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Suggested Citation:

ABSTRACT

Developed at the Agency for Healthcare Research and Quality (AHRQ), the Clinical Classifications Software (CCS) is a tool for clustering patient diagnoses and procedures into a manageable number of clinically meaningful categories. CCS offers researchers the ability to group conditions and procedures without having to sort through thousands of codes. This "clinical grouper" makes it easier to quickly understand patterns of diagnoses and procedures so that health plans, policy makers, and researchers can analyze costs, utilization, and outcomes associated with particular illnesses and procedures.

CCS collapses diagnosis and procedure codes from the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), which contains more than 14,000 diagnosis codes and 3,900 procedure codes. Without the CCS tool, the large number of ICD-9-CM codes makes statistical analysis and reporting difficult and time-consuming.

CCS consists of two related classification systems, single-level and multi-level, which are designed to meet different needs. Single-level CCS is most useful for ranking of diagnoses and procedures and for direct integration into risk adjustment and other software. Multi-level CCS is ideal for evaluating larger aggregations of conditions and procedures or exploring these groupings in greater detail.
INTRODUCTION TO THE CLINICAL CLASSIFICATIONS SOFTWARE (CCS)  
2014 User's Guide

Overview

Clinical Classifications Software provides a way to classify diagnoses and procedures into a limited number of categories by aggregating individual ICD-9-CM codes into broad diagnosis and procedure groups to facilitate statistical analysis and reporting. This document provides a description of the CCS categorization scheme. Electronic files containing the translation of ICD-9-CM diagnosis and procedure codes into CCS categories can be downloaded from this site. (CCS was formally called CCHPR, Clinical Classifications for Health Policy Research.)

The CCS tool is continually updated. The current version is based on ICD-9-CM codes that are valid for January 1980 through September 2014. Four new procedure codes were added for fiscal year 2014. Labels for procedure CCS categories 82,176, 207-2011, and 227 were changed as well. CCS consists of two related classification systems. The first system, called the single-level CCS, groups diagnoses into mutually exclusive categories. The single-level diagnosis CCS aggregates illnesses and conditions into 285 mutually exclusive categories. Similarly, the single-level procedure CCS aggregates procedures into 231 mutually exclusive categories, most of which are homogeneous.

The second system expands the single-level CCS into a hierarchical structure referred to as the multi-level CCS. This system groups single-level CCS into broader categories (e.g., Infectious Diseases, Mental Disorders, and Injury). It also splits single-level CCS categories to provide more detail about particular groupings of codes.

The CCS documentation provides researchers with a listing of the ICD-9-CM codes that are included in each CCS diagnosis and procedure category.

Purpose

CCS categories can be employed in many types of projects analyzing data on diagnoses and procedures. For example, they can be used to:

♦ Identify cases for disease-specific or procedure-specific studies
♦ Gain a better understanding of an institution’s or health plan’s distribution of patients across disease or procedure groupings
♦ Provide statistical information on characteristics, such as charges and length of stay, about relatively specific conditions
♦ Cross-classify procedures by diagnoses to provide insight into the variety of procedures performed for particular diagnoses.
Diagnoses and procedures for hospital inpatient stays are coded using the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM, Fifth Edition). ICD-9-CM consists of about 14,000 diagnosis codes and 3,900 procedure codes. Although it is possible to present descriptive statistics for individual ICD-9-CM codes, it is often useful to aggregate codes into clinically meaningful categories that group similar conditions or procedures. Examples of the use of CCS categories can be found at http://www.hcup-us.ahrq.gov/toolssoftware/ccs/ccs.jsp#pubs. These reports aggregate individual hospital stays into larger diagnosis and procedure groups for statistical analysis and reporting. CCS is unique as a grouping approach because it does not mix diagnoses with treatment; rather, it separates diagnoses and procedures into two different classifications.

History of Development

Clinical Classifications for Health Policy Research (CCHPR) Version 1 represented AHRQ’s initial effort to construct clinically meaningful categories of diagnoses and procedures. The key factor in creating these categories was the extent to which conditions and procedures could be grouped into relatively homogeneous clusters of interest to public policy researchers. CCHPR Version 1 consisted of 185 summary diagnosis categories and 172 summary procedure categories (Elixhauser, Andrews, and Fox, 1993).

CCHPR Version 2 was derived from the Version 1 summary diagnosis and procedure categories. Version 1 categories were modified on the basis of clinical homogeneity, frequency of occurrence in inpatient discharge data, and ICD-9-CM coding changes. The number of discharges in all categories was computed using 1991 California hospital inpatient data on all-listed diagnoses and all-listed procedures from the Healthcare Cost and Utilization Project State Inpatient Databases (SID).

The modified CCHPR schemes were reviewed by technical specialists who evaluated the categories and ICD-9-CM code assignments for accuracy and clinical significance. The reviews consisted of trained medical records personnel and a physician with experience in medical classification. During the review process, additional categories were created, other categories were collapsed, and codes were reassigned when appropriate.

Version 2 contained more categories than Version 1. Some conglomerate categories (e.g., "Other gastrointestinal procedures") and high-frequency categories (e.g., "Pregnancy-related conditions") were divided into smaller, more clinically homogeneous groups.

Beginning with the 1999 update, three important changes were introduced: an additional classification scheme (the multi-level CCS) was introduced; E codes (external causes of injury) received special treatment; and the name was changed to Clinical Classification Software (CCS), to reflect the broader use of the classifications beyond health policy research.
Beginning with the 2008 update, the mental health section of the CCS was replaced with the mental health categories from the CCS-Mental Health and Substance Abuse (MHSA). The CCS-MHSA is a stand-alone algorithm that was developed as an alternative to the mental health section of the CCS. While the CCS mental health categories were formed using the ICD-9-CM coding scheme as an organizing framework, the CCS-MHSA tool began with DSM-IV as the organizing framework and as such it better reflects psychiatric nosology. For more information, see the section below, entitled, "Notes About Integration with the CCS-MHSA Tool."

DESCRIPTION

Single-Level CCS

Diagnosis Codes
The single-level diagnosis classification scheme aggregates illnesses and conditions into 285 mutually exclusive categories, most of which are clinically homogeneous. Some heterogeneous categories were necessary; these combine several less common individual conditions within a body system.

All codes in the diagnosis section of ICD-9-CM are classified. In previous versions of the system, E codes (External Causes of Injury and Poisoning) were not classified because they are used sporadically in inpatient data. Hence, they were aggregated into a single category (CCS 260). Beginning with the 1999 version of the CCS, a classification system for E codes was incorporated. The E code classification was developed by staff at the Centers for Disease and Control and Prevention (Centers for Disease Control, 1997). Examples of single-level CCS diagnosis categories are shown in Table 1.

<table>
<thead>
<tr>
<th>Description</th>
<th>ICD-9-CM\textsuperscript{1} diagnosis codes used to map</th>
<th>CCS category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Essential Hypertension</td>
<td>4011 4019</td>
<td>98</td>
</tr>
<tr>
<td>Hypertension with complications and secondary hypertension</td>
<td>4010 40200 40201 40210 40211 40290 40291 4030 40300 40301 4031 40310 40311 4039 40390 40391 4040 40401 40402 40403 4041 40410 40411 40412 40413 4049 40490 40491 40492 40493 4050 40501 40509 40511 40519 40591 40599 4372</td>
<td>99</td>
</tr>
</tbody>
</table>

\textsuperscript{1}Additional information about the application of ICD-9-CM diagnosis and procedure codes is presented later in this document.
ICD-9-CM codes for the single-level diagnosis CCS categories are presented in Appendix A. The ICD-9-CM code assignments to each category are viewable in the accompanying executable file that provides the crosswalk from ICD-9-CM diagnosis codes to single-level CCS categories.

Labels for the single-level CCS diagnoses are available in Appendix A1.

**Procedure Codes**
The single-level procedure classification scheme contains 231 mutually exclusive categories. Many of the categories represent single procedures; however, some procedures that occur infrequently are grouped according to three dimensions: 1) the relevant body system; 2) whether they are used for diagnostic or therapeutic purposes; and 3) whether they are considered operating room or non-operating room procedures, according to diagnosis related groups (DRG) definitions. Examples of single-level CCS procedure categories are illustrated in Table 2.

<table>
<thead>
<tr>
<th>Description</th>
<th>ICD-9-CM procedure Codes used to map</th>
<th>CCS category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart valve procedures</td>
<td>3500 3501 3502 3503 3504 3510 3511 3512 3513 3514 3520 3521 3522 3523 3524 3525 3526 3527 3528 3596 3599</td>
<td>43</td>
</tr>
<tr>
<td>Coronary artery bypass graft (CABG)</td>
<td>3610 3611 3612 3613 3614 3615 3616 3617 3619 362 363 3631 3632 3639</td>
<td>44</td>
</tr>
</tbody>
</table>

ICD-9-CM codes for the single-level procedure CCS categories are presented in Appendix B. The ICD-9-CM code assignments to each category can be viewed in the accompanying executable files that provide the crosswalk from ICD-9-CM procedure codes to single-level CCS categories.

Labels for the single-level CCS procedures are available in Appendix B1.

**Multi-level CCS**
The multi-level CCS is a hierarchical system that is defined using both single-level CCS groupings and ICD-9-CM codes. Four levels exist in the multi-level diagnosis CCS, while three levels exist in the multi-level procedure CCS. The first of the four levels in the multi-level diagnosis CCS is broken into 18 categories. The first of the three levels in the multi-level procedure CCS is divided into 16 categories. These categories broadly group the single-level CCS and ICD-9-CM codes into 17 diagnosis and 16 procedure body systems (e.g., “Diseases of the Circulatory System”).
The specificity of categories increases with the higher levels, such that second-level categories are more specific than first-level categories, third-level categories are more specific than second-level categories, and fourth-level categories are more specific than third-level categories.

The first-level categories are identified by one whole digit (1-18), second-level categories include one decimal point, third-level categories have two decimal places and fourth-level categories have three decimal places.

Table 3 provides an example of multi-level CCS for diagnoses, revealing how single-level CCS category 99 (from single-level CCS example in Table 1) is further subdivided into the more specific levels in the multi-level system.

