

Technical Notes

Hospital-acquired Infections in Pennsylvania

Calendar Year 2005

The Pennsylvania Health Care Cost Containment Council
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OVERVIEW

In January of 2004, the Pennsylvania Health Care Cost Containment Council (PHC4) began to collect data on hospital-acquired infections (HAIs) confirmed by Pennsylvania hospitals. Data collection began with indwelling catheter-associated urinary tract infections, ventilator-associated pneumonia, central line-associated bloodstream infections, and surgical site infections for procedures related to orthopedic surgery, neurosurgery, and surgery associated with the circulatory system. The data collection requirements have been gradually expanded over a period of several quarters. As of January 1, 2006, hospitals are required to submit data on all hospital-acquired infections, except those associated with systemic infection and eye, ear, nose, throat, or mouth infection (including upper respiratory infections). See Appendix A for a summary of data collection requirements and their associated time frames.

This document, the *Technical Notes*, accompanies the *Hospital-acquired Infections in Pennsylvania* report, which provides hospital-specific data on hospital-acquired infections to the public. The report includes information on the HAIs that general acute care hospitals confirmed and reported for calendar year 2005. Information is provided for urinary tract infections, surgical site infections, pneumonias, bloodstream infections, and multiple infections that were contracted while in the hospital. The following measures are included:

- number of cases with and without hospital-acquired infections
- the hospital-acquired infection rate per 1,000 cases
- the number and percent of mortalities
- average length of stay in days
- average charge

Mortality, length of stay, and average charge information are not reported when there were fewer than five cases evaluated.

In designing the methodologies used to analyze and report the HAI data, PHC4 considered both sides of the on-going national debate regarding how, or whether, to risk adjust publicly reported HAI information. That is, should the illness level of a patient be considered when analyzing the data? One argument against risk-adjusting HAI data rests in the notion that we should all strive toward the goal of zero hospital-acquired infections. The reporting of actual, rather than risk-adjusted, numbers highlights actual results and serves to encourage root cause analysis of every patient who contracted an infection while in the hospital.

For this report, PHC4 addressed the concerns illuminated in the risk-adjustment debate in two ways. First, patients being treated for burns, undergoing organ transplants, or being treated for complications of an organ transplant were excluded from the report, because they may be at a greater risk of acquiring an infection while in a hospital. Second, hospital peer groups were created to ensure that hospitals offering similar types and complexity of services and treating a similar number of patients are displayed together.

When considering the risk-adjustment debate and its impact on the design of this report, it is important to note that the purpose of the report is to establish a baseline against which a hospital's future performance can be measured, rather than to compare hospitals to one another. Hospitals differ in terms of the volume and types of care provided and the completeness of infection reporting across hospitals may vary. For example, a low number of infections could mean that the hospital is doing an excellent job in preventing HAIs or that the hospital is underreporting their infection numbers to PHC4. Conversely, a hospital with a high number of infections might appear to be less effective at preventing HAIs or the hospital is doing a very good job of identifying and reporting infections.

The following pages of the *Technical Notes* describe the data collection process, the methodology of the analyses, and the development of the report format and presentation.

DATA COLLECTION

In developing the guidelines for HAI data submission, PHC4 adopted The Centers for Disease Control and Prevention (CDC) definition of a hospital-acquired infection: an infection is a localized or systemic condition that 1) results from adverse reaction to the presence of an infectious agent(s) or its toxin(s), and 2) was not present or incubating at the time of admission to the hospital. The CDC hospital-acquired infection surveillance system, known as the National Nosocomial Infections Surveillance System (NNIS), and the Patient Safety Component Protocol of the CDC National Healthcare Safety Network (NHSN) include 13 major site categories that define the hospital-acquired infection location. PHC4 expanded the list of 13 to include a category for multiple infections and to differentiate device related and non-device related infections. When a patient had more than one hospital-acquired infection, the patient is reported only once in the multiple infection category, rather than counting each of the individual infections. The HAI type is identified by a two-digit code (see Appendix B). Hospital-acquired infections are only required to be reported in the admission in which the HAI manifested; that is, readmissions due to a HAI are not required to be reported.

Hospitals are required to report HAI data for all inpatient discharges, except where the patient is one year of age or younger and/or the case is assigned to Major Diagnostic Category (MDC) 19, Mental Diseases and Disorders, or MDC 20, Alcohol/Drug Use and Alcohol/Drug-Induced Organic Mental Disorders. For Quarters 1 and 2 of 2005, hospitals were required to report the following types of HAIs:

- Indwelling catheter-associated urinary tract infections
- Ventilator-associated pneumonias
- Central line-associated bloodstream infections
- Surgical site infections related to (ICD.9.CM procedure codes are listed in Appendix D):
 - Circulatory system
 - Neurosurgery
 - Orthopedic surgery

For Quarter 3 of 2005, the requirements for reporting surgical site infections were expanded to include the following body systems (ICD.9.CM procedure codes are listed in Appendix D):

- Endocrine system
- Gastrointestinal system
- Genitourinary system
- Reproductive system
- Respiratory system
- Skin and soft tissue
- Hemic and lymphatic system

For Quarter 4 of 2005, the requirements were expanded to include non-device associated:

- Urinary tract infections
- Pneumonias
- Bloodstream infections

Hospital-acquired infection data are submitted to the Council by hospitals on a quarterly basis, as directed by the data submission requirements of Act 89 (currently Act 14). The data are submitted electronically using the *Pennsylvania Uniform Claims and Billing Form*, which includes administrative and billing data for each inpatient hospital admission. Hospital personnel enter one of the HAI codes into data field 21d on this form, when the relevant hospital-acquired infection is present.

Facilities are required to submit the data to the Council on a quarterly basis within 90 days from the last day of each quarter. Upon receipt of the data, media verification is performed to ensure data are submitted in a readable format. Reports are then generated and returned to each facility with an opportunity to correct any problems.

STUDY POPULATION

Although some hospitals chose to report more HAI data than required by PHC4, the study population for the hospital-specific HAI report included only those cases that were required to be reported in calendar year 2005. This included all inpatient discharges, except where the patient was one year of age or younger and/or the case was assigned to Major Diagnostic Category (MDC) 19, Mental Diseases and Disorders, or MDC 20, Alcohol/Drug Use and Alcohol/Drug-Induced Organic Mental Disorders. Cases from hospitals that closed during calendar year 2005 were not included in the report.

Of the cases that were required for HAI data collection, burn patients, organ transplant patients, and patients with complications of an organ transplant were excluded from the report. These patients, due to the nature of their condition may have been at a substantially higher risk of developing an HAI. See Appendix C for a list of the ICD.9.CM diagnosis and procedure codes that defined the exclusions. The following table provides statewide study population detail.

Table 1. Study Population Exclusions

| | Cases | |
|---|-----------|-------|
| | # | % |
| Total cases prior to exclusion | 1,814,804 | 100.0 |
| <i>Exclusions:</i> | | |
| <i>Cases from hospitals that closed in 2005</i> | 1,381 | 0.1 |
| <i>Cases ≤ 1 year of age and/or assigned to MDC 19 or 20¹</i> | 234,990 | 12.9 |
| <i>Burn patients²</i> | 2,373 | 0.1 |
| <i>Organ transplant or complications of transplant patients²</i> | 6,896 | 0.4 |
| <i>Total exclusions</i> | 245,640 | 13.5 |
| Total cases included in the analysis | 1,569,164 | 86.5 |

¹ Major Diagnostic Category (MDC) 19, Mental Diseases and Disorders, or MDC 20, Alcohol/Drug Use and Alcohol/Drug-Induced Organic Mental Disorders.

² See Appendix C for ICD.9.CM definitions.

HOSPITAL-ACQUIRED INFECTION MEASURES

The hospital-acquired infection report provides volume, mortality, length of stay, and average charge information for cases with and without HAIs. Information for reported HAIs is presented by HAI type—urinary tract infections, surgical site infections, pneumonias, bloodstream infections, and multiple infections—and at the aggregate level, all HAI types. The measures were calculated as described in the following section. If fewer than five cases were evaluated, the number of cases and the HAI rate are reported; however, mortality, length of stay, and average charge information are not reported.

Number of Cases

The report displays the total number of cases that met the study population criteria, the number of HAIs that met the reporting requirements and were confirmed by the hospitals, and the number of cases that did not have a HAI. The following table provides detail on the cases with HAIs that were excluded from the analysis.

Table 2. Exclusions from Number of Cases with HAIs

| | Hospital-acquired Infections | |
|--|------------------------------|-------|
| | # | % |
| Total number of HAIs prior to exclusions | 21,482 | 100.0 |
| <i>Exclusions:</i> | | |
| <i>Cases not meeting reporting requirements</i> | 1,996 | 9.3 |
| <i>Cases from hospitals that closed in 2005</i> | 3 | < 0.1 |
| <i>Burn patients¹</i> | 76 | 0.4 |
| <i>Organ transplants or complications of transplant patients¹</i> | 253 | 1.2 |
| <i>Total exclusions</i> | 2,328 | 10.8 |
| Total HAIs cases included in the analysis | 19,154 | 89.2 |

¹See Appendix C for ICD.9.CM definitions.

Hospital-acquired Infection Rate per 1,000 Cases

For all HAI rates, except surgical site infections, the rate per 1,000 cases was calculated by dividing the number of HAI cases by the total number of cases with and without a HAI infection and multiplying by 1,000. For example:

HAI rate:

$$\frac{19,154 \text{ (number of HAIs)}}{1,569,164 \text{ (total number of cases)}} \times 1,000 = 12.2 \text{ (total HAI rate)}$$

Urinary tract HAI rate:

$$\frac{11,265 \text{ (number of urinary tract HAIs)}}{1,569,164 \text{ (total number of cases)}} \times 1,000 = 7.2 \text{ (urinary tract HAI rate)}$$

For surgical site infections, only cases with one of the ICD.9.CM procedure codes in Appendix D relevant for the quarter in which the patient was discharged were included in the denominator.

Surgical site HAI rate:

$$\frac{1,615 \text{ (number of surgical site HAIs)}}{311,410 \text{ (total number of surgical cases)}} \times 1,000 = 5.2 \text{ (surgical site HAI rate)}$$

Number and Percent of Mortality

The number and percent mortality are the number and percent of patients who died during the hospitalization.

Average Length of Stay in Days

The average length of stay is the average of all patients' lengths of stay in the report group (e.g., hospital or peer group). The length of stay for each patient was calculated by subtracting the admission date from the discharge date.

Average Charge

The average charge was determined by averaging the individual charges for each patient in the report group (e.g., hospital or peer group). Charges do not reflect professional fees (e.g., physician fees) and do not reflect the amount that a hospital is reimbursed.

PEER GROUPS

The four peer groups identified in the report were developed so that infection data for hospitals with similar characteristics would be displayed together. Hospitals were grouped according to the complexity of services offered, the number of patients treated, and the percent of surgical procedures performed. The hospitals using total electronic hospital-acquired infection (HAI) surveillance during calendar year 2005 are not included in the four peer groups. Their information is presented separately. These hospitals were identified through hospitals' responses to PHC4's inquiry regarding the use of electronic surveillance.

Peer Group 1 includes hospitals that provide more complex services and treat a larger number of patients than Peer Groups 2, 3, and 4. Hospitals that are designated as trauma centers are included in this group. All of the hospitals in Peer Group 1 perform open-heart surgery. They treat an average of 25,800 patients a year. On average, 36 percent of these patients undergo surgical procedures.

Peer Group 2 includes hospitals that provide more complex services and treat a larger number of patients than Peer Groups 3 and 4. All of the hospitals in Peer Group 2 perform open-heart surgery. They treat an average of 11,000 patients a year. On average, 31 percent of these patients undergo surgical procedures.

Peer Group 3 includes hospitals that treat a larger number of patients than Peer Group 4. They treat an average of 7,600 patients a year. On average, 22 percent of these patients undergo surgical procedures.

Peer Group 4 hospitals treat an average of 2,000 patients a year. On average, 16 percent of these patients undergo surgical procedures.

APPENDICES

Appendix A

PHC4 Hospital-acquired Infection Reporting Requirements for General Acute Care Hospitals

| Data Collection Time Period | Type of Hospital-acquired Infection¹ |
|---|--|
| 2004 – 1st Qtr through 2005 – 2nd Qtr | Device Associated Infections <ul style="list-style-type: none"> ➤ Indwelling Catheter-Associated Urinary Tract Infection ➤ Ventilator-Associated Pneumonia ➤ Central Line-Associated Bloodstream Infection Surgical Site Infection for procedure related to: <ul style="list-style-type: none"> ➤ Circulatory System ➤ Neurosurgery ➤ Orthopedic Surgery |
| 2005 – 3rd Qtr | Addition of Surgical Site Infection Body System Categories: <ul style="list-style-type: none"> ➤ Endocrine System ➤ Gastrointestinal System ➤ Genitourinary System ➤ Reproductive System ➤ Respiratory System ➤ Skin and Soft Tissue ➤ Hemic and Lymphatic System |
| 2005 – 4th Qtr | Addition of Non-Device Associated Infections <ul style="list-style-type: none"> ➤ Urinary Tract Infection Non-Device Associated ➤ Pneumonia Non-Device Associated ➤ Bloodstream Infection Non-Device Associated |
| 2006 – 1st Qtr The Q1-2006 requirements remain in effect for all future HAI data collection. | Addition of Infections Not Associated with Surgical Sites: <ul style="list-style-type: none"> ➤ Bone and Joint ➤ Central Nervous System ➤ Cardiovascular System ➤ Gastrointestinal System ➤ Lower Respiratory System, other than pneumonia ➤ Reproductive System ➤ Skin and Soft Tissue |

¹The code for Multiple Infections was used when a patient has more than one hospital-acquired infection in any of the listed categories.

Appendix B

Codes for Reporting Confirmed Hospital-acquired Infections

- 01 = Urinary Tract Infection (device associated)
- 02 = Surgical Site Infection
- 03 = Pneumonia (device associated)
- 04 = Bloodstream Infection (device associated)
- 05 = Bone and Joint Infection
- 06 = Central Nervous System Infection
- 07 = Cardiovascular System Infection
- 08 = Eye, Ear, Nose, Throat, or Mouth Infection, including Upper Respiratory Infection¹
- 09 = Gastrointestinal System Infection
- 10 = Lower Respiratory Tract Infection, Other Than Pneumonia
- 11 = Reproductive Tract Infection
- 12 = Skin and Soft Tissue Infection
- 13 = Systemic Infection¹
- 14 = Multiple Infections
- 21 = Urinary Tract Infection (not device associated)
- 23 = Pneumonia (not device associated)
- 24 = Bloodstream Infection (not device associated)
- 99 = No nosocomial infection present

¹ This infection type is not required to be reported.

Appendix C

Exclusion Definitions: ICD.9.CM Codes

| ICD.9.CM Code | Description |
|--|---|
| Burns | |
| 940.x | Burn confined to eye and adnexa |
| 941.xx | Burn of face, head, and neck |
| 942.xx | Burn of trunk |
| 943.xx | Burn of upper limb, except wrist and hand |
| 944.xx | Burn of wrist(s) and hand(s) |
| 945.xx | Burn of lower limbs |
| 946.x | Burns of multiple specified sites |
| 947.x | Burn of internal organs |
| 948.xx | Burns classified according to extent of body surface involved |
| 949.x | Burn, unspecified |
| Organ Transplant Procedures and Complications | |
| 33.50 | Lung transplantation, not otherwise specified |
| 33.51 | Unilateral lung transplantation |
| 33.52 | Bilateral lung transplantation |
| 33.6 | Combined heart-lung transplantation |
| 37.51 | Heart transplantation |
| 37.52 | Implantation of total replacement of heart system |
| 37.53 | Replacement or repair of thoracic unit of total replacement heart |
| 41.00 | Bone marrow transplant, not otherwise specified |
| 41.02 | Allogeneic bone marrow transplant with purging |
| 41.03 | Allogeneic bone marrow transplant without purging |
| 41.09 | Autologous bone marrow transplant with purging |
| 41.94 | Transplantation of spleen |
| 46.97 | Transplant of intestine |
| 50.51 | Auxiliary liver transplant |
| 50.59 | Other transplant of liver |
| 52.80 | Pancreatic transplant, not otherwise specified |
| 52.82 | Homotransplant of pancreas |
| 52.83 | Heterotransplant of pancreas |
| 55.61 | Renal autotransplantation |
| 55.69 | Other kidney transplantation |
| 996.80 | Complications of transplanted organ, unspecified |
| 996.81 | Complications of transplanted kidney |
| 996.82 | Complications of transplanted liver |
| 996.83 | Complications of transplanted heart |
| 996.84 | Complications of transplanted lung |
| 996.85 | Complications of transplanted bone marrow |
| 996.86 | Complications of transplanted pancreas |
| 996.87 | Complications of transplanted intestine |
| 996.89 | Complications of other specified transplanted organ |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections

For Quarters 1 and 2 of 2005, only those cases with a procedure noted as CV (circulatory system), NS (neurosurgery), or ORT (orthopedic surgery) in the column titled "PHC4 Category" were relevant. For Quarter 3 and 4 of 2005, all procedure codes listed in the appendix were relevant.

