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INSTRUCTIONS FOR THE AUTOMATED CLASSIFICATION OF THE INITIATING AND MULTIPLE CAUSES OF FETAL DEATHS, 2012

SECTION I: GENERAL CONCEPTS FOR CODING FETAL DEATHS

A. INTRODUCTION

This manual provides instructions to NCHS mortality medical coders and nosologists for coding multiple causes of fetal death reported on the 2003 Revision of the Fetal Death Reports filed in the states. These mortality coding instructions are used by the National Center for Health Statistics (NCHS), which is the Federal agency responsible for the compilation of U.S. statistics on causes of fetal death. NCHS is part of the Centers of Disease Control and Prevention.

In coding causes of fetal death, NCHS refers to the World Health Organization's most recent revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10) for processing the data for fetal mortality tabulation.

Beginning with fetal deaths occurring in 1999, ICD-10 has been used for coding and classifying causes of fetal death. This revision of the Classification is published by the World Health Organization (WHO) and consists of three volumes. Volume 1 contains a list of three-character categories, the tabular list of inclusions, and the four-character sub-categories. The supplementary Z code Classification appears in Volume 1 but is not used for classifying mortality cause of death data, including fetal deaths. Optional fifth characters are provided for certain categories and an optional independent four-character coding system is provided to classify histological varieties of neoplasm, prefixed by the letter M (for morphology) and followed by a fifth character indicating behavior. These optional codes are not used at NCHS. Volume 2 includes the international rules and notes used in classifying and tabulating cause of death data including fetal death data. Volume 3 is an alphabetical index containing a comprehensive list of terms and codes for use in coding. Copies of these volumes may be purchased. See ordering information at <http://www.who.int/classifications/icd/en/>.

NCHS prepares updated versions of Volume 1 and Volume 3 annually http://www.cdc.gov/nchs/nvss/instruction_manuals.htm The major purpose of these updated versions is to provide and maintain a single published source of new and/or corrected code assignments including terms not indexed in Volume 3 and/or not classified in Volume 1 of ICD-10. Each year, all the major revisions from previous manuals will be documented in the Introduction of this manual under the heading "Major Revisions from Previous Manuals".

This manual documents concepts and instructions for coding multiple causes of fetal death consistent with the provisions of ICD-10. This manual should be used in conjunction with the latest updated versions of ICD-10, Volumes 1 and 3 and the Perinatal Subset of medical terms.

The Perinatal Subset is a list of terms classified to Chapter XVI, Certain conditions originating in the perinatal period (P00-P96). It is updated annually.

ICD-10 provides for the classification of certain medical conditions according to two different axes – the etiology or initiating disease process, referred to as the “dagger” code, and the manifestation or complication code, referred to as the “asterisk” code. NCHS uses and publishes only the dagger codes. This dual system was introduced in the Ninth Revision of the ICD and remained an integral part of the ICD-10.

For example, Coxsackie myocarditis has a code (B33.2†) marked with a “dagger” in Chapter 1, Certain infectious and parasitic diseases and a different code (I41.1*) marked with an “asterisk” in Chapter 9, Diseases of the circulatory system. NCHS only codes the B33.2. Similarly, diabetic nephropathy has a dagger code (E14.2†) in Chapter IV, Endocrine, nutritional and metabolic diseases and an asterisk code (N08.3*) in Chapter XIV, Diseases of the genitourinary system. NCHS only codes the E14.2.

The fetal death multiple cause codes are used as inputs to the ACME System (Automated Classification of Medical Entities) which was developed by NCHS to automatically select the underlying cause of death and the TRANSAX System (Translation of Axes) used to produce multiple cause of death statistics, beginning with deaths occurring in 1968. ACME will be used as the automated system for selecting the initiating cause of fetal deaths. The ACME System requires codes be assigned for each condition reported on the Fetal Death Report, usually in the order the information is recorded on the report. The output data of the system are the initiating causes of fetal deaths assigned by applying the underlying cause Selection Rule 3 and Modification Rules A-E of the Classification. These rules are documented in the ICD-10, Volume 2. The same cause is selected as if one applied the manual cause of fetal death coding instructions specified in Instruction Manual 2J, Instructions for the Manual Classification of the Initiating Cause of Fetal Deaths, 2012.

http://ftp.cdc.gov/pub/Health_Statistics/NCHS/Dataset_Documentation/NVSS/fetal_death_2003/

B. DEFINITIONS

Fetal Death is defined as “death prior to the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy and which is not an induced termination of pregnancy. The death is indicated by the fact that after such expulsion or extraction, the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. Heartbeats are to be distinguished from transient cardiac contractions; respirations are to be distinguished from fleeting respiratory efforts or gasps.”

Induced Termination of Pregnancy (Abortion) is defined as “purposeful interruption of an intrauterine pregnancy with the intention other than to produce a liveborn infant and which does not result in a live birth.” This definition excludes management of prolonged retention of products of conception following fetal death.

Ectopic pregnancy reported with an intentional intervention An ectopic pregnancy reported with an intentional intervention, such as “removal of embryo”, is not included in the fetal death file. Records with this type of event reported will be identified by the coder and proper steps taken for removal.

Live Birth is defined as “the expulsion or extraction from its mother of a product of human conception, irrespective of the duration of the pregnancy, which, after such expulsion or extraction, breathes or shows any other evidence of life such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Heartbeats are to be distinguished from transient cardiac contractions; respirations are to be distinguished from fleeting respiratory efforts or gasps.” "

This manual only includes instructions on coding causes of fetal deaths which includes “spontaneous abortions”. Terms interpreted as spontaneous abortions are included in Appendix G.

Induced abortions and live births are not included in the fetal death file. Terms interpreted as induced abortions are included in Appendix H.

C. ITEM 18. CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH

The U.S. Standard Report of Fetal Death provides spaces for a certifier to record pertinent information concerning the diseases, morbid conditions, and injuries which either resulted in or contributed to a fetal death. The CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH portion of the Fetal Death Report includes items 18a and 18b. It is designed to obtain the opinion of the certifier as to the initiating cause and prompts the certifier to report specific conditions.

A cause of fetal death is the morbid condition or disease process, abnormality, injury, or poisoning leading directly to fetal death. The initiating cause of fetal death is the disease or injury, which initiated the chain of morbid events leading directly to death or the circumstances of the accident or violence, which produced fatal injury. A fetal death often results from the combined effect of two or more conditions. These conditions may be completely unrelated, arising independently of each other or they may be causally related to each other; that is, one cause may lead to another which in turn, leads to a third cause, etc.

The format in the 2003 Revision of the Fetal Death Report which the certifier is requested to record the causes of fetal death facilitates the selection of the initiating cause when two or more causes are reported. He or she is requested to report an initiating condition in Item 18a and all remaining causes in Item 18b.

D. INCLUSIONS IN THE FILE

In some circumstances, the conditions reported in 18. Cause/Conditions Contributing to Fetal Death may indicate that this is not a fetal death. If the event does not meet the definition of a fetal death, the records will be removed automatically.

Induced terminations of pregnancy should be included in the fetal death file only when the fetus was known dead before the procedure and when the induction was performed for the sole purpose of removing an already-dead fetus. The term “induced termination of pregnancy” implies an induced termination of the pregnancy in progress, not one in which the fetal death has already occurred. Appendix G contains a list of terms not considered as induced abortions and that are coded as fetal deaths.

LOCAL FILE NO.

US STANDARD REPORT OF FETAL DEATH

STATE FILE NUMBER:

MOTHER	1. NAME OF FETUS (optional-at the discretion of the parents)		2. TIME OF DELIVERY (24hr)	3. SEX (M/F/Unk)	4. DATE OF DELIVERY (Mo/Day/Yr)						
	5a. CITY, TOWN, OR LOCATION OF DELIVERY	7. PLACE WHERE DELIVERY OCCURRED (Check one)		8. FACILITY NAME (if not institution, give street and number)							
	5b. ZIP CODE OF DELIVERY	<input type="checkbox"/> Hospital <input type="checkbox"/> Freestanding birthing center									
	6. COUNTY OF DELIVERY	<input type="checkbox"/> Home Delivery: Planned to deliver at home? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Clinic/Doctor's office <input type="checkbox"/> Other (Specify) _____		9. FACILITY ID. (NPI)							
	10a. MOTHER'S CURRENT LEGAL NAME (First, Middle, Last, Suffix)			10b. DATE OF BIRTH (Mo/Day/Yr)							
	10c. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last, Suffix)			10d. BIRTHPLACE (State, Territory, or Foreign Country)							
	11a. RESIDENCE OF MOTHER-STATE	11b. COUNTY	11c. CITY, TOWN, OR LOCATION								
	11d. STREET AND NUMBER	11e. APT. NO.	11f. ZIP CODE	11g. INSIDE CITY LIMITS? <input type="checkbox"/> Yes <input type="checkbox"/> No							
	12a. FATHER'S CURRENT LEGAL NAME (First, Middle, Last, Suffix)		12b. DATE OF BIRTH (Mo/Day/Yr)	12c. BIRTHPLACE (State, Territory, or Foreign Country)							
	13. METHOD OF DISPOSITION: <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Hospital Disposition <input type="checkbox"/> Donation <input type="checkbox"/> Removal from State <input type="checkbox"/> Other (Specify) _____										
FATHER		14. ATTENDANT'S NAME, TITLE, AND NPI				15. NAME AND TITLE OF PERSON COMPLETING REPORT		16. DATE REPORT COMPLETED		17. DATE RECEIVED BY REGISTRAR	
		NAME: _____ NPI: _____ TITLE: <input type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM/CM <input type="checkbox"/> OTHER MIDWIFE <input type="checkbox"/> OTHER (Specify) _____		Name _____ Title _____		MM / DD / YYYY		MM / DD / YYYY			
DISPOSITION		18. CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH									
		18a. INITIATING CAUSE/CONDITION (AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS) Maternal Conditions/Diseases (Specify) _____ Complications of Placenta, Cord, or Membranes <input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____ Other Obstetrical or Pregnancy Complications (Specify) _____ Fetal Anomaly (Specify) _____ Fetal Injury (Specify) _____ Fetal Infection (Specify) _____ Other Fetal Conditions/Disorders (Specify) _____ <input type="checkbox"/> Unknown					18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS (SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b) Maternal Conditions/Diseases (Specify) _____ Complications of Placenta, Cord, or Membranes <input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____ Other Obstetrical or Pregnancy Complications (Specify) _____ Fetal Anomaly (Specify) _____ Fetal Injury (Specify) _____ Fetal Infection (Specify) _____ Other Fetal Conditions/Disorders (Specify) _____ <input type="checkbox"/> Unknown				
ATTENDANT AND REGISTRATION INFORMATION		18c. WEIGHT OF FETUS (grams preferred, specify unit)		18e. ESTIMATED TIME OF FETAL DEATH		18f. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Planned		18g. WAS A HISTOLOGICAL PLACENTAL EXAMINATION PERFORMED? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Planned		18h. WERE AUTOPSY OR HISTOLOGICAL PLACENTAL EXAMINATION RESULTS USED IN DETERMINING THE CAUSE OF FETAL DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> grams <input type="checkbox"/> lb/oz		<input type="checkbox"/> Dead at time of first assessment, no labor ongoing <input type="checkbox"/> Dead at time of first assessment, labor ongoing <input type="checkbox"/> Died during labor, after first assessment <input type="checkbox"/> Unknown time of fetal death							
CAUSE OF FETAL DEATH		18d. OBSTETRIC ESTIMATE OF GESTATION AT DELIVERY _____ (completed weeks)									

Mother's Name _____
 Mother's Medical Record No. _____

SECTION II: GENERAL INSTRUCTIONS

A. INTRODUCTION

EXCERPT FROM U.S. STANDARD REPORT OF FETAL DEATH (Rev. 11/2003)

18. CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH

<p>18a. INITIATING CAUSE/CONDITION</p> <p>(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)</p> <p>Maternal Conditions/Diseases (Specify) _____</p> <p>Complications of Placenta, Cord, or Membranes</p> <p><input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____</p> <p>Other Obstetrical or Pregnancy Complications (Specify) _____</p> <p>Fetal Anomaly (Specify) _____</p> <p>Fetal Injury (Specify) _____</p> <p>Fetal Infection (Specify) _____</p> <p>Other Fetal Conditions/Disorders (Specify) _____</p> <p>Unknown</p>	<p>18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS</p> <p>(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)</p> <p>Maternal Conditions/Diseases Specify) _____</p> <p>Complications of Placenta, Cord, or Membranes</p> <p><input type="checkbox"/> Rupture of membranes prior to onset of labor <input type="checkbox"/> Abruptio placenta <input type="checkbox"/> Placental insufficiency <input type="checkbox"/> Prolapsed cord <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Other (Specify) _____</p> <p>Other Obstetrical or Pregnancy Complications (Specify) _____</p> <p>Fetal Anomaly (Specify) _____</p> <p>Fetal Injury (Specify) _____</p> <p>Fetal Infection (Specify) _____</p> <p>Other Fetal Conditions/Disorders (Specify) _____</p> <p>Unknown</p>
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Code all information reported in Item 18 of the Fetal Death Report, “**CAUSE/CONDITIONS CONTRIBUTING TO FETAL DEATH**”

Refer to the sex of the fetus to assign the most appropriate cause of fetal death code.

In Volumes 1 and 3 of ICD-10 and the Perinatal Subset, the fourth-character subcategories of three-character categories are preceded by a decimal point. For coding purposes, omit the decimal point.

The data will be entered in the same format for coding and entering multiple causes of fetal deaths as used for coding multiple causes of death for regular mortality data and will be processed through Underlying cause selection Rule 3 and the Modification Tables of the ACME System Decision Tables. A screen will be generated in the same format used for entering regular mortality multiple cause data. The State File Number will also be generated.

Enter codes in 18a as if reported on the uppermost line of Part I of the regular death certificate in the same order as the entries they represent, proceeding from the entry reported uppermost, downward and from the left to right. Terms requiring special formatting may affect the placement of codes. If the lower line is an obvious continuation of a line above, enter the codes accordingly. When an identical code applies to more than one condition reported, enter the code for the first-mentioned of these conditions only. If the entries are numbered, code in numeric order.

Enter codes in 18b as if reported in Part II of the regular death certificate in the same order as the entries they represent, proceeding from the entry reported uppermost, downward and from the left to right. If the lower line is an obvious continuation of a line above, enter the codes accordingly. When an identical code applies to more than one condition reported, enter the code for the first-mentioned of these conditions only.

NOTE: Repetitive (identical) codes are acceptable, if reported once in 18a (Part I) and once in 18b (Part II). They are not acceptable if reported together in 18a (Part I) or together in 18b (Part II).

EXAMPLE:

<p>18a. INITIATING CAUSE/CONDITION</p> <p>(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)</p> <p>Maternal Conditions/Diseases (Special) _____</p> <p>Complications of Placenta, Cord, or Membranes</p> <p><input type="checkbox"/> Rupture of membranes prior to onset of labor</p> <p><input type="checkbox"/> Abruptio placenta</p> <p><input type="checkbox"/> Placental insufficiency</p> <p><input checked="" type="checkbox"/> Prolapsed cord</p> <p><input type="checkbox"/> Chorioamnionitis</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p>Other Obstetrical or Pregnancy Complications (Specify) _____</p> <p>Fetal Anomaly (Specify) _____</p> <p>_____</p> <p>Fetal Injury (Specify) _____</p> <p>Fetal Infection (Specify) _____</p> <p>Other Fetal Conditions/Disorders (Specify) <u>fetal distress</u></p> <p><input type="checkbox"/> Unknown</p>	<p>18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS</p> <p>(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)</p> <p>Maternal Conditions/Diseases (Specify) _____</p> <p>Complications of Placenta, Cord, or Membranes</p> <p><input type="checkbox"/> Rupture of membranes prior to onset of labor</p> <p><input type="checkbox"/> Abruptio placenta</p> <p><input type="checkbox"/> Placental insufficiency</p> <p><input type="checkbox"/> Prolapsed cord</p> <p><input type="checkbox"/> Chorioamnionitis</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p>Other Obstetrical or Pregnancy Complications (Specify) <u>Breech delivery</u></p> <p>Fetal Anomaly (Specify) _____</p> <p>_____</p> <p>Fetal Injury (Specify) _____</p> <p>Fetal Infection (Specify) _____</p> <p>Other Fetal Conditions/Disorders (Specify) <u>fetal heart failure during delivery</u></p> <p><input type="checkbox"/> Unknown</p>
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Code in this order, Part 1 (18a) prolapsed cord, fetal distress, Part II (18b) breech delivery affecting fetus and fetal heart failure.