<table>
<thead>
<tr>
<th>Multi-level CCS category</th>
<th>Description</th>
<th>ICD-9-CM diagnoses used to map</th>
<th>Single-level CCS used to map</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Diseases of the circulatory system</td>
<td>--</td>
<td>96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121</td>
</tr>
<tr>
<td>7.1</td>
<td>Hypertension</td>
<td>--</td>
<td>98 99</td>
</tr>
<tr>
<td>7.1.1</td>
<td>Essential hypertension</td>
<td>--</td>
<td>98</td>
</tr>
<tr>
<td>7.1.2</td>
<td>Hypertension with complications and secondary hypertension</td>
<td>--</td>
<td>99</td>
</tr>
<tr>
<td>7.1.2.1</td>
<td>Hypertensive heart and/or renal disease</td>
<td>40200 40201 40210 40211 40290 40291 4030 40300 40301 4031 40310 40311 4039 40390 40391 4040 40400 40401 40402 40403 4041 40410 40411 40412 40413 4049 40490 40491 40492 40493</td>
<td>--</td>
</tr>
<tr>
<td>7.1.2.2</td>
<td>Other hypertensive complications</td>
<td>4010 40501 40509 40511 40519 40591 40599 4372</td>
<td>--</td>
</tr>
</tbody>
</table>

ICD-9-CM codes for the multi-level diagnosis CCS categories are presented in Appendix C.
Labels for the multi-level CCS diagnoses are available in Appendix C1.

Procedure Codes

Only three levels exist in the multi-level procedure CCS. The specificity of the procedure categories increases with the higher levels, such that second-level categories are more specific than first-level categories and third-level categories are more specific than second-level categories.

The first-level categories are identified by one whole digit (1-16), second-level categories include one decimal point, and third-level categories have two decimal places.

Table 4 provides an example of multi-level CCS for procedures, revealing how single-level CCS category 44 (from single-level CCS example in Table 2) is further subdivided into the more specific levels in the multi-level system.

<table>
<thead>
<tr>
<th>Multi-level CCS category</th>
<th>Description</th>
<th>ICD-9-CM diagnoses used to map</th>
<th>Single-level CCS used to map</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Operations on the cardiovascular system</td>
<td>--</td>
<td>43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63</td>
</tr>
<tr>
<td>7.1</td>
<td>Heart valve procedures</td>
<td>--</td>
<td>43</td>
</tr>
<tr>
<td>7.2</td>
<td>Coronary artery bypass graft (CABG)</td>
<td>--</td>
<td>44</td>
</tr>
<tr>
<td>7.2.1</td>
<td>Bypass of one coronary artery</td>
<td>3611</td>
<td>--</td>
</tr>
<tr>
<td>7.2.2</td>
<td>Bypass of two coronary arteries</td>
<td>3612</td>
<td>--</td>
</tr>
<tr>
<td>7.2.3</td>
<td>Bypass of three coronary arteries</td>
<td>3613</td>
<td>--</td>
</tr>
<tr>
<td>7.2.4</td>
<td>Bypass of four coronary arteries</td>
<td>3614</td>
<td>--</td>
</tr>
<tr>
<td>7.2.5</td>
<td>Other bypass of coronary arteries</td>
<td>3610 3615 3616 3617 3619 362 363 3631 3632 3639</td>
<td>--</td>
</tr>
</tbody>
</table>
ICD-9-CM codes for the multi-level procedure CCS categories are presented in Appendix D.

Labels for the multi-level CCS procedures are available in Appendix D1. In addition to the appendices, the CCS User’s Guide contains two tables (Table A and Table B) that researchers may find useful. These tables group the CCS categories into body systems. Another system for grouping CCS categories can be found at http://www.meps.ahrq.gov/mepsweb/data_stats/conditions.shtml. This system groups the diagnosis categories into 61 broader categories.

NOTES ABOUT INTEGRATION WITH THE CCS-MHSA TOOL
In 2008 the Mental Health Substance Abuse Clinical Classification Software (CCS-MHSA) tool was integrated into the CCS. As a starting point for development of the CCS-MHSA, we used the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (APA, 1994). In addition, we consulted the ICD-9-CM code lists and classifications used in discussions with staff at the National Institutes for Mental Health (personal communication, NIMH, 2002), the Substance Abuse and Mental Health Services Administration (personal communication, SAMHSA, 2005), a peer-reviewed journal article (Pottick et al., 2000) and an algorithm developed by Billings (2004). A complete review of ICD-9-CM diagnosis codes was conducted in order to identify any diagnosis code that reflects a mental health or substance abuse condition.

In general, we followed the categorization of mental health and substance abuse conditions and code assignments outlined in the DSM-IV. Additional codes, such as mental disorders in pregnancy (64840-64844), drug dependency in pregnancy (64830-64834), and additional V codes, were included as a result of communications with NIMH and SAMHSA and a review of the Billings algorithm. External cause of injury codes (E codes) that indicated the injury was self-inflicted or related to a suicide attempt were also incorporated in accordance with the Billings algorithm.

The integration affected both the single-level and multi-level CCS tools for diagnoses. The CCS-MHSA general tool consists of 15 categories numbered 650-663 and 670. These categories replaced the original CCS single-level categories 65-75. See Appendix A1 below for more information on the single-level integration. The CCS-MHSA specific tool consists of 27 classifications which replaced the old CCS multi-level categories found under “5” (mental health). Refer to Appendix C1 for more details on the multi-level integration. The CCS-MHSA categories function in the same way as the CCS; they can be used with any data that include ICD-9-CM diagnosis information concerned with mental health and/or substance abuse conditions.