Key for PHC4 Surgical Category

PHC4 Category

| | |
|-------|----------------------------|
| CV | Circulatory system |
| ENDO | Endocrine system |
| GI | Gastrointestinal system |
| GU | Genitourinary system |
| HMLYM | Hemic and lymphatic system |
| NS | Neurosurgery |
| ORT | Orthopedic surgery |
| REPRO | Reproductive system |
| RESP | Respiratory system |
| SKIN | Skin and soft tissue |

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-------------------------------------|
| CV | 38.34 | AORTA RESECTION W ANASTOMOSIS |
| CV | 38.44 | ABD AORTA RESECTION W REPLACEMENT |
| CV | 39.27 | ARTERIOVENOSTOMY FOR RENAL DIALYSIS |
| CV | 35.00 | CLOSED VALVOTOMY NOS |
| CV | 35.01 | CLOSED AORTIC VALVOTOMY |
| CV | 35.02 | CLOSED MITRAL VALVOTOMY |
| CV | 35.03 | CLOSED PULMON VALVOTOMY |
| CV | 35.04 | CLOSED TRICUSP VALVOTOMY |
| CV | 35.10 | OPEN VALVULOPLASTY NOS |
| CV | 35.11 | OPN AORTIC VALVULOPLASTY |
| CV | 35.12 | OPN MITRAL VALVULOPLASTY |
| CV | 35.13 | OPN PULMON VALVULOPLASTY |
| CV | 35.14 | OPN TRICUSP VALVULOPLAST |
| CV | 35.20 | REPL HEART VALVE NOS |
| CV | 35.21 | REPL AORTIC VALVE-TISSUE |
| CV | 35.22 | REPL AORTIC VALVE NEC |
| CV | 35.23 | REPL MITRAL VALVE W TISS |
| CV | 35.24 | REPL MITRAL VALVE NEC |
| CV | 35.25 | REPL PULMON VALVE W TISS |
| CV | 35.26 | REPL PULMONARY VALVE NEC |
| CV | 35.27 | REPL TRICUSP VALVE-TISS |
| CV | 35.28 | REPL TRICUSP VALVE NEC |
| CV | 35.31 | PAPILLARY MUSCLE OPS |
| CV | 35.32 | CHORDAE TENDINEAE OPS |
| CV | 35.33 | ANNULOPLASTY |
| CV | 35.34 | INFUNDIBULECTOMY |
| CV | 35.35 | TRABEC CARNEAE CORDIS OP |
| CV | 35.39 | TISS ADJ TO VALV OPS NEC |
| CV | 35.42 | CREATE HRT SEPTAL DEFECT |
| CV | 35.50 | PROSTH REP HRT SEPTA NOS |
| CV | 35.51 | PROSTH REP ASD OPEN TECH |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|--|
| CV | 35.53 | PROSTH REP VSD |
| CV | 35.54 | REPAIR ECD W PROSTHESIS |
| CV | 35.60 | GRFT REPAIR HRT SEPT NOS |
| CV | 35.61 | REPAIR ASD W TISS GRAFT |
| CV | 35.62 | REPAIR VSD W TISS GRAFT |
| CV | 35.63 | REPAIR ECD W TISS GRAFT |
| CV | 35.70 | HEART SEPTA REP NEC&NOS |
| CV | 35.71 | REPAIR ASD NEC & NOS |
| CV | 35.72 | REPAIR VSD NEC & NOS |
| CV | 35.73 | REPAIR ECD NEC & NOS |
| CV | 35.81 | TOT REP TETRALOGY FALLOT |
| CV | 35.82 | TOTAL REPAIR OF TAPVC |
| CV | 35.83 | TOT REP TRUNCUS ARTERIOS |
| CV | 35.84 | TOT CORRECT GV TRANSPOS |
| CV | 35.91 | I/A TRANSPOS VEN RETURN |
| CV | 35.92 | CREAT CONDUIT RT VENT-PA |
| CV | 35.93 | CONDUIT LEFT VENT-AORTA |
| CV | 35.94 | CREAT CONDUIT ATRIUM-PA |
| CV | 35.95 | HEART REPAIR REVISION |
| CV | 35.98 | HEART SEPTA OPS NEC |
| CV | 35.99 | HEART VALVE OPS NEC |
| CV | 37.10 | HEART INCISION NOS |
| CV | 37.11 | CARDIOTOMY |
| CV | 37.31 | PERICARDIECTOMY |
| CV | 37.32 | HEART ANEURYSM EXCISION |
| CV | 37.33 | HEART LES EXC NEC-OPEN |
| CV | 37.34 | HEART LES EXC APPR NEC |
| CV | 37.35 | PART VENTRICULECTOMY |
| CV | 37.41 | IMPL PROSTH CARDIAC SUPPORT DEV AROUND HEART |
| CV | 37.49 | OTHER REPAIR HEART & PERICARDIUM |
| CV | 36.10 | AORTOCORONARY BYPASS NOS |
| CV | 36.11 | AO-COR BYPASS-1 COR ART |
| CV | 36.12 | AO-COR BYPASS-2 COR ART |
| CV | 36.13 | AO-COR BYPASS-3 COR ART |
| CV | 36.14 | AO-COR BYPASS-4+ COR ART |
| CV | 36.19 | HRT REVASC BYP ANAST NEC |
| CV | 36.15 | 1 INT MAM-COR ART BYPASS |
| CV | 36.16 | 2 INT MAM-COR ART BYPASS |
| CV | 36.17 | ABD-CORONARY ART BYPASS |
| CV | 36.2 | ARTERIAL IMPLANT REVASC |
| CV | 38.12 | HEAD/NK ENDARTERECT NEC |
| CV | 37.51 | HEART TRANSPLANTATION |
| CV | 37.52 | TOT REPL HEART SYST IMPL |
| CV | 37.53 | REPL THOR UNIT TOT SYST |
| CV | 37.54 | REPL IMPL COMPONENT NEC |
| CV | 37.70 | INSERT PACER LEAD NOS |
| CV | 37.71 | INSERT TV LEAD-VENTRICLE |
| CV | 37.72 | INSERT TV LEAD-ATR&VENT |
| CV | 37.73 | INSERT TV LEAD-ATRIUM |
| CV | 37.74 | INSERT EPICARDIAL LEAD |
| CV | 37.75 | REVISION PACEMAKER LEAD |
| CV | 37.76 | REPL TRANSVENOUS LEAD |
| CV | 37.77 | REMOVAL PACEMAKER LEAD |
| CV | 37.79 | REV PACEMAKER POCKET |
| CV | 37.80 | INSERT PACEMAKER DEV NOS |
| CV | 37.81 | INSERT SINGLE CHAMB DEV |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| CV | 37.82 | INSERT RATE-RESPON DEV |
| CV | 37.83 | INSERT DUAL-CHAMBER DEV |
| CV | 37.85 | REPL W 1-CHAMBER DEVICE |
| CV | 37.86 | REPL W RATE-RESPON DEV |
| CV | 37.87 | REPL W DUAL-CHAMB DEVICE |
| CV | 37.89 | REV/RMVL PACEMAKER DEV |
| CV | 37.94 | IMPL/REPL AICD TOT SYST |
| CV | 37.95 | IMPLANT AICD LEAD ONLY |
| CV | 37.96 | IMPL AICD GENERATOR |
| CV | 37.97 | REPLACE AICD LEAD ONLY |
| CV | 37.98 | REPL AICD GENERATOR ONLY |
| CV | 37.99 | OTH OPS HRT/PERICARDIUM |
| CV | 39.29 | VASC SHUNT & BYPASS NEC |
| CV | 36.31 | OPEN TRANSMYO REVASC |
| CV | 36.32 | TRANSMYO REVASC NEC |
| CV | 36.39 | HEART REVASC NEC |
| CV | 36.91 | COR VESSEL ANEURYSM REP |
| CV | 36.99 | HEART VESSEL OPS NEC |
| CV | 37.12 | PERICARDIOTOMY |
| CV | 37.61 | PULSATION BALLOON IMPL |
| CV | 37.62 | IMPL HRT ASSIST SYST NEC |
| CV | 37.63 | REPL HEART ASSIST SYSTEM |
| CV | 37.64 | RMVL HEART ASSIST SYSTEM |
| CV | 37.65 | IMPL EXT PULSATILE HAS |
| CV | 37.66 | IMPL IMPL PULSATILE HAS |
| CV | 37.67 | CARDIOMYOSTIM SYST IMPL |
| CV | 37.91 | OPN CHEST CARD MASSAGE |
| CV | 38.00 | INCISION OF VESSEL NOS |
| CV | 38.02 | HEAD/NECK VESS INC NEC |
| CV | 38.03 | UPPER LIMB VESSEL INC |
| CV | 38.04 | INCISION OF AORTA |
| CV | 38.05 | THORACIC VESSEL INC NEC |
| CV | 38.06 | ABDOMINAL ART INCISION |
| CV | 38.07 | ABDOMINAL VEIN INCISION |
| CV | 38.08 | LOWER LIMB ARTERY INC |
| CV | 38.09 | LOWER LIMB VEIN INCISION |
| CV | 38.10 | ENDARTERECTOMY NOS |
| CV | 38.13 | UPPER LIMB ENDARTERECT |
| CV | 38.14 | ENDARTERECTOMY OF AORTA |
| CV | 38.15 | THORACIC ENDARTERECTOMY |
| CV | 38.16 | ABDOMINAL ENDARTERECTOMY |
| CV | 38.18 | LOWER LIMB ENDARTERECT |
| CV | 38.30 | VESSEL RESECT/ANAST NOS |
| CV | 38.32 | OTH HN VESS RESECT/ANAST |
| CV | 38.33 | ARM VESSEL RESECT/ANAST |
| CV | 38.35 | THOR VESSEL RESECT/ANAST |
| CV | 38.36 | ABD VESSEL RESECT/ANAST |
| CV | 38.37 | ABD VEIN RESECT W ANAST |
| CV | 38.38 | LE ARTERY RESECT W ANAST |
| CV | 38.39 | LE VEIN RESECT W ANAST |
| CV | 38.40 | VESSEL RESECT W REPL NOS |
| CV | 38.42 | HN VESSEL RESECT W REPL |
| CV | 38.43 | ARM VESS RESECT W REPL |
| CV | 38.45 | THOR VESS RESECT W REPL |
| CV | 38.46 | ABD ARTERY RESECT W REPL |
| CV | 38.47 | ABD VEIN RESECT W REPL |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|--|
| CV | 38.48 | LEG ARTERY RESECT W REPL |
| CV | 38.49 | LEG VEIN RESECT W REPL |
| CV | 38.50 | VV LIG&STRIP NOS |
| CV | 38.52 | HEAD/NECK VV LIG&STRIP |
| CV | 38.53 | ARM VV LIG&STRIP |
| CV | 38.55 | THORACIC VV LIG&STRIP |
| CV | 38.57 | ABD VV LIG&STRIP |
| CV | 38.59 | LOWER LIMB VV LIG&STRIP |
| CV | 38.60 | EXCISION OF VESSEL NOS |
| CV | 38.62 | HEAD/NECK VESSEL EXC NEC |
| CV | 38.63 | UP LIMB VESSEL EXC NEC |
| CV | 38.64 | EXCISION AORTA NEC |
| CV | 38.65 | THORACIC VESSEL EXC NEC |
| CV | 38.66 | ABD ARTERY EXCISION NEC |
| CV | 38.67 | ABD VEIN EXCISION NEC |
| CV | 38.68 | LOW LIMB ARTERY EXC NEC |
| CV | 38.69 | LOWER LIMB VEIN EXC NEC |
| CV | 38.80 | OTH SURG VESSEL OCCL NOS |
| CV | 38.82 | OCCL HEAD/NECK VESS NEC |
| CV | 38.83 | OCCL UPPER LIMB VESS NEC |
| CV | 38.84 | SURG OCCL AORTA NEC |
| CV | 38.85 | OCCL THORACIC VESS NEC |
| CV | 38.86 | SURG OCCL ABD ARTERY NEC |
| CV | 38.87 | SURG OCCL ABD VEIN NEC |
| CV | 38.88 | OCCL LOWER LIMB ART NEC |
| CV | 38.89 | OCCL LOWER LIMB VEIN NEC |
| CV | 39.0 | SYSTEMIC TO PA SHUNT |
| CV | 39.1 | INTRA-ABD VENOUS SHUNT |
| CV | 39.21 | CAVAL-PA ANASTOMOSIS |
| CV | 39.22 | AORTA-SCL-CAROTID BYPASS |
| CV | 39.23 | INTRATHORACIC SHUNT NEC |
| CV | 39.24 | AORTA-RENAL BYPASS |
| CV | 39.25 | AORTA-ILIAC-FEMORAL BYP |
| CV | 39.26 | INTRA-ABD VASC SHUNT NEC |
| CV | 39.30 | SUTURE OF VESSEL NOS |
| CV | 39.31 | SUTURE OF ARTERY |
| CV | 39.32 | SUTURE OF VEIN |
| CV | 39.41 | POSTOP VASC HEMOR CNTRL |
| CV | 39.42 | REV AV SHUNT FOR RD |
| CV | 39.43 | RMVL AV SHUNT FOR RD |
| CV | 39.49 | VASCULAR PX REVISION NEC |
| CV | 39.51 | CLIPPING OF ANEURYSM |
| CV | 39.52 | ANEURYSM REPAIR NEC |
| CV | 39.53 | AV FISTULA REPAIR |
| CV | 39.54 | AORTA RE-ENTRY OPERATION |
| CV | 39.55 | REIMPLANT ABER REN VESS |
| CV | 39.56 | REP VESS W TISS PATCH |
| CV | 39.57 | REP VESS W SYNTH PATCH |
| CV | 39.58 | REP VESS W PATCH NOS |
| CV | 39.59 | REPAIR OF VESSEL NEC |
| CV | 39.73 | ENDOVASC IMPLANT GRAFT IN THORACIC AORTA |
| CV | 39.8 | VASCULAR BODY OPERATIONS |
| NS | 01.12 | OPEN CEREB MENINGES BX |
| NS | 01.14 | OPEN BIOPSY OF BRAIN |
| NS | 01.21 | I&D OF CRANIAL SINUS |
| NS | 01.22 | RMVL IC NEUROSTIMULATOR |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| NS | 01.23 | REOPEN CRANIOTOMY SITE |
| NS | 01.24 | CRANIOTOMY NEC |
| NS | 01.25 | CRANIECTOMY NEC |
| NS | 01.31 | INC CEREBRAL MENINGES |
| NS | 01.32 | LOBOTOMY & TRACTOTOMY |
| NS | 01.39 | BRAIN INCISION NEC |
| NS | 01.41 | THALAMUS OPERATIONS |
| NS | 01.42 | GLOBUS PALLIDUS OPS |
| NS | 01.51 | EXC CEREB MENINGEAL LES |
| NS | 01.52 | HEMISPHERECTOMY |
| NS | 01.53 | BRAIN LOBECTOMY |
| NS | 01.59 | EXC/DESTR BRAIN LES NEC |
| NS | 02.11 | SIMPLE SUTURE OF DURA |
| NS | 02.12 | REP CEREBRAL MENING NEC |
| NS | 02.13 | MENING VESSEL LIGATION |
| NS | 02.14 | CHOROID PLEXECTOMY |
| NS | 02.91 | LYSIS CORTICAL ADHESION |
| NS | 02.92 | BRAIN REPAIR |
| NS | 07.51 | PINEAL FIELD EXPLORATION |
| NS | 07.52 | PINEAL GLAND INCISION |
| NS | 07.53 | PARTIAL PINEALECTOMY |
| NS | 07.54 | TOTAL PINEALECTOMY |
| NS | 07.59 | PINEAL GLAND OPS NEC |
| NS | 07.61 | EXC PIT LES-TRANSFRONTAL |
| NS | 07.62 | EXC PIT LES-TRANSSPHEN |
| NS | 07.63 | PART EXC PIT GLAND NOS |
| NS | 07.64 | TOT EXC PIT-TRANSFRONTAL |
| NS | 07.65 | TOT EXC PIT-TRANSSPHEN |
| NS | 07.68 | TOTAL EXC PITUITARY NEC |
| NS | 07.69 | TOTAL EXC PITUITARY NOS |
| NS | 07.71 | PITUITARY FOSSA EXPL |
| NS | 07.72 | PITUITARY GLAND INCISION |
| NS | 07.79 | OTHER OPS ON HYPOPHYSIS |
| NS | 38.01 | INCISION OF IC VESS |
| NS | 38.11 | ENDARTERECTOMY IC VESS |
| NS | 38.31 | IC VESSEL RESECT W ANAST |
| NS | 38.41 | IC VESSEL RESECT W REPL |
| NS | 38.51 | IC VV LIG&STRIP |
| NS | 38.61 | IC VESSELS EXC NEC |
| NS | 38.81 | OCCCLUSION IC VESSELS NEC |
| NS | 39.28 | EC-IC VASCULAR BYPASS |
| NS | 81.00* | SPINAL FUSION NOS |
| NS | 81.01* | ATLAS-AXIS SPINAL FUSION |
| NS | 81.02* | ANT CERVICAL FUSION NEC |
| NS | 81.03* | POST CERVICAL FUSION NEC |
| NS | 81.04* | ANTERIOR DORSAL FUSION |
| NS | 81.05* | POSTERIOR DORSAL FUSION |
| NS | 81.06* | ANTERIOR LUMBAR FUSION |
| NS | 81.07* | LAT TRANS LUMBAR FUSION |
| NS | 81.08* | POSTERIOR LUMBAR FUSION |
| NS | 81.62* | FUSION/REFUSION 2-3 VERT |
| NS | 81.63* | FUSION/REFUSION 4-8 VERT |
| NS | 81.64* | FUSION/REFUSION >8 VERT |

