



# **Pediatric Quality Indicators (PDI) Log of ICD-9-CM and DRG Coding Updates and Revisions to PDI Documentation and Software**

**Prepared for:**

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## Log of ICD-9-CM and DRG Coding Updates and Revisions to PDI Documentation and Software

The following table summarizes the revisions made to the Pediatric Quality Indicators (PDI) software, software documentation and the technical specification documents, since the original release of these documents in February 2006. It also reflects changes to indicator specifications based on updates to ICD-9-CM and MS-DRG codes through Fiscal Year 2012 (effective October 1, 2011) and incorporates coding updates that were implemented in all versions of the PDI software (both SAS and Windows).

The table lists the version and revision number, the date the revision was made, the component(s) affected by the change and a short summary of the changes that were made. The nature of the change is categorized into three types:

- 1) fiscal year (FY) coding change: occurs because of coding changes to the most recent fiscal year codes dictated by the Centers for Medicare and Medicaid Services,
- 2) specification/calculation change: may impact the measure result that is something other than the most recent fiscal year coding change, and
- 3) software/documentation change: alteration to the software code to run the results as the measure is specified in the most effective manner or to the documentation to clarify the measure intent or functionality.

For convenience and ease of use, the changes are listed in reverse chronological order with the most recent changes appearing first in the table. Please note that changes prior to version 4.4 are not classified according to the currently defined types of changes. In addition, each type of change has varied shading to enhance readability. All changes noted below have been incorporated into the software programming code, software documentation and the PDI technical specifications. With this software update, the PDI software now incorporates ICD-9-CM and DRG codes valid from October 1, 1994 through September 30, 2012.

Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	All Area PDI	Specification/Calculation	Updated data are used for population estimates (i.e., through 2012). The population data are used to calculate the denominator for the area-level QI. The comparative data tables have been updated using Version 4.4 of the software. Because the risk adjustment models and reference population have not changed for Version 4.4, the Risk Adjustment Coefficients remain as they were in Version 4.3.

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	Accidental Puncture or Laceration Rate (PDI 1)	FY Coding Change	Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC

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V4.4	March 2012	Pressure Ulcer Rate (PDI 2)	FY Coding Change	<p>1. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code:            0221 INSERT/REPLACE EVD            0222 INTRCRAN VENT SHUNT/ANAS            1267 INSERT AQUEOUS DRAIN DEV            1753 PERC ATHER EXTRACRAN VSL            1754 PERC ATHER INTRACRAN VSL            1755 TRANSLUM COR ATHERECTOMY            1756 ATHER OTH NON-VOR VESSEL            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE            3509 ENDOVAS REPL UNS HRT VLV            3826 INSRT PRSR SNSR W/O LEAD            3977 TEMP ENDOVSC OCCLS VESSL            3978 ENDOVAS IMPLN GRFT AORTA            4382 LAP VERTICAL GASTRECTOMY            6824 UTERINE ART EMB W COILS            6825 UTERINE ART EMB W/O COIL</p> <p>Remove code:            0058 INS INTRA-ANSM PRES MNTR            0059 INTRAVASC MSMNT COR ART            0067 INTRAVAS MSMNT THORC ART            0068 INTRAVAS MSMT PERIPH ART            0069 INTRAVS MSMT VES NEC/NOS</p>

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				2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC
V4.4	March 2012	Volume of Foreign Body Left During Procedure (PDI 3)	FY Coding Change	Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC

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V4.4	March 2012	Iatrogenic Pneumothorax Rate (PDI 5)	FY Coding Change	<p>1. Add denominator exclusions for cardiac procedure</p> <p>Add code:            3506 TRNSAPCL REP AORTC VALVE            3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code:            016 AUTOLOGOUS BONE MARROW TRANSPLANT W            CC/MCC            017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O            CC/MCC            570 SKIN DEBRIDEMENT W MCC            571 SKIN DEBRIDEMENT W CC            572 SKIN DEBRIDEMENT W/O CC/MCC</p>
V4.4	March 2012	Pediatric Heart Surgery Mortality Rate (PDI 6)	FY Coding Change	<p>1. Add denominator inclusions for procedures to repair congenital heart defect</p> <p>Add code:            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusions for diagnosis of congenital heart disease</p> <p>Add code:            74731 PULMON ART COARCT/ATRES            74732 PULMONARY AV MALFORMATN            74739 OTH ANOM PUL ARTERY/CIRC</p>

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V4.4	March 2012	Pediatric Heart Surgery Volume (PDI 7)	FY Coding Change	<p>1. Add numerator inclusions for procedures to repair congenital heart defect</p> <p>Add code:            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add numerator inclusion for diagnosis of congenital heart disease</p> <p>Add code:            74731 PULMON ART COARCT/ATRES            74732 PULMONARY AV MALFORMATN            74739 OTH ANOM PUL ARTERY/CIRC</p>



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V4.4	March 2012	Postoperative Hemorrhage or Hematoma Rate (PDI 8)	FY Coding Change	<p>1. Add stratification high risk inclusion codes for coagulopathies to high risk group</p> <p>Add code:            28652 ACQUIRED HEMOPHILIA            28653 ANTIPHOSPHOLIPID W HEMOR            28659 OT HEM D/T CIRC ANTICOAG</p> <p>2. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code:            0221 INSERT/REPLACE EVD            0222 INTRCRAN VENT SHUNT/ANAS            1267 INSERT AQUEOUS DRAIN DEV            1753 PERC ATHER EXTRACRAN VSL            1754 PERC ATHER INTRACRAN VSL            1755 TRANSLUM COR ATHERECTOMY            1756 ATHER OTH NON-VOR VESSEL            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE            3509 ENDOVAS REPL UNS HRT VLV            3826 INSRT PRSR SNSR W/O LEAD            3977 TEMP ENDOVSC OCCLS VESSL            3978 ENDOVAS IMPLN GRFT AORTA            4382 LAP VERTICAL GASTRECTOMY            6824 UTERINE ART EMB W COILS            6825 UTERINE ART EMB W/O COIL</p>

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				<p>Remove code:            0058 INS INTRA-ANSM PRES MNTR            0059 INTRAVASC MSMNT COR ART            0067 INTRAVAS MSMNT THORC ART            0068 INTRAVAS MSMT PERIPH ART            0069 INTRAVS MSMT VES NEC/NOS</p> <p>3. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code:            016 AUTOLOGOUS BONE MARROW TRANSPLANT W            CC/MCC            017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O            CC/MCC            570 SKIN DEBRIDEMENT W MCC            571 SKIN DEBRIDEMENT W CC            572 SKIN DEBRIDEMENT W/O CC/MCC</p>

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V4.4	March 2012	Postoperative Respiratory Failure Rate (PDI 9)	FY Coding Change	<p>1. Add numerator inclusions for diagnosis of acute respiratory failure</p> <p>Add code:            51851 AC RESP FLR FOL TRMA/SRG            51853 AC/CHR RSP FLR FOL TR/SG</p> <p>2. Remove numerator inclusions for diagnosis of acute respiratory failure</p> <p>Remove code:            51881 ACUTE RESPIRATORY FAILURE            51884 ACUTE &amp; CHRONC RESP FAIL</p> <p>3. Add denominator exclusions for diagnosis of degenerative neurological disorder</p> <p>Add code:            31081 PSEUDOBULBAR AFFECT            31089 NONPSYCH MNTL DISORD NEC            3316 CORTICOBASAL DEGENERATION            34882 BRAIN DEATH</p> <p>4. Add denominator exclusions for diagnosis of neuromuscular disorders</p> <p>Add code:            35830 LAMBERT-EATON SYND NOS            35831 LAMBERT-EATON SYND NEOPL            35839 LAMBERT-EATON SYN OT DIS</p>

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				<p>5. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code:            0221 INSERT/REPLACE EVD            0222 INTRCRAN VENT SHUNT/ANAS            1267 INSERT AQUEOUS DRAIN DEV            1753 PERC ATHER EXTRACRAN VSL            1754 PERC ATHER INTRACRAN VSL            1755 TRANSLUM COR ATHERECTOMY            1756 ATHER OTH NON-VOR VESSEL            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE            3509 ENDOVAS REPL UNS HRT VLV            3826 INSRT PRSR SNSR W/O LEAD            3977 TEMP ENDOVSC OCCLS VESSL            3978 ENDOVAS IMPLN GRFT AORTA            4382 LAP VERTICAL GASTRECTOMY            6824 UTERINE ART EMB W COILS            6825 UTERINE ART EMB W/O COIL</p> <p>Remove code:            0058 INS INTRA-ANSM PRES MNTR            0059 INTRAVASC MSMNT COR ART            0067 INTRAVAS MSMNT THORC ART            0068 INTRAVAS MSMT PERIPH ART            0069 INTRAVS MSMT VES NEC/NOS</p>

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				6. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC

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V4.4	March 2012	Postoperative Sepsis Rate (PDI 10)	FY Coding Change	<p>1. Add denominator exclusions for diagnosis of infection (PDI Appendix H)</p> <p>Add code:            04141 SHIGA TXN-PRODUCE E.COLI            04142 SHGA TXN PROD E.COLI NEC            04143 SHGA TXN PROD E.COLI NOS            04149 E.COLI INFECTION NEC/NOS            53901 INT D/T GASTRC BAND PROC            53981 INF D/T OT BARIATRC PROC            59681 INFECTION OF CYSTOSTOMY            99931 OTH/UNS INF-CEN VEN CATH            99932 BLOOD INF DT CEN VEN CTH            99933 LCL INF DT CEN VEN CTH            99934 AC INF FOL TRANS,INF BLD</p> <p>2. Add code for high risk immunocompromised states (PDI Appendix F)</p> <p>Add code:            996.88 COMP TP ORGAN-STEM CELL</p> <p>3. Add numerator inclusions for diagnosis of sepsis</p> <p>Add code:            99800 POSTOPERATIVE SHOCK, NOS            99802 POSTOP SHOCK, SEPTIC</p> <p>4. Add code for intermediate risk immunocompromised states (PDI Appendix G):</p> <p>Add code:            573.5 HEPATOPULMONARY SYNDROME</p>