Incorporation of the CCS-MHSA into the original CCS required reassignment of several codes not originally found in the CCS mental health categories. For example, maternal codes for mental health and substance abuse were originally included in CCS categories for pregnancy complications; however, with the revised CCS, these codes have been placed into mental health and substance categories. Similarly, E codes for suicide and self-inflicted injury were originally placed into the E code categories at the end of the CCS based on the mechanism of injury. With the revised CCS, suicide and self-inflicted injury E codes are grouped into a separate category in the mental health series of CCS categories.
NOTES ABOUT OPTIONAL SUICIDE E CODE CATEGORIES
Suicide E Codes (external cause of injury codes) are assigned to CCS category 662, “Suicide and Self-Inflicted Injury”. However, for users who wish to assign these E codes to a mechanism of injury CCS, an optional CCS category has been provided in the single-level diagnosis tool ($dxref 2013.csv) for each code. These optional CCS categories follow the CDC’s classification of E codes into mechanism of injury categories such as firearm or poisoning. Interested users should simply reassign suicide codes from category 662 to the optional secondary CCS categories as detailed in column five of $DXREF 2013.csv. The code below gives an example of the reassignment process. Similar code can be used to reassign the CCS label:

```sas
Filename inraw   "c:\tools\ccs\$DXREF 2013.csv";
/***************************************************************************/
/* Make a SAS format Using the Optional  */
/* Suicide Mechanism CCS Category. */
/***************************************************************************/
data new;
  infile inraw  dsd dlm=',' end = eof firstobs=3 missover;
  input start :  $char5.
  Oldccs : $char4.
  Value1 : $char70.
  Value2 : $char70.
  Label  : $char4.
  Value3 : $char70.
  retain hlo " ";
  fmtname = "$ccs" ;
  type    = " " ;
  output;
  if eof then do ;
    start = " " ;
    label = " " ;
    hlo   = "o";
    output ;
  end ;
runc format cntlin = new ;
run;
/***************************************************************************/
/* Reassign CCS to the Optional CCS for */
/* Suicide mechanism using SAS format. */
/***************************************************************************/
data test;
  Set ecodedata;
  Ccs = put(ecode,$ccs.)
run;

EMPTY CATEGORIES:
Please note that because of revisions to the CCS, single-level category 150 and multi-level categories 11.3.7.3 and 9.8.1 do not contain any diagnosis codes as of FY 2008. Also, single-level category 260 does not contain any E Codes as of FY 2005.
NOTES ABOUT ICD-9-CM CODING CHANGES

Time period covered by CCS

In order to keep abreast of yearly changes in the ICD-9-CM codes, the CCS categories are updated annually. This occurs after code assignments are reviewed and agreement is reached among the developers and medical records personnel.

The ICD-9-CM codes are revised every October. New codes are added, existing codes are deleted, and definitions of current codes are changed. CCS categories are revised in response to ICD-9-CM changes. The 2014 version of the CCS is valid for the time period January 1980 through September 2014. There are four new procedure codes in 2014. Using these CCS categories with data outside this time frame will result in misclassification of ICD-9-CM codes.

ICD-9-CM codes requiring special treatment

CCS accounts for all changes in ICD-9-CM coding definitions during this time period, with the exception of several codes whose meaning changed to such an extent that the CCS category assignment changed, as well. These codes must be explicitly assigned by the user when working with older data. If you use more recent data (as described below), no special treatment is necessary because the codes are correctly assigned in the CCS program.

Assignment of these codes requires information on the year and quarter of service. When using data that span the time periods described below, these ICD-9-CM codes must be explicitly assigned to CCS categories according to the year and quarter of the data.

♦ Special treatment is required for the following diagnosis code:

   From January 1980 to September 1993, ICD-9-CM diagnosis code '2510' should appear in CCS diagnosis category 50 (Diabetes mellitus with complications).

   Beginning in October 1993, ICD-9-CM diagnosis code '2510' appears in CCS diagnosis category 51 (Other endocrine disorders). The current CCS program assigns this code to category 51.

♦ Special treatment is required for the following procedure codes:


   Beginning in October 1989, ICD-9-CM procedure code '8159' appears in CCS procedure category 154 (Arthroplasty, other than hip or knee). The current CCS program assigns this code to category 154.
From January 1980 to September 1989, ICD-9-CM procedure codes '8162,' '8163,' and '8164' should appear in CCS procedure category 153 (Hip replacement, total and partial).

Beginning in October 2003, ICD-9-CM procedure codes '8162,' '8163,' and '8164' appear in CCS procedure category 158 (Spinal Fusion). The current CCS program assigns these codes to category 158.
DESCRIPTION OFDOWNLOADABLE FILES

System requirements

In order to use the CCS files, you will need a program (such as WinZip®) that will allow
you to decompress or “unzip” files. You will also need approximately 1.5 megabytes of
disk space available on your hard drive to accommodate all the single-level CCS files.
You will need approximately 2.5 megabytes available to accommodate all the multi-level
CCS files after they are unzipped.

"Unzipping" files

There are two downloadable files, both self-extracting zipped files, called
Single_Level_CCS_2014.zip (for the single-level CCS) and Multi_Level_CCS_2014.zip
(for the multi-level CCS).

Single-level CCS

Single_Level_CCS_2014.zip contains two comma delimited files (.csv) (Microsoft Excel
text) that translate ICD-9-CM codes into single-level CCS categories and two comma
delimited files (.csv) (Microsoft Excel text) that provide descriptive labels for the single-
level CCS categories. To use these zipped files, you must do the following:

1. Create a subdirectory (or folder) called CCS on your hard drive (e.g., MD
C:\CCS). You will need a total of approximately 1.5 megabytes to accommodate
all the files after they are unzipped.

2. Download and save Single_Level_CCS_2014.zip to this subdirectory.

3. Using WinZip (or comparable program), double click on
Single_Level_CCS_2014.zip to expand the files.

The zipped file will unzip (expand for normal use) the files listed below. Note that the
original file (Single_Level_CCS_2014.zip) will remain intact.

<table>
<thead>
<tr>
<th>Filename</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosis CCS</td>
<td></td>
</tr>
<tr>
<td>$DXREF 2014.csv</td>
<td>Translation file that maps ICD-9-CM diagnosis codes into single-level CCS diagnosis categories, with complete information about each ICD-9-CM code and brief CCS labels. <strong>There are some Corrected mappings for 2014.</strong></td>
</tr>
<tr>
<td>DXLABEL 2013.csv</td>
<td>Label file contains the complete descriptive single-level CCS diagnosis category names to use when reporting the diagnosis categories. Category 158 label was changed in 2013.</td>
</tr>
<tr>
<td>Procedure CCS</td>
<td></td>
</tr>
<tr>
<td>$PRRREF 2014.csv</td>
<td>Translation file that maps ICD-9-CM procedure codes into single-level CCS procedure categories, with complete</td>
</tr>
</tbody>
</table>
information about each ICD-9-CM code and brief CCS labels.

<table>
<thead>
<tr>
<th>Filename</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRLABEL 2014.csv</td>
<td>Label file contains the complete descriptive single-level CCS procedure category names to use when reporting the procedure categories.</td>
</tr>
</tbody>
</table>

**Multi-level CCS**

Multi_Level_CCS_2014.zip contains two comma delimited files (.csv) (Microsoft Excel text) that translate ICD-9-CM codes into multi-level CCS categories, and two comma delimited files (.csv) (Microsoft Excel text) that provide descriptive labels for the multilevel CCS categories. Multi_Level_CCS_2014.zip also contains two SAS programs: Multi_CCS_Load_Program.sas allows users to load the multi-level CCS categories for both diagnosis and procedures. Multi_CCS_Summary_Program.sas generates a frequency report of multi-level CCS categories for either the primary diagnosis or primary procedure. To use this zipped file, you must do the following:

1. Create a new subdirectory (or folder) on your hard drive. You will need a total of approximately 2.5 megabytes free to accommodate all the files after they are unzipped.

2. Download and save Multi_Level_CCS_2014.zip to this subdirectory.

3. Using WinZip (or comparable program), double click on Multi_Level_CCS_2014.zip to expand the files.

The self-extracting zipped file will unzip (expand for normal use) the files described below. Note that the original file (Multi_Level_CCS_2014.zip) will remain intact.

<table>
<thead>
<tr>
<th>Filename</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multi-level Diagnosis CCS</td>
<td>Translation file that maps diagnosis codes into level 1-4 multi-level CCS categories.</td>
</tr>
<tr>
<td>CCS_MULTI_DX_TOOL_2014.csv</td>
<td>Translation file that maps diagnosis codes into level 1-4 multi-level CCS categories.</td>
</tr>
<tr>
<td>DXMLABEL-09.csv</td>
<td>Label file that contains the complete descriptive multi-level CCS diagnosis category names to use when reporting the diagnosis categories.</td>
</tr>
<tr>
<td>Multi-level Procedure CCS</td>
<td>Translation file that maps procedure codes into level 1-3 multi-level procedure CCS categories.</td>
</tr>
<tr>
<td>CCS_MULTI_PR_TOOL_2014.csv</td>
<td>Translation file that maps procedure codes into level 1-3 multi-level procedure CCS categories.</td>
</tr>
<tr>
<td>PRMLABEL-09.csv</td>
