Part Character 4		Approach Character 5	Device Character 6	Qualifier Character 7
<b>B</b> Parotid Duct, Right Stensen's duct		<b>0</b> Open <b>3</b> Percutaneous	<b>D</b> Intraluminal Device <b>Z</b> No Device	<b>Z</b> No Qualifier
<b>C</b> Parotid Duct, Left <i>See B Parotid Duct, Right</i>		<b>7</b> Via Natural or Artificial Opening		
<b>M</b> Pharynx Base of tongue Hypopharynx Laryngopharynx Lingual tonsil Oropharynx Piriform recess (sinus) Tongue, base of		<b>7</b> Via Natural or Artificial Opening <b>8</b> Via Natural or Artificial Opening Endoscopic	<b>D</b> Intraluminal Device <b>Z</b> No Device	<b>Z</b> No Qualifier
<b>S</b> Larynx Aryepiglottic fold Arytenoid cartilage Corniculate cartilage Cuneiform cartilage False vocal cord Glottis Rima glottidis Thyroid cartilage Ventricular fold		<b>0</b> Open <b>3</b> Percutaneous <b>4</b> Percutaneous Endoscopic <b>7</b> Via Natural or Artificial Opening <b>8</b> Via Natural or Artificial Opening Endoscopic	<b>D</b> Intraluminal Device <b>Z</b> No Device	<b>Z</b> No Qualifier

Non-OR 0C7[B,C][0,3,7][D,Z]Z

Non-OR 0C7M[7,8][D,Z]Z

# Anatomical Regions, Upper Extremities 0X0-0XY

## Character Meanings

This Character Meaning table is provided as a guide to assist the user in the identification of character members that may be found in this section of code tables. It **SHOULD NOT** be used to build a PCS code.

Operation-Character 3	Body Part-Character 4	Approach-Character 5	Device-Character 6	Qualifier-Character 7
0 Alteration	0 Forequarter, Right	0 Open	0 Drainage Device	0 Complete OR Allogeneic
2 Change	1 Forequarter, Left	3 Percutaneous	1 Radioactive Element	1 High OR Syngeneic
3 Control	2 Shoulder Region, Right	4 Percutaneous Endoscopic	3 Infusion Device	2 Mid
6 Detachment	3 Shoulder Region, Left	X External	7 Autologous Tissue Substitute	3 Low
9 Drainage	4 Axilla, Right		J Synthetic Substitute	4 Complete 1st Ray
B Excision	5 Axilla, Left		K Nonautologous Tissue Substitute	5 Complete 2nd Ray
H Insertion	6 Upper Extremity, Right		Y Other Device	6 Complete 3rd Ray
J Inspection	7 Upper Extremity, Left		Z No Device	7 Complete 4th Ray
M Reattachment	8 Upper Arm, Right			8 Complete 5th Ray
P Removal	9 Upper Arm, Left			9 Partial 1st Ray
Q Repair	B Elbow Region, Right			B Partial 2nd Ray
R Replacement	C Elbow Region, Left			C Partial 3rd Ray
U Supplement	D Lower Arm, Right			D Partial 4th Ray
W Revision	F Lower Arm, Left			F Partial 5th Ray
X Transfer	G Wrist Region, Right			L Thumb, Right
Y Transplantation	H Wrist Region, Left			M Thumb, Left
	J Hand, Right			N Toe, Right
	K Hand, Left			P Toe, Left
	L Thumb, Right			X Diagnostic
	M Thumb, Left			Z No Qualifier
	N Index Finger, Right			
	P Index Finger, Left			
	Q Middle Finger, Right			
	R Middle Finger, Left			
	S Ring Finger, Right			
	T Ring Finger, Left			
	V Little Finger, Right			
	W Little Finger, Left			

**AHA Coding Clinic for table 0X3**

- 2016, 4Q, 99 Root operation Control
- 2015, 1Q, 35 Evacuation of hematoma for control of postprocedural bleeding
- 2013, 3Q, 23 Control of intraoperative bleeding

**AHA Coding Clinic for table 0X6**

- 2017, 2Q, 3-4 Qualifiers for the root operation detachment
- 2017, 2Q, 18 Removal of polydactyl digits
- 2017, 1Q, 52 Further distal phalangeal amputation
- 2016, 3Q, 33 Traumatic amputation of fingers with further revision amputation