B. EXCESSIVE CODES

When 18a (Part I) or 18b (Part II) requires more than eight codes, delete the excessive codes (any over eight) for the line using the following criteria in the order listed:

NOTE: During the deletion process, when the numbers of existing codes become eight, discontinue the deletion process. The ACME System can tolerate a record with eight codes per line.

1. Delete ill-defined conditions, P042, P070, P071, P072, P073, P201, P209, P219, P95, and R000-R99 (except when one of these codes is the first code on the line), proceeding right to left.
2. Delete any nature of injury codes classified to S000-T983 (except when one of these codes is the first code on the line), proceeding right to left.
3. Delete any repetitive codes (except the first one on a line) proceeding right to left.
4. If, after applying the preceding criteria, 18a or 18b still has more than eight codes, delete beginning with the last code on the line until only eight remain.

When a single record requires more than fourteen codes, delete the excessive codes using the following criteria in the order listed:

NOTE: During the deletion process, when the number of existing codes become fourteen, discontinue the deletion process. The ACME System can tolerate a record with fourteen codes.

Begin deleting in 18b (Part II).

1. Delete all ill-defined conditions classified to P042, P070, P071, P072, P073, P201, P209, P219, P95 and R000-R99 in 18b (Part II). Do not delete an ill-defined condition when it is the first code in 18b (Part II). Proceed deleting right to left in 18b (Part II). If there are more than fourteen codes remaining after deleting the ill-defined codes in 18b (Part II), delete any of the above ill-defined codes in 18a (Part I) applying the same criteria and order of deletion.
2. Delete any nature of injury codes classified to S000-T983. Do not delete a nature of injury code when it is the first code in 18b (Part II). Proceed deleting right to left in 18b (Part II). If there are more than fourteen codes remaining after deleting the nature of injury codes in 18b (Part II), delete any of the above nature of injury codes in 18a (Part I) applying the same criteria and order of deletion.
3. Delete any repetitive codes. Do not delete a repetitive code when it is the first code in 18b (Part II). If there are more than fourteen codes remaining after deleting the repetitive

codes in 18b (Part II), delete repetitive codes in 18a (Part I), applying the same criteria and order of deletion. Proceed right to left until there are only fourteen codes remaining on the record.

C. GENERAL CODING CONCEPT

The coding of cause of fetal death information consists of the assignment of the most appropriate ICD-10 code(s) for each diagnostic entity reported on the Fetal Death Report. In order to arrive at the appropriate code for a diagnostic entity, code each entity separately. Do not apply provisions in ICD-10 for linking two or more diagnostic terms to form a composite diagnosis classifiable to a single ICD-10 code.

Plural form of disease

Do not use the plural form of a disease or the plural form of a site to indicate “multiple”.

EXAMPLE: Congenital defects Q899

Code Q899, Defect, congenital. Do not code Q897, multiple congenital defects.

Implied “disease”

When an adjective or noun form of a site is entered as a separate diagnosis, i.e., it is not part of the entry immediately preceding or following it, assume the word “disease” after the site and code accordingly.

Drug dependent, drug dependency

When drug dependent or drug dependency modifies a condition, consider as a non-codable modifier unless indexed.

Conditions qualified by “rule out,” “ruled out,” “r/o”

When a condition is qualified by “rule out,” “ruled out,” or “r/o,” etc., do not enter a code for the condition.

Non-indexed and illegible entries

Terms not indexed

When a term is reported that is not in the index, enter “R97” on the record where a code for the non-indexed term would go. All “R97” codes will be reviewed on a regular basis to determine if they should indeed be added to Volume 3. After documenting the non-indexed term in the index, the R97 codes will be manually replaced in the data file with the code assigned in the index.

Illegible entries

When an illegible entry is the only entry on the report, code P95. When an illegible entry is reported with other classifiable entries, disregard the illegible entry and code the remaining entries as indexed.

Qualifying Conditions as Acute or Chronic

Acute and chronic

Sometimes the terms acute and chronic are reported preceding two or more conditions. In these cases, use the term (“acute” or “chronic”) with the condition it **immediately** precedes.

Punctuation Marks

1. Disregard punctuation marks such as a period, comma, semicolon, colon, dash, slash, question mark or exclamation mark when placed at the end of a line in 18a. Do not apply this instruction to a hyphen (-) which indicates a word is incomplete.
2. When conditions are separated by a slash (/), code each condition as indexed.
3. When a dash (-) or slash (/) is used to separate sites reported with one condition and the combination of the sites is indexed to a single ICD-10 code, disregard the punctuation and code as indexed. This does not apply to commas.
4. When conditions are indexed together, yet separated by a comma, code the conditions separately. If the term following the comma is an adjective, refer to instructions on coding adjectival modifiers.

D. DEFINITIONS AND TYPES OF DIAGNOSTIC ENTITIES

A diagnostic entity is a single term or a composite term, comprised of one word or of two or more adjoining words, that is used to describe a disease, nature of injury, or other morbid condition. In this manual, diagnostic entity and diagnostic term are used interchangeably. A diagnostic entity may indicate the existence of a condition classifiable to a single ICD-10 category or it may contain elements of information that are classifiable to different ICD-10 categories. For coding purposes, it is necessary to distinguish between two different kinds of diagnostic entities – a “one-term entity,” and a “multiple one-term entity.”

One-term entity

1. A one-term entity is a diagnostic entity classifiable to a single ICD-10 code.
2. A diagnostic term that contains one of the following adjectival modifiers indicates the condition modified has undergone certain changes and is considered to be a one-term entity:

adenomatous	hypoxemic
anoxic	hypoxic
congestive	inflammatory
cystic	ischemic
embolic	necrotic
erosive	obstructed, obstructive
gangrenous	ruptured
hemorrhagic	

(These instructions apply to the above adjectival modifiers only.)

For code assignment, apply the following criteria in the order stated:

- a. If the modifier and lead term are indexed together, code as indexed.
- b. If the modifier is not indexed under the lead term, but “specified” is, use the code for specified (usually .8).
- c. If neither the modifier nor “specified” is indexed under the lead term, refer to Volume 1 under the NOS code for the lead term and look for an applicable specified 4th character subcategory.
- d. If neither a, b, or c apply, code the lead term without the modifier.

Multiple one-term entity

A multiple one-term entity is a diagnostic entity consisting of two or more contiguous words on a line for which the Classification does not provide a single code for the entire entity but does provide a single code for each of the components of the diagnostic entity. Consider as a multiple one-term entity if each of the components can be considered as separate one-term entities, i.e., they can stand alone as separate diagnosis. Code each component of the multiple one-term entity as indexed and on the same line where reported.

Adjectival modifiers

NOTE: Code an adjective reported at the end of a diagnostic entity as if it preceded the entity. If indexed to a single code, use that code. If not indexed together, follow the instructions for coding multiple one-term entities.

1. If an adjectival modifier is reported with more than one condition, modify only the first condition.
2. If an adjectival modifier is reported with one condition and more than one site is reported, modify all sites.
3. If an adjectival modifier precedes two different diseases that are reported with a connecting term, modify only the first disease.
4. If the adjectival form of a word(s) or a qualifier(s) is reported in parenthesis, use the adjective to modify the term preceding it.

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases

(Specify) Diabetic nephrosis and vascular disease

Code 18a (Part 1) to P701 P003.

Code 18a (Part I) P701, Maternal condition, affecting fetus or newborn, diabetes mellitus (conditions in E10-E14) and P003, Maternal condition, affecting fetus or newborn, circulatory disease, (conditions in I00-I99, Q20-Q28). Do not modify the vascular disease as diabetic since there are two separate diseases reported with a connecting term.

Parenthetical Entries

When one medical entity is reported, followed by another complete medical entity enclosed in parenthesis, disregard the parenthesis and code as separate terms.

- a) When the adjective form of words or qualifiers are reported in parenthesis, use the adjectives to modify the entity preceding it.
- b) If the term in parenthesis is not a complete term and is not a modifier, consider as part of the preceding term.

EXAMPLES:

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases
(Specify) Diabetic renal disease (Nephrosis)

Code 18a (Part 1) P701 P001.

Code 18a (Part I) P701, Maternal condition, affecting fetus or newborn, diabetes mellitus (conditions in E10-E14) and P001, Maternal condition, affecting fetus or newborn, nephritis, nephrotic syndrome and nephrosis (conditions in N00-N08). Nephrosis enclosed in parenthesis is a complete medical entity that can stand alone; therefore, code as a separate entity.

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases
(Specify) Renal disease (Diabetic)

Code 18a (Part 1) P701.

Code 18a (Part I) P701, Maternal condition, affecting fetus or newborn, diabetes mellitus (conditions in E10-E14). Code as Diabetic renal disease. Consider “Diabetic” as an adjective modifying renal disease.

E. CODING FETAL CONDITIONS

Conditions of the fetus can be coded to almost any category in the list of valid codes (Appendix D) other than P000-P049 but will most often be coded to categories P050-P95, Perinatal conditions and Q000-Q999, Congenital anomalies. In assigning codes for conditions of the fetus, code as indexed in this priority order: fetus, fetal, affecting fetus or newborn, fetus or newborn, congenital. However, pay special attention to the availability of a relevant code in the Perinatal Subset. There is a subset of Volume 3, the alphabetical index, dedicated to perinatal conditions and referred to as the Perinatal Subset. NCHS provides this as a separate document to assist coders in identifying conditions indexed as “fetus and newborn” or classified to Chapter XVI. It is updated annually.

EXAMPLES:

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Fetal anomaly
(Specify) Congenital diaphragmatic hernia

Code 18a (Part 1) Q790.

Code 18a (Part I) Q790, Hernia, diaphragm, diaphragmatic, congenital since not indexed as fetus, fetal, affecting fetus or newborn, fetus or newborn or newborn. or less than 28 days.

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Other Fetal Conditions/Disorders
(Specify) Central respiratory failure

Code 18a (Part 1) G938

Code 18a (Part 1) G938, Failure, respiratory, central since central respiratory failure is not indexed as fetus, fetal, fetus or newborn or congenital. G938 is a valid fetal death code. Refer to Appendix D for a list of Valid Fetal Death Codes.

F. CODING MATERNAL CONDITIONS

Maternal conditions affecting the fetus should be coded to categories P000-P049. When conditions of the mother directly impact the fetus and are reported on the Fetal Death Report and the condition is not indexed, refer to Volume I, Chapter XVI to categories P000-P049, Fetus and newborn affected by maternal factors and by complications of pregnancy, labor and delivery. Also, refer to the Index under:

- Maternal condition, affecting fetus or newborn
- Pregnancy, complicated by
- Delivery, complicated by
- Labor
- The complication itself, such as Placenta, abnormality, affecting fetus or newborn.

EXAMPLES:

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases
(Specify) Maternal malnutrition

Code 18a (Part I) P004

Code 18a (Part I) P004, Maternal malnutrition affecting fetus or newborn as indexed.

Assign category P008 to maternal conditions not indexed or classifiable to any other specified category. A list of all conditions not indexed and assigned code P008 will be maintained and will be added to the annual update of Volume 3 and also included in the Perinatal Subset. Please refer all conditions assigned to code P008 to Supervisor and/or a designated contact to ensure they will be incorporated into the next annual edition of Volume 3 and the Perinatal Subset.

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Maternal Conditions/Diseases
(Specify) Crohn's disease

Code 18a (Part 1) P008

Code 18a (Part 1) P008, Maternal condition, affecting fetus or newborn, specified condition NEC.

Complications of Placenta, Cord, or Membranes

When the checkbox items in 18a and 18b are marked, each should be assigned codes as follows:

- Rupture of membranes prior to onset of labor
- Abruptio placenta
- Placental insufficiency
- Prolapsed cord
- Chorioamnionitis
- Other (specify)

If the checkbox for rupture of membranes prior to onset of labor is marked, assign code **P011**.

If the checkbox for abruptio placenta is marked, assign code **P021**.

If the checkbox for placental insufficiency is marked, assign code **P022**.

If the checkbox for prolapsed cord is marked, assign code **P024**.

If the checkbox for chorioamnionitis is marked, assign code **P027**.

If the checkbox for Other is marked 'Y' and no codeable condition or a condition classified to P95 is reported in the 'Other (specify)', assign codes **P022**, **P026**, and **P029**; regardless of whether any of the previous boxes have been checked.

If specified conditions are written in the 'Other (specify)', code the condition to the mother unless obviously of the fetus. (example, anencephaly – the absence of a large part of the brain and the skull; this is clearly a condition of the fetus.)

- Fetal injury If reported as a result of an external cause, refer to your immediate supervisor for a code assignment
- Unknown code P95 (only if no other information is on record)

EXAMPLES:

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Other : Y

Other : Y

Other (specify) : *Unknown*

OR

Other (specify)

: *NONE*

Code 18a (Part I) P022 P026 P029

Code 18a (Part I) P022 P026 P029, complication of placenta, cord, or membranes. It seems that the certifier is saying yes, there is a complication of the placenta, cord, or membranes: they're just not sure what the specific complication is.

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Rupture of membranes : Y

Other : Y

Other (specify) : Previous Birth

Code 18a (Part I) P011 P022 P026 P029

Code 18a (Part I) P011, Rupture of membranes and P022, P026, P029 complication of placenta, cord, or membranes since the checkbox is marked 'Y' and previous birth is not a codeable condition.

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Other : Y

Other (specify) : Twin-Twin Transfusion Syndrome

Code 18a (Part I) P023

Code 18a (Part I) P023, Twin-Twin Transfusion Syndrome. Since a codeable condition is reported in the 'Other (specify)', do not assign the 3 codes for complication of placenta, cord, or membranes.

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Other : Y

Other (specify) :

18b. OTHER SIGNIFIGANT CAUSES OR CONDITIONS

Other Fetal Conditions/Disorders: Fetal Demise

Code 18a (Part I) P022 P026 P029

Code 18a (Part I) P022 P026 P029, complication of placenta, cord, or membranes and leave 18b (Part II) blank since P95 is not assigned when other information is on the record.

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Other : Y

Other (specify) :

18b. OTHER SIGNIFIGANT CAUSES OR CONDITIONS

Complications of Placenta, Cord, or Membranes

Other : Y

Other (specify) :

Code 18a (Part I) P022 P026 P029/Code 18b (Part II) P022 P026 P029

Code 18a (Part I) P022 P026 P029, complication of placenta, cord, or membranes and code 18b (Part II) P022 P026 P029, complication of placenta, cord, or membranes since the checkbox is marked 'Y' in both places.

G. FORMAT

Conditions reported in 18a

Enter the codes for entries in 18a in the order the entries are reported, proceeding from the entry reported uppermost in 18a from left to right, if there is more than one entry on the same line. If the entries are numbered, code in numeric order.

Connecting Terms

“Due to” written in or implied in Items 18a and 18b

When the certifier has stated that one condition was due to another or has used another connecting term that implies a due to relationship between conditions in items 18a and 18b, take into consideration the position of the term in 18a/18b and code the entry following the “written-in due to” directly preceding the term.

