### Medical Policy

**Title:** Monitored Anesthesia Care

**Professional**
Original Effective Date: January 1, 2007  
Revision Date(s): September 10, 2010; January 28, 2011; February 5, 2014; July 1, 2016; October 1, 2016; January 1, 2017, October 1, 2017; October 1, 2018  
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**Institutional**
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Current Effective Date: January 1, 2017

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<table>
<thead>
<tr>
<th>Populations</th>
<th>Interventions</th>
<th>Comparators</th>
<th>Outcomes</th>
</tr>
</thead>
</table>
| Individuals:  
- With planned bronchoscopy and certain risk factors or significant medical conditions | Interventions of interest are:  
- Monitored anesthesia care | Comparators of interest are:  
- Sedation or analgesia without monitored anesthesia care | Relevant outcomes include:  
- Overall survival  
- Morbid events  
- Hospitalizations  
- Treatment-related mortality  
- Treatment-related morbidity |

| Individuals:  
- With a planned interventional pain management procedure and certain risk factors or significant medical conditions | Interventions of interest are:  
- Monitored anesthesia care | Comparators of interest are:  
- Sedation or analgesia without monitored anesthesia care | Relevant outcomes include:  
- Overall survival  
- Morbid events  
- Hospitalizations  
- Treatment-related mortality  
- Treatment-related morbidity |
DESCRIPTION
Adequate sedation and analgesia are important parts of many diagnostic and therapeutic procedures. Various levels of sedation and analgesia (anesthesia) may be used, depending on the patient’s condition and the procedure being performed. Monitored anesthesia care (MAC) refers to a set of physician services, not a particular level of sedation. The services include the ability to convert a patient to general anesthesia if needed and to intervene in the event that a patient’s airway becomes compromised.

Background

Overview
Monitored anesthesia care (MAC) is a set of anesthesia services defined by the type of anesthesia personnel present during a procedure, not specifically by the level of anesthesia needed. The American Society of Anesthesiologists (ASA) has defined MAC.1,2 The following is derived from ASA statements:

"Monitored anesthesia care is a specific anesthesia service for a diagnostic or therapeutic procedure. Indications for monitored anesthesia care include the nature of the procedure, the patient’s clinical condition and/or the potential need to convert to a general or regional anesthetic.

Monitored anesthesia care includes all aspects of anesthesia care—a preprocedure visit, intraprocedure care, and postprocedure anesthesia management. During monitored anesthesia care, the anesthesiologist provides or medically directs a number of specific services, including but not limited to:

- Diagnosis and treatment of clinical problems that occur during the procedure
- Support of vital functions
- Administration of sedatives, analgesics, hypnotics, anesthetic agents or other medications as necessary for patient safety
- Psychological support and physical comfort
- Provision of other medical services as needed to complete the procedure safely.

Monitored anesthesia care may include varying levels of sedation, analgesia, and anxiolysis as necessary. The provider of monitored anesthesia care must be prepared and qualified to convert to general anesthesia when necessary. If the patient loses consciousness and the ability to respond purposefully, the anesthesia care is a general anesthetic, irrespective of whether airway instrumentation is required.

Sedation Depth
In 2004, ASA defined 4 levels of sedation/analgesia, as shown in Table 1.
Table 1: ASA's Definition of General Anesthesia and Levels of Sedation and Analgesia

<table>
<thead>
<tr>
<th>Terms</th>
<th>Minimal Sedation (Anxiolysis)</th>
<th>Moderate Sedation or Analgesia (Conscious Sedation)</th>
<th>Deep Sedation or Analgesia</th>
<th>General Anesthesia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsiveness</td>
<td>Normal response to verbal stimulation</td>
<td>Purposeful response to verbal or tactile stimulation</td>
<td>Purposeful response following repeated or painful stimulation</td>
<td>Unarousable even with painful stimulation</td>
</tr>
<tr>
<td>Airway</td>
<td>Unaffected</td>
<td>No intervention required</td>
<td>Intervention may be required</td>
<td>Intervention often required</td>
</tr>
<tr>
<td>Spontaneous ventilation</td>
<td>Unaffected</td>
<td>Adequate</td>
<td>May be inadequate</td>
<td>Frequently inadequate</td>
</tr>
<tr>
<td>Cardiovascular function</td>
<td>Unaffected</td>
<td>Usually maintained</td>
<td>Usually maintained</td>
<td>May be impaired</td>
</tr>
</tbody>
</table>

ASA: American Society of Anesthesiologists.

Because sedation is a continuum, it is not always possible to predict how an individual patient will respond. Hence, practitioners intending to produce a given level of sedation should be able to rescue patients whose level of sedation becomes deeper than initially intended. Individuals administering moderate sedation or analgesia (conscious sedation) should be able to rescue patients who enter a state of deep sedation or analgesia, while those administering deep sedation or analgesia should be able to rescue patients who enter a state of general anesthesia.

**Sedation for Diagnostic and Therapeutic Procedures**

Multiple diagnostic and therapeutic procedures performed in the outpatient setting (e.g., bronchoscopy, interventional pain management procedures) rely on some degree of sedation for anxiolysis and pain control. Regardless of sedation depth, sedation and anesthesia services provided in outpatient settings should be administered by qualified and appropriately trained personnel. Moderate sedation is generally sufficient for many diagnostic and uncomplicated therapeutic procedures. Moderate sedation using benzodiazepines, with or without narcotics, is frequently administered under the supervision of the proceduralist.

According to ASA’s standard for monitoring, MAC should be provided by qualified anesthesia personnel, including physicians and nurse specialists. By this standard, the personnel must be in addition to the proceduralist and must be present continuously to monitor the patient and provide anesthesia care. For patients at high risk of an unsuccessful procedure under moderate sedation, this allows for the safe continuation of the procedure under deep sedation or general anesthesia by trained personnel.

Moderate sedation can be achieved using pharmacologic agents for sedation, anxiolysis, and analgesia. A frequently used combination is an opioid and benzodiazepine (e.g., fentanyl with midazolam) at doses individualized to obtain the desired sedative effect.
Other combinations have also been used. While benzodiazepines and opioids can cause respiratory depression, effective reversal agents exist for both.

Propofol has increasingly been used to provide sedation for procedures. It is associated with a rapid onset of action and fast recovery from sedation. However, there have been concerns about potential adverse effects and safety when used by nonanesthesiologists. Propofol has the potential to induce general anesthesia, and there is no pharmacologic antagonist to reverse its action. When used as moderate sedation, propofol may be administered by anesthesia personnel or under the direction of the proceduralist. ASA has offered practice guidelines for the provision of sedation by nonanesthesiologists, stating that personnel must be prepared to respond to deep sedation and loss of airway protection should these complications inadvertently occur during sedation.\(^4\)

**Regulatory Status**
In October 1989, propofol Diprivan® (AstraZeneca) was first approved by the U.S. Food and Drug Administration (FDA) through the premarket approval process for the induction and maintenance of anesthesia. The current FDA-approved label for Diprivan® states that it is indicated for initiation and maintenance of monitored anesthesia care sedation, combined sedation and regional anesthesia, or intensive care unit sedation of intubated, mechanically ventilated patients (adults only). It is also approved for induction of general anesthesia in patients 3 years of age and older and maintenance of general anesthesia in patients 2 months of age and older.

There are many other FDA-approved medications for pain relief, anxiolysis, and sedation that may be used in outpatient sedation.

**POLICY**

A. Use of monitored anesthesia care may be considered **medically necessary** for bronchoscopy, interventional pain procedures, CT scans, MRIs, cardiac catheterization and PTCAs when there is documentation by the proceduralist and anesthesiologist that specific risk factors or significant medical conditions are present. Those risk factors or significant medical conditions include any of the following:

1. Increased risk for complications due to severe comorbidity (American Society of Anesthesiologists P3* or greater)
2. Morbid obesity (BMI [body mass index] >40 kg/m²)
3. Documented sleep apnea
4. Inability to follow simple commands (cognitive dysfunction, intoxication, or psychological impairment)
5. Spasticity or movement disorder complicating the procedure
6. History or anticipated intolerance to standard sedatives, such as:
   a. Opioid dependent
   b. Benzodiazepine dependent
7. Patients with active medical problems related to drug or alcohol abuse
8. Patients younger than 13 years or 70 years or older
9. Patients who are pregnant
10. Patients with increased risk for airway obstruction due to anatomic variation, such as:
    a. History of stridor
    b. Dysmorphic facial features
    c. Oral abnormalities (eg, macroglossia)
    d. Neck abnormalities (eg, neck mass)
    e. Jaw abnormalities (eg, micrognathia)
11. Acutely agitated, uncooperative patients

*American Society of Anesthesiologists' physical status classification system for assessing a patient before surgery:
   P1 – A normal, healthy patient
   P2 – A patient with mild systemic disease
   P3 – A patient with severe systemic disease
   P4 – A patient with severe systemic disease that is a constant threat to life
   P5 – A moribund patient who is not expected to survive without the operation
   P6 – A declared brain-dead patient whose organs are being harvested

B. Use of monitored anesthesia care is considered not medically necessary for bronchoscopy, interventional pain procedures, CT scans, MRIs, cardiac catheterization and PTCAs in patients at average risk related to use of anesthesia and sedation.

Policy Guidelines
This policy only addresses anesthesia services for diagnostic or therapeutic procedures involving bronchoscopy, and interventional pain procedures, CT scans, MRIs, cardiac catheterization and PTCAs performed in the outpatient setting.

Monitored Anesthesia Care
Monitored anesthesia care can be provided by qualified anesthesia personnel with training and experience in:
   - Patient assessment
   - Continuous evaluation and monitoring of patient physiological functions
   - Diagnosis and treatment (both pharmacologic and nonpharmacologic) of any and all deviations in physiological function.