**AHA Coding Clinic for table 0XH**

- 2017, 2Q, 20 Exchange of intramedullary antibiotic impregnated spacer

**AHA Coding Clinic for table 0XP**

- 2017, 2Q, 20 Exchange of intramedullary antibiotic impregnated spacer

**AHA Coding Clinic for table 0XY**

- 2016, 4Q, 112-113 Transplantation

## Appendix C: Comparison of Medical and Surgical Root Operations

**Note:** the character associated with each operation appears in parentheses after its title.

### Procedures That Take Out Some or All of a Body Part

Root Operation	Objective of Procedure	Site of Procedure	Example
Destruction (5)	Eradicating without taking out or replacement	Some/all of a body part	Fulguration of endometrium
Detachment (6)	Cutting out/off without replacement	Extremity only, any level	Amputation above elbow
Excision (B)	Cutting out/off without replacement	Some of a body part	Breast lumpectomy
Extraction (D)	Pulling out or off without replacement	Some/all of a body part	Suction D&C
Resection (T)	Cutting out/off without replacement	All of a body part	Total mastectomy

### Procedures That Put in/Put Back or Move Some/All of a Body Part

Root Operation	Objective of Procedure	Site of Procedure	Example
Reattachment (M)	Putting back a detached body part	Some/all of a body part	Reattach finger
Reposition (S)	Moving a body part to normal or other suitable location	Some/all of a body part	Move undescended testicle
Transfer (X)	Moving a body part to function for a similar body part	Some/all of a body part	Skin pedicle transfer flap
Transplantation (Y)	Putting in a living body part from a person/animal	Some/all of a body part	Kidney transplant

### Procedures That Take Out or Eliminate Solid Matter, Fluids, or Gases From a Body Part

Root Operation	Objective of Procedure	Site of Procedure	Example
Drainage (9)	Taking or letting out	Fluids and/or gases from a body part	Incision and drainage
Extirpation (C)	Taking or cutting out	Solid matter in a body part	Thrombectomy
Fragmentation (F)	Breaking into pieces	Solid matter within a body part	Lithotripsy

### Procedures That Involve Only Examination of Body Parts and Regions

Root Operation	Objective of Procedure	Site of Procedure	Example
Inspection (J)	Visual/manual exploration	Some/all of a body part	Diagnostic cystoscopy Exploratory laparoscopy
Map (K)	Locating electrical impulse route/functional areas	Brain/cardiac conduction mechanism	Cardiac mapping

Term	ICD-10-PCS Value
Rebound HRD® (Hernia Repair Device)	Synthetic Substitute
RestoreAdvanced neurostimulator (SureScan)(MRI Safe)	Stimulator Generator, Multiple Array Rechargeable for Insertion in Subcutaneous Tissue and Fascia
RestoreSensor neurostimulator (SureScan)(MRI Safe)	Stimulator Generator, Multiple Array Rechargeable for Insertion in Subcutaneous Tissue and Fascia
RestoreUltra neurostimulator (SureScan)(MRI Safe)	Stimulator Generator, Multiple Array Rechargeable for Insertion in Subcutaneous Tissue and Fascia
Reveal (LINQ)(DX)(XT)	Monitoring Device
Reverse® Shoulder Prosthesis	Synthetic Substitute, Reverse Ball and Socket for Replacement in Upper Joints
Revo MRI™ SureScan® pacemaker	Pacemaker, Dual Chamber for Insertion in Subcutaneous Tissue and Fascia
Rheos® System device	Stimulator Generator in Subcutaneous Tissue and Fascia
Rheos® System lead	Stimulator Lead in Upper Arteries
RNS System lead	Neurostimulator Lead in Central Nervous System and Cranial Nerves
RNS system neurostimulator generator	Neurostimulator Generator in Head and Facial Bones
S-ICD™ lead	Subcutaneous Defibrillator Lead in Subcutaneous Tissue and Fascia
Sacral nerve modulation (SNM) lead	Stimulator Lead in Urinary System
Sacral neuromodulation lead	Stimulator Lead in Urinary System
SAPIEN transcatheter aortic valve	Zooplasmic Tissue in Heart and Great Vessels
SAVAL below-the-knee (BTK) drug-eluting stent system	Intraluminal Device, Sustained Release Drug-eluting in New Technology Intraluminal Device, Sustained Release Drug-eluting, Two in New Technology Intraluminal Device, Sustained Release Drug-eluting, Three in New Technology Intraluminal Device, Sustained Release Drug-eluting, Four or More in New Technology
Secura (DR) (VR)	Defibrillator Generator for Insertion in Subcutaneous Tissue and Fascia
Sheffield hybrid external fixator	External Fixation Device, Hybrid for Insertion in Upper Bones External Fixation Device, Hybrid for Reposition in Upper Bones External Fixation Device, Hybrid for Insertion in Lower Bones External Fixation Device, Hybrid for Reposition in Lower Bones
Sheffield ring external fixator	External Fixation Device, Ring for Insertion in Upper Bones External Fixation Device, Ring for Reposition in Upper Bones External Fixation Device, Ring for Insertion in Lower Bones External Fixation Device, Ring for Reposition in Lower Bones
Single lead pacemaker (atrium)(ventricle)	Pacemaker, Single Chamber for Insertion in Subcutaneous Tissue and Fascia