- a) The following connecting terms must be “written in” and are interpreted as meaning “due to” when the entity immediately preceding and following these terms is a disease condition, nature of injury or an external cause:

after	incident to	received in
arising in or during	incurred after	resulting from
as (a) complication of	incurred during	resulting when
as a result of	incurred in	secondary to (2°)
because of	incurred when	subsequent to
caused by	induced by	sustained as
complication(s) of	occurred after	sustained by
during	occurred during	sustained during
etiology	occurred in	sustained in
following	occurred when	sustained when
for	occurred while	sustained while
from	origin	
in	received from	

EXAMPLES:

18a. INITIATING CAUSE/CONDITION

(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)

Other Fetal Conditions/Disorders

(Specify) Anoxia and hemorrhage caused by hemolytic disease of fetus

Code 18a (Part 1) to P209 P559 P509

Code 18a (Part 1) P209, Anoxia, fetal, fetus, P559, Disease, hemolytic (fetus) (newborn) and P509, Hemorrhage, fetal, fetus. Code the Hemolytic disease of fetus immediately preceding the hemorrhage.

18a. INITIATING CAUSE/CONDITION

Maternal Conditions/Diseases

(Specify) Fetal cardiac failure due to maternal polyhydramnios

Code 18a (Part 1) P013 P290

Code 18a (Part 1) P013, Polyhydramnios, affecting fetus or newborn and P290, Failure, cardiac, newborn. Code maternal polyhydramnios as the first entry in 18a (Part I), directly preceding the fetal cardiac failure.

When one of the above terms is the first entry in 18b, indicating the entry following the term on the above list is a continuation of 18a, code in 18a. Take into consideration the position of the term in 18a and code the entry following the “written-in due to” in 18b directly preceding the term in 18a.

EXAMPLES:

<p>18a. INITIATING CAUSE/CONDITION</p> <p>(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)</p> <p>Fetal Injury (Specify) <u>Fetal anoxia</u></p>	<p>18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS</p> <p>(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)</p> <p>Maternal Conditions/Diseases (Specify) <u>resulting from maternal hypertension</u></p>
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Code 18a (Part 1) P000 P209

Code 18a (Part 1) P000, Maternal condition, affecting fetus or newborn, hypertension (conditions in 010-011, 013-016) and P209, Anoxia, fetal, fetus. Code maternal hypertension in 18b directly preceding fetal anoxia in 18a.

<p>18a. INITIATING CAUSE/CONDITION</p> <p>(AMONG THE CHOICES BELOW, PLEASE SELECT THE ONE WHICH MOST LIKELY BEGAN THE SEQUENCE OF EVENTS RESULTING IN THE DEATH OF THE FETUS)</p> <p>Maternal Conditions/Diseases (Specify) <u>Fetopelvic disproportion</u></p> <p>Other Fetal Conditions/Disorders (Specify) <u>Anoxia due to 18b</u></p>	<p>18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS</p> <p>(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)</p> <p>Other Fetal Conditions/Disorders (Specify) <u>Breech delivery</u></p>
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Code 18a (Part 1) P031 P030 P209

Code 18a (Part 1) P031, Disproportion (fetopelvic), affecting fetus or newborn, P030, Delivery, breech, affecting fetus or newborn, and P209, Anoxia, fetal, fetus. Code Breech delivery, affecting fetus or newborn in 18b, directly preceding the anoxia in 18a.

b) **Not indicating a “due to” relationship**

When conditions are separated by “and” or by another connecting term that does not **imply** a “due to” relationship, enter the codes for these conditions on the same line in the order the conditions are reported.

The following terms imply that conditions are meant to remain on the same line. They are separated by “and” or by another connecting term that does not imply a “due to” relationship”:

and	consistent with
accompanied by	with (\bar{c})
also	precipitated by
associated with	predisposing (to)
complicated by	superimposed on
complicating	

EXAMPLE:

18b. OTHER SIGNIFICANT CAUSES OR CONDITIONS

(SELECT OR SPECIFY ALL OTHER CONDITIONS CONTRIBUTING TO DEATH IN ITEM 18b)

Fetal Anomaly

(Specify) Cleft palate with cleft lip

Code 18b (Part II) Q359 Q369

Code 18b (Part II) Q359, Cleft, palate and Q369, Cleft lip. Code each entity separately even though ICD-10 provides a combination code for cleft palate and cleft lip.

c) **Conditions reported in 18b**

NOTE: Enter the codes for entries in 18b in the order the entries are reported, proceeding from the entry reported uppermost in 18b from left to right, if there is more than one entry on the same line. If entries are numbered, code in numeric order.

d) **Deletion of “18b” on Fetal Death Report**

When the certifier has marked through the printed 18b, disregard the marking and code the entities as reported in 18b (Part II).

e) **Doubtful Diagnosis**

1. Doubtful qualifying expression: When expressions such as “apparently,” “presumably,” “?” “perhaps,” and “possibly,” qualify any condition, disregard these expressions and code the condition as indexed.

a) Interpretation of “either...or...”

Consider the following as a statement of “either or:”

- Two conditions reported on one line and both conditions qualified by expressions such as “apparently,” “presumably,” “?” “perhaps,” and “possibly”.
- Two or more conditions connected by “or” or “versus”.

2. Code as follows:

When more than one condition of the placenta classifiable to P020, P021, P022 is qualified by one of the expressions interpreted as “either/or,” code P022, “Unspecified morphological and functional abnormalities of the placenta”.

EXAMPLE:

Placenta previa versus abruption placenta

Code P022, Placenta, abnormal, affecting fetus or newborn.

3. When more than one condition of the umbilical cord classifiable to P024, P025, P026 is qualified by one of the expressions interpreted as “either/or,” code P026, “Unspecified condition of the umbilical cord.”

EXAMPLE:

Knot in umbilical cord or short cord

Code P026, Abnormal, abnormality, umbilical cord, affecting fetus or newborn.

4. When more than one condition of the maternal membranes (P027, P028) is qualified by one of the expressions interpreted as “either/or,” code P029, “Unspecified abnormality of membranes”.
5. When more than one fetal anomaly is reported and qualified by one of the terms interpreted as “either/or,” code as follows:
 - a) If an anomaly is reported of different parts of the same site, code Anomaly of the specified site only.

EXAMPLE:

Congenital anomaly of the tricuspid or aortic valve
Code Q248, Anomaly of heart valve NEC.

- b) When conditions are qualified by a statement of “either or” and only one site/system is involved, code to the residual category for the site/system.

EXAMPLES:

Encephalocele or hypoplasia of brain
Code Q049, Anomaly, of brain.

Anomaly of the bladder or kidney
Code Q649, Anomaly, unspecified of the urinary system.

- c) If different specified anomalies of the same system, code anomaly of the specified system only.

EXAMPLE:

Congenital stenosis of pylorus or atresia of duodenum.
Code Q459, Anomaly, gastrointestinal tract NEC.

NOTE: IF MORE THAN ONE CONDITION OF THE FETUS (INCLUDING MATERNAL CONDITIONS) IS REPORTED WITH A TERM INTERPRETED AS “EITHER/OR,” AND THE ABOVE INSTRUCTIONS DO NOT APPLY, REFER TO IMMEDIATE SUPERVISOR FOR A CODE ASSIGNMENT.

H. SCREENING/TESTS RESULTS

When a statement is reported on the Fetal Death Report indicating a screening or diagnostic test was performed and the results of the test are not reported, do not enter a code for the screening/test. Tests are used for diagnostic purposes and not considered a diagnosis unless the results are reported. If results are reported, code as indexed.

EXAMPLES

Diagnostic imaging of the kidney performed

Liver function studies

Screened for tuberculosis

Do not enter a code for a condition when the results are reported as “negative”.

EXAMPLES:

Negative for tuberculosis

Tested negative for HIV

Tested positive for tuberculosis P370. Indexed under Tuberculosis, congenital

I. INCLUSION OF ADDITIONAL INFORMATION (AI) TO FETAL DEATH REPORTS

Code supplemental information when it modifies or supplements data on the original Fetal Death Report as follows:

1. When additional information (AI) **states** the initiating cause of a **specified disease or condition in 18a** (Part 1), code the additional information (AI) preceding the specified disease.
2. When additional information (AI) **modifies** a specified disease or condition, use the AI and code the specified disease where reported.
3. When there is a stated or implied complication of surgery and the additional information indicates the condition for which the surgery was performed, code this condition as follows:
 - a) If the surgical procedure was performed on the mother, code the condition for which the surgical procedure was performed following the P006 (the code used for the fetus and newborn affected by a surgical procedure on the mother).

- b) If the surgical procedure was performed on the fetus, refer to your immediate supervisor for a code assignment.
- 4. When the additional information (AI) **states** a certain condition is the **initiating cause** of death, **code** this as the first condition in 18a (Part 1).
- 5. When any morphological type of neoplasm is reported in 18a (Part 1) with no mention of the “site” and additional information specifies a site, code the specified site only on the line where the morphological type is reported.
- 6. When additional information states the primary site of a malignant neoplasm of the fetus, enter the code preceding where information concerning the neoplasm is reported.
- 7. When the additional information does not modify a condition on the report, or does not state that this condition is the initiating cause, code the AI as the last condition(s) in 18b (Part II).

J. AMENDED REPORTS

When an “Amended Fetal Death Report” is submitted, code the conditions reported on the amended report only.

K. SEX LIMITATIONS

Certain categories in ICD-10 are limited to one sex:

<u>For Males Only</u>	<u>For Females Only</u>
B260	C51-C579
C60-C63	D06
D074-D076	D070-D073
D176	D25-D28
D29	D390-D391
D40	D397-D399
Q53-Q55	P546
Q98	Q960-Q962
	Q964-Q979

L. PLURALITY LIMITATIONS

Certain categories in ICD-10 are limited to one plurality. If the number in the Plurality box on the Fetal Death Record is greater than “1”, code P015 as the last entry in 18b (Part II).

For Multiples Only

P01.5

Q89.4

NOTE: Do not add/code P01.5 for “twin to twin transfusion”. Code to P02.3 as indexed.

M. RELATING AND MODIFYING CONDITIONS

1. Implied site of disease

Certain conditions are classified in the ICD-10 according to the site affected, e.g.:

atrophy	enlargement	obstruction
calcification	failure	perforation
calculus	fibrosis	rupture
congestion	gangrene	stenosis
degeneration	hypertrophy	stones
dilatation	insufficiency	stricture
embolism	necrosis	

(This list is not all inclusive)

Occasionally, these conditions are reported without specification of site. Relate conditions such as these for which the Classification does not provide a NOS code. Also, relate conditions which are usually reported of a site. Generally, it may be assumed that such a condition was of the same site as another condition if the Classification provides for coding the condition of unspecified site to the site of the other condition. These coding principles apply whether or not there are other conditions reported. Apply the following instructions when relating a condition of unspecified site to the site of the specified condition:

a. General instructions for implied site of a disease

When applying the instructions for Implied site of a Disease and Relating and Modifying, consider all specified conditions for the following choices to be on the same line and apply applicable instructions for relating and modifying:

1. Maternal Conditions/Diseases
(Specify) _____

2. Complications of Placenta, Cord, or Membranes
 - Rupture of membranes prior to onset of labor
 - Abruptio placenta
 - Placental insufficiency
 - Prolapsed cord
 - Chorioamnionitis
 - Other (Specify) _____

3. Other Obstetrical or Pregnancy Complications
(Specify) _____

4. Fetal Anomaly (Specify) _____
5. Fetal Injury (Specify) _____
6. Fetal Infection (Specify) _____
7. Other Fetal Conditions/Disorders
(Specify) _____

8. Unknown

- (1) When conditions are reported on the same line, assume the condition of unspecified site was of the same site as the condition of specified site.
- (2) When conditions of different sites are reported on the same line, assume the condition of unspecified site was of the same site as the condition immediately preceding it.

a. Relating specific categories

- (1) When embolism, infarction, occlusion, thrombosis NOS is reported:
 - from a specified site, code the condition of the site reported.
 - of a site, from a specified site, code the condition to both sites reported.
- (2) Relate a condition of unspecified site to the complete term of a multiple site entity. If it is not indexed together, relate the condition to the site of the complete indexed term.

Non-traumatic conditions

Consider conditions that are usually but not always traumatic in origin to be qualified as non-traumatic when reported with a “written in” due to or on the same line with a disease.

SECTION III: INTENT OF CERTIFIER

A. INTRODUCTION

In order to assign the most appropriate code for a given diagnostic entity, it may be necessary to take other recorded information into account. It is important to interpret this information properly so the meaning intended by the certifier is correctly conveyed. The objective is to code each diagnostic entity in accordance with the intent of the certifier without combining separate codable entities. The following instructions help to determine the intent of the certifier. Apply Intent of Certifier instructions to “See also” terms in the Index as well. These instructions are assumed to be for the fetus unless stated as a maternal condition or reported on the Maternal Condition line.

B. CODING CONDITIONS CLASSIFIED TO INJURIES AS DISEASE CONDITIONS

- a. Some conditions (such as injury, hematoma or laceration) of a specified organ are indexed directly to a traumatic category but may not always be traumatic in origin. Consider these types of conditions to be qualified as non-traumatic when reported:
 - with a written in due to, or on the same line with a disease or reported due to drug poisoning or drug therapy.
 - When there is provision in the Classification for coding the condition considered to be qualified as non-traumatic as “non-traumatic,” code accordingly. Otherwise, code to the category that has been provided for “Other” diseases of the organ (usually .8).
- b. Some conditions are indexed directly to a traumatic category, but the Classification also provides a non-traumatic code. When these conditions are reported of the fetus and due to or with a disease and an external cause is also reported on the record, refer to your immediate supervisor for a code assignment.
- c. Some conditions are indexed directly to a traumatic category, but the Classification also provides a non-traumatic code. When these conditions are reported, code the condition as non-traumatic unless the condition is reported due to or on the same line with an injury or external cause. This instruction applies only to conditions with the term “non-traumatic” in the Index.

C. ORGANISMS AND INFECTIONS

Organisms

Escherichia coli	Cytomegalovirus	Candida
Staphylococcal	Streptococcal	Fungus

Infectious conditions

Abscess	Infection	Sepsis, Septicemia
Bacteremia	Pneumonia	Septic Shock
Empyema	Pyemia	Words ending in “itis”

These lists are NOT all inclusive. Use them as a guide.

Infections and organisms are yet another situation in which care needs to be taken to determine if it is directly affecting the fetus or the fetus is merely impacted by a maternal condition before assigning a code. If the infection or organism is reported in the specified line for maternal conditions or if reported elsewhere but qualified as maternal, then code to a maternal code (e.g., P002 or P008). Otherwise, assume the fetus has the infection or organism and assign a fetal code. (e.g., P35-P39), if indexed.

Take into consideration that some infections and organisms of the fetus are classified to Chapter 1.

1. Do not use HIV or AIDS to modify an infectious or inflammatory condition. Code as two separate conditions.
2. When an infectious or inflammatory condition and a specified organism or specified non-systemic infection is reported, code the infectious or inflammatory condition and the organism or infection separately.
3. When any condition and infection NOS is reported, code both conditions where entered on the report.
4. When a non-infectious or non-inflammatory condition and infection NOS is reported as the initiating cause, code the non-infectious or non-inflammatory condition as indexed and code infection NOS where entered on the report.
5. When an organism is reported preceding two or more infectious conditions reported consecutively on the same line, code each of the infectious conditions modified by the organism.
6. When one infectious condition is modified by more than one organism, modify the condition by all organisms.
7. When any condition is reported and a generalized infection such as bacteremia, fungemia, sepsis, septicemia, systemic infection, or viremia is reported, code both the condition and the generalized infection where entered on the report. Do not modify the condition by the infection.