Procedural and Patient Risks
The Mallampati score is considered a predictor of difficult tracheal intubation and is routinely used in preoperative anesthesia evaluation. The score is obtained by having the
patient extend the neck, open the mouth, and extend the tongue while in a seated position. Patients are scored from classes I through IV, as follows:

Class I:  The tonsils, uvula and soft palate are fully visible
Class II:  The hard and soft palate, uvula and upper portion of the tonsils are visible
Class III:  The hard and soft palate and the uvula base are visible
Class IV:  Only the hard palate is visible

Patients with class III or IV Mallampati scores are considered to be at higher risk of intubation difficulty. While the Mallampati score does not determine a need for monitored anesthesia care, it may be considered in determining risk for airway obstruction. Other tests to predict difficult tracheal intubation include the upper lip bite test, the intubation difficulty scale, and the Cormack-Lehane grading system.

**RATIONALE**

This evidence review was updated with searches of the MEDLINE database. The most recent literature review was through October 6, 2016. Many recommendations for the indications for monitored anesthesia care (MAC) derive from narrative reviews and expert opinion. The following is a summary of the key literature to date.

**BRONCHOSCOPY**

No RCTs or nonrandomized comparative studies evaluating MAC versus non-anesthesiologist-administered sedation were identified. One RCT, published in 2009, addressed sedation in bronchoscopy but did not specifically address MAC. This trial, by Silvestri et al, compared 2 doses of the sedative agent fospropofol in patients undergoing diagnostic bronchoscopy; sedatives were administered by pulmonologists without anesthesia supervision. Patients (N=252) were randomized to induction doses of fospropofol 2 mg/kg or 6.5 mg/kg, followed by additional doses per protocol. All patients received a preprocedural dose of fentanyl. The primary end point was sedation success using the Modified Observer’s Assessment of Alertness/Sedation. The higher dose group had greater sedation success (88.7% vs 27.5%, respectively; p<0.001). Treatment success also favored the higher dose group (91.3% vs 41.25%, respectively; p<0.001). Adverse events were higher for the higher dose group (eg, the number of patients requiring any type of airway assistance) (33 [21.5%] vs 14 [13.6%], respectively). The trial did not compare alternate sedation approaches; that comparison would be necessary to evaluate the clinical value of the fospropofol sedation strategy for bronchoscopic procedures.

**Section Summary: Bronchoscopy**

There is a lack of published evidence on MAC in bronchoscopy procedures; no RCTs, nonrandomized comparative studies, or large case series were identified.

**INTERVENTIONAL PAIN MANAGEMENT**

In 2008, Bernards et al published a literature review on neurologic complications of regional anesthesia in anesthetized or heavily sedated patients. Some experts have postulated that the inability of a sedated patient to express atypical symptoms during a regional block may lead to increased risk of injury. No comparative studies have been done, and limited information is available from registries. The American Society of Regional Anesthesia and Pain Medicine has acknowledged the scarce and conflicting literature on the topic and recommended carefully
weighing the risks and benefits of performing those procedures while the patient is heavily sedated or anesthetized.\textsuperscript{19}

\textbf{Section Summary: Interventional Pain Management}

There is a lack of published evidence on MAC in interventional pain management procedures; no RCTs, nonrandomized comparative studies or large case series were identified.

\textbf{RISK FACTORS ASSOCIATED WITH ANESTHESIA OUTCOMES (MIXED INDICATIONS)}

ASA has recommended that any location providing MAC have the capability of cardiopulmonary resuscitation and monitoring equipment.\textsuperscript{20,21} In 2004, Fleisher et al performed a retrospective claims data review on 564,267 outpatient surgical procedures: 360,780 at a hospital outpatient department, 175,288 at an ambulatory surgical center, and 28,199 at a physician’s office.\textsuperscript{22} The rates of all-cause death, emergency department visits, and inpatient admissions within 7 days of the procedure were compared. The highest rates were seen among patients in the hospital outpatient surgery department, suggesting that patients evaluated to be at highest risk had their procedure in the location of lowest anesthesia risk. Multivariate analysis noted that increasing patient age, increasing procedural risk, and medical history of inpatient admissions were all independently predictive of adverse outcome. In 2013, Whippey et al published a case-control study of risk factors for unanticipated hospitalization following an outpatient procedure.\textsuperscript{23} They retrospectively identified 20,657 outpatient procedures and randomly selected 200 patients with an unanticipated hospitalization. These patients were compared to 200 randomly selected control patients without an unanticipated hospitalization. Predictors of unanticipated hospitalization included procedures lasting longer than 1 hour, high ASA physical status classification, older age, and higher BMI.

\textbf{Pregnancy}

Concerns about procedures and sedation during pregnancy are twofold: sensitivity of the fetus to the agents and/or procedural hypotension and maternal factors that increase sensitivity to sedation and that make intubation more difficult in an emergency situation. In a large (N=720,000) Swedish registry of pregnant patients from the 1970s and 1980s, 5405 operations took place.\textsuperscript{24} Congenital malformations and stillbirths were not increased in the offspring of women having surgery. Incidence of low birth-weight infants was increased as a result of both prematurity and intrauterine growth retardation. Neonatal death was also increased in patients who had surgery. No specific types of anesthesia or surgery were associated with these outcomes. The contribution of the underlying condition that led to the need for surgery could not be separated from the effects of the surgery or sedation/anesthesia.

Fetal heart rate monitoring is considered a more sensitive indicator of placental perfusion and fetal oxygenation than observations of maternal hemodynamic stability alone. The American College of Obstetricians and Gynecologists has recommended that use of intermittent or continuous fetal monitoring during surgery be individualized.\textsuperscript{25}

Physiologic changes in pregnancy may require changes in standard doses of anesthetic or sedative agents. However, propofol does not generally require a change in loading dose for induction.\textsuperscript{26} Physiologic changes in pregnancy may warrant MAC when airway protection becomes necessary, due to additional difficulties noted with emergent intubation in pregnant patients and the urgency to restore full oxygenation to the maternal and fetal patients.\textsuperscript{27}
Section Summary: Risk Factors Associated With Anesthesia Outcomes (Mixed Indications)
The available literature suggests that prolonged procedure, high ASA physical status classification, older age, higher BMI, and pregnancy are factors that increase risk associated with anesthesia. In these situations, MAC may be a reasonable option.

SUMMARY OF EVIDENCE
For individuals who have planned bronchoscopy and certain risk factors or significant medical conditions who receive MAC, the evidence includes no studies that directly address this issue. Relevant outcomes are overall survival, morbid events, hospitalizations, treatment-related mortality and morbidity. There is a lack of published evidence on MAC for bronchoscopy procedures; no RCTs, nonrandomized comparative studies, or large case series were identified. The evidence is insufficient to determine the effects of the technology on health outcomes.

For individuals who have planned interventional pain management procedures and certain risk factors or significant medical conditions who receive MAC, the evidence includes no studies that directly address this issue. Relevant outcomes are overall survival, morbid events, hospitalizations, treatment-related mortality and morbidity. There is a lack of published evidence on MAC for interventional pain management procedures; no RCTs, nonrandomized comparative studies, or large case series were identified. The evidence is insufficient to determine the effects of the technology on health outcomes.

PRACTICE GUIDELINES AND POSITION STATEMENTS
American Society of Anesthesiologists
In 2014, the American Society of Anesthesiologists (ASA) released an updated statement on the safe use of propofol:

“The Society believes that the involvement of an anesthesiologist in the care of every patient undergoing anesthesia is optimal. However, when this is not possible, non-anesthesia personnel who administer propofol should be qualified to rescue patients whose level of sedation becomes deeper than initially intended and who enter, if briefly, a state of general anesthesia.”

“Rescue” was defined as correcting “adverse physiologic consequences of the deeper-than-intended level of sedation (such as hypoventilation, hypoxia, and hypotension) and returns the patient to the originally intended level.”

In 2010, ASA updated a 2005 statement on anesthetic care during interventional pain procedures. While recognizing that some conditions may make skilled anesthesia care necessary, most minor pain procedures, under most routine circumstances, do not require anesthesia care other than local anesthesia.

British Thoracic Society
The 2013 British Thoracic Society guidelines on diagnostic flexible bronchoscopy in adults do not address monitored anesthesia care (MAC).
Society of Interventional Radiology
In 2013, the Society for Interventional Radiology (SIR) published a position statement responding to the ASA’s moderate sedation standards, specifically those on capnography. SIR did not include statements on MAC.

U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATIONS
Not applicable.

ONGOING AND UNPUBLISHED CLINICAL TRIALS
Some currently unpublished trials that might influence this review are listed in Table 3.

Table 3. Summary of Key Trials

<table>
<thead>
<tr>
<th>NCT No.</th>
<th>Trial Name</th>
<th>Planned Enrollment</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing</td>
<td>Nurse Administered Propofol Sedation vs. Midazolam With Fentanyl-sedation for Flexible Bronchoscopy: A Randomized, Single Blind, Controlled Study of Satisfaction and Safety</td>
<td>128</td>
<td>Apr 2016 (ongoing)</td>
</tr>
</tbody>
</table>

NCT: national clinical trial.

BENEFITS APPLICATION
BCBSKS will allow payment for monitoring of sedation services in an inpatient or outpatient facility when billed by an anesthesia provider capable of initiating general anesthesia should it be needed. BCBSKS will not allow payment for monitoring of sedation services in an office setting, with exception of those defined in K.S.A 40-2, 165.

CODING
The following codes for treatment and procedures applicable to this policy are included below for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement. Please refer to the member’s contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

CPT/HCPCS

01920 Anesthesia for cardiac catheterization including coronary angiography and ventriculography (not to include Swan-Ganz catheter)
01922 Anesthesia for non-invasive imaging or radiation therapy

- For reference, the add-on code for anesthesia for patient of extreme age is 99100 – Anesthesia for patient of extreme age, younger than 1 year and older than 70 (List separately in addition to code for primary anesthesia procedure).