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				<p>5. Remove numerator inclusion for diagnosis of sepsis</p> <p>Remove code: 998.0 POSTOPERATIVE SHOCK, NOS</p> <p>6. Add denominator inclusions operating room procedure codes (PDI Appendix A)</p> <p>Add code: 0221 INSERT/REPLACE EVD 0222 INTRCRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS 6825 UTERINE ART EMB W/O COIL</p> <p>Remove code: 0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS</p>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
				7. Add denominator and stratification inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC



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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	Postoperative Wound Dehiscence Rate (PDI 11)	FY Coding Change	<p>1. Add denominator inclusion for abdominopelvic procedures</p> <p>Add code: 4382 LAP VERTICAL GASTRECTOMY</p> <p>2. Add denominator exclusion for diagnosis of high-risk immunocompromised state (PDI Appendix F)</p> <p>Add code: 28411 ANTIN CHEMOP INDCD PANCYOT 28412 OTH DRG INDCD PANCYTOPNA 28419 OTHER PANCYTOPENIA 99688 COMP TP ORGAN-STEM CELL</p> <p>3. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G)</p> <p>Add code: 5735 HEPATOPULMONARY SYNDROME</p> <p>4. Add stratification inclusion for surgical MS-DRGs</p> <p>Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	Central Venous Catheter- Related Blood Stream Infection Rate (PDI 12)	FY Coding Change	<p>1. Add numerator definition for diagnosis of central venous catheter-related blood stream infections diagnosed on or after October 1, 2011.  Add code:  99931 OTH/UNS INF-CEN VEN CATH  99932 BLOOD INF DT CEN VEN CTH</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code:  016 AUTOLOGOUS BONE MARROW TRANSPLANT W  CC/MCC  017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O  CC/MCC  570 SKIN DEBRIDEMENT W MCC  571 SKIN DEBRIDEMENT W CC  572 SKIN DEBRIDEMENT W/O CC/MCC</p> <p>3. Add denominator exclusion for diagnosis of high- risk immunocompromised state (PDI Appendix F)  Add code:  28411 ANTIN CHEMOP INDCD PANCYT  28412 OTH DRG INDCD PANCYTOPNA  28419 OTHER PANCYTOPENIA  99688 COMP TP ORGAN-STEM CELL</p> <p>4. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G)  Add code:  5735 HEPATOPULMONARY SYNDROME</p>

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V4.4	March 2012	Transfusion Reaction Volume (PDI 13)	FY Coding Change	Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)  Add code: 016 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC
V4.4	March 2012	Asthma Admission Rate (PDI 14)	FY Coding Change	Add denominator exclusion code for cystic fibrosis and anomalies of the respiratory system  Add code: 51661 NEUROEND CELL HYPRPL INF 51662 PULM INTERSTITL GLYCOGEN 51663 SURFACTANT MUTATION LUNG 51664 ALV CAP DYSP W VN MISALN 51669 OTH INTRST LUNG DIS CHLD
V4.4	March 2012	Urinary Tract Infection Admission Rate (PDI 18)	FY Coding Change	1. Add denominator exclusion for diagnosis of high- risk immunocompromised state (PDI Appendix F)  Add code for high-risk: 28411 ANTIN CHEMOP INDCD PANCYT 28412 OTH DRG INDCD PANCYTOPNA 28419 OTHER PANCYTOPENIA 99688 COMP TP ORGAN-STEM CELL  2. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G)  Add code for intermediate risk: 5735 HEPATOPULMONARY SYNDROME

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	Neonatal Iatrogenic Pneumothorax Rate (NQI 1)	FY Coding Change	<p>1. Add denominator exclusion code for cardiac procedure</p> <p>Add code:            3506 TRNSAPCL REP AORTC VALVE            3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code:            016 AUTOLOGOUS BONE MARROW TRANSPLANT W            CC/MCC            017 AUTOLOGOUS BONE MARROW TRANSPLANT W/O            CC/MCC            570 SKIN DEBRIDEMENT W MCC            571 SKIN DEBRIDEMENT W CC            572 SKIN DEBRIDEMENT W/O CC/MCC</p>

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V4.4	March 2012	Neonatal Blood Stream Infection Rate (NQI 3)	FY Coding Change	<p>1. Add denominator exclusions for diagnosis of infection (PDI Appendix H)</p> <p>Add code:            04141 SHIGA TXN-PRODUCE E.COLI            04142 SHGA TXN PROD E.COLI NEC            04143 SHGA TXN PROD E.COLI NOS            04149 E.COLI INFECTION NEC/NOS            53901 INT D/T GASTRC BAND PROC            53981 INF D/T OT BARIATRC PROC            59681 INFECTION OF CYSTOSTOMY            99931 OTH/UNS INF-CEN VEN CATH            99932 BLOOD INF DT CEN VEN CTH            99933 LCL INF DT CEN VEN CTH            99934 AC INF FOL TRANS,INF BLD</p> <p>2. Add denominator exclusions for diagnosis of sepsis</p> <p>Add code:            99800 POSTOPERATIVE SHOCK, NOS            99802 SHOCK FOLLOW TRAUMA OR SURGERY, SEPTIC</p> <p>3. Remove denominator exclusion for diagnosis of sepsis</p> <p>Remove code:            9980 POSTOPERATIVE SHOCK</p>

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				<p>4. Add/remove denominator inclusion for Operating Room Procedure Codes (PDI Appendix A)</p> <p>Add code:            0221 INSERT/REPLACE EVD            0222 INTRCRAN VENT SHUNT/ANAS            1267 INSERT AQUEOUS DRAIN DEV            1753 PERC ATHER EXTRACRAN VSL            1754 PERC ATHER INTRACRAN VSL            1755 TRANSLUM COR ATHERECTOMY            1756 ATHER OTH NON-VOR VESSEL            3500 CLOSED VALVOTOMY NOS            3505 ENDOVAS REPL AORTC VALVE            3506 TRNSAPCL REP AORTC VALVE            3507 ENDOVAS REPL PULM VALVE            3508 TRNSAPCL REPL PULM VALVE            3509 ENDOVAS REPL UNS HRT VLV            3826 INSRT PRSR SNSR W/O LEAD            3977 TEMP ENDOVSC OCCLS VESSL            3978 ENDOVAS IMPLN GRFT AORTA            4382 LAP VERTICAL GASTRECTOMY            6824 UTERINE ART EMB W COILS</p> <p>Remove code:            0058 INS INTRA-ANSM PRES MNTR            0059 INTRAVASC MSMNT COR ART            0067 INTRAVAS MSMNT THORC ART            0068 INTRAVAS MSMT PERIPH ART            0069 INTRAVS MSMT VES NEC/NOS            6825 UTERINE ART EMB W/O COIL</p>

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V4.4	March 2012	Software	Software/ Documentaion	Revised the data step of creating permanent data set containing all records which are deleted from the analysis because key variable values having missing data
V4.4	March 2012	Software	Software/ Documentaion	PDI 12: Modified inclusion logic to include time dependent logic to discharges before October 1, 2011 and after October 1, 2011 for central line-associated blood stream infection diagnosis codes
V4.4	March 2012	Software	Software/ Documentaion	WinQI v4.3 and v4.4 do not check for a possible issue with user-defined composite weighting – users must set weights for all possible individual indicators, including zero weights for indicators that are not to be included in the composite. This requirement has been included in the software documentation.
V4.4	March 2012	Software	Software/ Documentaion	PDI 09: Modified inclusion logic to include time dependent logic to discharges before October 1, 2011 and after October 1, 2011 for acute Respiratory Failure diagnosis codes
V4.4	March 2012	Software	Software/ Documentaion	Both SAS and WinQI v4.3 were improperly truncating the (Observed rate)/(Expected rate) ratio and associated upper confidence bound (95%) to be <= 1.0 in cases where a stratification of the rates was being implemented. This issue was fixed in both SAS and WinQI so that this truncation only applies in cases where no stratification is being performed.
V4.4	March 2012	Software	Software/ Documentaion	SAS and WinQI v4.4 remain 32-bit applications developed on a Windows XP operating system. Some limited testing has been performed to ensure that these applications will run successfully under a 64-bit, Windows 7 environment. One additional installation requirement related to administrator rights has been included in the software documentation.
V4.4	March 2012	Software	Software/ Documentaion	WinQI v4.3 was missing the PRPED5D code set and codes 7454 and 7455. This issue was fixed in v4.4 of WinQI and affects PDI 06 only.
V4.4	March 2012	Software	Software/ Documentaion	The WinQI v4.3 patient-level report showed incorrect POA exclusions in some cases. This issue was fixed in v4.4 of WinQI.

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V4.4	March 2012	Software	Software/ Documentaion	WinQI v4.3 was not properly calculating quarterly rates when requested by the user. This issue was fixed in v4.4 of WinQI.
V4.4	March 2012	Software	Software/ Documentaion	SAS v4.3 did not properly handle stratifications where the user requested a two-way stratification that overlapped with a one-way stratification (e.g., Age-by-Gender at the same time as Age by itself). This issue was in fixed in v4.4 of SAS.
V4.4	March 2012	Software	Software/ Documentaion	Sort routine was (PROC SORT) was introduced to PDSASP3 and PDSASA3 programs before merging all the indicators together to sorting problems in SAS whenever user selects multiple stata (e.g. stratifies by age, gender, and age by gender)
V4.4	March 2012	Software	Software/ Documentaion	WinQI v4.3 did not properly implement a user selection of years later than 2009 during area report generation. Users were unable to select the year 2010 or 2011 to derive the denominator for area indicators. This issue, which affected all area-level QI, was fixed in v4.4 of WinQI.
V4.4	March 2012	Software	Software/ Documentaion	The files of shrinkage factors (MSXPDP43.TXT) which were applied to the risk-adjusted were revised using re-calculated signal variance.
V4.4	March 2012	Software	Software/ Documentaion	PDI 09: Modified the order of denominator exclusion/inclusions and numerator flags.
V4.4	March 2012	Software	Software/ Documentaion	PDSASA2.SAS program was revised to include denominator adjustment when the population count for certain combination of strata was zero.
V4.4	March 2012	Software	Software/ Documentaion	Minor SAS versus WinQI coding differences were corrected in the implementation of the technical specifications (e.g., differences in the order in which statements were evaluated) for PDI 01 and PDI 02.
V4.4	March 2012	Software	Software/ Documentaion	PDI 15 (Diabetes Short-term Complications Admission Rate) can be calculated using the number of diabetics in the state as the denominator, stratified by age.