<td>Label file that contains the complete descriptive multi-level CCS procedure category names to use when reporting the procedure categories.</td>
</tr>
</tbody>
</table>

SAS Utility Programs
Multi_CCS_Load_Program.sas | SAS program file that loads the multi-level CCS categories for diagnosis and procedures.
---|---
Multi_CCS_Summary_Program.sas | SAS program file that produces a frequency report of the multi-level CCS categories for either the primary diagnosis or primary procedure.

**Using translation files**

For the single-level CCS, the translation files translate specific ICD-9-CM codes into CCS categories. The new multi-level CCS translation files map ICD-9-CM codes directly into CCS Level 1, 2, 3, or 4 categories.

The program called “Multi_CCS_Load_Program.sas” can be used to create the multi-level CCS categories. This is recommended for users who have not already developed custom SAS code to load the multi-level categories.

How you use these files will depend on the software system being utilized. For example, if you are using SAS, you can adapt these translations to create a SAS PROC FORMAT. If you are working with SPSS, you can adapt these translations into VALUE LABELS or into a series of recodes.

**Representation of ICD-9-CM diagnosis codes**

In practice, ICD-9-CM diagnoses are represented by 3- to 5-character codes with explicit decimals. In the files you downloaded and in the vast majority of data files, ICD-9-CM diagnoses are represented as 5-character alphanumeric codes with implicit decimals. (Alphanumeric codes are always enclosed in quotation marks.) Examples are given below.

<table>
<thead>
<tr>
<th>Condition</th>
<th>ICD-9-CM diagnosis code</th>
<th>Alphanumeric code (with implicit decimals)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumococcal pneumonia</td>
<td>481</td>
<td>'481 '</td>
</tr>
<tr>
<td>Pneumonia due to Klebsiella pneumoniae</td>
<td>482.0</td>
<td>'4820 '</td>
</tr>
<tr>
<td>Pneumonia due to Escherichia coli</td>
<td>482.82</td>
<td>'48282'</td>
</tr>
<tr>
<td>Single liveborn infant, born in hospital, delivered by cesarean delivery</td>
<td>V30.01</td>
<td>'V3001'</td>
</tr>
</tbody>
</table>
For proper handling of diagnosis codes:

♦ Alphanumeric diagnosis codes must be left-justified so that there are 2 spaces following a 3-character diagnosis code and 1 space following a 4-character diagnosis code. For example – ‘481 ’.

♦ Trailing blanks should never be zero-padded (filled with zeroes so that all 5 characters are filled for codes that should be 3 or 4 characters long). For example – ‘481 ’ should not be changed to ‘48100’.

♦ Leading zeroes must be preserved; they are significant.

**Representation of ICD-9-CM procedure codes**

In practice, ICD-9-CM procedures are represented by 3- or 4-character codes with explicit decimals. In the accompanying files and in the vast majority of data files, ICD-9-CM procedures are represented as 4-character alphanumeric codes with implicit decimals. (Alphanumeric codes are always enclosed in quotation marks.) Examples are provided below.

<table>
<thead>
<tr>
<th>Condition</th>
<th>ICD-9-CM procedure code</th>
<th>Alphanumeric code (with implicit decimals)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incision of prostate</td>
<td>60.0</td>
<td>’600 ’</td>
</tr>
<tr>
<td>Closed biopsy of prostate</td>
<td>60.11</td>
<td>’6011’</td>
</tr>
</tbody>
</table>

For proper handling of procedure codes:

♦ Alphanumeric procedure codes must be left-justified, so that there is always 1 space following a 3-character procedure code. For example – ’600 ’

♦ Trailing blanks should never be zero-padded (filled with zeroes so that all 4 characters are filled for codes that should be 3 characters long). For example – ’600 ’ should not be changed to ’6000’.

♦ Leading zeroes must be preserved; they are significant.
REFERENCES


*DRGs: Diagnosis related groups definitions manual, version 12.0.* Wallingford, CT: 3M Health Information Systems; 1994.


Personal communication with staff at NIMH. In context of interagency collaboration on children’s hospitalizations for mental health and substance abuse conditions. August, 2002.

Personal communication with staff at SAMHSA. In context of interagency collaboration on emergency department events for mental health and substance abuse conditions. Spring, 2005.

Appendix A1

Single-Level CCS – Diagnoses

CATEGORY LABELS

1 Tuberculosis
2 Septicemia (except in labor)
3 Bacterial infection; unspecified site
4 Mycoses
5 HIV infection
6 Hepatitis
7 Viral infection
8 Other infections; including parasitic
9 Sexually transmitted infections (not HIV or hepatitis)
10 Immunizations and screening for infectious disease
11 Cancer of head and neck
12 Cancer of esophagus
13 Cancer of stomach
14 Cancer of colon
15 Cancer of rectum and anus
16 Cancer of liver and intrahepatic bile duct
17 Cancer of pancreas
18 Cancer of other GI organs; peritoneum
19 Cancer of bronchus; lung
20 Cancer; other respiratory and intrathoracic
21 Cancer of bone and connective tissue
22 Melanomas of skin
23 Other non-epithelial cancer of skin
24 Cancer of breast
25 Cancer of uterus
26 Cancer of cervix
27 Cancer of ovary
28 Cancer of other female genital organs
29 Cancer of prostate
30 Cancer of testis
31 Cancer of other male genital organs
32 Cancer of bladder
33 Cancer of kidney and renal pelvis
34 Cancer of other urinary organs
35 Cancer of brain and nervous system
36 Cancer of thyroid
37 Hodgkin’s disease
38 Non-Hodgkin’s lymphoma
39 Leukemias
40 Multiple myeloma
41 Cancer; other and unspecified primary
42 Secondary malignancies
43 Malignant neoplasm without specification of site
44 Neoplasms of unspecified nature or uncertain behavior
45 Maintenance chemotherapy; radiotherapy
46 Benign neoplasm of uterus
47 Other and unspecified benign neoplasm
48 Thyroid disorders
49 Diabetes mellitus without complication
50 Diabetes mellitus with complications
51 Other endocrine disorders
52 Nutritional deficiencies
53 Disorders of lipid metabolism
54 Gout and other crystal arthropathies
55 Fluid and electrolyte disorders
56 Cystic fibrosis
57 Immunity disorders
58 Other nutritional; endocrine; and metabolic disorders
59 Deficiency and other anemia
60 Acute posthemorrhagic anemia
61 Sickle cell anemia
62 Coagulation and hemorrhagic disorders
63 Diseases of white blood cells
64 Other hematologic conditions
650 MHSA: Adjustment disorders
651 MHSA: Anxiety disorders
652 MHSA: Attention-deficit, conduct, and disruptive behavior disorders
653 MHSA: Delirium, dementia, and amnestic and other cognitive disorders
654 MHSA: Developmental disorders
655 MHSA: Disorders usually diagnosed in infancy, childhood, or adolescence
656 MHSA: Impulse control disorders, NEC
657 MHSA: Mood disorders
658 MHSA: Personality disorders
659 MHSA: Schizophrenia and other psychotic disorders
660 MHSA: Alcohol-related disorders
661 MHSA: Substance-related disorders
662 MHSA: Suicide and intentional self-inflicted injury
663 MHSA: Screening and history of mental health and substance abuse codes
670 MHSA: Miscellaneous mental disorders
76 Meningitis (except that caused by tuberculosis or sexually transmitted disease)
77 Encephalitis (except that caused by tuberculosis or sexually transmitted disease)
78 Other CNS infection and poliomyelitis
79 Parkinson’s disease
80 Multiple sclerosis
81 Other hereditary and degenerative nervous system conditions
82 Paralysis
83 Epilepsy; convulsions
84 Headache; including migraine
85 Coma; stupor; and brain damage
86 Cataract
87 Retinal detachments; defects; vascular occlusion; and retinopathy
88 Glaucoma
89 Blindness and vision defects
90 Inflammation; infection of eye (except that caused by tuberculosis or sexually transmitted disease)
91 Other eye disorders
92 Otitis media and related conditions
93 Conditions associated with dizziness or vertigo
94 Other ear and sense organ disorders
95 Other nervous system disorders
96 Heart valve disorders
97 Peri-; endo-; and myocarditis; cardiomyopathy (except that caused by tuberculosis or sexually transmitted disease)
98 Essential hypertension
99 Hypertension with complications and secondary hypertension
100 Acute myocardial infarction
101 Coronary atherosclerosis and other heart disease
102 Nonspecific chest pain
103 Pulmonary heart disease
104 Other and ill-defined heart disease
105 Conduction disorders
106 Cardiac dysrhythmias
107 Cardiac arrest and ventricular fibrillation
108 Congestive heart failure; nonhypertensive
109 Acute cerebrovascular disease
110 Occlusion or stenosis of precerebral arteries
111 Other and ill-defined cerebrovascular disease
112 Transient cerebral ischemia
113 Late effects of cerebrovascular disease
114 Peripheral and visceral atherosclerosis
115 Aortic; peripheral; and visceral artery aneurysms
116 Aortic and peripheral arterial embolism or thrombosis
117 Other circulatory disease
118 Phlebitis; thrombophlebitis and thromboembolism
119 Varicose veins of lower extremity
120 Hemorrhoids
121 Other diseases of veins and lymphatics
122 Pneumonia (except that caused by tuberculosis or sexually transmitted disease)
123 Influenza
124 Acute and chronic tonsillitis
125 Acute bronchitis
126 Other upper respiratory infections
127 Chronic obstructive pulmonary disease and bronchiectasis
128 Asthma
129 Aspiration pneumonitis; food/vomitus
130 Pleurisy; pneumothorax; pulmonary collapse
131 Respiratory failure; insufficiency; arrest (adult)
132 Lung disease due to external agents
133 Other lower respiratory disease
134 Other upper respiratory disease
135 Intestinal infection
136 Disorders of teeth and jaw
137 Diseases of mouth; excluding dental
138 Esophageal disorders
139 Gastroduodenal ulcer (except hemorrhage)
140 Gastritis and duodenitis
141 Other disorders of stomach and duodenum
142 Appendicitis and other appendiceal conditions
143 Abdominal hernia
144 Regional enteritis and ulcerative colitis
145 Intestinal obstruction without hernia
146 Diverticulosis and diverticulitis
147 Anal and rectal conditions
148 Peritonitis and intestinal abscess
149 Biliary tract disease