- For other medical conditions increasing the risk in requiring monitored or general anesthesia services for these procedures such as behavioral, dysmorphic, and neurological conditions, please attach Modifier-22 and submit medical records.
ICD-10 Diagnoses

C34.01 Malignant neoplasm of right main bronchus
C34.02 Malignant neoplasm of left main bronchus
C34.11 Malignant neoplasm of upper lobe, right bronchus or lung
C34.12 Malignant neoplasm of upper lobe, left bronchus or lung
C34.2 Malignant neoplasm of middle lobe, bronchus or lung
C34.31 Malignant neoplasm of lower lobe, right bronchus or lung
C34.32 Malignant neoplasm of lower lobe, left bronchus or lung
C34.81 Malignant neoplasm of overlapping sites of right bronchus and lung
C34.82 Malignant neoplasm of overlapping sites of left bronchus and lung
D14.31 Benign neoplasm of right bronchus and lung
D14.32 Benign neoplasm of left bronchus and lung
E66.01 Morbid (severe) obesity due to excess calories
F10.20 Alcohol dependence, uncomplicated
F10.21 Alcohol dependence, in remission
F10.220 Alcohol dependence with intoxication, uncomplicated
F11.20 Opioid dependence, uncomplicated
F11.21 Opioid dependence, in remission
F11.220 Opioid dependence with intoxication, uncomplicated
F11.221 Opioid dependence with intoxication delirium
F11.222 Opioid dependence with intoxication with perceptual disturbance
F11.23 Opioid dependence with withdrawal
F11.24 Opioid dependence with opioid-induced mood disorder
F11.250 Opioid dependence with opioid-induced psychotic disorder with delusions
F11.251 Opioid dependence with opioid-induced psychotic disorder with hallucinations
F11.259 Opioid dependence with opioid-induced psychotic disorder, unspecified
F11.281 Opioid dependence with opioid-induced sexual dysfunction
F11.282 Opioid dependence with opioid-induced sleep disorder
F11.288 Opioid dependence with other opioid-induced disorder
F11.29 Opioid dependence with unspecified opioid-induced disorder
F13.20 Sedative, hypnotic or anxiolytic dependence, uncomplicated
F13.21 Sedative, hypnotic or anxiolytic dependence, in remission
F13.220 Sedative, hypnotic or anxiolytic dependence with intoxication, uncomplicated
F13.221 Sedative, hypnotic or anxiolytic dependence with intoxication delirium
F13.229 Sedative, hypnotic or anxiolytic dependence with intoxication, unspecified
F13.230 Sedative, hypnotic or anxiolytic dependence with withdrawal, uncomplicated
F13.231 Sedative, hypnotic or anxiolytic dependence with withdrawal delirium
F13.232 Sedative, hypnotic or anxiolytic dependence with withdrawal with perceptual disturbance
F13.24 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced mood disorder
F13.250 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with delusions
F13.251 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with hallucinations
F13.26 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting amnestic disorder
F13.27 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting dementia
F13.280 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced anxiety disorder
F13.281 Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sexual dysfunction