D. DRUG USE NOS AND NOXIOUS SUBSTANCES

The code assignment depends upon whether the fetus is directly impacted or affected by maternal behavior or exposure. For instance, code maternal drug use P044, when reported in 18a or 18b. Refer to the indexing of maternal conditions in the Perinatal Subset and Volume 1, Category P04 to assign the appropriate code for a fetus affected by maternal behavior or exposure.

SECTION IV: CLASSIFICATION OF CERTAIN ICD-10 CATEGORIES

A. CONGENITAL CONDITIONS

The Classification does not provide congenital and acquired codes for all conditions. When no provision is made for a distinction, disregard the statement of congenital or acquired and code the NOS code.

B. CERTAIN FETAL CONDITIONS (P000-P969)

When reported in 18a or 18b, code the following entries as indicated:

Birth weight of 2 pounds (999 gms) or under.....P070
Over 2 pounds (1000 gms) but not more than
5 ½ pounds (2499 gms).....P071
10 pounds (4500 gms) or moreP080

Gestation of: Less than 28 weeksP072
 28 weeks but less than 37 weeksP073
 42 or more completed weeksP082

NOTE: 37-41 weeks, no code. This is a normal gestation period.

Premature labor or delivery NOSP073

When a condition classifiable to P703-P720, P722-P749 is the only cause(s) reported in 18a or 18b, code P95. If reported with other perinatal conditions, code as indexed.

C. ILL-DEFINED AND UNKNOWN CAUSES

When any of the following terms is the only entry (or entries) on the fetal death report, code P95 everywhere terms are reported in 18a or 18b:

Cause not found	Immediate cause unknown
Cause unknown	Intrauterine death
Cause undetermined	No specific etiology
Could not be determined	identified
Deadborn fetus NOS	No specific known causes
Etiology never determined	Non-specific causes
Etiology not defined	Not known
Etiology uncertain	Obscure etiology
Etiology unexplained	Stillborn
Etiology unknown	Undetermined
Etiology undetermined	Uncertain
Etiology unspecified	Unclear
Fetal Death	Unexplained cause
Fetal Demise	Unknown
Final event undetermined	? Cause
Immediate cause not determined	? Etiology

“Unknown” reported in the checkbox, code P95, if no other information is on the record. If the checkbox for Unknown is marked in one section (either 18a or 18b) and there is also a term assigned to P95 reported in the other section, code P95 in both sections.

<p>18a. INITIATING CAUSE/CONDITION</p> <p>Unknown : Y</p> <p>18b. OTHER SIGNIFIGANT CAUSES OR CONDITIONS</p> <p>Maternal Conditions/Diseases: Undetermined</p>
--

Code 18a (Part I)P95/Code 18b (Part II) P95

Code 18a (Part I) P95, Ill-defined and Unknown Causes and code 18b (Part II) P95, Ill-defined and Unknown Causes for both reportings.

18a. INITIATING CAUSE/CONDITION

Complications of Placenta, Cord, or Membranes

Other : Y

Other (specify) :

18b. OTHER SIGNIFIGANT CAUSES OR CONDITIONS

Unknown : No specific known causes

Code 18a (Part I) P022 P026 P029

Code 18a (Part I) P022 P026 P029, complication of placenta, cord, or membranes and leave 18b (Part II) blank since P95 is not assigned when other information is on the record.

D. GENERAL CONCEPT REGARDING EXTERNAL CAUSES REPORTED ON FETAL DEATH REPORTS

If an external event is reported and it is the mother who received the injuries, code the appropriate P000-P049.

If an external event is reported and it is the fetus who received the injury, refer to your immediate supervisor for a code assignment. The instructions for coding external causes on regular mortality data will apply and will be assigned by the supervisor.

Refer to the following instructions on coding external causes on Fetal Death Reports.

E. MATERNAL EXTERNAL CAUSES

When a complication of any type of medical care is reported, including drug therapy, surgery, or a specified type of therapy including obstetrical procedures, code the appropriate P000-P049.

Do not enter the nature of injury code, external cause code or place code. Take into consideration if the condition for which the medical care was administered is reported. If questionable, refer to Supervisor.

If any type of external event (poisonings, accident, suicide, homicide or undetermined) is reported of the mother, code to the appropriate P000-P049. Do not enter a nature of injury code, external cause code or place code.

Take into consideration where the certifier has recorded the external event and code the P000-P049 in that same position. If questionable, refer to your immediate Supervisor.

F. FETAL INJURY

When any type of medical care including drug therapy, surgery, or any other specified type of medical care is reported of the fetus refer to your immediate supervisor for a code assignment.

If any type of external event or injury is reported of the fetus, refer to your immediate supervisor for a code assignment.

APPENDIX A

Standard Abbreviations and Symbols

When an abbreviation is reported on the certificate, refer to this list to determine what the abbreviation represents. **If an abbreviation represents more than one term, determine the correct abbreviation by using other information on the certificate.** If no determination can be made, use abbreviation for first term listed.

A2GDM	class A2 gestational diabetes mellitus	ADS	antibody deficiency syndrome
AAA	abdominal aortic aneurysm	AEG	air encephalogram
AAS	aortic arch syndrome	AF	auricular or atrial fibrillation; acid fast
AAT	alpha-antitrypsin	AFB	acid-fast bacillus
AAV	AIDS-associated virus	AFI	amniotic fluid index
AB	abdomen; abortion; asthmatic bronchitis	AFP	alpha-fetoprotein
ABD	abdomen	AGG	agammaglobulinemia
ABE	acute bacterial endocarditis	AGL	acute granulocytic leukemia
ABN	abnormal; abnormality(ies)	AGN	acute glomerulonephritis
ABS	acute brain syndrome	AGS	adrenogenital syndrome
ACA	adenocarcinoma	AHA	acquired hemolytic anemia; autoimmune hemolytic anemia
ACD	arteriosclerotic coronary disease	AHD	arteriosclerotic heart disease
ACH	adrenal cortical hormone	AHHD	arteriosclerotic hypertensive heart disease
ACT	acute coronary thrombosis	AHG	anti-hemophilic globulin deficiency
ACTH	adrenocorticotrophic hormone	AHLE	acute hemorrhagic leukoencephalitis
ACVD	arteriosclerotic cardiovascular disease	AI	aortic insufficiency; additional information
ADEM	acute disseminated encephalomyelitis	AIDS	acquired immunodeficiency syndrome
ADH	antidiuretic hormone	AKA	above knee amputation

APPENDIX A

Standard Abbreviations and Symbols

ALC	alcoholism	ARF	acute respiratory failure; acute renal failure
ALL	acute lymphocytic leukemia	ARM	artificial rupture of membranes
ALS	amyotrophic lateral sclerosis	ARV	AIDS-related virus
AMA	advanced maternal age; against medical advice; antimitochondrial antibody(ies)	ARVD	arrhythmogenic right ventricular dysplasia
AMI	acute myocardial infarction	AS	arteriosclerotic; arteriosclerosis; aortic stenosis
AML	acute myelocytic leukemia	ASA	acetylsalicylic acid (aspirin)
ANS	arteriolonephrosclerosis	ASAD	arteriosclerotic artery disease
AOD	arterial occlusive disease	ASCAD	arteriosclerotic coronary artery disease
AODM	adult onset diabetes mellitus	ASCD	arteriosclerotic coronary disease
AOM	acute otitis media	ASCHD	arteriosclerotic coronary heart disease
AP	angina pectoris; anterior and posterior repair; artificial pneumothorax; anterior pituitary	ASCRD	arteriosclerotic cardiorenal disease
A&P	anterior and posterior repair	ASCVA	arteriosclerotic cerebrovascular accident
APC	auricular premature contraction; acetylsalicylic acid, acetophenetidin, and caffeine	ASCVD	arteriosclerotic cardiovascular disease
APE	acute pulmonary edema; anterior pituitary extract	ASCVR	arteriosclerotic cardiovascular renal disease
APH	antepartum hemorrhage	ASCVRD	arteriosclerotic cardiovascular renal disease
AR	aortic regurgitation	ASD	atrial septal defect
ARC	AIDS-related complex		
ARDS	adult respiratory distress syndrome		

APPENDIX A

Standard Abbreviations and Symbols

ASDHD	arteriosclerotic decompensated heart disease	AV	arteriovenous; atrioventricular; aortic valve
ASHCVD	arteriosclerotic hypertensive cardiovascular disease	AVF	arterio-ventricular fibrillation; arteriovenous fistula
ASHD	arteriosclerotic heart disease; atrioseptal heart defect	AVH	acute viral hepatitis
ASHHD	arteriosclerotic hypertensive heart disease	AVP	aortic valve prosthesis
ASHVD	arteriosclerotic hypertensive vascular disease	AVR	aortic valve replacement
ASO	arteriosclerosis obliterans	AWMI	anterior wall myocardial infarction
ASPVD	arteriosclerotic peripheral vascular disease	AZT	azidothymidine
ASVD	arteriosclerotic vascular disease	BA	basilar artery; basilar arteriogram; bronchial asthma
ASVH(D)	arteriosclerotic vascular heart disease	B&B	bronchoscopy and biopsy
AT	atherosclerosis; atherosclerotic; atrial tachycardia; antithrombin	BBB	bundle branch block
ATC	all-terrain cycle	B&C	biopsy and cauterization
ATN	acute tubular necrosis	BCE	basal cell epithelioma
ATS	arteriosclerosis	BE	barium enema
ATSHD	arteriosclerotic heart disease	BEH	benign essential hypertension
ATV	all-terrain vehicle	BGL	Bartholin's gland
AUL	acute undifferentiated leukemia	BKA	below knee amputation
		BL	bladder; bucolingual; blood loss; Burkett's lymphoma
		BMR	basal metabolism rate
		BNA	bladder neck adhesions
		BNO	bladder neck obstruction

APPENDIX A

Standard Abbreviations and Symbols

BOMSA	bilateral otitis media serous acute	CAO	coronary artery occlusion; chronic airway obstruction
BOMSC	bilateral otitis media serous chronic	CAS	cerebral arteriosclerosis
BOW	“bag of water” (membrane)	CASCVD	chronic arteriosclerotic cardiovascular disease
B/P, BP	blood pressure	CASHD	chronic arteriosclerotic heart disease
BPH	benign prostate hypertrophy	CAT	computerized axial tomography
BSA	body surface area	CB	chronic bronchitis
BSO	bilateral salpingo-oophorectomy	CBC	complete blood count
BSP	Bromosulfaphthalein (test)	CBD	common bile duct; chronic brain disease
BTL	bilateral tubal ligation	CBS	chronic brain syndrome
BUN	blood, urea, and nitrogen test	CCF	chronic congestive failure
BVL	bilateral vas ligation	CCI	chronic cardiac or coronary insufficiency
B&W	Baldy-Webster suspension (uterine)	CF	congestive failure; cystic fibrosis; Christmas factor (PTC)
BX	biopsy	CFT	chronic follicular tonsillitis
BX CX	biopsy cervix	CGL	chronic granulocytic leukemia
Ca	cancer	CGN	chronic glomerulonephritis
CA	cancer; cardiac arrest; carotid arteriogram	CHA	congenital hypoplastic anemia
CABG	coronary artery bypass graft	CHB	complete heart block
CABS	coronary artery bypass surgery	CHD	congestive heart disease; coronary heart disease; congenital heart disease; Chediak-Higaski Disease
CAD	coronary artery disease		
CAG	chronic atrophic gastritis		

APPENDIX A

Standard Abbreviations and Symbols

CHF	congestive heart failure	COFS	cerebro-oculo-facio-skeletal
C ₂ H ₅ OH	ethyl alcohol	COLD	chronic obstructive lung disease
CI	cardiac insufficiency; cerebral infarction	COOMBS	test for Rh sensitivity
CID	cytomegalic inclusion disease	COPD	chronic obstructive pulmonary disease
CIS	carcinoma in situ	COPE	chronic obstructive pulmonary emphysema
CJD	Creutzfeldt-Jakob Disease	CP	cerebral palsy; cor pulmonale
CLD	chronic lung disease; chronic liver disease	C&P	cystoscopy and pyelography
CLL	chronic lymphatic leukemia; chronic lymphocytic leukemia	CPB	cardiopulmonary bypass
CMID	cytomegalic inclusion disease	CPC	chronic passive congestion
CML	chronic myelocytic leukemia	CPD	cephalopelvic disproportion; contagious pustular dermatitis
CMM	cutaneous malignant melanoma	CPE	chronic pulmonary emphysema
CMV	cytomegalic virus	CRD	chronic renal disease
CNC	circum nuchal cord	CREST	calcinosis cutis, Raynaud's phenomenon, sclerodactyly, and telangiectasis
CNHD	congenital nonspherocytic hemolytic disease	CRF	cardiorespiratory failure; chronic renal failure
CNS	central nervous system	CRST	calcinosis cutis, Raynaud's phenomenon, sclerodactyly, and telangiectasis
CO	carbon monoxide	CS	coronary sclerosis; cesarean section; cerebro-spinal
CO ₂	carbon dioxide	CSF	cerebral spinal fluid
COAD	chronic obstructive airway disease	CSH	chronic subdural hematoma
COBE	chronic obstructive bullous emphysema		
COBS	chronic organic brain syndrome		

APPENDIX A

Standard Abbreviations and Symbols

CSM	cerebrospinal meningitis	DCR	dacrocystorhinostomy
CT	computer tomography; cerebral thrombosis; coronary thrombosis	D&D	drilling and drainage; debridement and dressing
CTD	congenital thymic dysplasia	D&E	dilation and evacuation
CU	cause unknown	DFU	dead fetus in utero
CUC	chronic ulcerative colitis	DIC	disseminated intravascular coagulation
CUP	cystoscopy, urogram, pyelogram (retro)	DILD	diffuse infiltrative lung disease
CUR	cystocele, urethrocele, rectocele	DIP	distal interphalangeal joint; desquamative interstitial pneumonia
CV	cardiovascular; cerebrovascular	DJD	degenerative joint disease
CVA	cerebral vascular accident	DM	diabetes mellitus
CV Accident	cerebral vascular accident	DMT	dimethyltryptamine
CVD	cardiovascular disease	DOA	dead on arrival
CVHD	cardiovascular heart disease	DOPS	diffuse obstructive pulmonary syndrome
CVI	cardiovascular insufficiency; cerebral vascular insufficiency	DPT	diphtheria, pertussis, tetanus vaccine
CVRD	cardiovascular renal disease	DR	diabetic retinopathy
CWP	coal worker's pneumoconiosis	DS	Down's syndrome
CX	cervix	DT	due to; delirium tremens
DA	degenerative arthritis	D/T	due to; delirium tremens
DBI	phenformin hydrochloride	DU	diagnosis unknown; duodenal ulcer
D&C	dilation and curettage	DUB	dysfunctional uterine bleeding
		DUI	driving under influence

APPENDIX A

Standard Abbreviations and Symbols

DVT	deep vein thrombosis	EMF	endomyocardial fibrosis
DWI	driving while intoxicated	EMG	electromyogram
DX	dislocation; diagnosis; disease	EN	erythema nodosum
EBV	Epstein-Barr virus	ENT	ear, nose, and throat
ECCE	extracapsular cataract extraction	EP	ectopic pregnancy
ECG	electrocardiogram	ER	emergency room
E coli	Escherichia coli	ERS	evacuation of retained secundines
ECT	electric convulsive therapy	ESRD	end-stage renal disease
EDC	expected date of confinement	EST	electric shock therapy
EEE	Eastern equine encephalitis	ETOH	ethyl alcohol
EEG	electroencephalogram	EUA	exam under anesthesia
EFE	endocardial fibroelastosis	EWB	estrogen withdrawal bleeding
EGA	estimated gestational age	FB	foreign body
EGL	eosinophilic granuloma of lung	FBS	fasting blood sugar
EH	enlarged heart; essential hypertension	Fe	symbol for iron
EIOA	excessive intake of alcohol	FGD	fatal granulomatous disease
EKC	epidemic keratoconjunctivitis	FHS	fetal heart sounds
EKG	electrocardiogram	FHT	fetal heart tone
EKP	epikeratoprosthesis	FLSA	follicular lymphosarcoma
ELF	elective low forceps	FME	full-mouth extraction
EMC	encephalomyocarditis	FS	frozen section; fracture site
EMD	electromechanical dissociation	FT	full term