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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.4	March 2012	Software	Software/ Documentaion	Changes were made to the SAS and WinQI software to implement a re-estimation of the signal variance in order to correct the fact that the smoothed rates in v4.3 of the software were constant for all providers for four indicators (IQI-11, IQI-14, NQI-01 and PSI-08).
V4.3	April 2011	Iatrogenic Pneumothorax (PDI 5) Denominator (Exclusion, thoracic procedure)	Coding	Add code: 3227 BRNC THRMPLSTY, ABLT MSCL
V4.3	April 2011	Iatrogenic Pneumothorax (PDI 5) Denominator (Exclusion, cardiac procedure)	Coding	Add code: 3597 PERC MRTL VLV REPR W IMP 3737 EXC/DEST HRT LES, THRSPC
V4.3	April 2011	Postoperative Hemorrhage or Hematoma (PDI 8)	Coding	Add to risk category for diagnosis of coagulopathy 28741 POSTTRANSFUSION PURPURA
V4.3	April 2011	Transfusion Reaction (PDI 13) Numerator (Inclusion, transfusion reaction)	Coding	Add code: 99960 ABO INCOMPAT REACT NOS 99961 ABO INCOMP/HTR NEC 99962 ABO INCOMPAT/ACUTE HTR 99963 ABO INCOMPAT/DELAY HTR 99969 ABO INCOMPAT REACTN NEC 99970 RH INCOMPAT REACTION NOS 99971 RH INCOMP/HTR NEC 99972 RH INCOMPAT/ACUTE HTR 99973 RH INCOMPAT/DELAY HTR 99974 RH INCOMPAT REACTION NEC

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V4.3	April 2011	AHRQ Procedure Class	Coding	Add to procedure class: Class 1: 1771 NON-CORONARY IFVA Class 2: 0060 INS D-E STNT SUP FEM ART 3897 CV CATH PLCMT W GUIDANCE Class 4: 0120 IMP/REPL BRAIN PULSE GEN 0129 REM BRAIN PULSE GENERATR 3227 BRNC THRMPLSTY ABLT MSCL 3597 PERC MTRL VLV REPR W IMP 3737 EXC/DEST HRT LES THRSPC 3981 IMP CRTD SINUS STMTOTL 3982 IMP/REP CRTD SINUS LEAD 3983 IMP/RED CRTD SINUS GNRTR 3984 REV CRTD SINUS STM LEADS 3985 REV CRTD SINUS PULSE GEN 3986 REM CRTD SINUS STM TOTL 3987 REM CRTD SINUS STM LEAD 3988 REM CRTD SINUS PULSE GEN 3989 OTH CARTD BODY/SINUS OP 8188 RVRS TOTL SHLDR REPLACMT 8494 INS STRN FIX W RGD PLATE 8555 FAT GRAFT TO BREST 8687 FAT GRFT SKIN/SUBQ TISS 8690 EXT FAT FOR GRFT/BANKING

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.3	April 2011	Major Operating Room Procedure	Coding	Add codes: 0120 IMP/REPL BRAIN PULSE GEN 0129 REM BRAIN PULSE GENERATR 3227 BRNC THRMPLSTY ABLT MSCL 3597 PERC MTRL VLV REPR W IMP 3737 EXC/DEST HRT LES THRSPC 3981 IMP CRTD SINUS STMTOTL 3982 IMP/REP CRTD SINUS LEAD 3983 IMP/REP CRTD SINUS GNRTR 3984 REV CRTD SIMUS STM LEADS 3985 REV CRTD SINUS PULSE GEN 3986 REM CRTF SINUS STM TOTL 3987 REM CRTD SINUS STM LEAD 3988 REM CRTD SINUS PULSE GEN 3989 OTH CARTD BODY/SINUS OP 8188 RVRS TOTL SHLDR REPLACMT 8494 INS STRN FIX W RGD PLATE 8555 FAT GRAFT TO BREAST 8587 FAT GRFT SKIN/SUBQ TISS 8690 EXT FAT FOR GRFT/BANKING

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.3	April 2011	AHRQ Clinical Classification Software	Coding	Add codes: CCS 58: 27501 HEREDIT HEMOCHROMATOSIS 27502 HEMOCHROMATOS-RBC TRANS 27503 HEMOCHROMATOSIS NEC 27509 DISORD IRON METABLISM NEC 27803 OBESITY HYPOVENTS SYND V8541 BMI 40.0-44.9, ADULT V8542 BMI 45.0-49.9, ADULT V8543 BMI 50.0-59.9, ADULT V8544 BMI 60-69.9, ADULT V8545 BMI 70 AND OVER, ADULT CCS 62: 28749 SEC THROMBOCYTPENIA NEC CCS 83: 78033 POST TRAUMATIC SEIZURES CCS 95: 78452 FLNCY DSORD COND ELSEWHR 79951 ATTN/CONCENTRATE DEFICIT 79952 COG COMMUNICATE DEFICIT 79953 VISUOSPATIAL DEFICIT 79954 PSYCHOMOTOR DEFICIT 79955 FRONTAL LOBE DEFICIT 79959 COGNITION SIGN/SYMPT NEC CCS 133: 78630 HEMOPTYSIS NOS 78631 AC IDIO PUL HEMRG INFANT 78639 HEMOPTYSIS NEC

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
				CCS 213: V1365 HX-CONG MALFORM-HEART CCS 214: V1367 HX-CONG MALFORM-DIGEST CCS 215: 75231 AGENESIS OF UTERUS 75232 HYPOPLASIA OF UTERUS 75233 UNICORNUATE UTERUS 75234 BICORNUATE UTERUS 75235 SEPTATE UTERUS 75236 ARCUATE UTERUS 75239 ANOMALIES OF UTERUS NEC 75243 CERVIAL AGENESIS 75244 CERVICAL DUPLICATION 75245 VAGINAL AGENESIS 75246 TRANSV VAGINAL SEPTUM 75247 LONGITUD VAGINAL SEPTUM V1362 HX-CONG MALFORM-CU CCS 216: V1363 HX-CONG MALFORM-NERVOUS CCS 217: V1364 HX-CONG MALFORM-EYE,FACE V1366 HX-CONG MALFORM-RESP SYS V1368 HX-CONG MALFORM-SKIN,MS CCS 654: 31535 CHLDHD ONSET FLNCY DISOR
V4.3	April 2011	Surgical MS-DRG	Coding	Add to numerator inclusion for Surgical D RG 014 ALLOGENIC BONE MARROW TRANSPLANT 015 AUTOLOGOUS BONE MARROW TRANSPLANT
V4.3	April 2011	Software (SAS and WinQI) and Documentation	Software/ Documents	PDI #2: Modified inclusion logic to remove exclusion of pressure ulcer in stage I or II to capture diagnosis of stage III or IV ulcers.

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.3	April 2011	Software (SAS and WinQI) and Documentation	Software/ Documents	PDI #5: Added denominator exclusions for thoracic procedures (43.5, 43.99, 44.67, 77.81, 77.91)
V4.3	April 2011	Software (SAS and WinQI) and Documentation	Software/ Documents	PDI #9: Added denominator exclusion for esophageal resection procedure (MDC 4), lung cancer procedures (32.39, 32.49, 32.59), ENT/neck procedures (CCS 33), and degenerative neurological disorders (CCS 653)
V4.3	June 30, 2011	Software (SAS and WinQI) and Documentation	Software/ Documents	AHRQ Clinical Classification Software: Modified CCS 65 to CCS 654 and CCS 67 to CCS 661. Added codes: 307.0, 307.9, 315.00, 315.01, 315.02, 315.09, 315.1, 315.2, 315.31, 315.32, 315.34, 315.35, 315.39, 315.4, 315.5, 315.8, 315.9, V40.0, V40.1, 648.30, 648.31, 648.32, 648.33, 648.34, 655.50, 655.51, 655.53, 760.72, 760.73, 760.75, 779.5, 965.00, 965.01, 965.02, 965.09, V65.42. Removed codes: 305.1, 305.10, 305.11, 305.12, 305.13, V15.82
V4.3	June 30, 2011	Guide	Software/ Documents	Revised and updated all sections of the guide document to reflect current state of indicators, software and body of evidence.
V4.2	September 30, 2010	Pressure Ulcer (PDI 2)	Coding	Add diagnosis codes to stratifiers by hemiplegia, paraplegia, or quadriplegia 768.70 Hypoxic-ischemic encephalopathy, unspecified 768.72 Moderate hypoxic-ischemic encephalopathy 768.73 Severe hypoxic-ischemic encephalopathy
V4.2	September 30, 2010	Postoperative Respiratory Failure (PDI 9) Denominator (Exclusion, neuromuscular disorders)	Coding	359.71 Inclusion body myositis IBM 359.79 Other inflammatory and immune myopathies, NEC

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.2	September 30, 2010	Postoperative Sepsis (PDI 10) Denominator (Exclusion, Infection)	Coding	670.00 Major puerperal infection NOS-unsp 670.02 Major puerperal Infection NOS-del p/p 670.04 Major puerperal infection NOS-p/p 670.10 Puerperal endometritis-unsp 670.12 Puerperal endometritis del w p/p 670.14 Puerperal endometritis-postpart 670.20 Puerperal sepsis-unsp 670.22 Puerperal sepsis-del w p/p 670.24 Puerperal sepsis-postpart 670.30 Puerperal septic thrombophlebitis-unsp 670.32 Puerperal septic thrombophlebitis-del w p/p 670.34 Puerperal septic thrombophlebitis-postpart 670.80 Major puerperal infection NEC-suspec 670.82 Major puerperal infection NEC-dl w p/p 670.84 Major puerperal infection NEC-p/p
V4.2	September 30, 2010	Postoperative Wound Dehiscence (PDI 11) Denominator (Exclusion, high risk group)	Coding	279.41 Autoimmune lymphoproliferative syndrome ALPS 279.49 Autoimmune disease, not elsewhere classified