Contains Public Information
F13.282  Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sleep disorder
F13.288  Sedative, hypnotic or anxiolytic dependence with other sedative, hypnotic or anxiolytic-induced disorder
F13.29   Sedative, hypnotic or anxiolytic dependence with unspecified sedative, hypnotic or anxiolytic-induced disorder
F19.20  Other psychoactive substance dependence, uncomplicated
F19.21  Other psychoactive substance dependence, in remission
G47.31  Primary central sleep apnea
G47.33  Obstructive sleep apnea (adult) (pediatric)
G47.35  Congenital central alveolar hypoventilation syndrome
G47.36  Sleep related hypoventilation in conditions classified elsewhere
G47.37  Central sleep apnea in conditions classified elsewhere
G47.39  Other sleep apnea
O00.00  Abdominal pregnancy without intrauterine pregnancy
O00.01  Abdominal pregnancy with intrauterine pregnancy
O00.80  Other ectopic pregnancy without intrauterine pregnancy
O00.81  Other ectopic pregnancy with intrauterine pregnancy
O00.90  Unspecified ectopic pregnancy without intrauterine pregnancy
O00.91  Unspecified ectopic pregnancy with intrauterine pregnancy
O09.01  Supervision of pregnancy with history of infertility, first trimester
O09.02  Supervision of pregnancy with history of infertility, second trimester
O09.03  Supervision of pregnancy with history of infertility, third trimester
O09.11  Supervision of pregnancy with history of ectopic, first trimester
O09.12  Supervision of pregnancy with history of ectopic, second trimester
O09.13  Supervision of pregnancy with history of ectopic, third trimester
O09.211 Supervision of pregnancy with history of pre-term labor, first trimester
O09.212 Supervision of pregnancy with history of pre-term labor, second trimester
O09.213 Supervision of pregnancy with history of pre-term labor, third trimester
O09.291 Supervision of pregnancy with other poor reproductive or obstetric history, first trimester
O09.292 Supervision of pregnancy with other poor reproductive or obstetric history, second trimester
O09.293 Supervision of pregnancy with other poor reproductive or obstetric history, third trimester
O09.31  Supervision of pregnancy with insufficient antenatal care, first trimester
O09.32  Supervision of pregnancy with insufficient antenatal care, second trimester
O09.33  Supervision of pregnancy with insufficient antenatal care, third trimester
O09.41  Supervision of pregnancy with grand multiparity, first trimester
O09.42  Supervision of pregnancy with grand multiparity, second trimester
O09.43  Supervision of pregnancy with grand multiparity, third trimester
O09.511 Supervision of elderly primigravida, first trimester
O09.512 Supervision of elderly primigravida, second trimester
O09.513 Supervision of elderly primigravida, third trimester
O09.521 Supervision of elderly multigravida, first trimester
O09.522 Supervision of elderly multigravida, second trimester
O09.523 Supervision of elderly multigravida, third trimester
O09.611 Supervision of young primigravida, first trimester
O09.612 Supervision of young primigravida, second trimester
O09.613 Supervision of young primigravida, third trimester
O09.621 Supervision of young multigravida, first trimester
O09.622 Supervision of young multigravida, second trimester
O09.623 Supervision of young multigravida, third trimester
O09.71  Supervision of high risk pregnancy due to social problems, first trimester
O09.72  Supervision of high risk pregnancy due to social problems, second trimester
O09.73  Supervision of high risk pregnancy due to social problems, third trimester
O09.891  Supervision of other high risk pregnancies, first trimester
O09.892  Supervision of other high risk pregnancies, second trimester
O09.893  Supervision of other high risk pregnancies, third trimester
O09.91   Supervision of high risk pregnancy, unspecified, first trimester
O09.92   Supervision of high risk pregnancy, unspecified, second trimester
O09.93   Supervision of high risk pregnancy, unspecified, third trimester
O10.011 Pre-existing essential hypertension complicating pregnancy, first trimester
O10.012 Pre-existing essential hypertension complicating pregnancy, second trimester
O10.013 Pre-existing essential hypertension complicating pregnancy, third trimester
O10.02   Pre-existing essential hypertension complicating childbirth
O10.03   Pre-existing essential hypertension complicating the puerperium
O10.111 Pre-existing hypertensive heart disease complicating pregnancy, first trimester
O10.112 Pre-existing hypertensive heart disease complicating pregnancy, second trimester
O10.113 Pre-existing hypertensive heart disease complicating pregnancy, third trimester
O10.12   Pre-existing hypertensive heart disease complicating childbirth
O10.13   Pre-existing hypertensive heart disease complicating the puerperium
O10.211 Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester
O10.212 Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester
O10.213 Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester
O10.22   Pre-existing hypertensive chronic kidney disease complicating childbirth
O10.23   Pre-existing hypertensive chronic kidney disease complicating the puerperium
O10.311 Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester
O10.312 Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester
O10.313 Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester
O10.32   Pre-existing hypertensive heart and chronic kidney disease complicating childbirth
O10.33   Pre-existing hypertensive heart and chronic kidney disease complicating the puerperium
O10.411 Pre-existing secondary hypertension complicating pregnancy, first trimester
O10.412 Pre-existing secondary hypertension complicating pregnancy, second trimester
O10.413 Pre-existing secondary hypertension complicating pregnancy, third trimester
O10.42   Pre-existing secondary hypertension complicating childbirth
O10.43   Pre-existing secondary hypertension complicating the puerperium
O10.911 Unspecified pre-existing hypertension complicating pregnancy, first trimester
O10.912 Unspecified pre-existing hypertension complicating pregnancy, second trimester
O10.913 Unspecified pre-existing hypertension complicating pregnancy, third trimester
O10.92   Unspecified pre-existing hypertension complicating childbirth
O10.93   Unspecified pre-existing hypertension complicating the puerperium
O11.1    Pre-existing hypertension with pre-eclampsia, first trimester
O11.2    Pre-existing hypertension with pre-eclampsia, second trimester
O11.3    Pre-existing hypertension with pre-eclampsia, third trimester
O11.4    Pre-existing hypertension with pre-eclampsia, complicating childbirth
O11.5    Pre-existing hypertension with pre-eclampsia, complicating the puerperium
O12.01   Gestational edema, first trimester
O12.02   Gestational edema, second trimester
O12.03   Gestational edema, third trimester
O12.04   Gestational edema, complicating childbirth
O12.11   Gestational proteinuria, first trimester
O12.12   Gestational proteinuria, second trimester
O12.13   Gestational proteinuria, third trimester
O12.14   Gestational proteinuria, complicating childbirth
O12.21   Gestational edema with proteinuria, first trimester
O12.22   Gestational edema with proteinuria, second trimester
O12.23   Gestational edema with proteinuria, third trimester
O12.24  Gestational edema with proteinuria, complicating childbirth
O13.1  Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester
O13.2  Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester
O13.3  Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester
O13.4  Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth
O14.02  Mild to moderate pre-eclampsia, second trimester
O14.03  Mild to moderate pre-eclampsia, third trimester
O14.05  Mild to moderate pre-eclampsia, complicating the puerperium
O14.12  Severe pre-eclampsia, second trimester
O14.13  Severe pre-eclampsia, third trimester
O14.15  Severe pre-eclampsia, complicating the puerperium
O14.22  HELLP syndrome (HELLP), second trimester
O14.23  HELLP syndrome (HELLP), third trimester
O14.24  HELLP syndrome, complicating childbirth
O14.92  Unspecified pre-eclampsia, second trimester
O14.93  Unspecified pre-eclampsia, third trimester
O14.94  Unspecified pre-eclampsia, complicating childbirth
O15.02  Eclampsia complicating pregnancy, second trimester
O15.03  Eclampsia complicating pregnancy, third trimester
O15.1  Eclampsia complicating labor
O15.2  Eclampsia complicating the puerperium
O16.1  Unspecified maternal hypertension, first trimester
O16.2  Unspecified maternal hypertension, second trimester
O16.3  Unspecified maternal hypertension, third trimester
O16.4  Unspecified maternal hypertension, complicating childbirth
O20.0  Threatened abortion
O20.8  Other hemorrhage in early pregnancy
O20.9  Hemorrhage in early pregnancy, unspecified
O21.0  Mild hyperemesis gravidarum
O21.1  Hyperemesis gravidarum with metabolic disturbance
O21.2  Late vomiting of pregnancy
O21.8  Other vomiting complicating pregnancy
O21.9  Vomiting of pregnancy, unspecified
O23.01  Infections of kidney in pregnancy, first trimester
O23.02  Infections of kidney in pregnancy, second trimester
O23.03  Infections of kidney in pregnancy, third trimester
O23.11  Infections of bladder in pregnancy, first trimester
O23.12  Infections of bladder in pregnancy, second trimester
O23.13  Infections of bladder in pregnancy, third trimester
O23.21  Infections of urethra in pregnancy, first trimester
O23.22  Infections of urethra in pregnancy, second trimester
O23.23  Infections of urethra in pregnancy, third trimester
O23.31  Infections of other parts of urinary tract in pregnancy, first trimester
O23.32  Infections of other parts of urinary tract in pregnancy, second trimester
O23.33  Infections of other parts of urinary tract in pregnancy, third trimester
O23.41  Unspecified infection of urinary tract in pregnancy, first trimester
O23.42  Unspecified infection of urinary tract in pregnancy, second trimester
O23.43  Unspecified infection of urinary tract in pregnancy, third trimester
O23.51  Infections of cervix in pregnancy, first trimester
O23.52  Infections of cervix in pregnancy, second trimester
O23.53  Infections of cervix in pregnancy, third trimester
O23.521  Salpingo-oophoritis in pregnancy, first trimester
O23.522  Salpingo-oophoritis in pregnancy, second trimester
O23.523  Salpingo-oophoritis in pregnancy, third trimester
O23.591  Infection of other part of genital tract in pregnancy, first trimester
O23.592  Infection of other part of genital tract in pregnancy, second trimester
O23.593  Infection of other part of genital tract in pregnancy, third trimester
O23.91   Unspecified genitourinary tract infection in pregnancy, first trimester
O23.92   Unspecified genitourinary tract infection in pregnancy, second trimester
O23.93   Unspecified genitourinary tract infection in pregnancy, third trimester
O24.011  Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester
O24.012  Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester
O24.013  Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester
O24.02   Pre-existing type 1 diabetes mellitus, in childbirth
O24.03   Pre-existing type 1 diabetes mellitus, in the puerperium
O24.111  Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester
O24.112  Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester
O24.113  Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester
O24.12   Pre-existing type 2 diabetes mellitus, in childbirth
O24.13   Pre-existing type 2 diabetes mellitus, in the puerperium
O24.311  Unspecified pre-existing diabetes mellitus in pregnancy, first trimester
O24.312  Unspecified pre-existing diabetes mellitus in pregnancy, second trimester
O24.313  Unspecified pre-existing diabetes mellitus in pregnancy, third trimester
O24.32   Unspecified pre-existing diabetes mellitus in childbirth
O24.33   Unspecified pre-existing diabetes mellitus in the puerperium
O24.410  Gestational diabetes mellitus in pregnancy, diet controlled