Term	ICD-10-PCS Value
Single lead rate responsive pacemaker (atrium)(ventricle)	Pacemaker, Single Chamber Rate Responsive for Insertion in Subcutaneous Tissue and Fascia
Sirolimus-eluting coronary stent	Intraluminal Device, Drug-eluting in Heart and Great Vessels
SJM Biocor® Stented Valve System	Zooplasmic Tissue in Heart and Great Vessels
Spacer, Articulating (Antibiotic)	Articulating Spacer in Lower Joints
Spacer, Static (Antibiotic)	Spacer in Lower Joints
Spinal cord neurostimulator lead	Neurostimulator Lead in Central Nervous System and Cranial Nerves
Spinal growth rods, magnetically controlled	Magnetically Controlled Growth Rod(s) in New Technology
Spiration IBV™ Valve System	Intraluminal Device, Endobronchial Valve in Respiratory System
Static Spacer (Antibiotic)	Spacer in Lower Joints
Stent, intraluminal (cardiovascular)(gastrointestinal)(hepatobiliary)(urinary)	Intraluminal Device
Stented tissue valve	Zooplasmic Tissue in Heart and Great Vessels
Stratos LV	Cardiac Resynchronization Pacemaker Pulse Generator for Insertion in Subcutaneous Tissue and Fascia
Subcutaneous injection reservoir, port	Vascular Access Device, Totally Implantable in Subcutaneous Tissue and Fascia
Subcutaneous injection reservoir, pump	Infusion Device, Pump in Subcutaneous Tissue and Fascia
Subdermal progesterone implant	Contraceptive Device in Subcutaneous Tissue and Fascia
Surpass Streamline™ Flow Diverter	Intraluminal Device, Flow Diverter for Restriction in Upper Arteries
Sutureless valve, Perceval	Zooplasmic Tissue, Rapid Deployment Technique in New Technology
SynCardia Total Artificial Heart	Synthetic Substitute
Synchra CRT-P	Cardiac Resynchronization Pacemaker Pulse Generator for Insertion in Subcutaneous Tissue and Fascia
SyncroMed Pump	Infusion Device, Pump in Subcutaneous Tissue and Fascia
Talent® Converter	Intraluminal Device
Talent® Occluder	Intraluminal Device
Talent® Stent Graft (abdominal)(thoracic)	Intraluminal Device
TandemHeart® System	Short-term External Heart Assist System in Heart and Great Vessels
TAXUS® Liberté® Paclitaxel-eluting Coronary Stent System	Intraluminal Device, Drug-eluting in Heart and Great Vessels
Therapeutic occlusion coil(s)	Intraluminal Device
Thoracostomy tube	Drainage Device
Thoratec IVAD (Implantable Ventricular Assist Device)	Implantable Heart Assist System in Heart and Great Vessels
Thoratec Paracorporeal Ventricular Assist Device	Short-term External Heart Assist System in Heart and Great Vessels
Tibial insert	Liner in Lower Joints
Tissue bank graft	Nonautologous Tissue Substitute