APPENDIX A

Standard Abbreviations and Symbols

FTA	fluorescent treponemal antibody test	GMSD	grand mal seizure disorder
FTV	fetal thrombotic vasculopathy	GOK	God only knows
5FU	fluorouracil	GSW	gunshot wound
FUB	functional uterine bleeding	GTT	glucose tolerance test
FULG	fulguration	gtt	drop
FUO	fever unknown origin	GU	genitourinary; gastric ulcer
FX	fracture	GVHR	graft-versus-host reaction
FYI	for your information	GYN	gynecology
GAS	generalized arteriosclerosis	HA	headache
GB	gallbladder; Guillain-Barré (syndrome)	HAA	hepatitis-associated antigen
GBS	group B streptococci; group B streptococcal; Guillain-Barré syndrome	HASCVD	hypertensive arteriosclerotic cardiovascular disease
GC	gonococcus; gonorrhea; general circulation (systemic)	HASCVR	hypertensive arteriosclerotic cardiovascular renal disease
GDM	gestational diabetes mellitus	HASHD	hypertensive arteriosclerotic heart disease
GE	gastroesophageal	HC	Huntington's chorea
GEN	generalized	HCAP	health care associated pneumonia
GERD	gastroesophageal reflux disease	HCPS	Hantavirus (cardio) pulmonary syndrome, Hantavirus cardiopulmonary syndrome
GI	gastrointestinal	HCT	hematocrit
GIB	gastrointestinal bleed	HCVD	hypertensive cardiovascular disease
GIST	gastrointestinal stromal tumor	HCVRD	hypertensive cardiovascular renal disease
GIT	gastrointestinal tract		

APPENDIX A

Standard Abbreviations and Symbols

HD	Hodgkin's disease; heart disease	HTLV-III/LAV	human T-cell lymphotropic virus-III/lymphadenopathy-associated virus
HDN	hemolytic disease of newborn		
HDS	herniated disc syndrome	HTLV-3	human T-cell lymphotropic virus-III
HEM	hemorrhage		
HF	heart failure; hay fever	HTLV-III	human T-cell lymphotropic virus-III
HGB; Hgb	hemoglobin	HTN	hypertension
HHD	hypertensive heart disease	HVD	hypertensive vascular disease
HIV	human immunodeficiency virus	Hx	history of
HMD	hyaline membrane disease	IADH	inappropriate antidiuretic hormone
HN ₂	nitrogen mustard		
HNP	herniated nucleus pulposus	IASD	interatrial septal defect
H/O	history of	ICCE	intracapsular cataract extraction
HPN	hypertension	ICD	intrauterine contraceptive device
HPS	Hantavirus pulmonary syndrome		
HPVD	hypertensive pulmonary vascular disease	I&D	incision and drainage
HRE	high-resolution electro-cardiology	ID	infectious disease; incision and drainage
HS	herpes simplex; Hurler's syndrome	IDA	iron deficiency anemia
HSV	herpes simplex virus	IDD	insulin-dependent diabetes
HTLV	human T-cell lymphotropic virus	IDDI	insulin-dependent diabetes
		IDDM	insulin-dependent diabetes mellitus
		IGA	immunoglobulin A
		IHD	ischemic heart disease
		IHSS	idiopathic hypertrophic subaortic stenosis

APPENDIX A

Standard Abbreviations and Symbols

ILD	ischemic leg disease	IVC	intravenous cholangiography; inferior vena cava
IM	intramuscular; intramedullary; infectious mononucleosis	IVCC	intravascular consumption coagulopathy
IMPP	intermittent positive pressure	IVD	intervertebral disc
INAD	infantile neuroaxonal dystrophy	IVDA	intravenous drug abuse
INC	incomplete	IVH	intraventricular hemorrhage
INE	infantile necrotizing encephalomyelopathy	IVP	intravenous pyelogram
INF	infection; infected; infantile; infarction	IVSD	intraventricular septal defect
INH	Isoniazid; inhalation	IVU	intravenous urethrography
INS	idiopathic nephrotic syndrome	IWMI	inferior wall myocardial infarction
IRDM	insulin resistant diabetes mellitus	JAA	Juxtaposition of the atrial appendages
IRHD	inactive rheumatic heart disease	JBE	Japanese B encephalitis
ISD	interatrial septal defect	KFS	Klippel-Feil syndrome
ITP	idiopathic thrombocytopenic purpura	KS	Klinefelter's syndrome
IU	intrauterine	KUB	kidney, ureter, bladder
IUCD	intrauterine contraceptive device	K-W	Kimmelstiel-Wilson disease or syndrome
IUD	intrauterine device (contraceptive); intrauterine death	LAP	laparotomy
IUFD	intrauterine fetal death	LAV	lymphadenopathy-associated virus
IUGR	intrauterine growth retardation	LAV/ HTLV-III	lymphadenopathy-associated virus/Human T-cell lymphotropic virus-III
IUP	intrauterine pregnancy	LBBB	left bundle branch block
IV	intervenous; intravenous	LBNA	lysis bladder neck adhesions

APPENDIX A

Standard Abbreviations and Symbols

LBW	low birth weight	LSK	liver, spleen, kidney
LBWI	low birth weight infant	LUL	left upper lobe
LCA	left coronary artery	LUQ	left upper quadrant
LDH	lactic dehydrogenase	LV	left ventricle
LE	lupus erythematosus; lower extremity; left eye	LVF	left ventricular failure
LFGA	light for gestational age	LVH	left ventricular hypertrophy
LKS	liver, kidney, spleen	MAC	mycobacterium avium complex
LL	lower lobe	MAI	mycobacterium avium intracellulare
LLL	left lower lobe	MAL	malignant
LLQ	lower left quadrant	MBAI	mycobacterium avium intracellulare
LMA	left mentoanterior (position of fetus)	MBD	minimal brain damage
LMCAT	left middle cerebral artery thrombosis	MD	muscular dystrophy; manic depressive; myocardial damage
LML	left mediolateral (episiotomy); left mesiolateral; left middle lobe	MDA	methylene dioxyamphetamine
LMP	last menstrual period; left mento-posterior (position of fetus)	MEA	multiple endocrine adenomatosis
LN	lupus nephritis	MF	myocardial failure; myocardial fibrosis; mycosis fungoides
LOA	left occipitoanterior	MGN	membranous glomerulonephritis
LOMCS	left otitis media chronic serous	MHN	massive hepatic necrosis
LP	lumbar puncture	MI	myocardial infarction; mitral insufficiency
LRI	lower respiratory infection	MPC	meperidine, promethazine, chlorpromazine
LS	lumbosacral; lymphosarcoma		
LSD	lysergic acid diethylamide		

APPENDIX A

Standard Abbreviations and Symbols

MRS	methicillin resistant staphylococcal	NIDDM	non-insulin-dependent diabetes mellitus
MRSA	methicillin resistant staphylococcal aureus	NSTEMI	non-ST-elevation myocardial infarction
MRSAU	methicillin resistant staphylococcal aureus	NTD	neural tube defect
MS	multiple sclerosis; mitral stenosis	N&V	nausea and vomiting
MSOF	multi-system organ failure	NVD	nausea, vomiting, diarrhea
MT	malignant teratoma	OA	osteoarthritis
MUA	myelogram	OAD	obstructive airway disease
MVP	mitral valve prolapse	OB	obstetrical
MVR	mitral valve regurgitation; mitral valve replacement	OBS	organic brain syndrome
NACD	no anatomical cause of death	OBST	obstructive; obstetrical
NAFLD	nonalcoholic fatty liver disease	OD	overdose; oculus dexter (right eye); occupational disease
NC	nuchal cord	OHD	organic heart disease
NCA	neurocirculatory asthenia	OLT	orthotopic liver transplant
NDI	nephrogenic diabetes insipidus	OM	otitis media
NEG	negative	OMI	old myocardial infarction
NFI	no further information	OMS	organic mental syndrome
NFTD	normal full-term delivery	ORIF	open reduction, internal fixation
NG	nasogastric	OS	oculus sinister (left eye); occipitosacral (fetal position)
NH ₃	symbol for ammonia	OT	occupational therapy; old TB
NIDD	non-insulin-dependent diabetes	OU	oculus uterque (each eye); both eyes
NIDDI	non-insulin-dependent diabetes		

APPENDIX A

Standard Abbreviations and Symbols

PA	pernicious anemia; paralysis agitans; pulmonary artery; peripheral arteriosclerosis	PET	pre-eclamptic toxemia
PAC	premature auricular contraction; phenacetin, aspirin, caffeine	PG	pregnant; prostaglandin
PAF	paroxysmal auricular fibrillation	PGH	pituitary growth hormone
PAOD	peripheral arterial occlusive disease; peripheral arteriosclerosis occlusive disease	PH	past history; prostatic hypertrophy; pulmonary hypertension
PAP	primary atypical pneumonia	PI	pulmonary infarction
PAS	pulmonary artery stenosis	PID	pelvic inflammatory disease; prolapsed intervertebral disc
PAT	pregnancy at term; paroxysmal auricular tachycardia	PIE	pulmonary interstitial emphysema
Pb	chemical symbol for lead	PIH	pregnancy induced hypertension
PCD	polycystic disease	PIP	proximal interphalangeal joint
PCF	passive congestive failure	PKU	phenylketonuria
PCP	pentachlorophenol; pneumocystis carinii pneumonia	PMD	progressive muscular dystrophy
PCT	porphyria cutanea tarda	PMI	posterior myocardial infarction; point of maximum impulse
PCV	polycythemia vera	PML	progressive multifocal leukoencephalopathy
PDA	patent ductus arteriosus	PN	pneumonia; periarteritis nodosa; pyelonephritis
PE	pulmonary embolism; pleural effusion; pulmonary edema	PO	postoperative
PEG	percutaneous endoscopic gastrostomy; pneumoencephalography	POC	product of conception
PEGT	percutaneous endoscopic gastrostomy tube	POE	point (or portal) of entry
		POSS	possible; possibly
		PP	postpartum

APPENDIX A

Standard Abbreviations and Symbols

PPD	purified protein derivative test for tuberculosis	P&V	pyloroplasty and vagotomy
PPH	postpartum hemorrhage	PVC	premature ventricular contraction
PPLO	pleuropneumonia-like organism	PVD	peripheral vascular disease; pulmonary vascular disease
PPROM	preterm premature rupture of membranes	PVI	peripheral vascular insufficiency
PPS	postpump syndrome	PVL	periventricular leukomalacia
PPT	precipitated; prolonged prothrombin time	PVT	paroxysmal ventricular tachycardia
PREM	prematurity	PVS	premature ventricular systole (contraction)
PROB	probably	PWI	posterior wall infarction
PROM	premature rupture of membranes	PWMI	posterior wall myocardial infarction
PSVT	paroxysmal supraventricular tachycardia	PX	pneumothorax
PT	paroxysmal tachycardia; pneumothorax; prothrombin time	R	right
PTA	persistent truncus arteriosus	RA	rheumatoid arthritis; right atrium; right auricle
PTC	plasma thromboplastin component	RAAA	ruptured abdominal aortic aneurysm
PTCA	percutaneous transluminal coronary angioplasty	RAD	rheumatoid arthritis disease; radiation absorbed dose
PTL	preterm labor	RAI	radioactive iodine
PTLA	percutaneous transluminal laser angioplasty	RBBB	right bundle branch block
PU	peptic ulcer	RBC	red blood cells
PUD	peptic ulcer disease; pulmonary disease	RCA	right coronary artery
PUO	pyrexia of unknown origin	RCS	reticulum cell sarcoma
		RD	Raynaud's disease; respiratory disease

APPENDIX A

Standard Abbreviations and Symbols

RDS	respiratory distress syndrome	RV	right ventricle
RE	regional enteritis	RVH	right ventricular hypertrophy
REG	radioencephalogram	RVT	renal vein thrombosis
RESP	respiratory	RX	drugs <u>or</u> other therapy <u>or</u> treatment
RHD	rheumatic heart disease	SA	sarcoma; secondary anemia
RLF	retrolental fibroplasia	SACD	subacute combined degeneration
RLL	right lower lobe	SARS	severe acute respiratory syndrome
RLQ	right lower quadrant	SBE	subacute bacterial endocarditis
RMCA	right middle cerebral artery	SBO	small bowel obstruction
RMCA T	right middle cerebral artery thrombosis	SBP	spontaneous bacterial peritonitis
RML	right middle lobe	SC	sickle cell
RMLE	right mediolateral episiotomy	SCC	squamous cell carcinoma
RNA	ribonucleic acid	SCI	subcoma insulin; spinal cord injury
RND	radical neck dissection	SD	spontaneous delivery; septal defect; sudden death
R/O	rule out	SDAT	senile dementia Alzheimer's type
RSA	reticulum cell sarcoma	SDII	sudden infant death in infancy
RSR	regular sinus rhythm	SDS	sudden death syndrome
Rt	right	SEPT	septicemia
RT	recreational therapy; right	SF	scarlet fever
RTA	renal tubular acidosis	SGA	small for gestational age
RUL	right upper lobe	SH	serum hepatitis
RUQ	right upper quadrant	SI	saline injection

APPENDIX A

Standard Abbreviations and Symbols

SIADH	syndrome of inappropriate antidiuretic hormone	SSE	soapsuds enema
SICD	sudden infant crib death	SSKI	saturated solution potassium iodide
SID	sudden infant death	SSPE	subacute sclerosing panencephalitis
SIDS	sudden infant death syndrome	STAPH	staphylococcal; staphylococcus
SIRS	systemic inflammatory response syndrome	STB	stillborn
SLC	short leg cast	STREP	streptococcal; streptococcus
SLE	systemic lupus erythematosus; Saint Louis encephalitis	STS	serological test for syphilis
SMR	submucous resection	STSG	split thickness skin graft
SNB	scalene node biopsy	SUBQ	subcutaneous
SO or S&O	salpingo-oophorectomy	SUD	sudden unexpected death
SOB	shortness of breath	SUDI	sudden unexplained death of an infant
SOM	secretory otitis media	SUID	sudden unexpected infant death
SOR	suppurative otitis, recurrent	SVC	superior vena cava
S/P	status post	SVD	spontaneous vaginal delivery
SPD	sociopathic personality disturbance	SVT	supraventricular tachycardia
SPP	suprapubic prostatectomy	Sx	symptoms
S/p P/T	schizophrenic reaction, paranoid type	SY	syndrome
SQ	subcutaneous	T&A	tonsillectomy and adenoidectomy
S/R	schizophrenic reaction; sinus rhythm	TAH	total abdominal hysterectomy
		TAL	tendon achilles lengthening
		TAO	Triacetyloleandomycin (antibiotic); thromboangiitis obliterans

APPENDIX A

Standard Abbreviations and Symbols

TAPVR	total anomalous pulmonary venous return	TUI	transurethral incision
TAR	thrombocytopenia absent radius (syndrome)	TUR	transurethral resection (NOS) (prostate)
TAT	tetanus anti-toxin	TURP	transurethral resection of prostate
TB	tuberculosis; tracheobronchitis	TVP	total anomalous venous return
TBC, Tbc	tuberculosis	UC	ulcerative colitis
TCI	transient cerebral ischemia	UGI	upper gastrointestinal
TEF	tracheoesophageal fistula	UL	upper lobe
TF	tetralogy of Fallot	UNK	unknown
TGV	transposition great vessels	UP	uteropelvic
THA	total hip arthroplasty	UPJ	ureteropelvic junction
TI	tricuspid insufficiency	URI	upper respiratory infection
TIA	transient ischemic attack	UTI	urinary tract infection
TIE	transient ischemic episode	VAG	vagina; vaginal
TL	tubal ligation	VAMP	vincristine, amethopterin, 6-mercaptopurine, and prednisone
TM	tympanic membrane	VB	vinblastine
TOA	tubo-ovarian abscess	VBAC	vaginal birth after cesarean
TP	thrombocytopenic purpura	VC	vincristine
TR	tricuspid regurgitation; transfusion reaction	VD	venereal disease
TSD	Tay-Sachs disease	VDRL	venereal disease research lab
TTP	thrombotic thrombocytopenic purpura	VEE	Venezuelan equine encephalomyelitis

APPENDIX A

Standard Abbreviations and Symbols

VF	ventricular fibrillation	WPW	Wolfe-Parkinson-White syndrome
VH	vaginal hysterectomy; viral hepatitis	YF	yellow fever
VL	vas ligation	ZE	Zollinger-Ellison (syndrome)
VM	viomycin	'	minute
V&P	vagotomy and pyloroplasty	"	second(s)
VPC, VPCS	ventricular premature contractions	<	less than
		>	greater than
VR	valve replacement	↓	decreased
VSD	ventricular septal defect	↑	increased; elevated
VT	ventricular tachycardia	\bar{c}	with
WBC	white blood cell	\bar{s}	without
WC	whooping cough	$\frac{00}{11}$	secondary to
WE	Western encephalomyelitis		
W/O	without	$\frac{00}{11}$ to	secondary to

APPENDIX B

Synonymous Sites/Terms

When a condition of a stated anatomical site is indexed in Volume 3, code condition of stated site as indexed. If stated site is not indexed, code condition of synonymous site.