O24.414  Gestational diabetes mellitus in pregnancy, insulin controlled
O24.415  Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs
O24.419  Gestational diabetes mellitus in pregnancy, unspecified control
O24.420  Gestational diabetes mellitus in childbirth, diet controlled
O24.424  Gestational diabetes mellitus in childbirth, insulin controlled
O24.425  Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs
O24.429  Gestational diabetes mellitus in childbirth, unspecified control
O24.430  Gestational diabetes mellitus in the puerperium, diet controlled
O24.434  Gestational diabetes mellitus in the puerperium, insulin controlled
O24.435  Gestational diabetes mellitus in the puerperium, controlled by oral hypoglycemic drugs
O24.439  Gestational diabetes mellitus in the puerperium, unspecified control
O24.811  Other pre-existing diabetes mellitus in pregnancy, first trimester
O24.812  Other pre-existing diabetes mellitus in pregnancy, second trimester
O24.813  Other pre-existing diabetes mellitus in pregnancy, third trimester
O24.82   Other pre-existing diabetes mellitus in childbirth
O24.83   Other pre-existing diabetes mellitus in the puerperium
O24.911  Unspecified diabetes mellitus in pregnancy, first trimester
O24.912  Unspecified diabetes mellitus in pregnancy, second trimester
O24.913  Unspecified diabetes mellitus in pregnancy, third trimester
O24.92   Unspecified diabetes mellitus in childbirth
O24.93   Unspecified diabetes mellitus in the puerperium
O25.11   Malnutrition in pregnancy, first trimester
O25.12   Malnutrition in pregnancy, second trimester
O25.13   Malnutrition in pregnancy, third trimester
O25.2    Malnutrition in childbirth
O25.3    Malnutrition in the puerperium
O26.01   Excessive weight gain in pregnancy, first trimester
O26.02   Excessive weight gain in pregnancy, second trimester
O26.03   Excessive weight gain in pregnancy, third trimester
O26.11 Low weight gain in pregnancy, first trimester
O26.12 Low weight gain in pregnancy, second trimester
O26.13 Low weight gain in pregnancy, third trimester
O26.21 Pregnancy care for patient with recurrent pregnancy loss, first trimester
O26.22 Pregnancy care for patient with recurrent pregnancy loss, second trimester
O26.23 Pregnancy care for patient with recurrent pregnancy loss, third trimester
O26.31 Retained intrauterine contraceptive device in pregnancy, first trimester
O26.32 Retained intrauterine contraceptive device in pregnancy, second trimester
O26.33 Retained intrauterine contraceptive device in pregnancy, third trimester
O26.41 Herpes gestationis, first trimester
O26.42 Herpes gestationis, second trimester
O26.43 Herpes gestationis, third trimester
O26.611 Liver and biliary tract disorders in pregnancy, first trimester
O26.612 Liver and biliary tract disorders in pregnancy, second trimester
O26.613 Liver and biliary tract disorders in pregnancy, third trimester
O26.62 Liver and biliary tract disorders in childbirth
O26.63 Liver and biliary tract disorders in the puerperium
O26.711 Subluxation of symphysis (pubis) in pregnancy, first trimester
O26.712 Subluxation of symphysis (pubis) in pregnancy, second trimester
O26.713 Subluxation of symphysis (pubis) in pregnancy, third trimester
O26.72 Subluxation of symphysis (pubis) in childbirth
O26.73 Subluxation of symphysis (pubis) in the puerperium
O26.811 Pregnancy related exhaustion and fatigue, first trimester
O26.812 Pregnancy related exhaustion and fatigue, second trimester
O26.813 Pregnancy related exhaustion and fatigue, third trimester
O26.821 Pregnancy related peripheral neuritis, first trimester
O26.822 Pregnancy related peripheral neuritis, second trimester
O26.823 Pregnancy related peripheral neuritis, third trimester
O26.831 Pregnancy related renal disease, first trimester
O26.832 Pregnancy related renal disease, second trimester
O26.833 Pregnancy related renal disease, third trimester
O26.841 Uterine size-date discrepancy, first trimester
O26.842 Uterine size-date discrepancy, second trimester
O26.843 Uterine size-date discrepancy, third trimester
O26.851 Spotting complicating pregnancy, first trimester
O26.852 Spotting complicating pregnancy, second trimester
O26.853 Spotting complicating pregnancy, third trimester
O26.86 Pruritic urticarial papules and plaques of pregnancy (PUPPP)
O26.891 Other specified pregnancy related conditions, first trimester
O26.892 Other specified pregnancy related conditions, second trimester
O26.893 Other specified pregnancy related conditions, third trimester
O26.91 Pregnancy related conditions, unspecified, first trimester
O26.92 Pregnancy related conditions, unspecified, second trimester
O26.93 Pregnancy related conditions, unspecified, third trimester
O29.011 Aspiration pneumonitis due to anesthesia during pregnancy, first trimester
O29.012 Aspiration pneumonitis due to anesthesia during pregnancy, second trimester
O29.013 Aspiration pneumonitis due to anesthesia during pregnancy, third trimester
O29.021 Pressure collapse of lung due to anesthesia during pregnancy, first trimester
O29.022 Pressure collapse of lung due to anesthesia during pregnancy, second trimester
O29.023 Pressure collapse of lung due to anesthesia during pregnancy, third trimester
O29.091 Other pulmonary complications of anesthesia during pregnancy, first trimester
O29.092 Other pulmonary complications of anesthesia during pregnancy, second trimester
O29.093 Other pulmonary complications of anesthesia during pregnancy, third trimester
O29.111 Cardiac arrest due to anesthesia during pregnancy, first trimester
O29.112 Cardiac arrest due to anesthesia during pregnancy, second trimester
O29.113 Cardiac arrest due to anesthesia during pregnancy, third trimester
O29.121 Cardiac failure due to anesthesia during pregnancy, first trimester
O29.122 Cardiac failure due to anesthesia during pregnancy, second trimester
O29.123 Cardiac failure due to anesthesia during pregnancy, third trimester
O29.191 Other cardiac complications of anesthesia during pregnancy, first trimester
O29.192 Other cardiac complications of anesthesia during pregnancy, second trimester
O29.193 Other cardiac complications of anesthesia during pregnancy, third trimester
O29.211 Cerebral anoxia due to anesthesia during pregnancy, first trimester
O29.212 Cerebral anoxia due to anesthesia during pregnancy, second trimester
O29.213 Cerebral anoxia due to anesthesia during pregnancy, third trimester
O29.291 Other central nervous system complications of anesthesia during pregnancy, first trimester
O29.292 Other central nervous system complications of anesthesia during pregnancy, second trimester
O29.293 Other central nervous system complications of anesthesia during pregnancy, third trimester
O29.31 Toxic reaction to local anesthesia during pregnancy, first trimester
O29.32 Toxic reaction to local anesthesia during pregnancy, second trimester
O29.33 Toxic reaction to local anesthesia during pregnancy, third trimester
O29.41 Spinal and epidural anesthesia induced headache during pregnancy, first trimester
O29.42 Spinal and epidural anesthesia induced headache during pregnancy, second trimester
O29.43 Spinal and epidural anesthesia induced headache during pregnancy, third trimester
O29.51 Other complications of spinal and epidural anesthesia during pregnancy, first trimester
O29.52 Other complications of spinal and epidural anesthesia during pregnancy, second trimester
O29.53 Other complications of spinal and epidural anesthesia during pregnancy, third trimester
O29.61 Failed or difficult intubation for anesthesia during pregnancy, first trimester
O29.62 Failed or difficult intubation for anesthesia during pregnancy, second trimester
O29.63 Failed or difficult intubation for anesthesia during pregnancy, third trimester
O29.81 Other complications of anesthesia during pregnancy, first trimester
O29.82 Other complications of anesthesia during pregnancy, second trimester
O29.83 Other complications of anesthesia during pregnancy, third trimester
O29.91 Unspecified complication of anesthesia during pregnancy, first trimester
O29.92 Unspecified complication of anesthesia during pregnancy, second trimester
O29.93 Unspecified complication of anesthesia during pregnancy, third trimester
O30.01 Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester
O30.02 Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester
O30.03 Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester
O30.011 Twin pregnancy, monochorionic/monoamniotic, first trimester
O30.012 Twin pregnancy, monochorionic/monoamniotic, second trimester
O30.013 Twin pregnancy, monochorionic/monoamniotic, third trimester
O30.031 Twin pregnancy, monochorionic/diamniotic, first trimester
O30.032 Twin pregnancy, monochorionic/diamniotic, second trimester
O30.033 Twin pregnancy, monochorionic/diamniotic, third trimester
O30.04 Twin pregnancy, dichorionic/diamniotic, first trimester
O30.042 Twin pregnancy, dichorionic/diamniotic, second trimester
O30.043 Twin pregnancy, dichorionic/diamniotic, third trimester
O30.091 Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester
O30.092 Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester
O30.093  Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester
O30.101  Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester
O30.102  Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester
O30.103  Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester
O30.111  Triplet pregnancy with two or more monochorionic fetuses, first trimester
O30.112  Triplet pregnancy with two or more monochorionic fetuses, second trimester
O30.113  Triplet pregnancy with two or more monochorionic fetuses, third trimester
O30.121  Triplet pregnancy with two or more monoamniotic fetuses, first trimester
O30.122  Triplet pregnancy with two or more monoamniotic fetuses, second trimester
O30.123  Triplet pregnancy with two or more monoamniotic fetuses, third trimester
O30.131  Triplet pregnancy, trichorionic/triamniotic, first trimester
O30.132  Triplet pregnancy, trichorionic/triamniotic, second trimester
O30.133  Triplet pregnancy, trichorionic/triamniotic, third trimester
O30.139  Triplet pregnancy, trichorionic/triamniotic, unspecified trimester
O30.191  Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester
O30.192  Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester
O30.193  Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester
O30.201  Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester
O30.202  Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester
O30.203  Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester
O30.211  Quadruplet pregnancy with two or more monochorionic fetuses, first trimester
O30.212  Quadruplet pregnancy with two or more monochorionic fetuses, second trimester
O30.213  Quadruplet pregnancy with two or more monochorionic fetuses, third trimester
O30.221  Quadruplet pregnancy with two or more monoamniotic fetuses, first trimester
O30.222  Quadruplet pregnancy with two or more monoamniotic fetuses, second trimester
O30.223  Quadruplet pregnancy with two or more monoamniotic fetuses, third trimester
O30.231  Quadruplet pregnancy, quadrachorionic/quadra-amniotic, first trimester
O30.232  Quadruplet pregnancy, quadrachorionic/quadra-amniotic, second trimester
O30.233  Quadruplet pregnancy, quadrachorionic/quadra-amniotic, third trimester
O30.239  Quadruplet pregnancy, quadrachorionic/quadra-amniotic, unspecified trimester
O30.291  Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester
O30.292  Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester
O30.293  Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester
O30.801  Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, first trimester
O30.802  Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, second trimester
O30.803  Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, third trimester
O30.811  Other specified multiple gestation with two or more monochorionic fetuses, first trimester