*Procedure code may be categorized as either neurosurgery (NS) or orthopedic surgery (ORTHO).

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| <i>PHC4 Category</i> | <i>ICD.9.CM</i> | <i>Procedure Code Description</i> |
|----------------------|-----------------|-----------------------------------|
| NS | 84.51* | INSERT INTERBODY FUS DEV |
| NS | 84.52* | INSERT RECOMBINANT BONE |
| NS | 03.01* | REMOVAL FB SPINAL CANAL |
| NS | 03.02* | REOPEN LAMINECTOMY SITE |
| NS | 03.09* | SPINAL CANAL EXPL NEC |
| NS | 80.50* | IV DISC EXC/DESTR NOS |
| NS | 80.51* | IV DISC EXCISION |
| NS | 80.59* | IV DISC DESTRUCTION NEC |
| NS | 81.30* | REFUSION SPINE NOS |
| NS | 81.31* | ATLAS-AXIS REFUSION |
| NS | 81.32* | ANT CERV REFUSION NEC |
| NS | 81.33* | POST CERV REFUSION NEC |
| NS | 81.34* | ANT DORSAL REFUSION |
| NS | 81.35* | POST DORSAL REFUSION |
| NS | 81.36* | ANT LUMBAR REFUSION |
| NS | 81.37* | LAT TRANS LUMB REFUSION |
| NS | 81.38* | POST LUMBAR REFUSION |
| NS | 81.39* | REFUSION SPINE NEC |
| NS | 02.2 | VENTRICULOSTOMY |
| NS | 02.31 | VENT SHUNT-HEAD/NECK |
| NS | 02.32 | VENT SHUNT TO CIRC SYST |
| NS | 02.33 | VENT SHUNT-THOR CAVITY |
| NS | 02.34 | VENT SHUNT TO ABD CAVITY |
| NS | 02.35 | VENT SHUNT-URINARY SYST |
| NS | 02.39 | OPS TO ESTAB VENT DRAIN |
| NS | 02.42 | REPL VENTRICULAR SHUNT |
| NS | 02.43 | RMVL VENTRICULAR SHUNT |
| NS | 54.95 | PERITONEAL INCISION |
| NS | 01.6 | EXCISION OF SKULL LESION |
| NS | 02.01 | OPENING CRANIAL SUTURE |
| NS | 02.02 | ELEVATION SKULL FX FRAG |
| NS | 02.03 | CRAN BONE FLAP FORMATION |
| NS | 02.04 | BONE GRAFT TO SKULL |
| NS | 02.05 | SKULL PLATE INSERTION |
| NS | 02.06 | CRANIAL OSTEOPLASTY NEC |
| NS | 02.07 | SKULL PLATE REMOVAL |
| NS | 02.94 | INSERT/REPL SKULL TONGS |
| NS | 02.95 | RMVL SKULL TONGS/HALO |
| NS | 02.99 | OPS ON SKULL/BRAIN NEC |
| NS | 03.1 | INTRASPIN NERVE ROOT DIV |
| NS | 03.29 | CHORDOTOMY NEC |
| NS | 03.4 | EXC SPINAL CORD LESION |
| NS | 03.51 | SPINAL MENINGOCELE REP |
| NS | 03.52 | MYELOMENINGOCELE REPAIR |
| NS | 03.53 | VERTEBRAL FX REPAIR |
| NS | 03.59 | SPINAL STRUCT REPAIR NEC |
| NS | 03.6 | SPINAL CORD ADHESIOLYSIS |
| NS | 03.71 | SUBARACH-PERITON SHUNT |
| NS | 03.72 | SUBARACH-URETERAL SHUNT |
| NS | 03.79 | SPINAL THECAL SHUNT NEC |
| NS | 03.97 | REV SPINAL THECAL SHUNT |
| NS | 03.98 | RMVL SPINAL THECAL SHUNT |
| NS | 04.01 | EXC ACOUSTIC NEUROMA |

*Procedure code may be categorized as either neurosurgery (NS) or orthopedic surgery (ORTHO).

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| <i>PHC4 Category</i> | <i>ICD.9.CM</i> | <i>Procedure Code Description</i> |
|----------------------|-----------------|--|
| NS | 04.02 | TRIGEMINAL NERVE DIV |
| NS | 04.03 | PERIPH/CRAN NERV DIV NEC |
| NS | 04.04 | PERIPH/CRAN NERV INC NEC |
| NS | 04.05 | GASSERIAN GANGLIONECTOMY |
| NS | 04.06 | CRAN GANGLIONECTOMY NEC |
| NS | 04.07 | PERIPH/CRAN NERV EXC NEC |
| NS | 04.3 | CRAN/PERIPH NERVE SUTURE |
| NS | 04.41 | DECOMP TRIGEMINAL ROOT |
| NS | 04.42 | CRANIAL NERVE DECOMP NEC |
| NS | 04.43 | CARPAL TUNNEL RELEASE |
| NS | 04.44 | TARSAL TUNNEL RELEASE |
| NS | 04.49 | PERIPH NERV ADHESIO NEC |
| NS | 04.5 | CRAN OR PERIPH NERV GRFT |
| NS | 04.6 | PERIPH NERVES TRANSPOS |
| NS | 04.71 | HYPOGLOSSAL-FACIAL ANAST |
| NS | 04.72 | ACCESSORY-FACIAL ANAST |
| NS | 04.73 | ACCESS-HYPOGLOSSAL ANAST |
| NS | 04.74 | PERIPH NERVE ANAST NEC |
| NS | 04.75 | POSTOP REV PREV NERVE OP |
| NS | 04.76 | LATE REP PERIPH NERV INJ |
| NS | 04.79 | NEUROPLASTY NEC |
| NS | 05.0 | SYMPATH NERVE DIVISION |
| NS | 05.21 | SPHENOPALAT GANGLIONECT |
| NS | 05.22 | CERVICAL SYMPATHECTOMY |
| NS | 05.23 | LUMBAR SYMPATHECTOMY |
| NS | 05.24 | PRESACRAL SYMPATHECTOMY |
| NS | 05.25 | PERIART SYMPATHECTOMY |
| NS | 05.29 | OTHER SYMPATHECTOMY |
| NS | 05.81 | SYMPATH NERV/GANG REPAIR |
| NS | 05.89 | SYMPATHETIC NERV OPS NEC |
| NS | 05.9 | OTHER NERVOUS SYSTEM OPS |
| NS | 84.56* | INSERTION (CEMENT) SPACER |
| NS | 84.57* | REMOVAL (CEMENT) SPACER |
| NS | 84.58 | IMPL INTERSPINOUS PROCESS DECOMP DEV |
| NS | 84.71* | APPLIC EXT FIXATOR DEV, MONOPLANAR SYS |
| NS | 84.72* | APPLIC EXT FIXATOR DEV, RING SYS |
| NS | 84.73* | APPLIC HYBRID EXT FIXATOR DEV |
| ORT | 84.00 | UPPER LIMB AMP NOS |
| ORT | 84.01 | FINGER AMPUTATION |
| ORT | 84.02 | THUMB AMPUTATION |
| ORT | 84.03 | AMPUTATION THROUGH HAND |
| ORT | 84.04 | DISARTICULATION OF WRIST |
| ORT | 84.05 | AMPUTATION THRU FOREARM |
| ORT | 84.06 | DISARTICULATION OF ELBOW |
| ORT | 84.07 | AMPUTATION THRU HUMERUS |
| ORT | 84.08 | SHOULDER DISARTICULATION |
| ORT | 84.09 | FOREQUARTER AMPUTATION |
| ORT | 84.10 | LOW LIMB AMPUTATION NOS |
| ORT | 84.11 | TOE AMPUTATION |
| ORT | 84.12 | AMPUTATION THROUGH FOOT |
| ORT | 84.13 | DISARTICULATION OF ANKLE |
| ORT | 84.14 | AMP ANK THROUGH MALLEOLI |
| ORT | 84.15 | BK AMPUTATION NEC |

*Procedure code may be categorized as either neurosurgery (NS) or orthopedic surgery (ORTHO).

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|---|
| ORT | 84.16 | DISARTICULATION OF KNEE |
| ORT | 84.17 | ABOVE KNEE AMPUTATION |
| ORT | 84.18 | DISARTICULATION OF HIP |
| ORT | 84.19 | HINDQUARTER AMPUTATION |
| ORT | 84.91 | AMPUTATION NOS |
| ORT | 81.00* | SPINAL FUSION NOS |
| ORT | 81.01* | ATLAS-AXIS SPINAL FUSION |
| ORT | 81.02* | ANT CERVICAL FUSION NEC |
| ORT | 81.03* | POST CERVICAL FUSION NEC |
| ORT | 81.04* | ANTERIOR DORSAL FUSION |
| ORT | 81.05* | POSTERIOR DORSAL FUSION |
| ORT | 81.06* | ANTERIOR LUMBAR FUSION |
| ORT | 81.07* | LAT TRANS LUMBAR FUSION |
| ORT | 81.08* | POSTERIOR LUMBAR FUSION |
| ORT | 81.62* | FUSION/REFUSION 2-3 VERT |
| ORT | 81.63* | FUSION/REFUSION 4-8 VERT |
| ORT | 81.64* | FUSION/REFUSION >8 VERT |
| ORT | 84.51* | INSERT INTERBODY FUS DEV |
| ORT | 84.52* | INSERT RECOMBINANT BONE |
| ORT | 79.21 | OPEN RED HUMERUS FX |
| ORT | 79.22 | OPEN RED RADIUS/ULNA FX |
| ORT | 79.25 | OPEN REDUCTION FEMUR FX |
| ORT | 79.26 | OPEN RED TIBIA/FIB FX |
| ORT | 79.31 | ORIF HUMERUS |
| ORT | 79.32 | ORIF RADIUS/ULNA |
| ORT | 79.35 | ORIF FEMUR |
| ORT | 79.36 | ORIF TIBIA & FIBULA |
| ORT | 79.51 | OP RED SEP EPIPH HUMERUS |
| ORT | 79.52 | OP RED SEP EPIPH LOW ARM |
| ORT | 79.55 | OPEN RED SEP EPIPH FEMUR |
| ORT | 79.56 | OP RED SEP EPIPH TIB/FIB |
| ORT | 00.70 | REV HIP REPLAC, ACETAB AND FEM COMP |
| ORT | 00.71 | REV HIP REPLAC, ACETABULAR COMP |
| ORT | 00.72 | REV HIP REPLAC, FEMORAL COMP |
| ORT | 00.73 | REV HIP REPL, ACETAB LINER &/or FEM HEAD ONLY |
| ORT | 81.51 | TOTAL HIP REPLACEMENT |
| ORT | 81.52 | PARTIAL HIP REPLACEMENT |
| ORT | 81.53 | HIP REPLACEMENT REVISION |
| ORT | 00.80 | REV KNEE PLACEMENT, TOTAL (ALL COMPONENTS) |
| ORT | 00.81 | REV KNEE REPLACEMENT, TIBIAL COMPONENT |
| ORT | 00.82 | REV KNEE REPLACEMENT, FEMORAL COMPONENT |
| ORT | 00.83 | REV KNEE REPLACEMENT, PATELLAR COMPONENT |
| ORT | 00.84 | REV KNEE REPLACEMENT, TIBIAL INSERT (LINER) |
| ORT | 81.54 | TOTAL KNEE REPLACEMENT |
| ORT | 81.55 | KNEE REPLACEMENT REV |
| ORT | 03.01* | REMOVAL FB SPINAL CANAL |
| ORT | 03.02* | REOPEN LAMINECTOMY SITE |
| ORT | 03.09* | SPINAL CANAL EXPL NEC |
| ORT | 80.50* | IV DISC EXC/DESTR NOS |
| ORT | 80.51* | IV DISC EXCISION |
| ORT | 80.59* | IV DISC DESTRUCTION NEC |
| ORT | 81.30* | REFUSION SPINE NOS |
| ORT | 81.31* | ATLAS-AXIS REFUSION |

*Procedure code may be categorized as either neurosurgery (NS) or orthopedic surgery (ORTHO).