150 Liver disease; alcohol-related
151 Other liver diseases
152 Pancreatic disorders (not diabetes)
153 Gastrointestinal hemorrhage
154 Noninfectious gastroenteritis
155 Other gastrointestinal disorders
156 Nephritis; nephrosis; renal sclerosis
157 Acute and unspecified renal failure
158 **Chronic kidney disease**
159 Urinary tract infections
160 Calculus of urinary tract
161 Other diseases of kidney and ureters
162 Other diseases of bladder and urethra
163 Genitourinary symptoms and ill-defined conditions
164 Hyperplasia of prostate
165 Inflammatory conditions of male genital organs
166 Other male genital disorders
167 Nonmalignant breast conditions
168 Inflammatory diseases of female pelvic organs
169 Endometriosis
170 Prolapse of female genital organs
171 Menstrual disorders
172 Ovarian cyst
173 Menopausal disorders
174 Female infertility
175 Other female genital disorders
176 Contraceptive and procreative management
177 Spontaneous abortion
178 Induced abortion
179 Postabortion complications
180 Ectopic pregnancy
181 Other complications of pregnancy
182 Hemorrhage during pregnancy; abruptio placenta; placenta previa
183 Hypertension complicating pregnancy; childbirth and the puerperium
184 Early or threatened labor
185 Prolonged pregnancy
186 Diabetes or abnormal glucose tolerance complicating pregnancy; childbirth; or the puerperium
187 Malposition; malpresentation
188 Fetopelvic disproportion; obstruction
189 Previous C-section
190 Fetal distress and abnormal forces of labor
191 Polyhydramnios and other problems of amniotic cavity
192 Umbilical cord complication
193 OB-related trauma to perineum and vulva
194 Forceps delivery
195 Other complications of birth; puerperium affecting management of mother
196 Normal pregnancy and/or delivery
197 Skin and subcutaneous tissue infections
198 Other inflammatory condition of skin
199 Chronic ulcer of skin
200 Other skin disorders
201 Infective arthritis and osteomyelitis (except that caused by tuberculosis or sexually transmitted disease)
202 Rheumatoid arthritis and related disease
203 Osteoarthritis
204 Other non-traumatic joint disorders
205 Spondylosis; intervertebral disc disorders; other back problems
206 Osteoporosis
207 Pathological fracture
208 Acquired foot deformities
209 Other acquired deformities
210 Systemic lupus erythematosus and connective tissue disorders
211 Other connective tissue disease
212 Other bone disease and musculoskeletal deformities
213 Cardiac and circulatory congenital anomalies
214 Digestive congenital anomalies
215 Genitourinary congenital anomalies
216 Nervous system congenital anomalies
217 Other congenital anomalies
218 Liveborn
219 Short gestation; low birth weight; and fetal growth retardation
220 Intrauterine hypoxia and birth asphyxia
221 Respiratory distress syndrome
222 Hemolytic jaundice and perinatal jaundice
223 Birth trauma
224 Other perinatal conditions
225 Joint disorders and dislocations; trauma-related
226 Fracture of neck of femur (hip)
227 Spinal cord injury
228 Skull and face fractures
229 Fracture of upper limb
230 Fracture of lower limb
231 Other fractures
232 Sprains and strains
233 Intracranial injury
234 Crushing injury or internal injury
235 Open wounds of head; neck; and trunk
236 Open wounds of extremities
237 Complication of device; implant or graft
238 Complications of surgical procedures or medical care
239 Superficial injury; contusion
240 Burns
241 Poisoning by psychotropic agents
242 Poisoning by other medications and drugs
243 Poisoning by nonmedicinal substances
244 Other injuries and conditions due to external causes
245 Syncope
246 Fever of unknown origin
247 Lymphadenitis
248 Gangrene
249 Shock
250 Nausea and vomiting
251 Abdominal pain
252 Malaise and fatigue
253 Allergic reactions
254 Rehabilitation care; fitting of prostheses; and adjustment of devices
255 Administrative/social admission
256 Medical examination/evaluation
257 Other aftercare
258 Other screening for suspected conditions (not mental disorders or infectious disease)
259 Residual codes; unclassified
260 E Codes: All (external causes of injury and poisoning)
2601 E Codes: Cut/pierceb
2602 E Codes: Drowning/submersion
2603 E Codes: Fall
2604 E Codes: Fire/burn
2605 E Codes: Firearm
2606 E Codes: Machinery
2607 E Codes: Motor vehicle traffic (MVT)
2608 E Codes: Pedal cyclist; not MVT
2609 E Codes: Pedestrian; not MVT
2610 E Codes: Transport; not MVT
2611 E Codes: Natural/environment
2612 E Codes: Overexertion
2613 E Codes: Poisoning
2614 E Codes: Struck by; against
2615 E Codes: Suffocation
2616 E Codes: Adverse effects of medical care
2617 E Codes: Adverse effects of medical drugs
2618 E Codes: Other specified and classifiable
2619 E Codes: Other specified; NEC
2620 E Codes: Unspecified
2621 E Codes: Place of occurrence
### Appendix B1

**Single-Level CCS - Procedures**

**CATEGORY LABELS**

1. Incision and excision of CNS
2. Insertion; replacement; or removal of extracranial ventricular shunt
3. Laminectomy; excision intervertebral disc
4. Diagnostic spinal tap
5. Insertion of catheter or spinal stimulator and injection into spinal canal
6. Decompression peripheral nerve
7. Other diagnostic nervous system procedures
8. Other non-OR or closed therapeutic nervous system procedures
9. Other OR therapeutic nervous system procedures
10. Thyroidectomy; partial or complete
11. Diagnostic endocrine procedures
12. Other therapeutic endocrine procedures
13. Corneal transplant
14. Glaucoma procedures
15. Lens and cataract procedures
16. Repair of retinal tear; detachment
17. Destruction of lesion of retina and choroid
18. Diagnostic procedures on eye
19. Other therapeutic procedures on eyelids; conjunctiva; cornea
20. Other intraocular therapeutic procedures
21. Other extraocular muscle and orbit therapeutic procedures
22. Tympanoplasty
23. Myringotomy
24. Mastoidectomy
25. Diagnostic procedures on ear
26. Other therapeutic ear procedures
27. Control of epistaxis
28. Plastic procedures on nose
29. Dental procedures
30. Tonsillectomy and/or adenoidectomy
31. Diagnostic procedures on nose; mouth and pharynx
32. Other non-OR therapeutic procedures on nose; mouth and pharynx
33. Other OR therapeutic procedures on nose; mouth and pharynx
34. Tracheostomy; temporary and permanent
35. Tracheoscopy and laryngoscopy with biopsy
36. Lobectomy or pneumonectomy
37. Diagnostic bronchoscopy and biopsy of bronchus
38. Other diagnostic procedures on lung and bronchus
39. Incision of pleura; thoracentesis; chest drainage
40. Other diagnostic procedures of respiratory tract and mediastinum
41. Other non-OR therapeutic procedures on respiratory system
42. Other OR therapeutic procedures on respiratory system and mediastinum
43. Heart valve procedures
44. Coronary artery bypass graft (CABG)
45. Percutaneous transluminal coronary angioplasty (PTCA)
46. Coronary thrombolysis
47. Diagnostic cardiac catheterization; coronary arteriography
48. Insertion; revision; replacement; removal of cardiac pacemaker or cardioverter/defibrillator
49. Other OR heart procedures
50 Extracorporeal circulation auxiliary to open heart procedures
51 Endarterectomy; vessel of head and neck
52 Aortic resection; replacement or anastomosis
53 Varicose vein stripping; lower limb
54 Other vascular catheterization; not heart
55 Peripheral vascular bypass
56 Other vascular bypass and shunt; not heart
57 Creation; revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis
58 Hemodialysis
59 Other OR procedures on vessels of head and neck
60 Embolectomy and endarterectomy of lower limbs
61 Other OR procedures on vessels other than head and neck
62 Other diagnostic cardiovascular procedures
63 Other non-OR therapeutic cardiovascular procedures
64 Bone marrow transplant
65 Bone marrow biopsy
66 Procedures on spleen
67 Other therapeutic procedures; hemic and lymphatic system
68 Injection or ligation of esophageal varices
69 Esophageal dilatation
70 Upper gastrointestinal endoscopy; biopsy
71 Gastrostomy; temporary and permanent
72 Colostomy; temporary and permanent
73 Ileostomy and other enterostomy
74 Gastrectomy; partial and total
75 Small bowel resection
76 Colonoscopy and biopsy
77 Proctoscopy and anorectal biopsy
78 Colectomy resection
79 Local excision of large intestine lesion (not endoscopic)
80 Appendectomy
81 Hemorrhoid procedures
82 Fluoroscopy of the biliary and pancreatic ducts (ERCP, ERC and ERP)
83 Biopsy of liver
84 Cholecystectomy and common duct exploration
85 Inguinal and femoral hernia repair
86 Other hernia repair
87 Laparoscopy (GI only)
88 Abdominal paracentesis
89 Exploratory laparotomy
90 Excision; lysis peritoneal adhesions
91 Peritoneal dialysis
92 Other bowel diagnostic procedures
93 Other non-OR upper GI therapeutic procedures
94 Other OR upper GI therapeutic procedures
95 Other non-OR lower GI therapeutic procedures
96 Other OR lower GI therapeutic procedures
97 Other gastrointestinal diagnostic procedures
98 Other non-OR gastrointestinal therapeutic procedures
99 Other OR gastrointestinal therapeutic procedures
100 Endoscopy and endoscopic biopsy of the urinary tract
101 Transurethral excision; drainage; or removal urinary obstruction
102 Ureteral catheterization
103 Nephrotomy and nephrostomy
104 Nephrectomy; partial or complete
105 Kidney transplant
106 Genitourinary incontinence procedures
107 Extracorporeal lithotripsy; urinary
108 Indwelling catheter
109 Procedures on the urethra
110 Other diagnostic procedures of urinary tract
111 Other non-OR therapeutic procedures of urinary tract
112 Other OR therapeutic procedures of urinary tract
113 Transurethral resection of prostate (TURP)
114 Open prostatectomy
115 Circumcision
116 Diagnostic procedures; male genital
117 Other non-OR therapeutic procedures; male genital
118 Other OR therapeutic procedures; male genital
119 Oophorectomy; unilateral and bilateral
120 Other operations on ovary
121 Ligation or occlusion of fallopian tubes
122 Removal of ectopic pregnancy
123 Other operations on fallopian tubes
124 Hysterectomy; abdominal and vaginal