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O30.812 Other specified multiple gestation with two or more monochorionic fetuses, second trimester
O30.813 Other specified multiple gestation with two or more monochorionic fetuses, third trimester
O30.821 Other specified multiple gestation with two or more monoamniotic fetuses, first trimester
O30.822 Other specified multiple gestation with two or more monoamniotic fetuses, second trimester
O30.823 Other specified multiple gestation with two or more monoamniotic fetuses, third trimester
O30.831 Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, first trimester
O30.832 Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, second trimester
O30.833 Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, third trimester
O30.839 Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, unspecified trimester
O30.891 Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, first trimester
O30.892 Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, second trimester
O30.893 Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, third trimester
O30.91 Multiple gestation, unspecified, first trimester
O30.92 Multiple gestation, unspecified, second trimester
O30.93 Multiple gestation, unspecified, third trimester
O31.11x0 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, not applicable or unspecified
O31.11x1 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 1
O31.11x2 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 2
O31.11x3 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 3
O31.11x4 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 4
O31.11x5 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 5
O31.11x9 Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, other fetus
O31.12x0 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, not applicable or unspecified
O31.12x1 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 1
O31.12x2 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 2
O31.12x3 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 3
O31.12x4 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 4
O31.12x5 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 5
O31.12x9 Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, other fetus
O31.13x0 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, not applicable or unspecified
O31.13x1 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 1
O31.13x2 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 2
O31.13x3 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 3
O31.13x4 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 4
O31.13x5 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 5
O31.13x9 Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, other fetus
O31.21x0 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, not applicable or unspecified
O31.21x1 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 1
O31.21x2 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 2
O31.21x3 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 3
O31.21x4 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 4
O31.21x5 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 5
O31.21x9 Continuing pregnancy after intrauterine death of one fetus or more, first trimester, other fetus
O31.22x0 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, not applicable or unspecified
O31.22x1 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 1
O31.22x2 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 2
O31.22x3 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 3
O31.22x4 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 4
O31.22x5 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 5
O31.22x9 Continuing pregnancy after intrauterine death of one fetus or more, second trimester, other fetus
O31.23x0 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, not applicable or unspecified
O31.23x1 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 1
O31.23x2 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 2
O31.23x3 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 3
O31.23x4 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 4
O31.23x5 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 5
O31.23x9 Continuing pregnancy after intrauterine death of one fetus or more, third trimester, other fetus
O31.31x0 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, not applicable or unspecified
O31.31x1 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 1
O31.31x2 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 2
O31.31x3 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 3
O31.31x4 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 4
O31.31x5 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 5
O31.31x9 Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, other fetus
O31.32x0 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, not applicable or unspecified
O31.32x1 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 1
O31.32x2 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 2
O31.32x3 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 3
O31.32x4 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 4
O31.32x5 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 5
O31.32x9 Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, other fetus
O31.33x0 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, not applicable or unspecified
O31.33x1 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 1
O31.33x2 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 2
O31.33x3 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 3
O31.33x4 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 4
O31.33x5 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 5
O31.33x9 Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, other fetus
O31.8x10 Other complications specific to multiple gestation, first trimester, not applicable or unspecified
O31.8x11 Other complications specific to multiple gestation, first trimester, fetus 1
O31.8x12 Other complications specific to multiple gestation, first trimester, fetus 2
O31.8x13 Other complications specific to multiple gestation, first trimester, fetus 3
O31.8x14 Other complications specific to multiple gestation, first trimester, fetus 4
O31.8x15 Other complications specific to multiple gestation, first trimester, fetus 5
O31.8x19 Other complications specific to multiple gestation, first trimester, other fetus
O31.8x20 Other complications specific to multiple gestation, second trimester, not applicable or unspecified
O31.8x21  Other complications specific to multiple gestation, second trimester, fetus 1
O31.8x22  Other complications specific to multiple gestation, second trimester, fetus 2
O31.8x23  Other complications specific to multiple gestation, second trimester, fetus 3
O31.8x24  Other complications specific to multiple gestation, second trimester, fetus 4
O31.8x25  Other complications specific to multiple gestation, second trimester, fetus 5
O31.8x29  Other complications specific to multiple gestation, second trimester, other fetus
O31.8x30  Other complications specific to multiple gestation, third trimester, not applicable or unspecified
O31.8x31  Other complications specific to multiple gestation, third trimester, fetus 1
O31.8x32  Other complications specific to multiple gestation, third trimester, fetus 2
O31.8x33  Other complications specific to multiple gestation, third trimester, fetus 3
O31.8x34  Other complications specific to multiple gestation, third trimester, fetus 4
O31.8x35  Other complications specific to multiple gestation, third trimester, fetus 5
O31.8x39  Other complications specific to multiple gestation, third trimester, other fetus
O32.1xx1  Maternal care for breech presentation, fetus 1
O32.1xx2  Maternal care for breech presentation, fetus 2
O32.1xx3  Maternal care for breech presentation, fetus 3
O32.1xx4  Maternal care for breech presentation, fetus 4
O32.1xx5  Maternal care for breech presentation, fetus 5
O32.1xx9  Maternal care for breech presentation, other fetus
O32.2xx1  Maternal care for transverse and oblique lie, fetus 1
O32.2xx2  Maternal care for transverse and oblique lie, fetus 2
O32.2xx3  Maternal care for transverse and oblique lie, fetus 3
O32.2xx4  Maternal care for transverse and oblique lie, fetus 4
O32.2xx5  Maternal care for transverse and oblique lie, fetus 5
O32.2xx9  Maternal care for transverse and oblique lie, other fetus
O32.3xx1  Maternal care for face, brow and chin presentation, fetus 1
O32.3xx2  Maternal care for face, brow and chin presentation, fetus 2
O32.3xx3  Maternal care for face, brow and chin presentation, fetus 3
O32.3xx4  Maternal care for face, brow and chin presentation, fetus 4
O32.3xx5  Maternal care for face, brow and chin presentation, fetus 5
O32.3xx9  Maternal care for face, brow and chin presentation, other fetus
O32.4xx1  Maternal care for high head at term, fetus 1
O32.4xx2  Maternal care for high head at term, fetus 2
O32.4xx3  Maternal care for high head at term, fetus 3
O32.4xx4  Maternal care for high head at term, fetus 4
O32.4xx5  Maternal care for high head at term, fetus 5
O32.4xx9  Maternal care for high head at term, other fetus
O32.6xx1  Maternal care for compound presentation, fetus 1
O32.6xx2  Maternal care for compound presentation, fetus 2
O32.6xx3  Maternal care for compound presentation, fetus 3
O32.6xx4  Maternal care for compound presentation, fetus 4
O32.6xx5  Maternal care for compound presentation, fetus 5
O32.6xx9  Maternal care for compound presentation, other fetus
O32.8xx1  Maternal care for other malpresentation of fetus, fetus 1
O32.8xx2  Maternal care for other malpresentation of fetus, fetus 2
O32.8xx3  Maternal care for other malpresentation of fetus, fetus 3
O32.8xx4  Maternal care for other malpresentation of fetus, fetus 4
O32.8xx5  Maternal care for other malpresentation of fetus, fetus 5
O32.8xx9  Maternal care for other malpresentation of fetus, other fetus
O32.9xx1  Maternal care for malpresentation of fetus, unspecified, fetus 1
O32.9xx2  Maternal care for malpresentation of fetus, unspecified, fetus 2
O32.9xx3  Maternal care for malpresentation of fetus, unspecified, fetus 3
O32.9xx4  Maternal care for malpresentation of fetus, unspecified, fetus 4