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.2	September 30, 2010	Multiple PDI Indicators	Coding	Add procedure codes: 0049 Superstat O2 Therapy 0058 Ins Intra-ansm Pres Mntr 0059 Intravasc Msmnt Cor Art 0067 Intravas Msmnt Thorc Art 0068 Intravas MsMt Periph Art 0069 Intravs Msmt Ves NEC/NOS 1751 Implant CCM, total system 1752 Implant CCM pulse genr 1761 LITT lesn brain, guidance 1762 LITT les hd/nck, guidance 1763 LITT lesn liver, guidance 1769 LITT lesn, guide oth/NOS 1770 Intravenous Infusion of Clofarabine 3373 Endo ins/re brnc val, mul 3824 Intravas img corves OCT 3825 Intravas img non-cor OCT 3975 Endo emb hd/nk, bare coil 3976 Endo em hed/nk, bioac coil 4686 Endo insrt colonic stent 4687 Insert colonic stent NEC 3850 ABDPERNEAL RES RECTM NOS 8570 TOTL RECONSTC Breast NOS



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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.2	September 30, 2010	Multiple PDI Indicators	Coding	Change procedure codes: 3760 Imp Bivn Ext Hrt Ast Sys 4840 Pull-thru Res Rectum NOS Change procedure codes category assignments: 0044 PROC-VESSEL BIFURCATION 0074 HIP REPL SURFMETAL/POLY 0075 HIP REP SURFMETAL/METAL 0076 HIP REP SURFCERMC/CERMC 0077 HIP REPL SURF- CERMC/POLY 0094 HITRA-OP NEUROPHYS MONTR 0110 INTRACRAN PRESSURE MONTR 0116 INTRACRANIAL 02 MONITOR 0117 BRAIN TEMP MONITORING 0126 INS CATHCRANIAL CAVITY 0127 REM CATHCRANIAL CAVITY 1741 OPEN ROBOTIC ASSIST PROC 1742 LAP ROBOTIC ASSIST PROC 1743 PERC ROBOTIC ASSIST PROC 1744 ENDO ROBOTIC ASSIST PROC 1745 THORACO ROBOTIC AST PROC 1749 ROBOTIC AST PROC NEC/NOS 3372 ENDO PULM ARWY FLOW MSMT 3736 EXC LEFT A TRAIL APPENDAG 3768 PERCUTAN HRT ASSIST SYST 3790 INS LEFT ATR APPEND DEV 3823 INTRAVASCLR SPECTROSCOPY 5013 TRANSJUGULAR LIVER BX 7094 INSERT BIOLOGICAL GRAFT 7095 INSERT SYNTH GRAFT/PROST 8472 APP EXT FIX DEVRING SYS 8473 APP HYBRID EXT FIX DEV 9227 RADIOACTIVE ELEM IMPLANT

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.2	September 30, 2010	Multiple PDI Indicators	Coding	Add new operating procedure codes: 1751 Implant CCM, total system 1752 Implant CCM pulse genr 1761 LITT lesn brain, guidance 1762 LITT les hd/nck, guidance 1763 LITT lesn liver, guidance 1769 LITT lesn, guide oth/NOS 3975 Endo emb hd/nk, bare coil 3976 Endo em hed/nk, bioac coil 4850 ABDPERNEAL RES RECTM NOS 8570 TOTL RECONSTC BREAST NOS  Modify: 9227 RADIOACTIVE ELEM IMPLANT 3760 IMP BIVN EXT HRT AST SYS 4840 PULL-THRU RES RECTUM NOS 3768 PERCUTAN HRT ASSIST SYST

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.2	September 30, 2010	Multiple PDI Indicators	Coding	Remove operating procedure codes: 0044 PROC-VESSEL BIFURCATION 0074 HIP REPL SURFMETAL/POLY 0075 HIP REP SURFMETAL/METAL 0076 HIP REP SURFCERMC/CERMC 0077 HIP REPL SURF- CERMC/POLY 0126 INS CATHCRANIAL CAVITY 0127 REM CATHCRANIAL CAVITY 1741 OPEN ROBOTIC ASSIST PROC 1742 LAP ROBOTIC ASSIST PROC 1743 PERC ROBOTIC ASSIST PROC 1744 ENDO ROBOTIC ASSIST PROC 1745 THORACO ROBOTIC AST PROC 1749 ROBOTIC AST PROC NEC/NOS 3372 ENDO PULM ARWY FLOW MSMT 3736 EXC LEFT A TRAIL APPENDAG 3790 INS LEFT ATR APPEND DEV 3823 INTRAVASCLR SPECTROSCOPY 7094 INSERT BIOLOGICAL GRAFT 7095 INSERT SYNTH GRAFT/PROST 8472 APP EXT FIX DEVRING SYS 8473 APP HYBRID EXT FIX DEV
V4.2	September 30, 2010	Multiple PDI Indicators	Coding	Add ICD-9-CM codes to the corresponding CCS categories, per Table 2 in Appendix.
V4.1	December 2, 2009	SAS Software and Documentation	Software/ Documents	PQI #9 – Low Birth Weight and PSI #17 – Birth Trauma Injury to Neonates – now calculated in the PDI SAS module. Technical Specifications for these indicators are distributed with their respective (PQI and PSI) set of documents.
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #2 – Pressure Ulcer (formerly Decubitus Ulcer) – added diagnosis code to denominator exclusion for hemi- and paraplegia (334.1)

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	NQI #1 and PDI #5 – Iatrogenic Pneumothorax – 1) replaced the DRG denominator exclusion for cardiac surgery with procedure code denominator exclusion for cardiac procedures; 2) added procedure codes to denominator exclusion for thoracic procedures
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #4 – Iatrogenic Pneumothorax in Neonates has been redesignated as NQI #1. It is still calculated by the PDI SAS module.
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #9 – Postoperative respiratory failure – added denominator exclusion for craniofacial anomalies with 1) a procedure code for laryngeal or pharyngeal surgery or 2) a procedure on face and a diagnosis code of craniofacial abnormalities.
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #10 – Postoperative sepsis – removed diagnosis code from numerator inclusion for sepsis for discharges after 2004Q4 (effective October 1, 2004)
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #12 – Central Line-associated Bloodstream Infection – renamed the indicator from “Selected infections due to medical care”
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	PDI #16 – Gastroenteritis – added diagnosis code to numerator exclusion for gastrointestinal abnormalities (538 Gastrointestinal mucositis (ulcerative))
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Multiple – Infection – 1) removed diagnosis codes for non-bacterial infections from denominator exclusion for infection; 2) Add diagnosis code to denominator exclusion for infection (078.3 CAT-SCRATCH DISEASE)
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Multiple – Major Operating Room Procedures – removed selected procedure codes from the denominator inclusion for major operating room procedures
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Medical DRGs – replaced the DRG denominator inclusion for medical discharges with the MS-DRG denominator inclusion for medical discharges for discharges after 2007Q4 (effective October 1, 2007).

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Surgical DRGs – replaced the DRG denominator inclusion for surgical discharges with the MS-DRG denominator exclusion for surgical discharges for discharges after 2007Q4 (effective October 1, 2007)
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Adult DRGs – dropped the DRG denominator inclusion for adult DRGs.
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Pediatric Heart Surgery Mortality (PDI #6) – excluded cases with any diagnosis of ASD or VSD with PDA as the only procedure
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Iatrogenic Pneumothorax – Neonates (PDI #4) – renamed PDI #4 to NQI #1
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Neonatal Mortality (NQI #2) – added the Neonatal Mortality indicator
V 4.0	June 30, 2009	Software and Documentation	Software/ Documents	Blood Stream Infection – Neonates (NQI #3) – added the Blood Stream Infection – Neonates indicator
V4.0	June 30,2009	Software and Documentation	Software/ Documents	Implement UB-04 – The UB-04 (effective October 1, 2007) changes were implemented including new data elements for point-of-origin and present on admission
V4.0	June 30,2009	Software and Documentation	Software/ Documents	Update Benchmarking Data to 2007 – used data from the 2007 SID for computation of benchmarks
V4.0	February 25, 2009	Accidental Puncture or Laceration (PDI 1) Denominator (Inclusion, spinal surgeries)	Coding	Add procedure codes to denominator inclusion for spinal surgeries (\$SPINEP)  Add codes: 80.53 Repair of the anulus fibrosus with graft or prosthesis 80.54 Other and unspecified repair of the anulus fibrosus
V4.0	February 25, 2009	Pressure Ulcer (PDI 2) Denominator (Exclusion, diagnosis of Stage I or Stage II)	Coding	Add denominator exclusion for diagnosis of Stage I or Stage II (\$DECUBVD)  Add code: 707.20 PRESSURE ULCER, STAGE NOS 707.21 PRESSURE ULCER, STAGE I 707.22 PRESSURE ULCER, STAGE II

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V4.0	February 25, 2009	Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, diaphragmatic surgery repair)	Coding	Add procedure codes to denominator exclusion for diaphragmatic surgery repair (\$DIAPHRP)  Add code: 53.71 Laparoscopic repair of diaphragmatic hernia, abdominal approach 53.72 Other and open repair of diaphragmatic hernia, abdominal approach 53.75 Repair of diaphragmatic hernia, abdominal approach, NOS 55.83 Laparoscopic repair of diaphragmatic hernia, with thoracic approach 55.84 Other and open repair of diaphragmatic hernia, with thoracic approach
V4.0	February 25, 2009	Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, pleural effusion)	Coding	Add diagnosis codes to denominator exclusion for pleural effusion (\$PLEURAD)  Add code: 511.81 Malignant pleural effusion 511.89 Other specified forms of effusion, except tuberculosis
V4.0	February 25, 2009	Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion)	Coding	Replace the DRG denominator exclusion for cardiac surgery (\$CARSDR) with a procedure code denominator exclusion for cardiac procedures (\$CARDSIP). See Table 1 in Appendix for cardiac procedure codes.  Add code: 37.36 Excision or destruction of left atrial appendage (LAA) 37.55 Removal of internal biventricular heart replacement system 37.60 Implantation or insertion of biventricular external heart assist system
V4.0	February 25, 2009	Pediatric Heart Surgery (PDI 6 and 7) Denominator (Inclusion, procedures to repair congenital heart defect)	Coding	Add procedure code to denominator inclusion for procedures to repair congenital heart defect (\$PRPED1P)  Add code: 37.36 Excision or destruction of left atrial appendage (LAA)