125 Other excision of cervix and uterus
126 Abortion (termination of pregnancy)
127 Dilatation and curettage (D&C); aspiration after delivery or abortion
128 Diagnostic dilatation and curettage (D&C)
129 Repair of cystocele and rectocele; obliteration of vaginal vault
130 Other diagnostic procedures; female organs
131 Other non-OR therapeutic procedures; female organs
132 Other OR therapeutic procedures; female organs
133 Episiotomy
134 Cesarean section
135 Forceps; vacuum; and breech delivery
136 Artificial rupture of membranes to assist delivery
137 Other procedures to assist delivery
138 Diagnostic amniocentesis
139 Fetal monitoring
140 Repair of current obstetric laceration
141 Other therapeutic obstetrical procedures
142 Partial excision bone
143 Bunionection or repair of toe deformities
144 Treatment; facial fracture or dislocation
145 Treatment; fracture or dislocation of radius and ulna
146 Treatment; fracture or dislocation of hip and femur
147 Treatment; fracture or dislocation of lower extremity (other than hip or femur)
148 Other fracture and dislocation procedure
149 Arthroscopy
150 Division of joint capsule; ligament or cartilage
151 Excision of semilunar cartilage of knee
152 Arthroplasty knee
153 Hip replacement; total and partial
154 Arthroplasty other than hip or knee
155 Arthrocentesis
156 Injections and aspirations of muscles; tendons; bursa; joints and soft tissue
157 Amputation of lower extremity
158 Spinal fusion
159 Other diagnostic procedures on musculoskeletal system
160 Other therapeutic procedures on muscles and tendons
161 Other OR therapeutic procedures on bone
162 Other OR therapeutic procedures on joints
163 Other non-OR therapeutic procedures on musculoskeletal system
164 Other OR therapeutic procedures on musculoskeletal system
165 Breast biopsy and other diagnostic procedures on breast
166 Lumpectomy; quadrantectomy of breast
167 Mastectomy
168 Incision and drainage; skin and subcutaneous tissue
169 Debridement of wound; infection or burn
170 Excision of skin lesion
171 Suture of skin and subcutaneous tissue
172 Skin graft
173 Other diagnostic procedures on skin and subcutaneous tissue
174 Other non-OR therapeutic procedures on skin and breast
175 Other OR therapeutic procedures on skin and breast
176 Organ transplantation (other than bone marrow, corneal or kidney)
177 Computerized axial tomography (CT) scan head
178 CT scan chest
179 CT scan abdomen
180 Other CT scan
181 Myelogram
182 Mammography
183 Routine chest X-ray
184 Intraoperative cholangiogram
185 Upper gastrointestinal X-ray
186 Lower gastrointestinal X-ray
187 Intravenous pyelogram
188 Cerebral arteriogram
189 Contrast aortogram
190 Contrast arteriogram of femoral and lower extremity arteries
191 Arterio- or venogram (not heart and head)
192 Diagnostic ultrasound of head and neck
193 Diagnostic ultrasound of heart (echocardiogram)
194 Diagnostic ultrasound of gastrointestinal tract
195 Diagnostic ultrasound of urinary tract
196 Diagnostic ultrasound of abdomen or retroperitoneum
197 Other diagnostic ultrasound
198 Magnetic resonance imaging
199 Electroencephalogram (EEG)
200 Nonoperative urinary system measurements
201 Cardiac stress tests
202 Electrocardiogram
203 Electrographic cardiac monitoring
204 Swan-Ganz catheterization for monitoring
205 Arterial blood gases
206 Microscopic examination (bacterial smear; culture; toxicology)
207 Nuclear medicine imaging of bone
208 Nuclear medicine imaging of pulmonary
209 Non-imaging nuclear medicine probe or assay
210 Other nuclear medicine imaging
211 Radiation therapy
212 Diagnostic physical therapy
213 Physical therapy exercises; manipulation; and other procedures
214 Traction; splints; and other wound care
215 Other physical therapy and rehabilitation
216 Respiratory intubation and mechanical ventilation
217 Other respiratory therapy
218 Psychological and psychiatric evaluation and therapy
219 Alcohol and drug rehabilitation/detoxification
220 Ophthalmologic and otologic diagnosis and treatment
221 Nasogastric tube
222 Blood transfusion
223 Enteral and parenteral nutrition
224 Cancer chemotherapy
225 Conversion of cardiac rhythm
226 Other diagnostic radiology and related techniques
227 Other diagnostic procedures
228 Prophylactic vaccinations and inoculations
229 Nonoperative removal of foreign body
230 Extracorporeal shock wave, other than urinary
231 Other therapeutic procedures
Appendix C1

Multi-Level CCS – Diagnoses

MULTI-LEVEL
CATEGORY LABELS [Single-Level CCS Diagnosis Category]

1 Infectious and parasitic diseases
  1.1 Bacterial infection
    1.1.1 Tuberculosis [1]
    1.1.2 Septicemia (except in labor) [2]
      1.1.2.1 Streptococcal septicemia
      1.1.2.2 Staphylococcal septicemia
      1.1.2.3 E Coli septicemia
      1.1.2.4 Other gram negative septicemia
      1.1.2.5 Other specified septicemia
      1.1.2.6 Unspecified septicemia
    1.1.3 Sexually transmitted infections (not HIV or hepatitis) [9]
    1.1.4 Other bacterial infections [3]
  1.2 Mycoses [4]
    1.2.1 Candidiasis of the mouth (thrush)
  1.2.2 Other mycoses
  1.3 Viral infection
    1.3.1 HIV infection [5]
    1.3.2 Hepatitis [6]
    1.3.3 Other viral infections [7]
      1.3.3.1 Herpes zoster infection
      1.3.3.2 Herpes simplex infection
      1.3.3.3 Other and unspecified viral infection
    1.4 Other infections; including parasitic [8]
  1.5 Immunizations and screening for infectious disease [10]
2 Neoplasms
  2.1 Colorectal cancer
    2.1.1 Cancer of colon [14]
    2.1.2 Cancer of rectum and anus [15]
  2.2 Other gastrointestinal cancer
    2.2.1 Cancer of esophagus [12]
    2.2.2 Cancer of stomach [13]
    2.2.3 Cancer of liver and intrahepatic bile duct [16]
    2.2.4 Cancer of pancreas [17]
    2.2.5 Cancer of other GI organs; peritoneum [18]
  2.3 Cancer of bronchus; lung [19]
  2.4 Cancer of skin
    2.4.1 Melanomas of skin [22]
    2.4.2 Other non-epithelial cancer of skin [23]
  2.5 Cancer of breast [24]
  2.6 Cancer of uterus and cervix
    2.6.1 Cancer of uterus [25]
    2.6.2 Cancer of cervix [26]
  2.7 Cancer of ovary and other female genital organs
    2.7.1 Cancer of ovary [27]
    2.7.2 Cancer of other female genital organs [28]
  2.8 Cancer of male genital organs
    2.8.1 Cancer of prostate [29]
    2.8.2 Cancer of testis [30]
2.8.3 Cancer of other male genital organs [31]
2.9 Cancer of urinary organs
2.9.1 Cancer of bladder [32]
2.9.2 Cancer of kidney and renal pelvis [33]
2.9.3 Cancer of other urinary organs [34]
2.1 Cancer of lymphatic and hematopoietic tissue
2.10.1 Hodgkins disease [37]
2.10.2 Non-Hodgkins lymphoma [38]
2.10.3 Leukemias [39]
2.10.4 Multiple myeloma [40]
2.11 Cancer; other primary
2.11.1 Cancer of head and neck [11]
2.11.2 Cancer; other respiratory and intrathoracic [20]
2.11.3 Cancer of bone and connective tissue [21]
2.11.4 Cancer of brain and nervous system [35]
2.11.5 Cancer of thyroid [36]
2.11.6 Cancer; other and unspecified primary [41]
2.12 Secondary malignancies [42]
2.12.1 Secondary malignancy of lymph nodes
2.12.2 Secondary malignancy of lung
2.12.3 Secondary malignancy of liver
2.12.4 Secondary malignancy of brain/spine
2.12.5 Secondary malignancy of bone
2.12.6 Other secondary malignancy
2.13 Malignant neoplasm without specification of site [43]
2.14 Neoplasms of unspecified nature or uncertain behavior [44]
2.15 Maintenance chemotherapy; radiotherapy [45]
2.15.1 Radiotherapy
2.15.2 Chemotherapy
2.16 Benign neoplasms
2.16.1 Benign neoplasm of uterus [46]
2.16.2 Other and unspecified benign neoplasm [47]
2.16.2.1 Benign neoplasm of ovary
2.16.2.2 Benign neoplasm of colon
2.16.2.3 Benign neoplasm of the thyroid
2.16.2.4 Benign neoplasm of cerebral meninges
2.16.2.5 Other and unspecified benign neoplasms
3 Endocrine; nutritional; and metabolic diseases and immunity disorders
3.1 Thyroid disorders [48]
3.1.1 Thyrotoxicosis with or without goiter
3.1.2 Other thyroid disorders
3.2 Diabetes mellitus without complication [49]
3.3 Diabetes mellitus with complications [50]
3.3.1 Diabetes with ketoacidosis or uncontrolled diabetes
3.3.2 Diabetes with renal manifestations
3.3.3 Diabetes with ophthalmic manifestations
3.3.4 Diabetes with neurological manifestations
3.3.5 Diabetes with circulatory manifestations
3.3.6 Diabetes with unspecified complications
3.3.7 Diabetes with other manifestations
3.4 Other endocrine disorders [51]
3.5 Nutritional deficiencies [52]
3.5.1 Unspecified protein-calorie malnutrition
3.5.2 Other malnutrition
3.6 Disorders of lipid metabolism [53]
3.7 Gout and other crystal arthropathies [54]
3.8 Fluid and electrolyte disorders [55]
3.8.1 Hyposmolality
3.8.2 Hypovolemia
3.8.3 Hyperpotassemia
3.8.4 Hypopotassemia
3.8.5 Other fluid and electrolyte disorders
3.9 Cystic fibrosis [56]
3.11 Other nutritional; endocrine; and metabolic disorders [58]
3.11.1 Disorders of mineral metabolism
3.11.2 Obesity
3.11.3 Other and unspecified metabolic; nutritional; and endocrine disorders
4 Diseases of the blood and blood-forming organs
4.1 Anemia
4.1.1 Acute posthemorrhagic anemia [60]
4.1.2 Sickle cell anemia [61]
4.1.3 Deficiency and other anemia [59]
4.1.3.1 Iron deficiency anemia
4.1.3.2 Other deficiency anemia
4.1.3.3 Aplastic anemia
4.1.3.4 Chronic blood loss anemia
4.1.3.5 Acquired hemolytic anemia
4.1.3.6 Other specified anemia
4.1.3.7 Anemia; unspecified
4.2 Coagulation and hemorrhagic disorders [62]
4.2.1 Coagulation defects
4.2.2 Thrombocytopenia
4.2.3 Other coagulation and hemorrhagic disorders
4.3 Diseases of white blood cells [63]
4.4 Other hematologic conditions [64]
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14.5.1 Cleft palate without cleft lip
14.5.2 Cleft lip with or without cleft palate
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14.5.14 Other congenital anomalies of limbs
14.5.15 Congenital anomalies of skull and facial bones
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16.10.2.2 Respiratory complications
16.10.2.3 Gastrointestinal complications
16.10.2.4 Urinary complications
16.10.2.5 Hemorrhage or hematoma complicating a procedure