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| <i>PHC4 Category</i> | <i>ICD.9.CM</i> | <i>Procedure Code Description</i> |
|----------------------|-----------------|---|
| ORT | 81.32* | ANT CERV REFUSION NEC |
| ORT | 81.33* | POST CERV REFUSION NEC |
| ORT | 81.34* | ANT DORSAL REFUSION |
| ORT | 81.35* | POST DORSAL REFUSION |
| ORT | 81.36* | ANT LUMBAR REFUSION |
| ORT | 81.37* | LAT TRANS LUMB REFUSION |
| ORT | 81.38* | POST LUMBAR REFUSION |
| ORT | 81.39* | REFUSION SPINE NEC |
| ORT | 00.74 | HIP REPL BEARING SURFACE, METAL ON POLYETHYLENE |
| ORT | 00.75 | HIP REPL BEARING SURFACE, METAL ON METAL |
| ORT | 00.76 | HIP REPL BEARING SURFACE, CERAMIC ON CERAMIC |
| ORT | 76.01 | FACIAL BONE SEQUEST |
| ORT | 76.09 | FACIAL BONE INCISION NEC |
| ORT | 76.2 | EXC/DESTR FAC BONE LES |
| ORT | 76.31 | PARTIAL MANDIBULECTOMY |
| ORT | 76.39 | PART FACIAL OSTECT NEC |
| ORT | 76.41 | TOT MANDIBULECT/RECONST |
| ORT | 76.42 | TOTAL MANDIBULECTOMY NEC |
| ORT | 76.43 | MANDIBULAR RECONST NEC |
| ORT | 76.44 | TOT FACE OSTECT/RECONST |
| ORT | 76.45 | TOT FACE BONE OSTECT NEC |
| ORT | 76.46 | FACIAL BONE RECONST NEC |
| ORT | 76.5 | TMJ ARTHROPLASTY |
| ORT | 76.61 | CLOSED OSTY MAND RAMUS |
| ORT | 76.62 | OPEN OSTY MAND RAMUS |
| ORT | 76.63 | OSTY MANDIBULAR BODY |
| ORT | 76.64 | MAND ORTHOGNATHIC OP NEC |
| ORT | 76.65 | SEG OSTEOPLASTY MAXILLA |
| ORT | 76.66 | TOT OSTEOPLASTY MAXILLA |
| ORT | 76.67 | REDUCTION GENIOPLASTY |
| ORT | 76.68 | AUGMENTATION GENIOPLASTY |
| ORT | 76.69 | FACIAL BONE REPAIR NEC |
| ORT | 76.70 | REDUCTION FACIAL FX NOS |
| ORT | 76.72 | OPEN RED MALAR/ZMC FX |
| ORT | 76.74 | OPEN RED MAXILLARY FX |
| ORT | 76.76 | OPEN RED MANDIBULAR FX |
| ORT | 76.77 | OPEN RED ALVEOLAR FX |
| ORT | 76.79 | OPEN RED FACIAL FX NEC |
| ORT | 76.91 | BONE GRAFT TO FACE BONE |
| ORT | 76.92 | SYNTH IMPL TO FACE BONE |
| ORT | 76.94 | OPN REDUCTION TMJ DISLOC |
| ORT | 76.97 | RMVL INT FIX FACE BONE |
| ORT | 77.00 | SEQUESTRECTOMY NOS |
| ORT | 77.01 | CHEST CAGE SEQUEST |
| ORT | 77.02 | HUMERUS SEQUESTRECTOMY |
| ORT | 77.03 | RADIUS & ULNA SEQUEST |
| ORT | 77.04 | MC/CARPAL SEQUESTRECTOMY |
| ORT | 77.05 | FEMORAL SEQUESTRECTOMY |
| ORT | 77.06 | PATELLAR SEQUESTRECTOMY |
| ORT | 77.07 | TIBIA & FIBULA SEQUEST |
| ORT | 77.08 | MT/TARSAL SEQUESTRECTOMY |
| ORT | 77.09 | SEQUESTRECTOMY NEC |
| ORT | 77.10 | BONE INC NEC W/O DIV NOS |

*Procedure code may be categorized as either neurosurgery (NS) or orthopedic surgery (ORTHO).