Alimentary canal	Gastrointestinal tract
Body	Torso, trunk
Brain	Anterior fossa, basal ganglion, central nervous system, cerebral, cerebrum, frontal, occipital, parietal, pons, posterior fossa, prefrontal, temporal, III and IV ventricle Note: Do not use brain when ICD provides for CNS under the reported condition.
Cardiac	Heart
Chest	Thorax
Geriatric	Senile
Greater sac	Peritoneum
Hepatic	Liver
Hepatocellular	Liver
Intestine	Bowel, colon
Kidney	Renal
Larynx	Epiglottis, glottis, subglottis, supraglottis, vocal cords
Lesser sac	Peritoneum
Nasopharynx, pharynx	Throat
Pulmonary	Lung
Right\left hemispheric	Code brain
Hemispheric NOS	Do not assume brain
Right\left ventricle	Heart
Third\fourth ventricle	Brain
LLL, LUL, RLL, RML, RUL	Lobes of the lungs when reported with lobectomy, pneumonia, etc

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

0. Home

Excludes: Abandoned or derelict house (8)
Home under construction, but not yet occupied (6)
Institutional place of residence (1)
Office in home (5)

About home
Apartment
Bed and breakfast
Boarding house
Cabin (any type)
Caravan (trailer) park - residential
Condominium
Farm house
Dwelling
Hogan
Home premises
Home sidewalk
Home swimming pool
House (residential) (trailer)
Noninstitutional place of residence
Penthouse
Private driveway to home
Private garage
Private garden to home
Private walk to home
Private wall to home
Residence
Rooming house
Storage building at apartment
Swimming pool in private home, private garden,
apartment or residence
Townhome
Trailer camp or court
Yard (any part) (area) (front) (residential)
Yard to home

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

1. Residential institution

Almshouse
Army camp
Assisted Living
Board and care facility
Children's home
Convalescent home
Correctional center
Detox center
Dormitory
Fraternity house
Geriatric center
Halfway house
Home for the sick
Hospice
Institution (any type)
Jail
Mental Hospital
Military (camp) (reservation)
Nurse's home
Nursing home
Old people's home
Orphanage
Penitentiary
Pensioner's home
Prison
Prison camp
Reform school
Retirement home
Sorority house
State hospital

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

2. School, other institution and public administrative area

Excludes: Building under construction (6)
Residential institution (1)
Sports and athletic areas (3)

Armory	Police station or cell
Assembly hall	Post office
Campus	Private club
Child center	Public building
Church	Public hall
Cinema	Salvation army
Clubhouse	School (grounds) (yard)
College	School (private) (public) (state)
Country club (grounds)	Theatre
Court house	Turkish bath
Dance hall	University
Day nursery (day care)	YMCA
Drive in theater	Youth center
Fire house	YWCA
Gallery	
Health club	
Health resort	
Health spa	
Hospital (parking lot)	
Institute of higher learning	
Kindergarten	
Library	
Mission	
Movie house	
Museum	
Music hall	
Night club	
Opera house	
Playground, school	
Police precinct	

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

3. Sports and athletics area

Excludes: Swimming pool or tennis court in private home or garden (0)

Baseball field
Basketball court
Cricket ground
Dude ranch
Fives court
Football field
Golf course
Gymnasium
Hockey field
Ice palace
Racecourse
Riding school
Rifle range - NOS
Skating rink
Sports ground
Sports palace
Squash court
Stadium
Swimming pool (private) (public)
Tennis court

4. Street and highway

Alley
Border crossing
Bridge NOS
Freeway
Interstate
Motorway
Named street/highway/interstate
Pavement
Road (public)
Roadside
Sidewalk NOS
Walkway

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

5. Trade and service area

Excludes: Garage in private home (0)

Airport
Animal hospital
Bank
Bar
Body shop
Cafe
Car dealership
Casino
Electric company
Filling station
Funeral home
Garage - place of work
Garage away from highway except home
Garage building (for car storage)
Garage NOS
Gas station
Hotel (pool)
Laundry Mat
Loading platform - store
Mall
Market (grocery or other commodity)
Motel
Office (building) (in home)
Parking garage
Radio/television broadcasting station
Restaurant
Salvage lot, named
Service station
Shop, commercial
Shopping center (shopping mall)
Spa
Station (bus) (railway)
Store
Subway (stairs)
Tourist court
Tourist home
Warehouse

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

6. Industrial and construction areas

Building under construction
Coal pit
Coal yard
Construction (area, job or site)
Dairy processing plant
Dockyard
Dry dock
Electric tower
Factory (building) (premises)
Foundry
Gas works
Grain elevator
Gravel pit
Highway under construction
Industrial yard
Loading platform - factory
Logging operation area
Lumber yard
Mill pond
Oil field
Oil rig and other offshore installations
Oil well
Plant, industrial
Power-station (coal) (nuclear) (oil)
Produce building
Railroad track or trestle
Railway yard
Sand pit
Sawmill
Sewage disposal plant
Shipyard
Shop
Substation (power)
Subway track
Tannery
Tunnel under construction
Water filtration plant
Wharf
Workshop

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

7. Farm

Excludes: Farm house and home premises of farm (0)

Barn NOS
Barnyard
Corncrib
Cornfield
Dairy (farm) NOS
Farm buildings
Farm pond or creek
Farmland under cultivation
Field, numbered or specialized
Gravel pit on farm
Orange grove
Orchard
Pasture
Ranch NOS
Range NOS
Silo
State Farm

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

8. Other specified places

Abandoned gravel pit	Military training ground
Abandoned public building or home	Mountain
Air force firing range	Mountain resort
Balcony	Named city
Bar pit or ditch	Named lake
Beach NOS (named) (private)	Named room
Beach resort	Named town
Boy's camp	Nursery NOS
Building NOS	Open field
Bus stop	Park (amusement) (any) (public)
Camp	Parking lot
Camping grounds	Parking place
Campsite	Pier
Canal	Pipeline (oil)
Caravan site NOS	Place of business NOS
Cemetery	Playground NOS
City dump	Pond or pool (natural)
Community jacuzzi	Porch
Creek (bank) (embankment)	Power line pole
Damsite	Prairie
Derelict house	Private property
Desert	Public place NOS
Ditch	Public property
Dock NOS	Railway line
Driveway	Reservoir (water)
Excavation site	Resort NOS
Fairgrounds	River
Field NOS	Room (any)
Forest	Sea
Fort	Seashore NOS
Hallway	Seashore resort
Harbor	Sewer
Hill	Specified address
Holiday camp	Stream
Irrigation canal or ditch	Swamp
Junkyard	Trail (bike)
Kitchen	Vacation resort
Lake NOS	Woods
Lake resort	Zoo
Manhole	
Marsh	

APPENDIX C

Code for Place of Occurrence of Fetal Death Injuries and External Causes

9. Unspecified place

Bathtub
Bed
Camper (trailer)
Commode
Country
Downstairs
Fireplace
Hot tub
Jobsite
Near any place
On job
Outdoors NOS
Parked car
Rural
Sofa
Table
Tree
Vehicle (any)

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

A000	A073	A218	A327	A498	A753	A872	B010	B208	B387
A001	A078	A219	A328	A499	A759	A878	B011	B209	B388
A009	A079	A220	A329	A500	A770	A879	B012	B210	B389
A010	A082	A221	A360	A502	A771	A880	B018	B211	B390
A011	A083	A222	A361	A503	A772	A881	B019	B212	B391
A012	A084	A227	A362	A504	A773	A888	B020	B220	B392
A013	A085	A228	A363	A505	A778	A89	B021	B221	B393
A014	A090	A229	A368	A509	A779	A90	B022	B222	B394
A020	A099	A230	A369	A540	A78	A91	B023	B230	B395
A021	A162	A231	A370	A541	A790	A920	B027	B231	B399
A022	A163	A232	A371	A542	A791	A921	B028	B232	B400
A028	A164	A233	A378	A543	A798	A922	B029	B238	B401
A029	A165	A238	A379	A544	A799	A923	B03	B24	B402
A030	A167	A239	A38	A545	A800	A924	B04	B250	B403
A031	A168	A240	A390	A546	A802	A928	B050	B251	B407
A032	A169	A241	A391	A548	A803	A929	B051	B252	B408
A033	A170	A242	A392	A549	A804	A930	B052	B258	B409
A038	A171	A243	A393	A600	A809	A931	B053	B259	B410
A039	A178	A244	A394	A601	A810	A932	B054	B260	B417
A040	A179	A250	A395	A609	A811	A938	B058	B261	B418
A041	A180	A251	A398	A65	A812	A94	B059	B262	B419
A042	A181	A259	A399	A660	A818	A950	B080	B263	B420
A043	A182	A260	A420	A661	A819	A951	B150	B268	B421
A044	A183	A267	A421	A662	A820	A959	B159	B269	B427
A045	A184	A268	A422	A663	A821	A960	B160	B270	B428
A046	A185	A269	A427	A664	A829	A961	B161	B271	B429
A047	A186	A270	A428	A665	A830	A962	B162	B278	B430
A048	A187	A278	A429	A666	A831	A968	B169	B279	B431
A049	A188	A279	A430	A667	A832	A969	B170	B330	B432
A050	A190	A280	A431	A669	A833	A980	B171	B331	B438
A051	A191	A281	A438	A670	A834	A981	B178	B332	B439
A052	A192	A282	A439	A671	A835	A982	B179	B333	B440
A053	A198	A288	A440	A673	A836	A983	B180	B334	B441
A058	A199	A289	A441	A679	A838	A984	B181	B338	B442
A059	A200	A300	A448	A680	A839	A985	B182	B340	B447
A060	A201	A301	A449	A681	A840	A988	B188	B341	B448
A061	A202	A303	A46	A689	A841	A99	B189	B342	B449
A062	A203	A305	A480	A690	A848	B000	B190	B343	B450
A063	A207	A308	A482	A691	A849	B001	B199	B344	B451
A064	A208	A309	A483	A692	A850	B002	B200	B348	B452
A065	A209	A310	A484	A698	A851	B003	B201	B349	B453
A066	A210	A311	A488	A699	A852	B004	B202	B380	B457
A067	A211	A318	A490	A70	A858	B005	B203	B381	B458
A068	A212	A319	A491	A750	A86	B007	B204	B382	B459
A069	A213	A320	A492	A751	A870	B008	B205	B383	B460
A072	A217	A321	A493	A752	A871	B009	B206	B384	B461

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

B462	B583	B72	B882	C091	C178	C313	C439	C501	C637
B463	B588	B73	B883	C098	C179	C318	C440	C502	C638
B464	B589	B740	B888	C099	C180	C319	C441	C503	C639
B465	B59	B741	B889	C100	C181	C321	C442	C504	C64
B468	B600	B743	B89	C101	C182	C322	C443	C505	C65
B469	B601	B744	B99	C102	C183	C323	C444	C506	C66
B470	B602	B748	C000	C103	C184	C328	C445	C508	C670
B471	B608	B749	C001	C104	C185	C329	C446	C509	C671
B479	B64	B75	C002	C108	C186	C33	C447	C510	C672
B480	B650	B760	C003	C109	C187	C340	C448	C511	C673
B481	B651	B761	C004	C110	C188	C341	C449	C512	C674
B482	B652	B768	C005	C111	C189	C342	C450	C518	C675
B483	B653	B769	C006	C112	C19	C343	C451	C519	C676
B484	B658	B770	C008	C113	C20	C348	C452	C52	C677
B487	B659	B778	C009	C118	C210	C349	C457	C530	C678
B488	B660	B779	C01	C119	C211	C37	C459	C531	C679
B49	B661	B780	C020	C12	C212	C380	C460	C538	C680
B500	B662	B781	C021	C130	C218	C381	C461	C539	C681
B508	B663	B787	C022	C131	C220	C382	C462	C540	C688
B509	B664	B789	C023	C132	C221	C383	C463	C541	C689
B510	B665	B79	C024	C138	C222	C384	C467	C542	C690
B518	B668	B80	C028	C139	C223	C388	C468	C543	C691
B519	B669	B810	C029	C140	C224	C390	C469	C548	C692
B520	B670	B811	C030	C142	C227	C398	C470	C549	C693
B528	B671	B812	C031	C148	C229	C399	C471	C55	C694
B529	B672	B813	C039	C150	C23	C400	C472	C56	C695
B530	B673	B814	C040	C151	C240	C401	C473	C570	C696
B531	B674	B818	C041	C152	C241	C402	C474	C571	C698
B538	B675	B820	C048	C153	C248	C403	C475	C572	C699
B54	B676	B829	C049	C154	C249	C408	C476	C573	C700
B550	B677	B830	C050	C155	C250	C409	C478	C574	C701
B551	B678	B831	C051	C158	C251	C410	C479	C577	C709
B552	B679	B832	C052	C159	C252	C411	C480	C578	C710
B559	B680	B833	C058	C160	C253	C412	C481	C579	C711
B560	B681	B834	C059	C161	C254	C413	C482	C600	C712
B561	B689	B838	C060	C162	C257	C414	C488	C601	C713
B569	B690	B839	C061	C163	C259	C419	C490	C602	C714
B570	B691	B870	C062	C164	C260	C430	C491	C608	C715
B571	B698	B871	C068	C165	C261	C431	C492	C609	C716
B572	B699	B872	C069	C166	C268	C432	C493	C61	C717
B573	B700	B873	C07	C168	C269	C433	C494	C620	C718
B574	B701	B874	C080	C169	C300	C434	C495	C621	C719
B575	B710	B878	C081	C170	C301	C435	C496	C629	C720
B580	B711	B879	C088	C171	C310	C436	C498	C630	C721
B581	B718	B880	C089	C172	C311	C437	C499	C631	C722
B582	B719	B881	C090	C173	C312	C438	C500	C632	C723