16.10.2.6 Postoperative infection
16.10.2.7 Other complications of surgical and medical procedures
16.11 Poisoning
16.11.1 Poisoning by psychotropic agents [241]
16.11.2 Poisoning by other medications and drugs [242]
16.11.3 Poisoning by nonmedicinal substances [243]
16.12 Other injuries and conditions due to external causes [244]
17 Symptoms; signs; and ill-defined conditions and factors influencing health status
17.1 Symptoms; signs; and ill-defined conditions
17.1.1 Syncope [245]
17.1.2 Fever of unknown origin [246]
17.1.3 Lymphadenitis [247]
17.1.4 Gangrene [248]
17.1.5 Shock [249]
17.1.6 Nausea and vomiting [250]
17.1.7 Abdominal pain [251]
17.1.8 Malaise and fatigue [252]
17.1.9 Allergic reactions [253]
17.2 Factors influencing health care
17.2.1 Rehabilitation care; fitting of prostheses; and adjustment of devices [254]
17.2.2 Administrative/social admission [255]
17.2.3 Medical examination/evaluation [256]
17.2.4 Other aftercare [257]
17.2.5 Other screening for suspected conditions (not mental disorders or infectious disease) [258]
18 Residual codes; unclassified; all E codes [259 and 260]
Appendix D1

Multi-Level CCS – Procedures

MULTI-LEVEL
CATEGORY LABELS [Single-Level CCS Procedure Category]

1 Operations on the nervous system
1.1 Incision and excision of CNS [1]
1.1.1 Craniotomy and craniectomy
1.1.2 Incision of cerebral meninges
1.1.3 Other incision and excision of CNS
1.2 Insertion; replacement; or removal of extracranial ventricular shunt [2]
1.3 Laminectomy; excision intervertebral disc [3]
1.3.1 Excision of intervertebral disc
1.3.2 Laminectomy
1.4 Diagnostic spinal tap [4]
1.5 Insertion of catheter or spinal stimulator and injection into spinal canal [5]
1.6 Decompression peripheral nerve [6]
1.6.1 Release of carpal tunnel
1.6.2 Other lysis of adhesion and decompression of peripheral nerves
1.7 Other diagnostic nervous system procedures [7]
1.8 Other non-OR or closed therapeutic nervous system procedures [8]
1.9 Other OR therapeutic nervous system procedures [9]
2 Operations on the endocrine system
2.1 Thyroidectomy; partial or complete [10]
2.2 Diagnostic endocrine procedures [11]
2.3 Other therapeutic endocrine procedures [12]
3 Operations on the eye
3.1 Corneal transplant [13]
3.2 Glaucoma procedures [14]
3.3 Lens and cataract procedures [15]
3.3.1 Insertion of prosthetic lens
3.3.2 Phacoemulsification and aspiration of cataract
3.3.3 Other extracapsular extraction of lens
3.3.4 Other lens and cataract procedures
3.4 Repair of retinal tear; detachment [16]
3.5 Destruction of lesion of retina and choroid [17]
3.6 Diagnostic procedures on eye [18]
3.7 Other therapeutic procedures on eyelids; conjunctiva; cornea [19]
3.8 Other intraocular therapeutic procedures [20]
3.9 Other extraocular muscle and orbit therapeutic procedures [21]
4 Operations on the ear
4.1 Tympanoplasty [22]
4.2 Myringotomy [23]
4.3 Mastoidectomy [24]
4.4 Diagnostic procedures on ear [25]
4.5 Other therapeutic ear procedures [26]
5 Operations on the nose; mouth; and pharynx
5.1 Control of epistaxis [27]
5.2 Plastic procedures on nose [28]
5.3 Dental procedures [29]
5.4 Tonsillectomy and/or adenoidectomy [30]
5.4.1 Tonsillectomy without adenoidectomy
5.4.2 Tonsillectomy with adenoidectomy
5.4.3 Adenoidectomy without tonsillectomy
5.4.4 Control of hemorrhage after tonsillectomy or adenoidectomy
5.5 Diagnostic procedures on nose; mouth and pharynx [31]
5.5.1 Diagnostic procedures on nasal sinuses
5.5.2 Other diagnostic procedures on nose; mouth and pharynx
5.6 Other non-OR therapeutic procedures on nose; mouth and pharynx [32]
5.6.1 Non-OR procedures on nasal sinuses
5.6.2 Other non-OR procedures on nasal sinuses
5.7 Other OR therapeutic procedures on nose; mouth and pharynx [33]
5.7.1 OR procedures on nasal sinuses
5.7.2 Excision salivary gland
5.7.3 Repair cleft lip
5.7.4 Correction cleft palate
5.7.5 Incision and drainage of tonsils
5.7.6 Other procedures on nose; mouth and pharynx
6 Operations on the respiratory system
6.1 Tracheostomy; temporary and permanent [34]
6.2 Tracheoscopy and laryngoscopy with biopsy [35]
6.3 Lobectomy or pneumonectomy [36]
6.4 Diagnostic bronchoscopy and biopsy of bronchus [37]
6.4.1 Bronchoscopy without biopsy
6.4.2 Endoscopic biopsy of bronchus
6.4.3 Needle biopsy of lung
6.4.4 Endoscopic biopsy of lung
6.5 Other diagnostic procedures on lung and bronchus [38]
6.6 Incision of pleura; thoracentesis; chest drainage [39]
6.6.1 Closed chest drainage
6.6.2 Open chest drainage
6.6.3 Thoracentesis
6.7 Other diagnostic procedures of respiratory tract and mediastinum [40]
6.8 Other non-OR therapeutic procedures on respiratory system [41]
6.9 Other OR therapeutic procedures on respiratory system [42]
7 Operations on the cardiovascular system
7.1 Heart valve procedures [43]
7.2 Coronary artery bypass graft (CABG) [44]
7.2.1 Bypass of one coronary artery
7.2.2 Bypass of two coronary arteries
7.2.3 Bypass of three coronary arteries
7.2.4 Bypass of four coronary arteries
7.2.5 Other bypass of coronary arteries
7.3 Percutaneous transluminal coronary angioplasty (PTCA) [45]
7.3.1 Single vessel PTCA
7.3.2 Multiple vessel PTCA
7.4 Coronary thrombolysis [46]
7.5 Diagnostic cardiac catheterization; coronary arteriography [47]
7.5.1 Coronary arteriography
7.5.2 Cardiac catheterization
7.6 Insertion; revision; replacement; removal of cardiac pacemaker or cardioverter/defibrillator [48]
7.6.1 Insertion; revision; replacement; or removal of pacemaker leads
7.6.2 Insertion; revision; replacement; or removal of pacemaker device
7.6.3 Insertion; revision; replacement; or removal of cardioverter/defibrillator
7.7 Other OR heart procedures [49]
7.8 Extracorporeal circulation auxiliary to open heart procedures [50]
7.9 Endarterectomy; vessel of head and neck [51]
7.1 Aortic resection; replacement or anastomosis [52]
7.11 Varicose vein stripping; lower limb [53]
7.12 Other vascular catheterization; not heart [54]
7.12.1 Arterial catheterization
7.12.2 Umbilical vein catheterization
7.12.3 Venous catheterization
7.13 Peripheral vascular bypass [55]
7.14 Other vascular bypass and shunt; not heart [56]
7.15 Creation; revision and removal of arteriovenous fistula or vessel-to-vessel cannula for dialysis [57]
7.16 Hemodialysis [58]
7.17 Other OR procedures on vessels of head and neck [59]
7.18 Embolectomy and endarterectomy of lower limbs [60]
7.19 Other OR procedures on vessels other than head and neck [61]
7.19.1 Interrupt vena cava
7.19.2 Other OR procedures on blood vessels
7.2 Other diagnostic cardiovascular procedures [62]
7.21 Other non-OR therapeutic cardiovascular procedures [63]
8 Operations on the hemic and lymphatic system
8.1 Bone marrow transplant [64]
8.2 Bone marrow biopsy [65]
8.3 Procedures on spleen [66]
8.4 Other therapeutic procedures; hemic and lymphatic system [67]
8.4.1 Biopsy of lymphatic structure
8.4.2 Simple excision of lymphatic structure
8.4.3 Regional lymph node excision
8.4.4 Radical excision lymph nodes
8.4.5 Other hemic and lymphatic procedures
9 Operations on the digestive system
9.1 Therapeutic procedures on the esophagus
9.1.1 Injection or ligation of esophageal varices [68]
9.1.2 Esophageal dilatation [69]
9.2 Upper gastrointestinal endoscopy; biopsy [70]
9.2.1 Esophagoscopy
9.2.2 Gastroscopy
9.2.3 Esophagogastroduodenoscopy (EGD) without biopsy
9.2.4 Esophagogastroduodenoscopy (EGD) with biopsy
9.2.5 Endoscopic biopsy small intestine
9.3 Gastrotomy; temporary and permanent [71]
9.4 Colostomy; temporary and permanent [72]
9.5 Ileostomy and other enterostomy [73]
9.6 Gastroctomy; partial and total [74]
9.7 Small bowel resection [75]
9.8 Colonoscopy and biopsy [76]
9.8.1 Closed endoscopic biopsy of large intestine
9.8.2 Other endoscopy of large intestine
9.9 Proctoscopy and anorectal biopsy [77]
9.1 Colorectal resection [78]
9.10.1 Right hemicolectomy
9.10.2 Left hemicolectomy
9.10.3 Sigmoidectomy
9.10.4 Resection of rectum
9.10.5 Other colorectal resections
9.11 Local excision of large intestine lesion (not endoscopic) [79]
9.12 Appendectomy [80]
9.13 Hemorrhoid procedures [81]
9.14 Endoscopic retrograde cannulation of pancreas (ERCP) [82]
9.15 iopsy of liver [83]
9.16 Cholecystectomy and common duct exploration [84]
9.16.1 Open cholecystectomy
9.16.2 Laparoscopic cholecystectomy
9.16.3 Incision of bile duct
9.17 Inguinal and femoral hernia repair [85]
9.17.1 Unilateral repair inguinal hernia
9.17.2 Bilateral repair inguinal hernia
9.17.3 Femoral hernia repair
9.18 Other hernia repair [86]
9.18.1 Umbilical hernia repair
9.18.2 Incisional hernia repair
9.18.3 Other abdominal wall hernia repair
9.18.4 Other hernia repair
9.19 Laparoscopy [87]
9.2 Abdominal paracentesis [88]
9.21 Exploratory laparotomy [89]
9.22 Excision; lysis peritoneal adhesions [90]
9.23 Peritoneal dialysis [91]
9.24 Other bowel diagnostic procedures [92]
9.25 Other non-OR upper GI therapeutic procedures [93]
9.26 Other OR upper GI therapeutic procedures [94]
9.27 Other non-OR lower GI therapeutic procedures [95]
9.28 Other OR lower GI therapeutic procedures [96]
9.28.1 Closure of stoma of large intestine
9.28.2 Local excision of rectal lesion
9.28.3 Incision of perirectal tissue
9.28.4 Incision of perianal abscess
9.28.5 Incision/excision of anal fistula
9.28.6 Other lower GI procedures
9.29 Other gastrointestinal diagnostic procedures [97]
9.3 Other non-OR gastrointestinal therapeutic procedures [98]
9.31 Other OR gastrointestinal therapeutic procedures [99]
9.31.1 Radical pancreaticoduodenectomy
9.31.2 Incision abdominal wall
9.31.3 Excision or destruction of peritoneal tissue
9.31.4 Creation of cutaneousperitoneal fistula
9.31.5 Other gastrointestinal therapeutic procedures
10 Operations on the urinary system
10.1 Cystoscopy and other transurethral procedures
10.1.1 Endoscopy and endoscopic biopsy of the urinary tract [100]
10.1.2 Transurethral excision; drainage; or removal of urinary obstruction [101]
10.1.3 Ureteral catheterization [102]
10.2 Nephrotomy and nephrostomy [103]
10.3 Nephrectomy; partial or complete [104]
10.4 Kidney transplant [105]