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 77.11 | CHEST CAGE INC NEC S DIV |
| ORT | 77.12 | HUMERUS INC NEC W/O DIV |
| ORT | 77.13 | RAD/ULNA INC NEC S DIV |
| ORT | 77.14 | MC/CARPAL INC NEC S DIV |
| ORT | 77.15 | FEMORAL INC NEC W/O DIV |
| ORT | 77.16 | PATELLAR INC NEC W/O DIV |
| ORT | 77.17 | TIB & FIB INC NEC S DIV |
| ORT | 77.18 | MT/TARSAL INC NEC S DIV |
| ORT | 77.19 | BONE INC NEC W/O DIV NEC |
| ORT | 77.20 | WEDGE OSTEOTOMY NOS |
| ORT | 77.21 | CHEST CAGE WEDGE OSTY |
| ORT | 77.22 | HUMERUS WEDGE OSTEOTOMY |
| ORT | 77.23 | RADIUS & ULNA WEDGE OSTY |
| ORT | 77.24 | MC/CARPAL WEDGE OSTY |
| ORT | 77.25 | FEMORAL WEDGE OSTEOTOMY |
| ORT | 77.26 | PATELLAR WEDGE OSTEOTOMY |
| ORT | 77.27 | TIB & FIB WEDGE OSTY |
| ORT | 77.28 | MT/TARSAL WEDGE OSTY |
| ORT | 77.29 | WEDGE OSTEOTOMY NEC |
| ORT | 77.30 | BONE NOS DIVISION NEC |
| ORT | 77.31 | CHEST CAGE BONE DIV NEC |
| ORT | 77.32 | HUMERUS DIVISION NEC |
| ORT | 77.33 | RADIUS/ULNA DIVISION NEC |
| ORT | 77.34 | MC/CARPAL DIVISION NEC |
| ORT | 77.35 | FEMORAL DIVISION NEC |
| ORT | 77.36 | PATELLAR DIVISION NEC |
| ORT | 77.37 | TIBIA/FIBULA DIV NEC |
| ORT | 77.38 | MT/TARSAL DIVISION NEC |
| ORT | 77.39 | BONE DIVISION NEC |
| ORT | 77.51 | BUNIONECT/STC/OSTY |
| ORT | 77.52 | BUNIONECT/STC/ARTHRODES |
| ORT | 77.53 | BUNIONECTOMY NEC W STC |
| ORT | 77.54 | BUNIONETTE EXC/REPAIR |
| ORT | 77.56 | HAMMER TOE REPAIR |
| ORT | 77.57 | CLAW TOE REPAIR |
| ORT | 77.58 | TOE EXC/FUSION/REP NEC |
| ORT | 77.59 | BUNIONECTOMY NEC |
| ORT | 77.60 | LOC EXC BONE LESION NOS |
| ORT | 77.61 | EXC CHEST CAGE BONE LES |
| ORT | 77.62 | LOC EXC HUMERUS LESION |
| ORT | 77.63 | LOC EXC RADIUS/ULNA LES |
| ORT | 77.64 | LOC EXC MC & CARPALS LES |
| ORT | 77.65 | LOCAL EXC FEMUR LESION |
| ORT | 77.66 | LOCAL EXC PATELLA LESION |
| ORT | 77.67 | LOC EXC TIBIA/FIBULA LES |
| ORT | 77.68 | LOCAL EXC MT/TARSAL LES |
| ORT | 77.69 | LOC EXC BONE LESION NEC |
| ORT | 77.70 | EXC BONE FOR GRAFT NOS |
| ORT | 77.71 | EXC CHEST CAGE BONE-GFT |
| ORT | 77.72 | EXC HUMERUS FOR GRAFT |
| ORT | 77.73 | EXC RADIUS/ULNA FOR GRFT |
| ORT | 77.74 | EXC MC/CARPALS FOR GRAFT |
| ORT | 77.75 | EXC FEMUR FOR GRAFT |
| ORT | 77.76 | EXC PATELLA FOR GRAFT |
| ORT | 77.77 | EXC TIB/FIB FOR GRAFT |
| ORT | 77.78 | EXC MT/TARSAL FOR GRAFT |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 77.79 | EXC BONE FOR GRAFT NEC |
| ORT | 77.80 | OTHER PART OSTECTOMY NOS |
| ORT | 77.81 | CHEST CAGE OSTECTOMY NEC |
| ORT | 77.82 | PARTIAL HUMERECTOMY NEC |
| ORT | 77.83 | PART OSTECTOMY RAD/ULNA |
| ORT | 77.84 | PART OSTECTOMY MC/CARPAL |
| ORT | 77.85 | PART OSTECTOMY FEMUR |
| ORT | 77.86 | PARTIAL PATELLECTOMY |
| ORT | 77.87 | PART OSTECTOMY TIB/FIB |
| ORT | 77.88 | PART OSTECTOMY MT/TARSAL |
| ORT | 77.89 | PARTIAL OSTECTOMY NEC |
| ORT | 77.90 | TOTAL OSTECTOMY NOS |
| ORT | 77.91 | TOT CHEST CAGE OSTECTOMY |
| ORT | 77.92 | TOTAL OSTECTOMY HUMERUS |
| ORT | 77.93 | TOT OSTECTOMY RAD/ULNA |
| ORT | 77.94 | TOT OSTECTOMY MC/CARPAL |
| ORT | 77.95 | TOT OSTECTOMY FEMUR |
| ORT | 77.96 | TOTAL PATELLECTOMY |
| ORT | 77.97 | TOT OSTECTOMY TIB/FIBULA |
| ORT | 77.98 | TOT OSTECTOMY MT/TARSAL |
| ORT | 77.99 | TOTAL OSTECTOMY NEC |
| ORT | 78.00 | BONE GRAFT NOS |
| ORT | 78.01 | BONE GRAFT TO CHEST CAGE |
| ORT | 78.02 | BONE GRAFT TO HUMERUS |
| ORT | 78.03 | BONE GRAFT RADIUS/ULNA |
| ORT | 78.04 | BONE GRAFT TO MC/CARPAL |
| ORT | 78.05 | BONE GRAFT TO FEMUR |
| ORT | 78.06 | BONE GRAFT TO PATELLA |
| ORT | 78.07 | BONE GRAFT TIBIA/FIBULA |
| ORT | 78.08 | BONE GRAFT MT/TARSAL |
| ORT | 78.09 | BONE GRAFT NEC X FACIAL |
| ORT | 78.20 | LIMB SHORT PX SITE NOS |
| ORT | 78.22 | LIMB SHORT PX HUMERUS |
| ORT | 78.23 | LIMB SHORT PX RAD/ULNA |
| ORT | 78.24 | LIMB SHORT PX CARPALS/MC |
| ORT | 78.25 | LIMB SHORT PX FEMUR |
| ORT | 78.27 | LIMB SHORT PX TIB & FIB |
| ORT | 78.28 | LIMB SHORT PX TARSALS/MT |
| ORT | 78.29 | LIMB SHORT PX NEC |
| ORT | 78.30 | LIMB LENGTH PX SITE NOS |
| ORT | 78.32 | LIMB LENGTH PX HUMERUS |
| ORT | 78.33 | LIMB LENGTH PX RAD/ULNA |
| ORT | 78.34 | LIMB LENGTH PX CARPAL/MC |
| ORT | 78.35 | LIMB LENGTH PX FEMUR |
| ORT | 78.37 | LIMB LENGTH PX TIB & FIB |
| ORT | 78.38 | LIMB LENGTH PX TARSAL/MT |
| ORT | 78.39 | LIMB LENGTH PX NEC |
| ORT | 78.40 | OTHER BONE REPAIR NOS |
| ORT | 78.41 | CHEST CAGE REPAIR NEC |
| ORT | 78.42 | HUMERUS REPAIR NEC |
| ORT | 78.43 | RADIUS/ULNA REPAIR NEC |
| ORT | 78.44 | MC/CARPAL REPAIR NEC |
| ORT | 78.45 | FEMORAL REPAIR NEC |
| ORT | 78.46 | PATELLAR REPAIR NEC |
| ORT | 78.47 | TIBIA/FIBULA REPAIR NEC |
| ORT | 78.48 | MT/TARSAL REPAIR NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 78.49 | OTHER BONE REPAIR NEC |
| ORT | 78.50 | INT FIX W/O FX RED NOS |
| ORT | 78.51 | INT FIX S RED CHEST CAGE |
| ORT | 78.52 | INT FIX W/O RED HUMERUS |
| ORT | 78.53 | INT FIX W/O RED RAD/ULNA |
| ORT | 78.54 | INT FIX S RED MC/CARPAL |
| ORT | 78.55 | INT FIX W/O RED FEMUR |
| ORT | 78.56 | INT FIX W/O RED PATELLA |
| ORT | 78.57 | INT FIX W/O RED TIB/FIB |
| ORT | 78.58 | INT FIX S RED MT/TARSAL |
| ORT | 78.59 | INT FIX W/O FX RED NEC |
| ORT | 78.60 | RMVL IMPL DEV SITE NOS |
| ORT | 78.61 | RMVL IMPL DEV CHEST CAGE |
| ORT | 78.62 | RMVL IMPL DEV HUMERUS |
| ORT | 78.63 | RMVL IMPL DEV RAD/ULNA |
| ORT | 78.64 | RMVL IMPL DEV MC/CARPALS |
| ORT | 78.65 | RMVL IMPL DEV FEMUR |
| ORT | 78.66 | RMVL IMPL DEV PATELLA |
| ORT | 78.67 | RMVL IMPL DEV TIB & FIB |
| ORT | 78.68 | RMVL IMPL DEV MT/TARSAL |
| ORT | 78.69 | RMVL IMPL DEV SITE NEC |
| ORT | 78.70 | OSTEOCLASIS SITE NOS |
| ORT | 78.71 | OSTEOCLASIS CHEST CAGE |
| ORT | 78.72 | OSTEOCLASIS HUMERUS |
| ORT | 78.73 | OSTEOCLASIS RADIUS/ULNA |
| ORT | 78.74 | OSTEOCLASIS MC/CARPALS |
| ORT | 78.75 | OSTEOCLASIS FEMUR |
| ORT | 78.76 | OSTEOCLASIS PATELLA |
| ORT | 78.77 | OSTEOCLASIS TIBIA/FIBULA |
| ORT | 78.78 | OSTEOCLASIS MT/TARSAL |
| ORT | 78.79 | OSTEOCLASIS NEC |
| ORT | 78.90 | INSERT BONE STIM NOS |
| ORT | 78.91 | INSERT BONE STIM CHEST |
| ORT | 78.92 | INSERT BONE STIM HUMERUS |
| ORT | 78.93 | INSERT BONE STIM LOW ARM |
| ORT | 78.94 | INSERT BONE STIM WRIST |
| ORT | 78.95 | INSERT BONE STIM FEMUR |
| ORT | 78.96 | INSERT BONE STIM PATELLA |
| ORT | 78.97 | INSERT BONE STIM TIB/FIB |
| ORT | 78.98 | INSERT BONE STIM FOOT |
| ORT | 78.99 | INSERT BONE STIM NEC |
| ORT | 79.10 | CRIF SITE NOS |
| ORT | 79.11 | CRIF HUMERUS |
| ORT | 79.12 | CRIF RADIUS/ULNA |
| ORT | 79.13 | CRIF MC/CARPALS |
| ORT | 79.14 | CRIF FINGER |
| ORT | 79.15 | CRIF FEMUR |
| ORT | 79.16 | CRIF TIBIA & FIBULA |
| ORT | 79.17 | CRIF METATARSAL/TARSAL |
| ORT | 79.18 | CRIF TOE |
| ORT | 79.19 | CRIF BONE NEC X FACIAL |
| ORT | 79.20 | OPEN FX REDUCTION NOS |
| ORT | 79.23 | OPEN RED MC/CARPAL FX |
| ORT | 79.24 | OPEN REDUCTION FINGER FX |
| ORT | 79.27 | OPEN RED MT/TARSAL FX |
| ORT | 79.28 | OPEN REDUCTION TOE FX |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| <i>PHC4 Category</i> | <i>ICD.9.CM</i> | <i>Procedure Code Description</i> |
|----------------------|-----------------|-----------------------------------|
| ORT | 79.29 | OPEN FX REDUCTION NEC |
| ORT | 79.30 | OPN FX RED W INT FIX NOS |
| ORT | 79.33 | ORIF CARPALS/METACARPALS |
| ORT | 79.34 | ORIF FINGER |
| ORT | 79.37 | ORIF METATARSAL/TARSAL |
| ORT | 79.38 | ORIF TOE |
| ORT | 79.39 | ORIF BONE NEC X FACIAL |
| ORT | 79.50 | OPEN RED SEP EPIPH NOS |
| ORT | 79.59 | OP RED SEP EPIPH NEC |
| ORT | 79.80 | OPEN RED DISLOC SITE NOS |
| ORT | 79.81 | OPEN RED SHOULDER DISLOC |
| ORT | 79.82 | OPEN RED DISLOC RAD/ULNA |
| ORT | 79.83 | OPEN RED WRIST DISLOC |
| ORT | 79.84 | OPEN RED HAND DISLOC |
| ORT | 79.85 | OPEN RED HIP DISLOC |
| ORT | 79.86 | OPEN RED KNEE DISLOC |
| ORT | 79.87 | OPEN RED ANKLE DISLOC |
| ORT | 79.88 | OPEN RED FOOT/TOE DISLOC |
| ORT | 79.89 | OPEN RED DISLOC SITE NEC |
| ORT | 79.90 | UNSPEC OP BONE INJ NOS |
| ORT | 79.91 | HUMERUS INJURY OP NOS |
| ORT | 79.92 | RADIUS/ULNA INJ OP NOS |
| ORT | 79.93 | MC/CARPAL INJURY OP NOS |
| ORT | 79.94 | FINGER INJURY OP NOS |
| ORT | 79.95 | FEMUR INJURY OP NOS |
| ORT | 79.96 | TIBIA/FIBULA INJ OP NOS |
| ORT | 79.97 | MT/TARSAL INJURY OP NOS |
| ORT | 79.98 | TOE INJURY OPERATION NOS |
| ORT | 79.99 | UNSPEC OP BONE INJ NEC |
| ORT | 80.00 | RMVL PROSTH BY INC NOS |
| ORT | 80.01 | RMVL PROSTH SHOULDER INC |
| ORT | 80.02 | RMVL PROSTH ELBOW INC |
| ORT | 80.03 | RMVL PROSTH WRIST INC |
| ORT | 80.04 | RMVL PROSTH HAND INC |
| ORT | 80.05 | RMVL PROSTH HIP INC |
| ORT | 80.06 | RMVL PROSTH KNEE INC |
| ORT | 80.07 | RMVL PROSTH ANKLE INC |
| ORT | 80.08 | RMVL PROSTH FOOT/TOE INC |
| ORT | 80.09 | RMVL PROSTH BY INC NEC |
| ORT | 80.10 | OTHER ARTHROTOMY NOS |
| ORT | 80.11 | ARTHROTOMY NEC SHOULDER |
| ORT | 80.12 | ARTHROTOMY NEC ELBOW |
| ORT | 80.13 | ARTHROTOMY NEC WRIST |
| ORT | 80.14 | ARTHROTOMY NEC HAND/FING |
| ORT | 80.15 | ARTHROTOMY NEC HIP |
| ORT | 80.16 | ARTHROTOMY NEC KNEE |
| ORT | 80.17 | ARTHROTOMY NEC ANKLE |
| ORT | 80.18 | ARTHROTOMY NEC FOOT/TOE |
| ORT | 80.19 | OTHER ARTHROTOMY NEC |
| ORT | 80.40 | JT STRUCT DIVISION NOS |
| ORT | 80.41 | SHOULDER STRUCT DIVISION |
| ORT | 80.42 | ELBOW STRUCTURE DIVISION |
| ORT | 80.43 | WRIST STRUCTURE DIVISION |
| ORT | 80.44 | HAND/FINGER STRUCT DIV |
| ORT | 80.45 | HIP STRUCTURE DIVISION |
| ORT | 80.46 | KNEE STRUCTURE DIVISION |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 80.47 | ANKLE STRUCTURE DIVISION |
| ORT | 80.48 | FOOT/TOE STRUCT DIVISION |
| ORT | 80.49 | JT STRUCT DIVISION NEC |
| ORT | 80.6 | EXC KNEE SEMILUNAR CART |
| ORT | 80.70 | SYNOVECTOMY SITE NOS |
| ORT | 80.71 | SHOULDER SYNOVECTOMY |
| ORT | 80.72 | ELBOW SYNOVECTOMY |
| ORT | 80.73 | WRIST SYNOVECTOMY |
| ORT | 80.74 | HAND/FINGER SYNOVECTOMY |
| ORT | 80.75 | HIP SYNOVECTOMY |
| ORT | 80.76 | KNEE SYNOVECTOMY |
| ORT | 80.77 | ANKLE SYNOVECTOMY |
| ORT | 80.78 | FOOT/TOE SYNOVECTOMY |
| ORT | 80.79 | SYNOVECTOMY SITE NEC |
| ORT | 80.80 | EXC/DESTR JOINT LES NOS |
| ORT | 80.81 | EXC/DESTR SHOULD LES NEC |
| ORT | 80.82 | EXC/DESTR ELBOW LES NEC |
| ORT | 80.83 | EXC/DESTR WRIST LES NEC |
| ORT | 80.84 | EXC/DESTR HAND LES NEC |
| ORT | 80.85 | EXC/DESTR HIP LESION NEC |
| ORT | 80.86 | EXC/DESTR KNEE LES NEC |
| ORT | 80.87 | EXC/DESTR ANKLE LES NEC |
| ORT | 80.88 | EXC/DESTR FT JT LES NEC |
| ORT | 80.89 | EXC/DESTR JOINT LES NEC |
| ORT | 80.90 | EXCISION JOINT NOS |
| ORT | 80.91 | EXCISION SHOULDER JT NEC |
| ORT | 80.92 | EXCISION ELBOW JT NEC |
| ORT | 80.93 | EXCISION WRIST JT NEC |
| ORT | 80.94 | EXCISION HAND JOINT NEC |
| ORT | 80.95 | EXCISION HIP JOINT NEC |
| ORT | 80.96 | EXCISION KNEE JOINT NEC |
| ORT | 80.97 | EXCISION ANKLE JOINT NEC |
| ORT | 80.98 | EXCISION FOOT JOINT NEC |
| ORT | 80.99 | EXCISION OF JOINT NEC |
| ORT | 81.11 | ANKLE FUSION |
| ORT | 81.12 | TRIPLE ARTHRODESIS |
| ORT | 81.13 | SUBTALAR FUSION |
| ORT | 81.14 | MIDTARSAL FUSION |
| ORT | 81.15 | TARSOMETATARSAL FUSION |
| ORT | 81.16 | MTP FUSION |
| ORT | 81.17 | FUSION OF FOOT NEC |
| ORT | 81.18 | SUBTALAR JOINT ARTHROEREISIS |
| ORT | 81.20 | ARTHRODESIS NOS |
| ORT | 81.21 | ARTHRODESIS OF HIP |
| ORT | 81.22 | ARTHRODESIS OF KNEE |
| ORT | 81.23 | ARTHRODESIS OF SHOULDER |
| ORT | 81.24 | ARTHRODESIS OF ELBOW |
| ORT | 81.25 | CARPORADIAL FUSION |
| ORT | 81.26 | METACARPOCARPAL FUSION |
| ORT | 81.27 | MCP FUSION |
| ORT | 81.28 | INTERPHALANGEAL FUSION |
| ORT | 81.29 | ARTHRODESIS JOINT NEC |
| ORT | 81.40 | HIP REPAIR NEC |
| ORT | 81.42 | FIVE-IN-ONE KNEE REPAIR |
| ORT | 81.43 | TRIAD KNEE REPAIR |
| ORT | 81.44 | PATELLAR STABILIZATION |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 81.45 | CRUCIATE LIG REPAIR NEC |
| ORT | 81.46 | COLLATERAL LIG REP NEC |
| ORT | 81.47 | REPAIR OF KNEE NEC |
| ORT | 81.49 | REPAIR OF ANKLE NEC |
| ORT | 81.56 | TOTAL ANKLE REPLACEMENT |
| ORT | 81.57 | FOOT/TOE JOINT REPL |
| ORT | 81.59 | REV JOINT REPL LEG NEC |
| ORT | 81.71 | MCP/IP ARTHROPLASTY+IMPL |
| ORT | 81.72 | MCP/IP ARTHROPLASTY |
| ORT | 81.73 | TOTAL WRIST REPLACEMENT |
| ORT | 81.74 | CARPAL/CMC W IMPLANT |
| ORT | 81.75 | CARPAL/CMC ARTHROPLASTY |
| ORT | 81.79 | HND/FINGER/WRIST REP NEC |
| ORT | 81.80 | TOTAL SHOULDER REPL |
| ORT | 81.81 | PARTIAL SHOULDER REPL |
| ORT | 81.82 | RECUR SHOULD DISLOC REP |
| ORT | 81.83 | SHOULD ARTHROPLASTY NEC |
| ORT | 81.84 | TOTAL ELBOW REPLACEMENT |
| ORT | 81.85 | ELBOW ARTHROPLASTY NEC |
| ORT | 81.93 | SUTURE CAPS/LIG UP EXT |
| ORT | 81.94 | SUTURE CAPS/LIG ANKLE/FT |
| ORT | 81.95 | SUTURE CAPS/LIG LEG NEC |
| ORT | 81.96 | REPAIR OF JOINT NEC |
| ORT | 81.97 | REV JOINT REPL UE |
| ORT | 82.01 | EXPL TENDON SHEATH HAND |
| ORT | 82.02 | MYOTOMY OF HAND |
| ORT | 82.03 | BURSOTOMY OF HAND |
| ORT | 82.04 | I&D PALMAR/THENAR SPACE |
| ORT | 82.09 | INC SOFT TISSUE HAND NEC |
| ORT | 82.11 | TENOTOMY OF HAND |
| ORT | 82.12 | FASCIOTOMY OF HAND |
| ORT | 82.19 | DIV SOFT TISSUE HAND NEC |
| ORT | 82.21 | EXC LES TEND SHEATH HAND |
| ORT | 82.22 | EXCISION HAND MUSCLE LES |
| ORT | 82.29 | EXC LES SFT TISS HND NEC |
| ORT | 82.31 | BURSECTOMY OF HAND |
| ORT | 82.32 | EXC HAND TEND FOR GRAFT |
| ORT | 82.33 | HAND TENONECTOMY NEC |
| ORT | 82.34 | EXC HAND MUSC/FASC GRAFT |
| ORT | 82.35 | HAND FASCIECTOMY NEC |
| ORT | 82.36 | MYECTOMY OF HAND NEC |
| ORT | 82.39 | HAND SOFT TISSUE EXC NEC |
| ORT | 82.41 | SUT TENDON SHEATH HAND |
| ORT | 82.42 | DELAY SUT FLEXR TEND HND |
| ORT | 82.43 | DELAY SUT HAND TEND NEC |
| ORT | 82.44 | SUT FLEXOR TEND HAND NEC |
| ORT | 82.45 | SUTURE HAND TENDON NEC |
| ORT | 82.46 | SUTURE HAND MUSCLE/FASC |
| ORT | 82.51 | HAND TENDON ADVANCEMENT |
| ORT | 82.52 | HAND TENDON RECESSION |
| ORT | 82.53 | HAND TENDON REATTACHMENT |
| ORT | 82.54 | HAND MUSCLE REATTACHMENT |
| ORT | 82.55 | CHANGE HAND M/T LENGTH |
| ORT | 82.56 | TRANSPLANT HAND TEND NEC |
| ORT | 82.57 | TRANSPOS HAND TENDON NEC |
| ORT | 82.58 | TRANSPL HAND MUSCLE NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ORT | 82.59 | TRANSPOS HAND MUSCLE NEC |
| ORT | 82.61 | POLLICIZATION OPERATION |
| ORT | 82.69 | THUMB RECONSTRUCTION NEC |
| ORT | 82.71 | HAND TEND PULLEY RECONST |
| ORT | 82.72 | HAND OP W MUSC/FASC GRFT |
| ORT | 82.79 | PLAST OP HAND W GRFT NEC |
| ORT | 82.81 | TRANSFER OF FINGER |
| ORT | 82.82 | REPAIR OF CLEFT HAND |
| ORT | 82.83 | REPAIR OF MACRODACTYLY |
| ORT | 82.84 | REPAIR OF Mallet FINGER |
| ORT | 82.85 | TENODESIS OF HAND NEC |
| ORT | 82.86 | TENOPLASTY OF HAND NEC |
| ORT | 82.89 | HAND PLASTIC OP NEC |
| ORT | 82.91 | LYSIS OF HAND ADHESIONS |
| ORT | 82.99 | HAND SOFT TISSUE OPS NEC |
| ORT | 83.01 | TEND SHEATH EXPLORATION |
| ORT | 83.02 | MYOTOMY |
| ORT | 83.03 | BURSOTOMY |
| ORT | 83.09 | SOFT TISSUE INCISION NEC |
| ORT | 83.11 | ACHILLOTENOTOMY |
| ORT | 83.12 | ADDUCTOR TENOTOMY OF HIP |
| ORT | 83.13 | TENOTOMY NEC |
| ORT | 83.14 | FASCIOTOMY |
| ORT | 83.19 | SOFT TISSUE DIVISION NEC |
| ORT | 83.31 | EXC LESION TENDON SHEATH |
| ORT | 83.32 | EXC MUSCLE LESION |
| ORT | 83.39 | EXC LES SOFT TISSUE NEC |
| ORT | 83.41 | TENDON EXCISION FOR GRFT |
| ORT | 83.42 | TENONECTOMY NEC |
| ORT | 83.43 | MUSC/FASC EXC FOR GRAFT |
| ORT | 83.44 | FASCIECTOMY NEC |
| ORT | 83.45 | MYECTOMY NEC |
| ORT | 83.49 | SOFT TISSUE EXC NEC |
| ORT | 83.5 | BURSECTOMY |
| ORT | 83.61 | TENDON SHEATH SUTURE |
| ORT | 83.62 | DELAYED TENDON SUTURE |
| ORT | 83.63 | ROTATOR CUFF REPAIR |
| ORT | 83.64 | SUTURE OF TENDON NEC |
| ORT | 83.65 | MUSCLE/FASC SUTURE NEC |
| ORT | 83.71 | TENDON ADVANCEMENT |
| ORT | 83.72 | TENDON RECESSION |
| ORT | 83.73 | TENDON REATTACHMENT |
| ORT | 83.74 | MUSCLE REATTACHMENT |
| ORT | 83.75 | TENDON TRANSF/TRANSPL |
| ORT | 83.76 | TENDON TRANSPOS NEC |
| ORT | 83.77 | MUSCLE TRANSF/TRANSPL |
| ORT | 83.79 | MUSCLE TRANSPOS NEC |
| ORT | 83.81 | TENDON GRAFT |
| ORT | 83.82 | MUSCLE OR FASCIA GRAFT |
| ORT | 83.83 | TENDON PULLEY RECONST |
| ORT | 83.84 | CLUBFOOT RELEASE NEC |
| ORT | 83.85 | CHANGE IN M/T LENGTH NEC |
| ORT | 83.86 | QUADRICEPSPLASTY |
| ORT | 83.87 | PLASTIC OPS MUSCLE NEC |
| ORT | 83.88 | PLASTIC OPS TENDON NEC |
| ORT | 83.89 | PLASTIC OPS FASCIA NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|--|
| ORT | 83.91 | ADHESIO MUSC/TEND/FASC |
| ORT | 83.92 | INSERT SKEL MUSC STIM |
| ORT | 83.93 | RMVL SKELETAL MUSC STIM |
| ORT | 84.21 | THUMB REATTACHMENT |
| ORT | 84.22 | FINGER REATTACHMENT |
| ORT | 84.23 | FA/WRIST/HAND REATTACH |
| ORT | 84.24 | UPPER ARM REATTACHMENT |
| ORT | 84.25 | TOE REATTACHMENT |
| ORT | 84.26 | FOOT REATTACHMENT |
| ORT | 84.27 | LOWER LEG/ANKLE REATTACH |
| ORT | 84.28 | THIGH REATTACHMENT |
| ORT | 84.29 | REATTACH EXTREMITY NEC |
| ORT | 84.3 | AMPUTATION STUMP REV |
| ORT | 84.40 | IMPL/FIT PROSTH LIMB NOS |
| ORT | 84.44 | IMPL ARM PROSTHESIS |
| ORT | 84.48 | IMPL LEG PROSTHESIS |
| ORT | 84.56* | INSERTION (CEMENT) SPACER |
| ORT | 84.57* | REMOVAL (CEMENT) SPACER |
| ORT | 84.71* | APPLIC EXT FIXATOR DEV, MONOPLANAR SYS |
| ORT | 84.72* | APPLIC EXT FIXATOR DEV, RING SYS |
| ORT | 84.73* | APPLIC HYBRID EXT FIXATOR DEV |
| ORT | 84.92 | SEP EQUAL CONJOINED TWIN |
| ORT | 84.93 | SEP UNEQUAL CONJOIN TWIN |
| ORT | 84.99 | MUSCULOSKELETAL OP NEC |
| GI | 47.01 | LAPSCP APPENDECTOMY |
| GI | 47.09 | OTHER APPENDECTOMY |
| GI | 47.91 | APPENDICOSTOMY |
| GI | 47.99 | APPENDICEAL OPS NEC |
| GI | 50.0 | HEPATOTOMY |
| GI | 50.21 | LIVER LESION MARSUP |
| GI | 50.22 | PARTIAL HEPATECTOMY |
| GI | 50.29 | HEPATIC LESION DESTR NEC |
| GI | 50.3 | HEPATIC LOBECTOMY |
| GI | 50.4 | TOTAL HEPATECTOMY |
| GI | 50.61 | CLOSURE OF LIVER LAC |
| GI | 50.69 | LIVER REPAIR NEC |
| GI | 51.31 | GB-TO-HEPATIC DUCT ANAST |
| GI | 51.32 | GB-TO-INTESTINE ANAST |
| GI | 51.33 | GB-TO-PANCREAS ANAST |
| GI | 51.34 | GB-TO-STOMACH ANAST |
| GI | 51.35 | GALLBLADDER ANAST NEC |
| GI | 51.36 | CHOLEDOCHOENTEROSTOMY |
| GI | 51.37 | HEPATIC DUCT-GI ANAST |
| GI | 51.39 | BILE DUCT ANAST NEC |
| GI | 51.41 | CDE FOR CALCULUS RMVL |
| GI | 51.42 | CDE FOR OBSTRUCTION NEC |
| GI | 51.49 | INC OBSTR BILE DUCT NEC |
| GI | 51.51 | COMMON BILE DUCT EXPL |
| GI | 51.59 | BILE DUCT INCISION NEC |
| GI | 51.61 | EXC CYSTIC DUCT REMNANT |
| GI | 51.62 | EXC AMPULLA OF VATER |
| GI | 51.63 | COMMON BILE DUCT EXC NEC |
| GI | 51.69 | BILE DUCT EXCISION NEC |
| GI | 51.71 | SIMPLE SUTURE CBD |
| GI | 51.72 | CHOLEDOCHOPLASTY |