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

C724	C840	D059	D136	D219	D307	D382	D467	D568	D686
C725	C841	D060	D137	D220	D309	D383	D469	D569	D688
C728	C842	D061	D139	D221	D310	D384	D470	D570	D689
C729	C962	D067	D140	D222	D311	D385	D471	D571	D690
C73	C963	D069	D141	D223	D312	D386	D472	D572	D691
C740	C967	D070	D142	D224	D313	D390	D473	D573	D692
C741	C969	D071	D143	D225	D314	D391	D477	D578	D693
C749	D000	D072	D144	D226	D315	D397	D479	D580	D694
C750	D001	D073	D150	D227	D316	D399	D480	D581	D695
C751	D002	D074	D151	D229	D319	D400	D481	D582	D696
C752	D010	D075	D152	D230	D320	D401	D482	D588	D698
C753	D011	D076	D157	D231	D321	D407	D483	D589	D699
C754	D012	D090	D160	D232	D329	D409	D484	D590	D70
C755	D013	D091	D161	D233	D330	D410	D485	D591	D71
C758	D014	D092	D162	D234	D331	D411	D486	D592	D720
C759	D015	D093	D163	D235	D332	D412	D487	D593	D721
C760	D017	D097	D164	D236	D333	D413	D489	D594	D728
C761	D019	D099	D165	D237	D334	D414	D501	D595	D729
C762	D020	D100	D166	D239	D337	D417	D508	D596	D730
C763	D021	D101	D167	D24	D339	D419	D509	D598	D731
C764	D022	D102	D168	D250	D34	D420	D510	D599	D732
C765	D023	D103	D169	D251	D350	D421	D511	D600	D733
C767	D024	D104	D170	D252	D351	D429	D512	D601	D734
C768	D030	D105	D171	D259	D352	D430	D513	D608	D735
C80	D031	D106	D172	D260	D353	D431	D518	D609	D738
C810	D032	D107	D173	D261	D354	D432	D519	D610	D739
C811	D033	D109	D174	D267	D355	D433	D520	D611	D740
C812	D034	D110	D175	D269	D356	D434	D521	D612	D748
C813	D035	D117	D176	D27	D357	D437	D528	D613	D749
C817	D036	D119	D177	D280	D358	D439	D529	D618	D750
C819	D037	D120	D179	D281	D359	D440	D530	D619	D752
C820	D038	D121	D180	D282	D360	D441	D531	D640	D758
C821	D039	D122	D181	D287	D361	D442	D532	D641	D759
C822	D040	D123	D190	D289	D367	D443	D538	D642	D760
C827	D041	D124	D191	D290	D369	D444	D539	D643	D761
C829	D042	D125	D197	D291	D370	D445	D550	D644	D762
C830	D043	D126	D199	D292	D371	D446	D551	D648	D763
C831	D044	D127	D200	D293	D372	D447	D552	D649	D800
C832	D045	D128	D201	D294	D373	D448	D553	D66	D801
C833	D046	D129	D210	D297	D374	D449	D558	D67	D802
C834	D047	D130	D211	D299	D375	D45	D559	D680	D803
C835	D048	D131	D212	D300	D376	D460	D560	D681	D804
C836	D049	D132	D213	D301	D377	D461	D561	D682	D805
C837	D050	D133	D214	D302	D379	D462	D562	D683	D806
C838	D051	D134	D215	D303	D380	D463	D563	D684	D807
C839	D057	D135	D216	D304	D381	D464	D564	D685	D808

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

D809	E15	E321	E770	G000	G808	I409	K411	N051	P026
D810	E160	E328	E771	G001	G809	I422	K412	N052	P027
D811	E161	E329	E778	G002	G900	I424	K413	N053	P028
D812	E163	E341	E779	G003	G901	I460	K414	N054	P029
D813	E164	E343	E780	G008	G902	I461	K419	N055	P030
D814	E168	E345	E781	G009	G903	I469	K420	N056	P031
D815	E169	E348	E782	G030	G904	I513	K421	N057	P032
D816	E200	E349	E783	G038	G908	I600	K429	N058	P033
D817	E201	E700	E784	G039	G909	I601	K430	N059	P034
D818	E208	E701	E785	G040	G910	I602	K431	N070	P035
D819	E209	E702	E786	G041	G911	I603	K439	N071	P036
D820	E210	E703	E788	G042	G912	I604	K450	N072	P038
D821	E213	E708	E789	G048	G913	I605	K451	N073	P039
D822	E214	E709	E791	G120	G918	I606	K458	N074	P040
D823	E215	E710	E798	G121	G919	I607	K460	N075	P041
D824	E220	E711	E799	G122	G930	I608	K461	N076	P042
D828	E221	E712	E800	G128	G935	I609	K469	N077	P043
D829	E228	E713	E801	G129	G938	I630	K550	N078	P044
D830	E229	E720	E802	G319	G950	I631	K740	N079	P045
D831	E230	E721	E803	G361	G951	I632	K741	N328	P046
D832	E233	E722	E804	G368	G952	I633	K742	P000	P048
D838	E236	E723	E805	G369	G958	I634	K743	P001	P049
D839	E237	E724	E806	G370	G959	I635	K745	P002	P050
D840	E240	E725	E807	G371	I210	I636	K768	P003	P051
D841	E241	E728	E830	G372	I211	I638	K828	P004	P052
D848	E243	E729	E831	G373	I212	I639	K838	P005	P059
D849	E248	E740	E832	G374	I213	I780	M000	P006	P070
D860	E249	E741	E833	G375	I214	I789	M001	P007	P071
D861	E250	E742	E838	G378	I219	I899	M002	P008	P072
D862	E258	E743	E839	G379	I220	J100	M008	P009	P073
D863	E259	E744	E840	G403	I221	J101	M009	P010	P080
D868	E260	E748	E841	G404	I228	J108	M329	P011	P081
D869	E268	E749	E848	G600	I229	J110	M359	P012	P082
D890	E269	E750	E849	G601	I241	J111	M600	P013	P100
D891	E270	E751	E850	G608	I248	J118	M898	P014	P101
D892	E271	E752	E851	G609	I249	K070	N040	P015	P102
D898	E272	E753	E852	G710	I251	K071	N041	P016	P103
D899	E274	E754	E853	G711	I255	K078	N042	P017	P104
E000	E275	E755	E854	G712	I300	K079	N043	P018	P108
E001	E278	E756	E858	G719	I301	K400	N044	P019	P109
E002	E279	E760	E859	G723	I308	K401	N045	P020	P110
E009	E310	E761	E880	G800	I309	K402	N046	P021	P111
E030	E311	E762	E881	G801	I319	K403	N047	P022	P112
E031	E318	E763	E882	G802	I330	K404	N048	P023	P113
E071	E319	E768	E888	G803	I339	K409	N049	P024	P114
E079	E320	E769	E889	G804	I400	K410	N050	P025	P115

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

P119	P240	P372	P570	P768	Q019	Q120	Q188	Q254	Q330
P120	P241	P373	P578	P769	Q02	Q121	Q189	Q255	Q331
P121	P242	P374	P579	P77	Q030	Q122	Q200	Q256	Q332
P122	P243	P375	P580	P780	Q031	Q123	Q201	Q257	Q333
P123	P248	P378	P581	P781	Q038	Q124	Q202	Q258	Q334
P124	P249	P379	P582	P782	Q039	Q128	Q203	Q259	Q335
P128	P250	P38	P583	P783	Q040	Q129	Q204	Q260	Q336
P129	P251	P392	P584	P788	Q041	Q130	Q205	Q261	Q338
P130	P252	P393	P585	P789	Q042	Q131	Q206	Q262	Q339
P131	P253	P394	P588	P810	Q043	Q132	Q208	Q263	Q340
P132	P258	P398	P589	P819	Q045	Q133	Q210	Q264	Q341
P133	P260	P399	P591	P830	Q046	Q134	Q211	Q265	Q348
P134	P261	P500	P60	P831	Q048	Q135	Q212	Q266	Q349
P138	P268	P501	P610	P832	Q049	Q138	Q213	Q268	Q351
P139	P269	P502	P612	P833	Q050	Q139	Q214	Q269	Q353
P140	P270	P503	P613	P838	Q051	Q140	Q218	Q270	Q355
P141	P271	P504	P614	P910	Q052	Q141	Q219	Q271	Q357
P142	P278	P505	P616	P911	Q053	Q142	Q220	Q272	Q359
P143	P279	P508	P618	P912	Q054	Q143	Q221	Q273	Q360
P148	P280	P509	P619	P913	Q055	Q148	Q222	Q274	Q361
P149	P281	P510	P700	P914	Q056	Q150	Q223	Q278	Q369
P150	P285	P519	P701	P915	Q057	Q158	Q224	Q279	Q370
P151	P288	P520	P702	P916	Q058	Q159	Q225	Q280	Q371
P152	P289	P521	P703	P918	Q059	Q160	Q226	Q281	Q372
P153	P290	P522	P704	P919	Q060	Q161	Q228	Q282	Q373
P154	P291	P523	P708	P93	Q061	Q162	Q229	Q283	Q374
P155	P292	P524	P709	P940	Q062	Q163	Q230	Q288	Q375
P156	P294	P525	P711	P941	Q063	Q164	Q231	Q289	Q378
P158	P298	P526	P712	P942	Q064	Q165	Q232	Q300	Q379
P159	P299	P528	P713	P948	Q068	Q169	Q233	Q301	Q380
P200	P350	P529	P714	P949	Q069	Q170	Q234	Q302	Q381
P201	P351	P540	P718	P95	Q070	Q171	Q238	Q303	Q382
P209	P352	P541	P719	P960	Q078	Q172	Q239	Q308	Q383
P219	P353	P542	P720	P961	Q079	Q173	Q240	Q309	Q384
P220	P358	P543	P721	P962	Q100	Q174	Q241	Q310	Q385
P228	P359	P544	P722	P963	Q101	Q175	Q242	Q311	Q386
P229	P360	P545	P728	P965	Q102	Q178	Q243	Q312	Q387
P230	P361	P546	P729	P968	Q103	Q179	Q244	Q313	Q388
P231	P362	P548	P741	P969	Q104	Q180	Q245	Q315	Q390
P232	P363	P549	P742	Q000	Q105	Q181	Q246	Q318	Q391
P233	P364	P550	P743	Q001	Q106	Q182	Q248	Q319	Q392
P234	P365	P551	P744	Q002	Q107	Q183	Q249	Q320	Q393
P235	P368	P558	P745	Q010	Q110	Q184	Q250	Q321	Q394
P236	P369	P559	P748	Q011	Q111	Q185	Q251	Q322	Q395
P238	P370	P560	P749	Q012	Q112	Q186	Q252	Q323	Q396
P239	P371	P569	P760	Q018	Q113	Q187	Q253	Q324	Q398

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

Q399	Q504	Q563	Q661	Q722	Q782	Q844	Q926	Q999	R855
Q400	Q505	Q564	Q662	Q723	Q783	Q845	Q927	R14	R856
Q401	Q506	Q600	Q663	Q724	Q784	Q846	Q928	R18	R857
Q402	Q510	Q601	Q664	Q725	Q785	Q848	Q929	R190	R858
Q403	Q511	Q602	Q665	Q726	Q786	Q849	Q930	R220	R859
Q408	Q512	Q603	Q666	Q727	Q788	Q850	Q931	R238	R898
Q409	Q513	Q604	Q667	Q728	Q789	Q851	Q932	R298	R99
Q410	Q514	Q605	Q668	Q729	Q790	Q858	Q933	R456	S000
Q411	Q515	Q606	Q669	Q730	Q791	Q859	Q934	R75	S001
Q412	Q516	Q610	Q670	Q731	Q792	Q860	Q935	R772	S002
Q418	Q517	Q611	Q671	Q738	Q793	Q861	Q936	R780	S003
Q419	Q518	Q612	Q672	Q740	Q794	Q862	Q937	R781	S004
Q420	Q519	Q613	Q673	Q741	Q795	Q868	Q938	R782	S005
Q421	Q520	Q614	Q674	Q742	Q796	Q870	Q939	R783	S007
Q422	Q521	Q615	Q675	Q743	Q798	Q871	Q951	R784	S008
Q423	Q522	Q618	Q676	Q748	Q799	Q872	Q952	R785	S009
Q428	Q523	Q619	Q677	Q749	Q800	Q873	Q954	R786	S010
Q429	Q524	Q620	Q678	Q750	Q801	Q874	Q955	R787	S011
Q430	Q525	Q621	Q680	Q751	Q802	Q875	Q958	R788	S012
Q431	Q526	Q622	Q681	Q752	Q803	Q878	Q959	R789	S013
Q432	Q527	Q623	Q682	Q753	Q804	Q890	Q960	R81	S014
Q433	Q528	Q624	Q683	Q754	Q808	Q891	Q961	R830	S015
Q434	Q529	Q625	Q684	Q755	Q809	Q892	Q962	R831	S017
Q435	Q530	Q626	Q685	Q758	Q810	Q893	Q963	R832	S018
Q436	Q531	Q627	Q688	Q759	Q811	Q894	Q964	R833	S019
Q437	Q532	Q628	Q690	Q760	Q812	Q897	Q968	R834	S020
Q438	Q539	Q630	Q691	Q761	Q818	Q898	Q969	R835	S021
Q439	Q540	Q631	Q692	Q762	Q819	Q899	Q970	R836	S022
Q440	Q541	Q632	Q699	Q763	Q820	Q900	Q971	R837	S023
Q441	Q542	Q633	Q700	Q764	Q821	Q901	Q972	R838	S024
Q442	Q543	Q638	Q701	Q765	Q822	Q902	Q973	R839	S025
Q443	Q544	Q639	Q702	Q766	Q823	Q909	Q978	R840	S026
Q444	Q548	Q640	Q703	Q767	Q824	Q910	Q979	R841	S027
Q445	Q549	Q641	Q704	Q769	Q825	Q911	Q980	R842	S028
Q446	Q550	Q642	Q709	Q770	Q828	Q912	Q981	R843	S029
Q447	Q551	Q643	Q710	Q771	Q829	Q913	Q982	R844	S030
Q450	Q552	Q644	Q711	Q772	Q830	Q914	Q983	R845	S031
Q451	Q553	Q645	Q712	Q773	Q831	Q915	Q984	R846	S032
Q452	Q554	Q646	Q713	Q774	Q832	Q916	Q985	R847	S033
Q453	Q555	Q647	Q714	Q775	Q833	Q917	Q987	R848	S034
Q458	Q556	Q648	Q715	Q776	Q838	Q920	Q988	R849	S035
Q459	Q558	Q649	Q716	Q777	Q839	Q921	Q989	R850	S040
Q500	Q559	Q652	Q718	Q778	Q840	Q922	Q990	R851	S041
Q501	Q560	Q658	Q719	Q779	Q841	Q923	Q991	R852	S042
Q502	Q561	Q659	Q720	Q780	Q842	Q924	Q992	R853	S043
Q503	Q562	Q660	Q721	Q781	Q843	Q925	Q998	R854	S044