10.5 Genitourinary incontinence procedures [106]
10.6 Extracorporeal lithotripsy; urinary [107]
10.7 Indwelling catheter [108]
10.8 Procedures on the urethra [109]
10.9 Other diagnostic procedures of urinary tract [110]
10.1 Other non-OR therapeutic procedures of urinary tract [111]
10.11 Other OR therapeutic procedures of urinary tract [112]
11 Operations on the male genital organs
11.1 Transurethral resection of prostate (TURP) [113]
11.2 Open prostatectomy [114]
11.3 Circumcision [115]
11.4 Diagnostic procedures; male genital [116]
11.5 Other non-OR therapeutic procedures; male genital [117]
11.6 Other OR therapeutic procedures; male genital [118]
11.6.1 Unilateral orchiectomy
11.6.2 Bilateral orchiectomy
11.6.3 Orchiopexy
11.6.4 Insert or replace penile prosthesis
11.6.5 Other male genital procedures
12 Operations on the female genital organs
12.1 Oophorectomy; unilateral and bilateral [119]
12.2 Other operations on ovary [120]
12.3 Ligation of fallopian tubes [121]
12.4 Other operations on fallopian tubes [123]
12.5 Hysterectomy; abdominal and vaginal [124]
12.5.1 Total abdominal hysterectomy
12.5.2 Vaginal hysterectomy
12.5.3 Other hysterectomy
12.6 Other excision of cervix and uterus [125]
12.7 Abortion (termination of pregnancy) [126]
12.8 Dilatation and curettage (D&C); aspiration after delivery or abortion [127]
12.9 Diagnostic dilatation and curettage (D&C) [128]
12.10 Repair of cystocele and rectocele; obliteration of vaginal vault [129]
12.11 Other diagnostic procedures; female organs [130]
12.12 Other non-OR therapeutic procedures; female organs [131]
12.13 Other OR therapeutic procedures; female organs [132]
13 Obstetrical procedures
13.1 Episiotomy [133]
13.2 Cesarean section [134]
13.3 Forceps; vacuum; and breech delivery [135]
13.3.1 Low forceps delivery with episiotomy
13.3.2 Vacuum extraction with episiotomy
13.3.3 Other vacuum extraction
13.3.4 Other forceps or breech delivery
13.4 Artificial rupture of membranes to assist delivery [136]
13.4.1 Induction of labor by artificial rupture of membranes
13.4.2 Other artificial rupture of membranes
13.5 Other procedures to assist delivery [137]
13.5.1 Medical induction of labor
13.5.2 Other manually assisted labor
13.5.3 Other delivery procedures
13.6 Diagnostic amniocentesis [138]
13.7 Fetal monitoring [139]
13.8 Repair of current obstetric laceration [140]
13.8.1 Repair of obstetric laceration of uterus or cervix
13.8.2 Repair of obstetric laceration of bladder or urethra
13.8.3 Repair of obstetric laceration of rectum or sphincter
13.8.4 Repair of other obstetric laceration
13.9 Other therapeutic obstetrical procedures [141]
13.1 Removal of ectopic pregnancy [122]
14 Operations on the musculoskeletal system
14.1 Partial excision bone [142]
14.2 Bunionectomy or repair of toe deformities [143]
14.3 Treatment of fracture or dislocation
14.3.1 Treatment; facial fracture or dislocation [144]
14.3.2 Treatment; fracture or dislocation of radius and ulna [145]
14.3.3 Treatment; fracture or dislocation of hip and femur [146]
14.3.4 Treatment; fracture or dislocation of lower extremity (other than hip or femur) [147]
14.3.5 Other fracture and dislocation procedure [148]
14.4 Arthroscopy [149]
14.4.1 Arthroscopy of knee
14.4.2 Other arthroscopy
14.5 Division of joint capsule; ligament or cartilage [150]
14.6 Excision of semilunar cartilage of knee [151]
14.7 Arthroplasty
14.7.1 Arthroplasty knee [152]
14.7.2 Hip replacement; total and partial [153]
14.7.3 Arthroplasty other than hip or knee [154]
14.8 Arthrocentesis [155]
14.9 Injections and aspirations of muscles; tendons; bursa; joints and soft tissue [156]
14.1 Amputation of lower extremity [157]
14.10.1 Amputation of toe
14.10.2 Amputation through foot
14.10.3 Below knee amputation
14.10.4 Above knee amputation
14.10.5 Other lower extremity amputation
14.11 Spinal fusion [158]
14.12 Other diagnostic procedures on musculoskeletal system [159]
14.13 Other therapeutic procedures on muscles and tendons [160]
14.13.1 Rotator cuff repair
14.13.2 Other suture of muscle; tendon and fascia
14.13.3 Other muscle and tendon procedures
14.14 Other OR therapeutic procedures on bone [161]
14.15 Other OR therapeutic procedures on joints [162]
14.16 Other non-OR therapeutic procedures on musculoskeletal system [163]
14.17 Other OR therapeutic procedures on musculoskeletal system [164]
15 Operations on the integumentary system
15.1 Procedures on the breast
15.1.1 Breast biopsy and other diagnostic procedures on breast [165]
15.1.2 Lumpectomy; quadrantectomy of breast [166]
15.1.3 Mastectomy [167]
15.2 Incision and drainage; skin and subcutaneous tissue [168]
15.3 Debridement of wound; infection or burn [169]
15.4 Excision of skin lesion [170]
15.5 Suture of skin and subcutaneous tissue [171]
15.6 Skin graft [172]
15.7 Other diagnostic procedures on skin and subcutaneous tissue [173]
15.8 Other non-OR therapeutic procedures on skin and breast [174]
15.8.1 Aspiration of skin and subcutaneous tissue
15.8.2 Insertion of totally implantable vascular access device
15.8.3 Debridement of nail
15.8.4 Other skin and breast procedures; non-OR
15.9 Other OR therapeutic procedures on skin and breast [175]
15.9.1 Bilateral reduction mammoplasty
15.9.2 Excision pilonidal cyst or sinus
15.9.3 Other skin and breast procedures; OR
16 Miscellaneous diagnostic and therapeutic procedures
16.1 Other organ transplantation [176]
16.2 Computerized axial tomography (CT) scan
16.2.1 Computerized axial tomography (CT) scan head [177]
16.2.2 CT scan chest [178]
16.2.3 CT scan abdomen [179]
16.2.4 Other CT scan [180]
16.3 Myelogram [181]
16.4 Mammography [182]
16.5 Routine chest X-ray [183]
16.6 Intraoperative cholangiogram [184]
16.7 Upper gastrointestinal X-ray [185]
16.8 Lower gastrointestinal X-ray [186]
16.9 Intravenous pyelogram [187]
16.1 Cerebral arteriogram [188]
16.11 Contrast aortogram [189]
16.12 Contrast arteriogram of femoral and lower extremity arteries [190]
16.13 Arterio or venogram (not heart and head) [191]
16.14 Diagnostic ultrasound
16.14.1 Diagnostic ultrasound of head and neck [192]
16.14.2 Diagnostic ultrasound of heart (echocardiogram) [193]
16.14.3 Diagnostic ultrasound of gastrointestinal tract [194]
16.14.4 Diagnostic ultrasound of urinary tract [195]
16.14.5 Diagnostic ultrasound of abdomen or retroperitoneum [196]
16.14.6 Other diagnostic ultrasound [197]
16.15 Magnetic resonance imaging [198]
16.16 Electroencephalogram (EEG) [199]
16.17 Nonoperative urinary system measurements [200]
16.18 Cardiac stress tests [201]
16.19 Electrocardiogram [202]
16.2 Electrographic cardiac monitoring [203]
16.21 Swan-Ganz catheterization for monitoring [204]
16.22 Arterial blood gases [205]
16.23 Microscopic examination (bacterial smear; culture; toxicology) [206]
16.24 Radioisotope scan
16.24.1 Radioisotope bone scan [207]
16.24.2 Radioisotope pulmonary scan [208]
16.24.3 Radioisotope scan and function studies [209]
16.24.4 Other radioisotope scan [210]
16.25 Therapeutic radiology [211]
16.26 Physical therapy
16.26.1 Diagnostic physical therapy [212]
16.26.2 Physical therapy exercises; manipulation; and other procedures [213]
16.26.3 Traction; splints; and other wound care [214]
16.26.4 Other physical therapy and rehabilitation [215]
16.27 Respiratory intubation and mechanical ventilation [216]
16.27.1 Endotracheal intubation
16.27.2 Continuous mechanical ventilation less than 96 hours
16.27.3 Continuous mechanical ventilation 96 hours or more
16.27.4 Other respiratory intubation and mechanical ventilation
16.28 Other respiratory therapy [217]
16.28.1 Respiratory medication administered by nebulizer
16.28.2 Oxygen therapy
16.28.3 Other respiratory treatments
16.29 Psychological and psychiatric evaluation and therapy [218]
16.29.1 Psychiatric drug therapy
16.29.2 Electroconvulsive therapy
16.29.3 Individual psychotherapy
16.29.4 Other psychological and psychiatric evaluation and therapy
16.3 Alcohol and drug rehabilitation/ detoxification [219]
16.30.1 Alcohol rehabilitation
16.30.2 Alcohol detoxification
16.30.3 Alcohol rehabilitation and detoxification
16.30.4 Drug rehabilitation
16.30.5 Drug detoxification
16.30.6 Drug rehabilitation and detoxification
16.30.7 Alcohol and drug rehabilitation
16.30.8 Alcohol and drug detoxification
16.30.9 Alcohol and drug rehabilitation and detoxification
16.31 Ophthalmologic and otologic diagnosis and treatment [220]
16.32 Nasogastric tube [221]
16.33 Blood transfusion [222]
16.34 Enteral and parenteral nutrition [223]
16.35 Cancer chemotherapy [224]
16.36 Conversion of cardiac rhythm [225]
16.37 Other diagnostic radiology and related techniques [226]
16.38 Other diagnostic procedures (interview; evaluation; consultation) [227]
16.39 Prophylactic vaccinations and inoculations [228]
16.4 Nonoperative removal of foreign body [229]
16.41 Extracorporeal shock wave lithotripsy; other than urinary [230]
16.42 Other therapeutic procedures [231]
16.42.1 Inject antibiotic
16.42.2 Other phototherapy (newborn)
16.42.3 Injection of Thrombolytic Agent (not coronary)
16.42.4 Other therapies
Table A. Mapping CCS diagnosis categories into ICD-9-CM chapters

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<th>CCS diagnosis numbers</th>
<th>ICD-9-CM diagnosis chapters</th>
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<td>11 - Complications of pregnancy, childbirth, and the puerperium</td>
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</table>

Note: CCS is Clinical Classifications for Health Policy Research. ICD-9-CM refers to the *International Classification of Diseases, 9th Revision, Clinical Modification.*
Table B. Mapping CCS procedure categories into ICD-9-CM chapters

<table>
<thead>
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<th>CCS procedure numbers</th>
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<td>176-231</td>
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</table>

Note: CCS is Clinical Classifications for Health Policy Research.  ICD-9-CM is International Classification of Diseases, 9th Revision, Clinical Modification.