| GI | 51.79 | BILE DUCT REPAIR NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
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| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GI | 51.81 | SPHINCTER OF ODDI DILAT |
| GI | 51.82 | PANC SPHINCTEROTOMY |
| GI | 51.83 | PANC SPHINCTEROPLASTY |
| GI | 51.89 | SPHINCT OF ODDI OP NEC |
| GI | 51.91 | REPAIR GB LACERATION |
| GI | 51.92 | CLOSURE CHOLECYSTOSTOMY |
| GI | 51.93 | CLOSURE BIL FISTULA NEC |
| GI | 51.94 | REV BILIARY TRACT ANAST |
| GI | 51.95 | RMVL BILE DUCT PROSTH |
| GI | 51.99 | BILIARY TRACT OP NEC |
| GI | 52.09 | PANCREATOTOMY NEC |
| GI | 52.22 | PANC DUCT LES DESTR NEC |
| GI | 52.3 | PANCREATIC CYST MARSUP |
| GI | 52.4 | INT DRAIN PANC CYST |
| GI | 52.51 | PROXIMAL PANCREATECTOMY |
| GI | 52.52 | DISTAL PANCREATECTOMY |
| GI | 52.53 | RAD PART PANCREATECTOMY |
| GI | 52.59 | PART PANCREATECTOMY NEC |
| GI | 52.6 | TOTAL PANCREATECTOMY |
| GI | 52.7 | RAD PANC/DUODENECTOMY |
| GI | 52.95 | PANCREATIC REPAIR NEC |
| GI | 52.96 | PANCREATIC ANASTOMOSIS |
| GI | 52.99 | PANCREATIC OPERATION NEC |
| GI | 51.21 | PART CHOLECYSTECTOMY NEC |
| GI | 51.22 | CHOLECYSTECTOMY NOS |
| GI | 51.23 | LAPSCP CHOLECYSTECTOMY |
| GI | 51.24 | LAPSCP PARTIAL CHOLE |
| GI | 45.03 | LARGE INTESTINE INCISION |
| GI | 45.41 | EXC LG INTEST LESION |
| GI | 45.49 | DESTR LG INTEST LES NEC |
| GI | 45.52 | LG INTEST SEG ISOLATION |
| GI | 45.71 | MULT SEG L-INTEST RESECT |
| GI | 45.72 | CECECTOMY |
| GI | 45.73 | RIGHT HEMICOLECTOMY |
| GI | 45.74 | TRANSVERSE COLON RESECT |
| GI | 45.75 | LEFT HEMICOLECTOMY |
| GI | 45.76 | SIGMOIDECTOMY |
| GI | 45.79 | PART LG INTEST EXC NEC |
| GI | 45.8 | TOT INTRA-ABD COLECTOMY |
| GI | 45.92 | SMB-RECTAL STUMP ANAST |
| GI | 45.93 | SM-LG INTEST ANAST NEC |
| GI | 45.94 | LG-TO-LG INTEST ANAST |
| GI | 45.95 | ANASTOMOSIS TO ANUS |
| GI | 46.03 | L-INTEST EXTERIORIZATION |
| GI | 46.04 | RESECT EXTERIORIZ SEG LG |
| GI | 46.52 | LG INTEST STOMA CLOSURE |
| GI | 46.75 | LARGE INTESTINE SUTURE |
| GI | 46.76 | CLOSE LG INTEST FISTULA |
| GI | 46.94 | REVISION LG INTEST ANAST |
| GI | 43.42 | LOC GASTRIC LES EXC NEC |
| GI | 43.49 | LOC GASTRIC DESTR NEC |
| GI | 43.5 | PROXIMAL GASTRECTOMY |
| GI | 43.6 | DISTAL GASTRECTOMY |
| GI | 43.7 | PART GASTRECTOMY W ANAST |
| GI | 43.81 | PART GASTRECT W TRANSPOS |
| GI | 43.89 | PARTIAL GASTRECTOMY NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GI | 43.91 | TOT GASTRECT W INTERPOS |
| GI | 43.99 | TOTAL GASTRECTOMY NEC |
| GI | 44.21 | DILATION PYLORUS BY INC |
| GI | 44.29 | OTHER PYLOROPLASTY |
| GI | 44.31 | HIGH GASTRIC BYPASS |
| GI | 44.39 | OTHER GASTROENTEROSTOMY |
| GI | 44.40 | SUTURE PEPTIC ULCER NOS |
| GI | 44.41 | SUT GASTRIC ULCER SITE |
| GI | 44.42 | SUT DUODENAL ULCER SITE |
| GI | 44.49 | CNTRL GASTRIC HEMOR NEC |
| GI | 44.5 | REVISION GASTRIC ANAST |
| GI | 44.61 | SUTURE GASTRIC LAC |
| GI | 44.62 | GASTROSTOMY CLOSURE |
| GI | 44.63 | CLOSE STOM FISTULA NEC |
| GI | 44.64 | GASTROPEXY |
| GI | 44.65 | ESOPHAGOGASTROPLASTY |
| GI | 44.69 | GASTRIC REPAIR NEC |
| GI | 53.00 | UNILAT IH REPAIR NOS |
| GI | 53.01 | UNILAT REP DIRECT IH |
| GI | 53.02 | UNILAT REP INDIRECT IH |
| GI | 53.03 | UNILAT REP DIR IH/GRAFT |
| GI | 53.04 | UNILAT INDIRECT IH/GRAFT |
| GI | 53.05 | UNILAT REP IH/GRAFT NOS |
| GI | 53.10 | BILAT IH REPAIR NOS |
| GI | 53.11 | BILAT DIRECT IH REPAIR |
| GI | 53.12 | BILAT INDIRECT IH REPAIR |
| GI | 53.13 | DIRECT & INDIRECT IH REP |
| GI | 53.14 | BILAT DIRECT IH REP-GRFT |
| GI | 53.15 | BILAT INDIRECT IH-GRAFT |
| GI | 53.16 | DIRECT/INDIRECT IH-GRAFT |
| GI | 53.17 | BILAT IH REP-GRAFT NOS |
| GI | 53.21 | UNILAT FH REP W GRAFT |
| GI | 53.29 | UNILAT FH REP NEC |
| GI | 53.31 | BILAT FH REPAIR W GRAFT |
| GI | 53.39 | BILAT FH REPAIR NEC |
| GI | 53.41 | UMB HERNIA REPAIR-PROSTH |
| GI | 53.49 | UMB HERNIA REPAIR NEC |
| GI | 53.51 | INCISIONAL HERNIA REPAIR |
| GI | 53.59 | ABD WALL HERNIA REP NEC |
| GI | 53.61 | INC HERNIA REPAIR-PROSTH |
| GI | 53.69 | ABD HERNIA REP-GRFT NEC |
| GI | 50.51 | AUXILIARY LIVER TRANSPL |
| GI | 50.59 | LIVER TRANSPLANT NEC |
| GI | 48.5 | ABD-PERINEAL RECT RESECT |
| GI | 48.61 | TRANSSACRAL RECTOSIG EXC |
| GI | 48.62 | ANT RECT RESECT W COLOST |
| GI | 48.63 | ANTERIOR RECT RESECT NEC |
| GI | 48.64 | POSTERIOR RECT RESECTION |
| GI | 48.65 | DUHAMEL RECTAL RESECTION |
| GI | 48.69 | RECTAL RESECTION NEC |
| GI | 45.01 | DUODENAL INCISION |
| GI | 45.02 | SM INTEST INCISION NEC |
| GI | 45.51 | SM INTEST SEG ISOLATION |
| GI | 45.61 | MULT SEG S-INTEST RESECT |
| GI | 45.62 | PART S-INTEST RESECT NEC |
| GI | 45.63 | TOTAL REMOVAL SM INTEST |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| <i>PHC4 Category</i> | <i>ICD.9.CM</i> | <i>Procedure Code Description</i> |
|----------------------|-----------------|-----------------------------------|
| GI | 45.91 | SM-TO-SM INTEST ANAST |
| GI | 46.01 | S-INTEST EXTERIORIZATION |
| GI | 46.02 | RESECT EXTERIORIZ SEG SM |
| GI | 46.51 | SM INTEST STOMA CLOSURE |
| GI | 46.71 | DUODENAL LAC SUTURE |
| GI | 46.72 | DUODENAL FISTULA CLOSURE |
| GI | 46.73 | SMALL INTEST SUTURE NEC |
| GI | 46.74 | CLOSURE SMB FISTULA NEC |
| GI | 46.93 | REVISION SM INTEST ANAST |
| GI | 41.33 | OPEN BIOPSY OF SPLEEN |
| GI | 41.41 | SPLENIC CYST MARSUP |
| GI | 41.42 | EXC SPLENIC LES OR TISS |
| GI | 41.43 | PARTIAL SPLENECTOMY |
| GI | 41.5 | TOTAL SPLENECTOMY |
| GI | 41.93 | EXC OF ACCESSORY SPLEEN |
| GI | 41.95 | REPAIR OF SPLEEN |
| GI | 41.99 | SPLEEN OPERATION NEC |
| GI | 53.7 | ABD REP-DIAPH HERNIA |
| GI | 54.0 | ABDOMINAL WALL INCISION |
| GI | 54.11 | EXPLORATORY LAPAROTOMY |
| GI | 54.12 | REOPEN RECENT LAP SITE |
| GI | 54.19 | LAPAROTOMY NEC |
| GI | 54.3 | EXC/DESTR ABD WALL LES |
| GI | 54.4 | EXC/DESTR PERITON TISS |
| GI | 54.51 | LAPSCP PERITON ADHESIO |
| GI | 54.59 | PERITON ADHESIOLYSIS NEC |
| GI | 54.61 | RECLOSE POSTOP DISRUPT |
| GI | 54.62 | DELAYED CLOSE ABD WOUND |
| GI | 54.63 | ABD WALL SUTURE NEC |
| GI | 54.64 | PERITONEAL SUTURE |
| GI | 54.71 | REPAIR OF GASTROSCHISIS |
| GI | 54.72 | ABDOMEN WALL REPAIR NEC |
| GI | 54.73 | PERITONEAL REPAIR NEC |
| GI | 54.74 | OMENTAL REPAIR NEC |
| GI | 54.75 | MESENTERIC REPAIR NEC |
| GI | 54.92 | RMVL FB PERITON CAVITY |
| GI | 54.93 | CREATE CUTANEOPERIT FIST |
| GI | 42.01 | ESOPHAGEAL WEB INCISION |
| GI | 42.09 | ESOPHAGEAL INCISION NEC |
| GI | 42.10 | ESOPHAGOSTOMY NOS |
| GI | 42.11 | CERVICAL ESOPHAGOSTOMY |
| GI | 42.12 | ESOPH POUCH EXTERIORIZ |
| GI | 42.19 | EXT FIST OF ESOPH NEC |
| GI | 42.31 | EXC ESOPH DIVERTICULUM |
| GI | 42.32 | LOC EXC ESOPH LESION NEC |
| GI | 42.39 | DESTR ESOPHAGEAL LES NEC |
| GI | 42.40 | ESOPHAGECTOMY NOS |
| GI | 42.41 | PARTIAL ESOPHAGECTOMY |
| GI | 42.42 | TOTAL ESOPHAGECTOMY |
| GI | 42.51 | INTRATHOR ESOPH-ESOPHAG |
| GI | 42.52 | INTRATHOR ESOPH-GASTROST |
| GI | 42.53 | INTRATHOR SMB INTERPOS |
| GI | 42.54 | INTRATHOR ESOPH-ENT NEC |
| GI | 42.55 | INTRATHOR COLON INTERPOS |
| GI | 42.56 | INTRATHOR ESOPH-COL NEC |
| GI | 42.58 | INTRATHOR INTERPOS NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GI | 42.59 | INTRATHOR ANAST NEC |
| GI | 42.61 | ANTESTERN ESOPH-ESOPHAG |
| GI | 42.62 | ANTESTERN ESOPH-GASTROST |
| GI | 42.63 | ANTESTERN SMB INTERPOS |
| GI | 42.64 | ANTESTERN ESOPH-ENT NEC |
| GI | 42.65 | ANTESTERN COLON INTERPOS |
| GI | 42.66 | ANTESTERN ESOPH-COL NEC |
| GI | 42.68 | ANTESTERN INTERPOS NEC |
| GI | 42.69 | ANTESTERN ANAST NEC |
| GI | 42.7 | ESOPHAGOMYOTOMY |
| GI | 42.82 | SUTURE ESOPHAGEAL LAC |
| GI | 42.83 | ESOPHAGOSTOMY CLOSURE |
| GI | 42.84 | ESOPH FISTULA REPAIR NEC |
| GI | 42.85 | ESOPH STRICTURE REPAIR |
| GI | 42.86 | SUBCU TUNNEL W/O ANAST |
| GI | 42.87 | ESOPHAGEAL GRAFT NEC |
| GI | 42.89 | ESOPHAGEAL REPAIR NEC |
| GI | 42.91 | LIGATION ESOPH VARICES |
| GI | 44.00 | VAGOTOMY NOS |
| GI | 44.01 | TRUNCAL VAGOTOMY |
| GI | 44.02 | HIGHLY SELECT VAGOTOMY |
| GI | 44.03 | SELECTIVE VAGOTOMY NEC |
| GI | 44.66 | CREAT EG SPHINCT COMPET |
| GI | 44.91 | LIG OF GASTRIC VARICES |
| GI | 44.92 | INTRAOP GASTRIC MANIP |
| GI | 44.99 | GASTRIC OPERATION NEC |
| GI | 45.00 | INTESTINAL INCISION NOS |
| GI | 45.50 | INTEST SEG ISOLATION NOS |
| GI | 45.90 | INTESTINAL ANAST NOS |
| GI | 46.42 | PERICOLESTOMY HERNIA REP |
| GI | 46.50 | INTEST STOMA CLOSURE NOS |
| GI | 46.60 | INTESTINAL FIXATION NOS |
| GI | 46.61 | SM INTEST-ABD WALL FIX |
| GI | 46.62 | SM INTEST FIXATION NEC |
| GI | 46.63 | LG INTEST-ABD WALL FIX |
| GI | 46.64 | LG INTEST FIXATION NEC |
| GI | 46.79 | REPAIR OF INTESTINE NEC |
| GI | 46.80 | INTRA-ABD INTEST MANIP |
| GI | 46.81 | INTRA-ABD S-INTEST MANIP |
| GI | 46.82 | INTRA-ABD L-INTEST MANIP |
| GI | 46.91 | MYOTOMY OF SIGMOID COLON |
| GI | 46.92 | MYOTOMY OF COLON NEC |
| GI | 46.97 | INTESTINE TRANSPLANT |
| GI | 46.99 | INTESTINAL OPS NEC |
| GI | 47.11 | LAPSCP INCIDENTAL APPY |
| GI | 47.19 | OTHER INCIDENTAL APPY |
| GI | 48.41 | SOAVE SUBMUC RECT RESECT |
| GI | 48.72 | CLOSURE OF PROCTOSTOMY |
| GI | 48.73 | CLOSE RECTAL FIST NEC |
| GI | 48.75 | ABDOMINAL PROCTOPEXY |
| GI | 48.76 | PROCTOPEXY NEC |
| GI | 52.80 | PANCREATIC TRANSPL NOS |
| GI | 52.81 | REIMPLANT PANCREAS TISS |
| GI | 52.82 | PANC HOMOTRANSPLANT |
| GI | 52.83 | PANC HETEROTRANSPLANT |
| GI | 52.84 | AUTOTRANSPLANT IL CELLS |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GI | 52.85 | ALLOTRANSPLANT IL CELLS |
| GI | 52.86 | TRANSPLANT IL CELLS NOS |
| GI | 53.9 | OTHER HERNIA REPAIR |
| GI | 54.94 | CREAT PERITONEOVAS SHUNT |
| REPRO | 74.0 | CLASSICAL CD |
| REPRO | 74.1 | LOW CERVICAL CD |
| REPRO | 74.2 | EXTRAPERITONEAL CD |
| REPRO | 74.4 | CESAREAN SECTION NEC |
| REPRO | 74.91 | HYSTEROTOMY TO TERM PREG |
| REPRO | 74.99 | OTHER CD TYPE NOS |
| REPRO | 68.31 | LSH |
| REPRO | 68.39 | OTH SUBTOT ABD HYST NOS |
| REPRO | 68.4 | TOTAL ABD HYSTERECTOMY |
| REPRO | 68.6 | RADICAL ABD HYSTERECTOMY |
| REPRO | 65.01 | LAPSCP OOPHOROTOMY |
| REPRO | 65.09 | OOPHOROTOMY NEC |
| REPRO | 65.21 | OVARIAN CYST MARSUP |
| REPRO | 65.22 | OVARIAN WEDGE RESECTION |
| REPRO | 65.23 | LAPSCP MARSUP OV CYST |
| REPRO | 65.24 | LAPSCP OV WEDGE RESECT |
| REPRO | 65.25 | LAPSCP OV LES EXC NEC |
| REPRO | 65.29 | LOC EXC/DESTR OV LES NEC |
| REPRO | 65.31 | LAPSCP UNILAT OOPHORECT |
| REPRO | 65.39 | UNILAT OOPHORECTOMY NEC |
| REPRO | 65.41 | LAPSCP UNILATERAL S-O |
| REPRO | 65.49 | UNILATERAL S-O NEC |
| REPRO | 65.51 | RMVL BOTH OVARIES NEC |
| REPRO | 65.52 | RMVL REM OVARY NEC |
| REPRO | 65.53 | LAPSCP RMVL BOTH OVARIES |
| REPRO | 65.54 | LAPSCP RMVL REM OVARY |
| REPRO | 65.61 | RMVL BOTH OV & FALL NEC |
| REPRO | 65.62 | RMVL REM OV & FALL NEC |
| REPRO | 65.63 | LAPSCP RMVL BOTH OV/FALL |
| REPRO | 65.64 | LAPSCP RMVL REM OV/FALL |
| REPRO | 65.71 | SMPL SUTURE OVARY NEC |
| REPRO | 65.72 | REIMPLANTATION OVARY NEC |
| REPRO | 65.73 | SALP-OOPHOROPLASTY NEC |
| REPRO | 65.74 | LAPSCP SMPL SUTURE OVARY |
| REPRO | 65.75 | LAPSCP REIMPLANT OVARY |
| REPRO | 65.76 | LAPSCP SALP-OOPHOROPLAST |
| REPRO | 65.79 | REPAIR OF OVARY NEC |
| REPRO | 65.81 | LAPSCP ADHESIO OV/FALL |
| REPRO | 65.89 | ADHESIO OV/FALL TUBE NEC |
| REPRO | 65.92 | TRANSPLANTATION OF OVARY |
| REPRO | 65.93 | MANUAL RUPT OVARIAN CYST |
| REPRO | 65.94 | OVARIAN DENERVATION |
| REPRO | 65.95 | OVARIAN TORSION RELEASE |
| REPRO | 65.99 | OVARIAN OPERATION NEC |
| REPRO | 60.3 | SUPRAPUBIC PROSTATECTOMY |
| REPRO | 60.4 | RETROPUBIC PROSTATECTOMY |
| REPRO | 60.5 | RADICAL PROSTATECTOMY |
| REPRO | 60.61 | LOC EXC PROSTATIC LES |
| REPRO | 60.62 | PERINEAL PROSTATECTOMY |
| REPRO | 60.69 | PROSTATECTOMY NEC |
| REPRO | 74.3 | RMVL EXTRATUBAL PREG |
| REPRO | 75.50 | REP OB LAC UTERUS NOS |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| REPRO | 75.52 | REP OB LAC CORPUS UTERI |
| REPRO | 75.61 | REP OB LAC BLAD/URETHRA |
| REPRO | 75.62 | REP OB LAC RECTUM/ANUS |
| REPRO | 75.93 | SURG CORRECT INVERT UTER |
| GU | 55.61 | RENAL AUTOTRANSPLANT |
| GU | 55.69 | KIDNEY TRANSPLANT NEC |
| GU | 55.01 | NEPHROTOMY |
| GU | 55.02 | NEPHROSTOMY |
| GU | 55.11 | PYELOTOMY |
| GU | 55.12 | PYELOSTOMY |
| GU | 55.31 | RENAL LESION MARSUP |
| GU | 55.39 | LOC DESTR RENAL LES NEC |
| GU | 55.4 | PARTIAL NEPHRECTOMY |
| GU | 55.51 | NEPHROURETERECTOMY |
| GU | 55.52 | SOLITARY KID NEPHRECTOMY |
| GU | 55.54 | BILATERAL NEPHRECTOMY |
| GU | 55.91 | RENAL DECAPSULATION |
| GU | 55.53 | REJECTED KID NEPHRECTOMY |
| GU | 55.7 | NEPHROPEXY |
| GU | 55.81 | SUTURE KIDNEY LACERATION |
| GU | 55.82 | CLOSE NEPHROST & PYELOST |
| GU | 55.83 | CLOSE RENAL FISTULA NEC |
| GU | 55.84 | RED TORSION REN PEDICLE |
| GU | 55.85 | SYMPHYSIOTOMY |
| GU | 55.86 | RENAL ANASTOMOSIS |
| GU | 55.87 | CORRECTION OF UPJ |
| GU | 55.89 | RENAL REPAIR NEC |
| GU | 56.0 | TU RMVL URETERAL OBSTR |
| GU | 56.1 | URETERAL MEATOTOMY |
| GU | 56.2 | URETEROTOMY |
| GU | 56.40 | URETERECTOMY NOS |
| GU | 56.41 | PARTIAL URETERECTOMY |
| GU | 56.42 | TOTAL URETERECTOMY |
| GU | 56.51 | FORM CUTAN ILEOURETEROST |
| GU | 56.52 | REV CUTAN ILEOURETEROST |
| GU | 56.61 | FORM CUTAN URETEROSTOMY |
| GU | 56.62 | REV CUTAN URETEROST NEC |
| GU | 56.71 | URIN DIVERSION TO INTEST |
| GU | 56.72 | REV URETEROENTEROSTOMY |
| GU | 56.73 | NEPHROCYSTANAST NOS |
| GU | 56.74 | URETERONEOCYSTOSTOMY |
| GU | 56.75 | TRANSURETEROURETEROSTOMY |
| GU | 56.79 | URETERAL ANASTOMOSIS NEC |
| GU | 56.81 | INTRALUM URETER ADHESIO |
| GU | 56.82 | SUT URETERAL LACERATION |
| GU | 56.83 | URETEROSTOMY CLOSURE |
| GU | 56.84 | CLOSE URETER FISTULA NEC |
| GU | 56.85 | URETEROPEXY |
| GU | 56.86 | RMVL URETERAL LIGATURE |
| GU | 56.89 | REPAIR OF URETER NEC |
| GU | 57.12 | CYSTOTOMY & ADHESIOLYSIS |
| GU | 57.18 | S/P CYSTOSTOMY NEC |
| GU | 57.19 | CYSTOTOMY NEC |
| GU | 57.21 | VESICOSTOMY |
| GU | 57.22 | REV/CLOSE VESICOSTOMY |
| GU | 57.51 | EXCISION OF URACHUS |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GU | 57.59 | OTH BLADDER LESION DESTR |
| GU | 57.6 | PARTIAL CYSTECTOMY |
| GU | 57.71 | RADICAL CYSTECTOMY |
| GU | 57.79 | TOTAL CYSTECTOMY NEC |
| GU | 57.81 | SUTURE BLADDER LAC |
| GU | 57.82 | CYSTOSTOMY CLOSURE |
| GU | 57.83 | ENTEROVESICAL FIST REP |
| GU | 57.84 | REP OTH FISTULA BLADDER |
| GU | 57.85 | CYSTOURETHROPLASTY |
| GU | 57.86 | BLADDER EXSTROPHY REPAIR |
| GU | 57.87 | URINARY BLADDER RECONST |
| GU | 57.88 | BLADDER ANASTOMOSIS NEC |
| GU | 57.89 | BLADDER REPAIR NEC |
| GU | 58.39 | URETHRA LES DESTR NEC |
| GU | 58.42 | URETHROSTOMY CLOSURE |
| GU | 58.43 | CLOSE URETHRAL FIST NEC |
| GU | 58.44 | URETHRAL REANASTOMOSIS |
| GU | 58.45 | HYPOSPAD/EPISPADIAS REP |
| GU | 58.46 | URETHRAL RECONST NEC |
| GU | 58.47 | URETHRAL MEATOPLASTY |
| GU | 58.49 | URETHRAL REPAIR NEC |
| GU | 58.5 | URETHRAL STRICTURE REL |
| GU | 58.91 | PERIURETHRAL INCISION |
| GU | 58.92 | PERIURETHRAL EXCISION |
| GU | 58.93 | IMPLANTATION OF AUS |
| GU | 58.99 | PERIURETHRAL OPS NEC |
| GU | 59.00 | RETROPERITON DISSECT NOS |
| GU | 59.02 | PERIRENAL ADHESIO NEC |
| GU | 59.03 | LAPSCP REN/URET ADHESIO |
| GU | 59.09 | PERIRENAL/URETER INC NEC |
| GU | 59.11 | PERIVESICAL ADHESIO NEC |
| GU | 59.12 | LAPSCP BLADDER ADHESIO |
| GU | 59.19 | PERIVESICAL INCISION NEC |
| GU | 59.3 | URETHROVES JUNCT PLICAT |
| GU | 59.4 | SUPRAPUBIC SLING OP |
| GU | 59.5 | RETROPUBIC URETHRAL SUSP |
| GU | 59.6 | PARAURETHRAL SUSPENSION |
| GU | 59.71 | LEVATOR MUSC SUSPENSION |
| GU | 59.79 | URIN INCONT REPAIR NEC |
| GU | 59.91 | PERIRENAL/VESICAL EXC |
| GU | 59.92 | PERIRENAL/VESICAL OP NEC |
| GU | 60.0 | INCISION OF PROSTATE |
| GU | 60.72 | SEMINAL VESICLE INCISION |
| GU | 60.73 | SEMINAL VESICLE EXCISION |
| GU | 60.79 | SEMINAL VESICLE OP NEC |
| GU | 60.81 | PERIPROSTATIC INCISION |
| GU | 60.82 | PERIPROSTATIC EXCISION |
| GU | 60.93 | REPAIR OF PROSTATE |
| GU | 61.0 | SCROTUM & TUNICA VAG I&D |
| GU | 61.2 | EXCISION OF HYDROCELE |
| GU | 61.3 | SCROTAL LES EXC/DESTR |
| GU | 61.41 | SUTURE SCROTAL LAC |
| GU | 61.42 | SCROTAL FISTULA REPAIR |
| GU | 61.49 | SCROTUM/TUNICA REP NEC |
| GU | 61.92 | EXC TUNICA VAG LES NEC |
| GU | 61.99 | SCROT/TUNICA VAG OPS NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GU | 62.0 | INCISION OF TESTIS |
| GU | 62.2 | TESTICULAR LES EXC/DESTR |
| GU | 62.3 | UNILATERAL ORCHIECTOMY |
| GU | 62.41 | RMVL BOTH TESTES |
| GU | 62.42 | RMVL REMAINING TESTIS |
| GU | 62.5 | ORCHIOPEXY |
| GU | 62.61 | SUTURE TESTICULAR LAC |
| GU | 62.69 | TESTICULAR REPAIR NEC |
| GU | 62.7 | INSERT TESTICULAR PROSTH |
| GU | 62.91 | ASPIRATION OF TESTES |
| GU | 62.92 | INJECT THER SUBST-TESTES |
| GU | 62.99 | TESTICULAR OPERATION NEC |
| GU | 63.1 | EXC SPERMATIC VARICOCELE |
| GU | 63.2 | EXC EPIDIDYMIS CYST |
| GU | 63.3 | EXC SPERM CORD LES NEC |
| GU | 63.4 | EPIDIDYMECTOMY |
| GU | 63.51 | SUT SPERM CORD/EPID LAC |
| GU | 63.52 | REDUCTION TORSION TESTES |
| GU | 63.53 | TRANSPL SPERMATIC CORD |
| GU | 63.59 | SPERM CORD/EPID REP NEC |
| GU | 63.6 | VASOTOMY |
| GU | 63.70 | MALE STERILIZATION NOS |
| GU | 63.71 | LIGATION OF VAS DEFERENS |
| GU | 63.72 | SPERMATIC CORD LIGATION |
| GU | 63.73 | VASECTOMY |
| GU | 63.81 | SUT VAS DEF & EPID LAC |
| GU | 63.82 | POSTOP VAS DEF RECONST |
| GU | 63.83 | EPIDIDYMOVASOSTOMY |
| GU | 63.84 | RMVL VAS DEF LIGATURE |
| GU | 63.85 | RMVL VAS DEFERENS VALVE |
| GU | 63.89 | VAS DEF/EPID REPAIR NEC |
| GU | 63.92 | EPIDIDYMOTOMY |
| GU | 63.93 | SPERMATIC CORD INCISION |
| GU | 63.94 | SPERM CORD ADHESIOLYSIS |
| GU | 63.95 | INSERT VALVE IN VAS DEF |
| GU | 63.99 | SPERM CORD/EPID OPS NEC |
| GU | 64.2 | LOC EXC/DESTR PENILE LES |
| GU | 64.3 | AMPUTATION OF PENIS |
| GU | 64.41 | SUTURE PENILE LACERATION |
| GU | 64.42 | CHORDEE RELEASE |
| GU | 64.43 | CONSTRUCTION OF PENIS |
| GU | 64.44 | RECONSTRUCTION OF PENIS |
| GU | 64.45 | REPLANTATION OF PENIS |
| GU | 64.49 | PENILE REPAIR NEC |
| GU | 64.5 | SEX TRANSFORMATION NEC |
| GU | 64.91 | DORSAL/LAT SLIT PREPUCE |
| GU | 64.92 | PENILE INCISION |
| GU | 64.93 | DIVISION OF PENILE ADHES |
| GU | 64.94 | FIT EXT PENILE PROSTH |
| GU | 64.95 | INSERT/REPL NON-IPP NOS |
| GU | 64.96 | RMVL INT PENILE PROSTH |
| GU | 64.97 | INSERT OR REPL IPP |
| GU | 64.98 | PENILE OPERATION NEC |
| GU | 64.99 | MALE GENITAL OP NEC |
| GU | 66.01 | SALPINGOTOMY |
| GU | 66.02 | SALPINGOSTOMY |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
continued

| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GU | 66.31 | BILAT FALL CRUSHING NEC |
| GU | 66.32 | BILAT FALL LIG & DIV NEC |
| GU | 66.39 | BILAT FALL DESTR NEC |
| GU | 66.4 | TOT UNILAT SALPINGECTOMY |
| GU | 66.51 | RMVL BOTH FALL TUBES |
| GU | 66.52 | RMVL REMAINING FALL TUBE |
| GU | 66.61 | EXC/DESTR FALL LES |
| GU | 66.62 | RMVL FALL & TUBAL PREG |
| GU | 66.63 | BILAT PART FALL RMVL NOS |
| GU | 66.69 | PARTIAL FALL RMVL NEC |
| GU | 66.71 | SMPL SUTURE FALL TUBE |
| GU | 66.72 | SALPINGO-OOPHOROSTOMY |
| GU | 66.73 | SALPINGO-SALPINGOSTOMY |
| GU | 66.74 | SALPINGO-UTEROSTOMY |
| GU | 66.79 | FALL TUBE REPAIR NEC |
| GU | 66.92 | UNILAT FALL DESTR/OCCL |
| GU | 66.93 | IMPL/REPL FALL PROSTH |
| GU | 66.94 | RMVL FALL TUBE PROSTH |
| GU | 66.97 | BURY FIMBRIAE IN UTERUS |
| GU | 66.99 | FALLOPIAN TUBE OP NEC |
| GU | 67.4 | AMPUTATION OF CERVIX |
| GU | 67.51 | TRANSABD CERV CERCLAGE |
| GU | 68.0 | HYSTEROTOMY |
| GU | 68.21 | ENDOMETRIAL SYNECHIA DIV |
| GU | 68.22 | INC CONG UTERINE SEPTUM |
| GU | 68.29 | UTER LES EXC/DESTR NEC |
| GU | 68.8 | PELVIC EVISCERATION |
| GU | 68.9 | HYSTERECTOMY NEC & NOS |
| GU | 69.19 | EXC UTER/SUPP STRUCT NEC |
| GU | 69.21 | INTERPOS OP UTER SUPP |
| GU | 69.22 | UTERINE SUSPENSION NEC |
| GU | 69.23 | VAG REP CHR INVERS UTER |
| GU | 69.29 | UTERUS/ADNEXA REPAIR NEC |
| GU | 69.3 | PARACERV UTERINE DENERV |
| GU | 69.41 | SUTURE UTERINE LAC |
| GU | 69.42 | CLOSURE UTERINE FISTULA |
| GU | 69.49 | UTERINE REPAIR NEC |
| GU | 70.4 | VAGINAL OBLITERATION |
| GU | 70.50 | REP CYSTOCELE/RECTOCELE |
| GU | 70.51 | CYSTOCELE REPAIR |
| GU | 70.52 | RECTOCELE REPAIR |
| GU | 70.61 | VAGINAL CONSTRUCTION |
| GU | 70.62 | VAGINAL RECONSTRUCTION |
| GU | 70.72 | REP COLOVAGINAL FISTULA |
| GU | 70.73 | REP RECTOVAGINAL FISTULA |
| GU | 70.74 | REP VAG-ENT FISTULA NEC |
| GU | 70.75 | REPAIR VAG FISTULA NEC |
| GU | 70.8 | VAGINAL VAULT OBLIT |
| GU | 71.01 | VULVAR ADHESIOLYSIS |
| GU | 71.09 | INC VULVA/PERINEUM NEC |
| GU | 71.5 | RADICAL VULVECTOMY |
| GU | 71.61 | UNILATERAL VULVECTOMY |
| GU | 71.62 | BILATERAL VULVECTOMY |
| GU | 71.71 | SUTURE VULVAR/PERI LAC |
| GU | 71.72 | REP VULVAR/PERI FISTULA |
| GU | 71.79 | VULVAR/PERINEUM REP NEC |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
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| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| GU | 71.8 | VULVAR OPERATIONS NEC |
| GU | 71.9 | FEMALE GENITAL OPS NEC |
| SKIN | 85.12 | OPEN BIOPSY OF BREAST |
| SKIN | 85.20 | BRST TISS EXC/DESTR NOS |
| SKIN | 85.21 | LOCAL EXC BREAST LESION |
| SKIN | 85.22 | QUADRANT RESECT BREAST |
| SKIN | 85.23 | SUBTOTAL MASTECTOMY |
| SKIN | 85.31 | UNILAT RED MAMMOPLASTY |
| SKIN | 85.32 | BILAT RED MAMMOPLASTY |
| SKIN | 85.33 | UNI SUBCU MAMMECT W IMPL |
| SKIN | 85.34 | UNI SUBCU MAMMECTOMY NEC |
| SKIN | 85.35 | BILAT SUBCU MAMMECT-IMPL |
| SKIN | 85.36 | BILAT SUBCU MAMMECT NEC |
| SKIN | 85.41 | UNILAT SIMPLE MASTECTOMY |
| SKIN | 85.42 | BILAT SIMPLE MASTECTOMY |
| SKIN | 85.43 | UNILAT EXTEN SIMPLE MAST |
| SKIN | 85.44 | BILAT EXTEN SIMPLE MAST |
| SKIN | 85.45 | UNILAT RAD MASTECTOMY |
| SKIN | 85.46 | BILAT RADICAL MASTECTOMY |
| SKIN | 85.47 | UNILAT EXTEN RAD MAST |
| SKIN | 85.48 | BILAT EXTEN RAD MAST |
| SKIN | 85.50 | AUGMENT MAMMOPLASTY NOS |
| SKIN | 85.53 | UNILAT BREAST IMPLANT |
| SKIN | 85.54 | BILATERAL BREAST IMPLANT |
| SKIN | 85.6 | MASTOPEXY |
| SKIN | 85.7 | TOTAL BREAST RECONST |
| ENDO | 06.02 | REOPEN THYROID FIELD WND |
| ENDO | 06.09 | INC THYROID FIELD NEC |
| ENDO | 06.12 | OPEN THYROID GLAND BX |
| ENDO | 06.2 | UNILAT THYROID LOBECTOMY |
| ENDO | 06.31 | EXCISION THYROID LESION |
| ENDO | 06.39 | PART THYROIDECTOMY NEC |
| ENDO | 06.4 | COMPLETE THYROIDECTOMY |
| ENDO | 06.50 | SUBSTERN THYROIDECT NOS |
| ENDO | 06.51 | PART SUBSTERN THYROIDECT |
| ENDO | 06.52 | TOT SUBSTERN THYROIDECT |
| ENDO | 06.6 | LINGUAL THYROID EXCISION |
| ENDO | 06.7 | THYROGLOSSAL DUCT EXC |
| ENDO | 06.81 | TOTAL PARATHYROIDECTOMY |
| ENDO | 06.89 | OTHER PARATHYROIDECTOMY |
| ENDO | 06.91 | THYROID ISTHMUS DIVISION |
| ENDO | 06.92 | THYROID VESSEL LIGATION |
| ENDO | 06.93 | SUTURE THYROID GLAND |
| ENDO | 06.94 | THYROID TISS REIMPLANT |
| ENDO | 06.95 | PARATHYROID REIMPLANT |
| ENDO | 06.98 | OTHER THYROID OPERATIONS |
| ENDO | 06.99 | OTHER PARATHYROID OPS |
| ENDO | 07.00 | ADRENAL EXPLORATION NOS |
| ENDO | 07.01 | UNI ADRENAL EXPLORATION |
| ENDO | 07.02 | BI ADRENAL EXPLORATION |
| ENDO | 07.12 | OPEN ADRENAL GLAND BX |
| ENDO | 07.21 | ADRENAL LESION EXCISION |
| ENDO | 07.22 | UNILATERAL ADRENALECTOMY |
| ENDO | 07.29 | PART ADRENALECTOMY NEC |
| ENDO | 07.3 | BILATERAL ADRENALECTOMY |
| ENDO | 07.41 | ADRENAL GLAND INCISION |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
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| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| ENDO | 07.42 | ADRENAL NERVE DIVISION |
| ENDO | 07.43 | ADRENAL VESSEL LIGATION |
| ENDO | 07.44 | ADRENAL GLAND REPAIR |
| ENDO | 07.45 | ADRENAL TISS REIMPLANT |
| ENDO | 07.49 | ADRENAL OPERATIONS NEC |
| ENDO | 07.80 | THYMECTOMY NOS |
| ENDO | 07.81 | PART EXCISION OF THYMUS |
| ENDO | 07.82 | TOTAL EXCISION OF THYMUS |
| ENDO | 07.91 | THYMUS FIELD EXPLORATION |
| ENDO | 07.92 | INCISION OF THYMUS |
| ENDO | 07.93 | REPAIR OF THYMUS |
| ENDO | 07.94 | THYMUS TRANSPLANTATION |
| ENDO | 07.99 | THYMUS OPERATIONS NEC |
| HMLYM | 30.1 | HEMILARYNGECTOMY |
| HMLYM | 30.21 | EPIGLOTTIDECTOMY |
| HMLYM | 30.22 | VOCAL CORDECTOMY |
| HMLYM | 30.29 | OTHER PART LARYNGECTOMY |
| HMLYM | 30.3 | COMPLETE LARYNGECTOMY |
| HMLYM | 30.4 | RADICAL LARYNGECTOMY |
| HMLYM | 31.45 | OPEN LARYNX OR TRACH BX |
| HMLYM | 40.40 | RAD NECK DISSECTION NOS |
| HMLYM | 40.41 | UNILAT RAD NECK DISSECT |
| HMLYM | 40.42 | BILAT RAD NECK DISSECT |
| RESP | 32.09 | LOC DESTR BRONCH LES NEC |
| RESP | 32.1 | BRONCHIAL EXCISION NEC |
| RESP | 32.21 | EMPHYSEM BLEB PPLICATION |
| RESP | 32.22 | LUNG VOLUME RED SURGERY |
| RESP | 32.29 | LOC EXC LUNG LES NEC |
| RESP | 32.3 | SEGMENTAL LUNG RESECTION |
| RESP | 32.4 | LOBECTOMY OF LUNG |
| RESP | 32.5 | COMPLETE PNEUMONECTOMY |
| RESP | 32.6 | RAD DISSECT THOR STRUCT |
| RESP | 32.9 | LUNG EXCISION NEC |
| RESP | 33.0 | BRONCHUS INCISION |
| RESP | 33.1 | LUNG INCISION |
| RESP | 33.28 | OPEN BIOPSY OF LUNG |
| RESP | 33.31 | DESTR PHN-LUNG COLLAPSE |
| RESP | 33.32 | PNEUMOTHORAX-LUNG COLLAPS |
| RESP | 33.33 | PNEUMOPERIT-LUNG COLLAPS |
| RESP | 33.34 | THORACOPLASTY |
| RESP | 33.39 | SURG COLLAPS OF LUNG NEC |
| RESP | 33.41 | BRONCHIAL LAC SUTURE |
| RESP | 33.42 | BRONCHIAL FISTULA CLOSE |
| RESP | 33.43 | LUNG LACERATION CLOSURE |
| RESP | 33.48 | BRONCHIAL REPAIR NEC |
| RESP | 33.49 | LUNG REPAIR NEC |
| RESP | 33.98 | BRONCHIAL OPERATION NEC |
| RESP | 33.99 | LUNG OPERATION NEC |
| RESP | 34.01 | CHEST WALL INCISION |
| RESP | 34.02 | EXPLORATORY THORACOTOMY |
| RESP | 34.03 | REOPEN THORACOTOMY SITE |
| RESP | 34.1 | MEDIASTINUM INCISION |
| RESP | 34.26 | OPEN MEDIASTINAL BIOPSY |
| RESP | 34.3 | DESTR MEDIASTINUM LES |
| RESP | 34.4 | EXC/DESTR CHEST WALL LES |
| RESP | 34.51 | DECORTICATION OF LUNG |