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O32.9xx5  Maternal care for malpresentation of fetus, unspecified, fetus 5
O33.0  Maternal care for disproportion due to deformity of maternal pelvic bones
O33.1  Maternal care for disproportion due to generally contracted pelvis
O33.2  Maternal care for disproportion due to inlet contraction of pelvis
O33.3xx1  Maternal care for disproportion due to outlet contraction of pelvis, fetus 1
O33.3xx2  Maternal care for disproportion due to outlet contraction of pelvis, fetus 2
O33.3xx4  Maternal care for disproportion due to outlet contraction of pelvis, fetus 4
O33.3xx5  Maternal care for disproportion due to outlet contraction of pelvis, fetus 5
O33.3xx9  Maternal care for disproportion due to outlet contraction of pelvis, other fetus
O33.4xx1  Maternal care for disproportion of mixed maternal and fetal origin, fetus 1
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O33.4xx9  Maternal care for disproportion of mixed maternal and fetal origin, other fetus
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O33.5xx9  Maternal care for disproportion due to unusually large fetus, other fetus
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O33.7XX9  Maternal care for disproportion due to other fetal deformities, other fetus
O34.211  Maternal care for low transverse scar from previous cesarean delivery
O34.212  Maternal care for vertical scar from previous cesarean delivery
O34.01  Maternal care for unspecified congenital malformation of uterus, first trimester
O34.02  Maternal care for unspecified congenital malformation of uterus, second trimester
O34.03  Maternal care for unspecified congenital malformation of uterus, third trimester
O34.11  Maternal care for benign tumor of corpus uteri, first trimester
O34.12  Maternal care for benign tumor of corpus uteri, second trimester
O34.13  Maternal care for benign tumor of corpus uteri, third trimester
O34.21  Maternal care for scar from previous cesarean delivery
O34.29  Maternal care due to uterine scar from other previous surgery
O34.31  Maternal care for cervical incompetence, first trimester
O34.32  Maternal care for cervical incompetence, second trimester
O34.33  Maternal care for cervical incompetence, third trimester
O34.41  Maternal care for other abnormalities of cervix, first trimester
O34.42  Maternal care for other abnormalities of cervix, second trimester
O34.43  Maternal care for other abnormalities of cervix, third trimester
O34.511  Maternal care for incarceration of gravid uterus, first trimester
O34.512  Maternal care for incarceration of gravid uterus, second trimester
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O41.1024 Infection of amniotic sac and membranes, unspecified, second trimester, fetus 4
O41.1025 Infection of amniotic sac and membranes, unspecified, second trimester, fetus 5
O41.1029 Infection of amniotic sac and membranes, unspecified, second trimester, other fetus
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O41.1034 Infection of amniotic sac and membranes, unspecified, third trimester, fetus 4
O41.1035 Infection of amniotic sac and membranes, unspecified, third trimester, fetus 5
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046.013 Antepartum hemorrhage with afibrinogenemia, third trimester
046.021 Antepartum hemorrhage with disseminated intravascular coagulation, first trimester
046.022 Antepartum hemorrhage with disseminated intravascular coagulation, second trimester
046.023 Antepartum hemorrhage with disseminated intravascular coagulation, third trimester
046.091 Antepartum hemorrhage with other coagulation defect, first trimester
046.092 Antepartum hemorrhage with other coagulation defect, second trimester
046.093 Antepartum hemorrhage with other coagulation defect, third trimester
046.8x1 Other antepartum hemorrhage, first trimester
046.8x2 Other antepartum hemorrhage, second trimester
046.8x3 Other antepartum hemorrhage, third trimester
046.91 Antepartum hemorrhage, unspecified, first trimester
046.92 Antepartum hemorrhage, unspecified, second trimester
046.93 Antepartum hemorrhage, unspecified, third trimester
047.02 False labor before 37 completed weeks of gestation, second trimester
047.03 False labor before 37 completed weeks of gestation, third trimester
047.1 False labor at or after 37 completed weeks of gestation
048.0 Post-term pregnancy
048.1 Prolonged pregnancy
060.02 Preterm labor without delivery, second trimester
060.03 Preterm labor without delivery, third trimester
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060.10x2 Preterm labor with preterm delivery, unspecified trimester, fetus 2
060.10x3 Preterm labor with preterm delivery, unspecified trimester, fetus 3
060.10x4 Preterm labor with preterm delivery, unspecified trimester, fetus 4
060.10x5 Preterm labor with preterm delivery, unspecified trimester, fetus 5
060.10x9 Preterm labor with preterm delivery, unspecified trimester, other fetus
060.12x1 Preterm labor second trimester with preterm delivery second trimester, fetus 1
060.12x2 Preterm labor second trimester with preterm delivery second trimester, fetus 2
060.12x3 Preterm labor second trimester with preterm delivery second trimester, fetus 3
060.12x4 Preterm labor second trimester with preterm delivery second trimester, fetus 4
060.12x5 Preterm labor second trimester with preterm delivery second trimester, fetus 5
060.12x9 Preterm labor second trimester with preterm delivery second trimester, other fetus
060.13x0 Preterm labor second trimester with preterm delivery third trimester, not applicable or unspecified
060.13x1 Preterm labor second trimester with preterm delivery third trimester, fetus 1
060.13x2 Preterm labor second trimester with preterm delivery third trimester, fetus 2
060.13x3 Preterm labor second trimester with preterm delivery third trimester, fetus 3
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O64.8xx9 Obstructed labor due to other malposition and malpresentation, other fetus
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O64.9xx3 Obstructed labor due to malposition and malpresentation, unspecified, fetus 3
O64.9xx4 Obstructed labor due to malposition and malpresentation, unspecified, fetus 4
O64.9xx5 Obstructed labor due to malposition and malpresentation, unspecified, fetus 5
O65.0 Obstructed labor due to deformed pelvis
O65.1 Obstructed labor due to generally contracted pelvis
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O65.3 Obstructed labor due to pelvic outlet and mid-cavity contraction
O65.8 Obstructed labor due to other maternal pelvic abnormalities
O65.9 Obstructed labor due to maternal pelvic abnormality, unspecified
O66.2 Obstructed labor due to unusually large fetus
O66.6 Obstructed labor due to other multiple fetuses
O67.0 Intrapartum hemorrhage with coagulation defect
O67.8 Other intrapartum hemorrhage
O68 Labor and delivery complicated by abnormality of fetal acid-base balance
O75.2 Pyrexia during labor, not elsewhere classified
O75.3 Other infection during labor
O75.5 Delayed delivery after artificial rupture of membranes
O75.89 Other specified complications of labor and delivery
O76 Abnormality in fetal heart rate and rhythm complicating labor and delivery
O77.0 Labor and delivery complicated by meconium in amniotic fluid
O77.1 Fetal stress in labor or delivery due to drug administration
O77.8 Labor and delivery complicated by other evidence of fetal stress
O77.9 Labor and delivery complicated by fetal stress, unspecified
O86.11 Cervicitis following delivery
O86.13 Vaginitis following delivery
O86.19 Other infection of genital tract following delivery
O86.20 Urinary tract infection following delivery, unspecified
O86.21 Infection of kidney following delivery
O86.22 Infection of bladder following delivery
O86.29 Other urinary tract infection following delivery
O90.5 Postpartum thyroiditis
O90.6 Postpartum mood disturbance
O90.81 Anemia of the puerperium
O90.89 Other complications of the puerperium, not elsewhere classified
O98.011 Tuberculosis complicating pregnancy, first trimester
O98.012 Tuberculosis complicating pregnancy, second trimester
O98.013 Tuberculosis complicating pregnancy, third trimester
O98.02 Tuberculosis complicating childbirth
O98.03 Tuberculosis complicating the puerperium
O98.111 Syphilis complicating pregnancy, first trimester
O98.112 Syphilis complicating pregnancy, second trimester
O98.113 Syphilis complicating pregnancy, third trimester
O98.12 Syphilis complicating childbirth
O98.13 Syphilis complicating the puerperium
O98.211 Gonorrhea complicating pregnancy, first trimester
O98.212 Gonorrhea complicating pregnancy, second trimester
O98.213 Gonorrhea complicating pregnancy, third trimester
O98.22 Gonorrhea complicating childbirth
O98.23 Gonorrhea complicating the puerperium
O98.311 Other infections with a predominantly sexual mode of transmission complicating pregnancy, first trimester
O98.312 Other infections with a predominantly sexual mode of transmission complicating pregnancy, second trimester
O98.313 Other infections with a predominantly sexual mode of transmission complicating pregnancy, third trimester
O98.32 Other infections with a predominantly sexual mode of transmission complicating childbirth
O98.33 Other infections with a predominantly sexual mode of transmission complicating the puerperium
O98.411 Viral hepatitis complicating pregnancy, first trimester
O98.412 Viral hepatitis complicating pregnancy, second trimester
O98.413 Viral hepatitis complicating pregnancy, third trimester
O98.42 Viral hepatitis complicating childbirth
O98.43 Viral hepatitis complicating the puerperium
O98.511 Other viral diseases complicating pregnancy, first trimester
O98.512 Other viral diseases complicating pregnancy, second trimester
O98.513 Other viral diseases complicating pregnancy, third trimester
O98.52 Other viral diseases complicating childbirth
O98.53 Other viral diseases complicating the puerperium
O98.611 Protozoal diseases complicating pregnancy, first trimester
O98.612 Protozoal diseases complicating pregnancy, second trimester
O98.613 Protozoal diseases complicating pregnancy, third trimester
O98.62 Protozoal diseases complicating childbirth
O98.63 Protozoal diseases complicating the puerperium
O98.711 Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester
O98.712 Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester
O98.713 Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester
O98.72 Human immunodeficiency virus [HIV] disease complicating childbirth
O98.73 Human immunodeficiency virus [HIV] disease complicating the puerperium
O98.811 Other maternal infectious and parasitic diseases complicating pregnancy, first trimester
O98.812 Other maternal infectious and parasitic diseases complicating pregnancy, second trimester
O98.813 Other maternal infectious and parasitic diseases complicating pregnancy, third trimester
O98.82 Other maternal infectious and parasitic diseases complicating childbirth
O98.83 Other maternal infectious and parasitic diseases complicating the puerperium
O98.911 Unspecified maternal infectious and parasitic disease complicating pregnancy, first trimester
O98.912 Unspecified maternal infectious and parasitic disease complicating pregnancy, second trimester
O98.913 Unspecified maternal infectious and parasitic disease complicating pregnancy, third trimester
O98.92 Unspecified maternal infectious and parasitic disease complicating childbirth
O98.93 Unspecified maternal infectious and parasitic disease complicating the puerperium
O99.011 Anemia complicating pregnancy, first trimester
O99.012 Anemia complicating pregnancy, second trimester
O99.013 Anemia complicating pregnancy, third trimester
O99.02 Anemia complicating childbirth
O99.03 Anemia complicating the puerperium
O99.111 Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, first trimester
O99.112 Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, second trimester
O99.113 Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, third trimester
O99.12 Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth
O99.13 Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating the puerperium
O99.211 Obesity complicating pregnancy, first trimester
O99.212 Obesity complicating pregnancy, second trimester
O99.213 Obesity complicating pregnancy, third trimester
O99.214 Obesity complicating childbirth
O99.215 Obesity complicating the puerperium
O99.281 Endocrine, nutritional and metabolic diseases complicating pregnancy, first trimester
O99.282 Endocrine, nutritional and metabolic diseases complicating pregnancy, second trimester
O99.283 Endocrine, nutritional and metabolic diseases complicating pregnancy, third trimester
O99.284 Endocrine, nutritional and metabolic diseases complicating childbirth
O99.285 Endocrine, nutritional and metabolic diseases complicating the puerperium
O99.311 Alcohol use complicating pregnancy, first trimester
O99.312 Alcohol use complicating pregnancy, second trimester
O99.313 Alcohol use complicating pregnancy, third trimester
O99.314 Alcohol use complicating childbirth
O99.315 Alcohol use complicating the puerperium
O99.321 Drug use complicating pregnancy, first trimester
O99.322 Drug use complicating pregnancy, second trimester
O99.323 Drug use complicating pregnancy, third trimester
O99.324 Drug use complicating childbirth
O99.325 Drug use complicating the puerperium
O99.331 Smoking (tobacco) complicating pregnancy, first trimester
O99.332 Smoking (tobacco) complicating pregnancy, second trimester
O99.333 Smoking (tobacco) complicating pregnancy, third trimester
O99.334 Smoking (tobacco) complicating childbirth
O99.335 Smoking (tobacco) complicating the puerperium
O99.341 Other mental disorders complicating pregnancy, first trimester
O99.342 Other mental disorders complicating pregnancy, second trimester
O99.343 Other mental disorders complicating pregnancy, third trimester
O99.344 Other mental disorders complicating childbirth
O99.345 Other mental disorders complicating the puerperium
O99.351 Diseases of the nervous system complicating pregnancy, first trimester
O99.352 Diseases of the nervous system complicating pregnancy, second trimester
O99.353 Diseases of the nervous system complicating pregnancy, third trimester
O99.354 Diseases of the nervous system complicating childbirth
O99.355 Diseases of the nervous system complicating the puerperium
O99.411 Diseases of the circulatory system complicating pregnancy, first trimester
O99.412 Diseases of the circulatory system complicating pregnancy, second trimester
O99.413 Diseases of the circulatory system complicating pregnancy, third trimester
O99.42 Diseases of the circulatory system complicating childbirth
O99.43 Diseases of the circulatory system complicating the puerperium
O99.511 Diseases of the respiratory system complicating pregnancy, first trimester
O99.512 Diseases of the respiratory system complicating pregnancy, second trimester
O99.513 Diseases of the respiratory system complicating pregnancy, third trimester
O99.52 Diseases of the respiratory system complicating childbirth
O99.53 Diseases of the respiratory system complicating the puerperium
O99.611 Diseases of the digestive system complicating pregnancy, first trimester
O99.612 Diseases of the digestive system complicating pregnancy, second trimester
O99.613 Diseases of the digestive system complicating pregnancy, third trimester
O99.62 Diseases of the digestive system complicating childbirth
O99.63 Diseases of the digestive system complicating the puerperium
O99.711 Diseases of the skin and subcutaneous tissue complicating pregnancy, first trimester
O99.712 Diseases of the skin and subcutaneous tissue complicating pregnancy, second trimester
O99.713 Diseases of the skin and subcutaneous tissue complicating pregnancy, third trimester
O99.72  Diseases of the skin and subcutaneous tissue complicating childbirth
O99.73  Diseases of the skin and subcutaneous tissue complicating the puerperium
O99.810 Abnormal glucose complicating pregnancy
O99.814 Abnormal glucose complicating childbirth
O99.815 Abnormal glucose complicating the puerperium
O99.820 Streptococcus B carrier state complicating pregnancy
O99.824 Streptococcus B carrier state complicating childbirth
O99.825 Streptococcus B carrier state complicating the puerperium
O99.830 Other infection carrier state complicating pregnancy
O99.834 Other infection carrier state complicating childbirth
O99.835 Other infection carrier state complicating the puerperium
O99.841 Bariatric surgery status complicating pregnancy, first trimester
O99.842 Bariatric surgery status complicating pregnancy, second trimester
O99.843 Bariatric surgery status complicating pregnancy, third trimester
O99.844 Bariatric surgery status complicating childbirth
O99.845 Bariatric surgery status complicating the puerperium
O9A.111 Malignant neoplasm complicating pregnancy, first trimester
O9A.112 Malignant neoplasm complicating pregnancy, second trimester
O9A.113 Malignant neoplasm complicating pregnancy, third trimester
O9A.12 Malignant neoplasm complicating childbirth
O9A.13 Malignant neoplasm complicating the puerperium
O9A.211 Injury, poisoning and certain other consequences of external causes complicating pregnancy, first trimester
O9A.212 Injury, poisoning and certain other consequences of external causes complicating pregnancy, second trimester
O9A.213 Injury, poisoning and certain other consequences of external causes complicating pregnancy, third trimester
O9A.22 Injury, poisoning and certain other consequences of external causes complicating childbirth
O9A.23 Injury, poisoning and certain other consequences of external causes complicating the puerperium
O9A.311 Physical abuse complicating pregnancy, first trimester
O9A.312 Physical abuse complicating pregnancy, second trimester
O9A.313 Physical abuse complicating pregnancy, third trimester
O9A.32 Physical abuse complicating childbirth
O9A.33 Physical abuse complicating the puerperium
O9A.411 Sexual abuse complicating pregnancy, first trimester
O9A.412 Sexual abuse complicating pregnancy, second trimester
O9A.413 Sexual abuse complicating pregnancy, third trimester
O9A.42 Sexual abuse complicating childbirth
O9A.43 Sexual abuse complicating the puerperium
O9A.511 Psychological abuse complicating pregnancy, first trimester
O9A.512 Psychological abuse complicating pregnancy, second trimester
O9A.513 Psychological abuse complicating pregnancy, third trimester
O9A.52 Psychological abuse complicating childbirth
O9A.53 Psychological abuse complicating the puerperium
Z33.1 Pregnant state, incidental
Z33.3 Pregnant state, gestational carrier
Z34.00 Encounter for supervision of normal first pregnancy, unspecified trimester
Z34.01 Encounter for supervision of normal first pregnancy, first trimester
Z34.02 Encounter for supervision of normal first pregnancy, second trimester
Z34.03 Encounter for supervision of normal first pregnancy, third trimester
Z34.80 Encounter for supervision of other normal pregnancy, unspecified trimester
Z34.81 Encounter for supervision of other normal pregnancy, first trimester
Z34.82 Encounter for supervision of other normal pregnancy, second trimester
Z34.83  Encounter for supervision of other normal pregnancy, third trimester
Z34.91  Encounter for supervision of normal pregnancy, unspecified, first trimester
Z34.92  Encounter for supervision of normal pregnancy, unspecified, second trimester
Z34.93  Encounter for supervision of normal pregnancy, unspecified, third trimester