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.0	February 25, 2009	Postoperative Sepsis (PDI 10) Numerator (Inclusion, sepsis)	Coding	Add diagnosis code to numerator inclusion for sepsis (\$SEPTIID)  Modify code: 038.11 Methicillin susceptible staphylococcus aureus septicemia  Add code: 038.12 Methicillin resistant Staphylococcus aureus septicemia
V4.0	February 25, 2009	Postoperative Wound Dehiscence (PDI 11) Denominator (Inclusion, abdominopelvic procedures)	Coding	Add procedure codes to denominator inclusion for abdominopelvic procedures (\$ABDOMIP)  Add codes: 17.31 Laparoscopic multiple segmental resection of large intestine 17.32 Laparoscopic cecectomy 17.33 Laparoscopic right hemicolectomy 17.34 Laparoscopic resection of transverse colon 17.35 Laparoscopic left hemicolectomy 17.36 Laparoscopic sigmoidectomy 17.39 Other laparoscopic partial excision of large intestine 45.81 Laparoscopic total intra-abdominal colectomy 45.82 Open total intra-abdominal colectomy 45.83 Other and unspecified total intra-abdominal colectomy 48.40 Pull-through resection of rectum, not otherwise specified 48.43 Open pull-through resection of rectum 48.50 Abdominoperineal resection of the rectum, NOS 48.52 Open abdominoperineal resection of the rectum 48.59 Other abdominoperineal resection of the rectum 53.75 Repair of diaphragmatic hernia, abdominal approach, NOS
V4.0	February 25, 2009	Gastroenteritis (PDI 16) Numerator (Exclusion, gastrointestinal abnormalities)	Coding	Add diagnosis codes to numerator exclusion for gastrointestinal abnormalities (\$ACGDISD)  Add codes: 53570 EOSINOPHIL GASTRT WO HEM 53571 EOSINOPHILC GASTRT W HEM 558.41 Eosinophilic gastroenteritis 558.42 Eosinophilic colitis

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.0	February 25, 2009	Multiple – Immunocompromised Denominator (Exclusion, high risk immuno- compromised)	Coding	<p>Add diagnosis codes to denominator exclusion for high risk immuno-compromised (\$IMMUNHD)</p> <p>Add codes:            199.2 Malignant neoplasm associated with transplanted organ            238.79 Other lymphatic and hematopoietic tissues            238.77 Post-transplant lymphoproliferative disorder            279.50 Graft-versus-host disease, unspecified            279.51 Acute graft-versus-host disease            279.52 Chronic graft-versus-host disease            279.53 Acute on chronic graft-versus-host disease            V45.11 Renal dialysis status</p> <p>Add codes:            203.02 MULT MYELOMA IN RELAPSE            203.12 PLSM CEL LEUK IN RELAPSE            203.82 OTH IMNPRLF NEO-RELAPSE            204.02 ACT LYMP LEUK IN RELAPSE            204.12 CHR LYMP LEUK IN RELAPSE            204.22 SBAC LYM LEUK IN RELAPSE            204.82 OTH LYM LEUK IN RELAPSE            204.92 LYMP LEUK NOS RELAPSE            205.02 ACT MYEL LEUK IN RELAPSE            205.12 CHR MYEL LEUK IN RELAPSE            205.22 SBAC MYL LEUK IN RELAPSE            205.32 MYEL SARCOMA IN RELAPSE            205.82 OTH MYEL LEUK IN RELAPSE            205.92 MYEL LEUK NOS IN RELAPSE            206.02 ACT MONO LEUK IN RELAPSE            206.12 CHR MONO LEUK IN RELAPSE            206.22 SBAC MONO LEU IN RELAPSE            206.82 OTH MONO LEUK IN RELAPSE            206.92 MONO LEUK NOS RELAPSE</p>



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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
				207.02 AC ERTH/ERYLK IN RELAPSE 207.12 CHR ERYTHRMIA IN RELAPSE 207.22 MGKRYCYT LEUK IN RELAPSE 207.82 OTH SPF LEUK IN RELAPSE 208.02 AC LEUK UNS CL RELAPSE 208.12 CH LEU UNS CL IN RELAPSE 208.22 SBAC LEU UNS CL-RELAPSE 208.82 OTH LEUK UNS CL-RELAPSE 208.92 LEUKEMIA NOS IN RELAPSE

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.0	February 25, 2009	Multiple – Infection Denominator (Exclusion, infection)	Coding	<p>Add diagnosis codes to denominator exclusion for infection (\$INFECID)</p> <p>Modify codes:            038.11 Methicillin susceptible staphylococcus aureus septicemia            041.11 Methicillin susceptible staphylococcus aureus            482.41 Methicillin susceptible pneumonia due to staphylococcus aureus</p> <p>Add codes:            038.12 Methicillin resistant Staphylococcus aureus septicemia            041.12 Methicillin resistant Staphylococcus aureus (MRSA)            482.42 Methicillin resistant pneumonia due to staphylococcus aureus            707.20 Pressure ulcer unspecified stage            707.22 Pressure ulcer stage II            707.23 Pressure ulcer stage III            707.24 Pressure ulcer stage IV            777.50 Necrotizing enterocolitis in newborn, unspecified            777.51 Stage I necrotizing enterocolitis in newborn            777.52 Stage II necrotizing enterocolitis in newborn            777.53 Stage III necrotizing enterocolitis in newborn</p> <p>Delete codes (for discharges after 2008Q4 effective October 1, 2008):            707.00 PRESSURE ULCER, SITE NOS            707.01 PRESSURE ULCER, ELBOW            707.02 PRESSURE ULCER, UPR BACK            707.03 PRESSURE ULCER, LOW BACK            707.04 PRESSURE ULCER, HIP            707.05 PRESSURE ULCER, BUTTOCK            707.06 PRESSURE ULCER, ANKLE            707.07 PRESSURE ULCER, HEEL            707.09 PRESSURE ULCER, SITE NEC</p>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)		Changes
V4.0	February 25, 2009	Pressure Ulcer (PDI 2) Denominator (Exclusion, hemi- and paraplegia)	Indicator Change	Specification	Add diagnosis code to denominator exclusion for hemi- and paraplegia (\$HEMIPID)  Add code: 334.1 Hereditary spastic paraplegia
V4.0	February 25, 2009	Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion)	Indicator Change	Specification	Replace the DRG denominator exclusion for cardiac surgery (\$CARSDR) with procedure code denominator exclusion for cardiac procedures (\$CARDSIP). See Table 1 in Appendix for cardiac procedure codes.
V4.0	February 25, 2009	Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, thoracic procedures)	Indicator Change	Specification	Add procedure codes to denominator exclusion for thoracic procedures (\$THORAIP)  Add codes: 05.22 Sympathectomy Cervical 05.23 Sympathectomy Lumbar 05.29 Other sympathectomy and ganglionectomy 07.80 Thymectomy, not otherwise specified 07.81 Other partial excision of thymus 07.82 Other total excision of thymus 07.83 Thoracoscopic partial excision of thymus 07.84 Thoracoscopic total excision of thymus 32.49 Other lobectomy of lung

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V4.0	February 25, 2009	Postoperative Respiratory Failure (PDI 9) Denominator (Exclusion)	Indicator    Specification Change	<p>Add denominator exclusion for craniofacial anomalies with 1) a procedure code for laryngeal or pharyngeal surgery (\$CRANI1P) or 2) a procedure on face (\$CRANI2P) and a diagnosis code of craniofacial abnormalities (\$CRANIID).</p> <p>Add codes for pharyngeal surgery (\$CRANI1P):</p> <ul style="list-style-type: none"> <li>25.3 Complete glossectomy</li> <li>25.4 Radical glossectomy</li> <li>27.31 Local excision or destruction of lesion or tissue of bony palate</li> <li>29.0 Pharyngotomy</li> <li>29.33 Pharyngectomy (partial)</li> <li>29.39 Other excision or destruction of lesion or tissue of pharynx</li> <li>29.4 Plastic operation on pharynx</li> <li>29.53 Closure of other fistula of pharynx</li> <li>29.59 Other repair of pharynx</li> <li>29.91 Dilation of pharynx</li> <li>30.09 Other excision or destruction of lesion or tissue of larynx</li> <li>30.21 Epiglottidectomy</li> <li>30.22 Vocal cordectomy</li> <li>30.29 Other partial laryngectomy</li> <li>30.3 Complete laryngectomy</li> <li>30.4 Radical laryngectomy</li> <li>31.3 Other incision of larynx or trachea</li> <li>31.5 Local excision or destruction of lesion or tissue of trachea</li> <li>31.69 Other repair of larynx</li> <li>31.73 Closure of other fistula of trachea</li> <li>31.75 Reconstruction of trachea and construction of artificial larynx</li> <li>31.79 Other repair and plastic operations on trachea</li> <li>31.98 Other operations on larynx</li> <li>31.99 Other operations on trachea</li> </ul>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
				<p>Add codes for procedure on face (\$CRANI2P):</p> <p>25.2 Partial glossectomy  25.59 Other repair and plastic operations on tongue  27.32 Wide excision or destruction of lesion or tissue of bony palate  27.62 Correction of cleft palate  27.63 Revision of cleft palate repair  27.69 Other plastic repair of palate  29.31 Cricopharyngeal myotomy  76.65 Segmental osteoplasty [osteotomy] of maxilla  76.66 Total osteoplasty [osteotomy] of maxilla  76.46 Other reconstruction of other facial bone  76.69 Other facial bone repair  76.91 Bone graft to facial bone</p> <p>Add codes for craniofacial abnormalities (\$CRANIID).</p> <p>744.83 Macrostomia  744.84 Microstomia  744.9 Unspecified anomalies of face and neck  748.3 Congenital anomalies of skull and face bones  756.0 Tracheomalacia and congenital tracheal stenosis</p>
V4.0	February 25, 2009	Postoperative Sepsis (PDI 10) Numerator (Inclusion)	Indicator Specification Change	<p>Remove diagnosis code from numerator inclusion for sepsis (\$SEPTIID) for discharges after 2004Q4 (effective October 1, 2004)</p> <p>Drop code:  785.59 Shock without mention of trauma, other</p>
V4.0	February 25, 2009	Hospital Acquired Vascular Catheter Related Infections (PDI 12)	Indicator Specification Change	<p>Rename the indicator from “Selected infections due to medical care” to “Hospital acquired vascular catheter related infections”</p>
V4.0	February 25, 2009	Gastroenteritis (PDI 16) Numerator (Exclusion, gastrointestinal abnormalities)	Indicator Specification Change	<p>Add diagnosis code to numerator exclusion for gastrointestinal abnormalities (\$ACGDISD)</p> <p>Add code:  538 Gastrointestinal mucositis (ulcerative)</p>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.0	February 25, 2009	Multiple – Infection Denominator (Exclusion, infection)	Indicator Specification Change	<p>1. Remove diagnosis codes for non-bacterial infections from denominator exclusion for infection (\$INFECID)</p> <p>Drop codes:            376.00 ACUTE INFLAM NOS, ORBIT            386.30 LABYRINTHITIS NOS            386.31 SEROUS LABYRINTHITIS            386.32 CIRCUMSCRI LABYRINTHITIS            598.00 URETHR STRICT:INFECT NOS            598.01 URETH STRICT:OTH INFECT            686.01 PYODERMA GANGRENOSUM</p> <p>2. Add diagnosis code to denominator exclusion for infection (\$INFECID)</p> <p>Add codes:            078.3 CAT-SCRATCH DISEASE</p>
V4.0	February 25, 2009	Multiple – Major Operating Room Procedures Denominator (Inclusion)	Indicator Specification Change	<p>Remove procedure codes from the denominator inclusion for major operating room procedures (\$ORPROC)</p> <p>Drop codes:            38.7 INTERRUPTION VENA CAVA            41.0 LYMPH STRUCTURE OP NEC            41.00 BONE MARROW TRNSPLNT NOS            41.01 AUTO BONE MT W/O PURG            41.02 ALO BONE MARROW TRNSPLNT            41.03 ALLOGRFT BONE MARROW NOS            41.04 AUTO HEM STEM CT W/O PUR            41.05 ALLO HEM STEM CT W/O PUR            41.06 CORD BLD STEM CELL TRANS            41.07 AUTO HEM STEM CT W PURG            41.08 ALLO HEM STEM CT W PURG            41.09 AUTO BONE MT W PURGING</p>
V4.0	February 25, 2009	Iatrogenic Pneumothorax – Neonates (PDI 4)	Indicator Specification Change	Rename PDI 4 to NQI 1