Appendix D
ICD.9.CM Procedure Codes for Surgical Site Infections
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| PHC4 Category | ICD.9.CM | Procedure Code Description |
|----------------------|-----------------|-----------------------------------|
| RESP | 34.59 | PLEURAL EXCISION NEC |
| RESP | 34.6 | PLEURAL SCARIFICATION |
| RESP | 34.81 | EXC DIAPHRAGM LES/TISS |
| RESP | 34.82 | SUTURE DIAPHRAGM LAC |
| RESP | 34.83 | CLOSE DIAPHRAGM FISTULA |
| RESP | 34.84 | DIAPHRAGM REPAIR NEC |
| RESP | 34.89 | DIAPHRAGM OPERATION NEC |
| RESP | 34.93 | PLEURA REPAIR |
| RESP | 34.99 | THORACIC OPERATIONS NEC |
| RESP | 53.80 | REPAIR DH THOR APPR NOS |
| RESP | 53.81 | DIAPHRAGMATIC PLICATION |
| RESP | 53.82 | PARASTERNAL HERNIA REP |
| RESP | 30.09 | EXC/DESTR LARYNX LES NEC |
| RESP | 31.5 | LOC EXC/DESTR LARYNX LES |
| RESP | 31.61 | SUTURE OF LARYNGEAL LAC |
| RESP | 31.62 | LARYNGEAL FISTULA CLOSE |
| RESP | 31.63 | LARYNGOSTOMY REVISION |
| RESP | 31.64 | LARYNGEAL FX REPAIR |
| RESP | 31.69 | OTHER LARYNGEAL REPAIR |
| RESP | 31.71 | SUTURE OF TRACHEAL LAC |
| RESP | 31.72 | CLOSURE OF TRACHEOSTOMY |
| RESP | 31.73 | TRACH FISTULA CLOSE NEC |
| RESP | 31.75 | TRACHEAL RECONSTRUCTION |
| RESP | 31.79 | OTHER TRACHEAL REPAIR |
| RESP | 31.91 | LARYNGEAL NERV DIVISION |
| RESP | 33.50 | LUNG TRANSPLANT NOS |
| RESP | 33.51 | UNILAT LUNG TRANSPLANT |
| RESP | 33.52 | BILAT LUNG TRANSPLANT |
| RESP | 33.6 | HEART-LUNG TRANSPLANT |
| RESP | 33.92 | BRONCHIAL LIGATION |
| RESP | 33.93 | PUNCTURE OF LUNG |
| RESP | 34.71 | SUTURE CHEST WALL LAC |
| RESP | 34.72 | THORACOSTOMY CLOSURE |
| RESP | 34.73 | CLOSE THOR FISTULA NEC |
| RESP | 34.74 | PECTUS DEFORMITY REPAIR |
| RESP | 34.79 | CHEST WALL REPAIR NEC |
| RESP | 34.85 | IMPL DIAPHRAGMATIC PACER |