**REVISIONS**

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<td><strong>Description Section updated</strong></td>
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<td>• Added the following not medically necessary statement:</td>
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<td>&quot;A. Monitoring of sedation by an anesthesia provider for gastrointestinal</td>
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<tr>
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<td>endoscopies, CT scans, MRIs, cardiac catheterizations, and PTCAs is</td>
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<td>generally considered not medically necessary.&quot;</td>
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<td>• Rephased &quot;sleep apnea&quot; to &quot;9. Patients with increased risk for airway</td>
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<td>obstruction due to anatomic variation including a history of sleep</td>
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<td>apnea or stridor, dysmorphic facial features, and certain oral (e.g.,</td>
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<td>macroglossia), neck (e.g., neck mass), and jaw (e.g., micrognathia)</td>
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<td>abnormalities.&quot;</td>
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<td>• Added the following medically necessary indications in B.:</td>
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<td>&quot;7. Prolonged or therapeutic endoscopic procedures requiring deep</td>
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<td>sedation, or</td>
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<td>&quot;8. Acutely agitated uncooperative patients, or &quot;</td>
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<td>• Added the following not medically necessary indication:</td>
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<td>&quot;C. Use of monitored anesthesia care is considered not medically necessary</td>
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<td>for procedures in patients at average risk related to use of anesthesia</td>
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<td>and sedation.&quot;</td>
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<td><strong>Rationale Section added</strong></td>
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<td><strong>In Diagnosis Section:</strong></td>
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<td>• Added the following Gastrointestinal diagnosis code ranges: 152.0-152.9,</td>
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<td>576.9, 577.0-577.9, V12.72, V16.0, V18.51, V76.51</td>
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<td>• Converted diagnosis codes to code ranges.</td>
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<td><strong>References Section updated</strong></td>
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<td>01-28-2011</td>
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<td>• Added the word &quot;HOWEVER&quot; between Item A and Item B.</td>
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<td>• No change in the policy language was made.</td>
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<td><strong>In Coding Section:</strong></td>
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<td>• Added, &quot;...to include ASCs&quot; to read, &quot;Unusual anesthesia is an additional</td>
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<td>level of services that are applicable to endoscopies to address those</td>
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<td>patients who receive services in a hospital setting, to include ASCs.</td>
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<td>Claims for this level should be billed using 00740 or 00810 with</td>
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<td>modifier 23 describing unusual anesthesia only when performed as inpatient</td>
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<td>or outpatient at a hospital setting, to include ASCs.&quot;</td>
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<td>02-05-2014</td>
<td><strong>Policy reviewed.</strong></td>
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<td>10-01-2015</td>
<td><strong>In Coding section:</strong></td>
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<td>• Added ICD-10 Diagnosis <em>(Effective October 1, 2014)</em></td>
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<td>07-01-2016</td>
<td>**Published 05-18-2016. Effective 10-01-2015 with ICD-10 coding</td>
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<td>• Added ICD-10 Code: E66.01</td>
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<td>07-01-2016</td>
<td><strong>Published 05-25-2016. Effective 07-01-2016.</strong></td>
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<td>**Title revised from &quot;Monitored and General Anesthesia Services&quot; to &quot;Moni-</td>
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<td>tored Anesthesia Care**</td>
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<td><strong>Description section updated</strong></td>
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<td><strong>In Policy section:</strong></td>
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*Contains Public Information*
REVISIONS

- Removed "Monitoring of sedation by an anesthesia provider for gastrointestinal endoscopies, CT scans, MRIs, cardiac catheterizations, and PTCAs is generally considered not medically necessary. HOWEVER,"
  - In Item A removed "or general anesthesia" and "billed with any of the following conditions:" and added "Use of" "bronchoscopy, interventional pain procedures" and "there is documentation by the proceduralist and anesthesiologist that specific risk factors or significant medical conditions are present. Those risk factors or significant medical conditions include any of the following:" to read "Use of monitored anesthesia care may be considered medically necessary for gastrointestinal endoscopy, bronchoscopy, interventional pain procedures, CT scans, MRIs, cardiac catheterization and PTCAs when there is documentation by the proceduralist and anesthesiologist that specific risk factors or significant medical conditions are present. Those risk factors or significant medical conditions include any of the following:"  
  - Revised Item A 1 to read "Increased risk for complications due to severe comorbidity (ASA P3* or greater)"
  - Revised Item A 2 to read "Morbid obesity (BMI [body mass index] >40)"
  - Revised Item A 3 to read "Documented sleep apnea"
  - Added Item A 4 "Inability to follow simple commands (cognitive dysfunction, intoxication, or psychological impairment)"
  - Added Item A 5 "Spasticity or movement disorder complicating procedure"
  - In Item A 6 removed "alcohol" and revised to read "History or anticipated intolerance to standard sedatives, such as:
  - a. Opioid dependent
  - b. Benzodiazepine dependent"
  - Added Item A 7 "Patients with active medical problems related to drug or alcohol abuse"
  - Revised Item A 8 to read "Patients younger than 13 years or 70 years or older"
  - Revised Item A 9 to read "Patients who are pregnant"
  - Revised Item A 10 to read "Patients with increased risk for airway obstruction due to anatomic variation including a history of such as:
  - a. History of stridor
  - b. Dysmorphic facial features
  - c. Oral abnormalities (eg, macroglossia)
  - d. Neck abnormalities (eg, neck mass)
  - e. Jaw abnormalities (eg, micrognathia)"
  - In Item A 12 added "gastrointestinal" and "(See Policy Guidelines)" to read "Prolonged or therapeutic gastrointestinal endoscopic procedures requiring deep sedation (See Policy Guidelines)"
  - Added asterisk reference of "* American Society of Anesthesiologists (ASA) physical status classification system for assessing a patient before surgery:
  P1 – A normal, healthy patient
  P2 – A patient with mild systemic disease
  P3 – A patient with severe systemic disease
  P4 – A patient with severe systemic disease that is a constant threat to life
  P5 – A moribund patient who is not expected to survive without the operation
  P6 – A declared brain-dead patient whose organs are being harvested"
  - In Item B added "bronchoscopy, interventional pain procedures" to read "Use of monitored anesthesia care is considered not medically necessary for gastrointestinal endoscopy, bronchoscopy, interventional pain procedures, CT scans, MRIs, cardiac catheterization and PTCAs in patients at average risk related to use of anesthesia and sedation."

Policy Guidelines added
Rationale section updated
In Coding section:
### REVISIONS

- Updated Coding notations.
- Added ICD-10 Codes: C15.3, C15.4, C15.5, C15.8, C16.0, C16.1, C16.2, C16.3, C16.4, C16.5, C16.6, C16.8, C34.01, C34.02, C34.11, C34.12, C34.2, C34.31, C34.32, C34.81, C34.82, D14.31, D14.32

References updated

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<td>- In Item A removed &quot;gastrointestinal endoscopy&quot; to read &quot;Use of</td>
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<td>monitored anesthesia care may be considered medically necessary for</td>
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<td>bronchoscopy, interventional pain procedures, CT scans, MRIs, cardiac</td>
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<td>catheterization and PTCAs when there is documentation by the</td>
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<td>proceduralist and anesthesiologist that specific risk factors or</td>
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<td>significant medical conditions are present.&quot;</td>
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<td>- Removed Item A 12 &quot;Prolonged or therapeutic gastrointestinal</td>
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<td>endoscopic procedures requiring deep sedation (See Policy Guidelines)&quot;</td>
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<td>use of anesthesia and sedation.&quot;</td>
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<td>- Updated Policy Guidelines</td>
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### REVISIONS

Description section updated to remove information regarding endoscopy.

Rationale section updated to remove information regarding endoscopy.

In Coding section:

- Removed the following coding notation: "Unusual anesthesia is an additional level of services that are applicable to endoscopies to address those patients who receive services in a hospital setting, to include ASCs. Claims for this level should be billed using 00740 or 00810 with modifier 23 describing unusual anesthesia only when performed as inpatient or outpatient at a hospital setting, to include ASCs."

Reference section updated to remove information regarding endoscopy.

- **10-01-2017**

- **10-01-2018**

### REFERENCES