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V4.0	February 25, 2009	Neonatal Mortality (NQI 2)	Indicator Specification Change	Add the Neonatal Mortality indicator
V4.0	February 25, 2009	Blood Stream Infection – Neonates (NQI 3)	Indicator Specification Change	Add the Blood Stream Infection – Neonates indicator
V 3.2	March 10, 2008	Iatrogenic Pneumothorax (PDI #5) Denominator (Exclusion, Thoracic Surgery)	Coding	Added new codes: 32.20 THORAC EXC LUNG LESION 32.30 THORAC SEG LUNG RESECT 32.39 OTH SEG LUNG RESECT NOS 32.41 THORAC LOBECTOMY LUNG 32.50 THORACOSPC PNEUMONECTOMY 32.59 OTHER PNEUMONECTOMY NOS 33.20 THORACOSCOPC LUNG BIOPSY 34.20 THORACOSCOPIE PLEURAL BX 34.52 THORACOSCOPIE DECORT LUNG
V 3.2	March 10, 2008	Selected Infections due to Medical Care (PDI #12) Numerator (Inclusion)	Coding	Added new code 999.31 INFECT D/T CENT VEN CATH
V 3.2	March 10, 2008	Multiple PDI Indicators Exclusion (Infection)	Coding	Add new codes 040.41 INFANT BOTULISM and 040.42 WOUND BOTULISM
V 3.2	March 10, 2008	Multiple PDI Indicators	Coding	Updated DRG to Version 25.0
V 3.2	March 10, 2008	Software and Documentation	Software/ Documents	<ol style="list-style-type: none"> <li>1. PDI #1 (Accidental puncture or laceration) – Added an exclusion for discharges with an ICD-9-CM procedure code for spine surgery</li> <li>2. PDI #13 (Transfusion Reaction) – Revised the indicator from a rate to a count</li> <li>3. PDI #3 (Foreign Body left in During Procedure) – Revised the indicator from a rate to a count and to require the POA flag</li> </ol>
V 3.1a	March 16, 2007	SAS Software and Documentation	Software/ Documents	Added program to calculate the pediatric patient safety composite measure. The new files are PDI_COMPOSITE.SAS and MSXPDC31.TXT.
V 3.1a	March 16, 2007	Software (PDSASA2)	Software/ Documents	Amended the aggregation algorithm to correctly sum the numerator and denominator counts across stratifiers.

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V 3.1	March 12, 2007	Software (SAS and Windows) and Technical Specifications	Software/ Documents	Revised numerator inclusion criteria for Postoperative Hemorrhage and Hematoma (PDI #8) to include a diagnosis of hemorrhage or hematoma and a procedure for control of hemorrhage or drainage of hematoma.
V 3.1	March 12, 2007	Covariates. Software (SAS and Windows),	Software/ Documents	<ol style="list-style-type: none"> <li>1. Based on recommendations of the Risk Adjustment and Hierarchical Modeling (RAHM) Workgroup, computed covariates using logistic regression model with a hospital random-effect instead of the existing simple logistic model. Because the AHRQ QI use a large sample, the impact on the covariates of using the hierarchical model (and hence the impact on the risk-adjusted rates) is minor.</li> <li>2. Updated the coefficients used in the calculation of expected and risk-adjusted rates to the reference population, based on the 2002-2004 State Inpatient Data (SID).</li> </ol>
V 3.1	March 12, 2007	Covariates, Software (SAS and Windows), Software Documentation	Software/ Documents	Included an option to incorporate the present on admission indicator into the specifications. In general, cases where the outcome of interest is present on admission will be excluded from the denominator, as these cases are no longer at risk of having the outcome of interest occur during the hospitalization. The release also includes alternative parameter files of risk-adjustment covariates and population rates using 2002-2004 SID data from California and New York.
V 3.1	March 12, 2007	Software (SAS and Windows)	Software/ Documents	<ol style="list-style-type: none"> <li>1. Age-, race-, gender- and county-specific population estimates used for AHRQ QI area rates were updated to use revised post-censal estimates for years 2001 through 2005 and projections for the years 2006 and 2007.</li> <li>2. Added capability to apply weight value to each discharge.</li> <li>3. The syntax will compute risk-adjusted rates and observed-to-expected ratios for the pre-defined set of stratification variables (e.g., age, gender, payer, race). When stratifications other than hospital or area are selected, the RPPDxx variables and their confidence intervals are observed/expected ratios to avoid confounding with risk adjustment variables.</li> </ol>



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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V 3.0b	September 29, 2006	Windows	Software/ Documents	Implemented the pediatric risk adjustment.
V 3.0b	September 29, 2006	SAS Software	Software/ Documents	<ol style="list-style-type: none"> <li>1. Changed the PAGECAT stratification data element to correctly assign non-integer AGE values.</li> <li>2. Changed PHS_RACHS1.TXT syntax to correctly assign the risk category when AGE &gt; 0 and AGEDAY is missing. In general, these cases are now assigned to a lower risk category (impacts about 3% of cases).</li> </ol>
V 3.0b	September 29, 2006	Technical Specifications and Software	Software/ Documents	PedQI #1, #3, #6, #10-12. Changed the exclusion from newborns less than 500g to neonates less than 500g.
V 3.0b	September 29, 2006	Measures	Software/ Documents	<ol style="list-style-type: none"> <li>1. Revised the text to clarify clinical panel recommendations of indicators for inclusion in Pediatric module and those deferred for further development.</li> <li>2. Added description of Pediatric Heart Surgery Volume.</li> </ol>
V 3.0a	May 1, 2006	SAS	Software/ Documents	Implemented the pediatric risk adjustment.
V 3.0a	May 1, 2006	SAS Software	Software/ Documents	<ol style="list-style-type: none"> <li>1. PDSAS1.SAS – Corrected the principal diagnosis exclusion for PedQI #8.</li> <li>2. PDSASA2.SAS – Corrected the denominator calculation for PedQI #17</li> </ol>
V 3.0a	May 1, 2006	Technical Specifications	Software/ Documents	<ol style="list-style-type: none"> <li>1. PedQI #2 – Added exclusion for cases with an ICD-9-CM procedure code of debridement or pedicle graft as the only major operating room procedures (surgical cases only)</li> <li>2. PedQI #4/#5 – Added exclusion for cases with ICD-9-CM procedure code of diaphragmatic surgery repair</li> <li>3. PedQIs #16 and #18– Modified exclusion to cases with age less than or equal to 90 days (or neonates if age in days is missing)</li> <li>4. Deleted ICD-9-CM procedure code 41.0 from the list of major operating room procedure codes</li> <li>5. Intermediate Risk Immuno-compromised state – Clarified that codes for hepatic failure must be accompanied by codes for cirrhosis.</li> </ol>

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Version/ Revision number	Date	Component	Nature of Change (Coding vs. Software/ Documents)	Changes
V 3.0a	May 1, 2006	Technical Specifications and Software	Software/ Documents	<ol style="list-style-type: none"> <li>1. Corrected ICD-9-CM diagnosis codes 590.00 and 590.01 in the numerator exclusion for PedQI #18.</li> <li>2. Dropped ICD-9-CM diagnosis codes 585.1, 585.2, 585.3, 585.4 and 585.9 from the high risk immunocompromised state specification.</li> <li>3. Added ICD-9-CM diagnosis codes 276.50, 276.51 and 276.52 to the numerator specification for PedQI #16.</li> <li>4. Refined the definition of neonate by dropping the DRG and MDC inclusion criteria.</li> <li>5. Refined the newborn definition by requiring that age in days be equal to zero (or missing if there is a liveborn diagnosis code).</li> </ol>
V 3.0	February 20, 2006	Technical Specifications and Software	Software/ Documents	<ol style="list-style-type: none"> <li>1. Dropped ICD-9-CM diagnosis code 5185 from numerator specification for PedQI #9.</li> <li>2. Dropped exclusion of all newborns and neonates transferring from another institution, added exclusion of neonates for PedQI #10.</li> </ol>