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

S045	S112	S210	S277	S348	S418	S499	S570	S651	S729
S046	S117	S211	S278	S350	S420	S500	S578	S652	S730
S047	S118	S212	S279	S351	S421	S501	S579	S653	S731
S048	S119	S217	S280	S352	S422	S507	S580	S654	S740
S049	S120	S218	S281	S353	S423	S508	S581	S655	S741
S050	S121	S219	S290	S354	S424	S509	S589	S657	S742
S051	S122	S220	S297	S355	S427	S510	S597	S658	S747
S052	S127	S221	S298	S357	S428	S517	S598	S659	S748
S053	S128	S222	S299	S358	S429	S518	S599	S660	S749
S054	S129	S223	S300	S359	S430	S519	S600	S661	S750
S055	S130	S224	S301	S360	S431	S520	S601	S662	S751
S056	S131	S225	S302	S361	S432	S521	S602	S663	S752
S057	S132	S228	S307	S362	S433	S522	S607	S664	S757
S058	S133	S229	S308	S363	S434	S523	S608	S665	S758
S059	S134	S230	S309	S364	S435	S524	S609	S666	S759
S060	S135	S231	S310	S365	S436	S525	S610	S667	S760
S061	S136	S232	S311	S366	S437	S526	S611	S668	S761
S062	S140	S233	S312	S367	S440	S527	S617	S669	S762
S063	S141	S234	S313	S368	S441	S528	S618	S670	S763
S064	S142	S235	S314	S369	S442	S529	S619	S678	S764
S065	S143	S240	S315	S370	S443	S530	S620	S680	S767
S066	S144	S241	S317	S371	S444	S531	S621	S681	S770
S067	S145	S242	S318	S372	S445	S532	S622	S682	S771
S068	S146	S243	S320	S373	S447	S533	S623	S683	S772
S069	S150	S244	S321	S374	S448	S534	S624	S684	S780
S070	S151	S245	S322	S375	S449	S540	S625	S688	S781
S071	S152	S246	S323	S376	S450	S541	S626	S689	S789
S078	S153	S250	S324	S377	S451	S542	S627	S697	S797
S079	S157	S251	S325	S378	S452	S543	S628	S698	S798
S080	S158	S252	S327	S379	S453	S547	S630	S699	S799
S081	S159	S253	S328	S380	S457	S548	S631	S700	S800
S088	S16	S254	S330	S381	S458	S549	S632	S701	S801
S089	S170	S255	S331	S382	S459	S550	S633	S707	S807
S090	S178	S257	S332	S383	S460	S551	S634	S708	S808
S091	S179	S258	S333	S390	S461	S552	S635	S709	S809
S092	S18	S259	S334	S396	S462	S557	S636	S710	S810
S097	S197	S260	S335	S397	S463	S558	S637	S711	S817
S098	S198	S268	S336	S398	S467	S559	S640	S717	S818
S099	S199	S269	S337	S399	S468	S560	S641	S718	S819
S100	S200	S270	S340	S400	S469	S561	S642	S720	S820
S101	S201	S271	S341	S407	S47	S562	S643	S721	S821
S107	S202	S272	S342	S408	S480	S563	S644	S722	S822
S108	S203	S273	S343	S409	S481	S564	S647	S723	S823
S109	S204	S274	S344	S410	S489	S565	S648	S724	S824
S110	S207	S275	S345	S411	S497	S567	S649	S727	S825
S111	S208	S276	S346	S417	S498	S568	S650	S728	S826

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

S827	S908	S982	T094	T178	T236	T300	T348	T401	T453
S828	S909	S983	T095	T179	T237	T301	T349	T402	T454
S829	S910	S984	T096	T180	T240	T302	T350	T403	T455
S830	S911	S997	T098	T181	T241	T303	T351	T404	T456
S831	S912	S998	T099	T182	T242	T304	T352	T405	T457
S832	S913	S999	T10	T183	T243	T305	T353	T406	T458
S833	S917	T002	T110	T184	T244	T306	T354	T407	T459
S834	S920	T003	T111	T185	T245	T307	T355	T408	T460
S835	S921	T008	T112	T188	T246	T310	T356	T409	T461
S836	S922	T009	T113	T189	T247	T311	T357	T410	T462
S837	S923	T012	T114	T190	T250	T312	T360	T411	T463
S840	S924	T013	T115	T191	T251	T313	T361	T412	T464
S841	S925	T019	T116	T192	T252	T314	T362	T413	T465
S842	S927	T021	T118	T193	T253	T315	T363	T414	T466
S847	S929	T022	T119	T198	T254	T316	T364	T415	T467
S848	S930	T023	T12	T199	T255	T317	T365	T420	T468
S849	S931	T024	T130	T200	T256	T318	T366	T421	T469
S850	S932	T025	T131	T201	T257	T319	T367	T422	T470
S851	S933	T028	T132	T202	T260	T320	T368	T423	T471
S852	S934	T029	T133	T203	T261	T321	T369	T424	T472
S853	S935	T031	T134	T204	T262	T322	T370	T425	T473
S854	S936	T032	T135	T205	T263	T323	T371	T426	T474
S855	S940	T033	T136	T206	T264	T324	T372	T427	T475
S857	S941	T038	T138	T207	T265	T325	T373	T428	T476
S858	S942	T039	T139	T210	T266	T326	T374	T430	T477
S859	S943	T041	T140	T211	T267	T327	T375	T431	T478
S860	S947	T042	T141	T212	T268	T328	T378	T432	T479
S861	S948	T043	T142	T213	T269	T329	T379	T433	T480
S862	S949	T048	T143	T214	T270	T330	T380	T434	T481
S863	S950	T049	T144	T215	T271	T331	T381	T435	T482
S867	S951	T050	T145	T216	T272	T332	T382	T436	T483
S868	S952	T052	T146	T217	T273	T333	T383	T438	T484
S869	S957	T053	T147	T220	T274	T334	T384	T439	T485
S870	S958	T055	T148	T221	T275	T335	T385	T440	T486
S878	S959	T058	T149	T222	T276	T336	T386	T441	T487
S880	S960	T059	T150	T223	T277	T337	T387	T442	T490
S881	S961	T062	T151	T224	T280	T338	T388	T443	T491
S889	S962	T063	T158	T225	T281	T339	T389	T444	T492
S897	S967	T064	T159	T226	T282	T340	T390	T445	T493
S898	S968	T065	T16	T227	T283	T341	T391	T446	T494
S899	S969	T07	T170	T230	T284	T342	T392	T447	T495
S900	S970	T08	T171	T231	T285	T343	T393	T448	T496
S901	S971	T090	T172	T232	T286	T344	T394	T449	T497
S902	S978	T091	T173	T233	T287	T345	T398	T450	T498
S903	S980	T092	T174	T234	T288	T346	T399	T451	T499
S907	S981	T093	T175	T235	T289	T347	T400	T452	T500

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

T501	T569	T651	T752	T826	T876	T941	V351	V581	V802
T502	T570	T652	T753	T827	T880	T950	V356	V586	V803
T503	T571	T653	T754	T828	T881	T951	V361	V591	V804
T504	T572	T654	T758	T829	T882	T952	V366	V595	V805
T505	T573	T655	T780	T830	T883	T953	V371	V601	V806
T506	T578	T656	T781	T831	T884	T954	V376	V606	V807
T507	T579	T658	T782	T832	T885	T958	V381	V611	V808
T508	T58	T659	T783	T833	T886	T959	V386	V616	V809
T509	T590	T66	T784	T834	T887	T96	V391	V621	V810
T510	T591	T670	T788	T835	T888	T97	V395	V626	V811
T511	T592	T671	T789	T836	T889	T980	V401	V631	V812
T512	T593	T672	T790	T838	T900	T981	V406	V636	V813
T513	T594	T673	T791	T839	T901	T982	V411	V641	V815
T518	T595	T674	T792	T840	T902	T983	V416	V646	V816
T519	T596	T675	T793	T841	T903	V191	V421	V651	V817
T520	T597	T676	T794	T842	T904	V195	V426	V656	V818
T521	T598	T677	T795	T843	T905	V201	V431	V661	V819
T522	T599	T678	T796	T844	T908	V205	V436	V666	V820
T523	T600	T679	T797	T845	T909	V211	V441	V671	V821
T524	T601	T68	T798	T846	T910	V215	V446	V676	V822
T528	T602	T690	T799	T847	T911	V221	V451	V681	V823
T529	T603	T691	T800	T848	T912	V225	V456	V686	V825
T530	T604	T698	T801	T849	T913	V231	V461	V691	V826
T531	T608	T699	T802	T850	T914	V235	V466	V695	V827
T532	T609	T700	T803	T851	T915	V241	V471	V701	V828
T533	T610	T701	T804	T852	T918	V245	V476	V706	V829
T534	T611	T702	T805	T853	T919	V251	V481	V711	V831
T535	T612	T703	T806	T854	T920	V255	V486	V716	V836
T536	T618	T704	T808	T855	T921	V261	V491	V721	V841
T537	T619	T708	T809	T856	T922	V265	V495	V726	V846
T539	T620	T709	T810	T857	T923	V271	V501	V731	V851
T540	T621	T71	T811	T858	T924	V275	V506	V736	V856
T541	T622	T730	T812	T859	T925	V281	V511	V741	V861
T542	T628	T731	T813	T860	T926	V285	V516	V746	V866
T543	T629	T732	T814	T861	T928	V291	V521	V751	V870
T549	T630	T733	T815	T862	T929	V295	V526	V756	V871
T55	T631	T738	T816	T863	T930	V301	V531	V761	V872
T560	T632	T739	T817	T864	T931	V306	V536	V766	V873
T561	T633	T740	T818	T868	T932	V311	V541	V771	V874
T562	T634	T741	T819	T869	T933	V316	V546	V776	V875
T563	T635	T742	T820	T870	T934	V321	V551	V781	V876
T564	T636	T743	T821	T871	T935	V326	V556	V786	V877
T565	T638	T748	T822	T872	T936	V331	V561	V791	V878
T566	T639	T749	T823	T873	T938	V336	V566	V795	V879
T567	T64	T750	T824	T874	T939	V341	V571	V800	V880
T568	T650	T751	T825	T875	T940	V346	V576	V801	V881

APPENDIX D

ICD-10 Codes Valid for Causes of Fetal Death

V882	V953	W64	X95
V883	V954	W85	X96
V884	V958	W86	X97
V885	V959	W87	X98
V886	V960	W88	X99
V887	V961	W89	Y00
V888	V962	W90	Y02
V889	V968	W91	Y18
V890	V969	W92	Y19
V891	V970	W93	Y22
V892	V973	W99	Y23
V893	V978	X19	Y24
V899	V98	X30	Y25
V910	V99	X31	Y26
V911	W20	X32	Y27
V912	W21	X33	Y28
V913	W22	X340	Y29
V914	W23	X341	Y32
V915	W24	X348	Y33
V916	W25	X349	Y34
V917	W26	X35	Y360
V918	W27	X36	Y361
V919	W28	X37	Y362
V930	W29	X39	Y364
V931	W30	X40	Y365
V932	W31	X41	Y366
V933	W32	X42	Y367
V934	W33	X43	Y368
V935	W34	X44	Y369
V936	W35	X45	*U010
V937	W36	X46	*U011
V938	W37	X47	*U012
V939	W38	X48	*U013
V940	W39	X49	*U014
V941	W40	X52	*U015
V942	W41	X57	*U016
V943	W42	X58	*U017
V944	W43	X590	*U018
V945	W44	X599	*U019
V946	W45	X85	
V947	W49	X87	
V948	W50	X88	
V949	W51	X89	
V950	W52	X90	
V951	W55	X93	
V952	W58	X94	

APPENDIX E

Invalid and Substitute Fetal Death Codes

The following categories are invalid for NCHS fetal cause of death coding. Substitute code(s) for fetal cause of death coding appears to the right.

Use the substitute codes when conditions classifiable to the following codes are reported

<u>Invalid Codes</u>	<u>Substitute Codes Fetal Death</u>	<u>Substitute Codes Maternal Death</u>
A150-A153	P370	P002
A154	P370	P002
A155	P370	P002
A156	P370	P002
A157	P370	P002
A158	P370	P002
A159	P370	P002
B95-B97	Code the disease(s) classified to other chapters modified by the organism. Do not enter a code for the organism.	
F70.-	P95	P008
F71.-	P95	P008
F72.-	P95	P008
F73.-	P95	P008
F78.-	P95	P008
F79.-	P95	P008
I151-I158	R95	R99
I23.-	I21 or I22	P003
I240	I21 or I22	P003
I65- I66	I63	P003
R69	R95	R99
T000, T001, T006	Superficial injuries of specified sites	P005
T010, T011, T016, T018	Open wound of specified sites	P005
T020, T026, T027	Fractures of specified sites	P005
T030, T034	Dislocations, sprains, and strains of specified sites	P005

APPENDIX E

Invalid and Substitute Fetal Death Codes

<u>Invalid Codes</u>	<u>Substitute Codes Fetal Death</u>	<u>Substitute Codes Maternal Death</u>
T040, T044, T047	Crushing injuries of specified sites	P005
T051, T054, T056	Traumatic amputations of specified site	P005
T060, T061, T068	Injuries of specified sites	P005
T29.-	Burns of specified sites	P005

APPENDIX F

Conditions Considered Ill-defined for Fetal Deaths

Conditions Considered Ill-defined for Fetal Deaths

P04.2

P07.0

P07.1

P07.2

P07.3

P20.1

P20.9

P21.9

P95

R00-R99

APPENDIX G

Spontaneous Abortions

Abortion terms interpreted as “spontaneous” and coded as fetal deaths.

Accidental abortion	P018
Complete abortion	P018
Early pregnancy failure	P018
Habitual abortion	P018
Idiopathic abortion	P018
Incomplete abortion	P018
Inevitable abortion	P018
Infected abortion *	P018
Miscarriage	P018
Missed abortion	P018
Natural abortion	P018
Recurrent abortion	P018
Retained abortion	P018
Septic abortion *	P018
Spontaneous abortion	P018
Tubal abortion	P014
Unavoidable abortion	P018
Unintended abortion	P018

*With no statement that a D and C was performed.

APPENDIX H

Terms Interpreted as “Induced abortions” and Not Coded as Fetal Death

1. Consensual abortion
2. Convenience
3. Demand abortion
4. Dilation and curettage (D & C)
5. Dilation and curettage for termination of pregnancy psychiatric indications (D & C for T. O. P.)
6. Dilation and evacuation (D & E)
7. Dilatation and suction curettage (D & SC)
8. Early uterine evacuation
9. Elective abortion (E. A.)
10. Elective termination
11. Endometrial aspiration
12. Extra-amniotic injection
13. Hypersalineization
14. Hysterotomy
15. Hysterectomy for termination of pregnancy (hysterectomy)
16. Iatrogenic interruptions of pregnancy (iatrogenic)
17. Inconvenience
18. Indicated abortion social economic reason
19. Induced abortion
20. Induced by instrumentation prior to admission
21. Induced preg. termination
22. Induced termination of pregnancy (ITOP)
23. Infective abortion*
24. Intentional termination of pregnancy
25. Interrupted first trimester
26. Interrupted pregnancy
27. Intra-amniotic injection
28. Intra-amniotic instillation
29. Intra-uterine prostaglandin instillation
30. Intra-uterine saline instillation
31. KCI injection
32. Laminaria
33. Legal abortion
34. Legally induced abortion
35. Maternal ingestion of abortifacient agent (misoprostol)
36. Medically induced abortion
37. Medically indicated termination of pregnancy
38. Medical interruption of pregnancy
39. Medical termination of pregnancy
40. Menstrual aspiration
41. Menstrual extraction

APPENDIX H

Terms Interpreted as “Induced abortions” and Not Coded as Fetal Death

42. Menstrual induction
43. Menstrual regulation
44. Oxytocin induction
45. Pitocin induction
46. Prophylactic abortion
47. Prostaglandin injection
48. Prostaglandin amniocentesis
49. Requested abortion
50. Saline induction (saline) (salting out procedure) (salineization)
51. Saline amniocentesis
52. Saline amnio-infusion
53. Saline amniotic fluid exchange
54. Septic abortion *
55. Septic criminal abortion
56. Sharp curettage
57. Sodium chloride injection
58. Sociologic termination
59. Suction abortion
60. Suction curettage (S. & C.)
61. Suction D & C
62. Salting out procedure
63. Surgical abortion (S. A.)
64. Surgical curettage
65. Surgical excision of pregnancy
66. Surgical interruption of pregnancy
67. Termination of fetal life
68. Termination of pregnancy
69. Therapeutic abortion (T. A., ther ab, Tab)
70. Therapeutic interruption (T. I.)
71. Undesired pregnancy
72. Vacuum aspiration
73. Vacuum extraction
74. Vacuum induction
75. Vaginal suppository prostaglandin
76. Voluntary abortion (V. A. or V. I. A.)
77. Voluntary interruption of pregnancy
78. Voluntary termination pregnancy (VTP)

* Must have a statement that a D and C was performed. If no statement that a D and C was performed, consider as a spontaneous abortion/fetal death.