## Appendix

## Appendix A - Cardiac Procedure Codes as of February 2009

35.10 OPEN HEART VALVULOPLASTY WITHOUT REPLACEMENT, UNSPECIFIED VALVE  
35.11 OPEN HEART VALVULOPLASTY OF AORTIC VALVE WITHOUT REPLACEMENT  
35.12 OPEN HEART VALVULOPLASTY OF MITRAL VALVE WITHOUT REPLACEMENT  
35.13 OPEN HEART VALVULOPLASTY OF PULMONARY VALVE WITHOUT REPLACEMENT  
35.14 OPEN HEART VALVULOPLASTY OF TRICUSPID VALVE WITHOUT REPLACEMENT  
35.20 REPLACEMENT OF UNSPECIFIED HEART VALVE  
35.21 REPLACEMENT OF AORTIC VALVE WITH TISSUE GRAFT  
35.22 OTHER REPLACEMENT OF AORTIC VALVE  
35.23 REPLACEMENT OF MITRAL VALVE WITH TISSUE GRAFT  
35.24 OTHER REPLACEMENT OF MITRAL VALVE  
35.25 REPLACEMENT OF PULMONARY VALVE WITH TISSUE GRAFT  
35.26 OTHER REPLACEMENT OF PULMONARY VALVE  
35.27 REPLACEMENT OF TRICUSPID VALVE WITH TISSUE GRAFT  
35.28 OTHER REPLACEMENT OF TRICUSPID VALVE  
35.31 OPERATIONS ON PAPILLARY MUSCLE  
35.32 OPERATIONS ON CHORDAE TENDINEAE  
35.33 ANNULOPLASTY  
35.34 INFUNDIBULECTOMY  
35.35 OPERATIONS ON TRABECULAE CARNEAE CORDIS  
35.39 OPERATIONS ON OTHER STRUCTURES ADJACENT TO VALVES OF HEART  
35.50 REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART WITH PROSTHESIS  
35.51 REPAIR OF ATRIAL SEPTAL DEFECT WITH PROSTHESIS, OPEN TECHNIQUE  
35.53 REPAIR OF VENTRICULAR SEPTAL DEFECT WITH PROSTHESIS, OPEN TECHNIQUE  
35.54 REPAIR OF ENDOCARDIAL CUSHION DEFECT WITH PROSTHESIS

35.60 REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART WITH TISSUE GRAFT  
35.61 REPAIR OF ATRIAL SEPTAL DEFECT WITH TISSUE GRAFT  
35.62 REPAIR OF VENTRICULAR SEPTAL DEFECT WITH TISSUE GRAFT  
35.63 REPAIR OF ENDOCARDIAL CUSHION DEFECT WITH TISSUE GRAFT  
35.70 OTHER AND UNSPECIFIED REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART  
35.71 OTHER AND UNSPECIFIED REPAIR OF ATRIAL SEPTAL DEFECT  
35.72 OTHER AND UNSPECIFIED REPAIR OF VENTRICULAR SEPTAL DEFECT  
35.73 OTHER AND UNSPECIFIED REPAIR OF ENDOCARDIAL CUSHION DEFECT  
35.81 TOTAL REPAIR OF TETRALOGY OF FALLOT  
35.82 TOTAL REPAIR OF TOTAL ANOMALOUS PULMONARY VENOUS CONNECTION  
35.83 TOTAL REPAIR OF TRUNCUS ARTERIOSUS  
35.84 TOTAL CORRECTION OF TRANSPOSITION OF GREAT VESSELS, NOT ELSEWHERE CLASSIFIED  
35.91 INTERATRIAL TRANSPOSITION OF VENOUS RETURN  
35.92 CREATION OF CONDUIT BETWEEN RIGHT VENTRICLE AND PULMONARY ARTERY  
35.93 CREATION OF CONDUIT BETWEEN LEFT VENTRICLE AND AORTA  
35.94 CREATION OF CONDUIT BETWEEN ATRIUM AND PULMONARY ARTERY  
35.95 REVISION OF CORRECTIVE PROCEDURE ON HEART  
35.98 OTHER OPERATIONS ON SEPTA OF HEART  
35.99 OTHER OPERATIONS ON VALVES OF HEART  
36.03 OPEN CHEST CORONARY ARTERY ANGIOPLASTY  
36.10 AORTOCORONARY BYPASS FOR HEART REVASCULARIZATION, NOT OTHERWISE SPECIFIED

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36.11 (AORTO)CORONARY BYPASS OF ONE CORONARY ARTERY  
36.12 (AORTO)CORONARY BYPASS OF TWO CORONARY ARTERIES  
36.13 (AORTO)CORONARY BYPASS OF THREE CORONARY ARTERIES  
36.14 (AORTO)CORONARY BYPASS OF FOUR OR MORE CORONARY ARTERIES  
36.15 SINGLE INTERNAL MAMMARY-CORONARY ARTERY BYPASS  
36.16 DOUBLE INTERNAL MAMMARY-CORONARY ARTERY BYPASS  
36.17 ABDOMINAL -CORONARY ARTERY BYPASS  
36.19 OTHER BYPASS ANASTOMOSIS FOR HEART REVASCULARIZATION  
36.2 HEART REVASCULARIZATION BY ARTERIAL IMPLANT  
36.31 OPEN CHEST TRANSMYOCARDIAL REVASCULARIZATION  
36.32 OTHER TRANSMYOCARDIAL REVASCULARIZATION  
36.39 OTHER HEART REVASCULARIZATION  
36.91 REPAIR OF ANEURYSM OF CORONARY VESSEL  
36.99 OTHER OPERATIONS ON VESSELS OF HEART  
37.0 PERICARDIOCENTESIS  
37.10 INCISION OF HEART, NOT OTHERWISE SPECIFIED  
37.11 CARDIOTOMY  
37.12 PERICARDIOTOMY  
37.31 PERICARDIECTOMY  
37.32 EXCISION OF ANEURYSM OF HEART  
37.33 EXCISION OR DESTRUCTION OF OTHER LESION OR TISSUE OF HEART, OPEN APPROACH  
37.35 PARTIAL VENTRICULECTOMY  
37.41 IMPLANTATION OF PROSTHETIC CARDIAC SUPPORT DEVICE AROUND THE HEART

37.49 OTHER REPAIR OF HEART AND PERICARDIUM  
37.51 HEART TRANSPLANTATION  
37.52 IMPLANTATION OF TOTAL REPLACEMENT HEART SYSTEM  
37.53 REPLACEMENT OF REPAIR OF THORACIC UNIT OF TOTAL REPLACEMENT HEART SYSTEM  
37.54 REPLACEMENT OR REPAIR OF OTHER IMPLANTABLE COMPONENT OF TOTAL REPLACEMENT HEART SYSTEM  
37.61 IMPLANT OF PULSATION BALLOON  
37.62 INSERTION OF NON-IMPLANTABLE HEART ASSIST SYSTEM  
37.63 REPAIR OF HEART ASSIST SYSTEM  
37.64 REMOVAL OF HEART ASSIST SYSTEM  
37.65 IMPLANT OF EXTERNAL HEART ASSIST SYSTEM  
37.66 INSERTION OF IMPLANTABLE HEART ASSIST SYSTEM  
37.67 IMPLANTATION OF CARDIOMYOSTIMULATION SYSTEM  
37.91 OPEN CHEST CARDIAC MASSAGE  
38.04 INCISION OF VESSEL, AORTA  
38.05 INCISION OF VESSEL, OTHER THORACIC  
38.44 RESECTION OF ABDOMINAL AORTA WITH GRAFT REPLACEMENT  
38.45 RESECTION OF THORACIC VESSEL WITH GRAFT REPLACEMENT  
38.64 EXCISION OF LESION OF AORTA  
38.65 EXCISION OF LESION OTHER THORACIC VESSEL  
38.84 LIGATION , DIVISION OF AORTA  
38.85 LIGATION, DIVISION OF OTHER THORACIC VESSELS  
39.0 SYSTEMIC TO PULMONARY ARTERY SHUNT  
39.21 CAVAL-PULMONARY ARTERY ANASTOMOSIS  
39.22 AORTA-SUBCLAVIAN-CAROTID BYPASS  
39.23 OTHER INTRATHORACIC VASCULAR SHUNT OR BYPASS

## Appendix B - ICD-9-CM codes for corresponding CCS categories as of September 2010

700 HEPATITIS A WITH COMA	20033 MARGIN ZONE LYM ABDOM
701 HEPATITIS A W/O COMA	20034 MARGIN ZONE LYM AXILLA
702 HEPATITIS B WITH COMA	20035 MARGIN ZONE LYM INGUIN
7020 VRL HEPAT B CM W/O DELTA	20924 MALIG CARCINOID KIDNEY
7021 VRL HEPAT B CM W DELTA	V1053 HX MALIGNANT NEOPLASM- RENAL PELVIS
7022 CHR HEPAT COMA W/O DELTA	20030 MARGNL ZONE LYM XTRNDL
7023 CHR HEPAT COMA W/ DELTA	20031 MARGIN ZONE LYM HEAD
703 HEPATITIS B W/O COMA	20032 MARGIN ZONE LYM THORAX
7030 VRL HPT B W/O CM W/O DLT	20033 MARGIN ZONE LYM ABDOM
7031 VRL HPT B W/O CM W DELTA	20034 MARGIN ZONE LYM AXILLA
7032 CHR HEPAT W/O COMA W/O DELTA	20035 MARGIN ZONE LYM INGUIN
7033 CHR HEPAT W/O COMA W/ DELTA	20036 MARGIN ZONE LYM PELVIC
704 VIRAL HEPAT NEC W COMA	20037 MARGIN ZONE LYMPH SPLEEN
7041 SPF VRL HPT CM HPT C	20038 MARGIN ZONE LYMPH MULTIP
7042 SPF VRL HPT CM DLT W/O B	20040 MANTLE CELL LYM XTRRNDL
7043 SPF VRL HPT CM HPT E	20041 MANTLE CELL LYMPH HEAD
7044 CHR HEPAT C W/ COMA	20042 MANTLE CELL LYMPH THORAX
7049 SPF VRL HPT CM	20043 MANTLE CELL LYMPH ABDOM
705 VIRAL HEPAT NEC W/O COMA	20044 MANTLE CELL LYMPH AXILLA
7051 VRL HPT W/O CM HEPAT C	20045 MANTLE CELL LYMPH INGUIN
7052 VRL HPT W/O CM DLT W/O B	20046 MANTLE CELL LYMPH PELVIC
7053 VRL HPT W/O CM HEPAT E	20047 MANTLE CELL LYMPH SPLEEN
7054 CHR HEPAT C W/O COMA	20048 MANTLE CELL LYMPH MULTIP
7059 VRL HPT W/O CM	20050 PRIMARY CNS LYMPH XTRNDL
706 VIRAL HEPAT NOS W COMA	20051 PRIMARY CNS LYMPH HEAD
7070 HPT C W/O HEPAT COMA NOS	20052 PRIMARY CNS LYMPH THORAX
7071 HPT C W HEPATIC COMA NOS	20053 PRIMARY CNS LYMPH ABDOM
709 VIRAL HEPAT NOS W/O COMA	20054 PRIMARY CNS LYMPH AXILLA
57142 AUTOIMMUNE HEPATITIS	20055 PRIMARY CNS LYM INGUIN
20924 MALIG CARCINOID KIDNEY	20056 PRIMARY CNS LYMPH PELVIC
V1053 HX MALIGNANT NEOPLASM- RENAL PELVIS	20057 PRIMARY CNS LYMPH SPLEEN
20030 MARGNL ZONE LYM XTRNDL	20058 PRIMARY CNS LYMPH MULTIP
20031 MARGIN ZONE LYM HEAD	20060 ANAPLASTIC LYMPH XTRNDL
20032 MARGIN ZONE LYM THORAX	20061 ANAPLASTIC LYMPH HEAD

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20062 ANAPLASTIC LYMPH THORAX	20402 ACT LYMP LEUK IN RELAPSE
20063 ANAPLASTIC LYMPH ABDOM	20412 CHR LYMP LEUK IN RELAPSE
20064 ANAPLASTIC LYMPH AXILLA	20422 SBAC LYM LEUK IN RELAPSE
20065 ANAPLASTIC LYMPH INGUIN	20482 OTH LYM LEUK IN RELAPSE
20066 ANAPLASTIC LYMPH PELVIC	20482 OTH LYM LEUK IN RELAPSE
20067 ANAPLASTIC LYMPH SPLEEN	20492 LYMP LEUK NOS RELAPSE
20068 ANAPLASTIC LYMPH MULTIP	20502 ACT MYEL LEUK IN RELAPSE
20070 LARGE CELL LYMPH XTRNDL	20512 CHR MYEL LEUK IN RELAPSE
20071 LARGE CELL LYMPHOMA HEAD	20522 SBAC MYL LEUK IN RELAPSE
20072 LARGE CELL LYMPH THORAX	20532 MYEL SARCOMA IN RELAPSE
20073 LARGE CELL LYMPH ABDOM	20582 OTH MYEL LEUK IN RELAPSE
20074 LARGE CELL LYMPH AXILLA	20592 MYEL LEUK NOS IN RELAPSE
20075 LARGE CELL LYMPH INGUIN	20602 ACT MONO LEUK IN RELAPSE
20061 ANAPLASTIC LYMPH HEAD	20612 CHR MONO LEUK IN RELAPSE
20062 ANAPLASTIC LYMPH THORAX	20622 SBAC MONO LEU IN RELAPSE
20063 ANAPLASTIC LYMPH ABDOM	20682 OTH MONO LEUK IN RELAPSE
20064 ANAPLASTIC LYMPH AXILLA	20692 MONO LEUK NOS RELAPSE
20065 ANAPLASTIC LYMPH INGUIN	20702 AC ERTH/ERYLK IN RELAPSE
20066 ANAPLASTIC LYMPH PELVIC	20712 CHR ERYTHRMIA IN RELAPSE
20067 ANAPLASTIC LYMPH SPLEEN	20722 MGKRYCYT LEUK IN RELAPSE
20068 ANAPLASTIC LYMPH MULTIP	20782 OTH SPF LEUK IN RELAPSE
20070 LARGE CELL LYMPH XTRNDL	20802 AC LEUK UNS CL RELAPSE
20071 LARGE CELL LYMPHOMA HEAD	20812 CH LEU UNS CL IN RELAPSE
20072 LARGE CELL LYMPH THORAX	20822 SBAC LEU UNS CL-RELAPSE
20073 LARGE CELL LYMPH ABDOM	20882 OTH LEUK UNS CL-RELAPSE
20074 LARGE CELL LYMPH AXILLA	20892 LEUKEMIA NOS IN RELAPSE
20075 LARGE CELL LYMPH INGUIN	20922 MALIG CARCINOID THYMUS
20076 LARGE CELL LYMPH PELVIC	20925 MAL CARCNOID FOREGUT NOS
20077 LARGE CELL LYMPH SPLEEN	20926 MAL CARCINOID MIDGUT NOS
20078 LARGE CELL LYMPH MULTIP	20927 MAL CARCNOID HINDGUT NOS
20270 PERIPH T CELL LYM XTRNDL	79510 ABN GLAND PAP SMR VAGINA
20271 PERIPH T CELL LYMPH HEAD	79511 PAP SMEAR VAG W ASC-US
20272 PERIPH T CELL LYM THORAX	79512 PAP SMEAR VAGINA W ASC-H
20273 PERIPH T CELL LYM ABDOM	79513 PAP SMEAR VAGINA W LGSIL
20274 PERIPH T CELL LYM AXILLA	79514 PAP SMEAR VAGINA W HGSIL
20275 PERIPH T CELL LYM INGUIN	V1090 HX MALIG NEOPLASM NOS
20276 PERIPH T CELL LYM PELVIC	V1091 HX MALIG NEUROENDO TUMOR
20277 PERIPH T CELL LYM SPLEEN	20971 SEC NEUROEND TU DIST LYM
20278 PERIPH T CELL LYM MULTIP	20972 SEC NEUROEND TUMOR-LIVER
20312 PLSM CEL LEUK IN RELAPSE	20973 SEC NEUROENDO TUMOR-BONE

**Pediatric Quality Indicators (PDI)**

**Log of ICD-9-CM and DRG Coding Updates and Revisions to PDI Documentation and Software**

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20974 SEC NEUROENDO TU-PERITON  
51181 MALIGNANT PLEURAL EFFUSN  
78951 MALIGNANT ASCITES  
25541 GLUCOCORTICOID DEFICIENT  
25542 MINERALCORTICOID DEFCNT  
25801 MULT ENDO NEOPLAS TYPE I  
25950 ANDROGEN INSENSITVTY NOS  
25951 ANDROGEN INSENSITVTY SYN  
25952 PART ANDROGEN INSNSITVTY  
27941 AUTOIMMUN LYMPHPROF SYND  
27949 AUTOIMMUNE DISEASE NEC  
2755 HUNGRY BONE SYNDROME  
2865 CIRCULATING ANTICOAG DIS  
2866 DEFIBRATION SYNDROME  
2867 ACQ COAGUL FACTOR DEFIC  
2874 SECOND THROMBOCYTOPENIA  
28982 SECONDARY HYPERCOAGULABLE STATE  
28984 HEPARIN-INDU THROMBOCYTO  
7827S PONTANEOUS ECCHYMOSES  
28866 BANDEMIA  
3315 NORML PRESSURE HYDROCEPH  
33700 IDIO PERPH AUTO NEUR NOS  
33701 CAROTID SINUS SYNDROME  
33709 IDIO PERPH AUTO NEUR NEC  
78072 FUNCTIONAL QUADRIPLEGIA  
32702 INSOMNIA DT MENTAL DISOR  
32715 HYPERSOM DT MENTAL DISOR  
32730 CIRCADIAN RHYM SLEEP NOS  
32731 CIRCADIAN RHY-DELAY SLP  
32732 CIRCADIAN RHY-ADVC SLEEP  
32733 CIRCADIAN RHYM-IRREG SLP  
32734 CIRCADIAN RHYM-FREE RUN  
32735 CIRCADIAN RHYTHM-JETLAG  
32736 CIRCADIAN RHY-SHIFT WORK  
32737 CIRCADIAN RHYM OTH DIS  
32739 CIRCADIAN RHYM SLEEP NEC  
32753 SLEEP RELATED BRUXISM  
33183 MILD COGNITIVE IMPAIREMT  
34881 TEMPORAL SCLEROSIS

34889 BRAIN CONDITIONS NEC  
35921 MYOTONIC MUSCLR DYSTRPHY  
35922 MYOTONIA CONGENITA  
35923 MYOTONIC CHONDRODYSTRPHY  
35924 DRUG INDUCED MYOTONIA  
35929 MYOTONIC DISORDER NEC  
35971 INCLUSION BODY MYOSITIS  
35979 INFLM/IMMUNE MYOPATH NEC  
78451 DYSARTHRIA  
78459 SPEECH DISTURBANCE NEC  
41512 SEPTIC PULMONARY EMBOLSM  
4162 CHR PULMONARY EMBOLISM  
42682 LONG QT SYNDROME  
53013 EOSINOPHILIC ESOPHAGITIS  
78959 ASCITES NEC  
V4511 RENAL DIALYSIS STATUS  
V4512 NONCMLPLNT W RENAL DIALYS  
72990 SOFT TISSUE DISORD NOS  
72991 POST-TRAUMATIC SEROMA 72992NONTRAUMA HEMA  
SOFT TISS  
72999 SOFT TISSUE DISORDER NEC  
V1359 HX MUSCULOSKLETL DIS NEC  
75672 OMPHALOCELE  
75673 GASTROSCHISIS  
4041 INFANT BOTULISM  
76061 AMNIOCENTESIS AFFECT NB  
76062 IN UTERO PROC NEC AFF NB  
76063 MAT SURG DUR PREG AFF NB  
76064 PREV MATERN SURG AFF NB  
77750 NEC ENTEROCOLTIS NB NOS  
77751 STG I NEC ENTEROCOL NB  
77752 STG II NEC ENTEROCOL NB  
77753 STG III NEC ENTEROCOL NB  
77931 NB FEEDING PROBLEMS  
77932 NB BILIOUS VOMITING  
77933 NB OTHER VOMITING  
77934 NB FAILURE TO THRIVE  
7897 COLIC  
34939 DURAL TEAR NEC